GUIDE FOR THE PROMOTION OF THE QUALITY CULTURE IN EAST AFRICAN UNIVERSITIES

Guide for the Promotion of the Quality Culture in East African Universities

AfriQ'Units – ***Sustainable Quality Culture and Capacity Building in Internal Quality Assurance in East African Universities***

Project financed by the European Commission and implemented by the ACP – EU Cooperation Programme in Higher Education
Grant Contract identification number 9-ACP-RPR-12 # 25

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The present guide was developed and edited by the University of Alicante (Spain) based on the information provided by the AfriQ'Units Partners.

Acknowledgements to the highly-dedicated persons in the partner institutions who actively participated in the project, as well as the European Commission and the ACP-Secretariat for the trust deposited in the AfriQ'Units project through the framework of the EDULINK Programme.

Depósito legal: xxxxxxxxxx

Maquetación: Espagrafic

Impresión: INGRA Impresores

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Context

In many African countries, Higher Education (HE) witnessed a long period of relative neglect and stagnation, resulting in a decline in Quality. This decline occurred at the time that HE was experiencing escalating enrolments against declining resources, academic brain-drain, deteriorating infrastructure, and a decline in the quality of teaching and research activities (World Bank). In particular, there is a concern that increased number of students, while resources remain unchanged or diminishes, compromises the quality of the Higher Education Institutions' (HEIs) missions, visions and the quality of teaching and therefore accelerates the pressure for attaining systematic and comprehensive quality assurance systems[1]. This places a huge pressure on an institution's capabilities.

Additionally, the need for a structured and coherent implementation of quality culture and assurance mechanisms within African HEIs increased, alongside an ongoing process of granting HEIs greater institutional autonomy without increasing their financial autonomy. While national accreditation bodies and Educational Councils in Kenya, Tanzania and Uganda attained the responsibility for external accreditation of HEIs, the responsibility for ensuring quality of institutional services and teaching lay with the HEIs. The institutions must be accountable for the use of public resources and the quality of their outputs to their stakeholders, including the government, students, and employers of graduates as well as to the general public. However, the lack of clear guidelines for implementing quality assurance mechanisms and knowledge of methodologies for performing self-assessment of programmes and institutional services often leads to an inadequate formulation of general devel-

1. For example, in Makerere University in Uganda in the period 1994-2005 the enrolments increased from 5.000 to 30.000 students; the total student population has expanded from 19.000 in 2002 to 34.000 in 2006.

opment objectives. This, in the long-term, has an adverse effect on the quality of delivered services and results in insufficiently qualified graduates. These challenges have been emphasized by recent initiatives and reports of the Association of African HEIs,[2] which prioritized quality assurance and accreditation issues in African HE as well as the need for capacity development in this area as "key strategies for the development of credible and effective education in emerging knowledge societies" (AAU, Strategic Plan for 2003-2010).

Especially in the East African region, the lack of a clear and structured approach to quality assurance and the fact that quality assurance measures have been for a long time applied in ad hoc fashion and only by individual HEIs, without national or regional bodies to rationalize and coordinate the activities between them, resulted in the following consequences:

* Uncoordinated establishment of HEIs meeting neither the social demand for HE, nor the labour market expectations for the growing local and global economy;
* Proliferation of academic awards by HEIs;
* Inadequate information to employers and potential students and/or other beneficiaries on the quality of academic programmes in HEIs;
* Un-standardized and confusing academic designations of staff (academic or otherwise) in the institutions.

This Guide is intended to Increase awareness for internal quality culture. The involvement of the IUCEA and of the Association of African Universities (AAU) in the project further accelerates the process of sharing of good practice in implementing quality culture and networking in the East-African region and beyond, enhancing its contribution to national and regional policies and implementation plans for Quality Assurance in African HE.

Further information can be found in the AfriQ'Units website at the following link: http://www.afriqunits.org

2. AAU is the apex organization and forum for consultation, exchange of information and co-operation among institutions of HE in Africa

The AfriQ'Units project

SECTION 1.- **BACKGROUND**

In a globalised world where knowledge creation is essential and competition becomes critical, HEIs are put under pressure to formulate, discuss and communicate clear priorities and focus on efficient management, planning and resource processes to achieve excellence and ensure continuous performance improvement. In recent years, many African HEIs have been adversely affected by economic, social and even political conflict situations on the continent, as well as by diminishing financial resources at institutional level. In light of this, the overall objective of the project was to **strengthen the institutional capacity of African Universities in support of policy, management and planning at national and regional levels** in order to meet accountability needs and successfully address growing demands upon African HE, despite diminishing resources.

A major element capable of simultaneously generate improvement of HEIs' management, planning capacities and overall institutional performance is the development and embedding of a quality culture for institutional quality assurance within HEIs. Quality assurance can be defined as a **"planned and systematic review process of an institution or programme to determine that acceptable standards of education, scholarship, teaching, administration and infrastructure are being maintained and enhanced**", and it is widely recognized as a tool that serves to improve an HEIs' effectiveness and provide required accountability to external stakeholders. Referring to the European experience and the statement of the Berlin Communiqué stressing that **"the primary responsibility for assuring quality lies with HEIs"**, it is evident that putting in place effective mechanisms for assuring quality within an institution enables a critical self-analysis of its programmes, its capacities and services, as well as formulating recommendations for improvement. Consequent-

ly, embedding quality culture and continuous implementation of self-assessment mechanisms within HEIs may lead to the increased efficiency of their planning, administration and management.

In view of this, and taking into account the intergovernmental initiative between the partner countries (Uganda, Tanzania, Kenya) chaired by the Inter-University Council for East Africa (IUCEA)[3], the specific project objective addresses the ***Development of a sustainable Quality Culture and Capacity Building in Internal Quality Assurance in East African Universities (EAUs).***

The project specifically aimed to strengthen the foundation for the systematic implementation of a coherent quality culture within East African HEIs, and to contribute towards the general goal of promotion of quality in HE. The action achieved the objective through capacity building at three East African HEIs, comprising enhancement of administrative, managerial and technical skills of staff involved in implementation of internal quality assurance mechanisms via extensive training programmes. Alongside, the action contributes to the strengthening of physical infrastructures in relation to the structures responsible for the implementation of quality assurance mechanisms and the establishment of effective and necessary information system within participating HEIs.

The creation of a quality culture was supported through the practical implementation of pilot assessments of chosen study programmes and institutional services, as well as the formulation of a set of improvement recommendations.

SECTION 2.- **SPECIFIC PROBLEMS ADDRESSED BY THE ACTION AND THE PERCEIVED NEEDS AND CONSTRAINTS OF THE TARGET GROUPS**

The three East African HEIs involved in the project recognized the need for the establishment of internal quality assurance culture and integrated Q-Units within their institutions, and explicitly embedded these goals in their Strategic Development Plans *(Moi and Mzumbe Universities: SDP 2005-2014, Makerere: 5-year Development Plan 2006-2010).*

3. IUCEA: Aims to facilitate strategic development of member Universities and to promote Quality in Higher Education for common regional development.

Although strategically envisaged, the implementation of a coherent quality assurance policy was so far limited to ad hoc assessments only at programme and not at institutional level. The establishment of internal Q-Units at institutional level has been decided only recently (2006) and has been limited to the identification of staff responsible for their management and administration. The personnel were unprepared to take on the challenge of institutional assessment, or access to tools for self-assessment, nor experience of organizational processes for effective communication within the HEIs. Units should be chaired by a Quality Assurance Manager or Director, assisted by two administrative managers and secretarial staff.

Furthermore, all three HEIs lacked coherent systems for structured collection and analysis of indicators and data; critical for successful implementation of quality assurance processes and strategic planning. Consequently, and due to financial and technical limitations none of the HEIs had established integrated data and information systems that would have supported dissemination of information to the members of the institution and enable internal and external benchmarking.

Integration of the assessment policy into a broader process of quality management and development requires involvement of senior leadership and top-level management at faculty and institutional levels to ensure appropriate follow up of internally organized quality reviews, and the implementation of suggested improvements. Concerning the early stage of the definition for internal quality assurance framework within the partner HEIs, top-level management lacked capacity and experience in the implementation of such policies, both at technical and strategic level.

The involvement of teachers and students in programme assessments is regarded as fundamental to ensure adequate feedback from students on teaching and learning process, and to define actions for improvement. However, within the partner HEIs students' involvement was either very low or inexistent, and HEIs lacked experience in promoting their inclusion. As a result, the HEIs had no coherent systems that would help both students and teachers reflect upon their performance.

Direct involvement of the members of the management and administrative staff of IUCEA[4] highlighted the need for a harmonized HE quality assurance framework in

4. Body established in the event of an inter-governmental initiative between Kenya, Tanzania and Uganda aiming, inter alia, at promotion of quality of HE for common regional development. See footnote 3.

the region, as set out in the strategic plans of the agency. In relation to this, IUCEA is looking for good practice in the implementation of quality assurance policies at institutional level, which may be disseminated and benchmarked to other members of the initiative. At transnational level, the need for capacity building in the implementation of quality culture within African Universities has been reflected by the needs analysis conducted recently by the AAU, which emphasized limited training opportunities for quality development, insufficient self-assessment capacities within HEIs, limited involvement of students in assessment practices, the need for development of monitoring and assessment plans as well as benchmarking of good practice through international links *(AAU, Developing Quality Assurance Systems in African Universities 2004, AAU- further: 2007, online sources).*

SECTION 3.- **RELEVANCE OF AFRIQ'UNITS**

The action addressed this need for the development of quality culture within EAUs. In response to this and to the long period of deteriorating quality of East African HEIs, IUCEA proposed the establishment of an East African Centre for Quality Assurance to support coherent development of quality mechanisms within the EAU in order to enhance cooperation between HE agencies and HEIs, as well as to provide information to those who introduce systematic quality assurance procedures.

Although the need for the development of quality culture and quality assurance procedures within African HE was recognized at the political level, none of the involved countries was able to introduce a reliable accountability system or a functioning quality assurance mechanism apart from traditional academic controls in the institutions. While governmental agencies in Tanzania, Uganda and Kenya were supposed to evaluate and accredit HEIs, the lack of capacities and of information on HEIs' quality and harmonized indicators preordained that such assessments were not entirely successful.

As members of the IUCEA, the three partner HEIS were required to develop and implement quality assurance systems that conform to regional standards. The proposed project did not only address the need for increased regional cooperation between the HEIs and relevant bodies in the area concerned, but also supported the development of a coherent quality assurance policy and strengthened the implementation of integrated Q-Units within the three partner HEIs, as envisaged in

their current Strategic Development Plans. Intensive trainings aimed at addressing specific needs concerning managerial, administrative and strategic cover both by the EFQM model and models for assessment of HEIs' services. The lack of experience in management of data collection and analysis was addressed through a joint development of integrated data management systems and physical strengthening of Q-Units. Strategic, managerial and administrative capacity enhancement was supported by pilot assessments planned for the second year of the project, including involvement of teaching and administrative staff and students and recommendations for improvements. As a direct result of the project the HEIs are able to implement a quality assurance culture in a structured and sustainable manner, and gradually extend monitoring of quality at different levels as well as to integrate quality-monitoring results into the decision-making process of the HEIs. Finally, improved teaching, research and service quality has benefited further internal and external stakeholders including students and employers of graduates. Hopefully the coherent implementation of quality culture within the three EAUs will serve as a benchmark for further HEIs in the region, as well as support the development and implementation of quality assurance culture within African HEIs.

SECTION 4.- **OUTPUTS AND RESULTS ACHIEVED**

The implementation of the action has resulted in the enhancement of the HEIs' capacity to integrate quality processes into a broader context of quality management and development through assessment of the performance of the HEIs. As a result of the project the Universities are capable to perform continuous assessments and monitoring of their performance, both concerning their services and programmes, identifying gaps and difficulties to be overcome as well as to implement improvements.

The project has benefited from senior leadership of the involved institutions through enhancement of their strategic competences in the implementation of quality culture within the HEIs, in particular in relation to its central function in the implementation of this process. The involvement of top-level management staff in project activities, in particular through their participation in trainings and involvement in pilot assessment activities, has resulted in the strengthening of their managerial capacity in creating conditions for embedding quality processes within the HEIs,

clarifying responsibilities and developing transparent frameworks for implementation and follow up- of internally organized quality reviews, setting directions for change, communication of the strategy to staff members, students and external stakeholders. The project furthermore resulted in enhancing the senior leadership's role and capacities in the monitoring of quality and the integration of quality monitoring results in the decision-making process and the overall development strategy of an institution.

The technical and management capacity of the management and administrative staff of the institutions and in particular of the Q-Units has been particularly enhanced. Due to the fact that the decision for the establishment of the integrated Q-Units within the three EAUs was decided recently (2006) and was limited to the identification and selection of staff, the personnel had no experience neither in a continuous implementation of quality assurance policy nor in the administrative management of the respective units nor concerning the techniques and models for self-assessment of programmes or services. In relation to this, extensive training programmes covering all mentioned aspects resulted in the empowering of the staff to independently implement the activities associated with the operation of the Q-Units and conducting of assessments at different levels, and thus considerably increased their administrative, managerial and technical capacities.

As members of knowledge-based organizations, academic staff and in particular teachers are important assets of HEIs. Academic staff members are the main actors in implementing any change process and anchoring it in the institutional reality. In relation to this, ensuring the quality of academic staff and related staff development can only be successfully performed through identification of gaps and when appropriate mechanisms to measure, assure and enhance the quality exist at institutional level. Coherent implementation of self-assessments generated increased quality awareness and motivation, and strengthened the accountability of academic staff of the institutions.

As teaching assessments are widely recognized as an important tool to ensure feedback from students in the teaching process, the involvement of students in assessment practices was, to a great extent, limited. Furthermore, until now the practice of isolated efforts for self-assessment of the teaching process was based on a incorrect assumption that the process is one-way with the teacher educating

the students. However, taking into account that teaching is a two-way relationship in which both teacher and student are actively involved, the assessment of teaching should be based on the premise that students should reflect upon their own role and performance, as well as that of their teacher. Only in this way the efficiency of the teaching process, its relevance and students satisfaction can be evaluated, monitored and improved.

In relation to this, the action provided respective trainings in designing polls and processes for student involvement in quality assurance frameworks. The practice tested in subsequent pilot assessments at two faculties in each of the EAUs.

Direct participation of the representatives of the IUCEA and AAU in training activities and development of the activities for the implementation of quality assurance culture within African HEIs ensures that they can act as dissemination platforms and generate further awareness of good practices for quality culture and self-assessment mechanisms for the East African region and beyond. In this context, further beneficiaries such as Ministries of Education and National Education Councils can benefit using the project experience as a pilot action for the promoting quality culture within HEIs. In addition, from the proposed harmonized approaches, they may identify and use quality indicators and reliable information on the quality of HEIs and programmes stemming from the self-assessments.

IMPLEMENTING A QUALITY CULTURE FOR HIGHER EDUCATION IN EAST AFRICA

1. Recommendations for the Implementation of a Sustainable Quality Assurance Culture in East African Universities

Many universities in Africa, like in other parts of the world are facing challenges of escalating enrolments, declining resources, academic brain-drain, deteriorating infrastructure which are affecting the quality of their service delivery as well as the quality of graduates. Many stakeholders including the Association of African Universities had recognized the need to meet these challenges by promoting quality assurance and accreditation in African HE. In East Africa, the Inter-University Council for East Africa (IUCEA) was equally committed to promoting a virile quality assurance mechanisms and qualifications at the regional level. THE IUCEA has been actively involved in promoting quality and quality assurance in East African Universities by collaborating with regulatory agencies in the quality assurance processes. Universities in the region were therefore at different stages of establishing quality assurance systems. They have been employing various mechanisms to ensure the quality of their products.

These include:

- Rules and regulation on conduct of academic activities(course delivery, assessment, examinations etc)
- Rules and criteria on academic staff appointments and appraisal systems
- Student evaluation of course delivery
- External examination system
- Stakeholder participation in curriculum review
- Regularized curriculum reviews in some universities
- Academic audits in some universities
- Tracer Studies, among others.

The above not-withstanding, the culture of ensuring quality assurance has been facing some challenges.

These include:

- Resistance / inertia among some staff, students and management
- Inadequate Quality assurance personnel assigned other
- Inadequate university funding
- Heavy teaching and administrative workload for staff assigned with quality assurance responsibilities
- Quick turn over among students (and staff)
- Absence of appropriate Quality assurance policy and
- Absence of units with quality assurance responsibilities.

The AfriQ'Units Quality Assurance Project was embarked upon to strengthen the institutional capacity of African Universities in support of policy, management and planning at national and regional levels in order to meet accountability needs and growing development demands. Specifically, the action aims to reach this objective through the Development of sustainable Quality Culture and Capacity Building in Internal Quality Assurance in East African Universities (EAUs).

Through various activities of this project, we have not just found the need to establish quality assurance mechanisms and systems in the universities by ensuring that a culture of quality and quality assurance is put in place. To this end, the following strategies are being recommended for the promotion of a quality assurance culture in East African Universities, as well as universities in other parts of the continent.

1.1. Strategies

In order to promote the implementation of a Sustainable Quality Assurance Culture in East African Universities, the following strategies are being proposed:

1.1.1. Establishment of Managerial, Administrative and Technical Infrastructure for Quality

Human resources for quality assurance should not be restricted to the technical personnel tasked with ensuring quality, but should involve the whole spectrum

of the university structure. A culture of quality in any institution should therefore start with the leadership of the University. There is therefore the need to enhanced managerial and administrative staff capacity in implementation of internal quality assurance and evaluation techniques through extensive staff trainings; strengthening of managerial, administrative capacities and technical infrastructure within the institutions.

1.1.2. Funding and Development of Human resources for Quality Assurance

Universities in Africa should commit funds to the training of quality assurance personnel. There is a dire need of trained quality auditors for institutional self assessment and national and regional accreditation programmes.

1.1.3. Development of Appropriate Training Tools for Quality Assurance

The system of ensuring quality is very important. The project has recognized the effectiveness of the European Quality Framework (EFQM) as suitable tool that can be employed. This tool helps in assessing, monitoring and ensuring the quality of the (a) inputs (educational programmes, teaching organization, human resources (academic, administrative and service staff) and material resources (classrooms, work spaces, laboratories, workshops and experimental spaces, library and document banks, (b) the educational process (teaching, research and community engagement) and the (c) results.

1.1.4. Establishment of Quality Units

Institutions will need to establish Quality Assurance Units for the implementation of their quality assurance programmes. The Unit should work to ensure that the Institutions have a quality assurance policy and the associated procedures for the assurance of the quality and standards of their programmes and awards. Through this unit, universities should commit themselves explicitly to the development of a culture which recognizes the importance of quality, and quality assurance, in their work. To achieve this, institutions should develop and implement a strategy for the continuous enhancement of quality. The Quality Assurance Unit should help the

institution to develop strategy, policy and procedures for both internal self assessment and external assessment procedures.

1.1.5. Strategic Plans for Quality

There is need to promote increased innovation, efficiency, strategic thinking and ideas for self-improvement through development and adoption of a long-term strategy for quality assurance at the Universities. This will involve the development of strategic quality plans and a Quality Procedure Manuals. The strategies will include the formulation of a Quality Assurance Policy for the institutions which should be well circulated and disseminated among the various stakeholders. The Strategic Plan for Quality Assurance should include Policy Statement and Guidelines that will include:

- The institution's strategy for quality and standards;
- The organization of the quality assurance system;
- The responsibilities of departments, schools, faculties and other organizational units and individuals for the assurance of quality;
- The involvement of students in quality assurance;
- The ways in which the policy is implemented, monitored and revised.

1.1.6. Increased inter-institutional networking and sharing of best-practices for the Promotion of quality culture at regional and national levels

Institutions in African should promote regional cooperation through networking for quality assurance. This will help to strengthening the cooperation between the institutions and national / regional accreditation agencies. It will lead to sharing of good experiences and interchanging of peers and experts among Universities and in the region. While the primary responsibilities of quality assurance lie with the individual institutions themselves, the collaboration is necessary to be able to keep up with the new emerging trends in quality assurance in the world. To this effect, the capacity of a regional network such is the IUCEA, the Southern African Regional Universities Association, (SARUA), and the Association of African Universities in promoting capacity building, need to be further encouraged.

2. Improvement Plan, Challenges & Lessons Learnt at MOI University

Moi University was established by an Act of parliament in June 1984 following recommendation by a Presidential Working Party on the establishment of a second public University in Kenya. *(Mackay Report of September, 1981)* The working Party recommended the establishment of a university with technological bias offering sufficient exposure to social and cultural knowledge and experience that would facilitate the understanding and functioning of the Kenyan society. Moi University has grown and expanded over time in both population and programmes.

Moi University had the obligation to give approval and support for the AfriQ'Units project in terms of space, human resource and other logistics. Moi University Management therefore approved and partially funded the workshop that was held at the Institution, Workshop III on Academic *Programme Assessment*, during August 2009. The hospitality extended to the team was very significant and the workshop was rated as excellent by the participants. The success of Project activities including assessment and evaluation of services and academic programmes; and development of procedure manuals and improvement strategies was dependent on the goodwill and participation of resource people beyond the project team, hence the collaboration and teamwork culture that was desired and nurtured.

Moi University Vision

*MOI's vision is t*o be a University of choice in nurturing innovation and talent in science, technology and development.

Moi University Mission

Is to preserve, create and disseminate knowledge and conserve and develop scientific, technological and cultural heritage through quality and relevant teaching and research; to create conducive work and learning environment; and to work with government and private sector for the betterment of society. Moi University has core values and objectives deriving from the Vision and Mission.

SCHOOL OF ARTS & SOCIAL SCIENCES (SASS)

The School under study was selected for role as implementing unit and pilot in the achievement of AfriQ'Units QA project at Moi University. It is one amongst 15 other Schools that make up academic block at the University. The School of Arts and Social Sciences was previously known as School of Social Cultural and Development studies, deliberately designed to inject the social cultural capacities among Science and Technology Oriented Programmes following the recommendation by the Presidential Working Party Report (Mackay Report) in 1981.

The School of Arts and Social Sciences received its first cohort of students in 1987. Its programmes have grown and evolved with time, rising from a status that was specifically targeted to offering service to other all Programmes at the University and running a general BA degree programme to a unit that currently runs more than 20 academic programmes which are subjected to periodic reviews in order to ensure sustainable and continued relevance, response to market an stakeholder needs while ensuring quality.

SASS prides in about 120 faculty members on the ground and 39 support staff among who are administrative staff, secretaries, clerks, office assistants, and ground staff. It is housed in a an administrative blocks in which are staff offices; owns lecture halls and seminar rooms and is in the process of setting up a laboratory and resource centre for staff and students. This is very challenging and demanding.

Vision of School of Arts & Social Sciences

The Vision of the School is "To actualize and blend scientific, technological and socio-cultural knowledge, unity in diversity for an integrated society.

Mission of School of Arts & Social Sciences

The Mission of the school is "To preserve, create and transfer Social Cultural and Developmental knowledge necessary for the understanding and efficient functioning of the graduate nationally and internationally.

Core Values of School of Arts & Social Sciences

The School has the following core values, all of which are derived from the university core values.

- We subscribe to the Moi University core values and run our activities in a manner that collectively seeks to actualize them.
- We endeavor to actualize our vision, mission, values through our programmes and activities.
- We promote personal integrity, diversity, respect for the individual, social welfare and stewardship of the resources and environment at our disposal.
- We avail professionals for consultancy, research and extension services to the community.
- We provide courses for the students in other degree programmes.
- We aim to promote lifelong learning through distance education, research, and service and community partnership.
- We endeavor to pursue holistic and interdisciplinary approach to knowledge and training.

SECTION 1.- **QUALITY ASSURANCE INITIATIVES AT MOI UNIVERSITY**

The AfriQ'Units project was put in place at a time when there were other QA interventions spearheaded by other organisms with interest in HE. The Inter University Council of East Africa, (IUCEA) in collaboration with the German Exchange Programme (DAAD) was at the time coordinating initiatives developing QA procedures within the East African Region. It therefore was most useful, especially in ensuring legitimacy, to have the IUCEA as key player on the AfriQ'Units project. The role of the IUCEA was thus to give guidance and ensure quality.

Besides the DAAD-IUCEA initiative, MU was also in the process of preparing for ISO certification. Following the fulfillment of the set requirements as is briefly outlined later, Moi University was awarded ISO certification in November 2009.

The AfriQ'Units project on QA was therefore complemented by two other QA initiatives, the DAAD-IUCEA and ISO certification. These initiatives saw Moi University set up a Senate committee to oversee Quality Assurance, and subsequently establish a QA Directorate. This output was one of the goals targeted by both AfriQ'Units and the DAAD-IUCEA initiatives. Membership on the Senate committee was and should be drawn from all the Schools, Sections and Divisions of the University.

The AfriQ'Units project however is very significant to the School of Arts and Social Sciences (SASS) because its activities originated from the School and rippled over to the rest of the institution as is detailed later on. Besides the Senate QA committee which drew membership from all the Schools, Units and Divisions of the University, AfriQ'Units strengthened the QA committee at SASS. The QA committee at SASS drew membership from all the departments in the School and also integrated the AfriQ'Units research team. As a result, the SASS-QA initiatives was strengthened and served as benchmark for most of the ISO QA initiatives. Besides these, Prof. Anne Nangulu, (current Dean, SASS), who was common to both DAAD-IUCEA and AfriQ'Units project as Coordinator and Administrative Coordinator respectively, also brought together experiences from the two initiatives for the benefit of the entire University and particularly SASS. She also spearheaded and oversaw the DAAD-IUCEA QA activities which were focused upon the academic programmes in the Schools of Medicine and Information Sciences.

This report, although focused on AfriQ'Units project, therefore makes mention of the other two QA initiatives, DAAD-IUCEA and ISO certification, in order to give a holistic picture of the path to *Institutionalization of Sustainable Quality Units* at Moi University, set by the AfriQ'Units project goal.

SECTION 2.- **ISO-QA INITIATIVE AND MOI'S PATH TO ISO CERTIFICATION**

ISO standards and compliance regulations aim to foster increased quality trade of products and services. It focuses on QA design of quality management systems. ISO standards therefore ***ensure the achievement of customers' or beneficiaries' satis-***

faction through incorporating their expectations and requirements in the system. They also have in place measuring mechanisms that ensure achieved satisfaction continuously.

ISO 9001, to which MOI applied and was certified, is a set of standardized requirements for quality management systems applicable to any organization regardless of its size, whether located in the public or private sector. ISO therefore serves as internationally recognized instrument of quality. ISO implementation and compliance to set regulations ensures the following outputs in daily running and management of the certified institution:

- Efficient operations in all programmes, divisions and units;
- Achievement of customer satisfaction
- Improvement of financial results
- Satisfaction of stakeholders
- Sustainability of effective and efficient Management
- Continual improvement
- International recognition

Steps leading to ISO certification at MOI include the following:

- Top-level MOI Management show of commitment to work towards ISO 9001 certification hence commencing the relevant steps.
- Appointment of a Management Representative (MR) to spearhead the ISO initiative.
- Appointment of an implementation team.
- Training Middle Management staff on the principles and practices of ISO 9001.
- Undertaking gap analysis of the Quality Management Systems, (QMS) in the institution.
- Running awareness training for all employees from all units and divisions.
- Documentation of the QMS and related implementation procedures.
- Training internal quality auditors.
- Undertaking internal quality audits.
- Undertaking management review.
- Taking corrective actions following the audits.
- Application for ISO certification
- Stage 1 audit before certification.

- ISO Certification and stage 2 audit
- Confirmation and launch of Certification and registration as ISO certified.

Quality Manual

This is the overall policy document and related institutional legal instruments such as Strategic Plan, Research Policy, Student admission policy, promotion policy, Intellectual Property policy, Gender Policy, Distance learning policy, staff development policy and other similar instruments as approved for guiding management and sustainable running of the institution. The quality manual therefore describes the scope of the University QMS and interactions of its educational and support processes.

Procedures

These identify Centers of action and quality assurance and implementation steps. Following the administrative structure and organization chart of MU, the following procedures were developed, all of which stemmed from the highest office and responsible office.

- DOC 1: Quality Manual
- DOC 2: Management Representative to ISO Procedures
- DOC 3: Corporate Procedures
- DOC 4: Deputy Vice Chancellor Production & Development Procedures
- DOC 5: Deputy Vice Chancellor Research & Extension Procedures
- DOC 6: Chief Academic Officer's Procedures
- DOC 7: Chief Administrative Officer's Procedures

Evaluated to ensure conformity and continued improvement in Quality Management includes ensuring sustainable structures that allow for:

- Verifying that procedures for achievement of educational objectives are fully implemented.
- Verifying that quality management system requirements have been achieved.
- Verifying that sufficient resources have been provided to achieve quality objectives.

- Verification of achievement of quality records as stated in the quality management system.
- Verification of the activities of the organization personnel that affect quality.
- Ensuring that ISO 9001 requirements are known, implemented, and maintained at all levels.

Improvement Action should be undertaken continuously, especially after audit reports on conformities and non conformities. Undertaking improvement plans ensures probability of enhancing satisfaction of customers and other interested parties. The execution of preventive action serves in eliminating the cause of potential nonconformity and other potentially undesirable situations. It also ensures the improvement of quality management system processes by reviewing the quality policy, objectives and standard while adding value to products; services to customers and setting-up subsequent higher organizational targets.

SECTION 3. -**THE DAAD-IUCEA QA INITIATIVE**

The IUCEA in collaboration with HE regulatory bodies of Kenya, Uganda and Tanzania embarked on a project seeking to introduce common quality assurance system for East African universities. Activities included training QA personnel in select universities within the region for future benchmarking. The DAAD sponsored training of QA officers in Germany at two levels. The first level of sensitization involved the institutional CEOs in order for them to appreciate and gain a sense of ownership of the process. Twenty three (23) institutions from within the region were then piloted and among the outputs of this phase was a draft “Roadmap to Quality” Handbook. This was subjected to peer-review and piloted among the second phase of the project. This Handbook contained procedures and instruments for carrying out various forms of self assessment.

The second phase of the DAAD-IUCEA project saw MU included among the participating institutions, represented by Prof. Anne Nangulu. After the training in Germany, sensitization meetings were held at various levels in MU to ensure awareness creation and ownership of the process. For example, awareness was created among University Management, Senate, Deans, Heads of Department and Heads of sections such as Finance, Examinations, Procurement and administration.

The IUCEA initiative required that two programmes undertake self assessment in the areas of curriculum review. The Schools of Medicine and Information Sciences were identified for focus at MU. Before this, the DAAD organized and funded a QA workshop that brought together Deans from the select institutions from within the region in order to ensure harmony and comparable approaches. The Schools under assessment had to put in place Quality Assurance Committees in order to coordinate the exercise. A QA checklist as developed under the DAAD-IUCEA programme was benchmarked in the evaluation.

The evaluation identified weaknesses and strengths following SWOT analysis. The guidelines contained in the East African Quality Assurance Handbook were applied and several meetings held to collate and synthesize the data. Measurements by the University and the specific Schools to mitigate weaknesses and counter threats were designed in order to steer the improvement action plan. A stakeholder's workshop was held to share the findings and develop clear improvement strategy.

2.1. AfriQ'Units Assessment Activities

The AfriQ'Units project undertook two main activities carried out in two phases of its lifespan. The activities targeted assessment that would inform the establishment of *Sustainable Quality Culture in East African HEIs through Centralized Units-AfriQ'Units*. This SASS was the focal unit and originator of the assessment in the two phases. The assessment process cascaded from SASS to the wider levels of the university.

These activities were:

- *Phase I:* Assessment of service units from across the facets of the HEI. The units targeted were:
  - Examination,
  - Finance,
  - Student Affairs.
- *Phase II:* Assessment of two academic programmes offered by the School of Arts and social Sciences, one from the undergraduate level and the other one from the graduate level. These programmes were
  - Political Science and Administration (PSA) at the undergraduate level.
  - The Gender Studies and development (GSD) at the graduate level.

The team of work involved during the AfriQ'Units assessment activities were:

Research Team I Phase I: Service Units Assessment Activity	Research Team II Phase II: Education Programmes Assessment Activity
1. Prof. Anne Nangulu 2. Prof. Naomi L. Shitemi 3. Prof. Kembo Sure 4. Dr. Omar Egesah 5. Dr. Harrison Maithya 6. Dr. Jamine Masinde 7. Dr. Mary Wahome 8. Mr. William Kiplagat 9. Prof. Hazel Ayanga 10. Mr. Paul Busolo Wegesa 11. Mrs. Mary Gorrett Wosyanju 12. Mr. Godwin Onganya 13. Ms.Bernice Njeri 14. Mr. Samson Limo	1. Prof. Anne Nangulu 2. Prof. Naomi L. Shitemi 3. Prof. Kembo Sure 4. Dr. John Mwaruvie 5. Mr. Kilongi Wenani 6. Dr. Omar Egesah 7. Dr. Harrison Maithya 8. Prof. Fr, Joseph K. Kahiga 9. Dr. Jamine Masinde 10. Ms. Mildred Lumayo 11. Mr. Edward Kiptek 12. Mr. Maurice 13. Ms. Midian Chesoli 14. Mr. Samson Limo

Phase I - Assessment of Service Units

As mentioned, three service units were focused upon: Examination, Finance and Student Affairs. The procedure and approach to undertaking this component of the project activities was dialogued at Mzumbe Workshop which was the second of those listed to be undertaken under the AfriQ'Units project. The EFQM instrument was discussed and adapted to reflect the true context of the institutions under study. Since the tool was new to the participants, it was not possible to immediately envisage the challenges that came with it, discussed later. Key issues before commencement of the exercise therefore included:

1. Training of the service assessment team: The team was constituted following guidance and criteria as given in the project document.

2. Identifying the research site and study population: This was targeted to obtain from within and beyond SASS to capture how these services are undertaken at various levels and stages, including the central offices of the HEI. It was also necessary to clarify which particular components of the service under study were to be targeted. This is because the service units under focus are also divided into sub-units for logical clustering of service provision. For example, finance is comprised of a Salaries section, auditor, examination, procurement (which however falls directly

under the Vice Chancellor); tender subunit, etc. The Student Affair Unit also has subunits of counseling, chaplaincy, games, accommodation, hostels and catering. etc. It therefore was necessary to make a selection of the subunits to focus upon as representation of the entire Unit. From these identifications a sample population was selected based on the total population of personnel in each of the units selected. The three service units were approached differently, with different criteria for selection of respondents. Respondents were therefore drawn from among the following:

- Respondents from among students and academic staff were selected from the following units:
  - School of Arts and Social Sciences (SASS),
  - School of Education,
  - School of Business Studies and Economics,
  - School of Information Sciences, School of Technology,
  - School of Human Resource and
  - School of Law. Academic and
- Non academic staff members were selected from SASS and the central units that offered the relevant service under investigation
- The University Management was targeted for Interviews with expected input on all the three services.

3. Specification of the sampling procedure: This was a challenge at phase one because the research team was still ignorant of a number of issues significant to representative sampling procedures. This was however much easier to handle at phase II following experience gathered.

- Stratified sampling:
  - Non-teaching staff of each unit were stratified under Junior, Middle and Senior staff
  - Postgraduate and Undergraduate students were stratified by Year of study and Sex.
- Random Sampling:
  - This was obtained from the strata as outlined above, e.g. Schools, Academic staff from SASS.
- Purposive sampling:

- University Management, Examination administrators and coordinators; Finance officers in central office.

The following total samples from the service units achieved the following figures:

Service Unit	Staff	Students	Total
Examinations	13	95	108
Finance	17	45	62
Students welfare	15	70	85
Total	**45**	**210**	**255**

4. Methods of data collection:

The EFQM instrument was used for data collection. During the training of the assessment team, clarity on the instrument had to be made and expectations during implementation spelt out. It is at this point that the team that was in Mzumbe appreciated the magnitude of what the EFQM instrument meant. It was found to be one complex instrument that sought divergent information from the same respondents. Its length alone was intimidating. Some information was also applicable to some units and not others. The respondents often proposed that the research team should have merely extracted what was the key for them instead of burdening them with the entire instrument, which is an important lesson learned and to be borne in mind for future activities[5].

The team also designed an interview schedule, which captured all the elements in the EFQM instrument for application with members of university Management. This was because it was feared and, indeed, proved during implementation that the EFQM instrument was very cumbersome and needed guidance hence self administration, especially among the Management team was bound to bear no returns.

Self Administered questionnaires (SAQs) were delivered to the respondent by researchers upon which respondents took time to respond the question items after the researcher explained the purpose of the survey. After an agreed period of between 1-10 days researchers retrieved the SAQs, recorded the details in a standard register and forwarded them for data entry and analysis.

5. These and other detailed observations and challenges are documented in the detailed report that was developed after completion of this exercise.

5. Data analysis

This was very challenging, facing delays also of a recommended programme for data analysis from the coordinators. As a result, the research team did what they knew best, used the SPSS programme to analyze the data, especially in the face of the fact that little time was left before the arrival of external evaluators due to unexpected circumstances[6]. The team was also guided into this decision by the fact that this was mainly a qualitative study. 255 respondents completed the SAQs which were initially entered and analyzed in SPSS and the information used to reinforce the result. Later raw data were transposed and exported to MS Excel and analyzed in a standard MS Excel format designed for the project. These analyses provided self generated statistics about improvement variables.

6. Report development

A comprehensive report was developed to be presented at the Zanzibar meeting as all the Pilot institutions were to compare experiences and findings within the spirit of emerging with harmonized regional cooperation in academic quality assurance; offering support in development of coherent quality assurance policy; and strengthening the implementation of integrated quality units within East African Institutions for Sustainable centralized Quality Units. Components of the report as presented in Zanzibar therefore included:

- Experience gathered from self-assessment process of university services and way forward
- Methodology
- Results and findings
- Improvement Action Plans for Finance, Examination and Student Affairs

6. See elsewhere where we mention the unanticipated factors that negatively impacted on the implementation of the project. A students' strike and closure of the university; crash programme to accomplish covering of the curriculum, examinations; engagements leading to end-of-year activities; and competing activities that engaged the university as it worked towards meeting the requirements for ISO certification.

IMPROVEMENT ACTION PLAN- SERVICE UNITS

Improvement plans were drawn from results obtained from the data files following the assessment. Note also that the improvement plan presented here is summarized from details contained in detailed report developed after the assessment. The following components of the improvement Plan are presented:

- Areas for improvement
- Improvement actions
- Outcome indicators for each of the nine criteria assessed in each of the three service units namely:
  - Leadership strengths
  - Policy and strategy
  - People
  - Partnerships and resources
  - Process
  - Customer results
  - People results
  - Society results
  - Key performance results

IMPROVEMENT ACTION PLAN- EXAMINATION SERVICE UNIT

CRITERIA	ACTION FOR IMPROVEMENT	TASKS	OUTCOME INDICATORS
C.1 Leadership strengths	- Clarify examinations objectives - Actualize existing Unit plans & programmes	Sensitization, reward scheme, partnerships	M&E of process & outcome
C.2 Policy & strategy	- Clarify exam strategy, goals & action plan - Identify key factors for unit success - M&E	Sensitization, reward scheme, partnerships	Evaluation outcome

C.3 People	- Improve staff involvement in planning - Enhance effective communication - Structure to recognize staff worth	-Training & continued sensitization - Foster vertical & horizontal models of communication - Motivate employees through recognition, appreciation & rewards	- Trained staff - Effective communication structure - Motivated staff
C.4 Partnerships & resources	- Evaluate & implement collaborators' recommendations - Evaluate, revise & use the Resource Management Model	- Carry out an evaluation - Use a localized RM Model - Engage staff much more	-Evaluation outcome - Existing & working RMM - Increased staff engagement
C.5 Process	- Improve process to collect & use user complaints - Assess users' satisfaction - Continuous improvement of key processes of examination unit - Create awareness in all stakeholders about the changes introduced in all the processes	- Training, seminars & workshop - Enhance communication with users	- M&E tool - Exams network
C.6 Customer results	- Regularize Unit assessment - Effective staff-user communication - Speed up handling of complaints - Identify indicators for users' satisfaction - Create awareness in all stakeholders about the changes introduced in all the processes	- Regular user satisfaction assessment - Set effective communication structures - Implement views from users, esp. from the suggestion boxes - Create an exams results dissemination network - Apply staff evaluation form	- M&E tool - Exams network
C.7 People results	-Provide adequate material resources to the employees -Evaluate and improve staff satisfaction	-Mobilize and channel material resources -Conduct staff satisfaction evaluation -Motivate staff by rewards & recognition, promotion based on merit	-Staff motivation assessment -Adequate material & HR

C.8 Society results	-Networks & linkages -Regulate water & power use -Institute culture of recycle -Create & improve special infrastructure for challenged persons	-Networking -Set structure for the challenged -Recycle material	-Viable linkages, -Reduced consumption costs -Visible infrastructure -Recycled material
C.9 Key performance results	-Measure its financial and non-financial results. -Harmonize the unit's objectives with its budget. -Actualize existing key performance indicators	-Regular unit financial audit -Transform plans and strategies into action results	-Umpteenth audit report

IMPROVEMENT ACTION PLAN- FINANCE SERVICE UNIT

CRITERIA	ACTION FOR IMPROVEMENT	TASKS	OUTCOME INDICATORS
C.1 Leadership strengths	-Clarify & systematize the organizational structure & process management system -Sensitize staff to nurture their working relationship with students & stakeholders	-Workshops & seminars -Utilize performance manual guides	-Minimum staff supervision -Timely work input -Stakeholder responses -Confidence in decision making
C.2 Policy & strategy	-Develop clearly defined strategy & action plan based on empiricism -Periodic strategy evaluation	-Information gathering & analysis -Formulation of Unit strategy and plans -Training and workshops on policy formulation and strategic planning	-Strategy policy document -Action plans
C.3 People	-Establish cordial working relationship among all the staff. -Involve Unit management & all staff in decision making process -Recognize and reward staff and stakeholders effort that contribute to Unit success	-Workshops & seminars -Clarify staff job descriptions	-Teamwork -Effective and timely met targets
C.4 Partnerships & resources	-Inventory of resources & collaborators -Identify collaborators/partners inputs -Maintain collaborations and partnerships -Evaluate efficiency of RM model	-List key partners by service -Evaluate their impact on the Unit -Assess economic resources of the Unit -Assess and improve the RM Model	-Directory of key partners -Working RM model

C.5 Process	-Clarify process indicators, and frequently evaluate the performance -Sensitize stakeholders on availability of user satisfaction questionnaire	-Identify, evaluate & modify indicators & processes where appropriate -Generate a manual for users	-Effective processes -Use of open minded criticism and comments from users
C.6 Customer results	-Establish a Customer Care Desk -Sensitize users to the value of objectives, vision & Unit mission	-Set up customer care desk -Communicate to users e.g. by newsletter, website, notice boards etc. -Workshops and seminars	-Customer feedback & satisfaction -Existence of a customer care desk -Increase in the number of users
C.7 People results	-Motivate Unit Staff -Involve staff/students in decision making	-Avail resources as required -Engage all in decision making	-Increased Staff participation & productivity levels. -Efficient time management
C.8 Society results	-Reduce cost of consumption in utilities -Nurture corporate social responsibility	-Identify resource for re-used & recycle -Generate policy on use of utilities -Identify user friendly substitutes e.g. solar and wind energy, recycled paper, improved/repaired old furniture	-Reduced expenses on utilities -Income from resources regarded as waste -Cordial working relationship with society
C.9 Key performance results	-Budgetary control coherent with objectives & implement action plans -Sensitize users to how Unit measures its financial /non-financial results and how it controls its key indicators	-Workshops & seminars -Share appropriate information with users -Prepare to users audit reports	-Efficient management of finances -Audit reports

IMPROVEMENT ACTION PLAN- STUDENTS WELFARE SERVICE UNIT

CRITERIA	ACTION FOR IMPROVEMENT	TASKS	OUTCOME INDICATORS
C.1 Leadership strengths	-Clarify organizational structure & process system -Sensitize Unit management on the need to regularly meet staff & students	-Training, workshops, seminars -Staff - student meetings	-Effective leadership structure -Achievement of planned results -Motivated staff -Effective quality assurance system
C.2 Policy & strategy	-Review& clarify policies and action plans	-Define strategy, action plan -Draw up a unit service charter -Create awareness/ publicity and display useful documents	-Unit service charter -Suggestion boxes
C.3 People	-Recognize & honor productive staff -Obtain & use user's opinion -Forge team work	-Consultative forum -Refresher courses & re/ training	-Motivated staff -Improved performance -Use of objective opinion
C.4 Partnerships & resources	-Forge partnerships -Mobilize resources -Mobilization Strategies	-Situational analysis -Update an inventory of resources & key collaborators -Identify their contribution -Continuously establish and foster collaborations	-Staff & student scholarship/ fellowships
C.5 Process	-Develop Unit process indicators -Monitor & evaluate work processes -Create awareness & publicity on processes	-Make advertisements -Issue notices -Seminars & workshops	-Manuals -Performance outcomes -Feedback results
C.6 Customer results	-Specify & adhere to tasks & time lines	-Create customer care desk, -Training & seminar/ workshops	-ISO reports, -Feedback, -Public pronouncements

C.7 People results	-Involve staff/ students in decision making -Facilitation of staff work	-Provide materials -More engagement & participation of staff -Staff appraisals	-More staff engaged in decision making -Behavior change in students and staff -Meeting deadlines -Positive appraisal reports -Improved staff working relationships
C.8 Society results	-Reduction in electricity wastage -Haring facilities & services with society	-Identify & recycle material -Renovate facilities (hostels/buildings) -Generate funds from conference hall, hostels, counseling services & community service	-Reduced expenses on utilities -Established/increased income from facilities - hostels, student centre, gym, conference centre -Adequate funds for maintenance of basic facilities e.g. sofa sets for counseling -Reduced expenditure due to recycling
C.9 Key performance results	-Rationalize financial returns -Adherence to procedures/ timetable for booking & allocation of rooms -Ensure users get maximum benefit of resources and services offered by Unit	-Constantly avail facilities, materials, equipment , human resources conducive for Unit work	-Well maintained facilities

CHALLENGES AND LESSONS LEARNT FROM THE SERVICE UNIT ASSESSMENT EXERCISE

Exposure to the EFQM model and the IUCEA Handbook model undoubtedly gave MU options from which to assess Finance, Examination and Student Affairs service units. This definitely added value to the previous conceptualization and handling of student affairs. Since the Student Affairs unit is very broad, only two components were selected. The ISO Manual and procedures further enhance sustainability in ensuring QA at centralized units.

Assessment of Service Units and Programme Methodology:

The Methodology applied by AfriQ'Units Project on service assessment using the EFQM Model was a new venture at Moi Universality. The training of assessment teams at all levels of the university structure was not only challenging but it also built capacity and awareness among the implementers and the respondents. All players were awakened to issues they often took for granted hence the inspiration for paying attention to details and documenting them too. The team was exposed to University processes and procedures particularly in "Service Units" as earmarked for the Project. They thus appreciated information and procedures they did not know before. This helped in their appreciation of the institution's mechanisms and also in setting clear improvement action plans with the collaboration of relevant staff and personnel and stakeholders from among the students and alumni.

The use of EFQM Model

This was a challenge and learning experience for the MU team. The development of questionnaire instruments, data collection, documentation and analysis were a challenge. The Research team initially applied the SPSS in data analysis because of not having a clear vision on what other analysis programme could be used for this purpose. This was rectified following external assessment and induction in using the analysis programme that had been specifically developed for the EFQM model. This indeed was a challenge well taken and capacity among the staff was indeed enhanced.

The Assessment Process

This is captured at different stages and related challenges identified. The use of Project tools (EFQM Model) as mentioned above was a great challenge and learning experience. Adapting it to apply to the MU scenario was a test. This notwithstanding, while administering the Questionnaire, students went on strike hence the exercise was temporarily halted. Time therefore became of essence since the exercise started later than anticipated. On return from the strike, the students and lecturers were very busy making up for lost time, preparing and taking examinations hence considered the questionnaire administration to interfere with their priorities. The length of the Questionnaire also made things worse. The teams had to work for

much longer and stringent hours including evenings, weekends and even the Christmas holidays.

As mentioned, the project team and stakeholders took longer to understand the tools including the software (Excel); first SPSS was used and outcome of the Service Units presented to External Assessors. For uniformity with Makerere, Mzumbe, Moi and Alicante, EFQM/Excel was adopted although the findings following use of SPSS were still quite telling of the MU situation and were resourceful in generating the Improvement Plans. The Excel model used for EFQM did not have a provision for analysis of the string of items on the EFQM instrument. This therefore led to data collection that was not subjected to analysis. The SPSS model had however processed the string data hence it findings were used in developing the improvement plans.

Length of EFQM tool

The respondents at all levels complained that the EFQM Questionnaire was too long, too detailed and, hence, cumbersome. The variables and scoring format was not familiar thus required one on one interpretation before some respondents were able to respond to the items. Some respondents also did not return the Questionnaires or where they did not all items were responded to. Several follow ups made by the Project team for the questionnaires to be returned. Generally therefore, data collection was a challenging and learning experience to the Project team and stakeholders.

Data analysis and report development

*T*his was undertaken by the Project-Self-Assessment Team. It was such a challenge because this stage of the service assessment process required continuous meetings, which conflicted with other University duties, especially since the semester was coming to an end and University planning to close for the Christmas holidays. The use of IT became vital – phones, *sms* and internet were communication platforms thus mediating the report development process. The movement of drafts back and forth among the report development team was undertaken hence downloading of information; photocopying; and discussing the same via virtual platforms by the Project team was inevitable. Indeed, a lot of data was obtained from the returned

questionnaires. The huge amount of data was indeed a big challenge because the team felt it did not have occasion to utilize all of it.

Understanding of the EFQM Model; data in-put; analysis and write ups were challenging time-consuming. For example it was during such lapses that the MU team resolved to use the SPSS programme for data analysis, later using a programme specifically developed for this. This Excel programme was put in place only when the external assessment team arrived at MU, and online consultations between the External assessment team while at MU for the assessment exercise are what highlighted the need for the Excel programme. All was however not lost as the MU team, was able to re-enter all data into the excel programme and run the analysis once again. The report that was presented in Zanzibar was based on the findings following the Excel programme analysis.

As mentioned earlier, the whole service unit assessment exercise was a learning experience, especially in the use of computer applications for methodology by using the EFQM Model. It is a valuable experience – shared at University, national, regional and international level.

Emerging Issues & Inadvertent happenings

There were lots of challenges in dealing with the Self Administered Questionnaire (SAQ). Students went on strike, time became of essence since the exercise started much later than was anticipated, and the following are specific emerging issues that complicated the assessment activity:

- Project team and stakeholders took longer to understand the data collection tool (The EFQM) and the analysis software (Excel); as mentioned earlier, first the SPSS was used and outcome of the Service Units presented to External Assessors, (in the absence of the Excel programme which was to be availed later.
- Complains were reported that the Questionnaire was too long, too detailed; and confusing when it came to I'D variables which were not clear, and the scoring format also not clear.
- Some respondents did not return the Questionnaires while some returned the SAQs with unanswered components. Several follow-ups were made by the project team in order to retrieve the questionnaires.

- Generally, data collection was a challenging and learning experience to the Project team and stakeholders.

Phase II: Self Assessment of Educational Programmes

The second phase covered an assessment exercise that targeted two academic programmes offered by the School of Arts and social Sciences. These were:

- Political Science and Administration (PSA) at the undergraduate and
- The Gender Studies and development (GSD) at the graduate level.

Improvement Action Plan as developed obtained from the findings of the assessment by indicators as outlined in the provided schedule under Chapter Two of the *AfriQ'Units Guide for the Academic Programme Assessment in East African HEIs.* In this guide are specified criteria, sub-criteria, indicators and related tables of indicators for reference in the assessment. It is important to note that while carrying out the assessment exercise, the team made frequent cross reference to the guidance and clues as articulated under each Criterion for relevance and focus. These include:

- Aspects to evaluate to check compliance with the sub-criterion
- Reflections

The research team also thought it best to develop a questionnaire in respect of the criteria as set in the guidelines and indicators as outlined in order to solicit desired responses from the respondents who included programme consumers and implementers. Among these were academic staff and service providers. Another source of information therefore included responses to questionnaire instrument hence:

1. *Findings from the questionnaire survey.* This was developed by the research teams in order to get quantitative and further qualitative input from the stakeholders – students, staff and service providers to the academic programmes.

METHODOLOGY AND DATA COLLECTION

Chapter One of the *AfriQ'Units Guide* was instrumental in selection and training of the assessment teams. This part of the assignment was handled by selecting the team and taking them through the training specifics as outlined in the Chapter. Of significance was introduction and sensitization of the team to the evaluation pro-

cess by paying attention to the strategies, instruments and methods of collecting data concerning the two programmes as by the set criteria and sub-criteria which included, as mentioned above, *Aspects to consider* and *Issues to reflect upon* while undertaking the exercise. The teams were also introduced to the procedures worth taking into account and applying when analyzing the information. These included approaches that would require description, analysis and recommendation based on the weaknesses, strengths and challenges worth consideration in the enhancement plans.

On its own, the *Guide* was rather complex hence various simplified and focused versions of the requirements of the guide were developed for eased of comprehension and relevance[7]. All these were derived from Chapter two which articulated the assignment at hand by identifying key components of the research process and how to undertake them in the assessment. These were:

- Six areas and aspects of the programmes that were to be considered in the assessment included:
  - Educational Programmes
  - Teaching organization
  - Human Resources
  - Material Resources
  - Educational process
  - Results
- The criteria and sub criteria to be considered under each major aspect.
- Aspects to evaluate in order to check with compliance of the criterion/sub-criterion.
- Specific indicators to look out for.
- Reflections to guide the assessment and response to each criteria, sub criteria and indicator.

7. These simplified versions are appended to the detailed report of this phase of the study.

Research Population, Criteria for Sampling & Sample Sizes

Two academic programs, namely Political Sciences and Administration, (undergraduate) and Gender Studies and Development (graduate) were assessed. Both programmes are run at the School of Arts and Social Sciences (SASS).

SAMPLING AND INSTRUMENT DEVELOPMENT

The Political Science and Administration Programme

The Undergraduate programme under study has 281 students across the four academic year-cohorts in which the programme runs. These include 185 male and 96 female.

- First year students were 114: 74 male; 40 female
- Second year students were 79: 54 male; 25 female
- Third year students were 44: 26 male; 18 female
- Fourth year students were 44: 31 male; 13 female.

From this sampling frame the assessment exercise was undertaken to obtain information from 10 students from each cell, thus arriving at 80 students: 40 male and 40 female, as depicted below;

Sample for Political Science EP students			
Ac. year	Male	Females	**TOTALS**
First	74 n=10	40 n=10	114 n=20
Second	54 n=10	25 n=10	79 n=20
Third	26 n=10	18 n=10	44 n=40
Fourth	31 n=10	13 n=10	44 n=40
TOTALS	**185 n=40**	**96 n=40**	281 n=80

In addition to students, the assessment also targeted teaching staff for information from. These were drawn from the department under which the programme falls and other departments that service the programme. 35 teaching staff was therefore purposively sampled.

Gender and Development Education Programme (EP)

The Moi University Gender programme offered at Master was then a new programme in its second year of offer. It runs for a cycle of two years and is collaboratively managed through the Dean's office at SASS. All departments contributed in developing the programme content and also contribute in running the courses. The programme has the following number of students, from which a sample for the assessment exercise was derived.

Sample for Gender EP Students			
Academic year	Males	Females	**TOTALS**
First	o n= sample 0	8 n=sample 4	9 n=4 female
Second	2 n= sample 2	4 n =sample 2	6 n= sample 4
TOTALS	**2 n=2**	**13 n=6**	**15 n=8**

Twenty (20) teaching staff was sampled on this programme. In addition information was obtained from twelve (12) University staff servicing the two programmes. These were drawn from:

- The Library
- Administration
- ICT
- Estates
- Accommodation
- Education Programme secretariat including secretariat at the Dean's office.

Results of the questionnaire findings were reported by modes, percentages and descriptions captured from the string variables.

Assessment of indicators

The teams took time to study and understand what was expected of the listed indicators, which was 103, and their descriptions. A summary list of all the indicators was therefore extracted from the Guide for ease of reference. These were listed as by the main criteria and sub-criteria. It was in the process appreciated that there was replication of many indicators amongst various criteria and sub-criteria. It is at this point that the team, which had been previously been split to cover the two

programmes independently decided to work together at assessing the indicators. A strategy to ensure non-repetition of the exercise had therefore to be derived.

ENHANCEMENT AND IMPROVEMENT ACTION PLAN- EDUCATIONAL PROGRAMMES

Obtaining from findings of the survey on criteria assessment and responses following questionnaire administration a report detailing findings, challenges and lessons learnt was developed. Summaries of key Enhancement and Improvement Action Plans for the two Educational Programmes were as below:

IMPROVEMENT PLAN: POLITICAL SCIENCE AND ADMINISTRATION EDUCATION PROGRAMME (EP)

CRITERIA	IMPROVENT AREA	IMPROVEMENT ACTION	OUTCOME INDICATORS
C1. Education programme	EP evaluation	Regularly evaluate EP	Tool/report
	Equipment & infrastructure	Equip EP	Facilities available
	Involvement of student	Tap students input in planning	Numbers involved
	Involvement of student	Involve students in planning	Numbers involved
	Interference by unrest & strikes	Timely completion of EPs	Reduced closure

C2. Teaching Organization	Management & Planning	Plan and institute effective instruments for EP	Plan /reports
	Insufficient mechanism for continuous improvement of EP	Install mechanisms for continuous improvement	Reviews, change
	Lacking in continuous evaluation EP	Continuous evaluation of EP	Reviews, change
	Poor information	Develop information channels and channel to EP	Communication channels, feedback and results
	EP subjects not clarified at admission	Assign clear & specific orientation objectives & tasks, increase orientation time and space	Clear explanation of all EP subjects
	Inefficiency- registration process	Students compliance	Numbers successfully registered on time,
	Inefficiency- Timetable planning	Design and use standard timetable software	Software, effective timetabling
	Inefficiency- field course & attachment	Clarify objectives, standardize and equip centers	Equipment at centers, clear attachment objectives, reports
	Inefficiency- material resource management	Train resource managers, install and work by principles, accountability, transparency & targets	Trained staff
	Low stakeholder expectation & Poor measure of their expectation	Restore stakeholder confidence, efficient service to stakeholder	Stakeholder on board

C3. Human resources	Need for relevant training	Roll out more relevant training opportunities	Trained staff
	Numbers	Employ and/train	More trained staff
	Insufficient scientific collaboration	Strengthen scientific collaboration & research networks	More research & collaboration funds, results/reports and publications
	Traditional teaching approach	*e*-teaching & learning	Internet/ email access and use in teaching and learning
	Need for relevant training	Roll out more relevant training opportunities	Trained staff
	Deployment	Deploy & train administrator for EP	Administrator deployed
	Poor customer care	Train in customer care	Trained administrators in customer care
C4. Material Resources	Numbers, space, design, facility and equipment in lecture theatres	Install, equip, update & maintain modern and state of art facility for conducive teaching and learning	Presence of equipment, facilities and infrastructure
	Computer facilities	Equip and access computer facility	Efficient computer labs
	Academic and non academic staff office space and facility	Install, equip, update & maintain modern and state of art facility for conducive teaching, research & work. More space for teaching and learning	Presence of equipment, facilities and infrastructure
	Boardroom and meeting space and facility		
	Computer, internet and teaching material		
	Computer Lab; Facility, space and number of computer access terminals	Develop and equip a modern computer lab for the EP	Presence of well equipped lab with facilities and infrastructure
	Library & books; Abundance and relevance of reading and teaching library resources both paper and soft resources	Strengthen library facilitation of learning process by relevant & update material, equipment and accessibility	Presence of update, relevant material, equipment, facilities and infrastructure- HOD Lib

C5. Education process	Student care, & Integral Training	Increase time and achieve objective of initiating student into EP, introduce career week	Satisfaction with orientation and career week
	No structured tutorial programme	Introduce and mount tutorials	Running tutorial sessions
	Relevance to market needs	Make EP relevant to market needs, tap employer, alumni & student inputs	Increased employer interest in EP graduates, seminars with potential employers
	Lacking in credit transfer	Introduce and mount credit transfer system	Functioning credit transfer system
C6. Results	Low practical exposure	Clarify objectives of attachment, increase time	Favorable attachment reports
	Poor space and room facilities in lecture rooms	Improve facilities, infrastructure	Improved space and infrastructure
	Absence of mentoring/ support programmes to EP	Introduce & run mentoring programmes	Running mentoring programmes
	Graduate profiles not fully matching outlined EP profiles	Implement as planned & outlined, alumni office to capture	Effective alumni office in capture
	Poor mechanisms to use input & opinion from staff	Self evaluation, open up to viable suggestions	Infuse of staff opinion in planning and results
	Scientific and research inputs not utilized to improve EP	Dynamism in knowledge transformation and use	Consumption of scientific results
	Dissatisfaction with teaching load & time	Employ more staff, better remuneration by workload	More staff, better terms
	Dissatisfaction with work facilities- office space, teaching aid, library	Investment in facility	Presence of equipment, facilities and infrastructure
	No grants and awards to community from EP	Recognize & make community a beneficiary	Community involvement and benefit and appreciation
	Inadequate links with other professional peers	Networks, exchange, reciprocity	Existing and useful networks and exchanges
	Disconnect from employer community	Links, networks, employer & alumni feedback	Existing and useful networks and exchanges
	EP poorly links with secondary schools	Connection to feeder / school sources to market EP	Links with secondary and tertiary institutions

IMPROVEMENT PLAN: GENDER AND DEVELOPMENT EDUCATION PROGRAMME (EP)

CRITERIA	IMPROVENT AREA	IMPROVEMENT ACTION	OUTCOME INDICATORS
C1. Education programme	Ensuring Objectives & learning resources are harmonized and adhered	Programme review & integration of recommendation in programme. structure	SMART EP objectives and appropriate learning resources
	Clarity of course structure, consultation with staff & audit of courses for deficiency make up	Review of study plan to capture audit and upgrading components	Clear course structure and course audit system
C2. Teaching Organization	Enhancement, continuous improvement in planning	Periodic review of EP & follow-up on enhancement strategies	EP review plans
	Clarity in student admission profiles; Integration of field course component	Review admission criteria, articulate broad scope of catchment source; Explore integration of field	Clear students admission criteria and field course component
C3. Human resources	No enough staff; Enhance staff training	Enhance mechanisms for capacity development among staff thro seminars, workshops, conferences; post doc; area specific in-service	Built human capacities for the EP
	Enhanced staff capacity		

C4. Material Resources	Numbers & sizes of lecture/seminar rooms; quality of furniture; computer terminals; internet access & equipment in halls	Establish more space for office space, classrooms & study space, and workspace equipped with connectivity and user terminals	Ample and appropriate staff and student work space and teaching/ learning facility including computer
	Enhanced study space duly equipped		
	Inadequate workspace for staff & students; inadequate computer rooms and equipment		
	Stocking of library; programme specific ref material	Stocking of library with programme specific and relevant reference, teaching and learning material	Adequate relevant reference material for the EP
C5. Education process	New Programme that needs improvement and enhancement with time	Mechanism for continuous programme review	Evidence and results of EP review
		Monitor & review teaching & learning processes	
C6. Results	Develop practical & tutorials facilities	Integrate practical component of course administration , learning and teaching	Tutorial and practical rooms and labs
	Orientation to for joining students	Establish mechanism for basic and continuous orientation & induction of students into the programme and its expectations	Orientation programme
	Inclusion of Staff opinion for development & improvement of EP and space	Harness and use ideas from Staff from different disciplines to dialogue development of EP infrastructure, needs and facilities	Contribution of teaching and non teaching staff in improvement of EP facility

2.2. Challenges and lessons learnt- assessment of educational programmes (eps)

Challenges and lessons learnt in the process of assessing EPs are captured at both the questionnaire administration and criteria assessment levels.

Training and familiarization with the exercise, Guide, and data collection tools

The Project team had to work through a series of planning meetings first to earmark core variables from the *AfriQ'Units Guide for the Academic Programme Assessment* document and to develop a questionnaire along the set process and indicators. A further series of orientation meetings had to be undertaken before they went out to administer the questionnaire; carry out the survey and assessment; and retrieve the returns.

Use of the Assessment Questionnaire

Administration of the Self Administered Questionnaire (SAQ) was undertaken close to the end of the semester, at a time when students were finalizing their examinations. This therefore influenced and affected their manner of responding and even attitude towards the exercise. The responses and response rates from among Political Science and Administration students was therefore laboriously accessed.

The questionnaire was developed to capture the six criteria, each with several sub-criteria and many variables. It therefore turned out to be bulky and cumbersome to work, to administer and worse still, to analyze the resulting data.

Results of the questionnaire were to be analyzed in SPSS since there was no standard tool for analysis offered by the project coordinators as was with the Service Unit assessment exercise. It should also be mentioned here that the Questionnaire instrument was an invention of MU team which did not see any other way of having respondents attend to the issues outlined in the *Guide*. This was rigorous and could have added to bias in our reports, although it offered an opportunity to bring out both quantitative and qualitative approaches.

Some respondents did not return the Questionnaires while some returned the SAQs with unanswered sections. However, several follow ups were made by the project team for the questionnaires to be returned.

Generally, data collection was challenging since the instrument was bulky and since the respondents came from various strata. For example, as mentioned earlier the respondents were drawn from among:

- Students from the two programmes,
- Academic staff from various departments who served the two programmes
- Service staff from diverse positions.
- Because data were gathered from about five different sub groups, it was not easy to collate, and analyze in standard ways. Reports development was also a major challenge although the team obtained strength and experience in diversity.

Assessment of criteria

The information targeted for assessment of the outlined criteria was drawn from a variety of sources besides those outlined under administration of questionnaire. These include:

- Retrieval of records, archiving and interviewing people in the two EPs and their service points.
- Identify and accessing the right respondents especially at a time when most academic staff were engaged in administration of examinations at the various campuses that belong to the university.
- Programmatic bottlenecks including documentation, filing, computerization, shortage of staff played into hardships to accomplish criteria assessment. It was therefore difficult to identify access and even know some of the documentation that was in place due to poor filing and repositioning.
- The on-going University examinations also posed further challenges in that even the student-members-of the assessment team found it very challenging to be effective in the exercise[8].

8. See as attached a report submitted by one of the student members of the assessment teams.

- The exercise was even more challenging because we worked with over 100 variables. It was very difficult to collate, interpret, analyze, and develop the required report.
- The GSD EP which was fairly young, still in its first cycle was a challenge in itself. It was facing own teething problems hence all stakeholders and players were at learning stages. It therefore did not have much data to in response to the criteria under consideration.

Data Analysis and Report development Challenges:

- The team of assessors required several and continuous meetings in order to keep abreast with the demands of the assessment exercise. This was however often fallen in conflict with their other University duties.
- The absence of a standard tool for data collection, entry and analysis; on one hand, and the bulk of information arising from detailed sets of criteria and variables to address complicated the collection and manipulation of data in response to the outlined tasks in the *Guide*.
- The excel tables provided to quantify information from the two EPs were quite cumbersome to use and difficult to interpret. A training targeting their appreciation was required but not forthcoming. Effort to get insights during the external assessment exercise was also not fruitful because of the very little time allocated for the external assessment exercise.

2.3. Benefits, lessons learnt and challenges

Lessons Learnt

As was with the Service Unit assessment exercise, the Educational Programme assessment exercise ensured training of staff and awareness creation among target populations and stakeholders hence capacity building among all who can rise up to the challenge of being champions in EP assessment for quality assurance.

The entire exercise was a learning experience for the assessment team. This team included two graduate and two undergraduate students to ensure triangulations of data and results from questionnaire and criteria assessment.

The assessment process needs to work with a motivated staff hence the importance of rewards and acknowledgement.

The physical infrastructure was found wanting hence it was wished that besides equipping the QA Directorate the programme or alternative avenues were found to boost the infrastructure, especially at SASS where the two programmes were housed. Nevertheless, teamwork which was very essential in this exercise was cultivated and all the assessment team members rose to the occasion the best way possible. Teamwork in such ventures is very essential. All levels of players and stakeholders need to appreciate their roles and attend to their stakes.

It was also discovered that collaborations and partnerships is very essential of comparable and harmonized structures were to be developed. For example, we are yet to get ample opportunity to share experiences with the partner institutions that undertook assessment of their programmes and even service units. This was a major objective and desired output of the AfriQ'Units Project, to enhance networking and exposure among East African Institutions of Higher Learning, an objective that could have been achieved better. Partnerships and benchmarking at regional and global levels can only be ensured through collaborative work and positive criticism. It therefore is hoped that opportunity for sharing experiences, lessons and challenges can arise someday.

Satisfactory undertaking of the assessment exercises requires adequately established quality Units at University level. Sub Units at School, Section or Unit level with commensurate trained and energized staff and resources persons in quality-related issues is very necessary. This should ensure continuous monitoring, evaluation, and sustenance of quality teaching and services. The vibrant quality units as seen of Alicante and Miguel Hernandez Universities were very much appreciated. The training and implementation of quality services and sustenance of a culture of quality in HE was therefore seen to call for financial support which probably needs to be factored in institutional budget. This has in a way been partially accomplished through the setting up of the QA Directorate but further emerging challenge lies on how much empowered the Unit is to take correctional and capacity building measures, let alone implementation and sustainability of improvement plans. This also calls for quality resources; reference materials e.g. handbooks, policies and

manuals; commitment from University Management especially in walking the talk and leading the way.

Continuous training and sensitization of staff at all cadres on quality issues; and action plans and time lines is inevitable if sustainable structures are to be operational.

Competence and Capacity Building

The entire AfriQ'Units project brought immense benefits to Moi University. These include:

- Capacity building in the area of Quality management, assessment and evaluation
- Capacity building in the development of assessment and evaluation tools
- Development of Strategic and Procedure manuals and guides for future use and replication in other Schools and programmes.
- Dissemination, benchmarking & networking opportunities and challenges following any activity that brings together diverse players and stakeholders.
- Networking among units within the institution without in dialogue of challenges and emerging issues relating to HE. For example, the interaction among the East Africa Institutions, Moi, Makerere and Mzumbe Universities enhanced collaborations and identification of possible collaboration areas in the sustainability of Quality Structures, although they could have been better and more frequent.
- Networking and benchmarking among Commissions of higher learning, government, education ministries, regulatory and accreditation agencies further enhanced awareness, knowledge and skills on issues relating to Sustainable Quality Assurance.
- Knowledge on quality assurance, related education for global competitiveness and strategic planning in quality issues in institutions of higher learning was enhanced.

Infrastructure Development

The AfriQ'Units Project, together with the other complementary QA initiatives mentioned earlier inspired the setting up of the QA Directorate at Moi University. This is a major milestone against which other challenges of QA can now be pursued. **The AfriQ'Units project was key in hastening and contributing to the competitiveness of MU as it sought ISO certification, which was secured on 9th November 2008**.

Bigger challenge however still exist in ensuring sustainability so that the gains made following the three initiatives as dialogued herein can be consolidated for enhancement of MU performance, especially in ensuring sustainability of Quality Units that have been centrally set.

Equipment

The AfriQ'Units project funded the purchase of ICT equipment for The Quality Centre. Since the Directorate had not yet been set, the University Management allowed for the equipment to be located in SASS, which piloted the project. This equipment include: a server, photocopier, printers, desktop computers, laptop and LCD Beamer.

The equipment should strengthen the Quality Technical Unit based at the School of Arts and Social Sciences (piloted for AfriQ'Units Project) and ensure sustainability of the set central QA structures. The entire University should also be seen to benefit in such endeavors such as in tabulating data from student evaluation forms – to assess quality teaching, methodology/strategies, assessment, and curriculum – for improvement of quality teaching and services.

Sustaining a Quality Culture: Local, Regional and International Benchmarking for Best Practices

This is a challenge that the University quality system needs to rise to. It needs to be functional at all levels including Service Units, teaching, research, extension and outreach in order to sufficiently undertake the mandate accorded to it. Through sensitization of staff at all cadres -junior, senior and Management, it should be possible to upscale the institution along the path of ensuring comparable actualization and internalization of quality. For example, at MU, results from the AfriQ'Units Project affirmed areas of operation where there is general dissatisfaction by both students and staff on service delivery hence this calls for deliberate and planned improvement plans.

It should also be appreciated that **improvement is continuous hence areas of improvement can also serve as strategy for sustaining quality** especially as the institutions continues to improve on itself and raise the standards against itself. Through

the findings of the AfriQ'Units Project and identified Improvement plans therefore, Moi University should continue evaluate its processes by cascading the assessment undertaken on SASS, School of Medicine and School of Information Sciences under different QA initiatives. The continuous audits and effort at conforming to ISO requirements can only be ensured through establishment and sustainability of central and cascaded/devolved QA systems and initiatives. Partnership with sister institutions, Makerere, Mzumbe, regulatory agents such as Commission for Higher Education and IUCEA are inevitable if the culture of quality assurance in HE in East Africa and Africa as whole is to be sustained.

Another challenge and lesson is in implementing and sustaining quality standards for global competitiveness, especially with contributions to quality structures and practices deriving from alternative and international initiatives. The presence of the University of Alicante, German Accreditation Agency, IUCEA, the three national bodies that coordinate and control quality in HE within the region, (Commission for Higher Education in Kenyan), on the AfriQ'Units Project is a value adding point in reference. The funding by Edulink, under *An ACP-EU Cooperation Programme in Higher Education* is ambassadorial in nature because it offers opportunity for sharing a platform upon which similar projects have been undertaken hence chances for learning from best practices and other world challenges.

2.4. Programme assessment exercise: Political Science Female student Representative

The assessment was targeting two programmes, Political Science (Undergraduate Programme) and Gender Studies and Development (Graduate Programme). Sampling was used and aimed at obtaining information from students.

Aim of study

The aim of the study is to address issues of quality University Education at Moi University in Kenya, Makerere in Uganda, and Mzumbe in Tanzania under the coordination of University of Alicante, Spain and German Accreditation Council.

Purpose of study

The purpose of the study is quality assurance in Africa and Europe.

Success

We met on 13th April 2010 with Professor Shitemi who was the Chair. Other members were Dean of SASS, Head of Department, Members of teaching staff, and two class representatives, male and female from undergraduate and postgraduate. There were two groups with eight members each. The team discussed the aim of education programme. We went through the study plan and its structure and it was just wonderful. We also learned new terms like Practicum, Itineraries, Credits, etc.

Challenges

There were a lot of challenges we faced. Like on 13th April 2010, the meeting started at 2.00pm and ended at 5.00pm. I was not feeling well and I had to read for two exams which were to be done the next day, then it started raining. I was rained on. I was with Mildred and her umbrella was almost carried away by the heavy downpour. Luckily she got a lift. Then I tried to take refuge under a bush where some students were also taking refuge. The rain became so heavy that all the material on evaluation was rained on. I had to run to the library which was the nearest. I looked for a book to read on the exams but was difficult to get and I came out of there around 6.00pm. I was wet and shivering but thanks to God I was able to overcome this.

Another problem was the questionnaires were given out at the wrong time, when the students were busy doing their exams. We had to coax students to fill the questionnaires and some were very rude. They insulted us and threw the questionnaires back at us complaining that they were busy and tired to fill the questionnaires. I remember trying to retrieve the questionnaires but some students were going home and went away with them and some returned when they had not filled. I tried to catch up with some and stood there for hours waiting for them.

We were later on called in for another meeting and we were given the questionnaires to distribute to staff starting with the HODs. Mildred, Edward and I went

round distributing them. It was difficult because some refused completely to take saying that they were too busy. Others were not around. We also went to stage (shopping centre on campus) where one of HOD's office was but he did not complain and was very understanding. After there we met again at 2.30pm to retrieve the questionnaires. Edward and I went to 3rd years where we stood up to 5.00pm and we retrieved only two questionnaires. But we did not lose hope because Dr. Omar Egesah was always by our side and giving us hope by encouragement.

Recommendation

What could have been done to solve these problems was to give the questionnaire earlier to the students to limit or avoid inconveniences because they could have time to go through the questions and answer them well. The timing was wrong because we were doing our exams; attending meetings etc. HODs are also busy doing this and that. The workload is too much and is difficult to do all these while the environment is not convenient. I urge that next time we be organized and start the process earlier.

3. Improvement Plan, Challenges & Lessons Learnt at Makerere University

In 2005, Makerere University appointed a Task Force to develop a Quality Assurance Framework. The University Council approved a Quality Assurance (QA) Policy in 2007 following the recommendations of the Quality Assurance Task Force. Thereafter, and with the support of Carnegie Corporation of New York, and the I@mak Project, Makerere University embarked on the implementation of the QA Policy on pilot basis. In 2008, these efforts were strengthened when Makerere University became a beneficiary of the EDULINK support through the AfriQ'Units Project.

Through the AfriQ'Units Project, the Makerere Team together with colleagues from Mzumbe University and Moi University visited Quality Assurance Units at the University of Alicante and Miguel Hernandez University in Spain. The Makerere University team also visited the University of Cape Town and the University of Western Cape to share experiences of building a University quality assurance system.

The above mentioned exposure to operational quality assurance units, and quality assurance training workshops clearly brought out the fact that quality assurance should be considered as a line function. It is the responsibility of every employee and unit, to ensure that activities are carried out according to expected norms and standards.

The philosophy of building a sustainable quality culture in Universities should endeavor to implant in the minds of all stakeholders that it is everybody business/ responsibility to fully undertake their roles. This is what will bring about quality in whatever service is provided by Universities. It is recommended that the University top management should only play supervisory and co-ordination roles.

Institutions should however bear in mind that quality assurance is continuously evolving and should therefore not be over structured or too mechanistic. Our experience in the implementation of the Quality Assurance Policy at Makerere University and the discussions with colleagues from Alicante, Mzumbe, Moi, UCT, UWO brought to the forefront the fact that achievement of set standards depends on the extent to which activities are monitored and evaluated on the one hand and improvements are made where corrective action is recommended. In recognition of the fact that systematic integration of new ways of assuming quality in a rapidly changing environment is complex; it is recommended that implementation of quality assurance policy or requirements should initially be piloted. In other words work should begin with the willing horses (units).

3.1. Structure for Quality Assurance Implementation

In order for Universities to fully engage in quality assurance issues, there is need to develop a quality assurance system that will be responsible for quality assurance activities. To this end, Makerere University Council approved a Quality Assurance Policy. The major objective of the policy is to enhance the effectiveness of the University activities and to focus on the contribution to and alignment with the University strategic goals. The policy is also designed to match with international standards against verifiable processes and outcomes.

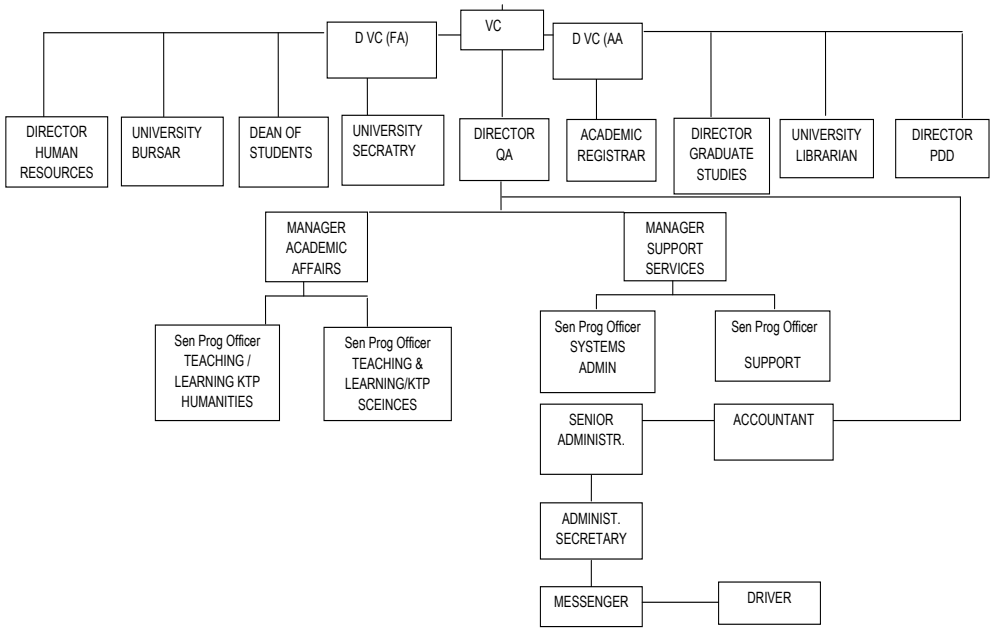
3.2. Quality Assurance Mechanism

The Policy applies to all administrative and academic units through internal and external quality assurance mechanics. Areas of internal quality assurance include:

- Quality of Academic Programmes and Courses
- Quality of Academic Staff
- Quality of Teaching and Learning
- Quality in Student Assessment
- Quality of Support Services
- Quality of Research
- Quality of Resources and Facilities

External Control mechanisms are also recommended not only for maintenance of high quality standards but for purposes of accreditation to international bodies,

Figure 1: Administrative Structure for the Quality Assurance Directorate



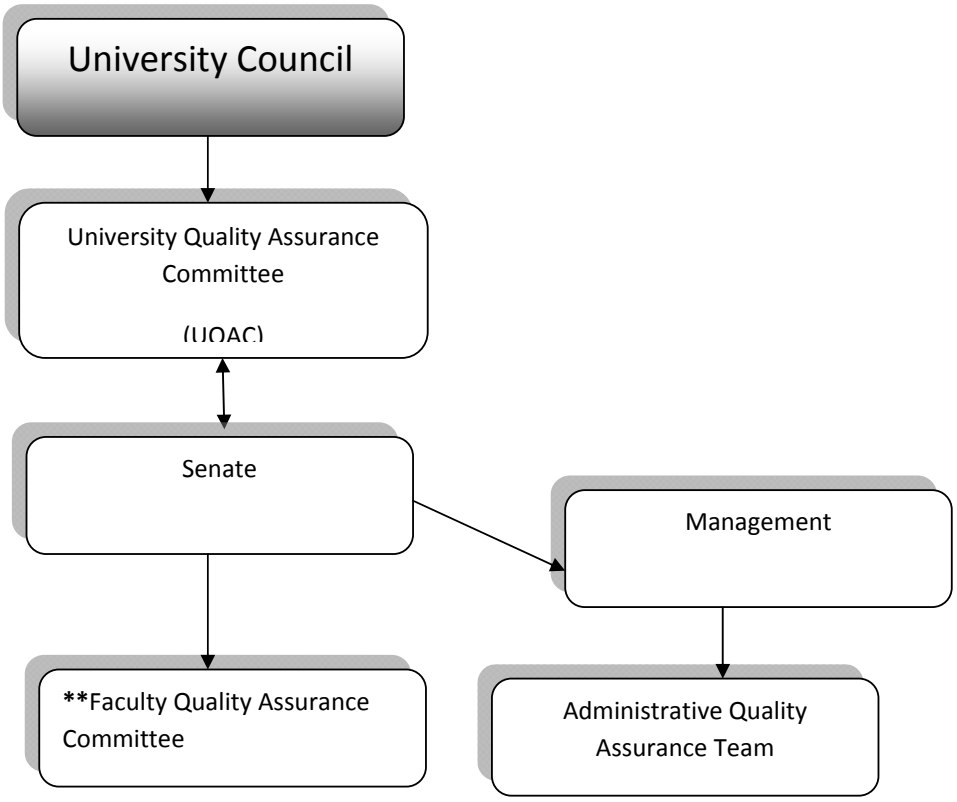
admission of students to international institutions for further studies and/or employment.

Areas for External Quality Assurance should include:

- External academic review
- External Examiners
- External Professional bodies
- External accreditation agencies
- Tracer Studies
- Employers

The Quality Assurance Framework provides for administrative structure and committee structure to coordinate quality assurance activities within the institution. Makerere University has adopted the following structures:

Figure 2: The Quality Assurance Committee Structure



** The University has recently transformed into Colleges. Faculty Quality Assurance Committees have been transformed into College Quality Assurance Committees composed of representatives from Schools

3.3. Roles and Responsibilities

The Policy also defines roles and responsibilities for each category of stakeholder:

- Roles of Students
- Roles of Academic Staff
- Roles of Heads of Academic Units
- Roles of Support Services Departments
- The Management Function
- Role of Committee;
- General Quality Assurance Committee

- College Quality Assurance Committee,
- Administrative Quality Assurance Committee.

Universities are also encouraged to develop codes of practices to accompany the Quality Assurance Policy. The codes of practices could be derived from already established roles, policies of Senate and Council.

3.4. Codes of Practice

The codes of practices provide the norms of procedure on key aspects related to the functions of the University and these many include:

- Teaching and Learning
- Examinations
- Academic Reviews
- Recruitment of Staff and Staff appraisal
- Research
- Accessibility to information
- Staff Training and Induction
- Modes of Collaboration
- Academic Reviews
- Programme development
- Career guidance
- Gender Equity

Tools for ensuring quality may include, but not limited to:

- Evaluation of teaching by students
- Evaluation of the teaching environment by students
- Evaluation of services
- Quality improvement plans
- Staff appraisal
- User satisfaction
- Employee satisfaction
- Review of academic programme
- Tracer Studies

4. Improvement Plan, Challenges & Lessons Learnt at Mzumbe University

Mzumbe University was established by the Mzumbe University Charter 2007 made under section 25 of the Universities Act. No. 7 of 2005 which repealed the Mzumbe University Act No. 21 of 2001. Mzumbe University is a public University and operates under the Ministry of Education and Vocational Training. Mzumbe started in 1953 as a local government school, training chiefs, native authority staff and councilors. After independence, the scope of its activities was expanded to include training of government officials, rural development officers and local court magistrates. In 1971 it was transformed into the Institute of Development Management (IDM) and later in 2006 into a fully fledged University. As a tertiary institution, Mzumbe boasts of over 50 years of experience in, training management, administration of justice and good governance.

Location

The University main campus is located 22 Kms South-West of Morogoro Municipal centre, about 4 Kms off the Dar es Salaam - Zambia Highway. It is about 220 Kms away from Dar es Salaam, and within an hour's drive to the Mikumi National Park. The University, which is situated at the foothills of the Uluguru Mountain ranges on the Eastern arc of Udzungwa range, shares a common border with Mzumbe Secondary School on the East. The University has another campus in Mbeya and a Business school in Dar es Salaam. The Mbeya Campus is located in the Mbeya city, Forest Area at a walking distance from the Dar es Salaam - Zambia Highway. The Dar es Salaam Business school is located in Upanga area, Olympio Street. The Dar es Salaam Business school specializes in postgraduate programmes in various business studies.

Mission

The Mission of the University is to provide opportunities for acquisition, development, preservation and dissemination of knowledge and skills through training, research, technical and professional services.

Vision

Mzumbe University is to be a center of excellence in management science for knowledge acquisition and adaptation through training research, consultancy, public service and outreach activities in Africa and beyond by the year 2015

Accreditation

The University is a fully registered institution by the Tanzania Commission for Universities. It has also been chartered in 2007 in accordance with the Universities Act, No.7 of 2005.

Membership

The University is a full member of the following institutions:

- Inter University Council for East Africa (IUCEA)
- Association of Commonwealth Universities (ACU),
- Association of African Universities (AAU),
- African Institute for Capacity Development (AICAD),
- African Association of Public Administration and Mgt (CAPAM),
- Southern African Regional Universities Association (SARUA),
- Association of Management Training Institutions in Eastern and Southern Africa (AMTIESA), and
- It is also an affiliate member of the Tanzania Academy of Sciences (TAAS).

Development Partners

Mzumbe University has a long and strong relationship with development partners, who have assisted in the institution's development. These development partners include NORAD, DFID, NUFFIC, SIDA, UN agencies, and the World Bank.

Institutional Collaboration

The University collaborates with more than 20 academic institutions, within the Country, Africa America, Asia, Austrasia and Europe.

4.1. Development of Quality Assurance System in the Mzumbe University

To facilitate the smooth functioning of quality assurance activities, Mzumbe University has developed and formalized a Quality Assurance System (QA System) through the establishment of Quality Assurance Directorate. The System is built on the basis of existing good practices and the initiatives established through IUCEA-DAAD and AfriQ'Units projects. The Mzumbe University Directorate of Quality Assurance has a mandate of cooperating with all organs of the University that conduct, develop and support the teaching and learning process. As a result, the Directorate will have responsibility of ensuring quality of the university activities through development of Improvement Plan. The Directorate shall function as the VC's secretariat on quality assurance issues.

4.2. Activities and Procedures in the Quality Assurance System

The QA System was designed to cover the full process of planning, approving, delivering, modifying and reviewing the activities of university which involve provision of university services as well as teaching and learning processes. This includes the total quality management of university activities, programme design, programme operation and teaching quality. The intention was to ensure high quality in all aspects of a programme such that the programme is conducted in accordance with the required standard of its award. In order to have an effective Quality Assurance System the University has formulated the Quality Assurance Policy which have been Approved by the Council on 24th September 2010. The aim of MU Quality Assurance Policy is to enhance the effectiveness of its core activities of teaching, research and consultancy. The policy addresses all University activities focusing on their contribution to and alignment with the University's key result areas.

4.3. Assessment experience at Mzumbe University under following the AfriQ'Units project

Under the AfriQ'Units Mzumbe University used a Student Accommodation, Health Services and Accounts services as case studies in the assessment of the university services. Likewise, the university involved the Faculty of Law and Faculty of Social Sciences in the evaluation of academic programmes (Bachelor of Law and Masters of Science in Economics). The assessment provided a detailed analysis and evidence from the studied units with the aim of improving units' performance and in the academic programs the project aimed at improving the teaching and learning process. The assessment was carried out by the units and academic departments. This allowed these units and departments to have high level of ownership of the process involved as well as high level of confidence in the results.

The following were the procedures followed in the assessment process:

(i) Developing management commitment at university and unit level

Management leadership is a key factor in self-assessment in universities worldwide. In Mzumbe University, top management commitment was obtained from the inception of the project. Likewise, the commitment of heads of services department under assessment was obtained through the written communication to each service unit /academic department requested them to participate in the process and being in charge of the actions plans.

(ii) Selection Assessment committee members

At the university level, each assessment committee team for the three services and academic programme formed a team of three to five persons to conduct the assessment process. All the teams were made up of staff from the service or academic department as well as other stakeholders from outside the unit/ academic department (students, administrative and academic). All the units and departments indicated that the participation of external members would provide the units with a complete identification of strengths and areas of improvement.

(iii) Training of the assessment committee members with the aim of orient them with the quality assurance issues, data collection tools under the project and how the data can be analyzed

Training is a major component of quality management when implementing self-assessment because it is another way of making people owning the process and being orient themselves with the objectives and methods which can be used in the assessment process. The Quality Assurance Directorate of Mzumbe University conducted a training workshop for all assessment team with the aim of orient the teams with quality assurance issues and the EFQM and AfriQ'Units handbook guide for the academic assessment in HE as the assessment tools. Consequently, training workshops were necessary and useful because they allowed self assessment team to be acquainted with the EFQM model and AfriQ'Units handbook guide for the academic assessment in HE. Moreover, the training aimed at giving skills to assessment team skills on how the self assessment of the unit services and academic programs can be conducted. The EFQM was taken as a model foundation of quality management that the university is to adopt to assess university services. Likewise, the AfriQ'Units handbook guide for the academic assessment in HE was used as a tool for assessing academic programs. The training oriented the participants to the theoretical background and best practices and also practical exposure on use of the prepared data collection tool that will be used by respondents. The exercise aimed at equipping the team with knowledge and skills so as to facilitate the training to the potential respondents at their workplaces.

(iv) Conducting self-assessment

The first step was Identification of the selected stakeholders (respondents) with the objective of training them so as to understand the EFQM, employees' satisfactions, user's satisfaction questionnaires as well as AfriQ'Units handbook guide for the academic assessment in HE. From each cluster of stakeholders the participants were randomly selected to join the study as they were receiving the service from departments assessed as well as for the academic programmes. Prior to recruitment, the respondent was briefed about the study, the purpose and need to involve the providers and users of services to give their perceptions and suggestions that are geared to improve the services. Additionally, the meeting with academic staff for academic programme assessment in Faculty of Law and Faculty of Social Sciences

was conducted. Those who consented and had time to fill in the questionnaire were given time to privately respond to questions. For the case of Health service the surrounding community members (surrounding villages) who are also the users of services were not included due to the fact that questionnaires was supposed to be translated in Swahili.

The second step was the training of the respondents. The training was conducted for the employees at the unit level and department level with the aimed of creating awareness. The meeting was convened by the head of service unit and short training was conducted. The emphasis was pressed on the meaning and use of Importance of the attribute abbreviate 'I' and Level of Development made abbreviated 'D' in the EFQM questionnaire because the two parameters were the cornerstone of the tool to provide accurate findings to reflect and identify the crucial areas for improvements. The training was conducted in Swahili the language which every staff is conversant with. Few copies of the employee satisfaction questionnaire were prepared in Swahili to suit the staff that has limited command of the English Language. Likewise, the training was conducted regarding the AfriQ'Units handbook guide for the academic assessment in HE.

Regarding the ethical considerations, the informed consent to join the study was mandatory as part of the description of the assessment to the potential respondents. The respondents were informed that the exercise was confidential and that no need of writing a name of the respondent on the questionnaire to identify her/him. Joining the study was voluntary and the respondent was free to return the questionnaire if felt so without filling a certain invasive question in the same.

(v) Data collection and analysis

Data collection used various methods which includes interview, questionnaire and documents. The data and information obtained was used to identify strength and area of improvement for each unit

(vi) Establishment of Improvement plans

The services and academic departments presented a self assessment reports and presented them to their departments and top management. The improvement

plans was derived from the area of strengths and areas of improvement. The action plans indicated the actions to be implemented, activities for implementation, and responsible persons for the implementation, timeframe for the implementation, resources needed as well as indicators of progress.

(vii) University wide dissemination workshop

The Mzumbe University has disseminated the results of the assessment process to Deans, Directors as well as heads of academic programmes and administrative through a university workshop. The aim of the workshop was to share experiences and skills on the assessment of university services and academic programmes.

4.4. Challenges faced during the self assessment process

The main challenges faced during the process were the following:

- Resistance to change
- Some resistance was experienced during the assessment process. This delayed the data collection and report writing phases. However, after some discussion and consultations the idea was accepted by all the stakeholders involved in the assessment.
- Time shortage for the training of assessment tools and data analysis at project level
- The aspect of assessment tools and improvement plans was not clearly articulated during the workshop training of participating universities at the project level and this had some impact of the assessment process. This delayed the data analysis phase. Therefore, the draft assessment report lacked the detailed analysis of the situation. It was however, addressed during the peer visit and the teams responsible for assessment revised their reports. This resulted in improvement of the formulation of actions to be undertaken by units and academic department in the enhancement of the quality of their services and academic programmes.
- Lack of consensus with other partners universities regarding the selection of services and programmes to be considered as pilot for assessment.
- This situation somehow delayed the assessment process and it was not able to compare the strengths and areas for improvement in the services and academic programmes assessed so as to document best practices within the region.

- External peer evaluators
- The members of the peer external evaluators need to have the professional responsibility for the external part of the assessment especially in the academic programmes. Accordingly, the selection process of peers is crucial. The experts need to have a solid knowledge and understanding of the programmes under assessment. In addition, the peers need to comprise professional experts in area of the quality assurance as well as in the field concerned and with a background in university research.

In spite of the challenges mentioned, the university appreciated the AfriQ'Units project due to fact that it enabled the university to incorporate the Quality Assurance and Assessment practice into the institutional development strategy. Additionally the university has a capability of developing a long-term quality assurance strategic plan.

4.5. Achievements under the AfriQ'Units Project at university level

- The establishment of Directorate of Quality Assurance at university level and policy which will guide the implementation of quality assurance. Additionally the directorate has established a website of the directorate. Therefore, the AfriQ'Units project achieved the objective regarding to the strengthening of sustainable of structures for the implementation of quality culture.
- EFQM model and the Guide AfriQ'Units handbook guide for the academic assessment in HE have strengthened the quality assurance processes in the university and Mzumbe Directorate of Quality Assurance is now using the tools for assessing the university services and academic programs. This indicates that Mzumbe University has adapted the tools and embraces the approaches in programme and curriculum development and review. Therefore, the project has enhanced the knowledge concerning the techniques and models for assessment on institutional services, academic programmes. Additionally, the project have enhanced the strategic skills in the implementation of quality culture
- Multiplication Effects and Mainstreaming
  - **Institutional level:** Following the assessment of the university services and academic programmes, a number of units and departments are now assessing their services and programmes using the established tools under the

AfriQ'Units project. For example Institute of Development Studies used the guide of assessing academic programme in the assessment of Masters of Development Policy. In addition to this, members from the assessed units and programs are now serving as trainers of trainees at the university level.

- **National level:** The Mzumbe University Quality Assurance Directorate is now used to sensitize other universities in Tanzania on the issue of Total Quality Management in Higher Learning Institutions. For example the Tanzania Commission for Universities (TCU) used the resource person from Mzumbe University in the national training workshops for Deans, Directors, and Heads of departments on University Leadership and Quality Assurance.
- **Regional level:** The resource person from Mzumbe University has been participating in the African Quality Assurance Network (AfriQAN) Capacity Building Seminar on Quality Assurance in Africa and made a presentation regarding Total Quality Management in Higher Learning Institutions.
- **Networking with other initiatives:** During the implementation of the project, Mzumbe University has networked with other partners undertaking similar initiatives in the region such as IUCEA –DAAD quality assurance initiative. The two projects have complimented each other. Project coordinator has been serving as resources person on issues of Total Quality Management. The AfriQ'Units tool for programme assessment has been compared to the IUCEA-DAAD handbook and the two have been found to be complimentary.
- **Sustainability:** Since the inception of the project, Mzumbe University has committed to allocate budget for the Quality Assurance activities. Also, the university has incorporated the quality assurance activities into the institutional strategic plans which are being implemented in the current period

Taking all the multiplication effects of the AfriQ'Units project, it can be concluded that the project objective regarding the Enhanced managerial and administrative staff capacity in implementation of quality assurance and assessment techniques have been realized.

4.6. Lessons Learnt

Commitment and involvement at all level in the institution

Commitment and personal involvement is required from top management in creating and deploying clear quality values and goals consistent with the objectives of the institutions and in creating and deploying well defined systems, methods and performance measures for achieving those goals. Therefore, in building up a quality assurance system and in carrying out work of quality it is paramount important to include the entire staff of the university and students representative at departmental and university level.

Leadership

It is possibly the most important element in Total Quality Management. Leadership in TQM requires the manager to provide an inspiring vision, make strategic directions that are understood by all and to instill values that guide subordinates. For TQM to be successful in HEIs, managers at university and department level must be committed in leading employees. The managers must understand TQM, believe in it and then demonstrate their belief and commitment through their daily practices of TQM. The chief makes sure that strategies, philosophies, values and goals are transmitted down throughout the responsible office to provide focus, clarity and direction. A key point is that TQM has to be introduced and led by top management.

Communication

Communication means a common understanding of ideas between the sender and the receiver. The success of TQM demands communication with and among all the stakeholders in Higher Learning Institutions. Managers must keep open airways where employees can send and receive information about the TQM process. Communication coupled with the sharing of correct information is vital. For communication to be credible the message must be clear and receiver must interpret in the way the sender intended. Consequently, the effective feedback system from stakeholders to university is very important component of quality improvement in higher learning institutions.

Training

Training is very important for effective implementation of Total Quality Management (TQM) within the university due to fact that it creates awareness on philosophies of TQM

Teamwork

In order to become successful in the assessment of university services and academic programs, teamwork is a key element of TQM. Teams provide more permanent improvements in processes and operations. In teams, people feel more comfortable bringing up problems that may occur, and can get help from other workers to find a solution and put into place.

Quality assurance policy and Guidelines

The assessment of university services and academic programmes need to be based on a clear and well defined foundation. In order to achieve its objective, it is necessary that the assessment of services and academic programmes were systematic and transparent as well founded in well defined concepts and guidelines. The projected have helped the participated universities in East African Region to adopt the consistent and comprehensive assessment tools and methods which were developed by the University of Alicante. This indicates the need of having effective tools for services and academic programme assessment at university level.

Documentation

Credibility of assessment is closely linked to the extent to which careful documentation is used to form the basis for conclusions and recommendations. The services units and academic programmes must be able to accept the basic evidence on which the conclusions and recommendation of the experts rest.

SELF-ASSESSMENT OF UNIVERSITY SERVICES

1. Methodology

The EFQM excellence Model is the best well known and used European quality management model both by private and public enterprises, 12 out of 15 leading European Business enterprises are using it as a day to day to management model, it also used by the European Commission and more and more universities are using it worldwide to improve their key performance results. The present section of this guide has been created to provide East-African Universities a practical methodology on how to implement the EFQM model in a university service.

This methodology is the result of the participative workshop which took place in Mzumbe University in Tanzania in May 2009. During the workshop partners institutions adapted the EFQM questionnaire to the context of East African HE Institutions. The EFQM questionnaire is a major output as it will serve a basis to perform the self. Once adapted to the reality of East African HE Institutions the model can be used as benchmark for other East African University.

This methodology is structured in three parts:

- The EFQM Questionnaire for the assessment of the University Services
- Complementary tools for the assessment: Employee and Users satisfaction
- Improvement plan protocol
- Annex. How to use the Excel tables

The assessment of the University services requires the involvement of the responsible for the internal quality assurance in the university as well as the participation and commitment of the people working on day to day bases in the services or services. In order for the process to be successful East-African Universities must take the responsibility to conduct their own analyses and carry out the planning of the

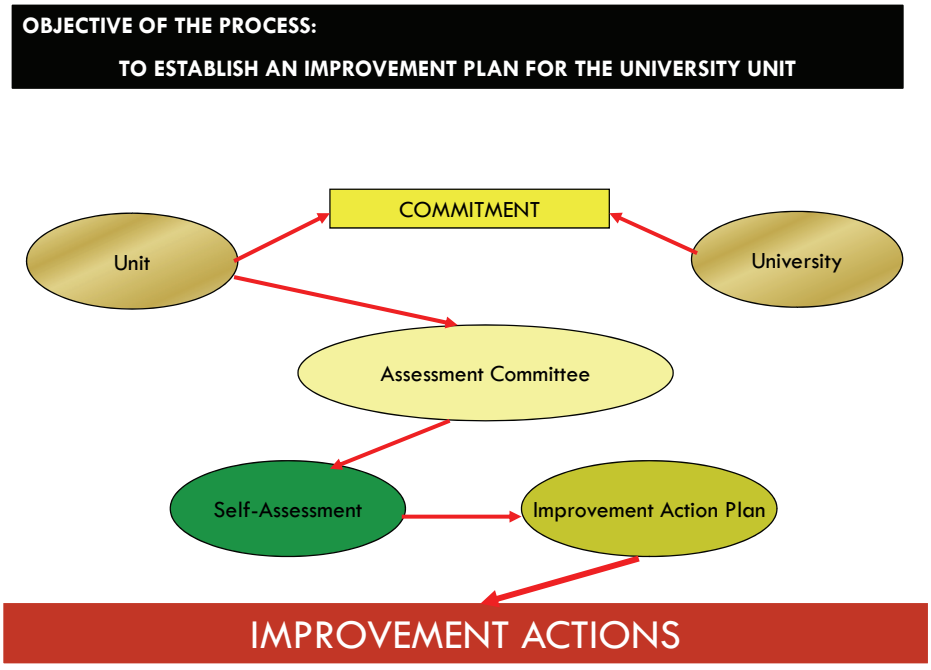
self-assessment. The result of the exercise will be to underline the strengths and areas for improvement and to provide actions plans to raise quality levels.

Once the self-assessment is performed, an external self-assessment team will be take place in order to analyze the assessment report and help establishing the priority list of improvement actions.

1.1. The internal self-assessment methodology

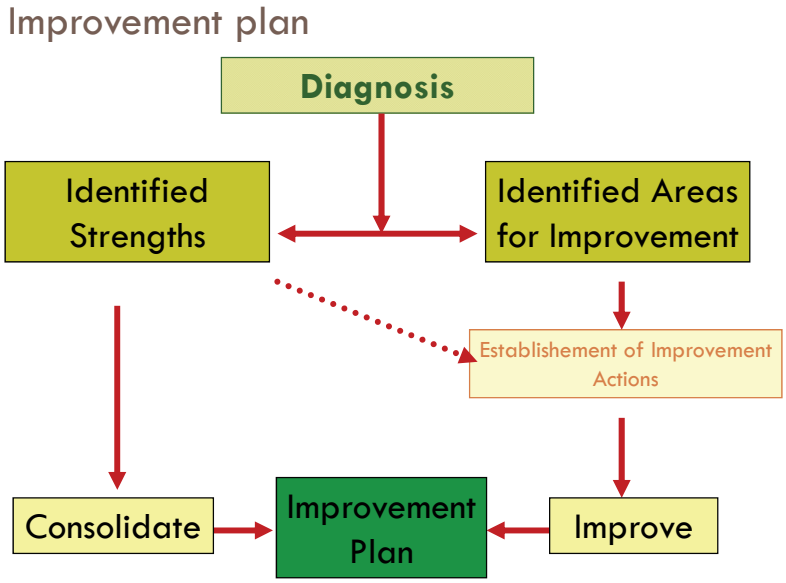
The first step to start a self-assessment process is to get the commitment from the university management team and especial of the Chancellor and Vice-Chancellor. Thereafter the university needs to identify which Service will have to participate in the assessment; this could be done based on a strategic analysis of the university priorities or on voluntary bases for the service to participate.

Depending on the size of the Service to be assessed an Assessment Committee is established that will be responsible for carry out the assessment and make the Self-Assessment report and Improvement Action Plan.



1.2. The improvement Plan

The improvement plan will be based on the diagnosis made with the help of the questionnaires: EFQM Model, Employees satisfaction and Users satisfaction. One the results are analyzed with the Excel sheet provided to carry out this exercise, the Assessment Committee will identified the strengths and areas for improvement that will be consolidated or improve. This will lead to the Improvement Action Plan.



1.3. Self-Assessment Tools

The self-assessment is based on three questionnaires; the EFQM questionnaire being the most important tool. The EFQM questionnaire is based on the 9 criteria of the EFQM model and provides a clear insight into the service quality assurance maturity level. The Employees and Users satisfaction questionnaire are use to know the satisfaction level of the persons working within the service and of the users of that particular service. The three tools lead to self-diagnosis and understanding:

- Self-Assessment Questionnaire (based on EFQM model)
- Employee Satisfaction Questionnaire
- User Satisfaction Questionnaire

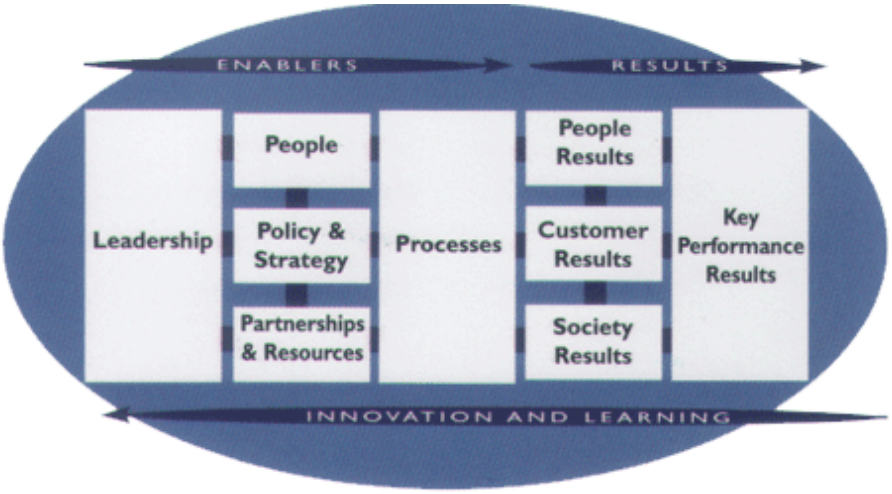
1.3.1. The EFQM self-assessment Questionnaire

This questionnaire aims to evaluate a Service from your university. It has been designed to help your Service to know its level of excellence. It is based upon the EFQM Model which is a framework for assessing organizations, it is the most widely used organizational framework in Europe.

This questionnaire is developed following the nine CRITERIA of the EFQM Model:

Enablers: 1-Leadership, 2- Policy and strategy, 3-People, 4-Partnerships and resources, 5-Processes

Results: 6-People Results, 7-Customer Results, 8-Society Results, 9-Key Performance Results.



Two answers must be provided for each question:

- **I** is the importance that the question has, in your opinion, within the Service
- **D** is the actual maturity level of the question within your Service

In order to facilitate the application of the questionnaire, there are only four possible answers for each question. When evaluating the importance of **« I »:** 1 means that it is not relevant, 2 means that it has some relevance, 3 means that it is relevant, and 4 means that it is very relevant; for the assessment of the development of **« D »:** 1 means that the question is not or little implemented in the Service, 2 means it is implemented sometimes, 3 means it is often implemented, 4 means it is often or always implemented.

CRITERION 1.- **LEADERSHIP**

Excellent Leaders develop and facilitate the achievement of the mission and vision. They develop organizational values and systems required for sustainable success and implement these through their actions and behaviors.

Answers: Make your choice by marking a cross in the selected box: 1 (nothing or very little), 2 (little), 3 (a lot), 4 (completely)

Nº	*1. Questions*		1	2	3	4
1.1	Does the Service management team get involved in the drafting of the fundamental objectives of the Service?	I				
		D				
1.2	Does the Service management team create an organizational structure and a process management system that help to achieve the expected results?	I				
		D				
1.3	Is the Service management team available to the staff and involved in the reward of the efforts deployed by the employees and the teams?	I				
		D				
1.4	Does the Service management team meet students, academics and other stakeholders*?	I				
		D				
1.5	Does the Service management team get actively involved in the promotion of partnerships and improvement initiatives?	I				
		D				
1.6	Does the Service management team identify necessary changes and lead the development of changes for the improvement of the quality management system?	I				
		D				

**Stakeholders: All those who have some interest in an organization, its activities and its achievements. These may include customers, partners, employees, shareholders, owners, government, and regulators. (EFQM).*

Evidences that confirm the scoring:

Please indicate any comment that you consider relevant for the analysis of this CRITERION:

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CRITERION 2.- **POLICY AND STRATEGY**

Excellent organizations implement their mission and vision by developing a stakeholder focused strategy that takes account of the sector in which it operates.

Answers: Make your choice by marking a cross in the selected box: 1 (nothing or very little), 2 (little), 3 (a lot), 4 (completely)

Nº	Questions		1	2	3	4
2.1	Does the Service collect enough relevant data for the definition of the strategy and action plan? Does the service analyze it?	I				
		D				
2.2	Has the Service identified the key factors for its success?	I				
		D				
2.3	Has the Service identified its strategic goals?	I				
		D				
2.4	Are the strategic goals accompanied by processes, action plans, objectives and resources allocation?	I				
		D				
2.5	Does the Service analyze the results obtained in previous years and include them in the drafting of the action plan?	I				
		D				
2.6	Has your service an internal system to help you identify the moment when it is convenient to modify the strategy?	I				
		D				
2.7	Are the available financial resources estimated in order to meet the goal of the service?					

Evidences that confirm the scoring:

Please indicate any comment that you consider relevant for the analysis of this CRITERION:

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CRITERION 3.- **PEOPLE**

Excellent organizations manage, develop and release full potential of their people at an individual, team-based and organizational level. They promote fairness and equality and involve and empower their people. They care about communicating, rewarding and recognizing, in a way that motivates staff and builds commitment to using their skills and knowledge for the benefit of the organization.

Answers: Make your choice by marking a cross in the selected box: 1 (nothing or very little), 2 (little), 3 (a lot), 4 (completely)

Nº	Questions		1	2	3	4
3.1	Is the human resource strategy (recruitment, training, career progress…) based on the needs of the strategic plan and objectives of the Service?	I				
		D				
3.2	Is there a process that identifies the coherence between employees' duties and training and between the needs of the Service?	I				
		D				
3.3	Has the Service a process that involves all employees in designing and proposing improvement plans?	I				
		D				
3.4	Do employees think that they are well informed and that their opinion is taken into account?					
3.5	Is there a smooth communication among leaders and employees and between leaders and employees?	I				
		D				
3.6	Does the Service recognize and reward employees' efforts that significantly contribute to the success of the Service?	I				
		D				

Evidences that confirm the scoring:

Please indicate any comment that you consider relevant for the analysis of this CRITERION:

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CRITERION 4.- **PARTNERSHIP AND RESOURCES**

Excellent organizations plan to manage external partnerships, suppliers and internal resources in order to support policy and strategy and the effective operation of processes. During planning and whilst managing partnerships and resources, they balance the current and future needs of the organization, the common services, and the environment.

Answers: Make your choice by marking a cross in the selected box: 1 (nothing or very little), 2 (little), 3 (a lot), 4 (completely)

Nº	Questions		1	2	3	4
4.1	Has your service identified and actively involved key collaborators (persons and institutions)?	I				
		D				
4.2	Does the Service implement improvement actions based on experiences gained from the collaboration with people and external organizations?	I				
		D				
4.3	Is the impact of the collaborators evaluated in the Service performance?	I				
		D				
4.4	Are the economic resources managed with a view to achieving the objectives of the Service?	I				
		D				
4.5	Does the Service evaluate and revise the resource management model?	I				
		D				

Evidences that confirm the scoring:

Please indicate any comment that you consider relevant for the analysis of this CRITERION:

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CRITERION 5.- **PROCESSES**

Excellent organizations design, manage and improve processes in order to fully satisfy, and generate increasing value for customers and other stakeholders.

Answers: Make your choice by marking a cross in the selected box: 1 (nothing or very little), 2 (little), 3 (a lot), 4 (completely)

Nº	Questions		1	2	3	4
5.1	Has the Service defined all the processes, in particular those necessary for the development and participation of the stakeholders?	I				
		D				
5.2	Has the Service developed process indicators?	I				
		D				
5.3	Are stakeholders properly informed about the changes introduced in all the processes?	I				
		D				
5.4	Do you measure if the changes introduced in the processes have positive results?	I				
		D				
5.5	Is there a process to collect stakeholders' complaints?	I				
		D				
5.6	Do you conduct users' satisfaction questionnaire?	I				
		D				
5.7	Is there a continuous improvement of key processes of the Service?	I				
		D				

Evidences that confirm the scoring:

Please indicate any comment that you consider relevant for the analysis of this CRITERION:

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CRITERION 6.- **CUSTOMER RESULTS**

Excellent organizations comprehensively measure and achieve outstanding results with respect to their customers.

Answers: Make your choice by marking a cross in the selected box: 1 (nothing or very little), 2 (little), 3 (a lot), 4 (completely)

Nº	Questions		1	2	3	4
6.1	Does the Service assess users' satisfaction level on a regular basis?	I				
		D				
6.2	Do you consider users' satisfaction adequate?	I				
		D				
6.3	Is user satisfaction level higher than the previous year?	I				
		D				
6.4	Does a smooth communication exist between the employees and users of the Service?	I				
		D				
6.6	When a user presents a complaint, does the Service provide a prompt and adequate response?	I				
		D				
6.7	Are the users aware of all the activities of the Service?	I				
		D				
6.8	Are the activities of the Service adequately disseminated throughout the university?	I				
		D				
6.9	Has the Service identified indicators for users' satisfaction?	I				
		D				
6.10	Do you think that users evaluate in a more positive way your Service than other Services?	I				
		D				

Evidences that confirm the scoring:

Please indicate any comment that you consider relevant for the analysis of this CRITERION:

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CRITERION 7.- **PEOPLE RESULTS**

Excellent organizations comprehensively measure and achieve outstanding results with respect to their people.

Answers: Make your choice by marking a cross in the selected box: 1 (nothing or very little), 2 (little), 3 (a lot), 4 (completely)

Nº	Questions		1	2	3	4
7.1	Do you think there is a satisfactory relationship among the employees in the Service?	I				
		D				
7.2	Is your work positively evaluated within the Service?	I				
		D				
7.3	Do you think the relationship between the employees and the leaders is suitable?	I				
		D				
7.4	Are the material resources available to you adequate?	I				
		D				
7.5	Do you evaluate employees' satisfaction?	I				
		D				
7.6	Does the employee satisfaction level improve overtime?	I				
		D				
7.7	Do employees suggest initiatives for the improvement of the Service?	I				
		D				

Evidences that confirm the scoring:

Please indicate any comment that you consider relevant for the analysis of this CRITERION:

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CRITERION 8.- **SOCIETY RESULTS**

Excellent organizations comprehensively measure and achieve outstanding results with respect to society.

Answers: Make your choice by marking a cross in the selected box: 1 (nothing or very little), 2 (little), 3 (a lot), 4 (completely)

Nº	Questions		1	2	3	4
8.1	Is the Service connected with other Services within the university in order to fully coordinate its work and performance?	I				
		D				
8.2	Is the Service connected with other organizations with similar activities outside the university in order to improve?	I				
		D				
8.3	Does the Service try to reduce its consumption of utilities for example water, electricity…?	I				
		D				
8.4	Do you recycle or use recycled material?	I				
		D				
8.5	Does the Service avoid any type of discrimination and provide an easy access to disabled people and minorities?	I				
		D				
8.6	Does the Service get involved in actions of common interest for society?	I				
		D				
8.7	Does the Service give access to its facilities and/or material to other group of people besides the users?	I				
		D				

Evidences that confirm the scoring:

Please indicate any comment that you consider relevant for the analysis of this CRITERION:

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CRITERION 9.- **KEY PERFORMANCE RESULTS**

Excellent organizations comprehensively measure and achieve outstanding results with respect to the key element of their policy and strategy.

Answers: Make your choice by marking a cross in the selected box: 1 (nothing or very little), 2 (little), 3 (a lot), 4 (completely)

Nº	Questions		1	2	3	4
9.1	Does the Service measure its financial and non-financial results?	I				
		D				
9.2	Does the Service control its key indicators?	I				
		D				
9.3	Is the overall budgetary control coherent with the objectives of the Service?	I				
		D				
9.4	Is the annual action plan fully implemented?	I				
		D				
9.5	Is the timetable fully respected?	I				
		D				
9.6	Do you achieve better results when comparing with other Services?	I				
		D				
9.7	In your opinion do the users of the Service get a maximum benefit of the resources and Services offered by the Service?	I				
		D				
9.8	Has the number of users increased positively in the last three years? Please indicate the reason, in your opinion, of this increase :	I				
		D				

Evidences that confirm the scoring:

Please indicate any comment that you consider relevant for the analysis of this CRITERION:

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1.3.2. Employees and users satisfaction questionnaires

EMPLOYEE SATISFACTION QUESTIONNAIRE

Please make a cross in the answer you feel appropriate, keep in mind that 1 is when you are not or very little satisfy and 5 when you are completely satisfy.

This questionnaire will be kept confidential.

In general I found my work interesting.	1	2	3	4	5
My work requires achieving of a variety of tasks.	1	2	3	4	5
My work allows me to learn and develop new competencies.	1	2	3	4	5
To be creative is an essential asset in my job	1	2	3	4	5
I enjoy sufficient autonomy to perform my work adequately.	1	2	3	4	5
I have a great amount of responsibility to carry out the required tasks.	1	2	3	4	5
I take part in the decision taken upon the functioning of the service.	1	2	3	4	5
I am aware of the tasks required to execute out my job.	1	2	3	4	5
I am satisfied with my salary.	1	2	3	4	5
In my Service there are advancement opport. services.	1	2	3	4	5
When I perform well my job I am acknowledged.	1	2	3	4	5
My holidays and resting periods are adequate.	1	2	3	4	5
I am satisfied with my timetable.	1	2	3	4	5
My working place is convenient to perform my tasks adequately.	1	2	3	4	5
I dispose of the sufficient resources to carry out my work correctly.	1	2	3	4	5
The director of the department knows how to conduct the work efficiently.	1	2	3	4	5
The director of the department keeps good relationship with the employees.	1	2	3	4	5
I have good relationships with my colleagues.	1	2	3	4	5
In general I am satisfied with my work.	1	2	3	4	5

Please feel free to add any comment you estimate necessary:

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USER SATISFACTION QUESTIONNAIRE

Please make a cross in the answer you feel appropriate, keep in mind that 1 is when you are not or very little satisfy and 5 when you are completely satisfy.

This questionnaire will be kept confidential.

The users' timetable is appropriated.	1	2	3	4	5
The access to the service facilities is appropriated.	1	2	3	4	5
It is easy to know to whom I have to address questions or requests.	1	2	3	4	5
The personnel informs in a clear and comprehensive way over the procedures, delay and required documentation for the service required.	1	2	3	4	5
The treatment received is respectful.	1	2	3	4	5
The personnel of the service are qualified to perform the tasks required by the service.	1	2	3	4	5
The information obtained corresponds to the information required.	1	2	3	4	5
The Service offers a quick answer to the needs and problems of the users.	1	2	3	4	5
The Service offers an adequate answer to the complaints and suggestions of the users.	1	2	3	4	5
In general the service provided is satisfactory.	1	2	3	4	5

Please feel free to add any comment you estimate necessary:

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1.4. Improvement action plan

The improvement action plan is composed by the following:

- **Introduction.** Assessment Committee composition, the assessment process (steps), description of the service, the mission and vision, the objectives, the services offered, stakeholders groups.
- **Analysis of the questionnaire results.** Questionnaire sample, percentage of answers and process for collecting the questionnaires.
- **Strengths, areas for improvement and improvement activities.** List of the strengths and areas for improvement for each criterion analyzed that will serve for the definition of the improvement action plan.
- **Improvement Action Plan.**
- **ANNEXES**

Evidences that support the conclusions on strengths and areas for improvement

Report on the results of the questionnaire

1.5. Structure of a Final Improvement Action Report

IMPROVEMENT ACTION REPORT

Service assessed:

Responsible:

Address:

Telephone:

Email:

1. Introduction

1.1. Assessment committee composition and assessment process working plan:

1.2. Description of the service: Organization Chart, number of employees, physical location:

1.3. Mission and Vision:

1.4. Objectives and services offered:

1.5. Stakeholders groups:

2. Questionnaire result analysis

2.1. Questionnaire Sample

Description of the Questionnaire sample, percentage of answers and process for collecting the questionnaires:

2.2. Data collecting process

Description of the data collecting process to the different stakeholders groups:

3. Strengths, areas for improvement, improvement actions

1. LEADERSHIP

STRENGTHS	AREAS FOR IMPROVEMENT

2. POLICY AND STRATEGY

STRENGTHS	AREAS FOR IMPROVEMENT

4. Improvement plans

IMPROVEMENT ACTIONS	TASKS TO DEVELOP	RESPONSIBLE FOR THE DEVELOPMENT	Starting-Ending date	Resources needed	Indicator of progress

Annex. Analys is of the questionnaire results

In order to analyze the questionnaire an excel data table is provided. The Excel sheet is composed by three tables. Each table is used for:

- Table 1. To integrate the results of the questionnaire.
- Table 2. Automatically generated.
- Table 3. To determine the strengths and areas for improvement.

TABLE 1.Data Integration

Table 1 is used to enter the results from the questionnaire based on the EFQM Model. Each questionnaire answered has to be integrated one by one in the column I and D.

Note: I stand for Importance and D for Development.

CRITERIA	ITEM	I	D
1	1	4	3
1	2	3	3
1	3	3	3
1	4	2	1
1	5	4	3
1	6	3	3
1	7		
1	8		
1	9		
1	10		
1	11		
1	12		
1	13		
1	14		
1	15		
1	16		
2	1	2	2
2	2	3	3
2	3	2	2
2	4	1	1
2	5	3	2
2	6	2	2
2	7	3	2
2	8	2	2
2	9	2	2

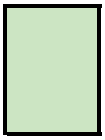
Instructions

1. Delete Actual Data

2. Add the figures of the service assessed

3. Determine the values for I and D

I_1
I_2
D_1
D_2



4. Go to the sheet Tables for automatic calculations

5. Go to Printing and proceed to the printing of the results

Instructions:

When entering the results of the questionnaire we need to complete the following instructions:

1-Delete actual data

2-Add the figure of the service assessed.

Please read the definition for Criteria and item before entering the data.

Criteria. Criteria part is divided into the different criterion of the questionnaire. There are 9 criteria in total.

Item. Item part is divided by the number of questions the EFQM questionnaire has. In this excel sheet you find 17 answers for criterion 1. You will only have to add the answers of the actual questionnaire prepared for the AfriQ'Units project. For example Criterion 1 Leadership has 6 questions, you will only have to insert the answer until question 6, Criterion 2 –Policy and strategy- has 7 questions, Criterion 3 -People- has 6 questions, and so on.

Enter the data as follows:

Enter the data of the questionnaires one by one. Remark: row 2 to 141 correspond to the questionnaire answered by the first person, the rows from 142 to 281 correspond to the questionnaire answered by a second person, and so on.

- "I". Correspond to the answer provided by each person. In this example you can see that for Criteria 1, Item 1, the "I" is graded 4 points. This means that this person consider that the question 1 is completely implemented within the service.

Note: ***1 (nothing or very little), 2 (little), 3 (a lot), 4 (completely)***

- "D". Corresponds to the answer for the development part. Follow the same logic as "I".

3-Determine the value for "I" and "D".

- The value determine for I and D will serve as standard points to identify the strengths and areas for improvement
- For this assessment the value will be 0,5. Also any question grated under 0.5 is considered as a weakness and any question grated over 0,5 as a strength
- The value is subjected to change depending on answer given by university or service

TABLE 2. Automatically generated

Information: you do not need to make any change is the table. This table is automatically generated.

CRITERIA	1

For I	I				
ITEM	1	2	3	4 (empty)	G. Total
1				1	1
2			1		1
3			1		1
4		1			1
5				1	1
6			1		1
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
G. Total			1	3	2	6

CRITERIA	1

For D	D				
ITEM	1	2	3	4 (empty)	G. Total
1			1		1
2			1		1
3			1		1
4	1				1
5			1		1
6			1		1
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
G. Total	1		5		6

Criteria 1

	Value			
Item	**1**	**2**	**3**	**4**
1	0	0	0	1
2	0	0	1	0
3	0	0	1	0
4	0	1	0	0
5	0	0	0	1
6	0	0	1	0
7	0	0	0	0
8	0	0	0	0
9	0	0	0	0
10	0	0	0	0
11	0	0	0	0
12	0	0	0	0
13	0	0	0	0
14	0	0	0	0
15	0	0	0	0
16	0	0	0	0
Total	0	1	3	2

Criteria 1

	Value			
Item	**1**	**2**	**3**	**4**
1	0	0	1	0
2	0	0	1	0
3	0	0	1	0
4	1	0	0	0
5	0	0	1	0
6	0	0	1	0
7	0	0	0	0
8	0	0	0	0
9	0	0	0	0
10	0	0	0	0
11	0	0	0	0
12	0	0	0	0
13	0	0	0	0
14	0	0	0	0
15	0	0	0	0
16	0	0	0	0
Total	1	0	5	0

TABLE 3. Result Analysis

Table 3 is automatically generated and helps to identify the item/questions that are strengths or areas for improvement.

Questionnaire Result
Service Assessed:

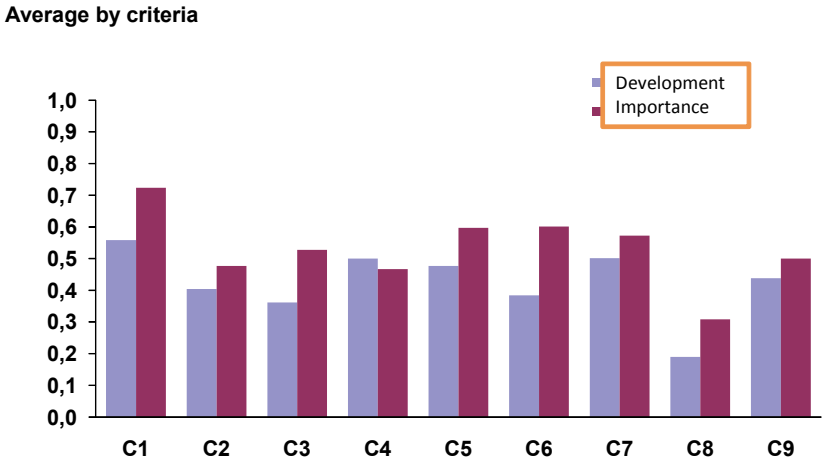
Criteria 1 Leadership

	Nº de 1		Nº de 2		Nº de 3		Nº de 4		Average		
Item	I	D	I	D	I	D	I	D	I	D	Description
1	0	0	0	0	0	1	1	0	1,00	0,67	Strenghts
2	0	0	0	0	1	1	0	0	0,67	0,67	Strenghts
3	0	0	0	0	1	1	0	0	0,67	0,67	Strenghts
4	0	1	1	0	0	0	0	0	0,33	0,00	Weakness
5	0	0	0	0	0	1	1	0	1,00	0,67	Strenghts
6	0	0	0	0	1	1	0	0	0,67	0,67	Strenghts

Criteria 2 Policy and strategy

	Nº de 1		Nº de 2		Nº de 3		Nº de 4		Average		
Item	I	D	I	D	I	D	I	D	I	D	Description
1	0	0	1	1	1	1	0	0	0,50	0,50	Strenghts
2	0	0	0	0	2	2	0	0	0,67	0,67	Strenghts
3	0	0	1	1	1	1	0	0	0,50	0,50	Strenghts
4	1	1	0	0	1	1	0	0	0,34	0,34	Strenghts
5	0	0	0	2	2	0	0	0	0,67	0,33	Strenghts
6	1	1	1	1	0	0	0	0	0,17	0,17	Strenghts
7	0	0	1	2	1	0	0	0	0,50	0,33	Strenghts

The graph “Average by criteria” provides a clear picture of the level of Development and Importance by criterion in the service assessed. It will help to identify in which criterion the service need to focus its improvement action plan.



2. Good Practices

2.1. MOI University Improvement Action Report: Examinations

2.1.1. Introduction

Assessment committee composition and assessment process working plan:

Assessment Composition

The assessment Unit committee for Examinations Unit comprised of five researchers;

Examinations Team

1. Prof. Kembo Sure- Dept. of Linguistics & Foreign Languages
2. Dr. Omar Egesah- Dept. of Anthropology
3. Dr. Harrison Maithya- Dept. of Anthropology
4. Dr. Mary Wahome (TL)- Dept. of Philosophy and Religious Studies
5. Dr. Mwaruvie- Dept. of History, Political Science and Public Administration

Assessment Working Plan

The assessment took place between 16th of November and 4th of December 2009 and this was followed by a workshop with the partners and assessors. Information from the Examinations Unit was generated by the above researchers from both staff and students. The instrument for students was self administered to a group of 184 students through their representatives at both undergraduate and postgraduate level. The SAQs were returned by an agreed upon process directly to the team leader and the two students representatives helped in the retrieval. For staff respondents, the researchers assigned to their respective sections used the same procedure above to obtain data for the assessment of the Examinations Unit. Once retrieved the SAQs were forwarded for data entry and analysis.

Description of the service: Organization Chart, number of employees, physical location:

The following functions depict the services offered by the Unit;

1. To coordinate, formulate and implement examination rules and regulations within the set standards
2. To coordinate the setting, moderation and administration of examinations
3. To coordinate release of results and official transcripts
4. Preparation, storage and issuing of certificates
5. Preparation of graduation
6. Preparation and coordination of a wide range of activities including examination timetable, registration of students for examinations, external examination and senate matters relating to examinations.

Mission and Vision:

Mission

To coordinate and provide for both smooth and quality service delivery through highly trained personnel, use of modern technology and guided by the University act and statutes.

Vision

To be recognized as a centre of efficiency in the provision of effective and quality services in all examination and related matters.

Objectives and services offered:

The services offered by the Unit are described above based on the following objective;

To enhance quality and efficient provision of services with respect to processing and administration of University examinations. This main objective is supported by six specific objectives.

Stakeholders groups:

The Unit has the following stakeholders; Students, staff, parents/guardians, sponsors, employers and potential employers, institutions and society.

2.1.2. Questionnaires Results Analysis

Questionnaire Sample

Description of the Questionnaire sample, percentage of answers and process for collecting the questionnaires:

Assessment in the Examinations Unit targeted 184 students drawn from all the four years of study plus postgraduate students and from all the 23 programs of study by sex. We obtained responses from 95 respondents. It also targeted 47 staff members drawn from Lecturers, exams coordinators, University management and examinations administrators of all cadres. We obtained thirteen staff respondents. The procedure of sampling respondents here followed the standard one for the entire assessment.

2.1.3. Strengths, Areas for Improvement & Improvement Actions

LEADERSHIP

STRENGTHS	AREAS FOR IMPROVEMENT
- The Examinations Unit management team gets involved in the drafting of the fundamental objectives of the Unit? - Examinations management team gets involved in the drafting of the fundamental objectives of the Unit, both as their obligation and for development and actualization - Likewise, the examination management team gets substantially involved in the creation of the organization structure and a process management system. The team is available to staff, they reward staff, they meet stakeholders, they promote partnerships and initiate improvement changes.	At the development level the team does not fully get involved and thus requires improvement. The level of involvement at actualization is lower than the average desired and thus there is need for improvement especially in rewarding staff and promoting partnerships.

POLICY AND STRATEGY

STRENGTHS	AREAS FOR IMPROVEMENT
The Examinations Unit analyzes results obtained in previous years and does include them in drafting of its action plans. This is observed by both staff and students. However, the students think the unit carries out this role more than staff.	Need to fully embrace the examinations strategy and action plan for example by identifying key factors for its success, focusing on its strategic goals, putting in place an internal evaluation mechanism and mobilize more financial resources. These areas of improvement are much more critical at development and actualization levels.

PEOPLE

STRENGTHS	AREAS FOR IMPROVEMENT
- The human resource strategy (recruitment, training and career progress) is based on the needs of the strategic plan and objectives of the Unit. This is confirmed by both the students and the staff. - It is notable that the examinations unit identifies the coherence between employee's duties and training; it also involves the employees in designing and proposing improvement plans. The employees in the unit also think they are well informed and their opinion is considered and that there is communication between them and their leaders. In addition, the unit recognizes employees' efforts.	- This strength is however, notably much more significant at the importance of the issues and least significant at the level of development and actualization. - There is need to improve the levels of involvement of employees in designing and proposing improvement plans and especially at the level of development - Ensure more effective communication between employees and their leaders - Provide a mechanism for rewarding staff input.

PARTNERSHIP AND RESSOURCES

STRENGTHS	AREAS FOR IMPROVEMENT
The unit has identified and involved key collaborators, for example, the external examiners and it implements suggestions from such collaborators. The unit utilizes its economic resources optimally to achieve its objectives. This position is held much more strongly by students than staff.	- Need to evaluate the recommendations made by the collaborators more critically. - Need to evaluate, revise and use the Resource Management Model - Generally, the gap between relevance of these issues and their actualization is narrower amongst students and much wider amongst the staff. So there is need to reinforce actualization especially among staff.

PROCESSES

STRENGTHS	AREAS FOR IMPROVEMENT
Stakeholders are properly informed about the changes introduced in all the processes. There is a process to collect stakeholders' complaints and to conduct user satisfaction assessment.	- There is need to improve the process of collecting stakeholders' complaints and to assess users' satisfaction - There is a further need for continuous improvement of key processes of the Examination unit

CUSTOMER RESULTS

STRENGTHS	AREAS FOR IMPROVEMENT
- The examination unit assesses users' satisfaction level on a regular basis. There exists smooth communication between the employees and the examination unit - The unit provides a prompt and adequate response to the users' complaints - The examination unit's activities are adequately disseminated throughout the university. It identifies indicators for users' satisfaction. - The users evaluate the examination unit more positively than other units	- There is need to improve the process of assessment and making sure that it is carried out regularly - There is need to ensure smooth communication - There is need to speed up the handling of complaints - There is need to improve on dissemination of examination activities throughout the university. There is also need to improve on the identification of the indicators users' satisfaction

PEOPLE RESULTS

STRENGTHS	AREAS FOR IMPROVEMENT
- There is a satisfactory relationship among employees and their leaders and in addition, there is a realistic degree of positive evaluation and uptake of employee initiative for improvement.	- There is need to provide adequate material resources to the employees - There is need to evaluate employee satisfaction and improve employee satisfaction level - There is need to Improve on the level of development and actualization (I & D)

SOCIETY RESULTS

STRENGTHS	AREAS FOR IMPROVEMENT
- The unit is well connected with other units internally. - The unit coordinates its action of common interest with society and it shares its facilities and material with other people besides the users - The unit also does not discriminate against minorities and people with special needs	- There is need for the unit to connect with other similar organizations outside the University for benchmarking. - The is need for the unit to reduce its consumption of utilities including, power - There is need to recycle and use recycled material e.g. paper - Need to improve service for people with special needs

KEY PERFORMANCE RESULTS

STRENGTHS	AREAS FOR IMPROVEMENT
- The unit controls its key indicators and also fully implements its annual action plans including timetables.	- There is need for the unit to measure its financial and non-financial results. - There is need to harmonize the unit's objectives with its budget. - More effort is needed to actualize existing key performance indicators

2.1.4. Improvement Action Plan

IMPROVEMENT ACTIONS	TASKS TO DEVELOP	RESPONSIBLE FOR THE DEVELOPMENT	Starting-Ending date	Resources needed	Indicator of progress
C1 Leadership					
-Implement the existing examinations objectives	-Sensitize examination team to the existing objectives-Evaluate achievement of objectives	Chief Academic Officer (CACO)	Starting right away and as a continues process	- More budgetary allocation -Re-training	-Monitoring and Evaluation of both process and outcomes
-Actualization of existing plans and programs in examination unit	-Scheme to reward employees and students -Create and engage in working partnerships that benefit the Examinations Unit e.g. external examiners	-Senate -CACO -Examination administrators -PRO -HOD and Deans	Starting right away and as a continues process	-Finances -Equipment and material -Human resources -Infrastructural development	-Motivation levels in staff and students -Number of partner linkages achieved - Rate of task completion by staff - Time management Skills

C2 Policy and Strategy					
-Implement examinations strategy and action plan -Identify key factors for unit success -Focus on strategic goals -Put in place an internal evaluation mechanism -Mobilize financial resources	-Mobilize and sensitize staff to strategic planning and goal achievement -Strengthen the QA Unit for internal evaluation -Improve budget allocation for examination unit	-CACO -Finance officer -QA unit team	Starting right away and as a continues process	-Financial and material -Human resources -Training	-Evaluate the achievements gained from the strategic planning for QA
C3- People					
-Improve the levels of involvement of employees in designing and proposing improvement plans -Enhance effective communication between employees and their leaders -Lay a sound structure through which employees are made aware of the worth of their opinions	-Training and continued sensitization -Foster both vertical and horizontal models of communication -Motivate employees through recognition, appreciation and rewards	CACO CADO	Starting right away and as a continuous process	- Training and workshops -Material and financial resources - The rewards	- 75% of employees trained and reoriented -A structure for effective communication -Motivated and results-oriented employees

C4- Partnership and Resources					
-Evaluate and appropriately implement collaborators' recommendations, for example, the external examiner reports -Evaluate, revise and use the Resource Management Model -Reinforce actualization especially among staff about collaborations, objective achievement and use of the RMM	-Carry out an evaluation -Use a localized Resource Management Model - Engage staff much more	-CACO -The examinations staff	Starting right away and as a continuous process	-Financial and material resources for evaluation -Training	-Evaluation outcome -Existing and working RMM -Increased staff engagement
C5 - Processes					
- Improve the process to collect stakeholders' complaints - Assess users' satisfaction - Continuous improvement of key processes of examination unit - Create awareness in all stakeholders about the changes introduced in all the processes.	- Training of staff on complaints collection through seminars and workshops - Enhancement of communication between stakeholders and users	- CACO - Examination Officers - Staff and students	Starting right away and as a continuous process	- Finances -Human resources	-Improved communication - Action taken on complaints

C6 – Customer Results					
- Establish a process of assessment and ensure that it is done regularly - Ensure effective communication between the employees and users - Speed up the handling of complaints - Improve on dissemination of examination activities throughout the university. - Identify the indicators for users' satisfaction	- Regular assessment of user satisfaction - Institute effective communication mechanism and structures - Implement views from users, especially from the suggestion boxes - Create an examination results dissemination network (Human and virtual) - Develop a user assessment and feedback instrument, for example, the staff evaluation form	- CACO - Exam Administrators - Exam coordinators - Examiners - Students	Starting right away and as a continuous process	- Financial and material resources - Human resources - Web-based resources IT	- Continuous evaluation results of user satisfaction - An examinations coordination network
C7- People Results					
- Provide adequate material resources to the employees - Evaluate employee satisfaction - Improve employee satisfaction level - Improve on the level of development and actualization	- Mobilize and channel material resources especially working tools effectively - Conduct staff satisfaction evaluation - Motivate employees through rewards, recognition and promotion based on merit	- University management - Examination Officers	Starting right away and as a continuous process	- Financial and material resources - Human resources	- Staff motivation assessment - Adequate material and human resources

C8 – Society Results					
- The unit to connect with other similar organizations outside the university for improvement - The unit to reduce its consumption of utilities including power - Recycle and use recycled material - The unit to further take into account the needs for the disabled and minorities	- Networking and linkages with other organizations outside the university e.g. Council for Legal Education Board of Dentists and Physicians. - Regulate the use of water, power, and other consumables - Institute a culture and practice to recycle and use recycled material - Create and improve special infrastructure for the physically and mentally challenged persons.	- University management - Public Relations Officer - Users	Starting right away and as a continuous process	- Financial and human resources - Training, mobilization and sensitization	- Viable linkages - Reduced consumption and costs - visible infrastructure and recycled material
C 9 – Key Performance Results					
- Measure its financial and non-financial results. - Harmonize the unit's objectives with its budget. - **A**ctualize existing key performance indicators	- Regular unit financial audit - Regular financial reconciliation in line with activities and objectives of unit - Transform plans and strategies into action results	- CACO - Finance Officer - Unit's Head	Starting right away and as a continuous process	- Financial and human resources	- Umpteenth audit report and financial reconciliatory reports

2.2. MZUMBE University Improvement Action Report: Students Welfare

2.2.1. Introduction

Self-assessment against a respected, credible, and well-established excellence model is a useful and important way of improving organizational performance. Self assessment is carried out by organizations and unit themselves. This allows them to have a high level of 'ownership' of the processes involved, and a high level of confidence in the results.

Self-assessment also provides:

- A common structure and language for analyzing and discussing organizational performance
- A way of identifying areas of organizational strength, and areas which require improvement
- A way of prioritizing the areas that need improvement – which can then become a key input into the "situation analysis" and subsequent phases of strategic planning
- Numerical scores for performance in particular areas, and an overall score
- A way of measuring and analyzing the progress that is being made in the areas that need improvement, and how effective planned actions have been in achieving this
- A way of comparing (or 'benchmarking') the performance of the organization or unit over time; and
- A way of comparing the performance of the organization or unit with the performance of other organizations in particular areas (although this must be done with care)

Self Assessment Objectives

The self-assessment objectives for the students'accommodation service were to:

- Become familiar with the self-assessment process and gain some experience in applying it

- Use the self-assessment process to provide input to the situation analysis and subsequent review of the current action planning (2009/2010)
- Provide a basis for measuring and analyzing the progress that is being made in the priority areas that have been identified as needing improvement, and how effective planned actions have been in achieving this
- Provide a benchmark for assessing the performance of the Unit and plan for improvement

The EFQM Business Excellence Model

The European Foundation for Quality Management (EFQM) Business Excellence Model was first introduced in the early 1990's. It was revised extensively in 1999. It has been used extensively by private and public sector organizations in the United Kingdom and many other European countries.

The model is part of a wider tradition of awards, models and standards for organizational quality that includes the Deming Prize and the Malcolm Baldridge National Quality Award.

The EFQM model is a non-prescriptive framework based on the eight fundamental concepts of:

- Results Orientation
- Customer Focus
- Leadership and Constancy of Purpose
- Management by Processes and Facts
- People Development and Involvement
- Continuous Learning, Innovation and Improvement
- Partnership Development
- Public Responsibility

Model Criteria and Weightings

The model includes nine criteria and 32 sub-criteria. During the self-assessment process each of these criteria is assessed in terms of current importance to the organization, strengths and areas for improvement, and a score. The scores for the various criteria are then combined to arrive at a total score.

Five of these criteria are ENABLER criteria – Leadership, Policy and Strategy, People (i.e. staff of the organization), Partnerships and Resources, and Process. The other four criteria are RESULTS criteria – Customer results, People results, Society Results, and Key Performance results. A schedule of the sub-criteria within each criterion is attached as Appendix Two.

The scoring system that is used as part of the self-assessment process uses a system of weightings. This means that:

- 50% of the total score is provided by the ENABLER criteria, and 50% of the total score is provided by the RESULTS criteria
- Within this each of the nine criteria has its own weighting. Customer results has the highest weighting (20% of the total score) and Society Results has the lowest weighting (6%)

Self Assessment at the Unit:

A self assessment workshop was organized at the Unit in September 2009 for members of the Unit Management Committee and selected data collectors from each section. The workshop was followed by data collection exercise based on the identified themes of the EFQM Model. This was followed by processing of the data and subsequent self actual assessment exercise by the Management Committee based on the data collected.

Assessment committee composition and assessment process working plan:

The assessment committee for the students' welfare department composed of four persons namely Mariam Mattao Ngowi (Dean of students), Alphonce Kauky (Assistant Dean of Students), Elia Kamihanda (Minister for students' accommodation) and Ziada Mgumila (General Secretary for students' organization MUSO). The Dean of students and the assistant Dean of students represented the providers of the service while students represented the users of the service.

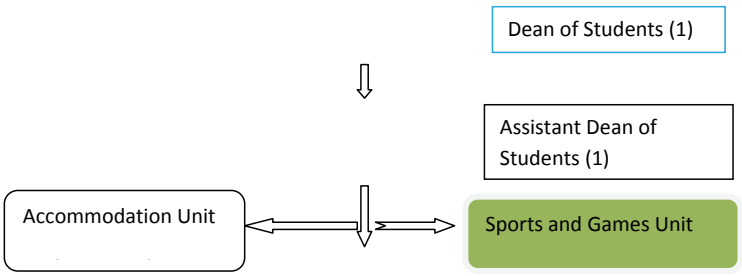
The process of assessment started by orientation seminar that was conducted by members of quality assurance unit to the department committee for the purpose of creating awareness about EFQM model for self assessment on 11th September

2009. Thereafter the committee called a meeting with the department staff and students representatives and explained to them about the rationale and the importance of carrying out self assessment for improvement purposes through EFQM model. Indeed the evaluation tool was well discussed. Thereafter every member was distributed with a questionnaire to fill. The respective questionnaires were filled and submitted to the Quality assurance unit for analysis on October 2009. After analysis the results were given back to the department committee for organizing this report.

Description of the unit: Organization Chart, number of employees, physical location:

The department of students' welfare provides accommodation services to both undergraduate and postgraduate students.

The department is headed by the Dean of Students and it is organized as follows



Staff Qualifications

The Dean of students and the Assistance Dean of students are holders of Master's degree in Education. Janitors' qualifications vary accordingly. The in charge Janitor holds Advanced Diploma in social work, 4 Janitors qualifies at the level of diploma in education, 1 Janitor qualify at the level of Diploma in Stores management, 1 Janitor qualifies at the level of certificate in stores management and 1 Janitor at the level of form four educations.

Mission and Vision:

The department has not developed its mission and vision yet. This seems to be one of the areas to be addressed in the improvement plan.

Objectives and units offered:

The general objective of the department is stated in the Mzumbe University Charter 2007 part VI 48 (2) ……proper, efficient and effective administration of the affairs and general welfare of the students of the university. Specifically the objectives of the department of students' welfare are to:

- Provide high quality accommodation services to all in campus undergraduate and post graduate students.
- Provide guidance and counseling services to students for their personal and social issues as well as their governing body.
- Facilitate sports and games for students

Stakeholder groups:

In order to implement the objectives effectively the department collaborates with various stakeholders. The respective stakeholders are, university management, cleaning companies, Building and Estates department, security unit and the community around Mzumbe University. The community around Mzumbe university provides accommodation for the off campus students.

Three cleaning companies for the halls of residence are outsourced. One company is responsible for cleaning inside the halls of residence. The second company is responsible for cleaning outside the halls of residence and the third company is responsible for collecting the sanitary bins.

2.2.2. Questionnaires Results Analysis

Questionnaire Sample

Sixty five (65) questionnaires were distributed randomly to both the department staff and the users. Both the questionnaires were filled accordingly and submitted

to the quality assurance unit for analysis. Specifically, eight (8) EFQM questionnaires were filled by the department staff, two (2) questionnaires by the students. Forty five (45) user satisfaction questionnaires were distributed to students to the ratio of ten (10) questionnaires for first years, ten (10) for second years and ten (10) for third years, ten (10) for the in campus masters students and five (5) for the off campus masters students. Also 10 employees' satisfaction questionnaires were filled by the department staff.

Data collecting process

Structured questionnaires of the European Foundation for Quality Management (EFQM) model were used together with employees and students user satisfaction questionnaires. Both questionnaires were self administered to Individual employees and users. Both the respondents were introduced about the usefulness of the questionnaires to the University for the Improvement of the services it provides to stakeholders. Therefore they were urged to be honest in responding the questionnaires and return them to us timely.

2.2.3. Strengths, Areas for Improvement & Improvement Actions

LEADERSHIP

STRENGTHS	AREAS FOR IMPROVEMENT
1.1 Unit Management team get involved in the drafting of the fundamental objectives of the unit	1.2 The unit management team has not created an organizational structure and a process management system that help to achieve the expected results
1.3 The unit management team is available to the staff and is involved in the reward of the efforts deployed by the employees and the teams	1.5 The unit management team has not actively involved in the promotion of partnership and improvement initiatives
1.4 The unit management team meets students, academics and other stakeholders	
1.6 The unit management team identify necessary changes and lead the development of changes for the improvement of the quality management system	

POLICY AND STRATEGY

STRENGTHS	AREAS FOR IMPROVEMENT
2.2 Key factors for the unit success established through OPRAS forms	2.5 The unit does not analyze the results obtained in the previous years and include them in drafting of the action plans.
2.3 The unit identified strategic goals through OPRAS forms, cooperate and strategic plan	2.6 The unit has not established an internal system to help in identifying the moment when it is convenient to modify the strategy
2.4 Strategic plans are accompanied by process action plans, objectives and resource allocation through action plan and budget. However OPRAS system is still new and it is not captured by employees. More training to the department staff is needed.	2.7 The available financial resources are not estimated in order to meet the goal of the unit due to the fact that the allocated funds are less compared to what was requested. The reason for this is clear - less budget allocation to the university by the Government

PEOPLE

STRENGTHS	AREAS FOR IMPROVEMENT
3.3. The unit has the process of involving employees in designing and proposing improvement plans	3.1. Training and career progression are not well done. The human resource training does not reflect the needs of the strategic plan and the objectives of the unit.
3.4. Employees think that they are well informed and their opinion are taken into account	3.2. There is no process for identifying the coherence between employees' duties and training and between the needs of the unit.
3.5. There is smooth communication among leaders and employees and between leaders and employees	
3.6. The unit recognize and reward employees efforts that significantly contribute to the success of the unit through verbal appreciation	

PARTNERSHIP AND RESSOURCES

STRENGTHS	AREAS FOR IMPROVEMENT
4.2.The unit has somehow implemented improvement actions based on experience gained from collaboration with people and external organizations like ensuring that someone is on call during the weekends	**4.1.** The unit has not identified and actively involve key collaborators (persons and institutions)
4.5.The unit evaluate and revise the resource management model through relocation of funds based on results of evaluation during the implementation of the action plan	4.2.Other lessons learned from collaborations with people and external organizations has not been implemented
	4.3. The impact of the collaborators is not evaluated in the unit performance
	4.4. The economic resources like funds obtained from accommodation services are not directed to the unit for improving the accommodation facilities instead they are directed to other university activities.

PROCESSES

STRENGTHS	AREAS FOR IMPROVEMENT
5.2. The unit has developed process indicators through the action plans	5.1 The unit has not defined all the processes, in particular those necessary for the development and participation of the stakeholders
5.3 All stakeholders are properly informed about the changes introduced in all the processes	5.5 There is no process for collecting stakeholders complaints like user satisfaction survey and suggestion box
5.4. The unit measure if the changes introduced in the processes have positive results	5.6. No user satisfaction questionnaires done
5.7.There are continuous improvement of key processes of the unit	

CUSTOMER RESULTS

STRENGTHS	AREAS FOR IMPROVEMENT
6.4 Smooth communication exist between the employees and users of the unit	6.1 The unit does not assessment users' satisfaction level on a regular basis
6.5. When a user present a complaint the unit provide a prompt and adequate response	6.2.Users satisfaction is not adequate due to the fact that more maintenance work need to be done to the halls of residence
6.6. Users are aware of the all the activities of the unit	6.3.User satisfaction is not higher than the previous year
	6.7 The activities of the unit are not adequately disseminated throughout the university
	6.8 The unit has not identified indicators for users satisfaction
	6.9 We do not think that users evaluate the unit in a more positive way compared with other units

PEOPLE RESULTS

STRENGTHS	AREAS FOR IMPROVEMENT
7.1 There is satisfactory relationship among the employees in the unit	7.4 Material resources available are inadequate
7.2 My work is positively evaluated within the unit	7.5 No evaluation to employees satisfaction
7.3 The relationship between the employees and the leaders is suitable	7.6 It is not known whether employees satisfaction level improve over time due to the fact that no evaluation done
7.7 Employees do not suggest initiatives for the improvement of the unit	

SOCIETY RESULTS

STRENGTHS	AREAS FOR IMPROVEMENT
8.1 The unit is connected with other units within the university in order to fully coordinate its work and performance	8.2 The unit is not connected with other organizations with similar activities outside the university in order to improve
8.3 The unit try to reduce its consumption of utilities like water and electricity by sensitizing the users to keep on switching off the electricity and water tapes when are not in use	8.4 We do not recycle or use recycled material
8.5 The unit avoid any type of discrimination and provide an easy access to disabled people and minorities	8.7 The unit does not give access to its facilities and or material to other group of people besides the users
8.6 The unit get involved in actions of common interest for society	

KEY PERFORMANCE RESULTS

STRENGTHS	AREAS FOR IMPROVEMENT
9.4 The annual action plan is fully implemented	9.1 The unit does not measure its financial and non financial results
9.5 The timetable is fully respected	9.2 The unit does not control its key indicators
9.6 The unit achieve better results when comparing with other units	
9.7 In our opinion the users of the unit get a maximum benefit of the resources and services offered by the unit	
9.8 The number of users increased positively in the last three years , due to increased number of students enrolled to the university	

USER SATISFACTION RESULTS

STRENGTHS	AREAS FOR IMPROVEMENT
The users' timetable is appropriated.	The access to the service facilities is not appropriated.
It is easy to know to whom I have to address questions or requests	The Unit does not provide a quick answer to the needs and problems of the users.
The personnel informs in a clear and comprehensive way over the procedures, delay and required documentation for the unit required.	In general the service provided is not satisfactory.
The treatment received is respectful.	
The personnel of the unit are qualified to perform the tasks required by the unit.	
The information obtained corresponds to the information required.	
The Unit offers an adequate answer to the complaints and suggestions of the users.	

EMPLOYEES SATISFACTION RESULTS

STRENGTHS	AREAS FOR IMPROVEMENT
In general I found my work interesting.	Employees do not fully enjoy sufficient autonomy to perform their work adequately.
My work requires achieving of a variety of tasks.	Employees do not fully participate in the decision taken upon the functioning of the unit.
My work allows me to learn and develop new competencies.	Employees not satisfied with their salaries.
To be creative is an essential asset in my job	In the unit there are no advancement opportunities.
I have a great amount of responsibility to carry out the required tasks.	Insufficient resources to carry out their work correctly
I am aware of the tasks required to execute out my job.	
When I perform well my job I am acknowledged.	
My holidays and resting periods are adequate.	
I am satisfied with my timetable.	
My working place is convenient to perform my tasks adequately.	
The director of the department knows how to conduct the work efficiently.	
The director of the department keeps good relationship with the employees.	
I have good relationships with my colleagues.	
In general I am satisfied with my work.	

2.2.4. Improvement Action Plan

Priority Areas for Improvement

Analysis of the questionnaire from the users and employees has revealed a total of 26 areas for improvement. The improvement plan is summarized here below and arranged in order of priority.

IMPROVEMENT ACTIONS	TASKS TO DEVELOP	RESPONSIBLE FOR THE DEVELOPMENT	Starting-Ending date	Resources needed	Indicator of progress
1.0 Vision and mission created	Developing mission and vision for the department	All the unit staff	3/5 -10/5/2010	Stationery Time Human Resource	Vision and mission for the department in place
2.0. Creation of organizational structure and a process management system	The unit management team needs to create an organizational structure and a process management system that help to achieve the expected results. This will be done through a meeting. University documents like strategic plan and organization structure shall be used. There after the unit organization structure and process management system shall be developed	Mariam M. Ngowi Alphonce Kauky Yohana Magongo Laurence Mahunda	10/5 -14/5/2010	Stationery Time	Unit Organization structure and a process management system in place
3.0. Quick answers to users' needs and problems	The Unit will identify problems for providing quick answer to the needs and problems of the users and rectify them.	Mariam M. Ngowi Alphonce Kauky Yohana Magongo Laurence Mahunda	1/6 to 30/6/2010	Time Human resource	Reduced number of complaints

4.0. Service level	The unit will establish standards for service provision.	Mariam M. Ngowi Alphonce Kauky Yohana Magongo Laurence Mahunda		Stationery Time Human Resource	Standard tools
5.0.Financial estimation	The unit shall priorities its activities according to the allocated funds.	All Unit staff	6/7 – 15/7/2010	Stationery Time Human resource Financial	Action plans
6.0. Development and participation of the stakeholders in the service provision of the unit	The unit will define all the processes, in particular those necessary for the development and participation of the stakeholders	All unit staff	1/7-10/7/2010	Time Human resources Financial	Number of stakeholders involved
7.0. Availability of material resources	The unit shall ensure that Material resources are available and inadequate	Mariam M. Ngowi Alphonce Kauky Yohana Magongo Laurence Mahunda	1/7 – 30/7/2010	Financial	Number of resources available
8.0. Employees not satisfied with their salaries.	The unit will establish promotion criteria. A meeting will be organized for the purpose	Mariam M. Ngowi Alphonce Kauky Yohana Magongo Laurence Mahunda unit human Resource Officer	1/7 -30/9/2010	Stationery Time Human Resource	Promotion criteria

9.0.Dissemination of the unit activities to the stakeholders	The unit will disseminated its activities throughout the university by furnishing the university website with the department activities and meet students regularly.	Mariam M. Ngowi Alphonce Kauky Yohana Magongo Laurence Mahunda	1/08 -30/08/2010	Stationery Financial Time Human Resource	University website, posters, meetings
10.0The use of accommodation funds	The unit shall work closely with the university management to ensure that funds obtained from accommodation services are directed to the unit for improving the accommodation facilities.	Mariam M. Ngowi Alphonce Kauky Yohana Magongo Laurence Mahunda University top management	30/9 – 30/11/2010	Time	Improved accommodation facilities
11.0.Process for collecting stakeholders complaints	The unit will establish clear processes for collecting stakeholders complaints like user satisfaction survey and suggestion box	Mariam M. Ngowi Alphonce Kauky Yohana Magongo Laurence Mahunda	30/9/2010 on wards	Financial, Time	Tools for collecting stakeholders complaints in place like user satisfaction survey and suggestion box
12.0. Training and career progression	The unit shall conduct Training Needs Assessment to determine gaps of the employees and budget funds for training. Specifically the employee gaps shall be identified in the evaluation process through OPRAS. Then training shall be organized either in house or long course to enable employees fill their performance gaps. After the course evaluation of the impact of training shall be conducted	All Unit staff	30/9/2010 on wards	Stationery Time Human resource Financial	Gaps for all employees, training manual, and budget plan for training

13.0. Employees advancement opportunities.	The Unit will establish advancement opportunities and solicit funds.	All unit staff	1/10 -31/12/2010	Financial	Number of opportunities
14.0. The use of previous year's performance results	The unit shall analyze the results obtained in the previous years and include them in drafting of the action plans for the next.	Mariam M. Ngowi Alphonce Kauky Yohana Magongo Laurence Mahunda	01/5 -31/5/2010	Stationery Time Human resource Financial	Performance appraisal report
15.0. Promotion of partnership and improvement initiatives	The unit management team need to get actively involved in the promotion of partnership and improvement initiatives	Mariam M. Ngowi Alphonce Kauky Yohana Magongo Laurence Mahunda	1/12/2010 on wards	Money Time Human resource	Number partnership institutions
16.0. User satisfaction survey	The unit will conduct users satisfaction survey on a regular basis and take the necessary actions for improvement	Unit management team Mariam M. Ngowi Alphonce Kauky Yohana Magongo Laurence Mahunda	20 – 30/12/2010, 30/3/2011, 30/6/2011	Stationery Financial Time Human Resource	User satisfaction tools and report
17.0. Establishment of the internal system for modifying the strategy	The unit will establish an internal system to help in identifying the moment when it is convenient to modify the strategy	Mariam M. Ngowi Alphonce Kauky Yohana Magongo Laurence Mahunda	1/1/2011 on wards	Time Human resource	Internal system in place
18.0. Insufficient resources to carry out their work correctly	The unit will solicit sufficient resources to carry out their work correctly	Mariam M. Ngowi Alphonce Kauky Yohana Magongo Laurence Mahunda	1/1/2011 – 30/6/2011	resources	Number of resources

19.0. Measurement of financial and non financial results	The unit will devise mechanisms to measure its financial and non financial results	Mariam M. Ngowi Alphonce Kauky Yohana Magongo Laurence Mahunda	20 -30/6/2011	Stationery Time	Clean financial
20.0. Employees satisfaction survey	The unit will conduct employees satisfaction survey on regular basis	Mariam M. Ngowi Alphonce Kauky Yohana Magongo Laurence Mahunda	30/6/2010 – 31/12/2011	Stationery Time	Employees satisfaction report
21.0.Collaboration of the unit with other units in the Universities	The unit will collaborate with other units in the university	All unit staff	01/5/2010 onwards	Time, Department staff	Number of collaborators
22.0. Unit networking	The unit will establish networking with other organizations with similar activities outside the university in order to improve	Mariam M. Ngowi Alphonce Kauky Yohana Magongo Laurence Mahunda	01/5/2010 onwards	Stationery Financial Time Human Resource	Number of institutions networked
23.0.Users access to the service facilities	The unit ensures that users get access to the service facilities.	Mariam M. Ngowi Alphonce Kauky Yohana Magongo Laurence Mahunda	01/3/2010 onwards	Time Department staff	Number of facilities issued to users

24.0. Employees autonomy to perform their work adequately.	The unit will establish job description (responsibilities) for each employee.	Mariam M. Ngowi Alphonce Kauky Yohana Magongo Laurence Mahunda	1/7/2010 on wards	Stationery Time Human Resource Financial	Job description
25.0. Employees participation in the decision taken upon the functioning of the unit.	The unit will involve employees in the decisions taken upon the functioning of the unit.	Mariam M. Ngowi Alphonce Kauky Yohana Magongo Laurence Mahunda	01/3/2010 onwards	Stationery Time	Minutes of meetings
26.0. Recycle and use of recycled material	The unit will advice the management to see the possibilities of recycling or use of recycled material such as plastic bottles	Mariam M. Ngowi Alphonce Kauky Yohana Magongo Laurence Mahunda	20/7 -20/8/2011	Time	Clean environment

2.3. MAKERERE University Improvement Action Report: Human Resources Directorate

2.3.1. Introduction

Assessment committee composition and assessment process working plan:

Ag. Manager, (Performance and Appraisal); Senior Appraisal Officer, Director, Quality Assurance Unit, Administrator, AfriQ'Units Project,

Description of the unit: Organization Chart, number of employees, physical location:

Location: Makerere University, Main Building

Mission and Vision:

University Vision: To be a leading institution for academic excellence and innovations in Africa
University Mission: To provide innovative teaching, learning, research and services responsive to national and global needs.
Directorate Vision: To be the provider of excellent and innovative human resource services at Makerere University
Directorate Mission: To provide an appropriate environment to execute the human resource functions at Makerere University using best practices

Objectives and units offered:

To review, redesign and implement macro and microstructure of the University to meet the University mission.
• To develop, implement and review staff performance management system in line with the University mission
• To develop, implement and review a staff welfare policy in line with the University mission
• To implement and review gender policy which addresses gender imbalances
Units Offered:
Employment Division
Staff Development & Training
Performance & Appraisal
Pensions

Stakeholders groups:

Staff:	To facilitate efficient and effective delivery of University services
Government:	For the funding and networking for best practices
The Public:	To build good institutional image and reputation through provision of efficient services
Other Public and private institutions	

2.3.2. Questionnaires Result Analysis

Questionnaire Sample

Description of the Questionnaire sample, percentage of answers and process for collecting the questionnaires:

The forms were sent to 25 Senior and intermediate staff of the Human Resources Directorate. 16 forms were completed (i.e. 64% of the forms were filled)

Data collecting process

Description of the data collecting process to the different stakeholders groups:

The forms were sent out on 3rd August, 2009 to the selected participants, but by the last week of August we had received only one completed form. We sent out reminders on 17th September, 2009 but there was still no response.

On 23rd September, 2009 we held a half day workshop to bring staff on board about the assessment programme. Participants were sensitized an:

- The essence of a Quality Assurance Policy
- Policy Highlights
- Importance of evaluation of services
- Interpretation of the EFQM Module.

Thereafter, the staff were given another set of forms and requested to complete the questionnaire and submit

2.3.3. Strengths, Areas for Improvement & Improvement Actions

LEADERSHIP

STRENGTHS	AREAS FOR IMPROVEMENT
1. Unit management team involvement in the drafting of the fundamental objectives of the Unit.	1. Avail mechanisms for involvement of Directorate staff in discussions related unit objectives Availability of Unit Management Team to staff to discuss issues and offer support.
2. Creation of the Unit management team organizational structure and a process management system that help to achieve the expected results?	2. Employee involvement in setting rewards for their efforts.
	3. Interaction of Unit Management Team with academics/staff.
	4. Interaction of Unit Management Team with students.

POLICY AND STRATEGY

STRENGTHS	AREAS FOR IMPROVEMENT
1. Unit identification of the key factors for its success	1. Unit collection of relevant data and analysis of the strategic and action plan?
2. Unit identification of its strategic goals	2. Analysis of previous year's performance results to inform the drafting of future action plans.
3. Clear statement of strategic goals together with processes, action plans, objectives and resources allocation	3. Existence of internal mechanisms that help to identify when it is convenient to modify the strategy?
	4. Availability of financial resources to meet unit goals.

PEOPLE

STRENGTHS	AREAS FOR IMPROVEMENT
1. Alignment of the human resource system (recruitment, training, career progress...) with the needs of the strategic plan of the Unit?	1. Employee perception that they will informed about the operation of the unit and that their opinion is taken into account
2. Existence of processes that identify coherence between employees duties and adequacy of training	2. Existence of smooth communication between leaders and employees.
3. Existence of a system that involves all employees in designing improvement plans?	3. Unit recognition and reward of employees' efforts that significantly contribute to the success of the Unit?

PARTNERSHIP AND RESSOURCES

STRENGTHS	AREAS FOR IMPROVEMENT
1. Identification and actively involved key collaborators (persons and institutions)?	1. Evaluation of impact of collaborators.
2. Implementation of improvement plans based on experiences gained from the collaboration with people and external organizations?	2. Regular evaluation and revision of the resource management model?
3 Existence of mechanisms to ensure that economic resources are managed with a view to achieving the objectives of the Unit?	

PROCESSES

STRENGTHS	AREAS FOR IMPROVEMENT
1. Existence of mechanisms of promoting participation of stakeholders in Unit activities.	1. Development of key performance indicators for the participation of stakeholders.
2. Mechanisms of informing stakeholders whenever changes are introduced in the processes.	2. Evaluation of the impact of the changes introduced in the processes.
	3. Existence of a system to collect stakeholders' views.
	4. Regular conduct of users' satisfaction survey.

Customer RESULTS

STRENGTHS	AREAS FOR IMPROVEMENT
1. Evidence of improvement of levels of user satisfaction in this year compared with previous years.	1. Regular assessment of levels of user satisfaction.
2. Smooth communication between employees and users of the Unit?	2. Gathering evidence of adequacy of user satisfaction.
3. Provision of prompt adequate response to user complaints.	3. Awareness by users of all the activities of the unit.
	4. Adequacy of dissemination throughout the University of activities of the Unit.
	5. Identification of indicators for users' satisfaction?
	6. Perception by users that your unit performs better than units in the University.

People RESULTS

STRENGTHS	AREAS FOR IMPROVEMENT
1. Existence of a satisfactory relationship among the employees in the Unit?	1. Adequacy of available material resources for your work.
2. Perception within the Unit that your performance is outstanding.	2. Regular evaluation of employees' satisfaction.
3. Existence of suitable relationship between the employees and Unit Leaders.	3. Continuous improvement of employee satisfaction.
	4. Empowerment of employees to suggest initiatives for the improvement of the Unit?

SOCIETY RESULT

STRENGTHS	AREAS FOR IMPROVEMENT
1. Connection of the Unit with other Units within the University in order to fully coordinate its work and performance.	1. Connection of the Unit with other organizations with similar activities outside the University in order to improve.
2. Recycling or use of recycled materials?	2. Efforts of the Unit to reduce its consumption of utilities for example water.
3. Avoidance of any type of discrimination and provision of an easy access to disabled people and minorities?	3. Involvement by the Unit in actions of common interest for society.
	4. Giving access to Unit facilities and/or material to other group of people.

KEY PERFORMANCE RESULTS

STRENGTHS	AREAS FOR IMPROVEMENT
8. Continuous increase in the number of users of the Unit	1. Measurement of Unit financial and non-financial results.
	2. Control of Unit key indicators.
	3. Ensuring that overall budgetary control is coherent with the objectives of the Unit.
	4. Full implementation of annual action plan.
	5. Full respect for the Unit time tables.
	6. Comparing Unit results with those of other units in the University.
	7. Checking that users of the Unit are getting a maximum benefit of resources.

2.3.4. Improvement Action Plan

IMPROVEMENT ACTIONS	TASKS TO DEVELOP	RESPONSIBLE FOR THE DEVELOPMENT	Starting – Ending date	Resources needed	Indicator of progress
LEADERSHIP **Staff/Management dialogue**	• Informal meetings Initiate group working tea/lunches at Divisional and Directorate level Picnics	Division Managers	monthly	Snacks, people	• Increased interaction between staff and Management • Reduction of rumour mongering • Fewer can plan about appraisal
	• Annual Staff Retreat	Secretary Director's Office	20th – 23rd June	Shs. 15 million	
	• Conduct Regular meetings	Division Managers rotating	monthly		
Rewards Setting	• Set up Performance Management Committees to evaluate performance and rewards	Performance Manager		Paper flipchart 4 people Time	• Better presentation of Human Resources issues from Heads and staff • Better exchange of ideas • Amicable settlement of Human Resources issues

Faculty Visits by Directorate of Human Resources	Faculty visits programme	Director	1st July to 30th July		
POLICY & STATEGY **Collect data,** **Analyze it, action** **Planning and Budgeting**	• Recruit Senior Organizational Development Officer • Ensure key result areas cover this aspect • Conduct Regular Meetings. • Implement decision made	Director Human Resources		• Salary for Officer • Computer • Office • Stationery	• At least ¾ of Budget financially supported • Staff recruited • Directorate of Human Resources' data collected and analyzed
Evaluation of collaborators impact	• Identify collaborators of the University. • Study Previous reports from collaborators • Prepare action plan • Implement action plan	Director and Manager Organizational Development	June – August 2010	Computer Stationery	Lessons learnt from collaborations implemented
Stakeholders participation	• Identify stakeholders • Develop a system to seek stakeholders views • Develop key performance indicators		Manager Staff Development		

CASE STUDIES

1. Report on the external evaluation of the study programme 'Gender Studies and Development – Master of Arts' by MOI University

The external evaluation of the study programme Gender Studies and Development (Master of Arts) at the School of Arts and Social Sciences of Moi University, Eldoret, Kenya, took place as one activity in the frame of the project "Sustainable Quality Culture in East African Institutions through Centralized Units" (further on referred to as AfriQ'Units).

AfriQ'Units was set up because in Kenya, Tanzania and Uganda, as in many African countries, HE has witnessed a long period of relative neglect and stagnation while experiencing escalating enrolments, declining resources, deteriorating infrastructure, and a decline in the quality of teaching. In particular, the increased number of students while resources remain unchanged or diminish compromises the quality of the Universities missions, visions and the quality of teaching and therefore accelerates the pressure for attaining systematic and comprehensive quality assurance systems. To tackle these issues, the project will increase regional cooperation in academic quality assurance, support the development of a coherent quality assurance policy and strengthen the implementation of integrated quality units within the three East African universities.

To this end, the project has the purpose to strengthen the institutional capacities of three East African Universities and to train their management and administrative staff to implement the quality assurance policy, apply the models for assessment of academic programmes and institutional services as well as to manage quality office within the universities. This will be achieved through institutional cooperation and sharing of knowledge between Moi University in Kenya, University of Makerere in Uganda, and University of Mzumbe in Tanzania. The partnership is supported by the

expertise of the University of Alicante in Spain, the German Accreditation Council, the Inter-University Council for East Africa (IUCEA), and the African Association of Universities (AAU). AfriQ'Units is a project co-funded by the European Union in the framework of the Edulink Programme.

The first phase of the project targeted the assessment of select service units including Examination, finance and Student Affairs units. The second phase targeted the assessment of two selected programmes. The following steps applied:

1. Self assessment of the programme by a select team of assessors from within the institution
2. External assessment by a team designated by the overall project coordinator from Alicante
3. Development of reports in which should be a clearly articulated enhancement/ improvement action plan.

The assessment is guided by the details as presented in Chapter Two of the *AfriQ'Units Guide for the Academic Programme Assessment in East African HE Institutions.* In this guide are specified criteria, sub-criteria, indicators and related tables of indicators for reference in the assessment.

This report presents the findings of the external assessment by a group of experts. The findings are based on the analysis of the self assessment report and the discussions during the site visit which took place at the premises of SASS

GENDER STUDIES AND DEVELOPMENT PROGRAMME (GSD)

The Gender Studies and Development (GSD) is a new Postgraduate Degree Programme that was first implemented in 2008. The aim of the programme is to qualify graduates School for work in the public, non-governmental and private sector(s), in particular to carry out research and disseminate findings and knowledge acquired in gender studies and development to the Kenyan community and beyond. In addition, some if not all should proceed to Doctoral studies.

The programme is unique in that it is contributed to by all the disciplines hence departments in the School. It therefore has been accorded central coordination through the office of the Dean.

FINDINGS

The external assessors thank Moi University for providing them with a comprehensive and assessable self assessment report which was informative as well as analytical and thus forms a sound basis for the external assessors to reach their own conclusions. The external assessors also thank Moi University for the hearty hospitality during the site visit and especially the frank discussions which took place in an atmosphere of openness and collegiality.

Nevertheless it is worth mentioning that the external assessors would have preferred to receive the self assessment document before the site visit took place, which would have made it easier to understand the specificities of the programme.

THE SELF ASSESSMENT PROCESS

In accordance with the AfriQ'Units 'programme assessment guide Moi University appointed an assessment team for conducting the internal assessment which consisted of 9 members and comprised all relevant groups within the university, such as management, teaching and administrative staff, students and the quality unit.

The assessment team adapted the guide to the specific needs of the programme and in order to make it handier.

The assessment exercise was guided by the set criteria and sub criteria on the areas of evaluation. The main areas are presented here in summary:

1. Education programme
2. Teaching Organization
3. Human resources
4. Material Resources
5. Education process
6. Results

The team felt it was necessary to develop a Questionnaire instrument in order to elicit both quantitative and qualitative data from the stakeholders, mainly students from the two programmes, staff handling the two programmes, service providers to the two programmes and the administrators who included the Heads of Department, Dean, and support staff in the relevant HOD offices and the Dean's office.

The experts comment Moi University for a sound and comprehensive self assessment exercise which enabled the self assessment team to draw conclusions from the gathered information and data and.

FINDINGS AS REGARDS THE CRITERIA

Educational programme

- Aims of the educational programme
- The aims of the educational programme are defined and include knowledge and skills that the students should have when they finish their studies.
- The educational programme specifies the admission profile that students must fulfill and has mechanisms in place that make it possible to know the admission profile of the new students.
- Studies plan and its structure
- The structure of the studies plan is well defined, when it comes to the distribution of the subjects, and their horizontal and vertical linking, and it avoids blank or duplicated areas.
- The subjects' programme that constitutes the studies plan contains the necessary basic elements and is accessible and public.
- The studies plan is coherent with the aims of the educational programme and with the graduate profile.
- The review and updating of content is carried out regularly and systematically.
- The student learning time outlined in the studies plan makes it possible to comply with the aims of the educational programme.

AIMS AND ADMISSION

Evidence

The aim of the GSD is to prepare students for talking up positions in the public, non-governmental and private sector(s), in particular to carry out research and disseminate findings and knowledge acquired in gender studies and development to the Kenyan community and beyond. In addition, some if not all should proceed to Doctoral studies.

As regards the admission criteria for prospective students the Moi University Senate approved requirements for a Masters Degree applies. In addition the applicants must have obtained a first degree at Bachelor level in the relevant field, either from Moi University or another accredited HEI.

Evaluation

The learning outcomes of the programmes are described at a rather general level and may be more specific. The School should publish the set aims and objectives as soon as possible, since they have been adopted already by the Senate. The incorporation of into the University calendar and the School prospectus would give prospective students and wider public better opportunities to inform themselves about the programme.

The admission criteria as regards the profile of students are rather general. The refer to related disciplines without naming them or giving examples. Although a programme on Gender studies may well have a broad approach prospective students should know more about which type of first degree would fit content wise and thus foster the attainment of the expected learning outcomes of the programme.

STUDY PLAN

Evidence

The study plan and its structure is unique in drawn from various departments from SASS since this is a interdisciplinary programme which is not located in a specific department but the responsibility lies directly with the Dean under which a programme coordinator for the GSD is carrying out the daily work. The study plan is, as also the self evaluation showed, well prepared and transparent to students, as documented in the programme description which lists all relevant regulations, course description, student workload divided into presence and private study, assessment methods and regulations, and the time table.

The School has in place various means to evaluate continuously the content of the programme, and also the credit system. However, the programme started only in 2008 and is in his second year, thus no comprehensive evaluation has been made so far.

Evaluation

Proven evidence at the site visit demonstrated that the structure of the GSD studies programme is well defined which also counts for the distribution of subjects in terms of their horizontal and vertical linkages.

TEACHING ORGANIZATION

- Management and planning
- Those in charge have defined the planning of the educational programme which includes instruments and actions for continuous improvement management and actions.
- Management and organization
- The educational programme is communicated and published.
- The organization of the teaching fits in with the aims of the educational programme.
- The results of the educational programme, the graduate results, the academic staff results and the results in society are taken into account in the improvement and review of the educational programme.

In according with general regulations of the university PSA programme has been planned by the responsible persons and bodies which comprise:

1. Course lecturer
2. Programme coordinator
3. School Graduate Studies Committee Coordinator
4. Heads of Departments from which courses for the programme are sourced
5. Dean of School
6. School's board of examiners
7. Graduate Studies Academic committee
8. Senate

Within these persons and bodies the definition of learning outcomes, the allocation of courses to lecturers, the weighting of courses, the marking etc. are clearly assigned.

The department has implemented a variety of means for analyzing results of the programme. These include adherence to set indicators such as CATS, term papers and examinations that are periodically administered and graded. Control mechanisms such as moderation and external examination further enhances the quality assurance. Specific attention is drawn to the fact that departmental processes of moderation and control have to be taken into account in order to avoid duplication.

Individual mark-sheets are kept at the Departmental office and copies submitted to the Dean's office. The Dean's office prepares a consolidated mark sheets for each student. The results are then discussed at the School Graduate Studies examiner's board and finally sent to senate for approval.

Evaluation

The management of the programme follows clear roles which are given by the regular university regulations. Experts came to the conclusion that, although the responsibilities and the processes are clear, the organization of the processes needs attention, since often they take too long, which leads to lack of information in time. The School is well aware of the specific challenges which arise from the specific organizational structure of a programme that is sourced by various departments.

HUMAN RESOURCES

- Academic staff
- The academic staff has adapted to the aims of the educational programme and to its requirements and disciplines.
- The academic staff is involved in research, development, and innovation activities and these have repercussions in the educational programme.
- Academic staff and services
- The administration and services staff involved in the educational programme are appropriate to its requirements.

Evidence

The GSD does not have own academic staff. It is served by 17 lecturers who come from throughout the School. At the point of time of the evaluation two full professors, two associate professors, PhD holders and 3 Masters Holders were among the staff participation in teaching and student assessment.

The administrative functions are carried out partly by the Dean's office, in particular the programme coordinator and partly by administrative staff from the participation departments.

As regards qualification of staff and staff development: The qualifications of staff range from holders of masters' degrees up to post doctoral qualifications. The de-

partment has in place policies to promote staff which complies with the respective policy defined by the senate. Additional sources of information for enhancing the performance of staff in teaching (and research) are student evaluation of courses.

The academic staff is involved in collaborative research, attends workshops. This also counts for local and international collaborations with non-university partners.

Evaluation

In general one could conclude that the staff situation is adequate since the programme can always rely on staff of the participating departments. However this also causes dependencies on the staff developments at the departmental level. It is therefore highly recommended that the programme gets underpinning by own academic staff. This is important for a second reason: The delivery of the programme according to its specific underlying idea may be guaranteed much better by specifically employed staff.

General means for training staff are in place. However there's no clear picture whether these means serve the specific needs for the GSD programme.

It is to comment that the school runs its own journal, MAARIFA, which is a good mean to translate research activities, papers presented at workshops, etc to the department and thus to students as well. In line with this staff should strengthen its activities to translate the research work and its outcomes into daily teaching in the programme. One mean may be involvement of senior students in research projects.

MATERIAL RESOURCES

- The classrooms used in the educational process and the equipment in these are appropriate for the number of students and the activities programmed in the educational programme.
- The spaces used for student work and study, as well as the necessary equipment for these tasks, are appropriate to the number of students and the activities programmed in the educational programme.
- The spaces and the equipment are appropriate for developing and coordinating the functions of the academic staff and the administration and services staff.
- The contracted infrastructures used for external practicals are appropriate to the number of students and to the activities programmed in the educational programme.
- The laboratories, workshops and experimental spaces, as well as the equipment necessary for working in these is appropriate to the number of students and the programmed activities in the educational programme.
- The library and reading rooms infrastructures are correctly furnished and have sufficient space and timetables to satisfy the needs of the educational programme.
- The quantity, quality and accessibility of the information contained in the library and document banks are appropriate to the needs of the educational programme.

Evidence

Due to the specific type of the programme, more seminars that practical classes, there's no need for large numbers of classrooms. The rooms that are used for seminars are dived between the SASS building and additionally hired space in the town. The library offers large numbers of reading space which is shared by all students and which is to be considered adequate.

Evaluation

As regards material resourced much of what counts for the whole School also applies for the GSD programme: Number of class rooms, furniture of class rooms in particular, work space for students, IT facilities and equipment of library are not satisfactory.

As regards reading materials the requested text books are stored inadequate numbers. However additional literature seems to be a weakness. The School may evaluate whether specific processes have to be implemented in order to be able to take into account the needs of students which are enrolled in a programme which is not run by a department.

As regards rooms one has to emphasize that the division of used rooms between the SASS building and space in town means a lot of time invested to move from one to the other. The School should consider whether it would be feasible for this rather small student population to have the courses concentrated at one place.

EDUCATIONAL PROCESS

- Student assistance and integral training
- Student capture is in line with the admission profile.
- Student welcome actions orientate them to the functioning and organization of everything related to the educational programme.
- Support programmes are developed that are orientated towards improvement in student learning.
- The student professional orientation programmes facilitate graduate insertion into the labour market.
- The tutorial action programme orientates and motivates the students in matters related to the educational programme and the organization of their curricular itinerary.
- Activities for the integral training of the student are consistent with the aims of the educational programme and help it to achieve its aims.
- Teaching-learning process
- The methods and techniques used in the teaching-learning process allow the aims of the educational programme to be achieved.
- The learning evaluation process is consistent with the aims of the educational programme and with the teaching-learning methodology.
- The professional internships in companies and institutions are consistent with the aims of the educational programme.
- The periods of time that the students spend in national and international institutions are consistent with the aims of the educational programme, and recognized in curricular terms.

Evidence

Student welcome actions consist mainly of a one week exercise that should introduce the student to the general and specific aspects of university running and the programmes to which they should be exposed including interaction with various service units and service personnel. The orientation programme covers aspects of registration, accommodation, finance, and use of the library, health, games, sports and actual placement in academic programmes. The new students have the opportunity to meet management of department, faculty and University and also the student's representatives.

Since GSD is a relatively new programme no additional support programmes are in place yet.

The teaching process is characterized by a variety of applied teaching and assessment methods: Besides mainly seminars the programme offers in particular field attachments on basis of defended proposals which are evaluated by both internal supervisors and by the supervisor at the place of attachment.

Evaluation

The programme focuses on seminars and discussion work in addition to own projects which is adequate for a Masters programme. In particular the great emphasis on the work as basis for the thesis is to be commented as good practice in particular in order to get acquainted with future working conditions.

RESULTS

• The student finishes her studies in the time planned within the educational programme.
• The student is satisfied with the educational programme
• Graduate results
• The profile of the graduate matches the graduate profiles outlined in the educational programme.
• Academic staff results
• The academic staff is satisfied with the educational programme.
• Results in society
• The satisfaction of employers and other groups of interest with the knowledge and skills of the graduates.
• The activities that link the educational programme with society in the national and international realm produce results. Aspects to evaluate to check compliance with the sub-criterion

Since the programme is only in its second year it's too early to evaluate it against this criterion.

2. Self Assessment of Academic Programmes at the Faculty and Nature Conservation by Makerere University

Background

- Two programmes were assessed:
  - B.Sc. in Conservation Forestry and Products Technology
  - MSc Forestry
- The Programmes have over the years generally registered declining enrolment of students and not undergone a systematic review
- Some questions have been previously raised by the employers about the quality of graduates

- It was envisaged that the assessment
  - would serve to improve the attractiveness of the programmes
  - and improve the effectiveness of the Faculty in providing the required training to satisfy stakeholders.
- It was the first time that an assessment of this nature was been conducted in Makerere University
  - and it was therefore desired that the lessons learned would be used to roll out the method of assessment to the rest of the University

The Assessment Committee

- The persons responsible for the programmes: the Postgraduate tutor and the Deputy Dean
- Members of the teaching staff
- An administrative member of staff (Dean)
- Two MSc. Students
- Members of the Quality Assurance Unit

The Assessment Process

- The assessment closely followed the guidelines in the AFRIQ'UNITS guide for academic programme assessment
- It was ensured that the committee understood the assessment criteria and was clear about the objective of the exercise
- This was necessary for ensuring that an objective assessment was undertaken without focusing on finding faults

Overview of results of the assessment

- **The assessment was comprehensive covering probably all aspects of the programmes i.e.**
- Educational Programme
  - Aims of the educational programme: generally not clearly stated
  - Study plan and its structure: revealed some overlap in content and inadequate coordination mechanisms
- Teaching Organization
  - Management and planning: structures existed but not publicized
  - Management and Organisation: monitoring and control mechanisms not documented
- Human Resources
  - Academic Staff: strength in terms of numbers and level of training
  - Administration and Services staff: training levels of technical staff generally not tailored to needs of the programme

- Material Resources
  - Classroom: sufficient for BSc but inadequate for MSc
  - Laboratory and workshop: ill equipped
  - Library and books available: inadequate
- Educational Process
  - Students care and integral training: insufficient
  - Process of teaching-learning: not adequately evaluated
- Results
  - Results of the educational programme: mechanisms exist but not sufficiently operationalised
  - Graduate Results: No regular feedback on their satisfaction
  - Academic Staff Results: only informal mechanisms of assessing dissatisfaction
  - Society Results: monitoring system not operationalised

Areas of improvement

- Strengths, weaknesses and 13 broad areas of improvement were clearly identified in the Improvements plan i.e.

1) Teaching and learning
2) Research and innovations
3) Outreach
4) Organisation and management
5) Quality assurance
6) Human resources
7) Library services
8) Information and communications technology
9) Laboratory services
10) Staff and students support services
11) Physical Infrastructure and Development
12) Resource mobilization, investment and financial management
13) Internationalization

A monitoring plan with responsibilities was developed

Outcomes

- The tool provided an objective opportunity for the programmes to be assessed: hence the team was honest
- It enabled the assessment of other aspects that influence the effectiveness of the programmes e.g. the student support services
- It enabled the student participants to provide their inputs aimed at improving the programmes

Impacts

- There was an increase in the number of students enrolled after review of the BSc programmes
- The staff are aware of the need to address various weaknesses identified e.g. providing time for students to conduct individual study
- Staff are also aware about the importance factors such as student support services for purposes of learning
- The assessment team is now equipped with skills of carrying out a similar assessment (within Makerere and probably other Universities)

Acknowledgement

- The AFRIQ'UNITS Project
- The DVC AA's Office
- The Quality Assurance Unit
- The Assessment Committee

ANNEXES

1. The Guide for the Academic Programme Assessment in East African HE Institutions

PREFACE

The *Sustainable Quality Culture in East African Institutions through Centralized Units* project (AfriQ'Units) was designed to facilitate regional cooperation in academic quality assurance, support the development of a coherent quality assurance policy and strengthen the implementation of integrated quality units within three East African universities located in Kenya, Tanzania and Uganda. To achieve this, AfriQ'Units focuses on training their management and administrative staff to implement the quality assurance policies, apply the models for assessment of academic programmes and institutional services, as well as to manage quality offices within the universities. The project counts on the institutional cooperation and sharing of knowledge between Moi University in Kenya, the University of Mzumbe in Tanzania and the University of Makerere in Uganda. Other contributing partners in the AfriQ'Units project are the Inter-University Council for East Africa, the African Association of Universities, the German Accreditation Council and the University of Alicante. Once the project is completed, these universities are expected to be capable to perform continuous assessments and monitoring of their performance, both concerning their services and programmes, identify gaps and difficulties to be overcome as well as to implement improvements.

The Guide for the Academic Programme Assessment in East African HE Institutions

Aims to provide a useful handbook to conduct a self-assessment of degree programmes and to facilitate the drafting of an improvement plan, as part of a practical exercise in the process of quality assessment. In order to carry out the assessment

process, the following activities need to be performed by each of the partner Q-Units:

1. Formalization of the institutional commitment by the university Dean
2. Planning of the assessment timetable and distribution of the tasks
3. Assessment process: Analyze the situation in terms of relative quality of the degrees and study programme based on the information collected from the indicators
4. Description of the situation utilizing the model of Institutional Assessment Programme
5. Identification of strengths, areas for improvement and improvement plans
6. Drafting of the assessment report

We hope that the work carried out within the framework of EDULINK will be useful for the East African university communities as a practical tool for the assessment of the universities study programmes and services.

This guide is structured in three parts:

1. A methodology for the self-assessment of a degree programme exercise following a five-step-process.
2. An institutional evaluation model developed by the Spanish National Agency for Quality Assessment and Accreditation (ANECA).
3. An improvements plan work tool to be implemented once the evaluation has been completed. This work tools has also been prepared by ANECA.

Further information can be found in the AfriQ'Units project's website at the following link: http://www.afriqunits.org.

1. The self-assessment methodology

1.1 Introduction

The self-assessment process of a degree programme may vary to some extent in terms of structure and organization due to national specificities but, by and large, it can be described as a five-step-process which comprises the following steps:

- Preparation
- Collecting information
- Analyzing information
- Evaluating
- Writing the assessment report/enhancement plan

These steps are described in subsequent sections. It is noteworthy that such a description is not prescriptive but rather reflects international good practice which may be modified due to specific local reasons.

1.2 First step: Preparation of the self-assessment

A solid preparation of the self-assessment process is one of the most important preconditions for a successful realization of this activity. At the same time, the impact of the preparatory phase is often underestimated. In fact, from experience we learn that in many cases where institutions or participants in self-assessment processes are unsatisfied with the process and its outcomes the reasons for the shortcomings often lie in a weak preparation for the process.

1.2.1 Four preconditions for success

As preconditions for a successful self-assessment process one could mention normally four aspects:

I. Clear purpose: It is of utmost importance that the purpose of the self-assessment process is clear to all parties, the management of the institution, the departments and persons responsible for the programme, and last but not least the members of the self assessment committee. It makes, for example, a big difference if the purpose of the process is to assess whether a certain quality level is met, or the

purpose is to evaluate the programme with view to making recommendations for quality enhancement. These two options would of course mean a different layout of the process, and the assessment committee act differently in the two options. Especially the final report would look completely different.

II. **Clear remit and scope:** Remit and scope may vary. A typical question to be answered concerns the role of research: To what extent are research activities covered by the self assessment? In most cases of "traditional" programme evaluations research activities are only taken into account in so far as the assessment committee evaluates whether there is relevant research activities in the field of the programme. They do not evaluate the quality of research as such. Another important issue in this respect is whether there are specific questions that shall be dealt with by the assessment committee in addition to the overall assessment of the programme. These may be already well-known shortcomings or aspects which should be covered in order to inform a decision, for example on a new to establish major or a related programme.

III. **Commitment:** Of course commitment to the self assessment must be assumed both for the university management and those responsible for the programme to be evaluated. Every self-assessment means a lot of work for all parties involved, and without a clear commitment there is a danger of lack of support. Such a commitment translates into ownership of the process which means that somebody feels the responsibility of guaranteeing a smooth and efficient processing.

IV. **Envisaged consequences:** One can see this almost as a "Golden rule". Without the will and the means to change things in order to enhance the quality in case shortcomings have been detected, an institution should rather avoid a self-assessment. We should always remember: Conducting a self-assessment is not the main job of university teachers, but rather keep them from teaching and doing research. This means that putting that much efforts and workload into such a self assessment without any consequences in terms of enhancing the teaching situation they will most likely refuse to take part in such a project in the future.

1.2.2 Self assessment committee

1.2.2.1 Selection

The first and preparatory phase of the self assessment comprises primarily the selection of a committee which is in charge of conducting the subsequent steps. Naturally, the selection and formation of this committee is of great importance. Although other variations may be adequate the assessment committee would normally consist of:

- the person responsible for the programme,
- about four members of the teaching staff,
- one administrative staff member,
- two students,
- members of the quality unit's staff should normally join the team.

Since this committee is responsible for conducting the whole process, it is advisable to select the members thoroughly. Due to the workload, in addition to their "regular" obligations committee members need to be committed to the process. At the same time, it is highly recommended to choose people from the university which have a high reputation and are, thus, accepted as peers (in its original sense) and experts by the respective groups they represent. This is important in order to guarantee that the different groups in the institution trust the committee in terms of professionalism and impartiality. It is advisable that one of the members functions as chairperson. Of course it would be of benefit for the work if the members had already experience in evaluation processes.

1.2.2.2 Training and preparation

In any case, training or preparation of the committee members is a crucial feature of the self assessment process. This kind of preparation does not refer to any specific discipline-related matters. It's obvious that those members coming from the field do not need to be trained in this respect. But, nevertheless, it is true that a good researcher or a good teacher is not automatically a good assessment committee member.

Two aspects need to be explained thoroughly to the committee members:

I. The first aspect relates to the purpose and the remit of the review and the relevant standards, criteria, benchmarks etc, if there are any. Of course, the committee members have to be familiar with the instruments and standards or criteria that shall be used during the process, in order to meet the expectations of the university and to have a shared understanding with the university. But it is not only important, that every single member of the panel is prepared properly, it is also important that the assessment committee reaches a *shared* understanding about purpose, content and way of processing the self assessment.

II. Another aspect which is often underestimated but as important as the first one. The committee members need to know the duties of an assessor and how to perform the role of an assessor, especially in case there are discussions with members of the assessed department etc. In essence this refers to one of the most dangerous problems of every assessment process, and this the "rucksack problem". Every assessor has his own *personal* view on a field or a programme or another subject matter of an evaluation, has his own view on how to do things best. But it is crucial that every assessor accepts as reference basis the purpose of the assessment and the mission of the university. An assessment is not a playground for applying and pushing through personal preferences, which every assessor carries in his rucksack, Connected to this issue the assessment committee members should be made familiar with the composition of the committee, especially with the rationale behind this composition.

1.2.2.3 Planning the self-assessment process

The last step of the preparatory phase contains the planning of the self-assessment process. To achieve maximum efficiency in the process, the Self-Assessment Committee must determine a work plan that should include: a calendar, the distribution and allocation of tasks and the necessary resources (human, material and IT).

1.1 Second step: Collecting information

Once the preparatory phase is over and the assessment committee knows *why* they should do *what how* and *when,* the second step of the process may start, and that is the phase of collecting information.

1.1.1 Quantitative data

The self-assessment process is based on an analysis of the teaching situation. To describe the teaching situation it is necessary to collect some quantitative data to gather basic information and to draw a picture of the actual teaching situation. These quantitative data may show the actual situation and latest development of some relevant indicators, such as completion rates, students per teacher ratio, resources, etc. In order to facilitate the reading and examination of this data and in order to enhance future assessments, this can be grouped into tables or diagrams.

1.1.2 Qualitative data

Although these quantitative data are relevant and indispensable for getting a clear picture, it is noteworthy that they are not enough to evaluate a programme. The self assessment process should always be based on qualitative information as well. This information, documents such as mission statement, programme description, or additional self reflexive documents (e.g. former evaluation reports) are important for the contextualization of quantitative information. Quantitative data are not necessarily informative as such, but rather informative when you know the context.

There's one more basic recommendation to all assessment committees concerning the collection of date: Collect only relevant information! This may naturally be less than the information that may be available or could be made available. Based on the clear purpose and remit of the self assessment the committee has to decide what information needs to be gathered in order to answer the relevant questions. It is one of the most common mistakes that not only this data, but in addition all information available is collected which only means much burden without any use of the information. In order to make the process efficient, the assessment committee should be aware of this danger.

1.2 Third step: Analyzing information

1.2.1 Description

Once the relevant information is gathered, the committee can start analyzing the data. The analysis has to be based on a clear and comprehensive description of the teaching situation. Apart from the reflection that is carried out, the assessment committee will elaborate a description of how the teaching unit is situated with respect to each of the sub-criteria that are analyzed in the evaluation model. It is necessary that this description be elaborated as a result of consensus between the members of the assessment committee. In this way, each member of the Committee must explain to the other members the aspects and implications of the statements that they make so that the collection of statements made expresses the feelings of all those that participated in the Self-Assessment Process.

The importance of this description is often underestimated, but it is a precondition for the analysis that the assessment committee shares the view on the actual situation and, thus, has a common ground for the analysis. Experience shows that unclear or even diverging views on the descriptive aspects of the programme lead to major problems in coming to a common analysis and evaluation of the programme. In this descriptive part the committee has in the first instance to decide whether additional information has to be gathered or not.

1.2.2 Analysis

Based on the description the analysis has to be comprehensive which means that the assessment committee must analyze in detail the data and information with respect to each and every criterion/feature. The assessment committee will easily recognize that it is important to contextualize the quantitative data. Quantitative data may mean different things in different contexts! They always have to be analyzed against the mission and purpose of the programme. E.g. Research orientation or research quality of staff mean different things for a highly specialized research oriented Masters programme and for a very generic Bachelors programme. Figures only seem to provide us with “neutral” information. Actually we can’t measure quality in teaching and learning by just counting figures! There is a famous say

which explains this danger very well: “We tend to value what we measure rather than measure what we value.”

Besides this “Golden rule” there is another important principle: There is no mono-causal link between the description and the evaluation. If this would be the case, there would be no need for experts in the sense of peers because every professional could make an analysis. But, actually, the analysis takes into account quantitative data which then has to be contextualized and evaluated against the mission etc. This is a process of evaluation and interpretation and, in essence, it is a qualitative decision! And last but not least, the committee has to find a consensus, of course! And it is also clear that the committee has to motivate every conclusion which it draws in the course of the assessment. This is essential, because the addressees, in the first place the institution, can only understand why the committee has come to a certain conclusion and take action as a consequence of the self assessment, when it understands the reasons for the results of the assessment. Otherwise this would not be helpful at all, and the institution would hardly be able to learn lessons from the assessment.

1.3 Forth step: Evaluating

Once a description of the current situation has been made, the assessment committee has to evaluate the programme.

1.3.1 Areas of evaluation

The basis for this evaluation is a set of criteria that comprises the following areas:

- Educational programme:
  - Aims of the educational programme
  - Study plan and its structure
- Teaching organization:
  - Management and planning
  - Management and organization
- Human resources:
  - Academic Staff
  - Administration and services staff

- Material resources:
  - Classroom
  - Study spaces
  - Laboratory and workshop
  - Library and books available
- Educational process:
  - Students care and integral training
  - Process teaching-learning
- Results:
  - Results of the educational programme
  - Graduates results
  - Academic staff results
  - Society results

1.3.2 Grading system

Each criterion will be evaluated in the following way:

- A, excellent: The sub-criterion is complied with systematically and in an exemplary manner with regards to all the aspects to be evaluated. There is clear evidence of compliance and systemization of the aspects to be evaluated.
- B, good: the sub-criterion is usually complied with for all the aspects to be evaluated, although possible improvements exist. There is clear evidence of compliance with the aspects to be evaluated.
- C, average: the sub-criterion is partially complied with in the majority of the aspects to be evaluated. There is clear evidence of partial compliance with the aspects to be evaluated.
- D, deficient: the sub-criterion is vaguely complied with for a minority of the aspects to be evaluated. There is some evidence indicative of compliance with the aspect to be evaluated.
- EI, insufficient evidence or the existence of some proposal but without this having been initiated. This box will be marked when there is no evidence/information to back up the statements made or if the relation between the proof and the statement is weak.

This methodology aims at facilitating the consensus of the Self-Assessment Committee when it comes to evaluating the situation of the teaching unit against one or more criteria. The assessment committee must reach a consensus regarding the teaching situation, in relation to the compliance with each of the criteria. With this semi-quantitave evaluation, it is expected that the committee will make an initial evaluation that will make it possible to more easily identify the strengths and weaknesses of the teaching unit.

To strengthen the developmental dimension of the self assessment, the evaluation should not stop here but rather name the findings under A and B as strengths, and those under C and D as weaknesses. Based on this, the committee should make proposals for improving the strengths, and turning the weaknesses into strengths. Everybody should be aware of the fact that making such proposals is one thing, and being responsible for making decisions is another. But even though the decision making body, be it the faculty or the university management, may have constraints which are not known to the assessment committee, their proposal is a very important source for the further development because they are based solely on the evaluation of the very programme without taking into account other framework conditions, etc. These improvement proposals or actions will normally be accompanied by a prioritization proposal according to the urgency or importance that the Committee gives each of these. The level of urgency will be determined by the necessity to carry out this action in the short-term. The level of importance is related to the benefits or level of improvement that it is hoped may be achieved via the implementation of this action.

1.4 Fifth step: Writing the assessment report/enhancement plan

Naturally, the self assessment leads to a self-assessment report which contains the description of the programme and the teaching situation, the findings and the evaluation and of course the recommendations as well. In order to make the report function as a starting point for an enhancement process as follow up of the self-assessment, the following principles should be applied:

- The report should be comprehensive, and thus address every criterion.
- The positive aspects of the evaluated programme should be mentioned in order to get a complete and fair picture of the programme. Assessment committees often make the mistake of focusing too much on the negative aspects and the things that need to be developed, and thus drawing a too negative and, to some extent, unfair picture of the programme.
- The report should be based on facts and should include references, i.e., the evaluations contained in the report should be supported by documents, indicators, information, etc. It is essential that these references are expressly detailed in the protocol (section describing the situation of each of the sub-criteria) in order to facilitate the work of possible external assessors.
- The report should be enhancement-oriented and not only written as a "snapshot" of the current situation.
- The report should be frank and fair, thus has to be motivated as far as findings and recommendations are concerned.
- It is important to "keep it short". It is a much better approach to work with a rather short report and additional documents in the annexes than write a lengthy report.
- Finally, mind the addressees in terms of content, language and style.

1.5 Final recommendations

This short outline of the self-assessment methodology reflects current good practice and shares some lessons learned from experience. It should not be understood as prescriptive or as a blueprint. There may be reasons for organizing the process differently in one or another aspect. The one thing that should be highlighted at the end is the crucial meaning of the preparatory phase for conducting the self-assessment in an efficient and effective way.

2. Evaluation model

This section provides a detailed model for the institutional evaluation of universities study programmes.

2.1 Educational programme

The educational programme criterion is subdivided into two sub-criteria:

- Aims of the educational programme
- Studies plan and its structure

2.1.1 Aims of the educational programme

2.1.1.1 The aims of the educational programme are defined and include knowledge and skills that the students should have when they finish their studies

Aspects to evaluate to check compliance with the sub-criterion

- Existence of a definition of the aims of the educational programme.
- Existence of the list of knowledge and skills of the graduates.

Information on which the analysis is based

15	**Official document where the aims of the educational programme appear.**
10	**General qualification guidelines.**
18	**The studies plan (complete using table T-05).**
72	**List of knowledge and skills of the graduates, as well as the graduates' professional profiles.**
7	**Description of the process for determining the graduate profiles.**

Reflections:

- In defining the aims, have the factors of demand and socio-economic environment been taken into account?
- Are the aims clearly defined and specified? Are the proposed objectives viable?
- Do mechanisms exist to check that these have been achieved and to modify or review them?

- Is there any coherence between the aims of the educational programme and those of the institution?
- Is the level of specification and clarity in the definition of the list of skills that the graduates must possess adequate?
- What is the relationship between the graduate profiles and the studies plan?
- What are the mechanisms for defining the graduate profile?

2.1.1.2 The educational programme specifies the admission profile that students must fulfill and has mechanisms in place that make it possible to know the admission profile of the new students

Aspects to evaluate to check compliance with the sub-criterion

- List of knowledge, abilities and skills that constitute the ideal admission profile for undertaking the educational programme.
- Existence of mechanisms that make it possible to discover the characteristics of the admission profile of the new students in the educational programme.
- Coherence between the ideal admission profile and the aims of the educational programme.

Information on which the analysis is based

15	**Official document where the aims of the educational programme appear.**
73	**List of abilities and skills that constitute the ideal admission profile for undertaking the educational programme.**
8	**Description of the process for determining the ideal admission profile.**
60	**Mechanisms for discovering the real admission profile of the students that join the educational programme.**
43	**Indicator: "Data and indicators related to the offer, demand and registration in the first year" PF-16.**

Reflections:

- Is the level of specification and clarity in the definition of the knowledge that the potential students must possess adequate?
- What is the relationship between the ideal admission profile and the aims of the educational programme?
- What are the mechanisms for defining the ideal new student?

- Do mechanisms exist that make it possible to know the profile of the new intake students?
- Is the profile of the new intake students taken into account during the development of the educational programme?

2.1.2 Studies plan and its structure

2.1.2.3 The structure of the studies plan is well defined, when it comes to the distribution of the subjects, and their horizontal and vertical linking, and it avoids blank or duplicated areas.

Aspects to evaluate to check compliance with the sub-criterion

- The sequencing of subjects is coherent with the development of the knowledge to be imparted.
- There are coordination mechanisms that avoid blanks or duplicate contents in the subjects.

Information on which the analysis is based

18	**The studies plan (complete using table T-05).**
10	**General qualification guidelines.**
13	**Documentation that includes the mechanisms, agreements and conclusions of the coordination between subjects concerning overall, theoretical and practical aspects.**
30	**Student guide or similar document that includes information related to the basic elements of all of the subjects.**
26	**The existence of mechanisms (pre-requisites, incompatibilities, tutor actions...) that guarantee that the student follows a coherent sequence in registering for the subjects.**

Reflections:

- Is the sequence of contents in each of the subjects adequate?
- Is the horizontal and vertical linking of the studies plan well structured?
- Are there blank or duplicate contents in the studies plan?
- What coordination mechanisms are used to avoid blanks or duplicates?
- In the sequencing of the subject, are criteria used that favor student learning?

2.1.2.4 The subjects' programme that constitutes the studies plan contains the necessary basic elements and is accessible and public

Aspects to evaluate to check compliance with the sub-criterion

- Existence of a standardized document, where the following basic elements are available from the registration period:
  - Definition of the aims of the educational programme.
  - Characteristics of the subject with regard to the number of credits, their distribution between theoretical and practical, the period of time over which they are given, the relationship with the aims of the educational programme and with other subjects, etc.
  - Specific aims of the subjects.
  - Contents of the subjects programme including assigned practicals.
  - Professional or external internships.
  - Methodology of the teaching-learning.
  - Methods and criteria for learning evaluation.
  - Academic staff responsible for the subject and collaborating staff.
  - Bibliography and reference sources.
  - Recommendations for taking the subject.
  - Timetable and locations where the classes or tutorials are given.
  - Exams Calendar.
  - Complementary activities.
- Information related to the group of subjects and the basic elements matches the studies plan and falls in line with the aims of the educational programme.

Information on which the analysis is based

15	**Official document where the aims of the educational programme appear.**
30	**Student guide or similar document that includes information related to the basic elements of all of the subjects.**
18	**The studies plan (complete using table T-05).**
72	**List of knowledge and skills of the graduates, as well as the graduates' professional profiles.**

Reflections:

- Does specific information exist on the aspects to be evaluated?
- Are these aspects adequately specified and clearly defined? Is there a standardized format?
- Is all the information accessible at the moment of registration? What publishing channels are used for this information?
- Is there coherence between this information and the aims of the programme?

2.1.2.5 The studies plan is coherent with the aims of the educational programme and with the graduate profile

Aspects to evaluate to check compliance with the sub-criterion

- The structure of the studies plan.
- Coherence between the aims of the educational programme and the current studies plan regarding both its organization and contents.
- Coherence between the defined graduate profiles and the current studies plan, both in their organization and content.
- Justification of curricular content alternatives (subjects recognized with credits) and their correct implementation.

Information on which the analysis is based

15	**Official document where the aims of the educational programme appear.**
18	**The studies plan (complete using table T-05).**
72	**List of knowledge and skills of the graduates, as well as the graduates' professional profiles.**
76	**List of curricular itineraries, their justification and aims.**
31	**Timetables and distribution of the alternative curricular content.**

Reflections:

- Are the organization and content of the studies plan coherent with the aims of the educational programme?
- Are the organization and content of the studies plan coherent with the graduate profiles?

2.1.2.6 The review and updating, if appropriate, of content is carried out regularly and systematically

Aspects to evaluate to check compliance with the sub-criterion

- The existence of a systematic and regulated process, with a demarcation of responsibilities, which allows for the review of subject content.
- The existence of mechanisms for obtaining information, indicators, studies, improvement plans, etc that justify the updating of subject contents.
- Actions resulting from content updates.

Information on which the analysis is based

14	**Documentation on the content review process and its description. The frequency of this process.**
12	**Documentation which includes information on the actions resulting from the update of contents (for example, modernization of programmes, new practices, the participation of students in experimental developments, the creation of freely chosen special subjects).**

Reflections:

- Do norms exist in relation to the update of contents?
- Does the update of contents occur systematically and periodically? Is the frequency of the update process adequate?
- Is the update mechanism appropriate?
- Are their people in charge of the process?
- On what information is the content update based?
- Are the results of investigation, development, innovation or artistic creation taken into account in the contents update process?
- Have actions taken place as a consequence of the review and update of contents?

2.1.2.7 The student learning time outlined in the studies plan makes it possible to comply with the aims of the educational programme

Aspects to evaluate to check compliance with the sub-criterion

- The time that the student must dedicate to studying for the learning involved in the educational programme.
- The student learning time outlined in the studies plan makes it possible to comply with the aims of the educational programme.

Information on which the analysis is based

15	Official document where the aims of the educational programme appear
97	Evaluation of the subject credits/hours in the study plan.
24	Studies on the time the student dedicates to learning different subjects.

Reflections:

- Has the person responsible for each subject planned the necessary student learning time for each subject?
- Is the time necessary for personal study, the production of work, practicals, case studies, library research etc taken into account? Is the total of these times consistent with the studies plan?
- Can the aims of the programme be achieved within the planned duration of the studies plan?
- Do studies exist on student dedication time? Do these studies include student opinion? Are the results taken into account in the organization of the teaching?

2.2 Teaching organization

This criterion analyses the planning for the management of the educational programme, its communication and publishing, the adaptation of the teaching organization, and the use of the results in the educational programme improvement and review processes. The teaching organization criterion is subdivided into two sub-criteria:

- Management and planning
- Management and organization

2.2.1 Management and planning

2.2.1.1 Those in charge have defined the planning of the educational programme which includes instruments and actions for continuous improvement management and actions

Aspects to evaluate to check compliance with the sub-criterion

- Organizational structure of the educational programme.
- Existence of planning of the educational programme.

- Existence of instruments and actions for the management of those in charge of the educational programme.
- Actions of those in charge of the educational programme in relation to the aims and planning of the educational programme.
- Evidence of the inclusion of continuous improvement actions in the planning.

Information on which the analysis is based

19	**Structure of the team responsible for the educational programme and the mechanisms and commissions for its management, completion and results monitoring.**
66	**Planning of the educational programme.**
52	**Instruments for the management of the educational programme.**
17	**Document which includes the improvement actions of the educational programme and its monitoring procedure.**

Reflections:

- Are there principles and policies in place for the management of the educational programme? Are they public and accessible?
- What are the actions of those responsible for the programme in relation to its policies, aims and planning?

2.2.2 Management and organization

2.2.2.1 The educational programme is communicated and published

Aspects to evaluate to check compliance with the sub-criterion

- Information publishing channels.
- Accessibility and publicity of the aims of the educational programme and the graduate profiles.
- Accessibility and publicity of the knowledge, abilities and skills that constitute the ideal admission profile for correctly undertaking the educational programme.
- Accessibility and publicity of the subject programmes.

Information on which the analysis is based

65	**Institutional communication plan.**
81	**List of the publishing channels (web page, brochures, student guide, notice board, magazine, etc) used for internal and external communication on:** **The aims of the educational programme and the graduate profiles.** **Ideal admission profile.** **Subject programmes.**

Reflections:

- Are the channels used to make the aims and graduate profiles accessible and public adequate? What is the level of awareness of the aims and the graduate profiles amongst the members of the university community?
- Is the publishing of the ideal intake profile adequate? What is the level of awareness of this amongst the university community, especially among the new intake students?
- Are the study programmes accessible at the moment of registration? What publishing channels are used for this information?

2.2.2.2 The organization of the teaching fits in with the aims of the educational programme

Aspects to evaluate to check compliance with the sub-criterion

- Efficiency in the management of the organization processes: registration, calendar of evaluation tests, timetable planning, company internships, internships in collaborating and assistance centers, mobility programmes, complimentary activities, assigning teaching, student assistance, etc.
- Efficiency in the management of available human, economic and material resources used in the development of the educational programme.
- Existence and use of reliable sources of information for making decisions.
- Existence and use of the necessary horizontal and vertical coordination mechanisms.
- Adaptation of the organization of teaching to the structure and aims of the educational programme.

Information on which the analysis is based

58	Procedure manuals, process maps, functional organization charts, etc, related to key organization processes.
82	List of the monitoring and control mechanisms and channels used for coordination between those in charge of and implicated in the development of the educational programme.
15	Official document where the aims of the educational programme appear.
18	The studies plan (complete using table T-05).
30	Student guide or similar document that includes information related to the basic elements of all of the subjects.
73	List of abilities and skills that constitute the ideal admission profile for undertaking the educational programme.
72	List of knowledge and skills of the graduates, as well as the graduates' professional profiles.
16	Document that includes the assignment and distribution of teaching (teaching ordering plan).
20	Academic staff structure T-03.
69	Professional collaborator T-04.
22	Structure and functions of the administration and services staff involved in the educational programme.
40	"Computers and internet connections per student" Indicator RM-11.

Reflections:

- Does an adequate management of the key organization processes take place?
- Are the sources of information for decision making processes adequate?
- Do the appropriate coordination mechanisms exist?
- Is efficient management of the organization processes carried out?
- Does adequate management of the human, economic and material resources used for developing the educational programme take place?

2.2.2.3 The results of the educational programme, the graduate results, the academic staff results and the results in society are taken into account in the improvement and review of the educational programme

Aspects to evaluate to check compliance with the sub-criterion

- The existence of the necessary instruments and mechanisms for the analysis of the results of the educational programme, of the graduate results, academic staff results and society results (see results criteria).
- Use of the analysis carried out in the review of the educational programme.

Information on which the analysis is based

21	**Structure of the system for collecting information on the different aspects of the qualification.**
95	**System for analyzing the results of the educational programme (e.g. collection of indicators that are periodically updated, control panel, mechanism for establishing corrective actions, satisfaction survey, etc).**
17	**Document which includes the improvement actions of the educational programme and its monitoring procedure.**
51	**Reports on the institutional evaluation processes related to the educational programme and the system for monitoring these.**

Reflections:

- Do mechanisms or instruments for analyzing the results of the educational programme exist?
- Are the results of these analyses taken into account when reviewing the educational programme?
- Do improvement actions take place based on the results of the analysis?
- What mechanisms are used for carrying these out?

2.3 Human resources

In this criterion, the basic characteristics are analyzed of both the academic staff and the administration and services staff involved in the educational programme, in order to determine their level of adaptation to the programme's aims and requirements. The human resources criterion is subdivided into two sub-criteria:

- Academic staff
- Administration and services staff

2.3.1 Academic staff

2.3.1.1 The academic staff has adapted to the aims of the educational programme and to its requirements and disciplines

Aspects to evaluate to check compliance with the sub-criterion

- Structure of the academic staff adapted to the aims, with regards to their number, level, category, dedication and contractual format, as well as to current legislation.
- Adaptation of academic staff to the requirements of the disciplines.
- Training and updating of teaching for academic staff.

Information on which the analysis is based

20	**Academic staff structure T-03.**
69	**Professional collaborator T-04.**
18	**The studies plan (complete using table T-05).**
4	**Curriculum Vitae of the academic staff involved in the educational programme which includes teaching activity, research activity and lines of investigation covering at least the last 4 years.**
94	**Results of the academic staff evaluation processes.**
28	**Existence of innovation and teaching improvement projects and the participation of teachers in these.**
36	**Indicator "Academic staff teacher training" RH-06.**

Reflections:

- Is the structure of the academic staff adapted to the educational programme?
- Is the academic staff profile adapted to the requirements of the studies plan disciplines?
- What is the profile of the academic staff that give classes in the first year?
- Is the teacher training and updating of the academic staff adapted to the education programme?
- Is there a wide offer of teacher training and updating available for the academic staff?

2.3.1.2 The academic staff is involved in research, development, and innovation activities and these have repercussions in the educational programme

Aspects to evaluate to check compliance with the sub-criterion

- Involvement of the academic staff in investigation, development, innovation and where appropriate assistance or artistic creation activities, for example:
  - Participation of the academic staff in R+D projects.
  - Participation of the academic staff in doctorate programmes and the direction of doctoral theses and/or research works.
  - Projects/contracts undertaken by academic staff in collaboration with companies.
  - Organization of scientific and professional activities.
- Repercussions of the investigation, development, innovation and where appropriate assistance or artistic creation activities in the educational programme.

Information on which the analysis is based

4	**Curriculum Vitae of the academic staff involved in the educational programme which includes teaching activity, research activity and lines of investigation covering at least the last 4 years.**
41	**Indicator "Summary of the results of the investigation activity" RH-07. Complete the report on investigation activity for the departments involved in the educational programme.**
37	**Indicator "Index of recognized investigation activity" RH-08.**
2	**Actions developed as a result of the investigation, development, innovation and where appropriate assistance or artistic creation activities which have repercussions in the educational programme.**

Reflections:

- What is the level of involvement of academic staff in investigation, development and innovation activities?
- Do these actions have repercussions in the educational programme?

2.3.2 Academic staff and services

2.3.2.1 The administration and services staff involved in the educational programme are appropriate to its requirements.

Aspects to evaluate to check compliance with the sub-criterion

- The adaptation of services and administration staff involved in the educational process (caretakers, library staff, printing staff, secretarial staff, technicians, workshop teachers, operators, models …) to the requirements of the educational programme, as well as their abilities, necessary skills and knowledge used to collaborate in teaching support tasks.
- The existence of policies for managing administration and services staff in teaching support tasks.

Information on which the analysis is based

22	**Structure and functions of the administration and services staff involved in the educational programme.**
77	**List of training received in aspects related to teaching support tasks.**

Reflections:

- What is the structure of the administration and services staff involved in the educational programme? What are their functions?
- Does the administration and services staff directly involved in the educational process receive training in aspects related to teaching support tasks?
- Is the training offered to administration and services staff adapted to the requirements of the educational process?

2.4 Material resources

With this criterion the infrastructures, installations and equipment necessary to develop the educational programme are studied. The material resources programme criterion is subdivided into four sub-criteria:

- Classrooms
- Work-spaces
- Laboratories, workshops and experimental spaces
- Library and document banks

2.4.1 Classrooms

In this sub-criterion the appropriateness of the classrooms is evaluated in relation to different aspects: surface area, interior furnishing, architectural characteristics, the quantity and quality of equipment, etc.

2.4.1.1 The classrooms used in the educational process and the equipment in these are appropriate for the number of students and the activities programmed in the educational programme

Aspects to evaluate to check compliance with the sub-criterion

- Appropriateness of the number of classrooms and their size, and how they adjust to the needs of the teaching organization of the educational programme, to the methodology used and to the average size of the group.
- Appropriateness of the classroom equipment, both for theory and practical classes (computer rooms, lecture theatres, etc.) and how this adjusts to the needs of the teaching organization of the educational programme and to the average size of the group.
- The lack of architectural barriers and the appropriateness of the infrastructures.

Information on which the analysis is based

96	**Type of space used for work and student study RM-09 and the available equipment.**
67	**Timetable planning of theory and practical classes.**
38	**Indicator "Average students per group" RM-10**
55	**Results of the survey used to discover the satisfaction of the student, as well as reply validity, trustworthiness and rate.**
90	**List of the types of teaching-learning methodology used PF-17.**

Reflections:

- Is the number of classrooms appropriate to the needs of the educational programme?
- Is there enough room in the classrooms for students to carry out the programmed activities?
- What is the state of the rooms' interiors and what are the most important insufficiencies with regards to teaching?

- Does the classroom equipment have sufficient quality and quantity with regards to the needs of the educational programme?
- What are the characteristics of the classrooms regarding lighting, heating, air conditioning, acoustics...?
- What level of functionality do the classrooms have?
- How satisfied are the students with the classrooms?

2.4.2 Work spaces

2.4.2.1 The spaces used for student work and study, as well as the necessary equipment for these tasks, is appropriate to the number of students and the activities programmed in the educational programme

Aspects to evaluate to check compliance with the sub-criterion

- The appropriateness of the number of spaces used for student work and study (study rooms, lecture theatres, library study areas) and their size, and how these adjust to the needs of the teaching organization of the educational programme.
- Appropriateness of the equipment in these spaces and how it adjusts to the needs of the teaching organization of the educational programme.
- The lack of architectural barriers and the appropriateness of the infrastructures.

Information on which the analysis is based

96	**Type of space used for work and student study RM-09 and the available equipment.**
40	**Indicator "Computers and internet connections per student" RM-11.**
55	**Results of the survey used to discover the satisfaction of the student, as well as reply validity, trustworthiness and rate.**

Reflections:

- Is the number of work spaces appropriate to the needs of the students and to the number of students?
- Is there enough room in the work areas for the students to carry out the programmed activities?
- What are the characteristics of the work spaces with regards to lighting, heating, air conditioning, acoustics...?

- Is the equipment in the work spaces appropriate, with regards to quantity and quality, for the needs of the educational programme?
- What is the level of functionality of the work spaces?
- What is the level of student satisfaction with the work spaces?

2.4.2.2 The spaces and the equipment are appropriate for developing and coordinating the functions of the academic staff and the administration and services staff

Aspects to evaluate to check compliance with the sub-criterion

- Appropriateness of the number of spaces used for developing and coordinating the functions of the academic staff (offices, meeting rooms, research laboratories, etc.) and their size, and how these adjust to the needs of the teaching organization of the educational programme.
- Appropriateness of the number of spaces used for the functions of the administration and services staff (secretaries, offices, meeting rooms, laboratories, etc) and their size, and how these fit in with the necessities of managing the educational programme.
- Appropriateness of the equipment in these spaces and how it adjusts to the necessities of the organization and management of the educational programme.

Information on which the analysis is based

20	**Academic staff structure T-03.**
22	**Structure and functions of the administration and services staff involved in the educational programme.**
49	**Report specifying the type of spaces used for the development and coordination of the functions of the academic staff (number by type and number of positions per space) and equipment per space or overall.**
50	**Report specifying the type of spaces used for the functions of the administration and services staff (number by type and number of positions per space) and equipment per space or overall.**

Reflections:

- Is the number of spaces used for the development and coordination of the functions of the academic staff and of the administration and services staff appropriate to the needs of the teaching organization?

- Are the spaces used for the functions of the academic and the administration and services staff sufficient for carrying out their activities?
- What is the state of the spaces used for the functions of the academic and the administration and services staff and what are the most relevant insufficiencies?
- What is the level of functionality of the spaces used for the development and coordination of the functions of the academic staff and the administration and services staff?
- Is the equipment in the spaces used for the development and coordination of the functions of the academic staff and the administration and services staff adequate with regards to quantity and quality?
- What are the characteristics of the spaces used for development and coordination with regards to lighting, heating, air conditioning, acoustics...?
- What is the level of satisfaction of the academic staff and the administration and services staff with respect to the work spaces?

2.4.2.3 The contracted infrastructures used for external practices are appropriate to the number of students and to the activities programmed in the educational programme

Aspects to evaluate to check compliance with the sub-criterion

- Number and type of public or private entities with which external practicals agreements exist.
- The existence of agreements with external entities concerning infrastructures.
- The appropriateness of the owned infrastructures and/or those contracted from external bodies with regards to quantity and type diversity, in order to guarantee the achievement of the teaching objectives in the educational programme.

Information on which the analysis is based

71	**List of own and/or contracted centers, capacity and type of services and the agreements signed with external entities.**
3.	**Catalogue, institutional publication, student guide, contracts or similar documents that include information relative to the collection of infrastructures used for external practicals.**
55	**Results of the survey used to discover the satisfaction of the student, as well as reply validity, trustworthiness and rate.**

Reflections:

- Are the owned and/or contracted infrastructures used for external practicals appropriate with regard to quantity and type in order to guarantee the achievement of the established aims?
- How satisfied are the students with these infrastructures?
- Is the number or public and private institutions with which there is an agreement adequate.

2.4.3 Laboratories, workshops and experimental spaces

2.4.3.1 The laboratories, workshops and experimental spaces, as well as the equipment necessary for working in these is appropriate to the number of students and the programmed activities in the educational programme

Aspects to evaluate to check compliance with the sub-criterion

- The appropriateness of the number of laboratories, workshops or experimental spaces, and their size, and how these adjust to the needs of the educational programme.
- The appropriateness of the equipment in the teaching laboratories, workshops or experimental spaces, and how these adjust to the needs of the educational programme.
- The appropriateness of the spaces (storage areas, lockers, etc) used for keeping materials and work necessary for working in the workshops, or the results of working in these.
- Health and safety and environmental norms in these spaces and knowledge of these by the agents involved, and the existence of architectural barriers.

Information on which the analysis is based

96	Type of space used for work and student study RM-09 and the available equipment.
70	List of subjects that have classes in laboratories and students registered in each of these.
9	Description of the laboratory maintenance programme. Description of the health and safety and the environmental programmes.
62	Health and safety and environmental norms in these spaces and knowledge of these by the agents involved
67	Timetable planning of theory and practical classes.
55	Results of the survey used to find out the level of student satisfaction, as well as their validity, trustworthiness and reply rate.

Reflections:

- What is the level of functionality of the laboratories, workshops and experimental spaces?
- Does the number of laboratories, workshops and experimental spaces meet the needs of the educational programme and the number of students?
- Is the space in the laboratories, workshops and experimental spaces sufficient for the students to carry out the programmed activities in the educational programme?
- What is the state of the laboratories, workshops and experimental spaces and the most relevant insufficiencies with regards to teaching?
- Is the equipment in the laboratories, workshops and experimental spaces appropriate with regards to quantity and quality?
- What are the characteristics of the laboratories, workshops and experimental spaces with regards to lighting, heating, air conditioning, acoustics, etc.?
- What is the level of student satisfaction with the laboratories, workshops and experimental spaces used in the educational programme?

2.4.4 Library and document banks

2.4.4.1 The library and reading rooms infrastructures are correctly furnished and have sufficient space and timetables to satisfy the needs of the educational programme

Aspects to evaluate to check compliance with the sub-criterion

- The appropriateness of the library and reading rooms, and how these meet the needs of the educational programme, with regards to their furnishing, the number of reading and consultation positions, and timetables.

Information on which the analysis is based

5	**General information with reference to registration in the educational programme (number of students in the new intake, registered credits, etc) T-02.**
32	**Indicator "Description of the library and reading rooms" RM-12.**
34	**Indicator "Availability of reading positions in the library" RM-13.**
48	**Information on timetables, calendar and services offered in the library service.**
54	**Results of the library user satisfaction surveys, as well as their validity, trustworthiness and response rate.**

Reflections:

- What is the level of the library's functionality?
- Is the number of positions in the library and reading rooms adequate for the needs of the users and for the number of these?
- Is the space in the library and reading rooms adequate for the students that carry out the programmed activities?
- What are the characteristics of the library with regards to lighting, heating, air conditioning, acoustics, etc.?
- Do the timetables and calendar of the library respond to the needs of the educational programme?
- How satisfied are the users with the functioning of the library?

2.4.4.2 The quantity, quality and accessibility of the information contained in the library and document banks are appropriate to the needs of the educational programme

Aspects to evaluate to check compliance with the sub-criterion

- Appropriateness of the library stock with regards to quantity, quality, accessibility, and whether it meets the needs of the educational programme (number of basic recommended library titles and their availability).
- Methods of accessing information contained in the library and document banks.
- Mechanisms for maintaining, updating and renewing the library stock.

Information on which the analysis is based

30	**Student guide or similar document that includes information related to the basic elements of all of the subjects.**
35	**Indicator "Library stock" RM-14.**
33	**Indicator "Availability of bibliography and information sources" RM-15.**
54	**The results of the library user satisfaction survey, and their validity, trustworthiness and response rate.**
29	**Methods of accessing information contained in the library and document banks.**
6	**Description of the maintenance, updating and renewal processes for the library stock.**

Reflections:

- Is the periodic and non-periodical stock appropriate for the needs of the educational programme?
- Is the organization of the stock and the consultation and lending volume of stock satisfactory?
- What is the availability of stock in relation to demand?
- What is the availability of recommended reading in relation to demand?
- Is the system of access to and consulting library stock satisfactory?
- What is the level of user satisfaction with the quantity, quality and accessibility to the reading material and its appropriateness to the needs of the educational programme?

2.5 Educational process

This criterion analyses the aspects related to the student and the teaching-learning process. The educational process criterion is subdivided into two sub-criteria:

- Student assistance and integral training
- Teaching-learning process

2.5.1 Student assistance and integral training

2.5.1.1 Student capture is in line with the admission profile.

Aspects to evaluate to check compliance with the sub-criterion

- The existence of new student capture processes.

- Consistency between these and the ideal admission profile defined by the educational programme.

Information on which the analysis is based

73	**List of abilities and skills that constitute the ideal admission profile for undertaking the educational programme.**
92	**List of student capture processes.**
43	**Indicator: "Data and indicators related to the offer, demand and registration in the first year" PF-16.**

Reflections:

- What are the student capture procedures? Who manages them?
- Are they directed at a wide percentage of the population?
- Are the capture processes directed at students that fulfill the intake profiles?
- Do publicity mechanisms exist for the educational programme?

2.5.1.2 Student welcome actions orientate them to the functioning and organization of everything related to the educational programme

Aspects to evaluate to check compliance with the sub-criterion

- The existence of effective student welcome actions that orientate them to the functioning and organization of everything related to the educational programme, the centre, the university services, and everything related to external practicals outside the university and integral training activities.
- Aims and contents of the welcome actions.

Information on which the analysis is based

78	**List of the new intake student welcome and orientation actions, including at least the description of the programme, aims, contents, level of participation, those in charge and the satisfaction of the participants.**

Reflections:

- Do welcome actions exist for the new intake student?
- Do the welcome actions orientate the student in everything related to the educational programme?
- Is student participation in the welcome actions high?
- Are students satisfied with the welcome actions?
- How are the welcome actions managed? Do mechanisms exist to measure the efficiency of the welcome actions?

2.5.1.3 Support programmes are developed that are orientated towards improvement in student learning.

Aspects to evaluate to check compliance with the sub-criterion

- Mechanisms for detecting the need for support programmes orientated towards the improvement of student learning.
- Support programmes are developed that are orientated towards improvement in student learning. Aims and content of these.

Information on which the analysis is based

88	**List of the support programmes orientated towards the improvement of student learning, including at least a description of the programme, its aims, content, those in charge, actions, and level of participation and satisfaction.**

Reflections:

- Do support programmes orientated towards the improvement of learning exist?
- Do studies exist to show what needs to be carried out in these programmes?
- Have people been appointed to take charge of these tasks?
- Are the students satisfied with support programme orientated towards the improvement of student learning?
- Do the results of the support programmes orientated towards the improvement of student learning have an impact on the results of the educational programme?
- Do mechanisms exist to measure the efficiency of the support programme? Is it adequately publicized?

2.5.1.4 The student professional orientation programmes facilitate graduate insertion into the labour market

Aspects to evaluate to check compliance with the sub-criterion

- The university or the centre carries out professional orientation programmes for the student.

Information on which the analysis is based

89	**List of the professional orientation programmes for the student, including at least a description of the programmes, aims, content, those in charge, actions, level of participation, participant satisfaction and results.**

Reflections:

- Is there a student professional orientation programme?
- Do studies exist to show what needs to be carried out in these programmes?
- Have people been appointed to take charge of these tasks?
- Are the students satisfied with the professional orientation programme?
- Do mechanisms exist to measure the efficiency of the professional orientation programme? Is it adequately publicized?

2.5.1.5 The tutorial action programme orientates and motivates the students in matters related to the educational programme and the organization of their curricular itinerary

Aspects to evaluate to check compliance with the sub-criterion

- The existence of a tutorial action programme that orientates and motivates the students in matters related to the content of the educational programme and the possibilities that this offers when it comes to organizing the curricular itinerary. (Curricular tutorials are not considered).

Information on which the analysis is based

61	**Tutorial action programme report, which includes at least a description of this, its aims, content, that in charge, actions, level of participation, satisfaction and results.**

Reflections:

- Does a tutorial programme exist that orientates and motivates the student in matters related to the educational programme and to the organization of their curricular itinerary?
- Do studies exist to show what needs to be carried out in these programmes?
- Have people been appointed to take charge of these tasks?
- Are the students satisfied with the tutorial programme?
- Do systems exist to evaluate the efficiency of the tutorial programme? Is it adequately publicized?

2.5.1.6 Activities for the integral training of the student are consistent with the aims of the educational programme and help it to achieve its aims

Aspects to evaluate to check compliance with the sub-criterion

- The existence of activities designed for the integral training of the student, these being cultural, sporting, recreational, cooperative and voluntary, health and safety related, etc.
- Promotion of the students' participation in these types of activities.

Information on which the analysis is based

79	**List of the activities designed for the integral training of the student, these being cultural, sporting, recreational, cooperative and voluntary, health and safety related, etc., including at least a list of these activities, the aims, content, actions, those in charge, the level of participation, the satisfaction of the participants and the results.**

Reflections:

- Are activities established for the integral training of the student? Is their participation encouraged?
- Do studies exist to show what needs to be carried out in these programmes?
- Have people been appointed to take charge of these activities?
- Are the students satisfied with the integral training activities that take place?
- Do mechanisms exist to measure the efficiency of the integral training activities? Are these adequately publicized?

2.5.2 Teaching-learning process

2.5.2.1 The methods and techniques used in the teaching-learning process allow the aims of the educational programme to be achieved

Aspects to evaluate to check compliance with the sub-criterion

- The methodology used in the teaching-learning process.
- The appropriateness of this teaching-learning process to the aims of the educational programme.
- Check that the teaching-learning methodology introduces innovations.
- The methods and techniques used allow for the development of the initially planned material.
- Level of use of the curricular tutorials.

Information on which the analysis is based

15	**Official document where the aims of the educational programme appear.**
90	**List of the types of teaching-learning methodology used PF-17.**
75	**List of teaching experiences specifically used for developing the educational programme, such as participation in teaching innovation projects, publications related to innovation and prizes or distinctions for teaching innovation.**
27	**The existence of specific innovation programmes and updating teaching-learning methodology in teachers.**
30	**Student guide or similar document that includes information related to the basic elements of all of the subjects.**
11	**Documentation that includes information on the level of use of curricular tutorials.**

Reflections:

- Does the teaching-learning process methodology respond to the aims of the educational programme?
- Is the teaching-learning methodology varied, and does it allow for the development of different abilities and introduce innovations?
- Is the choice of the teaching-learning methodology based on teaching research?
- Does the choice of methodology take into account the characteristics of the students and the disciplines?

2.5.2.2 The learning evaluation process is consistent with the aims of the educational programme and with the teaching-learning methodology

Aspects to evaluate to check compliance with the sub-criterion

- The learning evaluation methods used in the teaching-learning process.
- The adaptation of these evaluation methods to the aims of the educational programme.
- The adaptation of these evaluation methods to the teaching-learning methodology.
- The existence of specific methods for evaluating the knowledge and skills acquired by the students in external internships.

Information on which the analysis is based

15	**Official document where the aims of the educational programme appear.**
90	**List of the types of teaching-learning methodology used PF-17.**
91	**List of the evaluation methods used PF-18.**
30	**Student guide or similar document that includes information related to the basic elements of all of the subjects.**

Reflections:

- Are the evaluation methods used consistent with the aims of the educational programme?
- Does a variety of evaluation methods exist? Do the evaluation methods make it possible to evaluate the skills as well as knowledge?
- Is the methodology used in the teaching-learning process consistent?
- Do specific methods exist for evaluating external practicals?

2.5.2.3 The professional internships in companies and institutions are consistent with the aims of the educational programme

Aspects to evaluate to check compliance with the sub-criterion

- The existence of the mechanisms necessary to effectively encourage internships in companies and institutions for students.

- The existence of mechanisms to recognize external internships with curricular credits.
- The existence of procedures for evaluating and periodically reviewing these mechanisms.
- The appropriateness of the internships to the aims of the educational programme.

Information on which the analysis is based

15	**Official document where the aims of the educational programme appear.**
74	**List of agreements with other institutions via which the students in the educational programme carry out internships.**
84	**List of the mechanisms necessary for effectively encouraging internships in companies and institutions for students, including at least a description of these, the internship offer, aims, content, those in charge, actions, level of participation, satisfaction and results.**
42	**Indicator "Number of students that carry out non-obligatory external internships" PF-19.**
68	**Procedure for evaluating and periodically reviewing external internships.**
59	**Mechanisms for recognizing the curricular credits in the external internships.**

Reflections:

- Do the mechanisms necessary for encouraging student internships in companies and institutions exist?
- What is the level of curricular recognition of these?
- Are the internships consistent with the aims of the educational programme?
- Are the internships offered to a wide range of students?
- Do mechanisms exist in which the satisfaction of the student is taken into account in order to periodically review and evaluate the external internships?

2.5.2.4 The periods of time that the students spend in national and international institutions are consistent with the aims of the educational programme, and recognized in curricular terms

Aspects to evaluate to check compliance with the sub-criterion

- The existence of the mechanisms necessary to encourage national and international student mobility and the reception of foreign students.
- The existence of procedures for evaluating and periodically reviewing these mechanisms.

- The adaptation of these mobility mechanisms to the aims of the educational programme.
- Equivalent recognition of the periods that result from the application of these mobility mechanisms.

Information on which the analysis is based

15	**Official document where the aims of the educational programme appear.**
83	**A list of the mechanisms necessary to encourage national and international student mobility, including at least a description of the programme, aims, content, actions, level of participation, satisfaction and results.**
39	**Indicator "Student mobility" PF-20.**
64	**Norms and regulations that cover the curricular recognition of the periods that result from the application of the national and international student mobility mechanisms.**

Reflections:

- Are there methods for encouraging the time that the students spend in companies or institutions? What is the level of curricular recognition of these?
- Is this time consistent with the aims of the programme?
- Are the internships offered to a wide range of students?
- Do procedures exist in which satisfaction is taken into account in order to periodically review and evaluate the student time in these institutions?

2.6 Results

The results criterion is subdivided into four sub-criteria:

- Results of the educational programme
- Graduate results
- Academic staff results
- Results in society

2.6.1 Results of the educational programme

2.6.1.1 The student finishes her studies in the time planned within the educational programme

Aspects to evaluate to check compliance with the sub-criterion

- The students' academic progress.
- Average duration of studies.

Information on which the analysis is based

46	**Indicator: "Efficiency rate" R-21.**
47	**Indicator: "Success rate" R-22.**
44	**Indicator: "Average duration of studies" R-23.**
45	**Indicator: "Success rate" R-24.**
63	**Student registration and permanence norms in the educational programme.**

Reflections:

- Is the result of the "efficiency rate" acceptable?
- Is the result of the "success rate" acceptable?
- Does the student finish their studies in the planned time?
- Is the "drop-out rate" high?
- Do the registration and permanence norms interfere with academic progress?

2.6.1.2 The student is satisfied with the educational programme

Aspects to evaluate to check compliance with the sub-criterion

- Existence of procedures to collect opinions from the students. Aims, frequency and use of the results.
- Existence of procedures to evaluate the satisfaction of the students. Aims, frequency and use of the results.
- Existence of procedures to collect student suggestions and complaints. Response aims and mechanisms.
- The satisfaction shown by the students with various aspects of the educational programme:
  - with the organization of the teaching (distribution, times, load, practicals),
  - with the installations and infrastructures used in the Educational Process (classrooms, laboratories, library, work spaces, collaborator and assistance centers),
  - with the studies plan and its structure (contents, consistency, flexibility, updates...),
  - with the attention they receive (welcome programmes, orientation, learning support, complimentary activities), and

- with the teaching-learning process itself (methodology, tutorials, mobility, external internships…).

Information on which the analysis is based

86	**List of the procedures for collecting student opinions, including at least a description of the mechanism, aims, frequency, and level of participation and use of the results.**
85	**List of the procedures for evaluating student satisfaction, including at least a description of the mechanism, aims, frequency, and level of participation and use of the results.**
87	**List of the procedures for collecting student suggestions and complaints, including at least a description of the mechanism, aims, frequency, and level of participation and use of the results.**
55	**Results of the survey used to discover the satisfaction of the student, as well as reply validity, trustworthiness and rate.**

Reflections:

- Do procedures exist to measure student opinion?
- Are the existing procedures sufficient? Are they widely used?
- Are studies carried out to measure student satisfaction with the educational programme?
- What are the results of the survey on student satisfaction with the educational programme?

2.6.2 Graduate results

2.6.2.1 The profile of the graduate matches the graduate profiles outlined in the educational programme

Aspects to evaluate to check compliance with the sub-criterion

- The existence of graduate knowledge and skills, as well as the graduates' professional profiles.
- Consistency between the graduate profiles and those foreseen in the educational programme, with regards to knowledge acquired, and skills and abilities developed.
- Satisfaction that one year after graduating, and three years after that, the graduates from the educational programme show they are using: The acquired knowledge and the skills (abilities, attitudes…) developed.

- The existence of periodic and systematic studies of the graduates that study their insertion into the labour market.
- Results of the studies carried out and the actions taken as a result of these.

Information on which the analysis is based

72	**List of knowledge and skills of the graduates, as well as the graduates' professional profiles.**
53	**Documented justification that the students acquire the specified knowledge and skills (exam models, list of qualifications, practical tests…).**
56	**Results of the survey used to discover the satisfaction of the graduate, as well as reply validity, trustworthiness and rate.**
23	**Graduate monitoring studies. Frequency, results and conclusions.**
1	**Actions carried out as a result of the employment insertion studies.**

Reflections:

- Does the graduate comply with the ideal graduate profile?
- Are surveys carried out to discover graduate satisfaction?
- What are the results of the graduate satisfaction surveys?
- Are graduate monitoring studies carried out? Is the frequency of these adequate?
- Are the results of the graduate monitoring survey good? What conclusions are derived from these studies?
- Are the results of the surveys taken into account in the decision making process and in the implementation of improvements?

2.6.3 Academic staff results

2.6.3.1 The academic staff is satisfied with the educational programme

Aspects to evaluate to check compliance with the sub-criterion

- Existence of procedures to collect opinions of the academic staff. Aims, frequency and use of the results.
- Existence of procedures to evaluate the satisfaction of the academic staff. Aims, frequency and use of the results.
- The academic staff's satisfaction with the different aspects of the educational programme:
  - with the organization of the teaching (distribution, times, load, practicals),

- with the installations and infrastructures used in the Educational Process (classrooms, laboratories, library, work spaces, collaborator and assistance centers),
- with the studies plan and its structure (contents, consistency, flexibility, updates...),
- with the teaching-learning process itself (methodology, tutorials, mobility, external internships…).

Information on which the analysis is based

98	**List of the procedures for collecting the opinion of the academic staff, including at least a description of the mechanism, aims, frequency, and level of participation and use of the results.**
99	**List of the procedures for evaluating the satisfaction of the academic staff, including at least a description of the mechanism, aims, frequency, and level of participation and use of the results.**
100	**List of the procedures for collecting suggestions and complaints from the academic staff, including at least a description of the mechanism, aims, frequency, level of participation and use of the results.**
101	**Results of the survey used to discover the satisfaction of the academic staff, as well as reply validity, trustworthiness and rate.**

Reflections:

- Is the satisfaction of the academic staff measured with respect to different aspects of the educational programme?
- What are the results?
- Are improvement actions carried out based on the results?

2.6.4 Results in society

2.6.4.1 The satisfaction of employers and other groups of interest, with the knowledge and skills of the graduates

Aspects to evaluate to check compliance with the sub-criterion

- The satisfaction of employers and other groups of interest (administration, families, sponsors, any type of student, staff, visitors...) with the use of: the knowledge acquired by graduates from the educational programme, and their skills (abilities, attitudes...).

Information on which the analysis is based

57	**The results of the survey used to discover the satisfaction of employers and other groups of interest, as well as their validity, trustworthiness and response rate.**

Reflections:

- Is the satisfaction of employers and other groups of interest with the knowledge and skills of the graduates measured?
- What are the results?
- Are improvement actions carried out based on the results?

2.6.4.6 The activities that link the educational programme with society in the national and international realm produce results

Aspects to evaluate to check compliance with the sub-criterion

- The results of the link between the educational programme and society:
  - agreements with other universities and public and private bodies,
  - links with professional and business organizations,
  - links with professional colleges and collegiate organizations,
  - agreements and links with collaborating and assistance centers,
  - links with associations,
  - other activities: forums, conferences, debates, university for older people, summer courses, grants and awards from external bodies, links with secondary schools, etc...

Information on which the analysis is based

80	**List of the different activities that link the educational programme with society.**
25	**Studies and reports on the educational programme's social link (surveys, questionnaires, etc.).**
93	**Results of agreements and contracts with other universities, public or private bodies, professional and business organizations, associations, collaborating and assistance centers that show the link with society.**

Reflections:

- What are the activities that link the educational programme with society?
- Are these activities adequate and sufficient?
- Do they produce specific results?

3. Improvements plan work tool

3.1 Introduction

The excellence of an organization is best shown by its ability to grow with continuous improvement on each and every one of the processes that govern its daily activity. The improvement occurs when the organization learns from itself and from others, in other words, when it plans its future taking into account the changing environment that surrounds it and the collection of strengths and weaknesses that define it.

Planning its strategy is the main means of making a qualitative jump in the service it offers to society. To accomplish this, it is necessary to carry out a diagnosis of the organization's situation. Once this has been executed, it is relatively simple to determine the strategy to be followed so that the person who receives the services perceives, to a significant extent, the improvements that have taken place. Leaning on your strengths to overcome you weaknesses is, without doubt, the best option for change.

The aim of this section is to provide support to university institutions in the development of an improvements plan, once the evaluation process has concluded. Taking into account the internal vision of the evaluated unit and the vision of external assessors, the team responsible for the unit formulates improvement proposals that will be negotiated with those in charge of the institution.

The improvements plan forms part of the objectives of the continuous improvement process, and, as such, is one of the main phases to be carried out in this process. The elaboration of this plan requires the backing and involvement of all the university managers that, in one way or another, are related to the unit. The improvements plan includes the strategic decision about what are changes that need to be incorporated into the different processes in the organization, so these are perceived to be providing a better service. Such plan, as well as providing a basis for detecting improvements, must allow for the control and monitoring of the different actions to be performed, as well as the incorporation of corrective actions in the case of unforeseen contingencies.

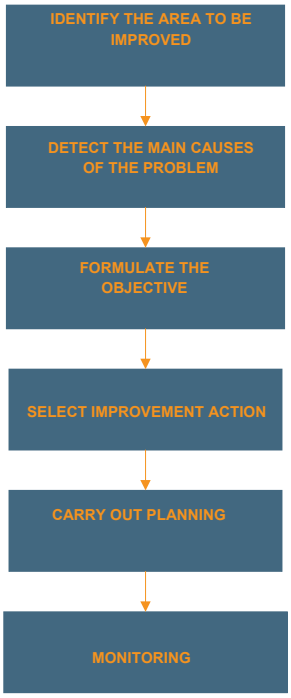
To draw up the plan, it is necessary to establish the objectives that it is hoped shall be achieved and to plan the tasks to accomplish these. The improvements plan makes it possible to:

- Identify the causes of the detected weaknesses.
- Identify the improvement actions to be applied.
- Analyze their viability.
- Establish priorities in the lines of action.
- To have a plan for the actions to develop in the future and a monitoring and control system for these.
- Negotiate the strategy to follow.
- Increase management efficiency.
- Motivate the university community to improve the level of quality.

The plan developed on the basis of this section makes it possible to develop the improvement actions in an organized, prioritized and planned manner. Its implementation and monitoring must be oriented towards improving the quality of university teaching so that this is clearly perceived by those on the receiving end.

3.2 Steps to follow for elaborating the improvements plan

The main steps to follow for elaborating the improvements plan are described below:



3.2.1 Identifying the improvement area

Once the diagnosis has been carried out, the assessed unit will know its main strengths and weaknesses in relation to the environment that surrounds it. The key resides in the identification of the areas to improve, taking into account that this requires that the weaknesses be overcome by leaning on the main strengths.

3.2.2 Detecting the main causes of the problem

The solution to a problem, and as such the achievement of an improvement area goal, begins when its origin is understood. There are many methodological tools for identifying these. The following stand out:

- Fishbone diagram (cause and effect)
- Pareto diagram
- Quality house
- Brainstorming

The use of one of the above or other similar tools helps us to analyze the problem to a greater extent and to prepare the way when it comes to defining improvement actions.

3.2.3 Formulating the objective

Once the main improvement areas have been detected and the causes of the problem are known, the objectives must be formulated and a period fixed for them to be achieved within.

As such, when drawing these up the following must be taken into account:

- The intended result must be clearly expressed.
- The objectives need to be specific.
- The objectives must be clearly drawn up.

The following characteristics must also be complied with:

- Realistic: The possibility of achieving the objectives.
- Concise: Fulfillment in time and level.
- Flexible: Susceptible to modification in the case of unforeseen contingencies without losing the initial focus.
- Understandable: Anyone involved must be able to understand what is hoped to be achieved.
- Obligatory: The will to achieve these results, doing whatever is necessary to fulfill them.

3.2.4 Select the improvement actions

The following step will be to select the possible improvement alternatives so that you can later prioritize the most important. The use of a series of techniques is proposed (brainstorming, nominal group technique, etc) to facilitate the determination of the improvement actions to be carried out to overcome the weaknesses. This means having a list of the Main actions that must be carried out in order to comply with the pre-established aims.

3.2.5 Carry out a planning process

The list obtained is the result of the exercise carried out, without having applied any priority order. However, some restrictions inherent to the actions chosen can condition their implementation, or make it advisable to put them off or leave them out of the improvements plan. As such, it is essential to get to know all the restrictions that condition an action's viability. Establishing the best priority order isn't as simple as proposing, initially, the execution of those actions associated with the most urgent factors: other criteria must also be taken into account. The most important include:

• Difficulty of implementation

The difficulty involved in implementing an improvement action could be a key factor to take into account, as this may determine whether or not it can be fulfilled. They must be prioritized according to the level of difficulty.

DIFFICULTY			
1 HIGH	2 AVERAGE	3 LOW	4 NONE

• Implementation period

It is important to take into account that there are improvement actions the reach of which is totally defined and do not require excessive effort, meaning that these can be carried out immediately or in the short term. On the other hand, there are actions that need other works to be carried out first or require a greater implementation time.

DURATION			
1 LONG	2 MEDIUM	3 SHORT	4 IMMEDIATE

- **Impact on the organization**

Impact is defined as the result of the action to be carried out, measured by the level of improvement achieved (a radical change has a much higher impact than small continuous changes). It is also important to take into account the level of deployment involved. If this affects various qualifications its impact will be greater as will the duration of the measure.

IMPACT			
1 NONE	2 LOW	3 AVERAGE	4 HIGH

Below is a table that is useful as a tool when it comes to establishing priorities for the improvement actions identified above. Once the points for each factor have been established, the sum of these is established, which serves as an **orientation** for identifying priorities amongst those that have higher total points.

Nº	Improvement actions to be carried out	Difficulty	Duration	Impact	Prioritization

3.2.6 Monitoring the improvements plan

The following step is the elaboration of a schedule for monitoring and implementing the improvements plan. This will include the ordering of the priorities with the time periods established for carrying these out.

3.3 Protocol for elaborating the improvements plan

To perform the proposed improvement actions, it is necessary to identify the specific tasks to be carried out in order to achieve the objectives. For that several aspects need to be determined:

- who is responsible for implementing and carrying out the improvement actions,

- the different tasks to be carried out,
- the necessary materials and human resources,
- the fulfillment period,
- the start date,
- the monitoring indicators and
- those in charge of carrying out the control and monitoring of indicators.

It is likely that this planning include a negotiation between all the managers and those involved, at different levels, in the assessed qualification. Also, the fact of giving an appropriately formal character to the improvements plan, according to the characteristics and working methods of each institution, makes its success more favorable, and as such, favors the success of the previously fixed objectives.

The protocol that should be followed in order to construct the improvements plan and to monitor it throughout its implementation is shown in the next section. It is made up of a series of tables that must be filled out in the order in which they are presented, as explained earlier in this guide.

3.3.1 Identification of the improvement areas

The collection of strengths and weaknesses detected during the institutional evaluation process will be the starting point for the detection of the improvement areas. It is possible that the analysis centered on the criteria of the model, given the interrelation that exists between these, will give rise to the appearance of strengths and weaknesses that, nuances apart, may be repeated. Wherever possible, these should be included in large logical blocks.

STRENGTHS	WEAKNESSES	AREAS OF IMPROVEMENT
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.
5.	5.	5.
(...)	(...)	(...)

3.3.2 Detecting the main causes of the problem

Once the areas of improvement are known, it will be necessary to identify the causes of the problem following the recommendations established in point 3.2.2 and to include these in the table included below. As many tables as there are identified improvement areas will be filled out.

3.3.3 Formulation of the objective

Once the causes of the problem are known the objective to be achieved will be fixed according to what is explained in point 3.2.3 and will be reflected in the same table.

3.3.4 Selection of the improvement actions

The selection of the improvement actions is the logical consequence of knowing about the problem, its causes and the fixed objective. Applying an appropriate methodology, as recommended in point 3.2.4, it is possible to select the most appropriate actions. The number of actions will depend on the complexity of the problem and on the organization of the internal management of the qualification.

It is important to take into account that this exercise must be undertaken with total and complete freedom; the restrictions will be taken into account in the following step, when we have to carry out the prioritization. If there are limitations during the selection, the possible actions would be limited from the outset.

IMPROVEMENT AREA Nº 1:	
Description of the problem	
Causes that provoke the problem	
Objective to be achieved	
Improvement actions	1. 2. 3. (...)
Expected benefits	

3.3.5 Carrying out the planning and monitoring

Now it is possible to begin to choose and priorities the actions to implement and to establish the elements necessary to achieve the pre-established objective.

To priorities the improvement actions we will follow the indications established in point 3.2.5

Nº	Improvement actions	Difficulty	Duration	Impact	Prioritization
1.1					
1.2					
1.3					
(...)					

Once chosen by priority order, we will construct an improvements plan which also incorporates the elements that make it possible to carry out the detailed monitoring of the plan, in order to guarantee its efficiency, in agreement with the table that will be added below.

The table obtained will possibly implicate the assessors' unit and other university bodies, making it necessary to negotiate between the different implicated parties, with the aim of obtaining agreement between them. This agreement will constitute the plan to be applied, in order to obtain improvement in the quality of the service offered, an improvement which must be clearly perceived by those on the receiving end.

IMPROVEMENTS PLAN N-(N+X)							
Improvement actions	**Tasks**	**Task Manager**	**Times (start-finish)**	**Necessary resources**	**Finance**	**Monitoring indicator**	**Monitoring manager**
1.1	a) b) c) (...)						
1.2	a) b) c) (...)						
(...)							
2.1	a) b) c) (...)						
2.2	a) b) c)						
(...)							

2. Working Groups for AfriQ'Units Project Partners

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  - Mr. Achim Hopbach, Managing Director of GAC

3. Glossary

- **Academic personnel:** university instruction personnel who carry out instruction and research activity.
- **Accessible and public information:** collection of data, messages and documents referring to the training programme issued publicly and with simple access.
- **Administration and service personnel:** non-instruction officials or staff personnel making up the administrative structure of University management and services. *(Catalogue of Indicators of the Spanish Public University System. University Coordination Council, 2002)*
- **Assessment methodology**: the various methods and techniques used for the approval or verification of acquired knowledge and the skills developed for the students.
- **Communication and dissemination:** processes by which information is transmitted and directed to the context outside of the university community; that is, both the society and the members of the university community and/or the training programme.
- **Continuous improvement:** concept employed in the management models implying a continued effort by the organization to advance the quality of the training programme.
- **Course**: collection of fundamental and necessary matters for obtaining training and later a university degree. Academically, the course is broken down or is structured in parts or elements, called "subjects." If there is no breakdown or structuring of a course into subjects, then the concepts of "course" and "subject" are

coincidental. *(Catalogue of Indicators of the Spanish Public University System. University Coordination Council. 2002).*

- **Credit**: unit of measurement and assessment of the academic activity, including theoretical and practical teaching, constituting each study plan.
- **Criterion:** principle or axiomatic basis defined a priori on which can be issued an assessment.
- **Discipline:** grouping of knowledge structured according to a collection of related phenomena.
- **Employment programme**: a regulated project intended to orient students in the final phase of studies to obtain their first jobs.
- **Experiential spaces:** specific work spaces that allow the student and the professor undertake tasks of instruction and research.
- **External Assessment Committee**: group of external assessors who carry out the External Assessment of the evaluated degree.
- **External practices**: collection of training activities carried out by the students in businesses or institutions, aimed at developing the practical and professional aspect of the training programme. These are of an obligatory or voluntary nature and are recognized or non-curricular.
- **Evidence:** proof that demonstrates the veracity of the data provided.
- **Graduate:** student who has completed all of the credits that comprise the study plan, without considering whether or not the university degree has been requested.
- In the case of the ECTS are included other directed academic activities and the amount of work that the student must carry out to complete the courses, subjects or equivalents and thus attain the educational objectives (European Convergence Framework document, MECD, March 2002).
- **Graduation profile**: a defined collection of knowledge and skills that the students must have at the end of the training programme.

- **Horizontal articulation of subjects:** Coherence and sufficient sequencing, within the same academic course and throughout the course of study, of the contents of subjects comprising the study plan to be evaluated.
- **Improvement plan**: Collection of actions planned, prioritized, timed and directed to improve the unit and the assessment process. The university carries out the review of the results of the External Assessment and the self-assessment report.
- **Indicator:** qualitative or quantitative expression to measure the point to which previously set objectives are attained in relation to the various criteria to evaluate for a specific programme (each criterion can be evaluated with one or several associated indicators).
- **Information system**: processes and procedures destined to transform the data produced by the organization responsible for the training programme and the university institution into reliable, complete, easily accessible and timely information for administration and decision-making.
- **Integral training of the student:** activities oriented towards the development of various areas of strength of the student, intellectual, emotional, aesthetic and physical, in academic and personnel areas, in order to encourage his or her preparation as a citizen and as a professional.
- **Integrative actions**: regulated actions aimed at encouraging integration and adaptation of the newly-enrolled student both to the training programme and to the University.
- **Knowledge and skills:** collection of knowledge, abilities and abilities related to the training programme that enable the student to develop the professional tasks collected in the graduation profile for the programme.
- **Laboratories and workshops:** spaces destined for the execution of practices, experiments, assemblies and other academic activities planned for the training programme.
- **Labour market:** the place where employers seek workers and workers seek employment.

- **Management:** action or actions carried out for administering the training programme and attaining its objectives.
- **Mentoring programme**: a regulated project intended to serve students from the human and learning point of view, providing counseling on academics and curriculum.
- **Newly-enrolled student:** persons registering in the training programme for the first time, without taking into consideration whether they were previously enrolled in another training programme in the same University.
- **Objectives of the training programme:** aspects, proposals and intentions to be attained and previously defined in the training programme among those found in the graduation profiles.
- **Official study plan**: collection of teachings organized by a University, according to official directives, and approved by the University Coordination Council, the completion of which implies obtaining, in the case of the degree programmes, the Bachelor's degree or that of architect or engineer.
- **Organization of teaching**: collection of norms or actions established in a institution of higher learning, with the purpose of structuring activities for the teaching- learning process of a training programme. (According to possible definitions in the RAE.)
- **Planning**: the process by which the team, persons or organization responsible for the training programme, designs the strategies for attaining its objectives.
- **Policies:** statements or general interpretations that orient the thinking of those responsible for the training programme in decision-making.
- **Principles**: fundamental reasons that serve those responsible for the training programme for its governing.
- **Professional collaborator:** professionals of external institutions and/or assistance centers who collaborate with the training programme without being integrated into the academic structure of the university (for example: professionals of clinical institutions, without contractual relationships with the university, who are in charge of supervising the practices of the students).

- **Representative sample**: collection of observations obtained from a population, through a random mechanism that provides, for precision and validity, inference of the results of the sampled population.
- **Results**: consequences of the processes related to the training programme.
- **Satisfaction of the…**: perception of the various collectives of the training programme, with respect to the satisfaction and expectations of each of them with the training programme or aspects of it.
- **Self-assessment Committee:** organization made up of members of the evaluated unit assigned to produce the Self-assessment Report and the Improvement Plan.
- **Strategy:** collection of actions and behaviors of persons, team and organization responsible for the training programme, coordinated and oriented to attaining its objectives**.**
- **Structure of the information system:** Collection of processes established to transform data into information for administration.
- **Student:** person enrolled, during the period referred to, in at least one subject of the training programme to be accredited. Persons coming from exchange programmes are not included as students of the training programme. "*Glossary of Terms of Indicators of the University Coordination Council."*
- **Student equivalence to full time:** total credits registered divided by the average credits corresponding to the same academic course.
- **Student learning time**: dedication of the student to the training programme, taking into account the class times established and the personnel work required acquiring knowledge and completing the programme successfully.
- **Subject:** teaching unit that administratively composes the study plan. Academically, it constitutes part of a course. (*Catalogue of Indicators of the Spanish Public University System*. University Coordination Council. 2002).
- **Suitable admissions profile:** a defined collection of knowledge and skills newly enrolled students in the training programme must have for its proper development.

- **Support programme oriented towards improving learning**: a regulated project intended to provide the student with methods and techniques that help and favor acquisition of the knowledge and skills collected in the training programme.
- **Team responsible for the training programme:** group of the university community responsible for the policy and the management of the training programme.
- **Teaching and learning methodology**: the various methods and techniques used in the teaching – learning process. (See teaching and learning process).
- **Teaching and learning process:** development of teaching and learning actions leading to successful training of the student according to the objectives of the training programme.
- **Teaching resources**: materials, teams, infrastructures and means for the development of the teaching – learning process of the training programme.
- **Technical Quality Unit:** the generic name of the organization of the university assigned to provide support and technical advice to the unit in the processes of assessment, accreditation and certification of the institution.
- **Tools for the assessment:** documents and work instruments facilitating the execution of the assessment processes. There are different types according to the committee to which they are directed and the corresponding assessment programme.
- **Training programme**: a collection of organized teaching leading to obtaining a title or degree along with all of the regulatory, technical, human and material elements surrounding it and to attaining the objectives established by the organization responsible for it.