**Higher Education Management Series** 

Number

# MANAGEMENT IN HIGHER EDUCATION

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Preface

This booklet is one of a series produced by the Education Department of the General Conference of Seventh-day Adventists. The series intends to provide an orientation to major issues in higher education and is written primarily for administrators working in the tertiary education sector.

One of the functions of the Education Department of the General Conference is to arrange for the accreditation of all education institutions operated by the Seventh-day Adventist Church. The Accrediting Association of Seventh-day Adventist Schools, Colleges, and Universities (AAA) fulfills this responsibility and identifies in its handbook its expectations for institutional operation. The booklets in this series are designed to help administrators improve institutional quality in line with AAA expectations and international best practice.

Each booklet is written by one major author, with an international team of readers providing advice and feedback. Booklets are available only through the Department of Education, General Conference.

Garland Dulan, PhD

Director of Education

General Conference of Seventh-day Adventists

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## Introduction

Higher education institutions have traditionally vied for renown for quality education, with external measurements such as achievement levels of graduating students and later graduate success as two evidences of that quality. In some countries external monitoring of final examinations has provided a measuring rod of institutional success; in others, other performance indicators have been used. In more recent years, however, significant focus has shifted internationally not just to evidence of institutional outcomes, but the internal processes by which quality is assured. Coupled with this has been an increased emphasis on the more formative elements of achieving quality, not just in the academic arena, but in all areas of campus operation. For Seventh-day Adventist institutions the self-reflection this holistic consideration of quality demands also reflects the church emphasis on education that focuses on the whole person (physical, mental, spiritual, emotional). This invites administrators to use quality management structures and improvement processes to enrich education and delight its customers in the spiritual areas as well as in the academic, social, physical and emotional spheres.

Quality Management in Higher Education will be in two parts, with a conclusion and a number of practical appendices.

Part I will provide a context for quality management, by considering definitions, issues, and the institutional structure and environment conducive to making quality procedures and processes effective.

Part II will provide a variety of ideas of quality improvement processes that could be used in different areas and levels of campus operation. As this booklet seeks to reflect international best practice, not all ideas and suggestions will be relevant or useful to every institution. However, all institutions should be able to develop their own quality management plan by selecting the improvement processes most applicable to their situations.

The conclusion will seek to help administrators focus in on the most important elements of making a quality management plan work and take life in the institution.

The appendices will provide some suggested timelines for quality management processes, some report outlines for faculty appraisal and further references for readers who wish to explore the issue further.

Finally, readers are encouraged to remember as they explore this booklet that it is better to start small on quality improvement than not at all, and to complete a few quality processes effectively and completely, than to have an extensive plan, where there is no follow through on evaluations and no measurable improvement resulting from the processes.

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## **Definitions and Principles**

While quality and excellence have always been a keen concern for educators in higher education, the debate on how to manage or improve quality internally has intensified in more recent years.

Terminology can confuse the issue, with the terms quality management, quality assurance, quality improvement, quality control and quality assessment being some of the key terms used to describe all or part of the institutional process of focusing on quality issues. While definitions of each term have broad agreement, specific understanding of the terms can vary. Internationally, different countries have tended to adopt one or more terms more than the others for describing their particular processes. This in turn can reflect slightly different foci specific countries may have in application of quality principles within their education processes.

However, despite the variations of terminology and approaches, international trends in quality improvement and management have tended to converge rather than diverge, particularly when it comes to the principles of what an institution should be like that is effectively engaged in improvement of quality. Even where specific approaches to development of improved quality exist, interchange of best-practice continues to help government quality agencies and councils refine their processes and expectations.

In this booklet the term quality management (QM) will be used generically to refer to structures within a higher education institution that assist in the management of quality issues and the term quality improvement (QI) will be the preferred term for discussing the more specific quality processes. Ideas on processes will reflect a range of best-practice approaches used internationally, giving institutions a range of ideas from which to select those that best fit their situation.

What are the general principles, then, underlying an effective approach to quality improvement?

In practice quality improvement is concerned with an ongoing cycle of agreeing on a set of standards and/or goals, gathering relevant information, evaluating feedback and ensuring the implementation of change. An institution involved in a strong and effective process will be characterized by the following:

- An institutional culture that is open to constructive evaluation and to change.
- · A high level of satisfaction from students, employees and external cus-

tomers.

- Institution-wide embracing of the concept of quality improvement, including commitment to participate in institutional improvement and growth.
- Evidence of ongoing measurable improvement in institutional performance in agreed areas of need.
- Open communication within and between different areas of operation.
- Self-confidence of the institution in its ability to manage its own future, and evidence of its success in doing so, particularly in relation to any external accreditation bodies.

#### The Issues

Quality management discussions have ranged widely in recent years. The resources section of this document will provide ideas for further reading. However, the following principles provide a framework for development of all quality management structures and improvement processes.

Internal quality management complements external accreditation expectations.

External accreditation (or validation) agencies have traditionally evaluated an institution in relation to a set of expected standards. In some countries this is still a major focus and in all countries will remain an important element of accreditation. However, much more importance is now attached to an institution's ability to manage effectively its own quality. This means external accreditation bodies want to find mature institutions that can successfully identify their own strengths and areas for needed improvement, and then develop a strategy to bring necessary changes that are evidenced by outcomes.

For example, an accreditation report by a visiting team to one institution read as follows: "\_\_\_\_ should be satisfied that the College has developed procedures and practices which will continue to give assurance that the College is meeting \_\_\_\_ requirements, and that it has demonstrated its viability and its capacity as an institution that has established its own planning and quality assurance processes." Or in other words, this institution, in the opinion of the accreditation team, is able to manage its own future quality and therefore the accreditation body should have no reservations in granting its future accreditation.

This focus on institutional quality management changes the way that higher education institutions should see external accreditation. It is still an important process, but it is one that helps guide the internal processes, pro-

viding assistance in developing guidelines of accepted standards and monitoring the institution's effectiveness in responding to these. If the institution is effectively developing and monitoring its own standards, then the external bodies are more likely to agree with the recommendations and directions already set up internally. However, the most important reason for quality improvement is that it helps the institution focus continuously on doing its job better.

For maximum effectiveness, quality management decisions, especially the identification of quality objectives, should be linked to the institutional strategic plan.

Strategic planning and quality management look at different aspects of the present and future of an institution. However, there are clear areas of overlap and effective coordination between the two will strengthen the institution and avoid unnecessary duplication of effort.

The most important area of overlap is in setting of goals. While a strategic plan looks widely at institutional identity and direction, some of the institutional goals and objectives identified in the planning process will be directly or indirectly related to institutional quality. This will be particularly the case if Key Performance Indicators are used to characterize institutional goals. The overlap will be even more significant at unit levels, particularly academic departments. Institutions should ensure that there is enough communication (ideally through overlap of individuals involved in decisions in both areas) to ensure that goals and objectives responding to the same issue are not in conflict, and ideally are the same.

The action plans developed to respond to goals will similarly have areas of overlap. Once again good communication will ensure that these plans work together, not against each other, and that faculty and staff are not overloaded in implementing agreed changes.

It may be that while quality improvement processes may still need to operate with some independence, that one "standing" area of the strategic plan should be the area of quality. This would neatly tie the procedures together.

All quality improvement processes will be most successful if the institutional culture is that of a learning organization.

In broad terms a "learning organization" is an organization that is open to (even enthusiastic about) change and improvement. This is not always the automatic culture in a higher education institution, where traditions can be strong and departments or divisions/schools can operate with a high degree of independence. A learning organization will be open to wide-

ranging input, communicate across departmental and/or school lines and be willing to challenge long-held traditional positions—not for the sake of change, but when changes may be necessary for positive change and growth. This means, in effect, that there are no "sacred cows" at any level or in any area of the institution. Transparency, openness, responsiveness and creativity are the words that best describe a learning organization.

It is possible to have effective quality improvement in an institution not characterized in this way, but the effectiveness may be limited. In fact, it is likely that most campuses have not fully developed the culture of a "learning organization." However, if the present institutional culture is operating against the ability of the campus to manage institutional quality effectively, then the administration has the responsibility to initiate change to enable that to happen.

An institutional quality management plan is concerned with all aspects of a campus community, as well as having consideration for any external customers.

The need for quality and management of quality in the delivery of academic programs has been generally accepted in higher education. Procedures may have been informal, or may have relied on external evaluation processes, but they have been accepted as necessary. However, an institution-wide quality improvement plan moves beyond the area of academic quality. Its concern is equally with the physical campus, the quality of student life, the attitudes of faculty and staff, the satisfaction levels of faculty and staff, the spiritual environment and the service to external constituencies. In effect it is concerned with every area of campus operation. It must be comprehensive.

A quality management plan needs to be supported by accurate factual information.

It is important that the documents gathered by an institution support the quality improvement processes and are relevant and accurate. This is where all administrators involved in quality issues need to recognize that they do not operate in a vacuum. Ideally the institution should have a regular process in place to gather factual and quantifiable data about institutional quality (along with other issues). It is important that the information gathered by institutional research (research about the institution) supports both quality improvement processes and strategic management processes. Once again, communication between different institutional groups is vital. The individual(s) leading on quality management need to

inform the necessary individuals/groups of what information they need on a regular basis, and need to take advice back on what may or may not be possible or objective.

Not all information that is part of quality improvement processes will be factual or objective, and not all information will be gathered centrally. That is inevitable. Neither is it possible to look at all campus areas and issues simultaneously. However, those making decisions about what changes need to be made must have a good understanding of the total picture. For example, no one localized but vocal group should be given more opportunity to impact the processes than others.

Any procedure developed to manage institutional quality needs to be manageable and comprehensible at each level and to all individuals expected to implement the process.

An institutional quality management structure can be very complex. It deals with many areas of the campus, it seeks to be inclusive and it wants to bring positive change at every operational level. However, despite its broadranging impact, whatever structure is introduced must appear simple and comprehensible to those who need to implement any part of the process. Although it may be useful for the whole campus to understand how the total plan works, in practice, what employees really need to know and understand are the principles of the procedure and how it impacts them in their work. And what the whole campus needs to know is how they can give input into the processes of quality improvement in a way that ensures each person will be heard.

Any effective quality management plan finds a good balance between the formative (helping growth happen through feedback) and the summative (factual evaluation of final success).

Whenever evaluation is involved, there is always a level of summative evaluation involved. This gives a final judgment on a situation. A quality management process that does not draw some end conclusions will be a weak one. Such summative evaluations, for example, might be that the programs operated in the school of education are weak in technology training and pedagogy. This may be concluded after considering feedback from a number of sources. A summative conclusion that identifies areas of concern should result in major recommendations for change and improvement.

A formative evaluation, on the other hand, is feedback that leads to re-evaluation and change in a situation where immediate changes are possible and may correct identified issues of concern. For example, a teacher may take an evaluation of a class midway through a semester to see if his or her goals are being reached. If not, there is still opportunity to re-evaluate the structure or teaching methodologies being used. Or students in a four-year program may be invited to give feedback after two of the four years. Based on the feedback, the department may decide some refocusing of some content courses is needed in the next two years if program outcomes are to be achieved.

Good quality management procedures will be concerned with both formative and summative evaluation and finding the correct balance of these for institutional improvement.

Wherever quality improvement processes invite feedback, a plan needs to be in place to "close the loop" and ensure all relevant individuals see decisions being made and actions being taken.

Confidence in quality improvement processes are often as much related to the effective communication of the processes as they are in the decisions that are made. So, for example, if students are invited to complete an end-of year survey on their educational experience that year, a summary of the main conclusions should be given back to them, including an identification of actions that will be taken as a result of the feedback. The only time a feedback loop cannot be completed is when the feedback that is given is confidential, such as in student evaluations of individual teachers.

## Structures and Responsibilities

#### Structures and Individuals

Ensuring that a strong quality management plan is both in place and operating effectively is the responsibility of senior administration. Managing the process of quality improvement is the responsibility of all faculty and staff. Everyone employed on campus should recognize this as a priority expectation.

However, developing structures to ensure quality management happens in an effective and cost-effective way (cost related here to both financial and human resources) is more complex. The actual structure adopted by an institution will vary, dependent on other institutional structures. However, that choice of structure needs to take the following questions into consideration:

- How can the institution best structure a process that ensures all areas of the campus get attention?
- How will the structure relate to the strategic planning structure?
- How will the cycles of quality improvement take place at each level (i.e.

the combination of setting objectives based on data; following through on plans; evaluating success, and revising action in line with evaluation)?

- How will there be co-ordination between different areas of campus operation?
- Who will have overall responsibility for the management of the agreed processes?

Here are some suggestions of how the structure could work:

Name the individual (or individuals) responsible for managing the plan.

This could be one or more of the vice-presidents; it could be another named individual. However, some clearly identified individual needs to have overall control of the plan and be given sufficient authority to act effectively.

Choose a central body/committee responsible for overall management of quality processes.

This group will not be responsible for the day to day management of quality improvement but for goal-setting, coordination between areas of campus life and receiving reports. It may be, particularly in a small institution, that the central strategic planning committee could be given this as one of its functions to ensure there is no unnecessary overlap or duplication of work. Or the senior administrative team may serve as the central management body, with one or two additional invitees. If a separate committee is formed, this could be called the Quality Council, for example.

Select sub-committees that will be responsible for the management of the quality in different parts of the campus.

These groups will be the ones that are responsible for implementing the quality improvement processes in the various areas of campus operation. One of the groups will need to be academic. Depending on the structure of the rest of the campus, there could be one or more other groups dealing with the non-academic side of campus life and experience. It may be that other than in the academic area, where specific focus on academic program quality is essential, other existing committees can be asked to take the responsibility for quality management as one of their committee terms of reference. For example, if there is a spiritual life committee, or a student life committee, or a plant services committee, each of these could have a fixed agenda item which focuses on quality. However, if this model is used, there must be sufficient accountability so that the issue of quality is not lost

amidst other more immediately pressing issues. The person(s) selected to manage the total process should ensure that does not happen.

Ensure that at the level of every department quality improvement is an issue that is constantly on the agenda for discussion and that an ongoing evaluation cycle is integral to department operations.

It is important that every department can articulate how it seeks to continuously improve quality and can report the results of its processes to the responsible individual or committee.

Develop an institutional culture where every individual employee, in both formal or informal ways, is personally involved in evaluating and improving his or her personal performance.

In effect, there are a minimum of four evaluation cycles that should take place in an institution:

- The individual employee
- The department
- The campus area (i.e. administration, academic, student life, etc.)
- The total institution

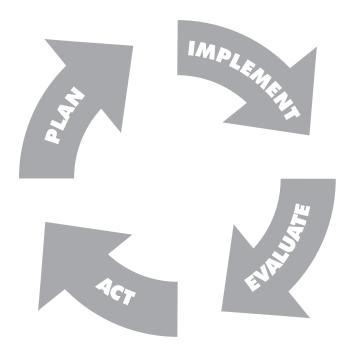
Where the campus is large there may be more cycles of quality improvement occurring. Where the campus is very small, numbers 2 and 3 above may be combined or eliminated. In some institutions, each standing committee may be asked to go through a cycle of annual evaluation of itself and its operation.

#### The Continuous Quality Improvement Cycle

As identified already in this document, a traditional quality improvement cycle starts with evaluation of the present, and then sets goals (with action plans) for the future. Plans are implemented and then after a reasonable period of time, the effectiveness of the implementation is evaluated, and appropriate conclusions are drawn and appropriate actions taken. At that point the cycle starts again.

<sup>&</sup>lt;sup>1</sup> Jens Dahlgaard et al discuss the development of approaches to quality improvement cycles, the traditional PDCA cycle (Plan, Do, Check, Act) and the later modifications to the PDCA model to focus on the "learning" aspect of quality improvement. See article details under Further References.

So we have the following:



The next questions are: who acts at each point of the cycle?

The quick answer is "everyone". Each group responsible for quality improvement at its own level evaluates itself, sets its own goals, evaluates the success of implementation, and refocuses. However, just as external accreditation bodies that visit institutions monitor the institutional quality management structures and determine if they are working, so each institutional group is responsible for providing enough information on quality improvement processes to the group above, for them to make that same assessment.

For example, each academic department will have its own quality improvement processes in place. However, the Academic Quality Committee (a unit committee) will expect each department to report what its processes are and the results of its processes to that group. In turn, the Academic Quality Committee will ensure that the Quality Council (central committee) knows its processes and receives its report. A simple annual report may be the best means of ensuring that information is passed on in

a regular way. And if the receiving committee is not satisfied with the report, then it is their responsibility to react and make recommendations back to the other group. In fact, that will be part of their report to the group monitoring their effectiveness.

Here is another visual chart of how the overall structure can work:

| ADMINISTRATION  | Listen. Act. Lead.   |
|-----------------|--|
| QUALITY COUNCIL | Receive unit reports. Coordinate total quality process. Recommend to units and administration.   |
| UNITS           | Receive reports from departments. Manage own quality cycle. Recommend to central committee and to departments. Act on recommendations to themselves.   |
| DEPARTMENTS     | Departments manage own quality cycle. Receive range of feedback. Evaluate. Act on recommendations to themselves. Report on processes and recommend institutional issues to next organizational level.  |
| INDIVIDUALS     | Individual employees involve themselves in an ongoing process of self-evaluation. Participate in department processes and institutional appraisal processes. Are proactive in setting personal professional goals.  Take ownership of institutional quality process. |

The levels that will exist within a particular institution will also vary. For example, in a small institution there may not be a separation between units and departments. However, as this pyramid suggests, at each level of operation communication flows up and down. Also at each level there is a personal or group responsibility to act.

In general an annual quality improvement cycle works well at the grass root level of operation. Depending on the size of the institution, a one or two year cycle will normally be used for the institutional quality improvement cycle. Examples of timelines for cycles at different levels of institutional operation can be found in Appendix A of this document.

#### **Beyond the Quality Management Structures**

So far, this document has identified a largely simple structure for quality management operation. However, it is important to recognize that not all quality improvement processes will fall neatly into the structure defined above. For example, evaluation of classes by students is a means of quality control; so are annual appraisal interviews with faculty and staff. However, the information resulting from these processes is in most institutions considered confidential. How does the information gathered in ways like these impact the institutional focus on quality improvement?

First, those who do see the information gathered from such evaluations, or are involved in the processes, will have input at some point in the other more open processes. Their knowledge and experience will inevitably impact on their input at those times. For example, a department chair who has seen a pattern of comments on student evaluations of faculty that suggest a general dissatisfaction with the lack of practical application in department courses should feel free to raise this as an identified concern, without reference to specific teachers or classes. These non specific comments provide an important informal connection between these personnel focused evaluations and the wider quality management cycles of the institution.

Second, it is generally recognized that personnel evaluations will not always neatly tie in with the rest of the quality procedures. However, they are important and should be recognized as part of the overall quality management structure in an institution.

Important as these processes are, this document will not consider the more directly personnel focused evaluations specifically, but only the more open processes in which the whole institution will be involved.

If a quality management plan is operating effectively in an institution, quality improvement processes will integrate seamlessly into the total institutional operation. The processes will be streamlined, but will permeate every level of the institution, ensuring continuous focus on improvement in all operational areas. However, an institution will always need to make choices on what procedures and processes will work best within its specific environment. This will be particularly the case for any institution that has not previously given significant focus to quality management issues.

If this is the case, an institution should first consider introducing those processes that will most help introduce the desired "learning culture" in the institution, and produce measurable results in the short-term. These priority choices will vary between institutions, particularly where national expectations prioritize certain quality processes over other. This part of the booklet helps identify what some of those choices might be in the three areas of academic quality improvement, non-academic quality improvement, and what is broadly termed "other" processes. However, how to prioritize these must remain an institutional decision.

### **Academic Quality Improvement**

## **Faculty**

Academic quality improvement starts with the individual faculty member. Most instinctively reflect on their teaching processes and the effectiveness of their classes. However, it is important to ensure that faculty do receive useful feedback on their teaching and general performance and are given opportunity to set goals for the future.

Official student evaluations of courses are one way that this feedback comes to teachers. Such evaluation processes should be as objective as possible to give the most helpful response to teachers. This will ideally mean:

- That forms are anonymous, and where classes are small that written comments are typed up by a reliable third party, so students will feel they can be honest.
- That the same class is evaluated over a period of two or three years, so that the teacher can get a pattern of responses.

In some institutions the form given to students is the same for every class. In others the central core of questions are the same and reflect the issues of focus of the institution to all teaching and learning. However, teachers can add additional questions that ask for responses to their specific concerns in a class.

It is also helpful to faculty to have some formal and structured way to reflect on their teaching, along with other aspects of their employment (such as research/professional development and service involvement). A performance by objectives type of annual report is one good way of achieving this. These reports ask faculty to identify and reflect on the areas of greatest satisfaction and concern in the last year in, for example, teaching, research and service; what their goals are in the next year and in what ways they may need help in achieving their goals (see the sample report in Appendix B). Such a report encourages faculty to be self-reflective and consider ways they want to develop themselves. These forms may be best used as the basis for annual appraisal interviews.

Most of the quality processes affecting faculty will not be public, although there will be some open department processes that will provide faculty with helpful feedback, and give them opportunity to openly reflect on their performance and ways of further enhancing it. It is also important to remember that while the major focus in quality management is student satisfaction and success, it is also concerned with faculty and staff satisfaction. These processes should help in those areas, as the concern is not solely with whether an individual is performing adequately. There is also interest in the development of each employee.

#### Department/Division/School

A variety of possibilities of ensuring quality at the department, division and school level exist. Those that are selected will to some degree depend on the current educational environment in the country, and also the size of the institution. The comments below will be directed specifically at departments, but in some settings, these ideas may be applicable at school or division levels.

Cross-marking: In some academic environments cross-marking (or double marking) is an expected part of quality management in higher education. Cross-marking means that for a selected number of major assignments and examinations, at least two faculty grade the work or examination. This assists in ensuring fairness of grading and equitable standards as well as assisting in quality management. In some countries an external marker or examiner will also grade a certain number of papers and examinations, in addition to two internal markers. The external process encour-

ages equitable standards, not just within the institution, but also between institutions in a country.

Department Approval of Syllabi and Examinations: Some departments choose (or are expected) to discuss together all course syllabi before a course is taught, and all examination papers students are expected to take. Ideally such discussions ensure that courses are taught at a similar level and that there is good understanding within a department of what is happening in other classes. This helps teachers integrate content and skills between courses. It also helps departments check that their overall learning outcomes (see below) are likely to be met and that assessment loads are fairly distributed.

Department Approval and Discussion of all Final Student Grades: Such discussions help a department evaluate the average level of performance of its students, where individual classes appear to be too difficult or too easy for students, and where individual students are performing badly. In this way departments and individual faculty can respond quickly to perceived areas of concern.

Agreeing on Department Aims and Outcomes: All departments should develop their own learning aims and outcomes. These will usually be based on institutional objectives and outcomes, but will be more focused to the particular discipline and program. Where there is more than one program in a department, aims and outcomes should be agreed for each. The department should also agree how to measure their success in helping students achieve the learning outcomes. Certain outcomes may be evaluated through individual course examinations; some through core testing (such as in the area of technology use); some by student questionnaires that ask for feedback on key areas of the program and others by practicum experiences.

Developing Standards for Levels of a Program: Some departments and programs may want to not just delineate desired outcomes for total programs, but desired outcomes for different levels of the program. This will be especially valuable in countries where the progression of a degree program is largely fixed. Some institutions will also expect application by students to move from one level of a program to another. This will provide points throughout a degree for formal consultation and refocusing between faculty and students.

Profiling Grade Expectations: In some environments, profiling grades very simply means identifying "A" as excellent, "B" as good, etc. However, others develop a more sophisticated analysis, such as "A", a high level of conceptual understanding; excellent knowledge of facts; strong written and oral skills in communicating information, etc. Such a profile (which may vary for different levels of a program) assists students in knowing depart-

ment expectations, and faculty in knowing how to grade, especially with longer, non-objective forms of assignment. These grades and descriptions are often also tied to fixed percentage points.

*Exit Interviews:* It is usually when a student finishes a program that an institution will get the most useful and honest feedback. This is often best achieved through a department interview or questionnaire. Interviews should explore general student satisfaction, but focus particularly on the desired outcomes of the department.

Alumni Surveys: It is often after students have left an institution for a couple of years that they have the most complete picture of what their education has done for them. Focused surveys of graduates at selected intervals are therefore a very useful way for a department to identify the strengths and weaknesses of their program in the marketplace beyond the institution.

The ideas above are in no way exhaustive. However, the questions that do need to be asked by each department are: "How can we be sure that the quality of what we are giving students is the best we can do? What processes can we implement to ensure that we are managing the quality and receiving enough accurate feedback to evaluate how we can improve?" The responses can then be contextualized. Whatever processes are in place, there should always be a formal procedure when each department reviews its desired outcomes, its processes and its effectiveness in reaching its outcomes. Based on the review, plans for improvement and change can be made, from changes in the core content of a program to the way student comments will be collected. Other recommendations will be more farreaching and impact on funding of the department, for example. These will need to be passed on to the administrative group who can deal with that particular issue.

One important area remains: the responsibility of the department in considering faculty quality and satisfaction. As identified in the section on faculty above, much of the question of quality improvement when it comes to faculty will operate within a different structure. However, there remain some areas that departments should consider. For example, what if the feedback in a particular year suggests that the department is lacking in skills to deliver the curriculum using technology? Or that teaching skills are weak in some areas? Or that although teaching is strong, some faculty do not seem to be up to date in their area of teaching/research? Then the department has the responsibility to discuss how these areas of need can best be met. It may mean sending recommendations to another campus committee; it may mean agreeing to prioritize department funds to develop faculty in particular ways.

Overall, a quality improvement approach in higher education operates

against the traditional view of a teacher having sole control of what happens in his or her classroom. This is a difficult transition for some faculty to make in their thinking. However, the concept that the department as a whole has responsibility for ensuring the delivery of a quality program is an important principle in higher education that is becoming a universal international position. This does not mean that the individual teacher should not have any personal autonomy or rights. It does mean that these must always be balanced against the expectations of students and institutions that all faculty will work in a united way to deliver education of quality.

#### **Unifying the Academic Processes**

The primary responsibility of the institutional Academic Quality Committee is to ensure that at all levels of academic operation quality is being effectively managed and that institutional outcomes are being reached. This committee both reports up to the institutional Quality Council and receives reports from other groups. It also recommends to departments and other academic committees on any area that relates to improvement of quality.

What does this mean in practice?

Relationship to departments/schools/divisions: If department quality management processes are working well, the Academic Quality Committee will largely (a) decide what they want in the form of a report from each department (b) receive and debate the reports and (c) feed back comments on the department report. Feedback could include agreement with department conclusions, specific concerns, or further recommendations.

The Academic Quality Committee may also want to suggest some unifying quality improvement mechanisms that it wants all departments to adopt. This could be any one or more of the processes identified under departments above. If so, these suggestions may need to be channeled for further discussion to a wider forum of faculty. Essentially, the primary job of this committee in relation to academic departments is to help them manage their own quality well.

However, the role identified above is largely a formative one. The Academic Quality Committee may also want, or be expected, to take a more summative role in quality management. This could be, for example, by having a cycle of department/division formal reviews, where the committee, in cooperation with academic administration, initiates a 5-year (for example) evaluation of department operations. A 5-year review may ask for a longer report than the typical annual report, focusing on department effectiveness over a longer period. It may also include more focus on suc-

cess of graduates than is in the annual report and track profiles of faculty research, etc. A review team may consist of some academic administration, some faculty from other departments and, ideally, at least one individual in that same discipline who is teaching at another university or college.

The combination of formative and summative evaluation provides a good balance to quality management, allowing plenty of opportunity for department and faculty self-evaluation and development, while recognizing the importance given to quality in all areas of its operation by management. Finally, it is an administrative expectation that quality is achieved.

Relationship to other academic committees: One of the biggest challenges in any institution is to develop a committee structure that is streamlined, inclusive and effective. The question must be asked: "Are the issues that need to be dealt with to ensure academic quality being dealt with well?" The feedback the Academic Quality Committee needs from the other committees relates largely to the effectiveness of their operation. No long reporting process is needed, but it is important that the committee processes are reviewed regularly. The Academic Quality Committee is a very good place for this discussion to be initiated and a good committee to initiate recommendations for change.

Relationship to faculty and academic administration: While other processes and individuals on campus will be responsible for dealing with individual personnel issues, the Academic Quality Committee will receive information that impacts broadly on personnel issues. For example, a variety of department reports may all suggest that students are complaining about lack of good advising, or of the attitudes of faculty and staff. This is a quality issue and the information, with recommendations where appropriate, should be passed on to a group that can deal with the concern more specifically. Issues related to faculty training and development needs may also come through to this committee. Once again, recommendations can be made that relate to total faculty campus issues.

Relationship to academic service areas: This might include computer services, the library, academic resource areas, counseling and testing. Whatever areas/departments fall administratively under academic administration should report to this committee. In areas where administrative authority falls elsewhere on the campus, then information and recommendations can be passed on. Similar to academic departments, service areas can also develop objectives, measure their success, evaluate the results and set goals. There should be no difference in the basic management cycle.

*Relationship to institution:* The Academic Quality Committee will focus on the academic side of campus life. In that it will report to the institution-

al Quality Council, there will be a natural flow of information and recommendations between the academic quality committee and the rest of the campus. Generally, then, that central Council will receive recommendations that relate to other areas of campus and pass these along. However, the institution needs to decide the most practical way of channeling and managing information. The question here is: "Is there a good flow of communication on quality improvement and management issues, and is there accountability?" This means that when recommendations flow up or down or across lines of communication, a response should be expected within a reasonable timeframe. If not, the process is not working effectively and a review is needed!

## **Non-Academic Quality Improvement**

Since the upsurge in interest in quality management issues in higher education in the last few decades, a number of studies have explored the most important quality issues to students on campuses. In general terms, while academic programs have ranked as important, the issues of relationships with students and faculty/staff and the physical campus have typically rated higher. In addition, within the Seventh-day Adventist education system, the quality of student life in general, and the spiritual environment in particular, remain important quality issues.

## The Physical Campus

First impressions are often hard ones to change. Before students even set foot in a classroom, they will walk on the campus, experience the residence halls and walk through campus buildings. Although there is no immediate connection at all, student perception of institutional quality will often be initially based on these experiences.

For most institutions maintaining the physical campus is a constant challenge. However, these needs should remain at the top of the priority list. In addition institutions should balance the need to deal with the "hidden" maintenance needs that may are critical to the institutional operation with the aesthetic desires of the campus community. While the first is essential, the second will often have more influence on satisfaction levels and perceptions of quality. A clean campus where public areas are kept attractive and freshly decorated will do much to improve the image of a

<sup>&</sup>lt;sup>2</sup> The selection of essays edited by Brent Ruben in *Pursuing Excellence in Higher Education* provide a variety of approaches and reference a number of studies concerned with the wider quality issues for a campus.

campus.

How should quality management of the physical campus take place? It could happen in a number of forums, but it is important that input is broad and that a maintenance schedule is agreed that involves administrative input. It is also important that satisfaction surveys of all campus groups include questions that invite reactions to the physical campus environment.

#### The Attitude of Staff

The positive attitude of staff is vital to the real and perceived quality of an institution. Positive attitudes include professionalism and friendliness towards students, good team spirit among colleagues, and loyalty to the institution and administration. When there are problems amongst the faculty and staff the influence on students is often just as negative as if the problems are in the direct relationships with students.

Feedback from any constituent groups that suggest there are ongoing problems in these areas should always be taken seriously. While staff and faculty receiving comments should be self-aware and responsive to genuine concerns, problems in staff attitudes will normally be an administrative concern.

#### **Bureaucratic Processes**

The day to day operation of an institution also reflects on perceptions of quality. If an administrative office has a pattern of making errors, this erodes confidence not just in this area of the campus, but often in the whole campus.

In general, the problems in these areas tend to be:

- Processes are too complex: it is an administrative responsibility to try and make bureaucratic processes for students, faculty and staff as simple as possible.
- Inefficiency and errors: if this is an ongoing problem, there needs to be either additional training or redeployment of staff.
- Communication is poor: Most individuals in a campus community see bureaucratic processes as unfortunate hurdles blocking what they really want to do—study, teach, etc. Therefore, remembering to follow through on quality improvement processes will be a problem for a significant number of individuals. The only solution is to communicate and keep communicating, in as many different ways as possible.

Evaluation of bureaucratic processes will normally take place alongside other evaluative processes. Such evaluations could be initiated by specific offices or departments, especially those constantly offering services to students: registry, student finance, computer services, for example. They could also be initiated by a central office and be part of campus wide satisfaction surveys (see the total non-academic process section below).

#### Student Life

Student life in this document will refer to all areas of daily living that impact on a total learning experience for a student. This includes campus security, parking, campus facilities for socializing and sports activities, the cafeteria and campus organized activities and clubs. It also includes student government processes, including their grievance procedures and the channels of communication between students and administration.

It may be that all of these areas of campus living are the responsibility of the same administrative personnel. If so, that will make the job of quality management easier. If not, it will still probably be advantageous for the institution to consider a holistic way of evaluating these areas, whether or not they are linked to the other areas identified under non-academic quality assurance.

Inevitably these areas will bring student complaints; however, the importance of the quality assurance process will be to identify what are the real issues of concern that can be improved and what reactions are very individual. An annual end of year survey may be a good way to get broad ranging responses to all student life issues. This will mean that the individuals who are responsible for these areas will have the end of year break to (a) consider how they will respond to both the survey and other evaluative feedback and (b) decide their goals for the following year.

#### The Spiritual Environment

For a Seventh-day Adventist institution the spiritual environment is one of the extras of student experience that should impact on the total satisfaction of life at a college or university. However, it is also the area where there are often most wide-ranging expectations by the campus community (students, employees, Board of Trustees). Quality assurance in this area will be best tied to the spiritual master plan of the institution, which in turn should be clearly connected to the institutional mission and objectives.

Can spiritual success be measured objectively? This debate will continue, but for the purposes of quality improvement, specific questions should be asked by the institution of itself. These will include:

- Does the community as a whole consider the spiritual environment on campus one that encourages personal commitment and spiritual growth?
- Is there evidence of spiritual growth throughout the experience of a student on campus?
- Is there evidence of spiritual maturity and commitment to a church amongst graduates that last beyond their college years?
- What are the areas on campus that impact spirituality most successfully?
- Where can there be continued development and growth?

The institution should act on the assumption that the development and nurturing of a spiritual environment is the responsibility of every area of campus, even though one, or a group of individuals, may be named as those "in charge" of spiritual life. Quality management should be concerned with structured worship experiences, but also with the integration of faith and practice in classes, the informal structures of relationships amongst students and between students and employees, and the general institutional culture.

Feedback on student spiritual experience can be included in general surveys or be more specifically targeted. On most campuses it is advisable to have a group solely responsible for facilitating the total spiritual experience of students. Whatever the means of evaluating this area of campus life, this committee/group should be the one to evaluate the feedback and make recommendations for change and growth.

#### Unifying the Non-Academic Processes

This document has been much less specific in recommending structures and processes for the quality management of the non-academic areas of campus life than for the academic. This is because, as noted above, the range of services is very broad and management structures relating to these areas vary considerably from campus to campus. The principles to remember, however, are:

- All areas need to be included in a holistic quality management plan.
- Co-ordination of efforts is vital so that students and employees are not over-saturated with requests for feedback.
- The central Quality Council should ensure that quality procedures are clear, that regular feedback and reporting is taking place and that all staff are committed to the quality improvement processes.

In some countries student questionnaires are available for higher education campuses that cover all the areas identified under non-academic processes above. The returned questionnaires are externally assessed and quantitative responses made available to the institution, often with comparative figures to other similar institutions. Individual campuses are also often able to add their own institution-specific questions. This is an excellent aid to quality improvement, as it provides comparatively objective feedback and useful benchmarking information. Where such processes are not available, an annual questionnaire, developed internally, that looks at the broad-ranging campus life issues identified above is a good substitute. Such a form could be developed by the central committee, or a named administrator who has major responsibility in the non-academic area of campus life. After central collation of the material, the relevant departments can then receive the responses related to their operation and be asked to use the material, along with other means of evaluation and self-evaluation, to plan for the following year.

An annual centralized survey does not prevent individual areas of campus from developing other processes of evaluation. These could include student focus groups, student government forums, and focused surveys to provide quick evaluative response to specific issues. However, it remains important that the institution looks at the total quality management procedure in a holistic manner and that there is good co-ordination of all processes. Everyone in the campus community should know that the campus considers quality important, that valid concerns on quality will be taken seriously, and that every employee on campus is vital to delivering a quality student experience.

## **Other Quality Improvement Processes**

While the major concern of quality improvement is the internal operation of the institution, quality processes should expect that other committees and groups key to the operation of the institution be involved in quality assurance. In the case of the Board of Trustees and the Alumni Association this will include providing them with the opportunity to feed into the wider quality improvement process as well as evaluate their own operations. In the case of constituencies impacted by the institution (the wider church community, the local community) involvement will be in the form of providing information on satisfaction.

#### The Board of Trustees

For example, a minimum of once a year the Board of Trustees should go through its own self-evaluation process. This could involve inviting key groups on campus to give feedback on how effective the board is in areas such as communication, efficiency and showing active interest in the campus. It should also involve the board asking questions of itself, related to its operation, its understanding of important issues, its use of time in meetings, and its overall commitment to the institution and its administration.

The Board of Trustees also needs to be involved in feeding back information to the campus on perceived quality, especially in key areas, such as administrative effectiveness. It will, for example, be the responsibility of the Board to arrange for the appraisal of the institutional President on a regular basis. This should follow the pattern of the processes in operation throughout the campus and should give the President the opportunity to reflect on his or her own performance and identify goals for the future. A sub-committee of the Board would normally provide the right environment for this type of evaluation. Similar to faculty and staff appraisal processes, this process should be confidential, but will indirectly impact on the total quality management decisions that the Board will make.

#### The Alumni Association

Alumni associations are active to varying degrees in institutions worldwide. Some are very structured and play an important role in supporting the institution and maintaining contact with institutional alumni. Where this is the case, inviting this group to evaluate its own effectiveness will be appropriate. In other cases it is the institutional administration that is responsible for all alumni contact. In this situation, the effectiveness of the contact will be considered as part of the evaluation of the general administrative operation of the campus. What is important is that the alumni are not forgotten. The good will of this group impacts both recruitment and donations. The alumni also bring personal and professional expertise that can be very helpful to institutional leadership. The question of how well the campus is maintaining positive contact with this group is therefore an important one.

However, the alumni are also important in another way. They provide a very good resource for an institution wishing to evaluate its successes and its areas for growth. Surveying alumni a few years after they have left campus will often provide a good understanding of the quality of the institutional programs. Have they been successful in both getting employment and in succeeding in employment? Did their education provide them with the right skills and nurture the right values and attitudes? How well have they achieved in higher education? What is their spiritual commitment now? Are they actively involved in church life? In retrospect, how highly would they rate their total academic experience at \_\_\_\_\_\_? The answers to questions such as these provide excellent information for campus self-evaluation and growth.

#### **External Communication of the Institution**

The final groups to be considered are those farthest removed from the immediate operation of the institution. However, the impact of the institution on them is nevertheless very important. These groups will vary from institution to institution, but will be communities that in one form or another are impacted by the total institutional quality. This could be the regional, national or international Seventh-day Adventist church; it could be the local community; it could be the employers of graduates. Each institution needs to decide which are the groups most impacted by the total institutional operation.

What can they offer? These are the groups that can often best tell the institution if their desired outcomes have become reality. How pleased are they with the graduates they hire? How positively do they impact the spiritual climate of the church? How are they (and the institution as a whole) perceived in the community?

Getting helpful feedback from these groups is often the most difficult. However, it is also important for two reasons. First, it is often very important to these groups that their opinion is asked; it encourages a wider ownership and understanding of the institution. Second, these individuals and groups often have feedback that cannot be received from elsewhere.

However, this form of feedback does need to be focused and ideally, the same processes need to be repeated over a period of years, so patterns of responses can be seen. The Quality Council will need to decide on who should be contacted and the process for receiving and disseminating the feedback. The information will have no value unless it feeds into the overall quality improvement processes.

## Conclusion

A strong quality improvement process is vital to an institution, but it can become so formalized and bureaucratic in its implementation that it becomes time-consuming and has very little practical value. This does not need to be the case. If the process is effectively coordinated and if the ideals are fully integrated into institutional culture, quality improvement will only enhance the institutional experience for all members of the campus community.

How is such a process and culture developed and initiated? Here are a few suggestions.

## Select the key players and work with them from the beginning

It will be important to ensure that key individuals both understand and support the need to have a quality management plan for the institution. Arrange a training session for these individuals and once they understand the underlying principles of quality improvement, work with them to agree how to proceed to develop a plan on campus.

## Recognize existing processes

All campuses will already have some quality processes in place. The idea of a institutional quality improvement plan is to co-ordinate existing processes, ensure no areas are ignored and see all quality improvement as an integral part of total institutional management and planning. It is useful to begin therefore by identifying and evaluating the processes already in place. Which of these does the institution want to keep? Where are the gaps? What more needs to be done? Agree then on (a) where the institution is now (b) where it needs to be (c) what processes need to be in place to make the move from the present to the future and (b) how processes can be phased in at a realistic rate.

### Start out slowly—one or two new processes

Where staff and faculty are not used to quality management it helps to introduce the idea slowly. Start with one or two new processes and give time for those involved to understand what is happening and why. Allow plenty of opportunity for discussion, training and feedback.

It may take several years to develop the process to a point where it is truly integrated into management structures and operating at a level that will justify calling the college/university a "learning institution." That should not be a cause for concern. What is important is that there is a vision for the final plan and an agreed timeline for information. Because quality improvement is as much about attitude and approach to work as it is about statistics, introduction of a plan cannot be rushed. There must be a high level of "buy in" throughout the campus.

## Provide ongoing evidence of the success of the processes

One of the ways of encouraging buy-in is by sharing evidence of the value of the processes. Wherever there is quality management, good practice is highlighted. This can be shared. What is it that the students, the church, the community appreciates about the campus? Areas of concern should be emphasized as much as possible. So too should evidence of changes that have had positive impact. Most faculty, staff and administration are pleased to know how they are doing, especially in the context of constructive evaluation. This is where it is important that everyone understands the difference between formative and summative assessment. Much of quality management will be concerned with the formative aspect of quality improvement.

#### Centralize institutional research

Institutional research is a term that should not be confused with academic research. Institutional research is the gathering and analyzing of data in order to know how well an institution is performing in agreed areas. That is very much what quality improvement is about. In some countries, especially in large institutions, it is usual to have an office for institutional research and an individual responsible for managing all the processes involved in gathering and evaluating the information the institution needs. However, whether an institution has a specific office dedicated to institutional research or not, it is nevertheless important that somewhere on campus, somebody is responsible for overseeing the gathering of information that will feed into the quality improvement processes. The person responsible will sit on the Quality Council, and provide advice on ways and timing of gathering and evaluating what is needed by different campus areas.

Centralizing data gathering should help streamline processes and avoid duplication. A decision on how this will be done should be made early in the process of developing a quality improvement program.

## *Nurture a vision for "a learning organization"*

Finally, it is absolutely vital that a quality improvement plan is not reduced to an action plan that must be completed in a certain way at fixed times. Quality improvement is about development of an institutional culture that defines every person working on or for the campus as a teacher. Everyone who has any impact on the total student experience is sending a message about institutional quality. Therefore everyone has the responsibility to observe, listen, speak and learn about how to make that experience even better. That is step one. The second step is for the total institution to share in the excitement and enthusiasm that comes from positive learning. That is when the institution has truly become "a learning organization" and where the quality processes will be fully effective agents of management and change.

# 1. Academic Department Timeline

(Based on a two semester year, commencing September. Timeline starts from August)

| August             | Review of syllabi for term by departments<br>Review of department strategies based on feedback<br>from previous year   |
|--------------------|--|
| September-November | Implementation of agreed strategies  |
| November           | Department review/discussion of end of semester exams  |
| November-December  | Students complete course feedback forms<br>Cross-marking of essays/examinations  |
| November-December  | Discussion of plans for next semester, including syllabi Review of department strategies implemented in September  |
| January-March      | Implementation of agreed strategies  |
| March-April        | Student review—Two-year review questionnaire Exit interviews for leavers Students complete course feedback forms   |
| April              | Department review of examination questions   |
| May-June           | Cross-marking Department self-evaluation (based on student reviews, exit interviews, course evaluations, etc.) Department sets new goals Report written to the academic quality management committee |

# 2. Academic Quality Management Timeline

(Based on a two semester year, commencing September.)

| September-December | Receives and responds to department and/or school reports                             |
|--------------------|---|
|                    | Writes responses/recommendations to department  |
|                    | Sends recommendations to relevant academic committees                                 |
|                    | Reports/recommends to central quality management committee                            |
|                    | Sets goals for institution (academic), such as refocusing institutional research etc. |
| January-March      | Undertakes 5-year department reviews according to agreed rotation                     |
| January-May        | Works on specific projects to improve overall quality processes                       |
| May-June           | Reviews year. Sends final report to central quality management committee              |

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# 3. Central Quality Management Committee Timeline

(Based on a two semester year, commencing September.)

The agendas for this committee will need to remain flexible. The following are examples of fixed agenda items. Others can be agreed, based on the timing and nature of quality management processes throughout the institution. These will vary between institutions, particularly in the non-academic areas.

| Agenda Items  | Possible dates  |
|---|---|
| Receives and debates academic quality management reports and recommendations.  Responds to reports; acts on recommendations as appropriate  Reports as necessary to chief executive officer and senior management | December and May/June   |
| Receives and debates reports from non-academic reports and recommendations.  Responds to reports; acts on recommendations as appropriate  Reports as necessary to chief executive officer and senior management   | According to internal procedures, but at least once annually                        |
| Reviews current evaluation processes,<br>including data gathering effectiveness<br>Identifies areas where change is needed<br>Reviews communication processes   | February and September<br>(following receipt and response<br>to major unit reports) |
| Develops and manages changes to processes   | January to April  |

## Appendix B Report forms

# 1. Performance by Objectives Annual Appraisal

(This form would be for faculty—a similar form could be used for staff.)

# A. Teaching (including tutorial/mentoring of students)

| year. Yo<br>the curr<br>technolo | ou might include positive reacticulum or in teaching method       | areas of satisfaction in teaching<br>ctions to changes you have made<br>lology; successful increased use<br>hievement or satisfaction, or to po | in<br>of |
|----------------------------------|---|---|----------|
|                                  |   |   |          |
|                                  |   |   |          |
|                                  |   |   |          |
|                                  | t are your goals in the area of<br>the reasons for your selection | f teaching for next academic year<br>1?   | ?        |
|                                  |   |   |          |
|                                  |   |   |          |
|                                  |   |   |          |

|           | R Received and Professional Nevelonment  |
|-----------|--|
|           | B. Research and Professional Development   |
| he last a | B. Research and Professional Development  t research and professional development have you undertaken in academic year? Be specific in identifying courses completed ar the titles and dates of publications, papers presented, etc. |
| he last a | t research and professional development have you undertaken in<br>academic year? Be specific in identifying courses completed ar   |
| he last a | t research and professional development have you undertaken in<br>academic year? Be specific in identifying courses completed ar   |
| he last a | t research and professional development have you undertaken in<br>academic year? Be specific in identifying courses completed ar   |
| he last a | t research and professional development have you undertaken in<br>academic year? Be specific in identifying courses completed ar   |

|        | here ways in which the college/university could assist you in rea<br>earch and professional development goals? | achi |
|--------|--|------|
|        |  |      |
|        |  |      |
|        |  |      |
|        | C. Service (to the institution, local and wider church, local  |      |
|        | community, etc.)   |      |
| 1. Wha | t service have you been involved in during the last academic yea   | ır?  |
|        |  |      |
|        |  |      |

|                           | e your goals in the area of service for the next year?                          |
|---------------------------|---|
|                           |   |
|                           |   |
|                           |   |
|                           |   |
| 3. Are the<br>reaching ye | ere ways in which the college/university could assist you in our service goals? |
|                           |   |
|                           |   |
|                           |   |
|                           |   |
|                           |   |
|                           | D. Other Issues   |
|                           |   |
| Do you hav<br>our interv  | ve any other issues that you would like to discuss at the time o iew?           |
|                           |   |
|                           |   |
|                           |   |
|                           |   |

# 2. Performance by Objectives Appraisal Report

| Name                          | of Administrator:   |
|-------------------------------|---|
| Other                         | s present:  |
|                               | of commendation:<br>s on major successes)   |
|                               | for development:<br>s on major goals—manageable and measurable)                               |
| (Ident                        | s issues discussed:<br>ify other key areas of concern by the faculty member, or by the admin- |
|                               | or. These may relate to performance, or to wider institutiona<br>ort/environment.)            |
| Action<br>(This tified with p | , ,   |

Birnbaum, Robert. *Management Fads in Higher Education*. San Francisco: Jossey-Bass, 2001.

Robert Birnbaum considers fads in higher education management, including total quality management. He identifies how slavish adherence to any management technique has pitfalls. He also suggests that there are great organizational gains from such fads as TQM, but institutional administrators need to strategize on how to maximize these.

Brennan, John and Tarla Shah. *Managing Quality in Higher Education:* An International Perspective on Institutional Assessment and Change. The Society for Research into Higher Education and Open University Imprint. Buckingham: Open University Press, 2000.

Brennan and Shah analyze the success of quality management (both by external quality agencies and institutions of higher education) by considering the impact of the processes on institutional mission, decision making, and educational outcomes in 29 institutions in 14 different countries (Australia, Belgium, Canada, Denmark, Finland, France, Greece, Hungary, Italy, Mexico, The Netherlands, Spain, Sweden and the United Kingdom). The focus is on what processes, purposes and contexts provide the most advantageous environment for QM to be successful.

Cave, Martin, Stephen HAnney, Mary Henkel and Maurice Kogan. *The Use of Performance Indicators in Higher Education: The Challenge of the Quality Movement.* 3<sup>rd</sup> edition. London: Jessica Kingsley Publishers, 1997.

Considered a standard work on the use of performance indicators (PIs), this text offers an international and comparative look at the use of PIs in higher education. It gives historic context, and provides a theoretical and practical foundation for understanding and applying PIs in quality management. The particular focus is teaching and research.

Dahlgaard, Jens J., Kai Ristensen, and Gopal K Kanji, "Total Quality Management and Education." In *Total Quality Management*, Vol 6. Nos. 5 and 6, 1995, pp. 445-455.

This article gives a helpful historic perspective on the development of quality models, particularly as they relate to higher education. A TQM pyramid is introduced, which focuses on the principles of leadership, customer and employee, continuous improvements, participation of everyone, and focus on facts. The PDCA leadership model is also discussed.

Freed, Jann, Marie Klugman and Jonathan Fife. *A Culture for Academic Excellence*. ASHE-ERIC Higher Education Report, Vol. 25, No. 1. Washington D.C.: The George Washington University Graduate School of Education and Human Development, 1997.

In a text that mixes theory with practical suggestions for implementation, the writers explore how a culture of academic excellence can be developed in an institution. They focus on a series of nine quality principles that relate to vision and mission, interactive processes, leadership that understands quality principles and supports a culture of quality, development of staff and faculty, decision-making based on facts, delegation, collaboration, and planning for change.

Lewis, Ralph and Douglas Smith. *Total Quality in Higher Education*. Florida: Saint Lucie Press, 1994.

The writers discuss a framework for improving total quality in a college or university environment. Issues discussed include the history and principles of quality management and the factors in higher education that lead to serious questions on institutional effectiveness and efficiency.

Meade, Phil. "Utilising the University as a Learning Organisation to Facilitate Quality Improvement." In *Quality in Higher Education*, Vol. 1, No. 2, 1995, pp. 111-21.

Meade uses a case study of an Australian University to show how a quality management plan can support development of a learning organization committed to continuous quality improvement. Includes discussions on what makes a "learning organization," how quality improvement can be supported through a quality resource framework, and how to overcome barriers to quality improvement implementation. *Quality in Higher Education* is a source of other useful articles on quality issues.

Massy, William F. Honoring the Trust: Quality and Cost Containment in Higher Education. Bolton, Mass.: Anker Publishing Co.: 2003.

Massy provides a unique slant on quality management by identifying ways in which quality management and financial management can interact to ensure both improvement in institutional quality and containment of costs. He recommends a rethinking of some more traditional ways of identifying budget priorities and making financial decisions.

Ruben, Brent D., ed. Pursuing Excellence in Higher Education: Eight Fundamental Challenges. San Francisco: Jossey Bass, 2004.

This text provides a wide range of usual short chapters that focus on different practical issues relating to quality and development of excellence in higher education. This includes focus on institutions becoming more effective learning organizations, integrating quality processes into the daily operation of the institution, improving collaboration, focusing on the total student experience, and developing a vision for and culture of excellence.

Sallis, Edward. *Total Quality Management in Education.*  $3^{\rm rd}$  edition. Guilford: Kogan Page Ltd., 2002.

A basic and central text for understanding the application of total quality management (TQM) in education at all levels. Practical and accessible.

Seymour, Daneil. *Once Upon a Campus*. American Council on Education. Washington D.C.: Oryx Press, 1995.

This book uses practical case-studies to focus on the question of how to improve institutional quality by using management concepts such as quality management. The author focuses on the importance of developing an environment that is proactive in improvement of the total student experience.