A PERSPECTIVE ON QUALITY IMPROVEMENT PLAN IMPLEMENTATION PRACTICES: A CASE STUDY

by

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DECLARATION

I, Vakele Emmanuel Nobongoza, declare that this master's dissertation that I herewith submit to the University of the Free State (UFS), is my independent work and that I have not previously submitted it for qualification at any another institution of higher education. Furthermore, I declare that copyright is vested in the University of the Free State. I have also acknowledged all sources of references according to the UFS anti-plagiarism policy document.

26 January 2019

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Vakele Emmanuel Nobongoza   **Date**

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LIST OF ACRONYMS

APP	Annual Performance Plan
CASD	Curriculum and Academic Staff Development
CHE	Council on Higher Education
CILT	Centre for Innovation in Teaching and Learning
CQI	Continuous Quality Improvement
CUT	Central University of Technology
DHET	Department of Higher Education and Training
EQA	External Quality Assurance
ERIC	Education Resources Information Centre
ETQAAs	Education and Training Quality Assurance Agencies
FEQCs	Faculty Quality Enhancement Committees
HE	Higher Education
HEIs	Higher Education Institutions
HoD	Head of Department
HoDs	Heads of Department
HEQC	Higher Education Quality Committee
HEQSF	Higher Education Qualifications Sub-Framework
IPQE	Institutional Planning and Quality Enhancement
IQA	Internal Quality Assurance
IQMS	Internal Quality Management System
IQRs	Institutional Quality Reviews
ISO	International Organisation for Standardisation
ITLR	Improving Teaching and Learning Resources
MANCOM	Management Committee
NCHE	National Commission on Higher Education
PBs	Professional Bodies
PQM	Programme and Qualification Mix
QA	Quality Assurance
QE	Quality Enhancement
QEP	Quality Enhancement Project

QES	Quality Enhancement Strategy
QEU	Quality Enhancement Unit
QI	Quality Improvement
QIP	Quality Improvement Plan
QIPs	Quality Improvement Plan
QM	Quality Management
QMS	Quality Management System
SAQA	South African Qualifications Authority
SET	Science, Engineering and Technology
TQM	Total Quality Management
UAPQC	University Academic Planning and Quality Committee
UFS	University of the Free State
UK	United Kingdom
UoT	University of Technology
USA	United States of America

ABSTRACT

This study aims to explore the case study's academic line managers (heads of departments) and academic staff (senior lecturers and lectures) perceptions and experiences pertaining to the implementation of quality improvement plan practices. The problem arises from there being no clear guiding policy at the university on quality assurance, programme development, implementation, monitoring and review. The implementation of quality improvement plans (QIPs) is one of the ways in which the South African Higher Education Quality Committee (HEQC) and the higher education institutions (HEIs) carry out quality assurance, enhancement and improvement mandates. A qualitative inductive approach was suitable for this type of research in that it allowed the researcher to construct abstractions and ideas from analysing questionnaires and responses from interviews. The study's findings indicate an awareness of the purpose of QIPs as a self-assessment tool to enhance the core activities of the university ensuring that there is a high standard of teaching and research activities. Thus, strategies should be designed to ensure that plans for improvement are implemented and monitored, and roles and responsibilities are defined, to ensure accountability. It is envisaged that the implementation of QIPs will lead to the creation of an appropriate organisational culture, in which the assessment process is regarded as an integral component of the institutional quality management system, through which the institution undertakes its own assessment to determine whether products, services and management processes meet the stringent requirements of HEQC.

Keywords: quality assurance, quality enhancement, institutional quality management systems, continuous quality improvement, quality improvement plan implementation practices.

CHAPTER 1
ORIENTATION OF THE STUDY

1.1   INTRODUCTION AND BACKGROUND TO THE RESEARCH PROBLEM

The evaluation of higher education (HE) teaching and learning is complex and unpredictable due to the diversity of disciplines, groups of students, and levels of qualifications (Brence & Rivza 2012; Nygaard & Belluigi 2011). This is, however, an ongoing process and not a single event to improve the quality of service (Swanepoel 2010:9; Yarmohammadian, Mozaffary & Esfahani 2011). The policy framework and context play important roles in this evaluation process in which constructive criticism is an important element for improving quality. In addition, institutions must ensure that their education standards meet the requirements and expectations of HE stakeholders and that of the world of work (CHE 2016; Kandiko & Mawer 2013).

However, HEIs are complex establishments where organisational vision and strategies must be adjusted from traditional teaching and learning practices to modern innovations. This is because the process of developing HEIs as efficient and powerful learning institutions, where excellent educational practices are produced and shared, requires authority, coordinated efforts and continuous quality improvement (CQI) approaches in general; and the implementation of QIPs in particular (Brits 2010; Little 2015; Hénard & Roseveare 2012; Shrestha, 2010; Yokoyama 2010).

It is evident that HEIs can provide students with quality educational services if they have strategies that lead to continuous improvement in the quality of their services, a process that is ongoing in many universities around the world (Dorri, Yarmohammadian & Nadi 2012; Yarmohammadian, Mozaffary & Esfahani 2011). Therefore, HEIs should guarantee the highest quality service and products to their clients in order to keep abreast of the competition. This must be done by regularly critically assessing academic programmes and administrative departments. In this regard, using the instrument of customer-satisfaction surveys must be a normal practice of the institution as this facilitates collecting data (for SWOT analysis, as an example) that will be processed with the aim of enhancing the institution to be

recognised as a marketable brand. These institutions have also realised that their long-term survival depends on the extent to which their services are valued and that the degree of quality separates one university from another (Tsinidou, Gerogiannis & Fitsilis 2010).

Furthermore, HE "has been facing an increasing demand for accountability, which promoted the implementation of control and evaluation systems" (Minelli, Rebora & Turri 2015:103) for quality assurance (QA) and quality enhancement (QE) purposes (Massaro 2010). For example, programme reviews, self-evaluation and peer reviews are some of the evaluation systems that were introduced in various countries. These countries like Hong Kong, the United Kingdom (UK) and the United States of America (USA), to name a few, have emphasised the importance of quality and its related quality improvement processes as mentioned by (among others) Akalu (2014), Akinyemi and Abiddin (2013), Calma (2014), and CHE (2014). This links with increased desires for enhanced performance as far as teaching, learning, research and producing competent university graduates are concerned. To meet these demands, institutions must create a learning environment in which employees take joy and pride, as well as feeling empowered to make changes (Njiro 2016:88). Additionally, in the process of implementation of quality improvement (QI), "a clear policy statement" is emphasized as "a key issue" (O'Mahony & Garavan 2012:196). The reason for this is that a "clear policy gives a solid intelligible framework and structure, along with sets expectations, guides the activities of all partners and stakeholders…towards effective leadership" (O'Mahony & Garavan 2012:196).

Consequently, "quality management systems" and activities "are increasingly common in many organisations" (O'Mahony & Garavan 2012:184), including HE that progressively work in a changing, turbulent and competitive environment, where assets and resources are scarce. This scarcity of assets and resources complicates the implementation of QIPs as part of a quality management system (QMS) of a university.

The implementation of QIPs is one of the ways in which the HEQC and the HEIs of South Africa carry out quality assurance (QA), quality enhancement (QE) and improvement mandates (CHE 2001a; 2001b; 2004a; 2004b; 2004c; 2007).

Therefore, HEIs in South Africa are required by the Council on Higher Education (CHE), through its committee, the HEQC, to create and execute QIPs based on the recommendations for improvement determined by the internal or external review process (CHE 2014; 2017a; 2017b; 2018).

The Central University of Technology, Free State (CUT), as an institution that is governed by the CHE and the HEQC quality assurance, enhancement and improvement mandate, is also not immune to the internal and external review process. And hence the *Revised Manual for Reviews at the Central University of Technology* (CUT 2016b) stipulates that, after receipt of the final review report, the Head of Department (HoD) and relevant departments compile a QIP in response to the outcome of the internal review, which should indicate the action(s) the department will take considering the report. In terms of the guidelines and procedures for academic review at the university, progress made with the implementation of the QIP should be monitored by the Institutional Planning and Quality Enhancement (IPQE) team. Quarterly reports on progress, as per the recommendations made in the review report, will be expected from the relevant HoD until the department has complied with all the recommendations of the review (CUT 2016b).

This study sought to determine the university's academic line managers' (HoDs) and academic staff's (senior lecturers and lecturers) experiences and perceptions of the implementation of QIP practices in the selected university of technology (UoT), and whether the institutional practices are in line with the requirements of the HEQC (related research question – see 1.3).

To determine the HoDs', senior lecturers' and lecturers' experiences and perceptions, a questionnaire was distributed to heads of department, senior lecturers, and lecturers. This was followed by semi-structured interviews with a number of selected heads of department in the case study involving Central University of Technology (CUT).

The purpose and central argument of this study are outlined in this first chapter. The focus, the scope and the content of the study and the methodological and theoretical approaches selected are described. The background of the research problem (*cf.*

1.1) and the problem of research are also indicated (*cf.* 1.2), followed by the research questions (*cf.* 1.3). The aim and objectives of the study are also defined (*cf.* 1.4). This is followed by the statement of how significant the study is (*cf.* 1.5) as well as demarcation as a qualitative HE study (*cf.* 1.6). Important concepts which are relevant to this study are defined (*cf.* 1.7), followed by a description of the research design and methodology used in this study *(cf.* 1.8). The research plan is provided (*cf.* 1.9) after which the summary and concluding remarks appear *(cf.* 1.10).

It is important to note that there is a deviation from the traditional format for the structure of master's dissertations (*cf.* 1.9), as the section dealing with research methodology has been incorporated fully into this first chapter. This was done after serious consideration of the dissertation's structure to improve the readability as well as to ensure a cohesive and uninterrupted flow in the logical argument with special reference to document analysis (see Chapter 4).

1.2   STATEMENT OF THE RESEARCH PROBLEM

The implementation of QIPs forms part of the HE quality management system (QMS). HE quality management (QM) is referred to as institutional arrangements for assurance, support, development, enhancement and monitoring of the quality of education and learning, research and community engagement. The institutional QMS refers to the entity consisting of quality assurance policy, strategic objectives, leadership accountability and responsibility, suitable structures, academic and support staff and suitable financial conditions for the processes, process management, including control of outcomes and feedback between outcomes and objectives. QIPs (as part of an institutional quality management system [IQMS]) refers to an arrangement created by the reviewed institution or a reviewed department for programme-determining activities, assigned obligations and time-frames - all address the requirements and proposals of the review report.

According Brits (2011:1288), it appeared that South African HEIs fail to integrate the already stipulated key management functions that are fundamental to effective QM. In a study by Brits (2010), it was indicated that only 57 percent of public HEIs in South Africa that were audited by the HEQC in the first cycle of institutional audits have

established mechanisms in place to successfully integrate the key elements for effective quality management such as planning and resource allocation (Brits 2010:227). This implies that 43 per cent of public universities during the first cycle of national reviews failed to integrate key elements that ensure effective QM (Brits 2010:4).

At the CUT, there is no institutionally approved policy on quality assurance, programme development, implementation, monitoring and review. This is supposed to set expectations, guide actions and provide effective leadership for the university's academic line managers (HoDs) and academics (senior lecturers and lecturers) who are responsible for the implementation of QIPs. Furthermore, the current CUT HoDs and senior lecturers/lecturers rely on existing guidelines and procedures for academic review, which are not clear in terms of the implementation and monitoring of QIPs, as these are now outdated (CUT 2016a; 2016b; 2016c). Therefore, this problem refers to the internal quality assurance (IQA) (*cf.* 2.2.2 and 2.2.4) of CUT where policies, guidelines, procedures and support for institutions are managed to assist in self-monitoring in terms of improving educational services and provisioning (Ezer & Horin 2013).

1.3   RESEARCH QUESTIONS

This study focuses mainly on the following research question: **What are the CUT's academic line- managers' (heads of department) and academic staff's (senior lecturers/ lecturers) experiences and perceptions of the implementation of quality improvement plan practices?**

The following subsidiary-questions relating to the main research question are:

  i.   What perspectives of quality improvement plan implementation practices are portrayed by the literature?
  ii. What policies, guidelines, procedures and support does the CUT offer academic line managers (heads of departments) and teaching staff (senior lecturers and lecturers) to ensure effective and efficient implementation of QIPs?

iii. What are the positive and negative experiences and perceptions of CUT's academic line managers (heads of department) and academics (senior lecturers and lecturers) concerning the implementation of QIPs?

iv. What types of improvements to the implementation of QIPs are recommended by the CUT's academic line managers (HoDs) and academics (senior lecturers and lecturers)?

1.4   AIM AND OBJECTIVES OF THE RESEARCH

This study aims to determine the CUT's academic line managers' (HoDs) and academic staff's (senior lecturers and lectures') experiences and perceptions of the implementation of QIP practices.

The following objectives will be pursued, namely to:

i. Stipulate literature perspectives on the implementation of QIPs in HE (see Chapter 2).

ii. Provide an overview of HEQC's frameworks on various aspects relating to QIP practices in the South African HE context (see Chapter 3).

iii. Identify CUT's institutional policies, guidelines, procedures and support for QIP implementation practices via document analysis (see Chapter 4).

iv. Explore the experiences and perceptions of CUT's academic-line managers (HoDs) and academics (senior lecturers and lecturers) concerning the implementation of QIP practices through questionnaires and semi-structured interviews (see Chapter 5).

v. Ascertain areas for improvement to the implementation of QIPs at the CUT (see Chapters 5 & 6).

1.5   SIGNIFICANCE OF THE RESEARCH

Important to any HEI's reputation and progress, are the reviews of programmes/courses, which are core practices of any QMS, such that strategies that are developed must be innovative to ensure the effective and efficient implementation and monitoring of development plans, where sustainability is the paramount principle

to promote the vision of the institution. Therefore, the significance of this research was for the institution, academic line managers and staff to improve on the current policies, guidelines, procedures and support in terms of the implementation of QIPs.

1.6   DEMARCATION OF THE RESEARCH

This HE study is located in three of Tight's (2003; 2004; 2012) themes; namely, quality, system policy, and institutional management. The reason for this is that the data is self-reported by staff and is directed towards their experiences of implementation of QIP practices.

1.7   CLARIFICATION OF CONCEPTS

Based on the above demarcation of the study (*cf.* 1.6), the following seminal concepts for this study are explicated in alphabetical order:

1.7.1   Institutional quality management system

An *institutional quality management system* (IQMS) encompasses all the exercises and data an institution uses for empowerment to deliver reliable products and services that are required from clients and recipients in a more cost-effective manner (Brits 2010). For the purposes of this study, the IQMS refers to the institutional methods, framework, systems and resources to guarantee, develop and observe the nature of teaching and learning quality, research and community engagement. (CHE 2004a:15; 2004b:25; 2007:76). This means that a clear and unambiguous policy on quality assurance linked to strategic quality objectives, must include operational instruments such as guidelines, procedures and institutional support, to achieve these set objectives.

1.7.2   Quality improvement

Quality improvement (QI) is the expectation that an institution will have established mechanisms to monitor and improve the quality of its academic programmes. Quality

assurance and accreditation authorities require established procedures to ensure that this is a continuous process within an institution (Kennedy 2011). Marshall (2016) proposed that quality could be framed as transformation and described quality as a mechanism to support quality changes and continuous enhancements. Here the focus is on "quality as an improvement rather than quality as assurance" (Marshall 2016:215). Marshall (2016) also confirmed this by stating that QI needs to be seen as a collection of actions taken by or on behalf of the major educational stakeholders. QI is needed in HE as it provides a framework that sustains teaching and learning and supports HEIs with common sense-making and reflection. This also stimulates HEIs to continue in a way that promotes their core values and role-functions (Marshall 2016).

1.7.3 Quality improvement plan

The *quality improvement plan* (QIP) (as part of an IQMS) refers to an arrangement created by the reviewed institution/department/programme to identify the audit report requirements and recommendations for activities, designated responsibilities and timeframes (CHE 2004a; 2004b; 2007).

For the purpose of this study, the aim to reflect on the CUT QIP implementation practices is to identify their services' strengths and identify areas for improvement within a climate for change (Yarmohammadian *et al.* 2011).

1.7.4 Quality management

Quality management (QM) in HE is referred to as institutional arrangements that entail the following four elements of institutional planning and action (Brits 2010:45; 2011; CHE 2004a:16; 2004b:26; O'Mahony & Garavan 2012):

- *Quality assurance* – the approaches, frameworks, methodologies and the resources the institution uses to meet its quality needs and to take action;
- *Quality support* – the arrangements, frameworks, techniques and the institution's resources to support and manage existing quality levels;

- *Quality improvement and enhancement* – the approaches, frameworks, procedures and the institution's resources to develop and improve quality; and
- *Quality monitoring* – the strategies, frameworks, the institutions' systems and resources to evaluate, and monitor quality issues (Kargyté 2015; Zubair 2013).

The above elements should be properly incorporated into institutional planning to ensure that the core activity of teaching and learning, research and community engagement has satisfactory resources for development, performance, review and improvement of quality (Brits 2011; Kleijnen 2012). For the purposes of this study, QM focuses on the policies, guidelines, procedures and support; this includes CQI of a number of functions within the institution (Brits 2010; 2011).

1.8   RESEARCH DESIGN AND METHODOLOGY

This section outlines the research design and methodology applied in this study and starts with the rationale for the qualitative approach (*cf.* 1.8.1), followed by the choice of the research paradigm (*cf.* 1.8.2). Then the discussion of the case study design (*cf.* 1.8.3), unit of analysis (*cf.* 1.8.4), population and sampling (*cf.* 1.8.5), data collection and analysis are articulated (*cf.* 1.8.6 and 1.8.7). Thereafter, the research ethics (*cf.* 1.8.8) and a discussion on the researcher's role in this study (*cf.* 1.8.9) were presented. Lastly, the discussion on the limitations of the research (*cf.* 1.8.10) and the trustworthiness of the research (*cf.* 1.8.11) were addressed.

1.8.1 Rationale for the qualitative approach

This exploratory study investigated the experiences and perceptions of key actors involved in the implementation of the QIPs within a South African Higher Education case study university. Therefore, a qualitative approach was deemed suitable for this exploratory HE study as it serves as a multi-strategy in focus, including an interpretive, naturalistic way to deal with the topic (Creswell 2012; McMillan & Schumacher 2014). This implied that qualitative researchers think about things within

their common settings, endeavouring to understand the meanings people bring to them. Furthermore, this qualitative research is inductive in the way in which analysis is done (*cf.* 1.8.7) in that the researcher constructs abstractions, ideas and speculations elicited from questionnaires and responses from semi-structured interviews.

1.8.2 Research paradigm

This HE qualitative case study (*cf.* 1.8.3) was supported by the constructivist/interpretivist paradigm, which addresses understanding the world as others experience it (Creswell 2003; Creswell 2012; McMillan & Schumacher 2014; Mertens 2009; 2014). This approach allowed the researcher to obtain multiple perspectives to yield better interpretations from literature and document-analysis (Mertens 2014:6). In accordance with the paradigm supporting this study, data collection instruments concentrated on the experiences and perceptions of CUT's academic line managers (HoDs) and academics (senior lecturers and lecturers) specifically involved in the implementation of QIP practices (*cf.* 1.4). Thus, the decision to use a qualitative approach in this study is justified (*cf.* 1.8.1).

1.8.3 Case study design

A case study is the most suitable research design because a detailed examination of a specific phenomenon is involved (i.e. QIP implementation practices) and the use of multiple sources of evidence with data needing to be triangulated (McMillan & Schumacher 2014; Rule & John 2011; Thomas 2011; Yin 2009; 2012). This in-depth exploration (*cf.* 1.9.5) of a bounded system (i.e. a specific phenomenon within a specific context [Creswell 2012:465]) examined and provided rich, detailed description of the experiences, perceptions and perspectives from academic line managers (HoDs) and academics (senior lecturers and lecturers).

1.8.4 Unit of analysis

The unit of analysis refers to the object, entity, phenomenon, process or event that a researcher wants to study (Babbie 2013; Babbie & Mouton 2001; McMillan &

Schumacher 2014; Patton 2002). The unit of analysis in this study is CUT's academic line managers' (HoDs) and academic staff members' (senior lecturers and lecturers) experiences and perceptions of the implementation of QIP implementation practices via questionnaires and semi-structured interviews.

1.8.5 Population and sample

Purposive sampling was utilised as a non-probability sampling technique in this study, with the "central phenomenon" as QIP implementation practices (Creswell 2012:206). The participants who are "information rich" concerning this phenomenon are selected CUT's academic line managers and academics. Maximum variation with regards to gender and race was considered in the sampling by ensuring that a cross-section population was invited for both the "questionnaire answering session" and the semi-structured interviews in order to construct a robust view of the phenomenon being explored. In addition, this section presents separate discussions on the selection of site and sampling of participants.

1.8.5.1 Selection of site

Purposive sampling was used to select one public HE institution because the researcher used his judgement to choose cases with a particular purpose in mind (Babbie 2013; Creswell 2012; McMillan & Schumacher 2014; Neuman 2000; 2003). For example, the researcher is a member of the CUT's support staff (i.e. Quality Enhancement Unit [QEU]) who is acquainted with the current policies, guidelines, procedures, support and organisational changes at this institution.

1.8.5.2 Sampling of questionnaire participants

The sample comprised of academic line managers (HoDs) and academic staff (senior lecturers and lecturers) from two (2) programmes, from each of the four (4) faculties, which have undergone self-evaluation and QIP implementation between 2007 and 2017. To meet the selection requirements of a highly diverse sample and the logic of maximum variation sampling (Babbie 2013; Creswell 2012; McMillan & Schumacher

2014; Patton 2002), a total of thirty-six (36) participants comprising of twelve (12) HoDs, twelve (12) senior lecturers, and twelve (12) lecturers were selected.

1.8.5.3 Sampling of interview informants

The sample for the semi-structured interviews comprised of only academic line managers (HoDs). Only four (4) HoDs, from one (1) programme, from each of the four (4) faculties, were selected for participation in semi-structured interviews. These four (4) HoDs were chosen as key participants who would be able to offer specific, and specialised knowledge in the implementation of QIPs.

1.8.6 Data collection

Four (4) data collection methods were used in this study; namely, literature review, document analysis, questionnaires and semi-structured interviews. The researcher requested institutional authorization from CUT to conduct the study (see Appendix C).

1.8.6.1 Literature review

A systematic literature search was performed on QIP implementation practices. Amid a plethora of relevant literature, the search included the following electronic databases, covering various disciplinary fields: Goggle Scholar, Research Gate, EbscoHost, Emerald, Education Resources Information Centre (ERIC); JSTOR; SA ePublications, SABINET, Science Direct, Sage Premier and Taylor & Francis.

Based on the literature review, QIPs within a HE context, with special reference to quality and related concepts, their applications were explained (see chapter 2). Chapter 3 identified and discussed the HEQC's frameworks on various aspects relating to QIPs practices in the South African HE context.

1.8.6.2 Document analysis

Chapter 4 identified CUT's current institutional policies, guidelines, procedures and support for QIP implementation practices via a document analysis (*cf.* 4.4). The document analysis was done in a table format (see Table 4.2, 4.3, and 4.4) based on a SWOT analysis (see Table 4.5) to identify strengths, weaknesses versus the opportunities and threats for both CUT and their staff on the topic.

1.8.6.3 Questionnaire

A self-constructed questionnaire (see Appendix D) was used to establish the experiences and perceptions of academic line managers (HoDs) and academic staff (senior lecturers and lecturers) at CUT regarding the QIP implementation practices. This questionnaire comprised of a biographical section (see Section A of the questionnaire), as well as 27 open-ended items on implementation of QIPs, policies for QI, QIP practices, and examples of operational effectiveness for QI (see Sections B, C and D of the questionnaire).

1.8.6.4 Semi-structured interviews

The interview schedule (see Appendix E), which was semi-structured, was utilised to gather information from chosen participants (*cf.* 1.8.5.3). The main purpose of these semi-structured interviews was to follow up on gaps/clarification on their experiences and perceptions of QIP implementation practices at the case study university. One of the main reasons for choosing semi-structured interviews for data collection in this study was that it is regarded as a powerful instrument of gaining insight into a deeper understanding of participants' experiences and perceptions (Creswell 2012; McMillan & Schumacher 2014).

1.8.7 Data analysis and reporting

In the data analysis phase of this study, the following steps were followed:

1.8.7.1 Analysis of questionnaires

The analysis of the qualitative data of the questionnaire (*cf.* 1.8.6.3) consisted of the following seven steps:

i. In the process of familiarisation, the researcher read through all the responses obtained from the questionnaire.

ii. The second step involved compilation where the researcher collated all the responses from the questionnaire.

iii. The third step was condensation. Here, the researcher synthesised and summarised all the responses from participants to formulate the central theme and possibly sub-themes (*cf.* 5.2.2).

iv. A preliminary grouping or classification process was involved in the fourth step. The researcher identified similar responses or grouped them.

v. The themes and categories were applied in the fifth step (*cf.* 5.2.2).

vi. Comparison of categories through description of similarities and differences was the final step (Creswell 2012; McMillan & Schumacher 2014; Ngulube 2015).

1.8.7.2 Analysis of semi-structured interview transcripts

The recorded data received from the semi-structured interviews was transcribed. In the second phase of data analysis the following three (3) methods were utilised to analyse all the transcripts from the interview recordings, namely:

- *Narrative description* is what McMillan and Schumacher (2014) referred to as expressing realities as depicted in this study by the recording of the interviews (i.e. giving a brief outline of the substance of each interview before endeavouring to analyse it). The process of narrative description included highlighting repetitive thoughts or ideas as this encouraged the rich organisation of data into themes at a later stage (*cf.* 5.3).

- *Inductive content analysis* is implemented when the transcriptions of the four interviews were interrogated by applying content analysis in an inductive way.

This was done to make sense of the data and to draw conclusions (Creswell 2012; McMillan & Schumacher 2014; Ngulube 2015). Inductive content analysis was used because there were no previous studies dealing with the phenomenon being reported in this study (*cf.* 1.8.6.1).

- *Drawing conclusions* was the last method used concerning the implementation of QIPs at the case study university. Conclusions and inferences were based on both questionnaire and interview responses (*cf.* 5.5).

1.8.8 Ethical considerations

This study adhered to the University of the Free State (UFS) Ethical Clearance Committee guidelines (Ethical Clearance Number: UFS-HSD2016/0622), specifically with regard to the following principles:

- *Anonymity* of all informants is ensured (no reference is made to the participants by name);
- *Informed written consent* forms (clarifying the purpose and procedures) were signed by all participants (see Appendix B).
- *Voluntary participation* was strongly advocated where the participants are provided with an opportunity to withdraw if they wish to do so, without being disadvantaged in any way (see Appendix A).
- *No harm, whether physical or psychological,* as a result of their participation was guaranteed; using pseudonyms/codes during data collection and in the final research report thereof in Chapter 5 obviated these hazards.
- *Confidentiality* was ensured when data and documents are secured by access codes and passwords.
- *Institutional permission* to conduct the study was requested from the Acting Director: Institutional Planning and Quality Enhancement, in the Office of the Deputy Vice-Chancellor: Teaching and Learning (see Appendix C).

1.8.9 Role of the researcher in the investigation

In this qualitative study, the researcher is an insider of the case study university and therefore he/she knows how to best approach individuals. Also, being on the inside assists one to have a lot of information, which takes an outsider a long time to acquire (Collins & Cooper 2014). However, to avoid role-duality, the researcher engaged in in a continuous self-questioning process as the study progressed by guarding against various and subtle ways in which the results and conclusions might be influenced by values, interests and preferences (*cf.* 1.8.8). This is strengthened by also taking into consideration the moral issues identified with the anonymity of the institution and individual members (Greene 2014; Holian & Coghlan 2013; Unluer 2012).

1.8.10 Limitations of the research

The main limitations of this qualitative, interpretive case study include the following:

- This study's small sample constrains the ability to draw general principles and conclusions.
- The study focuses on one institution and cannot, therefore, provide a substantial basis for comparisons.
- The combination of the colleague-researcher role has the potential to compromise the authenticity of data extracted from participants from within CUT, especially to an "inside investigator" (the researcher who is also a member of staff) (Creswell 2012; McMillan & Schumacher 2014).

1.8.11 Trustworthiness of the research

The trustworthiness of a research study is paramount, therefore the researcher sought to satisfy the following requirements/criteria which are consistent with the assumptions underpinning qualitative research:

1.8.11.1 Credibility

Credibility is characterised by the certainty which could be established in the reality of research findings. It determines whether the research findings are based on conceivable data derived from the original data of the participants and that the original perspective of participants is correctly interpreted (Anney 2014:276). In this study, the researcher established thoroughness of the inquiry by embracing the following credibility strategies:

- The researcher embraced multiple, qualitative data collection strategies such as literature review, questionnaire, and semi-structured interviews (*cf.* 1.8.6). These sets of data were triangulated (*cf.* 5.4), thus promoting credibility and reliability of the research (Creswell 2012; McMillan & Schumacher 2014; Ngulube 2015).
- The researcher consulted appropriate documents before the first data collection process took place. This was done by reading existing institutional policies, guidelines and procedures.
- The researcher engaged with the participants to set up a relationship of trust between the parties.
- The researcher used purposive sampling of participants for the questionnaire and the semi-structured interviews, to ensure a representative sample of the larger group (*cf.* 1.8.5).
- An opportunity to refuse to take part in the research was offered to each participant. This ensured that only those genuinely willing to take part in and ready to offer data freely, took part in data collection.

1.8.11.2 Transferability

As this study concentrates on a single institution, it cannot give a legitimate premise for comparisons. The results of this qualitative study should, therefore, be understood in the context of the institutional characteristics and, perhaps, the location. To evaluate the degree to which results might be valid for individuals in another setting, similar studies utilising similar strategies, but conducted in different environments,

could well be of credible value. However, the research endeavours to give readers rich, descriptive information about the unique situation, such that they can decide for themselves whether the results address their peculiar circumstances or experiences (Anney 2014). Purposive sampling was also utilised to help the researcher to concentrate on key informants, who are especially proficient on issues under scrutiny (Ary, Jacobs, Sorensen & Razavieh 2010). Moreover, this enabled the researcher to derive affirmation in utilising a particular classification of informants in the study, thus precipitating intensive in-depth findings in comparison to methods of probability sampling (Cohen, Manion & Morrison 2011).

1.8.11.3 Dependability

Dependability guarantees that if some other researchers look at the data collected, similar conclusions, interpretations and conclusions on the data will be reached (Anney 2014). In this study, the researcher utilised purposive sampling, triangulation and multiple-data collection techniques in order to establish dependability. The researcher securely stored the following documents for cross-checking the research process: completed questionnaires, interview recordings, interview transcriptions, and notes gathered from the field.

1.8.11.4 Conformability

Conformability refers to the researchers' actions to ensure that the findings were, as far as possible, the result of the participant and informant experiences and ideas instead of the researchers' characteristics and preferences (Pandey & Patnaik 2014). This was done to eliminate bias and prejudice from the findings. In this study, the researcher kept a record of what was done in the investigation. Data reconstruction and synthesis in the form of structured categories, findings and conclusions was done in order to promote conformability. This included the finalization and integration of concepts, relationships, and interpretations with existing literature. Triangulation gave further credibility to conformability in order to lessen the impact of the researcher's predisposition. The researcher also provided a detailed methodological representation that enables the reader to determine the acceptance for the data and constructs resulting from it (see Chapter 5).

1.9 OUTLINE OF THE STUDY

This study is conceptualised in the following six chapters:

Chapter one provided an orientation of the study by outlining the main argument of this study and differentiates its scope from the chosen theoretical approaches and methodological approaches.

Chapter two provided diverse quality perspectives for the implementation of QIPs in HE.

Chapter three offered an overview of HEQC's frameworks and documents on various aspects relating to QIP implementation practices in higher education in South Africa.

Chapter four identified the key CUT institutional policies, guidelines, procedures and support for QIP implementation practices, via document analysis.

Chapter five focused on data analysis and reporting on the research findings giving an extensive critical assessment of the strategies and methods for QIP implementation practices at the case study university.

Chapter six concentrated on conclusions drawn from data analysis and, as a result, suggestions and recommendations were made on how QIPs in the institution could be improved and implemented.

It is evident from the division of chapters, described above, that there is a deviation from the traditional format for the structure of dissertations (*cf.* 1.1)

1.10 SUMMARY AND CONCLUDING REMARKS

The implementation of QIPs is part of an institution's QMS; and "studies have concluded that the implementation of quality management in HE is a…beneficial task if the implementation process is effectively undertaken" (O'Mahony & Garavan

2012:185). As a result, the implementation of QIPs in South African HE is one of the ways in which QA, QE and the improvement mandate are carried out by the CHE and the HEIs. The CHE, through its sub-committee, the HEQC, requires institutions to create and execute QIPs in light of the recommendations for improvement determined in the internal or external review processes (*cf.* 1.1).

The evaluation of HE teaching and learning remains an ongoing process to improve and maintain the standards, as well as to guarantee that HE offered by the institutions meets the desires and expectations of all the HE stakeholders, including students, business and industry. Within this evaluation process, the policy framework and context play important roles where constructive criticism serves as an important tool supporting QI. Authority, coordinated effort and approaches to CQI, in general, and the implementation of QIPs in particular, are required in developing HEIs as effective and powerful learning establishments (*cf.* 1.2).

This study aims at identifying policies, guidelines and procedures and support structures that the institution provides to academic line managers (HoDs) and university staff (senior lecturers and lecturers) to ensure that QIPs are implemented effectively and efficiently (*cf.* 1.3).

The purpose and central argument of the study is outlined in this chapter (*cf.* 1.1, 1.2, 1.3, 1.4 & 1.5). The focus, scope of the study, and content were discussed, and the research methodology and theoretical approaches chosen were defined (*cf.* 1.6, 1.7, 1.8 & 1.9).

The next chapter (see Chapter 2) provides perspectives on the implementation of QIPs in HE.

CHAPTER 2
DIVERSE QUALITY PERSPECTIVES IN HIGHER EDUCATION

2.1   INTRODUCTION

In this chapter, the first subsidiary question (*cf.* 1.3) is pursued; namely, to determine the literature perspectives of the implementation of QIPs in HE. A plethora of relevant literature, elicited from diverse electronic databases (*cf.* 1.8.6.1) covering various disciplinary fields, were searched between July 2016 and December 2017. The key search terms were "quality improvement plan" in "higher education". Based on this search, there appeared a gap in the literature with regards to studies that have been conducted on the implementation of QIPs.

Furthermore, in addressing the process of the implementation of QIPs in HE in a complete manner, this chapter explains concepts such as quality, QA, QM, QE, and CQI. The researcher began by conceptualising what is quality in the HE setting and the current difficulties in defining quality (*cf.* 2.2.1). In this study, the researcher defines both QA and QE (*cf.* 2.2.2). This is followed by the discussion of QM in HE (*cf.* 2.2.3). Then follows the discussion on the need for effective CQI within the HE context (*cf.* 2.2.4), and closes by summarising the relationship between quality, QM, QA, QE and CQI (*cf.* 2.2.5).

2.2   THE CONCEPTUALISATION AND RELATIONSHIP BETWEEN QUALITY AND RELATED CONCEPTS

Before defining the principle of QI*,* the concept of quality should be soundly understood. Quality is a quite debated term, which implies that its meaning is diverse when considering various contexts (Maphosa, Netshifhefhe & Nobongoza 2016; Mavil 2013) which is evident in several international organisations around the world (Elassy 2015).

2.2.1 Quality in higher education

Quality is a relative concept, where different stakeholders in HE have diverse perspectives and their focus of attention might be different (Mavil 2013; Newton 2010; Prisacariu & Shah 2016). In other words, this concept *(quality)* is not easy to define, because *quality* has different meanings when used in different contexts (Cardoso, Rosa & Stensaker 2016).

The term *quality* "was originally derived from industries and businesses…" (Elassy 2015:258), while in HE it refers to processes that incorporate numerous components (e.g. students, educators, administrators, educational programmes, teaching-learning, and assessment strategies) which are integrated and interdependent in a complex way (Prisacariu & Shah 2016). Thus, when dissecting the concept of *quality* to understand it better contextually in terms of the HE paradigm, one should first become *au fait* with the learning process itself (Cardoso *et al.* 2016; Elassy 2015; Mavil 2013).

For this study, there are certain themes on how *quality* is conceptualised and evaluated in HE which will prove to be important. Consequently, four broad characteristics relating to *quality* are explained and these include "quality as purposeful, transformative, exceptional and accountable" (Schindler, Puls-Elvidge, Welzant & Crawford 2015:6), with "a set of quality indicators" (e.g. a stated mission/vision, positive change, fulfilment of high standards, and accountability to stakeholders) used to evaluate each of these wide conceptualisations (Schindler *et al.* 2015:6). Additionally, the critical conceptual understanding and interpretations of QA link it to themes and topics which are determined by the definitions of *quality*. Policies, processes and activities are primarily the components that help define *quality* more precisely. The secondary components that define *quality* more finely are accountability and ongoing improvement (Cardoso *et al.* 2016; Prisacariu & Shah 2016; Schindler *et al.* 2015).

For this study, *quality* focus is on related policies, guidelines, procedures and support (*cf.* 4.4) as well as the accountability (*cf.* 3.2) and continuous improvement (*cf.* 1.2, 1.7.2 and 2.2.4) that the HEIs have to adhere to.

2.2.2 Quality Assurance and Quality Enhancement in higher education

Institutions sometimes loosely interpret the terms *quality assurance* (QA) and *quality enhancement* (QE). A differentiation is made here in that they should be considered as two separate concepts in a single continuum, wherein both must be considered for processes of evaluation within HEIs (Amaral & Rosa 2010; Elassy 2015; Ntshoe, Higgs, Wolhuter & Higgs 2010; Odhiambo 2014; Williams 2016).

The "origin of the concept of QA was imported from the business sector into the HE sector in the 1980s due to its focal place in HE policy" (Elassy 2015:255). To achieve, maintain, improve and sustain quality, Williams (2016) aligns QA to processes such as the collection of policies (internal and external), revising procedures, systems and practices. While QA is regarded as a meta-process to ensure the maintenance of high standards by some researchers (El-Khawas 2013; Li & Zhu 2012), others (Collini 2012) emphasise "accountability" as being paramount.

As far as QE is concerned, it is regarded as a process of growth or change. In this study, it has a dual purpose: it improves students' capabilities; and it should take the institution to a higher level in terms of meaningful and relevant academic programmes, and innovative quality of teaching and learning (Williams 2016). "Improvement is often used to refer to a process of bringing an activity up-to-standard, whereas enhancement is about raising to a higher degree, intensifying or magnifying it" (Williams 2016:98).

Moreover, QE is inextricably connected to QM which is largely a process of measuring and enhancing the quality of products and services, and maintaining consistency, reliability, and quality verification at HEIs. Also, personnel (academics and administrators) must adhere to QE principles (best practices) with the aim of improving all-round quality at the institution (Filippakou & Tapper 2008).

However, QE is regarded as an off-shoot of QA which is somewhat different in that it is a "transformative" process that adds value and implements change in the institution with the aim of bringing about meaningful improvements (Mkhize & Cassimjee 2013:1271). Therefore, QE can just happen in the event that it is solidly proclaimed to be part of the mission of the HE institution.

While much research focused on QA processes and QE activities (Amaral & Rosa 2010; Collini 2012; Elassy 2015; Filippakou & Tapper 2008; Mkhize & Cassimjee 2013; Odhiambo 2014; Williams 2016), it became evident that QE and QA are distinct conceptually from each other, as available research has not directly examined the relationship between them. However, generally QA and QE are connected when it comes to improving the quality of HEIs (Williams & Harvey 2015; Williams 2016).

The fundamental contrast between QA and QE is that QA deals with evaluation, while QE is concerned with capacity development (CHE 2014; CHE 2017a; Elassy 2015; Mkhize & Cassimjee 2013; Williams 2016). QA ensures that HE's systems and processes are in place to measure and quantify the successful results in line with its core business. This means that QE develops the capacities of institutions in order to reach institutional goals through continuous stringent processes of measuring quality to attain global recognition (Mkhize & Cassimjee 2013).

The concept of QE is usually associated with QA in literature studies. As such, both concepts can function integratively. For example, QA and QE should be seen as two worthwhile approaches to improving quality, and the QA is focused on emphasizing prevention rather than curing, which leads to the efficiency of the educational process (Brink 2010; Elassy 2015). Simply put, QA is a general term that encompasses QE and other processes that lead to improving quality, thus both QA and QE are "interactive processes" that work cohesively to uplift standards (Elassy 2015:256). These concepts are "interactive processes" for enhancing the teaching and learning mission of a university (Elassy 2015:256; Filippakou & Tapper 2008). Institutional mechanisms of QA, when supported by best practice, bring about positive changes at an institution (Cheng 2011; Elassy 2015).

In summary, QA and QE can be seen as a continuum. While QA concentrates more on assessment regarding strengths and limitations of an institution, QE puts processes in place to improve the institution; nonetheless, they are both interdependent.

2.2.3 Quality management in higher education

Quality concepts, QA and QE are also linked to QM. This is essential for higher education systems to be developed and improved.

2.2.3.1 Defining quality management

Quality management (QM) in HE requires an institution to perform efficiently and effectively through capable leadership pursuing goals and objectives using methodologies that lead to advancement, while motivating academic staff to a level of exceptional performance by empowering every worker. This includes the introduction of a considerable number of activities, particularly innovative activities in teaching and research to address the needs of stakeholders, the continuous improvement of institutional processes, and establishing a system of periodic academic reviews to cover shortcomings (Tambi, Ghazali & Yahya 2008). Limitations of constrained finances and pressure from the ever-improving competing institutions, influence the institutional management of processes of QA and QE which are geared to attain quality through-put rates (Brits 2011; Kleijnen 2012; O'Mahony & Garavan 2012; Sahney, Banwet, & Karunes 2008).

The high standards required to reach global requirements, make it a priority to constantly change in order for HEIs to reach a state of excellence. In this regard, QIP is an indispensable tool to bring about systems that adhere to HEQC and international mandates.

2.2.3.2 The concept of Total Quality Management and Quality Management Systems in higher education

The process of *total quality management* (TQM) includes a developmental plan to exceed customer expectations utilising participative engagement of all stakeholders in systematically and continually organising processes that identify problem areas. This engagement building promotes collaborative decision-making of all role-players. However, this requires quality leadership committed to positive changes (Karahan & Mete 2014; Langstrand, Cronemyr & Poksinska 2015; Masejane 2012; Wani & Mehraj 2014; Zubair 2013). This means the management of all elements of an institution (processes, practices, systems, and methodologies) and of all those who are involved in any way with the quality of the product or service (Todorut 2013).

Quality management systems (QMS) and practices come from industry and lately spread into service organizations (Jenicke, Kumar & Holmes 2008), including public institutions such as HEIs (Hides, Davies & Jackson 2004; Zabadi 2013). To accomplish improvement in QM execution, institutions may utilise models in industry; notably from Japan, USA and some European countries, which can be utilised as a guide for HEIs (Ahire, Golhar & Waller 1996; Conca, Llopis & Tarí 2004; Flynn, Schroeder & Sakakibara 1994; Saraph, Benson & Schroeder 1989; Sudha 2013).

The implementation of QIPs to uplift university standards involves critical thinking among all stakeholders (including a management committed to transformation) such that a continuous culture of improvement is embedded in the QMS of the university.

2.2.3.3 Application of Quality Management in higher education

Quality management (QM) as an approach is applicable in all areas in HEIs to enhance effectiveness and efficiency to deal with government funding constraints and demands (Voss, Tsikriktsis, Funk, Yarrow & Owen 2005). In addition, QM facilitates processes that engender excellence in teaching and learning, research and community engagement (Karahan & Mete 2014; Kargyté 2015; Revathi & Kathiresan 2015).

For this study, the management of quality in the scholarly community is a reflection of managing academic performance and information. In a knowledge-based society, universities need to improve the quality of their services by utilising QMS thus guaranteeing worldwide dimensions of quality (Zubair 2013). The achievement of QM at institutions is, to a significant degree, subject to the integration of mechanisms for quality development involving institutional planning and resource allocation (Brits 2011:1288). However, a salient dimension in QMS is the financial planning side that must consider sufficient allocation of resources to meet the needs of QIPs (Kleijnen 2012).

2.2.4 The need for continuous improvement in higher education

A QI framework for HEIs is needed, which would require the collective thinking of all role-players such that the core functions of the organisation are taken to a higher level (Marshall 2016). The next section defines QI (*cf.* 2.2.4.1) and its need in HE (*cf.* 2.2.4.2).

2.2.4.1 Defining quality improvement

Quality improvement (QI) is important for management purposes as a tool to focus on planning, organisation and control. This term is utilised to portray any structure to deliberate a way to deal with institutional change that derives from re-workings of industrial or business models of QM such as CQI and TQM (Peterson, Kovel-Jarboe & Schwartz 1997). It is consequently one way to deal with enhancing quality in HE as it embraces approaches utilised by HEIs as a component of internal or external quality monitoring for improvement (Peterson *et al.* 1997). Also, QI has been found to be progressively essential as universities are attempting to accomplish stringent control over their affairs. As a result, universities are required to show that they can offer quality education to their students (Kleijnen, Dolmans, Willems & Van Hout 2011). On account of institutions neglecting to meet these goals, institutional prosperity and survival might be endangered; and if institutions neglect to deliver the best services, they risk losing students to rival institutions (Hénard & Roseveare 2012).

For this study, one of the aims of QI is to facilitate the self-assessment of staff, to ensure that improvements lead to high standards at the institution. In so doing, all staff members will recognise their strengths and overcome limitations. Institutions should develop QIPs which reflect the unique circumstances of their services and ensure that the climate for change is present. As indicated earlier (*cf.* 1.7.3), the provision of a quality framework against which the implementation of QIPs is performed, means that there is a need to address issues in an ordered structure that ensures an element of completeness. This has the effect of exposing deficiencies in their provision and thus bring these to the attention of departments and institutions - this might precipitate the need for innovation or change in practice.

2.2.4.2 The need for quality improvement

As a management tool, QI is important since it focuses on planning, organisation and control. Asiyai (2015) pointed out that persistent and holistic change in university instruction requires the collaborative efforts of different partners, both internally and externally. Collaboration triggers the improvement in HE since it sets up a close link or relationship with employers and other external stakeholders such as other universities, non-governmental organisations, and the private sector (Kleijnen *et al.* 2011). Universities can likewise team up with firms and businesses by using their innovations and aptitude to influence improvement through staff training. Quality can in this way be achieved in university education through cost-sharing among partners. University heads and management committees could likewise guarantee QI in HE by revitalising professional development programmes, retraining of educators and other staff members through special improvement projects of high calibre. Adherence along these lines, makes excellence and high standards achievable in university education (Akinyemi & Abiddin 2013).

The utilisation of TQM in general (and CQI specifically) to HE is becoming vital (In'airat & Al-Kassem 2014). Despite the fact that these concepts are utilised in the business and manufacturing sectors and are based on the assumption of strategic management, researchers (Balagué, Düren, Juntunen & Saarti 2014) see TQM as a critical achievement element of HEIs and the best way to accomplish constant quality change in the long-term. As CQI is a management model, it structures processes for

educational upliftment by utilising expertise and experience from other organisations in its quest to provide high-quality service and products to students and other stakeholders (Kennedy 2011; Kleijnen *et al.* 2011; Thalner 2005).

The vital significance of successful CQI in HE has been recognised by nations such as Bangladesh, China, Nigeria, Romania, Taiwan, Thailand, UK, USA, and Zimbabwe. These countries have established internal and external statutory and semi-statutory bodies as strong monitoring agencies ensuring that rigid procedures are implemented to reach excellence and thus gain international recognition (Henard & Mitterle 2010; Marshall 2016).

2.2.5 Summary and relationship between quality, quality management, quality assurance, quality enhancement and continuous quality improvement

In this study, quality is conceptualised and assessed in terms of policies, guidelines, procedures and support including the accountability and/or continuous improvement strategies that the institution adheres to. Thus, QA is intertwined with the implementation of policies, procedures, systems and practices (internal or external). QE is a procedure implemented to ensure growth or improvement (*cf.* 2.2.2). In addition, improved quality involves giving every individual employee the "desire to improve quality" by "giving them the time, the incentive" and the way to genuinely improve quality (Filippakou & Tapper 2008:92).

As mentioned earlier (*cf.* 2.2.2), the main distinction between QA and QE, is that the former deals mainly with assessment and the latter with building structures for improvement, but the connection between QA and QE is evident. Enhancing the quality of academic offerings/programmes and services is essential to HE.

In addition, management of quality in HE (*cf.* 2.2.3) obliges institutions to perform through dependable leadership in pursuing set goals and objectives while embracing techniques/strategies that foster development. Also, QM urges staff to perform extraordinarily in teaching, learning, research, and community outreach to address the needs of stakeholders, facilitate the continuous improvement of institutional procedures, and build up a system of periodic assessment to address shortcomings

(Tambi *et al.* 2008). QM can also be a philosophy and an ingrained practice for the administration of a university that exceeds the ability to control quality.

CQI in HE (*cf.* 2.2.4) requires the cooperative endeavours of different partners both internally and externally. University management and management committees must guarantee CQI in higher education by ensuring constant training and re-training of teachers and other staff via high quality professional development programmes. Sustaining excellence and high standards are achievable in HE specifically in teaching and learning, and research – if all stakeholders are committed and work collaboratively (Kleijnen *et al.* 2011; Hénard & Roseveare 2012; Peterson *et al.* 1997).

The discussion above clarifies the distinction between the different concepts which are significant in this study as it paves the way in understanding how to improve on the institution's core functions by implementing QIPs.

2.3   CONCLUSION

Quality is identified as a concept difficult to define (*cf.* 2.2.1). The search for an all-inclusive meaning of quality has yielded diverse views. Both QA and QE are recognized in this study and distinguished from each other to demonstrate that they ought to be considered as two separate ideas of one continuum, and both are essential in investigating ongoing processes within HEIs (*cf.* 2.2.2).

The management of quality in HEIs (*cf.* 2.2.3) is required to perform thorough responsible leadership and authority in seeking goals and objectives while embracing methodologies that prompt development. Academic line managers and academic staff need to be conscientised to perform remarkably by enabling and empowering every employee through several activities, particularly the introduction of innovative activities in teaching and learning, research and community engagement. In addition, QI is important to management since it can give a management tool, a concentration for planning, organisation and control (*cf.* 2.2.4), and hence enhancing the quality of academic offerings and administration services is significant to the HE system.

The next chapter (see Chapter 3) provides a description of the frameworks of HEQC and approaches to QI, with special reference to QIPs in the context of HE in South Africa between 2001 and 2018 (*cf.* 3.2).

CHAPTER 3

QUALITY IMPROVEMENT PLAN IMPLEMENTATION PRACTICES IN HIGHER EDUCATION IN SOUTH AFRICA

3.1 INTRODUCTION

QI is important for management purposes as it acts as a tool to focus on planning, organisation and control (Kleijnen, Dolmans, Willems & Van Hout 2011). The aim of QI is to help HEIs to measure their current performance, noting their strengths and implementing innovations in areas where improvement is required (Marshall 2016). HEIs in South Africa are required by the CHE to develop QIPs which reflect the unique circumstances of their services ensuring that the climate for change is present (CHE 2001a; 2004a; 2004b; 2007; 2014; 2017a; 2017b; 2018). The utilisation of TQM in general, and specifically, CQI, to South African HE became vital as it requires the cooperative endeavours of different partners both internally and externally (Balagué *et al.* 2014; In'airat & Al-Kassem 2014). This has become important in South Africa as enhancing the quality of academic programmes and administration services are significant to the system of HE (CHE 2014).

The importance of CHE as a QA "watch-dog" for HEIs is fundamental to improving quality management systems in order to reach international standards. As such, the process leading to the accreditation of programmes, institutional audits, promotion of quality and capacity development, development of standards and the implementation of the Higher Education Qualifications Sub-Framework (HEQSF), are beefed up. The CHE "discharges these functions through its permanent sub-committee, the HEQC" (as required by the Higher Education Act 101 of 1997 [RSA 1997b:9]).

The implementation of QIPs constitutes one of the ways in which the HEQC and the HEIs execute QA, enhancement and the improvement mandate (CHE 2001a; 2004a; 2004b; 2007; 2014; 2017a; 2017b; 2018). The HEQC also engages in and takes responsibility for the development of activities to institutionalise a culture of CQI in HE (CHE 2001a). When HEQC evaluates learning programmes, and finds that some programmes are not up to standard, then the programmes are referred back to the provider to implement QIPs for improving quality within a specific time-frame. This

shows that applying the principle of quality in South African HE involves evaluation of services and products according to defined standards in order to improve quality (CHE 2004a).

In this chapter, the second objective of the study (*cf.* 1.4) is pursued; namely, to provide an overview of HEQC's frameworks and documents on various aspects concerning QI practices in the South African context of HE (*cf.* 3.2).

3.2 THE HEQC FRAMEWORK FOR QUALITY IMPROVEMENT PLAN IMPLEMENTATION PRACTICES IN SOUTH AFRICAN HIGHER EDUCATION

The following sections review the HEQC framework for QIP implementation practices in the South African context of HE from the promulgation of the Education White Paper 3 in 1997 (*cf.* 3.2.1), the founding of the HEQC in 2001 (*cf.* 3.2.2), the framework and resources for improving teaching and learning (*cf.* 3.2.3) and (3.2.4), the implementation of institutional audits in 2004 (*cf.* 3.2.5 and 3.2.6), the shift to QE in 2014 (*cf.* 3.2.7), up to the proposed integrated approach to QA, institutional quality reviews and framework for accreditation and re-accreditation of programmes in 2017 and 2018 (*cf.* 3.2.8, 3.2.9 and 3.2.10).

3.2.1 Education White Paper 3: A Programme for the Transformation of Higher Education

The Department of Education (DoE) gazetted the *Education White Paper 3*: *A Programme for the Transformation of Higher Education* (RSA DoE 1997a), in 1997, following on the report of the National Commission on Higher Education (NCHE) (1996). This report emphasised quality as a non-compromising critical principle for the application and maintenance of standards in HEIs in terms of specific requirements to reach a state of excellence (RSA DoE 1997a:8). In an institutional context, these expectations and ideals may differ. This is dependent on the specific purposes and implementation of the principle of quality, which means that products and services are evaluated against international standards to improve, renew and progress (RSA DoE 1997a). Furthermore, the *White Paper* proposes that QA is

primarily the responsibility of HEIs and that the role of the HEQC is to assess, among other aspects, quality in institutions; it is not a body that focuses on punitive measures for erring institutions (RSA DoE 1997a).

3.2.2 HEQC Founding Document

The CHE published the *HEQC Founding Document* (CHE 2001a), following the introduction of the *White Paper* and NCHE report. One of the objectives of the *HEQC Founding Document* was to establish a quality HE system delivering services with international benchmarks in mind, while continually re-assessing performances and implementing quality improvements (CHE 2001a:7). One of the areas of responsibility set out in the *HEQC Founding Document* was the development of an activity programme to institutionalise and commit to a culture of CQI in HE (CHE 2001a:13). It was also envisaged that when the HEQC initiates programme evaluations, learning programmes that do not meet the required standards will be referred back to their providers for revision to timeously institute QI (CHE 2001a).

3.2.3 HEQC Framework for Improving Teaching and Learning Project

A *Framework for Improving the Teaching and Learning Project* (CHE 2001b) was published by the CHE in January 2001. This document was a set of guidelines upon which HEIs had to structure their plans such that all stakeholders work cohesively to stimulate quality and improvement in teaching and learning (CHE 2001b). Furthermore, it suggested that the academic community should be encouraged during the interaction between the HEQC and the HEIs, not only to allow the "facts" and "standards" presented by the HEQC to challenge their practices, but also to criticise them and thus contribute to their ongoing revision and improvement (CHE 2001b). The framework also suggested that the *Codes of Practice of the Improving Teaching and Learning Project* be developed and that "these should always be construed in context and applied sensibly to various institutional contexts", with due regard for institutional missions and goals, to address the "fitness for purposes" and "improvement" aspects of the HEQC conceptualisation of quality (CHE 2001a:9). The specified good practice descriptors developed as part of the *Code of Practice* were important for guiding audit panels to determine whether an institution meets the

standards for self-accreditation and those HEIs that do not meet the threshold descriptors will need to develop an intervention or improvement plan to correct the situation; and this will be monitored by the HEQC (CHE 2001b).

3.2.4 HEQC Improving Teaching and Learning Resources (ITLR)

The HEQC published the *Improving Teaching and Learning Resources* document *(ITLR*) in 2004. The project aimed at improving higher education teaching and learning. This *ITLR* document stressed that actual QI depends heavily on the link between management of quality and planning, and the allocation of resources at all levels of the HEI (CHE 2004a). At the departmental and programme level, the results of self-assessments must be adequately diagnosed to lead to tangible and detailed plans for the improvement of teaching and learning practices (CHE 2004a). *ITLR* were necessary to implement QIPs, and the QMS must ensure that plans are in place to supply these, if the institution is serious about improvement in teaching and learning, research and community engagement (CHE 2004a).

It was also pointed out in the *ITLR* document that insights from programme and course reviews should lead to processes that implement QIPs which include the provision of resources and staff development. Management should take the responsibility of instituting, monitoring, supporting and continually assessing the effectiveness of all QIPs, in addition to giving guidelines on reporting channels and pinpointing who is accountable for specific functions thereof (CHE 2004a).

3.2.5 HEQC framework and criteria for institutional audits

In June 2004, the HEQC introduced a report on *Framework and Criteria for Institutional Audits.* Institutional audits were considered a form of QA that are carried out in many countries and is usually linked to QI and QE purposes (CHE 2004b). The aim was to encourage HEIs to systematically and continuously improve quality in accordance with their background and institutional mission using planned goals (CHE 2004b). The HEQC's institutional audit identifies areas for improvement and gives guidelines for action plans to be implemented timeously. The HEQC monitored these improvement plans, usually three years after the audit visit (CHE 2004b). The HEQC

monitors plans involving development of policy, allocation of resources, implementation of policy, scope and impact assessment, and the identification of measures to improve and enhance quality of the core functions of teaching and learning, research and community engagement (CHE 2004c).

3.2.6 HEQC Institutional Audit Manual

In 2007, HEQC published a manual which outlined the main aspects of the audit process which stated how institutions should plan, act and report on quality-related objectives in line with international benchmarks. Recommended in the manual were processes that would guide institutions to implement follow-up strategies to address possible efficiencies.

The Audit Manual prescribed the following format of a QIP:
- "a short narrative that addresses the audit report's findings;
- the way the institution plans to deal with the recommendations highlighted by the review report;
- The establishment of priorities and the reasons thereof;
- the responsibility for the plan for improvement;
- The approval of the improvement plan;
- The monitoring and evaluation of the progress made during implementation of the plan;
- the institutional contact for the monitoring process; and
- an action plan" (CHE 2007:53).

3.2.7 HEQC Framework for Institutional Quality Enhancement Project (QEP)

The HEQC itself was evaluated externally and one of the recommendations that emerged was that it should engage with HEIs in a vigorous way to ensure accountability such that future institutional audits meet with fewer shortcomings (CHE 2009). In 2014, the HEQC's Quality Enhancement Project (QEP) was then introduced. The purposes of the QEP were to:

- advance teaching and learning (i.e. of both the HE sector and of the individual HEIs);

- provide a framework, with incentives and resources to improve student success; and

- advance the quality of undergraduate higher education, and the improvement of the number of graduates with sound personal, professional and social attributes (CHE 2014:12).

Hence, the long-term goal of QEP is connected to "collaboratively developing effective strategies to improve quality" at HEIs on an ongoing basis (CHE 2014:21).

3.2.8 HEQC integrated approach to quality assurance in higher education

In 2017, the CHE proposed a revised overall QA framework based on what currently exists. This framework reaffirms the principles on which the CHE's QA is based but re-aligns its current activities to ensure a balanced set of activities in a much more integrated manner that increases the synergies between them. The main distinction between the old and the revised QA framework pertains to the alignment of programme accreditation to the new institutional evaluation process (CHE 2017a).

3.2.8.1 HEQC Framework for Institutional Quality Reviews

In line with the focus on improving quality with global trends in external quality assurance (EQA), the objective of *Institutional Quality Reviews (IQRs)* is to gauge the effectiveness of HEIs in terms of providing quality products and services (CHE 2017b). The CHE, therefore, considers each institution responsible for the quality of its own academic programmes and activities including the establishment, maintenance and modification of its own system of QA. This must ensure consistency and alignment between the elements of the system and must include feedback loops that promote and improve standards (CHE 2017b).

The CHE proposed that IQRs concentrate on what an institution does to ensure quality, and what evidence it collects and uses to maintain and sustain high standards

of teaching and learning. A QA system consistency is important to ensure systemic quality monitoring and improvement while avoiding disjunctures arising out of fragmented processes and uncoordinated activities (CHE 2017b). Based on the documentation submitted during the site visit, the panel prepare a written report identifying the strengths and areas for improving, the QA system and its functionality, and its effectiveness based on evidence relating to the selected areas of focus. The report also includes a QA system assessment detailing functionality and efficiency (CHE 2017b).

Furthermore, the CHE proposes that institutions will be rated as either "developed" or "advanced", or "effective" or "exemplary" in each focus area. Based on the rating, HEIs will be required to submit an annual improvement plan, which summarises progress, plans and identified areas for action in improving quality in each focus area. Also, HEIs will be required to update other documents, such as the *Strategic Plan* and an *Annual Performance Plan (APP),* when new or revised documents become available (CHE 2017b). If an institution receives a rating of "less than developed" and/or "less than effective" in any of the focus areas, then a developmental process will begin, in which the CHE and the institution will collaborate on steps that need to be taken to bring about improvements. This process will begin with a feedback visit to the institution. An improvement plan, indicating what steps will be taken in the next 12 months, will need to be submitted to the CHE within two months of the feedback visit, which will be monitored by the CHE and the Institutional Audit Committee (CHE 2017b). If necessary, the CHE may communicate with the Department of Higher Education and Training (DHET) regarding support and capacity building. Furthermore, if an institution's QA system is not assessed as "developed" (or advanced) within three years of the feedback visit, then the institution will be referred to the DHET for further engagement (CHE 2017b).

3.2.8.2 HEQC Framework for accreditation and re-accreditation of programmes

In 2018, the HEQC published a draft *Framework for the Accreditation and Re-Accreditation of Programmes* for perusal by HEIs. This framework reaffirms the responsibility of the HEQC to accredit university academic programmes and confirmation of the continued accreditation of programmes referred to as re-

accreditation by the CHE (CHE 2018). The CHE considers the accreditation and re-accreditation functions to be an integral part of its mandate for EQA processes. The framework also reaffirms that the fundamental responsibility for assuring programme quality lies with the HEI itself through robust mechanisms for IQA and an effective IQMS that allows HEIs to conduct their own institutional and programme reviews as part of a regular internal quality review cycle (CHE 2018). The framework also states that regular systematic programme review cycles must include analysis of results, reporting to the CHE, planning, implementation and monitoring improvements as part of ongoing QI initiatives (CHE 2018).

One of the few specific purposes of the accreditation and re-accreditation of the HEIs and their programme offerings is to identify and manage improvement measures which lead to the improvement of the quality of the programmes through the CHE's EQA processes. Thus, opening opportunities to design quality programmes from the outset (CHE 2018). These aspects of programme accreditation and re-accreditation represent a cyclical process from initial accreditation to verification after the first student cohort has been produced. This is followed by regular reports on internal institutional programme reviews that establish accountability via CQI practice for programmes designed and managed by HEIs (CHE 2018).

The revised functions of the HEQC Accreditation Committee include analysing improvement plans of HEIs, drawing up progress reports, and ensuring that all recommendations included in the review were attended to (CHE 2018:15).

The rigour and authenticity of the institution's own review process concerning its existing programmes, its improvement plans, and progress reports are exhibited in the demonstration of its capacity to quality assure, at a high level of integrity, its own programmes and provide credible results and reports to the HEQC. This will influence the decision of the HEQC on the duration of the re-accreditation of existing programmes of an institution - which could be up to seven years (CHE 2018).

Where accreditation with conditions have been granted, institutions must firstly demonstrate, by means of progress reports that the conditions have been met;

secondly, where requested, draw up an action plan to address areas of concern (CHE 2018:39).

3.3 CONCLUSION

This chapter addressed the HEQC framework and how it guides quality improvement. As quality is an integral aspect of improving HE, processes by HEQC are put in place to enforce measures that lead to high standards in institutions. "Defaulting" HEIs are assisted in terms of guidelines, site visits, and monitoring by HEQC.

The revised frameworks introduced by the CHE in 2017 and 2018 reaffirm the original principles for QA as expounded in the *HEQC Founding Document* and the *Frameworks* for the first QA cycle, and in many ways consolidate what is already in place.

Chapter 4 provides more details on the case study institution regarding its historical background, its current operational quality systems, document "interrogation", and SWOT analysis of its existing institutional policies, guidelines, procedures and support structures.

CHAPTER 4
CUT'S INSTITUTIONAL POLICIES, GUIDELINES, PROCEDURES AND SUPPORT FOR QUALITY IMPROVEMENT PLAN IMPLEMENTATION PRACTICES: A DOCUMENT ANALYSIS

4.1 INTRODUCTION

This chapter introduces the case study university in more detail to obtain a deeper and richer understanding of the research topic. It starts by providing more details on the case study university (i.e. CUT) to explain the institutional context of this study (*cf.* 4.2). The current operational quality systems in place, as outlined in the existing institutional policies, guidelines, procedures and support documents, are discussed in detail in this chapter (*cf.* 4.3). The aim is to document practice within a particular institutional setting and to provide institutional context detail on the five (5) focus areas that form the basis of the research instruments (questionnaire and semi-structured interviews), the details of which will be discussed in Chapter 5. The chapter then pursues the third objective of the research study (*cf.* 1.5); namely, to identify policies (*cf.* 4.4.1), guidelines (*cf.* 4.4.2), procedures (*cf.* 4.4.3), and support (*cf.* 4.4.4) for QIP implementation practices. This chapter closes with a SWOT analysis (*cf.* 4.4.5) of the identified policies, guidelines, procedures and supporting documents.

4.2 A BRIEF OVERVIEW OF THE CASE STUDY INSTITUTION

The CUT is a public institution in the Free State, dedicated to quality training in Science, Engineering and Technology [SET] (CUT 2018b). The institution was established as "Technikon Free State", and with 285 students mainly enrolled in secretarial, art and design programmes, its doors were opened in 1981. The institution now has over 18 000 students. Students are trained and prepared to follow the professional practice, especially in secretarial, art and design, science, engineering and technology (CUT 2018b). CUT also became a leading institution able to occupy its place in the national and international HE landscape (CUT 2016a).

Progress and change go hand-in-hand at the CUT. The institution boasts a diverse student community that accurately reflects the regional demographics (CUT 2018a). The institution currently employs 1 582 staff members. Implementing a plan for equitable employment also ensures diversity of academics and support staff (CUT 2016a). The year 2011 was marked as the 30th anniversary of CUT's technological innovation. This achievement of quality education and university excellence is reflected in this milestone. The institution also focuses on its values, namely "customer service, excellence, innovation, integrity and diversity" in its efforts for educating, teaching and training of students using world-class technology (CUT 2016a:9).

A few years ago, CUT took over its new status as a UoT with the restructuring of the HE landscape. The incorporation of the Welkom Campus of the former Vista University in the CUT in 2004 was another step in the national realignment. This academic restructuring aimed at improving efficiency, quality education and effectiveness has led to the creation of four faculties: Engineering and Information Technology, Health and Environmental Sciences, Management Sciences, and Humanities (CUT 2016a), as indicated in the table 4.1 below:

Table 4.1: Academic structure of the Central University of Technology (CUT 2018b:5-6 & 29-37)

Faculty	Departments
Faculty of Engineering and Information Technology	• Department of Built Environment • Department of Civil Engineering • Department of Electrical, Electronic and Computer Engineering • Department of Mechanical and Mechatronic Engineering • Department of Mathematical and Physical Sciences • Department of Information Technology

Faculty of Health and Environmental Sciences	• Department of Agriculture • Department of Clinical Sciences • Department of Health Sciences • Department of Life Sciences
Faculty of the Humanities	• Department of Communication Sciences • Department of Design and Studio Art • Department of Language and Social Sciences Education • Department of Mathematics, Science and Technology Education • Department of Postgraduate Studies Education
Faculty of Management Sciences	• Department of Accounting and Auditing • Department of Business Management • Department of Business Support Studies • Department of Government Management • Department of Hospitality Management • Department of Tourism and Event Management

4.3 THE CURRENT OPERATIONAL QUALITY SYSTEMS IN PLACE

At CUT, traditional methods of assuring quality were embedded in policies which were followed prior to 1994, when it was known as Technikon Free State. Quality assurance was done mainly internally through examinations, sometimes monitored by external professional bodies. The Senate is the university's highest body to recommend how QMS must be administered. However, the Higher Education Act 101 of 1997 (RSA DoE 1997b:27) made the QA process to be stringent in order to be comparable to international standards.

The following functional conceptions of quality and QA are an integral part of the institution and are embedded within the matrix of the institution's existing policies, guidelines and practices.

4.3.1 Implementation of quality improvement plans

Regarding the *Revised Manual for Reviews* (CUT 2016b), the HoD and the relevant Department compile a QIP in response to the results of the internal review and the report on the outcome of the external peer review after the final review report has been received. The QIP should indicate the action(s) the department will take after considering the report. The relevant HoD is also responsible for ensuring that a full consultative process is followed, and that the approval of the faculty is obtained before QIP is submitted to the IPQE committee. The IPQE will then facilitate a meeting with the relevant HoD and staff to discuss both the review report and the QIP and then identify areas that need attention. In response to the review, the IPQE ensures the quality of this QIP. This report is submitted to the relevant institutional bodies, such as the Faculty Board, Management Committee (MANCOM), the University Academic Planning and Quality Committee (UAPQC), and the Senate (CUT 2016b). The IPQE monitors progress made in implementing the QIP. Quarterly progress reports, as recommended in the review report, are expected from the relevant HoD after all the review recommendations have been implemented within the Department.

4.3.2 Responsibility for quality management at the institution

In 2014, the institution adopted a Quality Enhancement Strategy (QES) that outlines the University's QI procedures. The QES stipulates that quality is the university's responsibility and that the university requires all students, staff and partners to take part in the process. The university promotes a culture of continual improvement of quality at all levels. This means the inclusion of students, academic staff, external examiners, moderators, and employers in all aspects of QI (CUT 2014).

The UAPQC and its standing Faculty Quality Enhancement Committees (FEQCs) are responsible for developing teaching and learning policies, strategies, and

procedures. The FEQCs continue to review quality and recommend policy updates as required. It is also essential to identify best practice through collaboration with accreditation bodies and other universities. This is a joint responsibility for promoting academic excellence with relevance to the IPQE, the Quality Enhancement Unit (QEU) and the Centre for Innovation in Learning and Teaching (CILT). The aim is to ensure that all processes for quality promotion remain relevant and valid in line with changing internal and external circumstances (CUT 2014).

HoDs in academic programmes and staff are encouraged to be reflective in relation to their own procedures, pedagogical style and practices. To achieve this, the CQI culture at the university consistently seeks to create a clear understanding of the importance of internal review and annual programme monitoring processes among staff and students. Emanating out of reviews are recommendations advocating changes that pave the way for better quality and excellence in HEIs. All QI policies or procedure updates are ratified by the University Faculty Boards and FQECs, and then brought to the Senate by the IPQE via the UAPQC (CUT 2014).

The MANCOM is responsible for the university's financial performance and continuous monitoring of internal management and control effectiveness based on internal audits and reports, in addition to evaluating the progress towards achieving the objectives. Management structures have been improved in recent years to include faculty and HoDs in more decision-making processes. Investment in university resources continues to be a priority to ensure that education and learning take place in an environment of the highest possible standard. Therefore, improving quality continues to be at the heart of the university strategic plan (CUT 2014).

The CILT is responsible for promoting academic excellence in collaboration with the faculties and provides support to all academic personnel. It is university policy that all academic staff support CILT initiatives and take advantage of their capacity-building structures to ensure that best teaching and learning practices proliferate throughout the university (CUT 2014). Also, IPQE is directly responsible for the academic management of all university-wide programmes, and for managing the processes of new programme development and external review. The QEU falls under the IPQE and is thus responsible for the ongoing monitoring of QI procedures and

the maintenance of university QI records. Commitment to annual and other reviews with the faculties/departments, management of the production of QI documentation, and ensuring that the university always uses best practice, falls within the responsibility of the QEU (CUT 2014).

4.3.3 Review methods and dissemination of findings at the institution

Self-assessment is key if an institution is serious about improvement in quality concerning its products and services. The process thus facilitates continuous improvement and promotes an "organisational learning culture". The Senate's review process follows a five-year cycle which assesses programme quality, programme viability, and the all departments' future plans (CUT 2016b). In particular, five-year reviews will document and show the achievements of the Department (past), serve as a basis for the evaluation of the programme (present), and guide the planning (future). This indicates that CUT mainly tightened issues relating to quality as an obligation to satisfy recommendations emanating out of internal departmental reviews. Reports from external accreditation reviews should then be submitted to the relevant institutional stakeholders (HoD, Dean, IPQE, Faculty Board, Senate, and Council). The appropriate institutional stakeholders should also be provided with subsequent QIPs and progress reports (CUT 2016b). Furthermore, Departments whose academic programmes are being reviewed may request IPQE support in preparing for the review and providing guidance in the light of the findings of the review (CUT 2016b).

In addition, the Chairperson of the panel should submit a draft report to the Deputy Director of QE and the HoD within three weeks of instituting the review process. Thus, programme review reports summarise the key findings and, in particular, address the issues identified. The HoD carries out an accuracy check on receipt of the report. In consultation with the Chairperson, the report is then finalised. The HoD has a week to respond, after which the Chairperson prepares the final report. Once the final report has been received, the HoD is requested to provide a QIP indicating the action(s) that the Department will take in the light of the report. The IPQE then must submit the final report for approval to the Senate (CUT 2016b).

The review of the teaching function of a Department will normally include a review of at least two key departmental programmes – one at the undergraduate level and the other at the postgraduate level. Alternatively, if the Department has undergone an accreditation or discretionary programme evaluation over the past five years, the results and improvement plans may be presented as evidence of the teaching function of the Department (CUT 2016b).

4.3.4 Use of feedback for curriculum development at the institution

The purpose of a self-examination exercise can be divided into two categories within the institution: those relating to the life of the institution, department or its programmes, and those relating to the results of the self-examination in an accreditation process.

Institutional, departmental or programme self-review

The following purposes relate to the institution, department or programmes:
- "help the institution and programmes to improve;
- enhance institutional openness;
- evaluate programmes in terms of relevance to global demands
- assess the effectiveness of teaching and learning by benchmarking the against international standards
- ensure that curricula is in line with global practices and have practical value.
- get regular feedback on teaching, learning and evaluation from all stakeholders;
- monitor the effectiveness of the action plan to improve all-round quality; and
- support and explore ways to promote effectiveness of the core functions of the University" (CUT 2016b:5-6).

The self-review related to an accreditation review

In instances where the self-review is related to an accreditation review, the first purpose, which is especially important, is the opportunity provided by the self-review for thoroughly assessing the extent to which the institution, department or programme meets accreditation standards. The other major purpose of a self-review related to an accreditation process is to provide a useful report for the evaluation team that will visit the institution (CUT 2016b).

In both instances, the results of the self-review should lead to interrogating all aspects of assessment to ascertain quality, good practices, and processes of addressing weaknesses.

4.3.5 Staff development and support at the institution

Within the institution, the unit for *Curriculum and Academic Staff Development (CASD)* offers the following services:

- "co-ordinates the implementation of teaching and learning plans, implements DHET policies related to curriculum, as well as teaching and learning and academic development initiatives;
- oversees the process of curriculum design and development for all programmes and the core curriculum, and ensures the alignment of these with the national policy framework, expectations of professional bodies and other key stakeholders;
- ensures the academic credibility of programmes;
- plans, co-ordinates and implements innovative, effective and efficient strategies to integrate into the curriculum;
- introduces the procedures, theory and practice of service learning, sustainable development and community engagement;
- ensures support for underprepared students through foundation and extended programmes" (CUT 2014).

In addition, HEIs commit to operational effectiveness including among others, introducing relevant high-quality programmes, excellence in teaching and learning, and expert staff-development workshops (CUT 2014:6).

It is evident from the discussion above that the University possessed functional mechanisms that maintained quality at all levels.

4.4 INSTITUTIONAL POLICIES, GUIDELINES, PROCEDURES AND SUPPORT FOR QUALITY IMPROVEMENT: DOCUMENT ANALYSIS

The next sections identify CUT's current institutional policies, guidelines, procedures and support for QIP implementation practices via document analysis as indicated in Chapter 1 (*cf.* 1.8.6.2). This document analysis is tabulated (Table 4.2, 4.3, and 4.4) based on a SWOT analysis (Table 4.5) to identify strengths, weaknesses, opportunities and threats, for both CUT and its staff in relation to the topic.

4.4.1 The CUT's policies for quality improvement

The *Institutional Policy Framework* (CUT 2016c:3) defines a policy as a "formal statement of standards and principles" or position to "guide or direct decision-making and operations" that contribute to "achievement of the University's vision and objectives". Policies have a long-term focus and are implemented throughout the university. Additionally, the *Institutional Policy Framework* indicated that Policies promote quality results by establishing standards and internal controls and reduce institutional risk. Policies thus form the basis of the governance and quality systems of the University that are characterised by indicating what needs to be done instead of how it should be done.

As indicated in the problem statement of this study (*cf.* 1.2), there exists no institutionally approved policy on QA. This policy is supposed to set expectations, guide the actions and provide effective leadership to the university's academic line managers (HoDs) and academics (senior lecturers and lecturers), who are responsible for the implementation of QIPs. The current HoDs and senior lecturers/ lecturers rely on existing policies, guidelines and procedures for academic review,

which are not clear in terms of the implementation and monitoring of QIPs as these are intended to be informed by an existing institutional QA policy. The existing policies lack a formal statement of standards and principles or a position to guide or direct the delivery of QIPs and operations that support the University's vision and goals for continued improvement in quality. And hence, this study's investigations revealed that CUT's existing policies were not sufficiently formalised to elicit real all-round quality improvement.

The next sections (*cf.* 4.4.2, 4.4.3, and 4.4.4) will only focus on the *Revised Manual for Reviews at the Central University of Technology* (CUT 2016b) which will serve as a basis for the document analysis. This is because this manual is the only document that provides the guidelines, procedures and support for QI implementation practices within the institution.

4.4.2 The CUT's guidelines for quality improvement

The CUT *Institutional Policy Framework* (CUT 2016c) defines guidelines as "the provision of a more specific level of operational detail, where clarity of processes and procedures is required". The most senior officer responsible for implementing the policy has delegated responsibility to develop and implement the guidelines which provide rules or principles that help to develop and implement effective practices for the achievement of quality results. CUT's QI guidelines are presented in Table 4.2.

Table 4.2: CUT's guidelines for quality improvement

Document selected	Purpose of the document	Who is responsible?	How this document is related to quality improvement?
Revised Manual for Reviews at the Central University of Technology (CUT 2016b)	The purpose of this Manual is to outline the self-review process at the university and identifies it as an integral component of any quality system	The responsible HoD will submit a QIP to the IPQE. Thereafter, the HoD will facilitate a meeting with the APU and the relevant department, to discuss both the report and the QIP, and to identify areas	The HoD and relevant department will compile a QIP in response to the outcome of the external review outcome, as well as a report on the outcome of the external peer review. The IPQE

	through which an institution carries out its evaluation of products, services and management processes that meet quality criteria (CUT 2016b:3).	that require attention. After a period of 12 months, the HoD responsible for the programme will submit a progress report to the IPQE.	will ensure the quality of this QIP in response to the external review. This report will be submitted to the relevant institutional bodies (e.g. the Faculty Board, MANCOM, UAPQC and Senate).

A perusal of the *Revised Manual for Reviews at the Central University of Technology* (CUT 2016b) does not give much clarity on processes and procedures required on how QIPs should be developed and implemented. This causes confusion about how QIPs must be effected.

The next section will identify the procedures for QI at the CUT.

4.4.3 The CUT's procedures for quality improvement

The CUT *Institutional Policy Framework* (CUT 2016c:3) defines a procedure as a detailed outline of the operational steps required to implement a policy. Guidelines and local documents may further support a procedure. A procedure provides detailed, "*how to*" information, and "will normally be developed by the office responsible for the administration of a policy". Procedures will include the following:

- guide processes on implementing policies;
- provide information to implement policies;
- assign responsibility to managers for the implementation of policies; and
- advising the process of monitoring (CUT 2016c:3).

Policies must be amended on a three-year cycle basis, and this has implications for operational logistics. The *Policy Framework* indicates that the most senior officer responsible for implementing the policy may delegate responsibility to develop and implement the procedures. CUT's quality improvement procedures are outlined in Table 4.3 below.

Table 4.3: CUT's procedures for quality improvement

Document selected	Purpose of the document	Who is responsible?	How this document is related to quality improvement?
Revised Manual for Reviews at the Central University of Technology (CUT 2016b)	The purpose of this Manual is to outline the self-review process at the university and identifies it as an integral component of any quality system through which an institution carries out its evaluation of products, services and management processes that meet quality criteria (CUT 2016b:3)	After receipt of the final report, the HoD will be requested to provide a QIP, indicating the action(s) the department will take in light of the report. The IPQE will table the final report at Senate for approval.	The HoD should prepare a QIP. Thereafter, the IPQE will facilitate a meeting with the relevant HoD and staff members to discuss both the programme review report and the QIP. The relevant HoD is responsible for ensuring that a full consultative process is followed, and that faculty approval is obtained, before the QIP is submitted to the IPQE.

However, the procedures outlined in the *Revised Manual for Reviews at the Central University of Technology* (CUT 2016b) do not provide a detailed outline of the operational steps required to develop and implement QIPs. There is no provision of specific *"how to"* information. The current procedures are silent on:

- providing clear instructions on the manner in which QIPs are to be implemented;
- providing information on the actions required to implement QIPs;
- there are no clear indicators of those persons responsible for implementation even though the responsibility of providing the QIP is generally assigned to the HoD; and
- the procedures do not clearly explain the monitoring processes/procedures of QIP implementation.

4.4.4 The CUT's support for quality improvement

The *CUT Quality Enhancement Strategy* 2014-2018 (CUT 2014) and the *Procedure on the appointment, competencies, roles and responsibilities, and allowances for academic Heads of Department, Department Managers, and Assistant Deans* (CUT 2017), will not form part of the document analysis. This is because these documents do not indicate the support for quality improvement plan implementation practices. However, it is important for this study to identify methods that the University aims to use to effect quality changes on a continuous basis on all its programmes and services. In addition, the roles of the HoDs and Assistant Deans pertaining to QA must be clearly established.

The CUT *Quality Enhancement Strategy 2014-2018* (CUT 2014:6) outlines some ways to effect excellence in programmes and services:

- all those involved in the design, delivery and assessment of courses to provide "quality service" (CUT 2014:6);
- there must be a commitment to establishing international prominence in the academic status of CUT; and
- ensuring operational effectiveness and efficiency.

The CUT *Procedure on the appointment, competencies, roles and responsibilities, and allowances for academic Heads of Department, Department Managers, and Assistant Deans* (CUT 2017), identifies the following roles for HoDs and Assistant Deans of Teaching and Leaning:

- HoDs should motivate and support programme development and delivery, in addition to developing and implementing plans and systems to support research, innovation and technology at departmental level (CUT 2017).
- The Assistant Deans of Teaching and Learning should be able to promote ongoing curriculum development processes within the faculty, coordinate the implementation of the Faculty's Teaching and Learning Plan, and promote innovative learning and teaching methods (CUT 2017).

This implies that CUT must be involved in an ongoing process of quality management to ensure that it becomes an institution of excellence. CUT's support for QI is outlined in Table 4.4.

Table 4.4: CUT's support for quality improvement

Document selected	Purpose of the document	Who is responsible?	How this document is related to quality improvement?
Revised Manual for Reviews at the Central University of Technology (CUT 2016b)	The purpose of this manual is to outline the self-review process at the university and identifies it as an integral component of any quality system through which an institution carries out its own evaluation of products, services and management processes that meet quality criteria (CUT 2016b:3).	Progress made with the implementation of the QIP will be monitored by the IPQE. Quarterly reports on progress, as per the recommendations made in the Audit Report, will be expected from the relevant HoD, until the department has complied with all the recommendations of the Audit Report. Assistance with compiling the QIP can be provided by the IPQE.	The relevant HoD is responsible for ensuring that a full consultative process is followed, and that faculty approval is obtained before the QIP is submitted to the IPQE.

As indicated earlier (*cf.* 3.2.4), QIPs should be based on sound educational theory of teaching and learning, supported by the provision of resources and development of professional personnel and should explicitly incorporate the assessment results into the next planning cycle. The *Revised Manual for Reviews at the Central University of Technology* (CUT 2016b) is, however, silent on the support that must be made available for the implementation of QIPs in terms of human resources, financial resources, and infrastructure resources. Procedures must be established to ensure that insights and recommendations from these reviews are followed and improvements plans implemented. This includes providing support and resources for the implementation of QIPs.

4.4.5 SWOT analysis of the institutional policies, guidelines, procedures and support for quality improvement

As indicated in Chapter 1 (*cf.* 1.8.6.2) and in the outline of the study (*cf.* 1.9*)* the sections above have identified CUT's current institutional policies, guidelines, procedures and support for QIP implementation practices. For each document, the purpose, responsibility and how it is related to QIP implementation were identified. In the following table (*cf.* 4.5), the researcher summarizes the strengths and weaknesses versus the opportunities and threats for the institutional policies, guidelines, procedures and support at the CUT.

Table 4.5: SWOT analysis of CUT's institutional policies, guidelines, procedures and support

Strengths	Weaknesses
• The institution aims is to improve the efficiency of the quality of its core teaching and learning businesses, research and academic support activities, and community engagement. • The institution accepts that all staff should be personally responsible for their professional quality and standards in all their activities through CQI.	• No institutionally approved policy on QA which set expectations, guide the actions and provide effective leadership of all UoT stakeholders with regards to improvement plan implementation practices. • Reliance on existing policies, guidelines and procedures for academic review which are not informed by an existing institutionally approved QA policy. • It is not clear as to how the QIP and progress reports should be developed, implemented and monitored. • An action plan that is provided in the Manual is not supported by a proper QI template, as prescribed by the CHE Institutional Audit Manual (*cf.* 3.2.6).
Opportunities	**Threats**
• Traditional quality assurance modes such as external examiner systems, as well as the regular internal programme, departmental reviews, evaluations and assessment are used by the institution (*cf.* 4.3.2).	• Lack of direction for improving the implementation of QIPs. • The lack of a serious attitude and accountability towards improvement in quality to reach international standards.

• The evaluation and improvements of the teaching and the learning processes are the responsibility of the individual lecturers controlled by appropriate governance systems such as Faculty Boards and Senate (*cf.* 4.3). • Academic and administrative departments have great freedom to adjust procedures and structures according to their own functional needs.	

It is clear from the document analysis (see Table 4.2, 4.3 & 4.4) and SWOT analysis (see Table 4.5) that CUT has as its objective to enhance the effectiveness of all services and products by conscientising all staff members (and other role-players) that in order to "stay in business", they must continuously upgrade standards in all aspects of their work. Also, their reliance on traditional methods of QA should evolve to innovative ones in line with international standards.

However, there are some weaknesses and threats that emanate from the lack of the institution-wide quality assurance policy (*cf.* 4.4.1). This is accompanied by the lack of clear guidelines and procedures for the development and implementation of QIPs (*cf.* 4.4.2 *and* 4.4.3*)*. The existing policies, guidelines and procedures lack clear direction as to how the process of developing, implementing, and monitoring the QIPs should executed and who should be responsible. There is a lack of direction, but responsibility and accountability points to those looking for improving the implementation of QIPs. Hence, the importance of formalising quality assurance policies, guidelines, procedures and support for quality improvement such that the establishment and sharing of regularly understood or expected policy and principles is a critical factor in quality improvement.

4.5 CONCLUSION

A brief historical overview of the case study university was provided in this chapter (*cf.* 4.2), and the current operational quality systems in place (*cf.* 4.3). The chapter then pursued the third objective of the research study (*cf.* 1.5); namely, to identify

policies (*cf.* 4.4.1), guidelines (*cf.* 4.4.2), procedures (*cf.* 4.4.3), and support (*cf.* 4.4.4) for quality improvement plan implementation practices, as well as a SWOT analysis (*cf.* 4.4.5) of the identified policies, guidelines, procedures and support of the case study university.

The critical challenge at the institution is that even though there are guidelines and procedures for QM and QI, there is an absence of a coherent institutional QA policy which sets expectations, guides actions and provides effective leadership of all the institution's stakeholders with regards to the QIP implementation practices. The existing policies, guidelines, procedures, and support for QI at the university, indicate the prevalence of the implementation of QA, QE mechanisms and processes, although there is no formally approved institutional QA policy. Much has been achieved in terms of planning for internal and external assessment. The IPQE section continues to use programme reviews which have successfully been implemented. The only challenge that emerges is the implementation of QIPs. The institutional guidelines and procedures are very clear as to the responsibilities for the academic review processes, but vague as to the implementation and monitoring of the QIPs.

In Chapter 5 the data gathered by way of questionnaires and semi-structured interviews with selected participants is analysed and interpreted.

FINDINGS AND DISCUSSION OF CUT'S ACADEMIC LINE MANAGERS AND ACADEMIC STAFF EXPERIENCES AND PERCEPTIONS OF QUALITY IMPROVEMENT IMPLEMENTATION PRACTICES

5.1 INTRODUCTION

The purpose of this chapter is to analyse and interpret research findings. The experiences and perceptions of CUT's academic line managers and the academic staff on QIP implementation practices at the CUT are discussed, with special reference to the second, third and fourth subsidiary research questions as identified in Chapter 1 (*cf.* 1.3).

Two instruments were used to collect data for this study. Firstly, a mainly qualitative questionnaire, complemented by a quantitative demographical section (see Appendix D), was completed by the CUT's HoDs and senior lecturers and lecturers during February 2018. Secondly, interviews (see Appendix E) with four (4) selected HoDs were conducted during September 2018. The analysis of the responses of participants from the above-mentioned two instruments are presented. The chapter starts with the quantitative data (i.e. demographical detail) to present the profile of the participants in the questionnaire (*cf.* 5.2.1). Then it proceeds with the qualitative data gleaned from the questionnaires (*cf.* 5.2.2) and four (4) interviews with the selected HoDs (*cf.* 5.3) using inductive data analysis. The last objective, namely the implications for improvement to the implementation of QIPs at the CUT, is discussed in Chapter 6 (*cf.* 6.3).

5.2 ANALYSIS AND INTERPRETATION OF QUALITATIVE-, COMPLEMENTED BY QUANTITATIVE DATA OBTAINED FROM THE QUESTIONNAIRE

The results of the mainly qualitative questionnaire (see twenty-seven open-ended items in sections B - D of Appendix D), enhanced with quantitative data (see

demographical detail in section A of Appendix D), will now be discussed according to the numerical order of sections of the questionnaire.

5.2.1   Profile of CUT academic line managers and staff participants

The quantitative section (see Section A of Appendix D) of this combined questionnaire was distributed amongst the 36 CUT's selected academic managers and staff who participated in this study. Only 28 questionnaires (see 1.8.5.2, 1.8.6.3 and Appendix D for more clarity on the questionnaire) were returned, thus eight participants "withdrew" from the study (response rate = 78%).

In brief, the profile of this study is demonstrated in Table 5.1 below:

Table 5.1: *Profile of CUT heads of department, senior lecturers and lecturers of this study (N=28)*

Category	Description		Frequency	%
Faculty	Engineering and Information Technology		7	25%
	Health and Environmental Sciences		9	32%
	Humanities		4	14%
	Management Sciences		8	29%
		Total	**28**	**100%**
Gender	Male		13	46%
	Female		15	54%
		Total	**28**	**100%**
Age	Under 20 years		0	0%
	20 to 29 years		3	11%
	30 to 39 years		3	11%
	40 to 49 years		9	32%
	50 to 59 years		11	39%
	60+ years		2	7%
		Total	**28**	**100%**
Highest academic qualification	Bachelor's degree		0	0%
	Honours degree		0	0%
	Master's degree		9	32%
	Doctoral degree		18	64%
	Other		1	4%
		Total	**28**	**100%**
Position held at the University	Lecturer		13	46%
	Senior Lecturer		2*	7%
	Associate Professor		10*	36%
	Professor		2*	7%
	Programme Coordinator		1*	4%
	Other		0	0%
		Total	**28**	**100%**
Employment Status	Permanent		28	100%
	Temporary		0	0%
	Full-time		28	100%
	Part-time		0	0%
		Total	**28**	**100%**
Length of teaching/ working at CUT	0 to 4 years		6	21%
	5 to 9 years		8	29%
	10 to 14 years		6	21%
	15 to 19 years		3	11%
	20 to 24 years		2	7%
	25+ years		3	11%
		Total	**28**	**100%**

It is evident from Table 5.1 that the sample size (for the faculty, gender, age, highest qualifications, position, employment status and length of teaching/working years' distribution results) is 28. According to Table 5.1 the profile of this study consisted of permanently employed academic line managers and academic staff mainly from the Faculty of Health and Environmental Sciences (32%), followed by the Faculty of Management Sciences (29%), the Faculty of Engineering and Information Technology (25%), while only 14% of the staff members are from the Faculty of the Humanities. The distribution of gender reflected that 54% of the staff are females, while only 46% are males. The age-range of these participants were clustered between 20 to 60+ years. The representation of staff according to the five age-group categories was as follows: 50 to 59 years (39%), 40 to 49 years (32%), 20 to 29 years (11%), 30 to 39 years (11%), and in the 60+ (7%). Furthermore, most of the participants obtained either master's (32%) or doctoral (64%) degrees, and have been working for CUT between 5 to 9 years (29%), while those between 10 to 14 years comprised of 21% of the staff, 0 to 4 years also comprised of 21 %, 15 to 19 years made up 11%, 25+ years 11%, and only 7% of the participants had between 20 to 24 years working experience at CUT.

The original sample of this study comprised of twelve HoDs, twelve senior lecturers, and twelve lecturers of CUT. However, due to the withdrawal of some of the participants, most of the participants were lecturers, and they account for 46% of the total participants. This is followed by 36% of associate professors, 7% of full professors, 7% of senior lecturers, and only 4% programme coordinators. It is essential, however, to flag that one senior lecturer, four associate professors, two professors and one programme coordinator, are also HoDs. This means that eight participants were HoDs, and they accounted for 29% of the total participants.

5.2.2 CUT's academic line managers and academic staff experiences and perceptions on the implementation of quality improvement plans

The results of Section B of the questionnaire (see Appendix D, Questions 8 to 15), will now be discussed according to the relevant numerical categories. The stipulated definition of the quality improvement plan (see Section B, Appendix D) served as the basis for this analysis and interpretation.

5.2.2.1 The purpose of quality improvement plans (Question 8)

The majority (46%) of the CUT HODs, senior lecturers and lecturers indicated the purpose of the QIPs as improving the higher education quality provided to students regarding teaching, learning, research and community engagement (i.e., internal motivation). The rest of the CUT participants' responses agreed with the stated definition (i.e. external motivation) by identifying (11%), proposing implementing actions (25%), reviewing panel recommendations (11%) for improvement; only 7% of these participants stated that adherence to specific criteria of the institution/ regulatory body ensures that students obtain the best higher education through QIPs.

Comments and implications: The majority of the participants confirm the purpose of QIP as defined in this study (*cf.* 1.7.3). These QIPs are a self-assessment tools (Donlagić & Fazlić 2015) to enhance core activities related to teaching and learning, ensuring that there is a high standard of teaching and research activities (*cf.* 1.7.3). In addition, QIPs (see 1.7.3) are instruments to address the weaknesses identified during an internal or external programme review to improve the quality of the academic programmes or courses (Yarmohammadian *et al.* 2011). Also, QIPs develop a QI culture and monitors improvement in a structured manner leaving an audit trail for QA at all levels. The QIP also helps HEIs to document their services' strengths and to identify improvement areas. HEIs should develop QIPs which reflect the unique circumstances of their services and ensure that the climate for change is present (Yarmohammadian *et al.* 2011:2921).

5.2.2.2 The value of quality improvement plans (Question 9)

The results of this research question, linked with the previous question (see 5.2.2.1), showed that the majority (64%) of the participants regard the value of QIPs as being tools to improve and enhance the quality of the learning programmes to meet accreditation standards. In addition, the other participants (36%) regard the value of QIPs as elements that add value to the integrity of HE.

Comments and implications: QIPs improve the quality of the learning process by engendering a culture of CQI that ensures that academic programmes adhere to

statutory and CHE accreditation standards, thereby enhancing the reputation of the university. The only time a QIP would not add value is when the plans are not implemented, and monitoring and evaluation are not conducted. Therefore, QIPs need not be a compliance document but need to be implemented to their fullest extent. To add value to the integrity of HE, the *Audit Manual* prescribes a format of a QIP (*cf.* 3.2.6). This stipulates that QIP is a continuous process which needs to be planned to effectively implement actions within a specific time-frame, having short and long-term plans. The QIPs should also document what needs to be addressed, such as how the programme plans to address the shortcomings, and the timelines and resources required so that the progress can be followed up. However, QIPs should not only document what needs to be done, but should also implement the recommendations of the academic review report, and this implementation must be measured and monitored.

This confirms what has already been highlighted by literature (*cf.* 2.2.4.1), that the provision of a quality framework against which the implementation of QIPs is performed means that there is an urgency to address issues in a structured order that ensures that they are included in the review report are subsequently addressed fully. This also indicates the need for innovation or change in practice. It also implies the need for resources and institutional support to lend weight to the implementation of QIPs (Little 2015). This is also confirmed by Marshall (2016:221) who states that QI should be regarded as a "collection of actions taken by or on behalf of key education stakeholders", and that HEIs need a QI framework that assists the organization in "collective understanding and reflection" so that improvements can be made in a way that respects the core values and functions HE (*cf.*1.7.2).

5.2.2.3 The influence of educational theory on quality improvement plans (Question 10)

The question of whether *QIPs* are based on sound educational theory, elicited diverse perceptions. Some of the CUT participants (39%) believed that QIPs are based on sound educational theory, while other (36%) disagreed – others (14%) were not sure. Furthermore, some of the participants (11%) are of the view that it depends on what the QIP entails, who develops it, and who implements it.

Comments and implications: The opinions above reflected that the majority of the participants believed that QIPs should be based on sound educational theory. This confirms what has been suggested by the CHE (*cf.* 3.2.4) that the actual QI substantially depends on linking QM to the planning and allocation of resources at all levels of HEI. At departmental and programme levels, the findings of self-assessments need to be "sufficiently diagnostic" to result in concrete and detailed plans to improve "teaching and learning practices" (CHE 2004a:9). This also confirmed the implication highlighted by the CHE that QIP implementation will partially depend on reflective practitioners who know and understand the learning process; and that academic personnel must develop an "empirical and theoretical basis to inform teaching and learning" improvement (CHE 2004a:9).

5.2.2.4 Resource provision of quality improvement plans (Question 11)

The question whether QIPs are supported by resource-provision resulted in diverse perceptions. On this issue, 53.5% of the participants stated the QIPs are not currently supported by resource provision. The case study university does not always have enough resources to support the implementation of QIPs. However, 28.5% of the participants stated that, to some extent, QIPs are supported by resource provision depending on the budget for financial, human and infrastructure priorities. A further 18% of the participants stated that it depends on which resources are required. However, not every QIP will guarantee the acquiring of resources.

Comments and implications: The experiences and perceptions expressed by CUT's participants reflected that the majority of the participants believed that there are not sufficient resources to support the implementation of QIPs. This confirmed what has been highlighted by the literature (*cf.* 1.1), that the HE sector progressively works in an exceptionally changing, turbulent and "competitive environment, where assets and resources are scarce, and they are required to acquiesce to expanding competitive requests and demands" (O'Mahony & Garavan 2012:185). This had implications for the integration of QM and QI (*cf.* 1.8.4 and 2.2.3.3), as planning and resource allocation are crucial elements in enhancing the quality of an institution's core business of teaching and learning, research, and community engagement (Brits 2010; Brits 2011; Kleijnen 2012). The way forward is that "financial planning"

(*cf.* 3.2.5) "should ensure adequate resource-allocation for the development, implementation, review, and improvement of quality and QM mechanisms" (CHE 2004c:3).

5.2.2.5 Staff development and support for quality improvement plans (Question 12)

The majority (68%) of the participants stated that QIP is, indeed, supported by staff development. Staff development is viewed to be part and parcel of QI and training of academic line managers and the staff. This aspect cannot be ignored if institutions are to achieve quality delivery of teaching and learning, research, and community engagement. However, some (32%) of the participants stated that QIPs are not supported by staff development, because they do not receive much help when encountering problems in the workplace. Therefore, it appeared that there existed diverse opinions with regards to the alignment between QIPs and staff development. Although the review may identify the need for a specific area of personal growth, it however remains the responsibility of the individual to request or participate in that development. In addition, sometimes support to develop the QIP is provided, but there is limited support to implement it. Thus, QIP is primarily left to the HoD as the accountable officer to make sure that it is implemented.

Comments and implications: The opinions expressed by the participants above reflected that the majority believed that QIPs are supported by staff development (*cf.* 3.2.4) and this is confirmed by the literature as suggested by the CHE (2004a). Furthermore, the institution's *Quality Enhancement Strategy* (CUT 2014) also confirmed this as it identified the CASD to offer staff development programmes (*cf.*4.3.5). The institutional documents also highlighted the institution's commitment to upgrading its teaching and learning practice to that of national and international standards by ensuring high quality, niche and differentiated teaching and learning programmes including the development of staff. The primary objective is also to provide effectiveness, efficiency, and quality of operations; thus, by promoting an institutional culture of ongoing QI and QIP implementation, all-around performances from all stakeholders will accelerate.

However, it is clear from the points above that there is a mismatch between staff development initiatives and services offered by the CASD, and the support required

by the HoDs, senior lecturers and lecturers in the implementation of QIPs. Claims are being made that support is provided to develop QIPs in response to the issues highlighted by the review, but no support to implement the QIPs was provided. This implies that there is a need for innovation and change in practice (*cf.*1.8.3) and more institutional support to lend weight to the implementation of QIPs (Little 2015). Clear reporting lines and accountability should also be set in the institution's QMS for programme review (*cf.* 3.2.4) and this must ensure that results of the review are reported in the "management system" and "monitored improvement plans" are followed (CHE 2004a:71). University HoDs and management committees could likewise guarantee CQI in higher education by promoting professional development programmes in the retraining of educators and other staff members through expert improvement projects of high calibre. Along these lines, excellence boosted by the implementation of QIPs will become attainable in university education (Akinyemi & Abiddin 2013).

5.2.2.6 The use of feedback and results to effect improvements to the programme design and delivery (Question 13 and 14)

The results of question 13 show diverse experiences and perceptions with regards to the use of feedback to effect improvements to the programme design. The majority (61%) of the participants agreed, and some (21%) participants found it difficult to generalise, while some (18%) participants disagreed that feedback and results from the review are used to improve the design of the programme for the next planning cycle.

The results of research question 14, linked to the previous question (see question 13), showed diverse experiences and perceptions with regards to the use of feedback to effect improvements to the programme delivery. For example, some (46%) of the participants approved, some (39%) struggled to generalise the issue, while others (15%) disagreed that feedback and results from the review are used to improve the delivery of the programme for the next planning cycle.

Comments and implications: The opinions expressed by the participants above reflected that the majority believed that feedback and results from the review are used

to improve the design of the programme for the next planning cycle. This is confirmed by the literature (*cf.* 1.7.1) which states that the IQMS refers to the entity comprising of the policy on quality, strategic goals, leaders' responsibilities, appropriate structural, staff and financial conditions for the processes, and process management – all facilitate controlling the results and feedback between results and goals (CHE 2004a:15; CHE 2004b:25; CHE 2007:76). The CHE (2017b) also confirmed this by stating that the QA system must ensure coherence and alignment among the elements of the system and contain feedback loops that support and promote improvement. One of the purposes of the internal review process (*cf.* 4.3.4) related to the institution, department or programmes; this was to obtain feedback from staff members, students and other stakeholders in teaching, learning and assessment quality (CUT 2016b). Also, CUT required all those involved in course and programme design to deliver quality service. One of the services highlighted for CASD (*cf.* 4.3.5) is to oversee the process of curriculum design and development for all programmes and the core curriculum. This ensured the alignment with the national policy framework, expectations of professional bodies and other key stakeholders (CUT 2014).

The opinions expressed by the participants above also reflected that the majority of the participants believed that feedback and results from the review are used to improve the delivery of the programme for the next planning cycle. This confirms what has been highlighted in CUT's documents that required HoDs, senior lecturers and lecturers to provide quality service in the course and programme delivery and assessment (CUT 2014). In line with this, CUT also requires all those involved in course and programme delivery and assessment to deliver quality service as HoDs, senior lecturers and lecturers (CUT 2014). In terms of the CUT *Procedure on the appointment, competencies, roles and responsibilities, and allowances for academic Heads of Department, Department Managers, and Assistant Dean: Teaching and Learning* (CUT 2017), HoDs should be able to effectively motivate and support programme development and delivery (*cf.* 4.4.4).

5.2.2.7 Recommended improvements to the implementation of CUT's quality improvement plans (Question 15)

Here, the HoDs, senior lecturers and lecturers were asked to recommend improvements to the implementation of CUT's QIPs. Accordingly, 46% of the participants recommended that QIPs needed to be supported by resource provision, while 39% recommended that the implementation of QIPs needed to be monitored and evaluated, and more accountability and control should be effected to ensure that it is being implemented. A further 15% of the participants felt that it was difficult to generalise, as it depends on the specific programme and personnel involved.

Comments and implications: It is clear from the results highlighted above that QIPs needed to be supported by resource provision and that their implementation needs to be monitored and evaluated, especially that the programme and course reviews are critical areas of the IQMS. The participants' recommendations confirm what has been highlighted by the CHE (CHE 2004a; CHE 2004b; CHE 2007) that the programme review QMS of the institution should be used to ensure that the results of the review are reported, and that QIPs are implemented and monitored (*cf.* 3.2.4), and that QIPs should include how progress will be monitored and evaluated (*cf.* 3.2.5 & 3.2.6). The monitoring by IPQE comes out very strongly in the views expressed by the participants above. Although this is confirmed by the guidelines and procedures highlighted in the *Revised Manual for Reviews at the Central University of Technology* (CUT 2016b), it seems that this is not happening in practice and that the institution will need to ensure that this is implemented and that IPQE is well resourced, and its capacity is built to ensure the monitoring and evaluation function of QIPs is undertaken. Therefore, the QIPs should not only document what needs to be done, but also that the recommendations of the academic review report should be implemented, and its implementation must be measured and monitored (*cf.* 4.3.1; 4.4.2; and 4.4.3).

5.2.3 CUT's academic line managers and academic staff perceptions and experiences of the policies for quality improvement

The results of Section C of the questionnaire (see Appendix D, Questions 16 to 18), will now be discussed according to the relevant categories. The definition of a policy (see Section C, Appendix D) served as the basis for this analysis and interpretation.

5.2.3.1 Institutional policies which assist with the implementation of QIPs (Question 16, 17 and 18)

In question 16, there existed diverse opinions where the majority (61%) of the participants believed that there are no policies, while some (39%) said that there are some policies in place that assist with the implementation of QIPs. Whereas in question 17 (diverse opinions existed but the gap is closer), half the number of participants said that there were no policies in place, while the other half admitted to the existence of faculty/departmental policies which assist with the implementation of QIPs.

In question 18, 50% of the participants believed that there is no policy, while another 50% of the participants believe that the current policies require programme coordinators or HoDs to ensure that insights from reviews are recorded, reported, and reflected on at both programme and course levels. This should also ensure that strengths are developed, and weaknesses addressed.

Comments and implications: The diverse experiences and perceptions expressed above confirmed the problem statement as outlined in Chapter 1 of this study (*cf.* 1.2 & 1.3). The CUT's HoDs, senior lecturers and lecturers rely on existing guidelines and procedures for academic review, which are not clear in terms of the implementation and monitoring of QIPs as these are intended to be informed by an existing institutional QA policy (CUT 2016). The stated problem refers to internal quality assurance (*cf.* 2.2.2 & 2.2.4) where institutions monitor themselves and improve their own educational provision (Ezer & Horin 2013). The views expressed by the participants also confirm the significance of this research: to improve the current policies, in general, and the implementation of QIPs in particular (*cf.* 1.5). QM

must also be characterised as a holistic management theory that focuses on the policies and CQI of the significant number of functions in the institution (Brits 2010; Brits 2011). The views expressed by the participants also confirm that quality is focused on related policies, accountability (*cf.* 3.2) and continuous improvement (*cf.* 1.1, 1.7.2 & 2.2.4) that the HEI must adhere to. QA as described in this study (*cf.* 2.2.2) refers to a set of internal and external policies and practices aimed at achieving, maintaining and improving quality (Williams 2016). An institution will be able to increase awareness of quality issues mainly by working with staff and helping them develop their policies and systems. This study, therefore, would like to encourage among staff that institutional policies must be adaptable and continuously examined.

In summary, there are no specific policies that exist within the institution that assist and provide guidance with the implementation of QIPs. This means that the university, in general, and the faculties and departments in particular, need to have guiding policies that will set the expectations and provide clear policy statements in the implementation of QIPs. The institution needs to develop an institution-wide policy which faculties and departmental policies will be aligned to. The existing Teaching and Learning Policies and Assessment Policies do not seem provide strategic guidance for the implementation of QIPs. Programme and course reviews are essential components of the IQMS and policies must be implemented (*cf*. 3.2.4) so that insights and lessons from such reviews can be applied and QIPs implemented (CHE 2004a).

5.2.4 CUT's academic line managers and academic staff perceptions and experiences of the quality improvement implementation practices

The results of Section D of the questionnaire (see Appendix D, Questions 19 to 28 and 33 to 34), will now be discussed according to the relevant categories. In this section of the questionnaire, the items sought responses from the HoDs, senior lecturers and lecturers in the following areas: institutional responsibility for QM (*cf.* 5.2.4.1), guidelines for QI (*cf.* 5.2.4.2), procedures for QI (*cf.* 5.2.4.3) and support for quality improvement (*cf.* 5.2.4.4).

5.2.4.1 Institutional responsibility for quality management (Question 19 to 22)

In question 19, most (61%) of the participants reached an agreement, while some (39%) did not agree, that the QMS of the institution/faculty/department for program reviews has clear reporting lines that guarantee that the results of the review are reported in the management system.

Comments and implications: The opinions highlighted above confirmed what has been explained by the literature (*cf.* 3.2.4) where the HEQC suggested that the QMS for programme reviews of the institution should also include clear reporting lines and the accountability aspect to be included (CHE 2004a). University HoDs and management committees could likewise guarantee CQI in higher education by instituting professional development programmes and retraining of educators and other staff members through high-quality specific improvement projects. Along these lines, excellence will be a reality in university education (*cf.* 2.2.4.2) with the implementation of QIPs (Akinyemi & Abiddin 2013). The participants also confirmed that at the faculty level, the Teaching and Learning Committees and the Faculty Boards serve as structures where review results are reported. Further, QA Committees at departmental level report to the HoD who in turn reports to the Faculty Board. However, even though the reporting is done, some of the participants are of the view that monitoring is not necessarily done.

In question 20, the opinions of the participants reflected diverse experiences and perceptions, where only 12% believed that the QMS for programme review does not ensure accountability, while 28.5% believe that recommendations for improvement are documented, and followed up to hold the programme accountable. A further 28.5% believed that the HoDs, programme coordinators and all academic staff members attached to the programme are responsible and accountable for the quality of the programme.

Comments and implications: The opinions expressed above confirmed what has been highlighted by the literature that the demand for accountability has risen, which promoted the implementation of the control and evaluation systems in HE (Massaro 2010; Minelli *et al.* 2015), as part of assuring and enhancing quality (*cf.* 1.1 & 1.2).

The opinions also confirmed that the clear reporting lines should be included in the QMS for programme reviews in the institutions (*cf*. 3.2.4) to ensure that review results are reported to the management system and followed up with continuously monitored QIPs (CHE 2004a:71).

In question 21, 50% of the participants believed that the Assistant Dean for Teaching and Learning has been appointed to support the Faculty Teaching/QA Committee to be responsible for developing and reviewing the policy on QA and QE. Further, 39% of the participants stated that they were not sure who the institution/faculty has appointed to support the QA committee to develop and review the policy on QA and QE. Only 11% of the participants stated that the Director of the IPQE section had been appointed to support the Faculty Teaching/QA Committee to be responsible for developing and reviewing the policy on QA and QE.

Comments and implications: The opinions of the participants expressed above confirm that all faculties have a Teaching and Learning/QA Committee that has been established to address quality matters. The participants also confirm that the Teaching and Learning Committee (as a Faculty Board committee) should not only focus on QA but also on enhancement including development/review of policy (on QA and QI). It thus becomes essential to ensure that academics serving on structures such as the Teaching and Learning Committees are developed to become active participants in these structures. This confirms the HEQC 's suggestion that institutions must have a delegated senior administrator or manager, generally backed by a QA Committee or equivalent, to develop, promote and assess the QA and QM policy and to manage its execution. The implementation of the QA and QM policy and strategy should be incorporated into the sets of expectations of all line managers. Also, the policy should be disseminated across the university and should be owned by those responsible for its implementation (CHE 2004c). The participants' opinions also confirm what has been stated in the *Revised Manual for Reviews at the Central University of Technology* (CUT 2016b) that the relevant HoD and department will compile a QIP in response to the external review outcome. This emphasises the Assistant Dean of Teaching and Learning and the respective HoDs as responsible officers for QA and QE policy development and review (*cf.* 4.3.2).

In question 22, 57% of the participants stated the following responsibilities for MANCOM, CILT and IPQE:

The MANCOM was identified as a structure that provides strategic leadership and ensures resources (human and physical) are available to address challenges that are identified during reviews. This structure is viewed as the "engine" for the institution to ensure QM is not just reports, but practice. It has to be involved in strategic matters and not only the management of quality matters. However, its inputs are essential to approve additional human or financial resources needed to enhance the quality and implementation of the QIP.

The CILT was identified as a structure that plays a supportive role regarding QM of teaching and learning through various academic and student development activities. It deals with capacity development/improvement of quality teaching and learning components. It helps to develop curricula and personnel as well as to improve teaching and learning scholarship.

The IPQE was identified as a structure that manages compliance regarding quality standards, the general management of information for planning, programme accreditation and ensuring the currency of the Programme and Qualification Mix (PQM), management of internal reviews, and monitoring the implementation of QIPs. It ensures that all policies and strategies are in alignment with the vision of the institution, and for ensuring that policies, guidelines and procedures are clear and comprehensive and available to everyone. One of the participants indicated that IPQE is mandated to do QM at the university and needs to have the capacity to fulfil this mandate.

Only 43% of the participants stated that they were not sure of the responsibilities of the three structures.

Comments and implications: The opinions of the participants highlighted above indicate that the majority understand what they perceive to be the responsibilities of the three structures for QM. These opinions confirm what has been cited by institutional documents that MANCOM is responsible for the financial performance of

the university and must continue to monitor the effectiveness of internal management and control, based on internal audits and reports (CUT 2014). In addition, the participants' opinions confirm that CILT in collaboration with the faculties are responsible for the promotion of academic excellence and provides support for all academic staff. It is university policy that all academic staff will support CILT initiatives and take advantage of capacity building from their side to ensure that there are best practices in teaching and learning across the university (CUT 2014). Furthermore, the participants' opinions confirm IPQE as directly responsible for the academic management of all programmes across the university (*cf.* 4.3.2) as well as to the management of the process of new programme development and external review processes (CUT 2014).

5.2.4.2 Guidelines for quality improvement (Question 23 to 24)

The results of Section D2 of the questionnaire (see Appendix D, Questions 23 to 24), will now be discussed according to the relevant categories.

In question 23, 71% of the participants stated that there are no guidelines, while 29% of the participants felt that internal programme review guidelines ensure the quality and rigour of the QIP implementation practices.

In question 24, 61% of the participants stated that there are no clear guidelines at the faculty/departmental level, and therefore not sure what informs them, while 29% of the participants stated that the *HEQC Criteria for Programme Accreditation* inform the guidelines.

Comments and implications: The opinions expressed above indicate that the majority believe that the institution does not have guidelines to ensure the quality and rigour for QIP implementation practices. Only a minority of the participants felt that existing internal programme review guidelines ensure the quality and rigour of the QIP implementation practices. The participants' opinions confirm what has been highlighted in the background to the research problem, that the institution relies on existing guidelines (*cf.* 1.1 &1.2) for academic reviews (not for QIPs), which are not informed by an institutionally approved QA policy (CUT 2016a; CUT 2016b; CUT

2016c). This has also been confirmed by the document analysis (*cf*.4.4.2), that the *Revised Manual for Reviews at the Central University of Technology* (CUT 2016b), is silent on providing a more precise level of operational detail, where transparency of processes and procedures is required on how QIPs should be developed and implemented. There are no clear rules or principles which help to create and implement effective practices to achieve quality results in QIPs.

5.2.4.3 Procedures for quality improvement (Question 25 to 26)

The results of Section D3 of the questionnaire (see Appendix D, Questions 25 to 26), will now be discussed according to the relevant categories.

In question 25, 69% of the participants indicated that there are no procedures, while 21% of the participants stated that there are internal programme review procedures to ensure the quality and thoroughness of the QIP implementation practices.

In question 26, 54% of the participants stated that there are no clear procedures at faculty/departmental level, while 46% of the participants stated that the *HEQC Criteria for Programme Accreditation,* national guidelines on a QE of programmes at HEIs, as well as the institutional teaching and learning policies, inform the procedures.

Comments and implications: The opinions expressed above indicate that the majority of the participants believe that the institution does not have procedures to ensure the quality and rigour of the QIP implementation practices. The participants' opinions confirm what has been highlighted in the background to the research problem, that the institution relies on existing procedures for academic reviews (not for QIPs), which are not informed by an institutionally approved QA policy (CUT 2016b). This has also been confirmed by the document analysis (*cf*. 4.4.3), that the procedures outlined in the *Revised Manual for Reviews at the Central University of Technology* (CUT 2016b) do not provide a detailed outline of the operational steps required to develop and implement QIPs.

5.2.4.4 Support for quality improvement (Question 27 to 28 and 33 to 34)

The results of Section D4 (see Questions 27 to 28) and Section D7 (see Questions 33 to 34 in Appendix D) will now be discussed according to the relevant categories.

In question 27, 61% of the participants indicated that support from the institution is somewhat limited as it is highly dependent on resources, while 29% of the participants stated that there is no support provided to ensure the quality and thoroughness of the QIP implementation practices.

In question 28, 68% of the participants stated that there is no formal training offered, while 32% of the participants stated that there is some form of training is offered but not on evaluation and reviews in general, and not on QIP implementation practices in particular.

In question 33, 54% of the participants stated that the institution/faculty provides support towards the further development of the educational expertise of its academic staff, while 46% of the participants felt that the institution/faculty does not provide support.

In question 34, 82% of the participants are of the view that there is no educational expertise made accessible to support them in interpreting the findings of academic reviews and formulating plans for QI. Only 11% of the participants identified some form of expertise which is provided by IPQE and CILT such as assistance, guidelines, support and expertise to departments in interpreting the findings and formulating plans for QI. A further 3.5% mentioned that educational expertise is made available through QA Committees at institutional, faculty, and department levels. An additional 3.5% mentioned that educational expertise is made available through QA and accreditation workshops.

Comments and implications: The opinions highlighted by the participants above reflect that the majority of participants believe that support provided by the institution for QI is rather limited, as it is determined by the availability of resources. The participants felt that IPQE assists with the programme review arrangements and

logistics. However, the programme does not receive any administrative support to complete the programme portfolio and prepare for the programme review as well as the implementation of QIPs. Some of the participants indicated that once they develop a QIP, they are not even expected to provide a progress report. The reasons behind this might be that there are no clear guidelines and responsibilities beyond the development and submission of the QIP. There are no monitoring procedures for the implementation of the QIP. The QIP action plan template gives the timelines of what to be done and when; but there is no monitoring system and support in place to implement it.

The participants further stated that they do not get enough support and training in evaluation and reviews, and QIP implementation practices. They only draw from the experience they learned from chairing other reviews. There is no template or training on how the evaluation and reviews or QIPs should be done or implemented. The CILT section offers staff training sessions in a "workshop" format, however, that training is not specifically about the implementation of QIPs. The training programmes need hands-on guidance and other relevant support during the process to complete the programme portfolio and to prepare for the review and after the review, in addition to compiling the QIP and executing recommendations. The participants also felt that CILT might accommodate specific sessions should the programme express particular development needs, and that the Faculty should support the development actions identified and allow staff the time to attend to the particular development initiatives that will train and prepare them for the audit reviews. The participants felt that they had not experienced a situation where the university/faculty identified a specific matter from the programme review report, or the QIP, and then offered solutions or assistance.

The CHE (2004c) alluded in the literature review that the support for QI refers to quality support – the arrangements, frameworks, techniques and resources that are utilised by the institution to support and manage existing levels of quality. The overall institutional culture of CQI and the implementation of QIPs is one of the primary objectives of the CUT in ensuring operative effectiveness, efficiency and quality. The culture of CQI also indicates that QIPs should be based on sound educational theory and supported by the provision of resources and staff development, and that they

should explicitly include review and assessment results into the next planning cycle (*cf.* 3.2.4). However, the participants' opinions confirmed what was highlighted by the document analysis, that the *Revised Manual for Reviews at the Central University of Technology* (CUT 2016b) is silent on the support that must be made available for the implementation of QIPs as far as the human resources, financial resources, and infrastructure is concerned (*cf.* 4.4.4). Procedures must be in place to ensure that insight and knowledge from such reviews are followed up, and improvement plans are put into practice. This includes support and resources to implement QIPs.

5.2.5 Examples of operational effectiveness for quality improvement

The results of Section D5 and D6 of the questionnaire (Questions 29 to 32), will now be discussed according to the relevant categories as per the questions that were posed to the participants.

5.2.5.1 Review methods and dissemination of review findings (Question 29 to 31)

In question 29, 82% of the participants stated that all stakeholders mentioned are part of the review process and that their feedback is critical for purposes of informing the review methods and ensuring QI. Only 18% of the participants stated that they were not sure how the perspectives from all stakeholders are sought.

In question 30, 86% stated that all stakeholders mentioned are part of the review process and their feedback is critical for purposes of informing the review methods and ensuring QI, while only 14% of the participants stated that the input of these role-players is requested to inform the programme portfolio content, but not precisely the review methods which ensure QI.

In question 31, 61% stated that the findings of the review or evaluation are made available through programme Advisory Board meetings, and shared at departmental meetings. Through student bodies, the report is shared with students. Also, 39% of the participants stated that they are not sure how the findings of the review or evaluation are made available to stakeholders/academics/students

Comments and implications: The opinions stated by the participants above reflect that the majority felt that all stakeholders are part of the review process and their feedback is critical for purposes of informing the review methods and ensuring QI. These experiences and perceptions confirm what has been highlighted in the institutional documents (*cf.* 4.3.3) that the institution regards the self-assessment process as an integral component of the QA system which focuses on reflection and facilitates continuous improvement (CUT 2016b). Internal reviews facilitate QA in management, resources, research, teaching, learning, assessment and QA matters for the University's Departments (CUT 2016b). This also confirms the institution's commitment to a systematic, planned approach to QA that ensures that programme review findings are used to effect improvement (CUT 2016b).

5.2.5.2 Use of feedback for curriculum development (Question 32)

In Question 32, 75% of the participants stated that the feedback from diverse stakeholders during the program and course reviews is used to improve the curriculum, either of the new programme being developed or of the existing programme being reviewed. The remaining 25% of the participants said they were not sure how feedback from diverse stakeholders is used.

Comments and implications: The majority of the participants felt that the feedback is taken into consideration, and improvements to the curriculum are made where possible. The participants' opinions confirm that at the CUT, a self-assessment process is an integral component of any quality system (*cf.* 4.3.3), through which the institution conducts its evaluation to determine whether products, services and management processes meet quality criteria (CUT 2016b). This also confirms what has been highlighted by the CHE, that the QA system must ensure coherence and alignment among the elements of the system and contain feedback loops that support and promote improvement (CHE 2017b). One of the purposes of reviews related to the institution, department or programmes, is to ensure, taking into account the development of knowledge within the discipline and its application in practice, that intended learning results and curricula continue to be current and valid. This allows stakeholders to obtain feedback from staff members, students and other role-players on the teaching, learning and assessment quality (CUT 2016b). This shows that CUT

is committed to a systematic, planned approach to QA that ensures that programme review findings are used to effect improvement.

5.3 ANALYSIS AND INTERPRETATION OF QUALITATIVE DATA OBTAINED FROM THE SEMI-STRUCTURED INTERVIEWS

The purpose of the semi-structured interviews was to establish experiences and perceptions (*cf.* 1.8.6.4) regarding the implementation of QIPs (see Section 1 of Appendix E), the QIP implementation practices (see Section 2 of Appendix E), and the examples of operational effectiveness for quality improvement (see Section 3 of Appendix E).

Each interview took between 30 minutes to one hour, and all were held in the participants' offices during agreed times. The actual formulation of the questions (including probing questions) was intended to facilitate open discussion on the research issues (see Appendix E).

The researcher transcribed the recordings of the four interviews. The data was then interrogated by applying content analysis and inductive reasoning (*cf.* 1.8.7.2).

5.3.1 Profile of the semi-structured interview participants

The semi-structured interviews with eleven main open-ended questions, enhanced by nine probing questions were conducted with CUT's selected four HoDs during September 2018 (see 1.8.5.3 and Appendix E for more clarity on the sampling of interview informants, and the interview schedule).

The biographical information of the participants was drawn from Section B of the semi-structured interview schedule (see Appendix E), and the results are reflected in table 5.2 below:

Table 5.2: *Profile of the semi-structured interview participants (N=4)*

Category	Description		Frequency	%
Faculty	Engineering and Information Technology		1	25%
	Health and Environmental Sciences		1	25%
	Humanities		1	25%
	Management Sciences		1	25%
		Total	**4**	**100%**
Gender	Male		2	50%
	Female		2	50%
		Total	**4**	**100%**
Age	Under 20 years		0	0%
	20 to 29 years		0	0%
	30 to 39 years		0	0%
	40 to 49 years		1	25%
	50 to 59 years		1	25%
	60+ years		2	50%
		Total	**4**	**100%**
Highest academic qualification	Bachelor's degree		0	0%
	Honours degree		0	0%
	Master's degree		0	0%
	Doctoral degree		4	100%
	Other		0	0%
		Total	**4**	**100%**
Employment Status	Permanent		4	100%
	Temporary		0	0%
	Full time		4	100%
	Part time		0	0%
		Total	**4**	**100%**

It is evident from Table 5.2 that the sample size (for faculty, gender, age, highest qualifications, and employment status) is four. According to Table 5.2, the profile status of respondents consisted of permanently employed HoDs: one from the Faculty of Health and Environmental Sciences, one from the Faculty of Management Sciences, one from the Faculty of Engineering and Information Technology, and one from the Faculty of Humanities. The distribution of gender reflects that two (50%) of the HoDs were females, while two (50%) were males. The age-range of staff members was between 40 to 60+ years. The HoDs fall between three age categories: between 40 to 49 years (25%), 50 to 59 years (25%), and the 60+ age category (50%). All the participants have doctoral degrees as their highest academic

qualification. The specific number of years working/teaching in the specific institution is not provided to ensure that the identities of the participants remain confidential.

5.3.2 Discussion of analysis and interpretation of qualitative data obtained from interviews

The eleven semi-structured interview questions (with probes) that identified the experiences and perceptions of four (4) CUT HoDs will be discussed according to the numerical sections of the interview schedule (see Appendix E).

5.3.2.1 The implementation of quality improvement plans (Section 1 of Appendix E)

The participants indicated the following on how they applied the purpose of QIP (see Question 1 of Appendix E):

- constantly identifying improvement areas/gaps;
- annual strategic planning using guidelines for programme accreditation and review criteria as the basis to evaluate if on par with the criteria for programme accreditation;
- based on compiled QIP, action plans are defined, implemented and monitored to improve teaching and learning;
- based on the annual Teaching and Learning Committee report, action plans are formulated, implemented and monitored; and
- the improvement of research and community-engagement practices.

It is evident from the above-mentioned that identifying gaps in the three functions of the university, links with the stipulated accreditation standards (see Question 2 of Appendix E). In addition, this question confirmed this as a value-added factor in HE (see Question 2 of Appendix E). Other factors include:

- Exceeding professional bodies' expectations serve as a basis for meeting accreditation criteria, and hence the goal of QIPs to meet accreditation standards;
- QIP is a way to guarantee that there is teaching and learning quality, and this adds value to the integrity of higher HE;

- Meeting accreditation standards makes academic programmes comparable and this adds value to HE; and

- HE is a competitive environment where institutions should always strive to exceed the students' and other external stakeholders' expectations.

In addition, the participants confirmed that QIPs are based on sound educational theory (see Question 3 of Appendix E). The following guidelines or educational theories were identified as informing QIPs at CUT:

- Teaching and learning theories and strategies;

- Assessment strategies and procedures;

- Constructive alignment of the curriculum;

- Professional bodies accreditation criteria and standards;

- CHE Accreditation criteria and standards; and

- South African Qualifications Authority (SAQA) level-descriptors and standards for qualifications.

It is evident from the theories and guidelines identified above that in meeting the requirements of the professional bodies, accreditation standards become the basis for improvement. The participants believed that there are many different theories of teaching and learning which are applicable to all disciplines. They also confirm that, even though some of the academic programmes are not informed or regulated by the professional bodies, they always ensure that there is constructive alignment between the curriculum, teaching, learning, and assessment practices. The participants also confirmed that QIPs can make people think about how the curriculum is aligned with teaching and learning practices. Hence, one of the participants stated that "QIP can make an academic to reflect and read about theory and enhance what he/she is doing in practice".

When asked to comment on the lack of resource provision for the implementation of QIPs (see Question 4 of Appendix E), the participants indicated the following:

- resource provision is an ongoing challenge;

- the university gets less and less money from DHET, and that has an impact on staffing;

- financial resources do not allow us to meet some of the QI recommendations; and
- infrastructure resources are a challenge.

It is evident from the themes indicated above that indeed QIPs are not sufficiently supported by human, financial and infrastructure resources. The participants indicated that the university does not allow them to appoint part-time lecturers anymore due to financial constraints. Filling vacant positions and additional infrastructure resources is always dependent on the availability of funds. The participants would wish to have more lecturers at a certain level and of a certain calibre, but the financial resources do not allow them to meet their salary requirements. There is also a need for state-of-the-art laboratories, but the infrastructure resources do not allow this because of the lack of finance. When asked to comment on how they are addressing the resource provision of QIPs, one of the participants indicated that they "approach it from the philosophy of doing more with less". The review report may recommend that the department needs to appoint a person to manage the programme, but the university has already identified or expecting the HoD to manage the programme as part of their (HoDs') responsibilities. Only in cases where a recommendation may put risk on the accreditation status of the programme, then it is where the management makes some provision to make sure that the recommendations are addressed, and the accreditation of the programme is saved.

Concerning the lack of resources, the participants were asked to comment on how the QIP implementation can be improved, specifically with regard to the provision of resources. The following recommendations were made by the participants:
- The QIPs need to be monitored and their implementation evaluated at a higher level so that management can identify all the critical areas and make sure that the most critical resource requirements are provided across the institution;
- The departments need to motivate strongly if they deem the resources as necessary to improve the level of quality in their programmes;

- QIPs must get the attention of the highest decision-making bodies and not only end up "being noted" in committees.

Also, CUT participants confirmed that QIPs are supported by staff development (see Question 5 of Appendix E). However, the participants highlighted the following issues with the existing staff development initiatives:

- Sometimes the staff development initiatives do not speak to the critical issues that we need to improve on;
- The departments and HoDs are not properly consulted to identify their staff development needs that will inform the implementation of QIPs;
- The workshops are inappropriately scheduled during teaching time; and
- There are enough staff development initiatives, but it depends on the attitude and the value it adds to the daily operations of academic staff.

It is evident from the issues identified above that the existing staff development initiatives are not informed by the needs of the academics and therefore do not add value in addressing the QI areas. The training workshops are also scheduled during the time that the academics are in class and therefore they not able to attend. The participants made the following recommendations for improvement to staff development:

- CILT must do their planning better - rather have fewer staff development workshops with training scheduled during the time when academics are available;
- A needs-analysis must be done first, before the final programme for the year is confirmed;
- It would be good if the training workshops that are offered by CILT were informed by the needs of the faculties and academic staff; and
- The best way is to add the training needs as part of the plans for the year pertaining to personnel development for performance management.

Related to the issues and recommendations above, the HoDs were probed to indicate the kind of training workshops they think would be beneficial to their faculty/department in the implementation of QIPs (see probe in Question 8 of

Appendix E). The HoDs highlighted the following training requirements which may assist in the implementation of QIP related to teaching and learning:

- Teaching and Learning theories and strategies;
- Assessment strategies and practices;
- Training on the management of teaching and learning;
- Self-management (e.g. anger management, emotional management and all other soft skills that are relevant); and
- Academic writing skills.

The training needs identified above confirm what has been advised by the HoDs that CILT needs to consult with the academics to identify their training needs. It is evident that the lack of learning theory makes academics think that students learn only in one way, while there are many concepts that they do not know as academics as they are subject specialists and not educationalists. Staff development should, therefore, expose academics to contemporary concepts, theories, ways of social practices in academia so that this can help them to transform their curriculum designing, teaching and learning practices, research, and community engagement.

5.3.2.2 The quality improvement plan implementation practices (Section 2 of Appendix E)

The CUT HoDs indicated that they do not have faculty or department-specific policies which may assist them with the implementation of QIPs (see Question 6 of Appendix E). However, the following existing institutional policies, which were consulted and incorporated by HoDs, were identified as critical to assist with the implementation of QIPs with regards to teaching and learning, and assessment:

- Teaching and Learning Plan;
- Assessment Policy; and
- Assessment Manual and Procedure.

The policies above were identified as playing an important role in assisting with the QIP implementation as they inform what the academics do in teaching and learning, and assessment. *The Teaching and Learning Plan* identify teaching and learning

strategies that the academics need to adhere to, while the *Assessment Policy, Manual and Procedure* assist with the assessment strategies that the academics need to incorporate in their academic programmes. The participants indicated that they always make sure that their teaching and learning, and assessment strategies are aligned with the university's policies as required. It is evident, therefore, that other policies and frameworks play a secondary role, as QIPs can involve other areas like infrastructure, staffing and many more. All these are linked to improving the quality of the core business of the university, which is teaching and learning, research and community engagement. Therefore, even though there are no faculty or department-specific policies, all institutional policies make some contribution towards assisting in the implementation of QIPs.

When asked about their views on reporting lines for QM, CUT HoDs indicated the following as reasons for there still being problems with the implementation, monitoring and evaluation of QIPs (see Question 7 of Appendix E):

- The reporting lines are clear regarding the implementation of QIPs but not clear as to who is responsible for the monitoring and evaluation part;
- Sometimes the recommendations for improvement are at such a high-level to the extent that even the HoD is not be able to implement them;
- The QIPs end up being noted but no action is taken to address the issues raised;
- There is a structure, agency and culture in every organisation, and the problem might be that the agency (people) are not doing what they are responsible and accountable for; and
- QM is regarded only as part of the role profile of the HoD, including monitoring and evaluation thereof.

It is evident from the reasons mentioned above that the implementation, monitoring and evaluation of QIPs, and the recommendations and the action plans, are part of the HoDs' role profile and that of individual academics, depending on the issues that need to be addressed or improved. However, it seems as if the reporting lines are not spelt out clearly, and therefore the roles, responsibilities and accountability need to be defined and not left to the agency (people) to determine. It is also evident that

the HoDs should be accountable to the Deans regarding QM issues. Roles, responsibilities and accountability need to be clearly defined as the HoDs cannot be asynchronously responsible for the implementation of QIPs, and not be accountable for monitoring and evaluation in their implementation.

Also, the HoDs confirmed that regarding the structure, the IPQE and CILT are located in the right division. However, their working relationships need to be smoothened. The HoDs highlighted the following concerning the involvement of IPQE, CILT and the Assistant Dean of Teaching and Learning in the monitoring and evaluation of the implementation of QIPs:

- IPQE and CILT should be responsible for monitoring and evaluating the implementation of QIPs as the support divisions for planning and QA for teaching and learning;
- The Assistant Dean of Teaching and Learning is not a primary appointment, but a secondary appointment, and it would be more appropriate for them to report on the implementation but not in monitoring and evaluation as they are not appointed to do that;
- The Assistant Dean of Teaching and Learning is responsible for reporting on the teaching and learning and the improvement of quality in this area, and can also collaborate with IPQE and CILT in the monitoring and evaluation of QIPs;
- Currently, there is no follow-up regarding the implementation of QIPs; and
- The problem is that there are no clear guidelines as to how monitoring and evaluation should be done and who should be responsible and accountable for it.

It is evident, therefore, from the issues highlighted above that the best way is for the Assistant Deans of Teaching and Learning to report on the implementation of QIPs as part of their portfolio of teaching and learning and QA, and that IPQE and CILT do monitoring and evaluation. It also seems that IPQE and CILT are working in silos instead of collaborating in the monitoring and evaluation of the QIPs related to the QA of the core business functions. As the support divisions, IPQE and CILT do not necessarily have to interfere with the implementation of QIPs, but need to be available to support and help the HoDs where required.

It is also evident that roles and responsibilities should be defined clearly to ensure that the people and the support divisions responsible are accountable and report on areas of improvement. The policies, guidelines and procedures for reviews also need to be revised to ensure that there are clear reporting lines of responsibility and accountability ensuring that sufficient support is provided to the HoDs in implementing the QIPs. Additionally, attention needs to be paid to the details - spell out exactly *who* is responsible for *what* and *when*. The IPQE, CILT and the Assistant Dean of Teaching and Learning need to be more involved in following up on the monitoring and evaluation of the implementation of QIPs, and the relevant departments need to report on a quarterly basis on the progress regarding the implementation of their QIPs. Implementation, monitoring and evaluation will be more structured once the institution has clarified the roles and responsibilities, thus making reporting lines clear as to who is accountable.

Related to the above, the HoDs were asked whether the existing guidelines and procedures for reviews require quarterly reports on the implementation of QIPs. CUT HoDs highlighted that this is not happening in practice; however, it would assist in the process by providing a feedback mechanism on what they do and how they can improve. They also highlighted that the reporting interval might be too time-restricting and suggested semester/half-yearly reporting intervals. They also indicated that within faculties, an arrangement had been made to report on the progress made with regards to the implementation of QIPs to the Teaching/QE Committees. These reports are submitted at the beginning of the year and monitored during the year, and then revised reports are submitted at the end of the same year. It is evident, therefore, that some of the issues to be addressed as part of the QIPs cannot be reported on a quarterly basis. Another point that cropped up was whether reporting to Senate would be appropriate as this might overload the committee with reports that would be noted but not discussed. It would be much better if progress was reported at Faculty Boards instead. This confirms the recommendations made above that the policy, guidelines and procedures need to be reviewed and lines of reporting and accountability need to be made very clear.

The HoDs highlighted the following on role-functions:

- Teaching and Learning/Faculty Quality Enhancement Committee is responsible for ensuring quality within the faculty;

- QIP should be part of any committee or structure that is dealing with teaching and learning;

- QIP should be a standing item in all teaching and learning agendas (meetings);

- IPQE should play a more quality-assuring role, and CILT a more quality-enhancing role; and

- The Assistant Deans of Teaching and Learning should play a more reporting and supporting role regarding monitoring and evaluation of QIPs.

It is evident from the above that all four structures are expected to play a more active role in supporting the implementation, monitoring and evaluation of QIPs. What is needed, is a clear definition of roles and responsibilities based on what transpires in the review reports and the QIPs in addition to identifying *who* is going to do *what* and *when*. This confirms what has been highlighted above in terms of the recommendation that policies, guidelines and procedures need to be reviewed to ensure clear demarcation of responsibilities for the implementation, monitoring and evaluation of QIPs.

Also, the HoDs felt that the Teaching and Learning/FEQCs within the faculties have clear terms of reference concerning enhancement of the teaching and learning quality. These committees serve a purpose of monitoring teaching and learning practices, assessment practices and the QA across the faculties. The HODs, therefore, need to work closely with the Assistant Deans of Teaching and Learning in the implementation and reporting on the QIPs to these Teaching and Learning/FEQCs. It is also evident that the academics themselves should be more involved in the implementation of QIPs depending on the areas identified for improvement. QA and QE within the University is the responsibility of everyone and not only a selected few. There should be a link of communication between the academics, HoDs, Assistant Deans of Teaching and Learning, the Deans, IPQE, CILT, and other relevant structures in identifying areas for improvement in teaching and learning.

5.3.2.3 Examples of operational effectiveness for quality improvement

When asked to comment on the how feedback and findings of the review process were communicated back to stakeholders (see Question 10 of Appendix E), the HoDs responded as follows:

- The review panellists share the draft verbal report with the academics immediately after the review, for them to start engaging with the major issues that are pinpointed by the review process;
- Programme and Advisory Committee meetings are also used to share the results of the review with relevant stakeholders where everyone is represented; and
- The only challenge is giving feedback to students - but as far as other stakeholders are concerned, the faculties have the relevant structures.

It is evident that the faculties have the relevant structures that are used to share the review results with the relevant stakeholders. However, to ensure that the feedback of the review report is also communicated to students, these existing structures need to have representatives from the student bodies. This is very important because students are the ones who sit in the classes and are at the receiving end of the teaching and learning processes that are provided. Therefore, before the departments do the planning for the following year, they need to select students to get their opinions on what can be done to improve the teaching and learning activities and assessment strategies. Each programme should make use of student representation and class representatives to ensure that all the relevant stakeholders receive feedback at programme level.

Also, to ensure that feedback from diverse stakeholders during the programme and course reviews is used to improve the curriculum, the HoDs indicated that they use annual surveys both internally and externally and that this informs the annual report to the faculties and the professional bodies, where required. Focus groups with students are held to identify areas for improvement, and this informs curriculum improvement. Students are also asked to complete questionnaires at the end of each

semester to evaluate the courses/modules/teaching-learning to get a more general view about the course, and how to improve the curriculum.

When asked to make suggestions for the operational effectiveness of CUT's QIP implementation practices (see Question 11 of Appendix E), the HoDs indicated that there should be clear reporting lines so that there is no ambiguity when accountability is raised as an issue. The student surveys were regarded as being very important to determine student opinion on the programme or course so that it can inform the curriculum and the teaching and assessment practices while being transparent. It is evident, therefore, that monitoring and evaluation are key to ensuring that the action plans as identified in the QIPs, are effectively implemented.

5.4 TRIANGULATION

The researcher used triangulation as a general approach to ensure the credibility of research findings, by examining the convergence, complementarity and disagreement on the related research questions derived from the questionnaire and the semi-structured interviews (*cf.* 1.8.11.1). The role of triangulation in advancing conformability is emphasised in this study to lessen the impact of the researcher's pre-disposition (*cf.* 1.8.11.4). Table 5.3 shows a summary of the main themes identified in the research, sorted into three different groups (implementation of QIPs, QIP implementation practices and examples of operational effectiveness for QI).

Table 5.3: *Triangulation of results from questionnaire and interviews*

IMPLEMENTATION OF QIPS			
Research Theme	**Questionnaire Result**	**Interview Result**	**Comments**
• The purpose of QIPs.	To improve the quality of education provided to students in terms of teaching, learning, research, and community engagement.	Identifying improvement area/gaps in teaching, learning, and research and community engagement and to improve on them.	Participants agree on the purpose of QIPs to define, implement and monitor the implementation of the action plans to improve teaching and learning.
• The value of QIPs.	To improve and enhance the quality of the learning programmes to meet accreditation standards.	Identifying gaps in the core functions of the university links with the stipulated accreditation standards. And this is confirmed as a value of HE.	Participants agree that exceeding professional bodies' expectations serve as a basis for meeting accreditation criteria, and hence the QIPs' goal to meet accreditation standards and therefore a way to ensure that there is quality in teaching and learning which adds value to the integrity of HE.
• The influence of educational theory on QIPs.	QIPs are based on sound educational theory.	Participants confirmed that QIPs are based on sound educational theory.	Participants agree and confirm that QIPs are based on sound educational theories and strategies of teaching, learning, assessment, accreditation criteria and

			standards and constructive alignment of curriculum.
• Resource provision for QIPs.	QIPs are not supported by resource provision.	QIPs are not sufficiently supported by human, financial and infrastructure resources	Participants agree that resource provision is an ongoing challenge as the university gets less money from the DHET.
• Staff development and support for QIPs.	QIPs are supported by staff development.	There are staff development initiatives, but they are not informed by the needs of the academics and therefore do not add value to the quality improvement areas.	Participants agree that there is some form of staff development but that it does not necessarily speak to the critical issues that they need to improve on as it is not informed by the needs of the academics.
• The use of feedback and results to effect improvements to the programme design and delivery.	Feedback and results of the programme review/evaluation are used to effect improvements to the design and delivery of the programme.	Faculties have relevant structures that are used to share the review results and that feedback is used to effect improvement on the curriculum.	Participants agree that the feedback received from all stakeholders is used to effect improvement in the curriculum.
• Recommended improvements to the implementation of CUT's QIPs.	QIPs need to be supported by resource provision. Their implementation need to be monitored and evaluated.	Monitoring and evaluation are key to ensuring that action plans (as identified in the QIPs) are implemented.	Participants recommend that the implementation of QIPs need to be monitored and evaluated.

QUALITY IMPROVEMENT IMPLEMENTATION PRACTICES

Research Theme	Questionnaire Result	Interview Result	Comments
• Institutional policies which assist with the implementation of QIPs.	There are no faculty/departmental policies that assist with the implementation of QIPs.	No faculty/departmental policies which assist with the implementation of QIPs.	The participants agree that they do not have faculty/departmental specific policies that assist with the implementation of QIPs. However, the existing Teaching and Learning and Assessment policies inform what they do in terms of teaching and learning and assessment and that other policies play a secondary role, as QIPs involve other areas of improvement.
• Institutional responsibility for QM	The institution's QMS for programme reviews have clear reporting lines that ensure that review results are reported and followed up with monitored QIPs.	Reporting lines for QM are clear with regards to the implementation of QIPs but not clear as to who is responsible for the monitoring and evaluation part.	Participants agree that there are clear reporting lines in the QMS for programme review, but the challenge is regarding the responsibility for monitoring and evaluation.
	Recommendations for improvement are documented, and a follow-up is done to hold the programme accountable.	The recommendation for improvement are documented in the QIPs and improvement action plans	Participants agree that the programme is held accountable through the HoDs as they are deemed responsible for the reporting

		are identified as the responsibility of the HoDs.	on the implementation of QIPs.
	MANCOM provides strategic leadership and ensures resources are available to address challenges that are identified during reviews. CILT plays supportive role regarding QM of teaching and learning through various academic and student development activities. IPQE manages compliance regarding quality standards, general information for planning, PQM and management of internal reviews.	In terms of the structure, IPQE should play a more quality assuring role and CILT a more quality enhancement role. MANCOM is responsible for the financial performance of the university and continues to monitor the effectiveness of internal management and control, based on internal audits and reports.	Participants agree on the roles of the three structures and recommend a more collaborative role in performing their duties.
• Guidelines offered by the institution to ensure the quality and rigour of QIPs	There are no clear guidelines to ensure the quality and rigour of the QIP implementation practices.	Guidelines and procedures need to be reviewed to ensure clear responsibilities for the implementation, monitoring and evaluation of QIPs.	Participants agree that there are no clear guidelines
• Procedures offered by the institution to ensure the quality and rigour of QIPs	There are no clear procedures to ensure the quality and rigour of the quality management implementation practices	Procedures need to be reviewed to ensure clear responsibilities for the implementation, monitoring and evaluation of QIPs.	Participants agree that there are no clear procedures
• Support that the institution offers	Support from the institution is rather limited as it is highly dependent on resources	QIPs are not sufficiently supported by human,	Participants agreed that resources are rather limited

academic line- managers and academics to ensure the quality and rigour of QIPs		financial and infrastructure resources.	
	No formal training offered on evaluation and reviews in general, and on QIP implementation practices in general.	The existing staff development initiatives are not informed by the needs of the academics and therefore do not add value in addressing the QI areas.	Participants agree that there is no relevant formal training for the implementation of QIPs
	No educational expertise made available to support academics in interpreting the findings of academic reviews and formulating plans for QI.	CILT needs to consult with the academics and identify their training needs	Participants agree that staff development should expose academics to contemporary concepts, theories that can help them to transform their curriculum, teaching and learning practices, research, and community engagement.

EXAMPLES OF OPERATIONAL EFFECTIVENESS FOR QUALITY IMPROVEMENT			
Research Theme	**Questionnaire Result**	**Interview Result**	**Comments**
• Review methods and dissemination of review findings	The students, those teaching in the programme, external stakeholders, examiners and other stakeholders are part of the review process and their perspectives and feedback is critical for purposes of informing the review methods and ensuring QI of the programme.	The HoDs indicated that they use annual surveys both internally and externally and that this informs the annual report to the faculties and the professional bodies, where required. The feedback from these surveys is then used to effect improvement on the curriculum.	Participants agree that the findings of the reviews are disseminated to all relevant stakeholders and that their feedback is used to effect improvement to the curriculum.
	The perspectives of students are critical, & course/module convenors and peers are used for purposes of informing the review methods and ensuring quality of the courses/modules.	The student surveys were highlighted as being very important to determine student opinion on the programme or course so that it can inform the curriculum and the teaching and assessment practices.	
	Findings of the review or evaluation are made available through programme Advisory Board meetings, shared at departmental meetings and disseminated to all constituencies.	The review report as well as the QIPs should also be made available to students, so that the process can be deemed more transparent.	

• Use of feedback for curriculum development	Feedback from diverse stakeholders during the course and programme reviews is used to improve the curriculum, either of the new programme being developed or of the existing programme being reviewed.	To ensure that feedback from diverse stakeholders during course and programme reviews is used to effect curriculum improvement, the HoDs indicated that they use annual surveys both internally and externally and that this informs the annual report to the faculties and the professional bodies, where required.	

5.5 DRAWING CONCLUSIONS

This chapter focused on the experiences and perceptions of academic line managers and academic staff members concerning QIP implementation practices at CUT. Using the two research instruments to collect data (see Appendix D and E), the policies, guidelines, procedures and support that CUT offers academic line managers and the academic staff members to deliver effective and efficient implementation of QIPs, were identified and presented in this chapter. The positive and negative experiences and perceptions of the implementation of QIPs were identified. Also, the types of improvements in the implementation of QIPs which were recommended by the CUT's HoDs and the senior lecturers and lecturers, were also discussed, according to the already stipulated second, third and fourth subsidiary research questions, including the third, fourth and fifth objectives identified in Chapter 1 (*cf.* 1.3 and 1.4).

In concluding, the most significant point to bear in mind is that the researcher is the main "research instrument" in this study. Consequently, the conclusions that are drawn in this study take the form of the researcher's interpretation of the participants' experiences and perceptions for the improvement of the QIP implementation practices at the CUT. The researcher relied mostly on critical and inductive analytical approaches in seeking to uncover the assumptions underpinning particular comments and views expressed by the participants in this study. The conclusions listed below are supported by the data collected using both questionnaires and semi-structured interviews, and are outlined below according to the relevant numerical categories of the research instruments:

- The responses of participants reflect an awareness of the purpose of QIPs as a self-assessment tool to enhance core activities related to teaching and learning and ensuring that there is a high standard of research activities. The QIPs improve the quality of the learning process by engendering a culture of continuous improvement that ensures that academic programmes adhere to statutory and CHE accreditation standards, thereby adding value and integrity to HE. The QIPs need to be implemented within a specific time-frame, in a

structured fashion that ensures an element of completeness maintaining that implementation progress needs to be followed up, measured and monitored. Institutions should develop QIPs which reflect the unique circumstances of their services and ensure that the climate for change is ever-present.

- The QIPs should be based on sound educational theory and their implementation must depend in part on reflective practitioners having a sufficient understanding of learning, and that academic staff themselves will need to be involved in developing an empirical and theoretical base to inform improvement of teaching and learning. HEIs, therefore, need a QI framework that helps the organisation engage in collective sense-making and reflection so that improvements can be undertaken continuously in a manner that respects the core values and role of HE.

- There are no sufficient financial, human and infrastructure resources to support the implementation of QIPs within the institution. The QIPs should be supported by resource provision, and the review and evaluation results should be explicitly fed into the next planning-cycle for proper budgeting.

- The QIPs are supported by staff development at the institution. However, staff development initiatives should be informed by the training needs of the academics to add value in addressing the QI areas. Relevant support needs to be provided to HoDs and academic staff on specific improvement areas that are identified by the review process.

- The results of this study show that feedback and results of the programme review/evaluation are used to effect improvements to the programme's design and delivery in the institution. To ensure that the programme review process and feedback mechanisms are transparent, all stakeholders need to be represented in the relevant programme committees.

- The institution has superficial mechanisms for monitoring progress made in the implementation of QIPs. This is because there is no clear guiding policy, guidelines, and procedures on the integration of essential management functions which are fundamental to the effective implementation of quality improvement plans. Since programme and course reviews are important segments of an IQMS, strategies should be set up to ensure that

plans for improvement are implemented and monitored, and roles and responsibilities are delineated to ensure accountability.

- It is clear from other existing policies, guidelines and procedures that have been identified in this study, that the institution has definite intentions to enhance the effectiveness of the quality of its core business activities of teaching and learning, research, academic support services, community engagement, as well as the maintenance of academic standards.

The next chapter (chapter 6) discusses the final conclusions, implications, shortcomings, and guidelines for future research.

CHAPTER 6
FINAL CONCLUSIONS, IMPLICATIONS, SHORTCOMINGS AND GUIDELINES FOR FUTURE RESEARCH

6.1 INTRODUCTION

The results of this HE case study indicated the experiences and perceptions that CUT's academic line managers (HoDs) and academic staff members (senior lecturers and lectures) experienced with reference to the implementation of QIP practices. The study looked at HE QM systems, particularly the implementation of QIPs. According to this study, the IQMS (*cf.* 1.7.1) refers to the entity composed of the policy on quality, strategic goals, responsibility of the leaders, suitable structural, personnel and financial conditions for the smooth functioning of the processes, process management, controlling the results, and feedback between results and goals (Brits 2010; HEQC 2004a:15; CHE 2004b:25; CHE 2007:76). The QIP (as part of an IQMS) refers to an arrangement created by the institution/department/programme being reviewed which determines activities, assigned obligations, and time-frames with a specific end-goal to address the requirements and proposals of the review report. It is a plan developed by the HEI being audited (*cf.* 1.7.3) specifying activities, designated responsibilities and time-frames to address the requirements and recommendations of the audit report (CHE 2004a; CHE 2004b; CHE 2007; Yarmohammadian *et al.* 2011). Additionally, QM in HE (*cf.* 1.7.4 & 2.2.3) is referred to as institutional arrangements for assuring, supporting, developing, enhancing and monitoring the quality of teaching and learning, research and community engagement (Brits 2010:45; Brits 2011; CHE 2004a:16; CHE 2004b:26; Kleijnen 2012; O'Mahony & Garavan 2012; Tambi *et al.* 2008).

The main assumption, which provided the starting point for this study, is that the institution needed a clear policy on QA and strategic quality goals including operative tools to reach them (*cf.* 1.2). This HE policy qualitative case study was conducted from a social constructivist/interpretivist worldview (*cf.* 1.8), where experiences of the participants played an active role in constructing the reality (Creswell 2003, Creswell 2012; McMillan & Schumacher 2014; Mertens 2009; Mertens 2014).

Therefore, this chapter provides a synoptic view of the main conclusions arising out of the data analysis of the study (*cf.* 6.2). The chapter also makes some suggestions on how to improve quality and the implementation of QIPs that would suit the CUT, in particular (*cf.* 6.2.1.7 & 6.3). The shortcomings of the study which require further investigation are also discussed (*cf.* 6.4).

6.2 SUMMARY OF THE CONCLUSIONS OF RESEARCH

The empirical component of the study examined the experiences and perceptions of academic line managers (HoDs) and academic staff members (senior lecturers and lecturers) of CUT on QIP implementation practices. Relying on the questionnaires and semi-structured interviews, the empirical study further examined the extent to which CUT has succeeded in developing its own institutional policies, guidelines, procedures and support for the implementation of QIPs.

6.2.1 Implementation of quality improvement plans at the CUT

This section summarises the conclusions drawn in this study with regard to the implementation of QIPs at the CUT.

6.2.1.1 The purpose of quality improvement plans (QIPs)

The participants in this study agree on the purpose of QIPs as a self-assessment tool to enhance core activities (*cf.* 1.7.3, 5.2.2.1 & 5.3.2.1) related to teaching and learning and ensuring that there is a high standard of research activities (Donlagić & Fazlić, 2015). As such, QIPs improve the quality of the learning process by engendering a culture of continuous improvement that ensures that academic programmes adhere to statutory and CHE accreditation standards, thereby adding value and integrity to HE. In addition, QIP (for QIP definitions see 1.7.3) is a way to address the weaknesses identified during an internal or external programme review to improve the quality of the academic offering (Yarmohammadian *et al.* 2011). The study, therefore, confirms that QIPs develop a QI culture which monitors improvement in a structured manner leaving an audit trail for QA at all levels. The QIP also helps HEIs

to document the strengths of their services and to recognise areas for improvement. Institutions should develop QIPs which reflect the unique circumstances of their services and ensure that the climate for change is present (Yarmohammadian *et al.* 2011 [*cf.* 5.2.2.1]).

6.2.1.2 The value of quality improvement plans

The participants in this study agree that QIPs improve the quality of the learning process by engendering a culture of CQI that ensures that academic programmes adhere to statutory and CHE accreditation standards, thereby enhancing the reputation of the university. The only time a QIP would not add value to HE is when the plans are not implemented, and when monitoring and evaluation are not conducted (*cf.* 5.2.2.2 & 5.3.2.1). Therefore, QIPs need not be a compliance document but must be implemented to the fullest. To add value to the integrity of HE, the *Audit Manual* prescribes a format for a QIP (*cf.* 3.2.6). Here, QIPs need to be planned to take actions within a specified time-frame in order to be a continuous process having short and long-term plans. In addition, QIPs should also document what needs to be addressed, how the programme plans to address the shortcomings, including the timelines and resources required so that progress can be followed. The QIPs should not only document what needs to be done, but should see to it that recommendations of the academic review report should be implemented, and this implementation should be measured and monitored.

This study, therefore, confirms what has also been highlighted by the literature (*cf.* 2.2.4.1), that the provision of a quality framework against which the implementation of QIPs is performed, means that there is an urgency to address issues in a structured order that ensures that such issues highlighted in the review report are addressed fully. This also indicates the need for innovation, implying that the need for resources and institutional support will lend weight change and the implementation of QIPs (Little 2015).

The QIPs need to be implemented within a time-frame, in a structured fashion that ensures an element of completeness. Also, the implementation progress needs to be followed up, measured and monitored. Hence, institutions should develop QIPs which

reflect the unique circumstances of their services which must integrate innovation into programmes.

6.2.1.3 The influence of educational theory on quality improvement plans

The participants in this study agree that QIPs should be based on sound educational theory (*cf.* 5.2.2.3 & 5.3.2.1*).* This congruency relates to what has been suggested by the CHE (cf. 3.2.4), that the actual improvement in quality depends substantially on the linking of QM to planning and resource allocation at all levels of an HEI, and that at department and programme levels the findings of self-evaluations need to be sufficiently diagnostic in nature to lead to concrete and detailed plans for improvements in teaching and learning practice (CHE 2004a). Participants' opinions articulated above resonates with the requirements of the CHE, that QIPs should be based on sound educational theory supported by resource provision and staff development with review and evaluation results being explicitly fed into the next planning cycle (CHE 2004a).

6.2.1.4 Resource provision of quality improvement plans

The participants in this study agree that resource provision for the implementation of QIPs is an ongoing challenge as the university gets less money from DHET (*cf.* 5.2.2.4 & & 5.3.2.1). This confirmed what has been highlighted by the literature (*cf.* 1.1), that the HE sector progressively works in an exceptionally changing, turbulent and competitive environment, where assets and resources are difficult to acquire, yet they are required to adhere to expanding competitive requests and demands (O'Mahony & Garavan 2012). This implied that the integration of QM and QI, planning and resource allocation is the crucial element in enhancing the quality of an institution's core business functions (Brits 2010; Brits 2011; Kleijnen 2012). Therefore, the actual improvement in quality depends substantially on the linking of QM to planning and resource allocation at all levels of the institution, including ensuring support and resources for the implementation of QIPs (CHE 2004a). Thus, financial planning systems (*cf.* 3.2.5) should ensure adequate resource allocation for the development, implementation, review and improvement of quality and QM

mechanisms for the core activities of teaching and learning, research and community engagement (CHE 2004c:3)

6.2.1.5 Staff development and support for quality improvement plans

The participants in this study agree that there is some form of staff development but that it does not necessarily speak to the critical issues that they need to improve on as it is not informed by the needs of the academics (*cf.* 5.2.2.5 & 5.3.2.1). This is confirmed by the literature (*cf.*3.2.4) as suggested by the CHE (2004a). Furthermore, the institution's *Quality Enhancement Strategy* (CUT 2014) also confirmed this as it identified the CASD to offer the staff development. The documents also highlighted the institution's commitment to shaping its academic status to that of national and international higher education institutions by ensuring high quality, niche-focused and differentiated teaching and learning programmes and staff development. The main goal is that of ensuring operational effectiveness, efficiency and quality (*cf.* 4.3.5); thus, by fostering an overall institutional culture of CQI and implementation of QIPs as required by HEQC (including PBs and the ETQAAs), the institution will grow nationally and internationally (CUT 2014).

However, it is clear from the responses elicited from participants that there is a gap between the staff development initiatives and services offered by the CASD, and the support required by the HoDs, senior lecturers and lecturers in the implementation of QIPs. Claims are being made that support is only provided to develop QIPs in response to the issues highlighted by the review, but no support is given to implement the QIPs from a foundational stage. This implies that there is a need for innovation and change (*cf.*1.8.3) in practice with more institutional support to lend weight to the implementation of QIPs (Little 2015). The institution's QMS for programme review should also involve having clear reporting lines and accountability, which ensures that review results are reported up the management system and followed up with monitored improvement plans (CHE 2004a) (*cf.* 3.2.4). University HoDs and management committees could likewise guarantee continuous improvement in HE by guaranteeing professional development programmes and retraining of educators and other staff through expert improvement projects of high calibre. Along these lines,

excellence will be possible in university education (*cf.* 2.2.4.2) when connected to implementation of QIPs (Akinyemi & Abiddin 2013).

6.2.1.6 The use of feedback and results to effect improvements to the programme design and delivery

Participants in this study agree that the feedback received from all stakeholders is used to effect improvement in the curriculum (*cf.* 5.2.2.6 & 5.3.2.1). Feedback and results of the programme review/evaluation are used to effect improvements to the programme's design and deliver for the next planning cycle. This is confirmed by the literature (*cf.* 1.7.1), which stated that the IQMS refers to the entity composed of the quality policy, strategic goals, and responsibility of the leaders, suitable structural, personnel and financial conditions for the processes, process management, controlling the results and feedback between results and goals (CHE 2004a:15; CHE 2004b:25; CHE 2007:76). The CHE (2017b) also confirmed this by stating that the QA system must ensure coherence and alignment among the elements of the system and contain feedback loops that support and promote improvement. One of the purposes of the internal review process (*cf.* 4.3.4) related to the institution, department or programmes, is to obtain feedback from staff members, students and other stakeholders on the quality of teaching, learning and assessment (CUT 2016b). Consequently, CUT also required all those involved in course and programme design to deliver quality service (CUT 2014). One of the services highlighted for CASD (*cf.* 4.3.5) is to oversee the process of curriculum design and development for all programmes and the core curriculum, to ensure alignment with the national policy framework, expectations of professional bodies and other key stakeholders (CUT 2014). In terms of the CUT *Procedure on the appointment, competencies, roles and responsibilities, and allowances for academic Heads of Department, Department Managers, and Assistant Dean of Teaching and Learning* (CUT 2017), HoDs should be able to motivate and support programme development and delivery (*cf.*4.4.4).

6.2.1.7 Recommended improvements to the implementation of CUT's quality improvement plans

It is clear from the above that QIPs need to be supported by resource provision and that their implementation needs to be monitored and evaluated, especially since programme and course reviews are key segments of an IQMS. The participants recommend what has been proposed by the CHE (CHE 2004a; CHE 2004b; CHE 2007) that the institution's QMS for programme review should ensure that results are reported up the management system and followed up with monitored QIPs (*cf.* 3.2.4); and that the QIPs should include how progress will be monitored and evaluated (*cf.* 3.2.5 & 3.2.6). The monitoring by IPQE comes out very strongly in the views expressed by the participants. Although this (*cf.* 4.3.1; 4.4.2; 4.4.3) is stipulated in the guidelines and procedures of the *Revised Manual for Reviews at the Central University of Technology* (CUT 2016b), it seems that this is ignored in practice. The institution will need to ensure that this is implemented and that IPQE is well-resourced, and its capacity is built to ensure that the function of monitoring and evaluation of QIPs is undertaken as per national and international norms. Therefore, the QIPs should not only document what needs to be done, but also the recommendations of the academic review report should be implemented, and its implementation measured and monitored.

6.2.2 Quality improvement plan implementation practices at the CUT

This section summarises the conclusions drawn in this study with regard to the QIP implementation practices at the CUT.

6.2.2.1 Institutional policies which assist with the implementation of QIPs

The participants in this study agree that they do not have faculty/departmental specific policies that assist with the implementation of QIPs (*cf.* 5.2.3.1). However, the existing *Teaching and Learning and Assessment* policies inform what they do in terms of teaching and learning, and assessment; and that other policies play a secondary role, as QIPs involve other areas of improvement. The experiences and perceptions expressed in this study confirmed the problem statement of this study as

outlined in Chapter 1 (*cf.* 1.2 & 1.3). The CUT HoDs, senior lecturers and lecturers rely on existing guidelines and procedures for academic review, which are not clear in terms of the implementation and monitoring of QIPs as these are intended to be informed by an existing institutional QA policy (CUT 2016). The stated problem refers to IQA (*cf.* 2.2.2 & 2.2.4) where institutions monitor themselves and improve their educational provision (Ezer & Horin 2013). The views expressed by the participants also underpin the significance of this research: to improve the current policies, in general, and the implementation of QIPs in particular (*cf.* 1.5). It is also very crucial to regard QM as a holistic management theory that focuses on the policies and CQI of the considerable number of functions inside the institution (Brits 2010; Brits 2011). The views of participants also signify that quality is focused on related policies as well as accountability issues (*cf.* 3.2) that pave the way for smooth continuous improvement processes (*cf.* 1.1, 1.7.2 & 2.2.4) that the higher education institution must adhere to. Quality assurance as defined in this study (*cf.*2.2.2), refers to the collection of policies and practices (internal or external) connected to the organisation designed to achieve, maintain and enhance quality (Williams 2016). Hence, through working with staff and helping them to develop their own policies and systems, an institution will have a better chance of introducing an awareness to quality issues. Institutional policies, in this way, must be adaptable and must be subject to constant scrutiny and self-monitoring, which this study would like to encourage among staff.

In summary, there are no specific policies that exist within the institution that assist and provide guidance regarding the implementation of QIPs. This means that the university, in general, and the faculties and departments in particular, need to have guiding policies that will set the desired expectations and provide clear policy statements in the implementation of QIPs. The institution needs to develop an institution-wide policy to which faculties and departmental policies will be aligned. The existing *Teaching and Learning* policies and *Assessment Policies* are not very clear in providing strategic guidance into the implementation of QIPs. Programme and course reviews are key components of an institutional quality management system and policies need to be in place (*cf.* 3.2.4) to ensure that insights and learnings from such reviews are acted upon, and that plans for improvement are implemented (CHE 2004a).

6.2.2.2 Institutional responsibility for quality management

Participants in this study established that there are clear reporting lines in the QMS for programme review, but there are challenges regarding the responsibility for monitoring and evaluation (*cf.* 5.2.4.1). Literature informs us of the HEQC proposals (*cf.* 3.2.4) that the institution's QMS for programme review should also involve clear reporting lines and accountability (CHE 2004a). University heads and management committees must likewise guarantee continuous improvement in higher education by facilitating high-quality professional development programmes and retraining educators and other staff members. Excellence will be reachable in university education (*cf.* 2.2.4.2) when coupled with the implementation of QIPs (Akinyemi & Abiddin 2013). The participants also confirmed this by highlighting that, at the faculty level, the Faculty Teaching and Learning Committees and the Faculty Boards should serve as structures where review results are reported and acted upon. Also, QA Committees at department level must play their part and report to the HoD who then communicates this to the Faculty Board. However, even though the reporting is done, some of the participants are of the view that monitoring is not justly done. This links to the fact that HEIs have been facing an increasing demand for accountability, which prompted the implementation of control and evaluation systems (Massaro 2010; Minelli *et al.* 2015), as part of assuring and enhancing quality (*cf.* 1.1 & 1.2).

The fact that all faculties have a Faculty Teaching and Learning Committees established to address quality matters in teaching and learning, is very crucial. The Faculty Teaching and Learning Committee (as a Faculty Board committee) should not only focus on QA but enhancement, including the development/review of policy (on QA and QE). It thus becomes essential to ensure that academics serving on structures such as the Teaching and Learning Committee are workshopped/developed to provide active participation in these structures. This confirms what has been proposed by the HEQC, that institutions must have a delegated senior administrator or manager, typically supported by a quality committee or equivalent, to take charge of the development, advancement and review of the policy on QA and QM, and to manage the execution thereof. The implementation of the QA and QM policy and strategy should be incorporated into the "job-profile" of all line managers. Furthermore, the policy should be disseminated

throughout the university and should be owned by those in charge of its execution (CHE 2004c). The participants' opinions also indicate that the relevant HoD and department should compile a QIP in response to the outcome of the external review; as well as a report on the outcome of the external peer review. This highlights the Assistant Deans of Teaching and Learning and the respective HoDs as being the responsible officers for the development and review of the policy on QA and QE (*cf.* 4.3.2).

Participants also exhibited an understanding of the responsibilities of the three structures for QM. This aligned to what the institutional documents purported – that MANCOM is responsible for the financial performance of the university and should continue to monitor the effectiveness of internal management and control, based on internal audits and reports (CUT 2014). In addition, participants' opinions confirm that CILT in collaboration with the faculties, is responsible for the promotion of academic excellence and should provide support for all academic staff. It is university policy that all academic staff should support CILT initiatives and take advantage of capacity-building opportunities from their side to ensure that there are best practices in teaching and learning across the university (CUT 2014). Moreover, the participants' opinions pinpoint IPQE as being directly responsible for the academic management of all programmes across the university (*cf.* 4.3.2), as well as to the management of the process of new programme development and external review processes (CUT 2014).

6.2.2.3 Guidelines for quality improvement

Participants in this study agree that the institution does not have guidelines to ensure the quality and rigour of the QIP implementation practices (*cf.* 5.2.4.2). This confirmed what has been discussed in the background to the research problem (*cf.* 1.1 &1.2) that the institution relies on existing guidelines for academic reviews (not for QIPs), which are not informed by an institutionally approved QA policy (CUT 2016a; CUT 2016b; CUT 2016c). This has also been confirmed by the document analysis (*cf.*4.4.2), that the *Revised Manual for Reviews at the Central University of Technology* (CUT 2016b), is silent on providing a more specific level of operational detail, where clarity of processes and procedures is required on how QIPs should be

developed and implemented. Clearly, there are no specific rules or principles that assist in the establishment and implementation of effective practices to achieve quality outcomes in terms of QIPs.

6.2.2.4 Procedures for quality improvement

Participants were unanimous that the institution does not have procedures to ensure quality and rigour of the QIP implementation practices (*cf.* 5.2.4.3). This is connected to the background to the research problem which indicates that the institution relies on existing procedures for academic reviews (not for QIPs), which are not informed by an institutionally approved QA policy (CUT 2016b). This has also been confirmed by the document analysis (*cf.*4.4.3), that the procedures outlined in the *Revised Manual for Reviews at the Central University of Technology* (CUT 2016b) do not provide a detailed outline of the operational steps required to develop and implement QIPs.

6.2.2.5 Support for quality improvement

Participants in this study agreed that that support provided by the institution for QI is rather limited, as it is determined by the resources required. The IPQE assists with the programme review arrangements and logistics. However, the programme does not receive any administrative support to complete the programme portfolio and prepare for the programme review as well as the implementation of QIPs. Some of the participants indicated that once they develop a QIP, they are not even expected to provide a progress report. The reasons behind this might be that there are no clear guidelines and responsibilities beyond the development and submission of the QIP. Further, there are no monitoring procedures for the implementation of the QIP. The QIP action plan template gives the timelines of what is to be done and when – but there is no monitoring system and support in place to implement it.

There is inadequate support concerning training in evaluation and reviews, and QIP implementation practices. The CILT section offers staff training sessions in a "workshop" format; but this is not specifically about the implementation of QIPs. The training programmes need hands-on guidance and other relevant support during the

process to complete the programme portfolio and to prepare for the review and post-review, including compiling the QIP and to execute the actions based on the recommendations. The CILT might accommodate specific sessions should the programme warrant particular development needs, and the Faculty should show support and allow staff the time to attend particular development initiatives. Staff development training initiatives must involve participants in practical examples relating to the internal review process where they, for example, may assist with the preparation of the required documentation. This arose out of a unanimous observation that staff had not experienced a situation where the university/faculty identified a specific matter from the programme review report or the QIP, for solutions or assistance from relevant role-players.

The CHE (2004c) alluded to the support for QIP in terms of the arrangements, frameworks, techniques and resources that are utilised by the institution to sustain and manage existing levels of quality. One of the CUT's primary goals of ensuring operational effectiveness, efficiency and quality, is by fostering an overall institutional culture of continuous QI and the implementation of QIPs which should be based on sound educational theory and supported by resource-provision and staff development, in addition to the review and evaluation results being explicitly fed into the next planning cycle (*cf.* 3.2.4). However, the participants' opinions confirmed what was highlighted by the document analysis, that the *Revised Manual for Reviews at the Central University of Technology* (CUT 2016b), is silent on the support that needs to be provided for the implementation of QIPs in terms of human resources, financial resources, and infrastructure (*cf.* 4.4.4). Procedures need to be in place to ensure that insights and learnings from such reviews are acted upon, and that plans for improvement are implemented. This includes ensuring support and resources for the implementation of QIPs.

6.2.3 Examples of operational effectiveness for quality improvement at the CUT

This section summarises the conclusions drawn in this study with regard to the examples of operational effectiveness for QI at the CUT.

6.2.3.1 Review methods and dissemination of review findings

Participants in this study were unanimous that all stakeholders are part of the review process and their feedback is critical for purposes of informing the review methods and ensuring QI. This confirmed what had been highlighted in the institutional documents (*cf.* 4.3.3) that the institution regards the self-assessment process as an integral component of the QA system which focuses on reflection and facilitates continuous improvement (CUT 2016b). Internal reviews are indicative of the way the University assures itself of the quality of the service provided by departments to meet the University's needs, as they consider all departmental activities (management, resources, research, teaching, learning, and assessment), as QA matters (CUT 2016b). This also confirms the institution's commitment to a systematic, planned approach to reach quality benchmarks (nationally and globally) that ensures that programme review findings are used to effect improvement (CUT 2016b).

6.2.3.2 Use of feedback for curriculum development

Lastly, participants agreed that feedback is taken into consideration and improvements to the curriculum are made, where possible. This confirmed that at the CUT, a self-assessment process (*cf.* 4.3.3) is an integral component of a quality system, through which the institution determines whether products, services and management processes meet the criteria for quality (CUT 2016b). This also agrees with the CHE policy, that the QA system must ensure coherence and alignment among the elements of the system, and contain feedback loops that support and promote improvement (CHE 2017b). One of the purposes of reviews related to the institution/department/programmes, is to ensure that intended learning outcomes and curricula remain current and valid in the light of developing knowledge within the discipline, and the application of that knowledge in practice. This includes obtaining feedback (*cf.* 4.3.4) from staff members, students and other stakeholders on the quality of teaching, learning and assessment (CUT 2016b). This shows that CUT is committed to a systematic, planned approach to QA that ensures that programme review findings are used to effect all-round improvement.

6.3 IMPLICATIONS

The findings of this study as outlined in Chapter 5 have implications.

In order to serve its purpose, the institution should develop QIPs which reflect the unique circumstances of its services, and ensure that the climate for change is present (*cf.* 5.2.2.1 & 6.2.1.1). Thus, QIPs need to be planned to effect actions within a time-frame in order to be a continuous process having short and long-term plans. Also, QIPs should document what needs to be addressed, how the programme plans to address the shortcomings, what are the timelines, and what resources are required, so that the progress can be followed up (*cf.* 5.2.2.2, 6.2.1.1 & 6.2.1.2).

Moreover, QIPs should not only document what needs to be done, but the recommendations of the academic review report should be implemented, and its implementation measured and monitored. This must be done at a higher level so that management can identify all the critical areas and make sure that the most critical resource requirements are provided across the institution when needed. The departments need to motivate strongly if they deem the resources as being necessary to improve the level of quality of their programmes. In other words, QIPs must get the attention of the highest decision-making bodies and not only end up in committees merely to be "noted". It is evident, therefore, that monitoring, and evaluation are key to ensuring that the action plans as identified in the QIPs, are implemented.

However, QIPs need to be supported by quality resource provision, and implementation (of QIPS) needs to be monitored and evaluated (*cf.* 5.2.2.4). Since programme and course reviews are key segments of an IQMS, strategies should be set up to ensure that plans for improvement are implemented and monitored. The institution's QMS for programme review should involve clear reporting lines and measures for accountability, ensuring that review results are reported up the management system and followed up with monitored improvement plans. Progress in the implementation of QI strategies needs to be monitored using a mid-cycle progress report from the relevant programmes, and these need to be monitored closely by the Assistant Deans of Teaching and Learning in collaboration with the

HoDs, academic staff, IPQE and CILT. The monitoring by IPQE comes out very strongly in the views expressed by the participants; however, it seems that this is not happening in practice, hence the institution needs to put measures in place to ensure that this is implemented and that IPQE is well-resourced, and its capacity is built to ensure that the functions of monitoring and evaluation of QIPs are undertaken.

The CUT policies, guidelines and procedures for academic review need to be revised (*cf.* 5.2.3, 5.2.4 & 6.2.2), and should prescribe a format of a QIP to include:

- how the programme plans to deal with the recommendations of the review report;
- how and why priorities are established;
- where the overall responsibility for the improvement plan lies;
- who approves the improvement plan;
- how progress will be monitored and evaluated; and
- what are the details of the action plan for the implementation of the recommendations.

With regards to the operational effectiveness for CUT's QIP implementation practices, there should be clear reporting lines so that there is no ambiguity. This also entails giving details of those who are accountable for various aspects of QIPs. The student surveys should be regarded as being very important to determine student opinion on the programme or course so that their feedback can inform the curriculum, as well as the teaching and assessment practices. The review report, including the QIPs, should also be made available to students so that the process can adhere to the principle of transparency (*cf.* 5.2.5, 5.3.2.3 & 6.2.3).

With regard to staff development initiatives provided by CILT, it is evident from the issues identified by the participants that the existing plan is not informed by the needs of the academics and therefore does not add value in addressing the QI areas as identified in the QIPs. The training workshops are also scheduled during the time that the academics are in class and therefore they are not able to attend. Therefore, CILT must do their planning better - rather have fewer staff development workshops with training scheduled when academics are generally available. A consultative needs-

analysis process must be done first before the final programme for the year is disseminated to all stakeholders. It would be advantageous if the training workshops offered by CILT were informed by the needs of the faculties and academic staff. This also becomes part of personnel development for performance management. Staff development should, therefore, expose academics to contemporary concepts, new theories, creative ways of social practices in academia, and innovations to transform curriculum, teaching and learning practices, research, and community engagement (*cf.* 5.2.2.5 & 6.2.1.5).

6.4 REFLECTION ON THE ACHIEVEMENT OF THE STIPULATED RESEARCH OBJECTIVES

As already stipulated (*cf.* 1.4), the following objectives have been addressed and achieved accordingly in this study:

i.   Stipulate literature perspectives on the implementation of QIPs in HE (see Chapter 2).

The first objective was pursued in Chapter 2, where a plethora of relevant literature, elicited from diverse electronic databases (*cf.* 1.8.6.1) covering various disciplinary fields, were searched between July 2016 and December 2017. Due to a gap in the literature with regards to studies that have been conducted on the implementation of QIPs, the researcher explained concepts such as quality, QA, QM, QE, and CQI. The researcher began by conceptualising what is quality in the HE setting and the current difficulties in defining quality (*cf.* 2.2.1). In this study, the researcher defines both QA and QE (*cf.* 2.2.2). This was followed by the discussion of QM in HE (*cf.* 2.2.3). Then followed the discussion on the need for effective CQI within the HE context (*cf.* 2.2.4), and closed by summarising the relationship between quality, QM, QA, QE and CQI (*cf.* 2.2.5). This literature review formed a basis for the research instruments (*cf.* 1.8.6.3 & 1.8.6.4), and the discussion clarified the distinction between the different concepts which are significant in this study as it paves the way in understanding how to improve on the institution's core functions by implementing QIPs.

ii.   Provide an overview of HEQC's frameworks on various aspects relating to QIP practices in the South African HE context (see Chapter 3).

An overview of the HEQC's frameworks on various aspects relating to QIP practices was provided in Chapter 3. The researcher reviewed the HEQC framework for QIP implementation practices in the South African context of HE from the promulgation of the Education White Paper 3 in 1997 (*cf*. 3.2.1), the founding of the HEQC in 2001 (cf. 3.2.2), the framework and resources for improving teaching and learning (*cf*. 3.2.3) and (3.2.4), the implementation of institutional audits in 2004 (*cf*. 3.2.5 and 3.2.6), the shift to QE in 2014 (*cf*. 3.2.7), up to the proposed integrated approach to QA, institutional quality reviews and framework for accreditation and re-accreditation of programmes in 2017 and 2018 (*cf*. 3.2.8, 3.2.9 and 3.2.10). The review of the HEQC's frameworks also formed the basis for the research instruments (*cf*.1.8.6.3 & 1.8.6.4),

iii.   Identify CUT's institutional policies, guidelines, procedures and support for QIP implementation practices via document analysis (see Chapter 4).

In Chapter 4, the researcher documented institutional practice within a particular institutional setting and provided institutional context detail on the five (5) focus areas that form the basis of the research instruments (*cf*. 4.2 & 4.3). In pursuing the third objective of the research study, the researcher identified policies (*cf*. 4.4.1), guidelines (*cf*. 4.4.2), procedures (*cf*. 4.4.3), and support (*cf*. 4.4.4) for QIP implementation practices. The researcher then closed the chapter with a SWOT analysis (*cf*. 4.4.5) of the identified policies, guidelines, procedures and supporting documents. The critical challenge that highlighted from the pursuit of the third objective was that even though there are guidelines and procedures for QM and QI, there is an absence of a coherent institutional QA policy which sets expectations, guides actions and provides effective leadership of all the institution's stakeholders with regards to the QIP implementation practices. The existing policies, guidelines, procedures, and support for QI at the university, indicate the prevalence of the implementation of QA, QE mechanisms and processes, although there is no formally approved institutional QA policy. Much has been achieved in terms of planning for internal and external assessment. The IPQE section continues to use programme

reviews which have successfully been implemented. The only challenge that emerges is the implementation of QIPs. The institutional guidelines and procedures are very clear as to the responsibilities for the academic review processes, but vague as to the implementation and monitoring of the QIPs.

iv. Explore the experiences and perceptions of CUT's academic-line managers (HoDs) and academics (senior lecturers and lecturers) concerning the implementation of QIP practices through questionnaires and semi-structured interviews (see Chapter 5).

The researcher analysed and interpreted research findings in Chapter 5. The experiences and perceptions of CUT's academic line managers and the academic staff on QIP implementation practices at the CUT were discussed, with special reference to the second, third and fourth subsidiary research questions as identified in Chapter 1 (*cf.* 1.3).

. Firstly, a mainly qualitative questionnaire, complemented by a quantitative demographical section (see Appendix D), was completed by the CUT's HoDs and senior lecturers and lecturers during February 2018. Secondly, interviews (see Appendix E) with four (4) selected HoDs were conducted during September 2018. The analysis of the responses of participants from the two research instruments which were used to collect data for this study were presented. The researcher started with the quantitative data (i.e. demographical detail) to present the profile of the participants in the questionnaire (*cf.* 5.2.1). The researcher then proceeded with the qualitative data gleaned from the questionnaires (*cf.* 5.2.2) and four (4) interviews with the selected HoDs (*cf.* 5.3) using inductive data analysis.

v. Ascertain areas for improvement to the implementation of QIPs at the CUT (see Chapters 5 & 6).

The last objective, namely the implications for improvement to the implementation of QIPs at the CUT, is discussed in Chapter 6 (*cf.* 6.2.1.7 & 6.3). It is clear from the conclusions drawn from this study that QIPs need to be supported by resource provision and that their implementation needs to be monitored and evaluated,

especially since programme and course reviews are key segments of an IQMS. The participants recommended what has been proposed by the CHE (CHE 2004a; CHE 2004b; CHE 2007) that the institution's QMS for programme review should ensure that results are reported up the management system and followed up with monitored QIPs (*cf.* 3.2.4); and that the QIPs should include how progress will be monitored and evaluated (*cf.* 3.2.5 & 3.2.6). The monitoring by IPQE comes out very strongly in the views expressed by the participants. Although this (*cf.* 4.3.1; 4.4.2; 4.4.3) is stipulated in the guidelines and procedures of the *Revised Manual for Reviews at the Central University of Technology* (CUT 2016b), it seems that this is ignored in practice. The institution will need to ensure that this is implemented and that IPQE is well-resourced, and its capacity is built to ensure that the function of monitoring and evaluation of QIPs is undertaken as per national and international norms. Therefore, the QIPs should not only document what needs to be done, but also the recommendations of the academic review report should be implemented, and its implementation measured and monitored.

In summary, the research objectives that were stipulated in this study have been achieved.

6.5 SHORTCOMINGS AND FUTURE RESEARCH

The following shortcomings have to be taken into account:

- The limited scope of this HE case study showed that some aspects of institutional QM could not be tackled comprehensively.
- The quality of the research could be improved, and generalisations could be justified by using a more comprehensive research group.

Considering the research findings of this study, it appears to be important that further exploration is required, namely:

- The extent to which the IQMS in HEIs is linked to quality policy, strategic goals, responsibility of the leaders, suitable structural, personnel and financial

conditions for the processes, process management, controlling the results, and feedback between results and goals.

- The link between the implementation of QIPs and the collaborative efforts and endeavours of different partners both internally and externally.

- Future research may also examine the relationship between the quality of teaching, learning, research, and community engagement, including academic staff members' professional training.

All these issues were raised in this study but only dealt with rather superficially due to thematic and structural constraints.

6.5 CONCLUSION

The underlying purpose of this study was to investigate the conceptual framework for the implementation of QIPs in HE and their implications for QIP implementation practices - as discussed in Chapter 1 and 2. An overview of HEQC's frameworks and documents on various aspects relating to quality improvement practices in the South African HE context were discussed in Chapter 3. The key institutional policies, guidelines, procedures and support for the quality improvement plan implementation practices, were discussed in Chapter 4; they map out the extent to which these influence the key quality improvement functions of the university as an academic institution and service-provider.

Like similar studies cited in Chapters 1 and 2, this exploratory study investigated and portrayed the experiences and perceptions of key actors involved in the implementation of the QIPs within a South African HE case study university. A qualitative approach was appropriate for this exploratory HE study because it served as a multi-strategy in focus, which included interpretive and naturalistic ways to deal with the topic. This implied that the researcher thought about this investigation within the institution's own context, endeavouring to understand the participants' experiences and perceptions. Furthermore, this qualitative research is inductive in that the researcher constructed abstractions, ideas, speculations, and hypotheses, using questionnaires and interviews to extract and analyse data.

South African universities are faced with the challenge of self-renewal and development and have their own strategies of ensuring that their teaching and learning activities contribute to the attainment of goals as set out in their visions, missions and strategic plans. Chapter 3 has shown that QI is important for management purposes, and as a tool to focus on planning, organisation and control. This helps HE providers to self-assess their performance in delivering quality higher education and to plan future improvement. HEIs in South Africa are required to document the strengths of their services and to recognise areas for improvement through quality improvement plans as required by the CHE. They need to develop QIPs which reflect the unique circumstances of their services and ensure that the climate for change is present.

The adherence to the principle of TQM in general, and specifically to CQI, made the South African higher education sector to become involved in cooperative endeavours with different partners, both internally and externally. This has become important in South African HE as enhancing the quality of academic programmes and administration services is significant to upgrade the status of HEIs. The establishment of the CHE was very important to develop and implement a system of QA for HE, including programme accreditation, institutional audits, quality promotion and capacity development, standards development and the implementation of the HEQSF. The CHE has executive responsibility for QA and promotion, and discharges this responsibility through the establishment of a permanent committee (as required by the Higher Education Act 101 of 1997 (RSA 1997b), under the auspices of the HEQC. The implementation of QIPs is one of the ways in which the South African HEQC and the higher education institutions (HEIs) of carry out QA, QE and QI mandates.

As this study has demonstrated (see Chapter 4), like most South African universities, CUT has relied on traditional modes of QA such as the system of external examiners and professional bodies, as well as regular internal programme and departmental reviews, assessments, and evaluations. Accordingly, the review and improvement of teaching and learning is the responsibility of individual lecturers authorised through

the appropriate management and governance structures such as Faculty Boards and the Senate.

It is evident that the University has always had its unique conceptions of quality and specific operational mechanisms for its assessment. The functional conceptions of quality and QA are embedded within the matrix of policies, guidelines and practices of the institution. However, the critical challenge at the institution is that although guidelines exist for procedures concerning QM and QI, there is an absence of a coherent institution QA policy which spells out expectations, guides the actions and provides effective leadership to all the institution's stakeholders with regards to the QIP implementation practices. As shown in the detailed overview of policies, guidelines, procedures and support for QI at the institution (*cf.* 4.4), there is no formally approved institutional QA policy for the implementation of QA and QE mechanisms and procedures at the institution. However, much has been achieved in terms of planning for internal and external assessments. The IPQE section continues to use programme reviews which have successfully been implemented in the past. The critical challenge that emerges is the implementation of QIPs. The institutional guidelines and procedures are very clear as to the responsibilities for the academic review processes, but vague as to the implementation and monitoring of the QIPs.

A significant conclusion of this study, therefore, is that the implementation of QI in general, and the implementation of QIPs in particular, are largely dependent on the creation of an appropriate organisational culture. The utilisation of TQM, in general, and CQI, specifically, to HE, is becoming more imperative. In spite of the fact that these concepts are produced in the business and manufacturing sector, and based on the assumption of strategic management, researchers see TQM as a critical achievement element of HEIs and the best way to accomplish constant quality change in the long-term. CQI is a management model created to give a framework for debate and discussion about measures that may lead to improvements in the educational process and it depends on experiences, expertise, and commitment of all members of an organisation to improve the processes by which the customers are served. In recognising the significance of successful CQI in HE, there is an urgency that all universities will have set up a system to monitor and improve the quality of their academic programmes and services; and as a rule, QA and accreditation

agencies require that established procedures inside universities guarantee this as an ongoing QI process.

In conclusion, it must be pointed out that at CUT there is no institutionally approved policy on QA, programme development, implementation, monitoring and review which is supposed to set high standards, guide the actions and provide effective leadership for the university's academic line managers (HoDs) and academics (senior lecturers and lecturers) who are responsible for the implementation of QIPs. However, in fairness to the institution, it is clear from other existing policies, guidelines and procedures that have been identified in this study, that the institution has as its own objective to enhance the effectiveness of the quality of its core business activities of teaching and learning, research, academic support services, community engagement, as well as the maintenance of academic standards. Thus, the conclusions of studies such as this one, may have to be reconsidered as policies become developed and implemented institutionally.

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APPENDIX A: PARTICIPANT INFORMATION SHEET

06 February 2018

Title: A policy perspective on quality improvement plan implementation practices: a case study

Dear prospective participant

My name is **Vakele Nobongoza (student number: 2012107526),** and I am doing a master's study under the supervision of Dr S. M. Holtzhausen, in the School of Higher Education Studies at the University of the Free State (UFS). We are inviting you to participate in a study entitled: ***A perspective on quality improvement plan implementation practices: a case study.***

The aim of the study is to determine A University of Technology's (UoT's) academic line managers' (heads of department) and academics' (senior lecturers and lecturers') experiences and perceptions on the implementation of quality improvement plan practices via questionnaires and semi-structured interviews/focus groups. Therefore, the purpose is to identify policies, guidelines, procedures and support for quality improvement plan implementation practices.

You are regarded as the key informant because you can best help to understand the UoT's quality improvement plan implementation practices based on your first-hand experience of the phenomenon. You will therefore be able to purposefully inform an understanding of the research problem of the study. All steps will be taken to uphold confidentiality during this study.

The study involves questionnaires and semi-structured interviews/focus groups. The questionnaire will be targeted at university faculty level and is meant to collect data

that will be used purely for my master's degree purposes. Your responses will therefore be treated with the utmost confidentiality.   This study will adhere to the UFS Ethical Clearance Guidelines and procedures, specifically with regards to the following principles:

- *Anonymity* of all informants (no references will be made to the participants by name);
- *Informed written consent* forms will be signed by all participants;
- *Voluntary participation* where the participants will be provided with an opportunity to withdraw, if they wish to do so at any time, without being disadvantaged in any way;
- *No harm, whether physical or psychological,* as a result of their participation is guaranteed by using pseudonyms during data collection and in the final research report.
- *Confidentiality* will be ensured as data and documents will be password-secured and accessed only by the main researcher; and
- *Institutional approval* will be sought to conduct the research study from the office of the Vice-Chancellor, the deans and programme co-ordinators of the relevant faculties before any data are collected.

Your name will not be recorded anywhere, and no one will be able to connect you to the answers you give. Your answers will be given a fictitious code number, or a pseudonym and you will be referred to in this way in the data, any publications, or other research reporting methods such as conference proceedings*.*

Your answers may be reviewed by people responsible for making sure that research is done properly, including the transcriber, external coder, and members of the Research Ethics Committee. Otherwise, records that identify you will be available only to people working on the study, unless you give permission for other people to see the records.

A report of the study may be submitted for publication, but individual participants will not be identifiable in such a report.

Hard copies of your answers will be stored by the researcher for a period of five years in a locked cupboard/filing cabinet for future research or academic purposes; electronic information will be stored using password-protected computer. Future use of the stored data will be subject to further Research Ethics Review and approval if applicable.

Participants will not be remunerated for participating. There will be no costs incurred by the participant.

The participants are kindly requested to respond to all questions as honestly as humanly possible to enable the researcher to draw the most accurate conclusions on quality improvement plan practices at the university. The questionnaire will also be followed up by interviews that will include participants other than those targeted by this instrument. It may however be more informative following up certain responses given in this questionnaire by interviewing the same participants. Please note that you are also free to send any other relevant information or ideas you may have on quality improvement issues at the university through my contact details provided below.

Interviews will be approximately 1 hour in duration, utilising a prepared semi-structured interview schedule. The interviews will be conducted at a mutually agreed venue where you as the participant will feel safe and secure.

Your participation is entirely voluntary, and you are under no obligation to participate in this study. You will not suffer any consequences or loss for choosing not to participate. It is also your right to withdraw at any time with no repercussions. Participants will, however, not be allowed to withdraw from the study once a completed questionnaire has been submitted.

The benefits of this study will be for academic managers and academics at CUT to improve the current policies and procedures in general, concerning the implementation of quality improvement plans in particular.

This study has received (after this application has been successful) written approval from the *Research Ethics Committee of the Faculty of Education*, University of Free State. A copy of the approval letter can be obtained from the researcher.

Upon completion of the study, you will be informed of the research findings and a bound copy of the dissertation will be provided to the institution, after it has been completed and examined. If you require any further information, please do not hesitate to contact me on 076 269 7786 or vakele.nobongoza@gmail.com.

Should you have concerns about the way in which the research has been conducted, you may contact Dr S. M. Holzhausen at 051 401 2046 or holtzhsm@ufs.ac.za.

Thank you for taking time to read this information sheet and for participating in this study.

Yours faithfully

Vakele Emmanuel Nobongoza
Student Number: 2012107526
Contact Number: 0762697786
Email Address: vakele.nobongoza@gmail.com

APPENDIX B: INFORMED CONSENT LETTER

<div align="right">
Pleasantville 28
Karl Kielblock Street
Langenhoven Park
9301

06 February 2018
</div>

Dear participant

A perspective on quality improvement plan implementation practices: a case study

I would like to invite you to participate in a master's study being pursued at University of the Free State that will be conducted using the Central University of Technology (CUT) as the research site and case study. This research will be executed under the supervision of Dr S. M. Holtzhausen. The title of the research is: ***A perspective on quality improvement plan implementation practices: a case study***. Therefore, the aim of this study is to determine CUT academics' and academic managers' experiences and perceptions on the implementation of quality improvement plan practices.

You are regarded as the key informant because you can best help to understand CUT' quality improvement plan implementation practices based on your first-hand experience of the phenomenon. Your participation is entirely voluntary, and you are under no obligation to participate in this study. You will not suffer any consequences or loss for choosing not to participate, but it is also your right to withdraw at any time with no repercussions.

Your participation in this study will involve completing a qualitative opinion questionnaire. Thereafter, a selection of participants will be contacted to participate in follow-up semi-structured interviews.

Yours faithfully

Vakele Emmanuel Nobongoza

Email Address: vakele.nobongoza@gmail.com

CONSENT TO PARTICIPATE IN THIS STUDY

I, _____ (participant's name), confirm that Mr Vakele Nobongoza has requested my consent to take part in the study *"A perspective on quality management improvement plan implementation practices: a case study"*. He has informed me about the nature, procedures, potential benefits and anticipated inconvenience of participation. I have read and understood the study details as explained.

I hereby:

- give free and informed consent to participate in the above-mentioned research study.
- understand what the study is about and agree to voluntarily participate in this study;
- agree that I can withdraw from the study at any time; and
- give the researcher permission to make use of the data gathered from my participation.

I am aware that the findings of this study will be anonymously processed into a research report. I have received a signed copy of the informed consent agreement.

Full name of participant:

_____

Signature of participant: _____ Date: _____

Full Name of Researcher:

Vakele Emmanuel Nobongoza

Student Number: 2012107526

Contact Number: 0762697786

Email Address: vakele.nobongoza@gmail.com

Signature: _____Date: _____

APPENDIX C: INSTITUTIONAL PERMISSION LETTER

Institutional Planning and Quality Enhancement

Central University of
Technology, Free State

MR VAKELE NOBONGOZA
PLEASANTVILLE 28
KARL KIELBLOCK STREET
LANGENHOVEN PARK
9301

vnobongoza@cut.ac.za

PERMISSION FOR MR VAKELE NOBONGOZA TO CONDUCT SURVEY AND SEMI-STRUCTURED INTERVIEWS AT CUT CAMPUSES FOR HIS MASTER'S STUDY ENTITLED "A *PERSPECTIVE ON QUALITY IMPROVEMENT IMPLEMENTATION PRACTICES: A CASE STUDY*."

Dear Mr Vakele Nobongoza

This is to confirm that you have been granted permission to conduct survey and semi-structured interviews at The Central University of Technology campuses for his master's study entitled "A *Perspective On Quality Improvement Implementation Practices: A Case Study*."

The conditions of the conditional permission are:
- The survey will not interrupt any of the official activities at the CUT;
- You will supply us with the copy of your report;
- The cost of all related activities will be covered by yourself;
- Recruitment of participants is the sole responsibility of yourself;
- Voluntary nature of the potential participant's decision to consent to participate should be strictly observed;
- You should not disclose a potential participant's decision to participate or otherwise to any other party;
- Permission does not compel, in any sense, participation of staff members or students in your survey.

ACTING DIRECTOR: INSTITUTIONAL PLANNING AND QUALITY ENHANCEMENT
DR A SZUBARGA
23 JANUARY 2018

CUT's ACADEMIC LINE MANAGERS' AND ACADEMIC STAFF MEMBERS' EXPERIENCES AND PERCEPTIONS OF THE IMPLEMENTATION OF QUALITY IMPROVEMENT PLANS

6 February 2018

Dear Sir/Madam

ACADEMIC LINE MANAGERS' AND ACADEMIC STAFF MEMBERS' EXPERIENCES AND PERCEPTIONS OF THE IMPLEMENTATION OF QUALITY IMPROVEMENT PLANS AT CUT

Vakele Nobongoza (student number: 2012107526) is a registered master's degree student. He is currently conducting research as part of the requirements for the MA (Higher Education Studies) degree in the School of Higher Education Studies at the University of the Free State (UFS).

The title of this research project is: *A perspective on Quality Improvement Plan implementation practices: a case study.* The purpose of this questionnaire is to establish the experiences and perceptions of academic managers and academic staff at CUT regarding the Quality Improvement Plan implementation practices. This study complies with the ethical requirements for postgraduate studies at the UFS (Ethical Clearance Number: **UFS-HSD2016/0622**).

You are kindly requested to complete the attached questionnaire. It would be highly appreciated if you could respond to all questions as honestly as humanly possible, as the success of this study largely depends on your sincere cooperation. All information will be treated with utmost confidentiality. This questionnaire will also be followed by semi-structured interviews/focus groups, which will include only a selected sample of those participants targeted by this questionnaire.

Please follow the instructions provided to complete and submit the questionnaire.

If you have any queries regarding this research project, please do not hesitate to contact me at:

076 269 7786 or vakele.nobongoza@gmail.com.

Thank you for participating in the study.

Yours faithfully

Vakele Nobongoza   Dr S. M. Holtzhausen

                                                                (Supervisor)

QUESTIONNAIRE

ACADEMIC LINE MANAGERS' AND ACADEMIC STAFF MEMBERS' EXPERIENCES AND PERCEPTIONS OF THE IMPLEMENTATION OF QUALITY IMPROVEMENT PLANS AT CUT

Dear Participant, ☐☐☐☐☐

You are requested to complete this questionnaire because of your expertise on Quality Improvement Plans, as I would like to determine your experiences and perceptions of the implementation thereof. Please note that your responses will be treated confidentially, and that your name will not be associated with the findings in any way. Complete all the following questions, either by selecting the appropriate category/categories, or by expressing your views concerning the open questions.

Thank you, in advance, for your insights and contribution!

I, …………………………………….., give my voluntary consent to participate in this research.

Date: …………………………………Signature: …………………………………….

SECTION A: BIOGRAPHICAL INFORMATION		
1.	**What is the name of your faculty?**	
A	Engineering and Information Technology	1
B	Health and Environmental Sciences	2
C	Management Sciences	3
D	Humanities	4
E	Other (please specify)	5
2.	**What is your gender?**	
A	Female	1
B	Male	2
3.	**What is your age category?**	
A	Under 20 years	1
B	20 to 29 years	2
C	30 to 39 years	3
D	40 to 49 years	4
E	50 to 59 years	5
F	60+ years	6

4.	What is your highest academic qualification?	
A	Bachelor's degree	1
B	Honours degree	2
C	Master's degree	3
D	Doctoral degree	4
E	Other (please specify)	5
5.	What position do you hold at the University?	
A	Lecturer	1
B	Senior Lecturer	2
C	Associate Professor	3
D	Professor	4
E	Head of Department	5
F	Programme Co-ordinator	6
G	Other (please specify)	7
6.	What is your employment status?	
A	Permanent	1
B	Temporary	2
C	Full-time	3
D	Part-time	4
7.	How long have you been teaching/working at CUT?	
A	0 to 4 years	1
B	5 to 9 years	2
C	10 to 14 years	3
D	15 to 19 years	4
E	20 to 24 years	5
G	25+ years	6

SECTION B: IMPLEMENTATION OF QUALITY IMPROVEMENT PLANS

According to the Higher Education Quality Committee (HEQC) (2004), the term *"Quality Improvement Plan"* refers to an arrangement created by the reviewed institution, department or programme, determining activities, and assigning obligations and time-frames, with the specific end goal of addressing the requirements and proposals of the review report.

*Please comment in the spaces provided below.

8.	What do you regard as the purpose of *Quality Improvement Plans?*
9.	What do you regard as the value of *Quality Improvement Plans*? If you are of the opinion that they do not add value, please motivate your view.

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10.	In your opinion, are *Quality Improvement Plans* based on sound educational theory? Please motivate your answer.
11.	In your opinion, are *Quality Improvement Plans* supported by resource-provision? Please motivate your answer.
12.	In your opinion, are *Quality Improvement Plans* supported by staff development? Please motivate your answer.
13.	How are the feedback and results of the programme review/evaluation used to effect improvements to the programme's design for the next planning cycle?
14.	How are the feedback and results of the programme review/evaluation used to effect improvements to the programme's delivery, with special reference to the further development of academic staff members' educational expertise?
15.	What type of improvements to the implementation of CUT's *Quality Improvement Plans* can you recommend?

SECTION C: POLICIES FOR QUALITY IMPROVEMENT	
The CUT Institutional Policy Framework (2016) defines a policy as a formal statement of standards and principles, or a position that is intended to guide or direct decision-making and operations that support the achievement of the University's vision and objectives. Policies have a long-term focus and are applied across the University as a whole. This forms the foundation of the University's governance processes, and the basis of its quality system. In addition, policies are characterised by an indication of what needs to be done, rather than how it should be done. Policies support the achievement of quality outcomes, and reduce institutional risk, by establishing standards and internal controls. *Please comment in the spaces provided below.*	
16.	Which institutional policies do you believe assist you with the implementation of Quality Improvement Plans?
17.	Which faculty/departmental policies do you believe assist you with the implementation of Quality Improvement Plans?

18.	How does policy require of programme coordinators or heads of department to take responsibility for ensuring that insights from reviews at both programme and course levels are recorded, reported and reflected upon, and that strengths are built upon, and weaknesses addressed?
Strengths	
Weaknesses	

SECTION D: CUT QUALITY IMPROVEMENT IMPLEMENTATION PRACTICES

D1: INSTITUTIONAL RESPONSIBILITY FOR QUALITY MANAGEMENT

The HEQC proposes that institutions have a delegated senior administrator or manager, typically supported by a quality committee or equivalent, to take charge of the development, advancement and review of the policy on quality assurance and management, and to manage the execution thereof. The implementation of the quality assurance and management policy and strategy should be incorporated into the sets of expectations of all line managers. Furthermore, the policy should be broadly disseminated throughout the university, and should be owned by those in charge of its execution (CHE, 2004c). The CUT Guidelines for Reviews (CUT, 2016b) state that the relevant Head of Department and department will compile a Quality Improvement Plan (QIP) in response to the outcome of the external review, as well as a report on the outcome of the external peer review.

Please comment in the spaces provided below.

19.	Does your institution/faculty/department's quality management system for programme reviews have clear reporting lines that ensure that review results are reported up the management system, and are followed up with monitored Quality Improvement Plans?
20.	How does the quality management system for programme review ensure accountability?
21.	Who has the institution/your faculty appointed to support the quality committee or equivalent, to be responsible for the development and review of the policy on quality assurance and enhancement?

22.	**Please comment on the responsibility of the following structures for quality management: Management Committee (MANCOM), Innovation in Teaching and Learning (ILT), and Institutional Planning and Quality Enhancement (IPQE).**
MANCOM	
ILT	
IPQE	

D2: GUIDELINES FOR QUALITY IMPROVEMENT

A guideline is a statement which determines a course of action. It aims to streamline particular processes according to a set routine or sound practice.

The CUT Institutional Policy Framework (2016) defines guidelines as that which provide rules or principles that assist in the establishment and implementation of effective practices to achieve quality outcomes. These guidelines provide a more specific level of operational detail, where clarity of processes and procedures is required. Unless otherwise stated, guidelines normally do not have the force of establishing rights, requirements and responsibilities.

Please comment in the spaces provided below.

23.	**Which guidelines do the institution offer academic line managers and academic staff to ensure the quality and rigour of the quality improvement implementation practices?**
24.	**In your opinion, what informed these faculty/departmental guidelines?**

D3: PROCEDURES FOR QUALITY IMPROVEMENT

The CUT Institutional Policy Framework (2016) defines a procedure as a detailed outline of the operational steps required to implement a policy. A procedure may be further supported by guidelines and local (unit) documents. It provides specific, "how-to" information, and will normally be developed by the office responsible for the administration of a policy. Procedures will: a) provide clear instructions on the manner in which policies are to be implemented; b) provide information on the actions required to implement policy principles; c) assign responsibilities; and d) enable the monitoring of policy implementation. Procedures are to be reviewed on a three-year basis. Earlier reviews may occur if alignment with the following is required: a) amendments to a policy; and b) changes in operational needs. Procedures may be further supported by guidelines and internal local documents.

Please comment in the spaces provided below.

25.	Which procedures of the institution offer academic managers and teaching staff to ensure the quality and rigour of the quality improvement implementation practices?
26.	In your opinion, what informed these faculty/departmental procedures?

D4: SUPPORT FOR QUALITY IMPROVEMENT

According to the Council on Higher Education (CHE, 2004c), support for quality improvement refers to quality support – the arrangements, frameworks, techniques and resources that are utilised by the institution to support and manage existing levels of quality.

Please comment in the spaces provided below.

27.	Which support does the institution offer academic line managers and academic staff to ensure the quality and rigour of the quality improvement implementation practices?
28.	Mention types of staff training offered on evaluation and reviews in general, and on quality improvement implementation practices in particular?

D5: REVIEW METHODS AND DISSEMINATION OF REVIEW FINDINGS

At CUT, a self-assessment process is an integral component of any quality system, through which the institution undertakes its own assessment to determine whether products, services and management processes meet the quality criteria. Therefore, the process facilitates continuous improvement, and fosters a "learning organisational culture". It is not a checklist of compliance; rather, it focuses on reflection. The internal review process of academic programmes operates on a five-year cycle, as determined by Senate. The primary purpose of the five-year reviews is to determine programme quality, programme viability, and the future direction of departments (CUT, 2016b). An external review at CUT is a type of programme review that is conducted for purposes of accreditation by external professional bodies, or as part of a national review by the HEQC. It is important to note that these reviews are usually summative, judgement-orientated evaluations, where judgements are made by external panels against externally prescribed criteria. The CUT is committed to a systematic, planned approach to quality assurance that ensures that programme review findings are used to effect improvement. This approach aims to ensure comparable treatment across the University, whilst simultaneously recognising that review and improvement are always context-specific, and that professionals need discretionary space to reflect on and improve their practice. Departments whose academic programmes are being reviewed can request support from IPQE to prepare for the review, and to provide guidance in light of the review findings (CUT, 2016b).

	Please comment in the spaces provided below.
29.	**At programme level, how are the perspectives of students, those teaching in the programme, external examiners, and other stakeholders (e.g. professional bodies, employers) sought, for purposes of informing the review methods and ensuring quality improvement?**
30.	**At course level, how are the perspectives of students, course/module convenors, and, ideally, peers, sought, for purposes of informing the review methods and ensuring quality improvement?**
31.	**How are the findings of the review or evaluation made available to stakeholders/academics/students?**
Stakeholders	
Academics	
Students	

D6: USE OF FEEDBACK FOR CURRICULUM DEVELOPMENT

At CUT, the purpose of a self-review exercise is to obtain feedback through meetings and documentation from staff members, students and other stakeholders on the quality of teaching, learning and assessment, the student learning experience, and learning resources (CUT, 2016b).

Please comment in the space provided below.

32.	**How is feedback from diverse stakeholders during course and programme reviews used to effect curriculum improvement?**

D7: STAFF DEVELOPMENT AND SUPPORT

The CUT commits itself to shaping its academic status to that of national and international higher education institutions by ensuring high-quality, niche-focused and differentiated teaching and learning programmes and staff development. One of the main goals is ensuring operational effectiveness, efficiency and quality, by fostering an overall institutional culture of continuous quality improvement and the implementation of Quality Improvement Plans, as provided by the HEQC, Professional Bodies (PBs), and other Education and Training Quality Assurance Agencies (ETQAAs) both nationally and internationally (CUT, 2014).
Please comment in the spaces provided below.

33.	**On the basis of review results, how does the institution/faculty provide support towards the further development of the educational expertise of its academic staff?**

34.	**What educational expertise is made accessible to academic line-managers and academic staff to support them in interpreting the findings of academic reviews, and formulating plans for quality improvement?**

Thank you for your participation!

APPENDIX E: INTERVIEW SCHEDULE

**CUT'S ACADEMIC LINE MANAGERS AND ACADEMIC STAFF MEMBERS'
EXPERIENCES AND PERCEPTIONS OF QUALITY IMPROVEMENT IMPLEMENTATION
PRACTICES**

Semi-structured interview schedule

September 2018

A: INTRODUCTION OF INTERVIEW AND CONTEXT OF INTERVIEW

Dear Participant

My name is Vakele Nobongoza (student number: 2012107526). I am a registered master's degree student and currently conducting research as part of the requirements for the MA (Higher Education Studies) degree in the School of Higher Education Studies at the University of the Free State (UFS).

The title of this research project is: *A perspective on Quality Improvement Plan implementation practices: a case study*. This study complies with the ethical requirements for postgraduate studies at the UFS (Ethical Clearance Number: UFS-HSD2016/0622).

The purpose of this semi-structured interview is to establish your experiences and perceptions regarding the Quality Improvement Plan implementation practices, with special reference to your expertise as well as the identified gaps in the qualitative questionnaire.

Please note this semi-structured interview will be recorded. Your responses will be treated confidentially.

Thank you, in advance, for your insights and contribution!

I, …………………………………….., give my voluntary consent to participate in this semi-structured interview.

Date: ……………………………Signature: ………………………………….

Vakele Emmanuel Nobongoza
Student Number: 2012107526
Contact Number: 0762697786
Email Address: vakele.nobongoza@gmail.com

B: BIOGRAPHICAL QUESTIONS

1.	What is the name of your faculty?	
A	Engineering and Information Technology	1
B	Health and Environmental Sciences	2
C	Management Sciences	3
D	Humanities	4
E	Other (please specify)	5
2.	**What is your gender?**	
A	Female	1
B	Male	2
3.	**What is your age category?**	
A	Under 20 years	1
B	20 to 29 years	2
C	30 to 39 years	3
D	40 to 49 years	4
E	50 to 59 years	5
F	60+ years	6
4.	**What is your highest academic qualification?**	
A	Bachelor's degree	1
B	Honours degree	2
C	Master's degree	3
D	Doctoral degree	4
E	Other (please specify)	5
5.	**What is your employment status?**	
A	Permanent	1
B	Temporary	2
C	Full-time	3
D	Part-time	4
6.	**How long have you been teaching/working at CUT?**	
A	0 to 4 years	1
B	5 to 9 years	2
C	10 to 14 years	3
D	15 to 19 years	4
E	20 to 24 years	5
F	25+ years	6

C: SEMI-STRUCTURED INTERVIEW QUESTIONS

Main questions	Clarifying or supplementary questions
SECTION 1: THE IMPLEMENTATION OF QUALITY IMPROVEMENT PLANS	
The majority of the participants in the qualitative questionnaire defined the purpose of the QIP as "to improve the quality of education provided to students in terms of teaching, learning, and research and community engagement". *Interview Question 1* *How does your department apply this purpose of QIP?*	• *Motivate your answer*
The majority of the questionnaire participants indicated that the value of the QIP is "to improve and enhance the quality of the learning programmes to meet the accreditation standards". Some indicated that, "if practical, QIPs can add value to the integrity of higher education. *Interview Question 2* *How do you think meeting accreditation standards and integrity adds value to higher education?*	• *Motivate your answer*
There seems to be diverse views on whether QIPs are based on sound educational theory or not. *Interview Question 3* *What is your opinion, are QIPs based on sound educational theory or not?*	• *Motivate your answer.* • *Against what guidelines or educational theory are your QIPs based?*
The majority of the questionnaire participants indicated that QIPs are not supported by resource provision. *Interview Question 4* *How are you addressing resource provision of QIPs in your faculty / department / programme?*	• *Motivate your answer.* • *How can the QIP implementation be improved specifically in your faculty/department in terms of resource provision?*

Although the majority of the questionnaire participants feel that QIPs are supported by staff development, some stated that QIPs are not supported by staff development. *Interview Question 5* *How do you motivate your staff to make use of staff development initiatives to address improvement areas for QIP purposes?*	• *Motivate your answer.*

SECTION 2: THE QUALITY IMPROVEMENT PLAN IMPLEMENTATION PRACTICES	
There exists diverse opinions whether there policies in place which assist with the implementation of Quality Improvement Plans. Some of the participants mentioned the following policies: Teaching and Learning plan, CUT Quality Enhancement Strategy, Transformation Policy, Curriculum Development Framework, Admission policy, the Assessment Policy and the Assessment Manual. The participants felt that the QIPs have to be aligned with some of these institutional documents. *Interview Question 6* *What faculty/departmental policies assist you with the implementation of QIPs?*	• *Motivate your answer*
There seems to be diverse views on the responsibility for quality management. Some of the participants believe that NO policy requires the programme coordinators or heads of department to take responsibility for ensuring that insights from reviews at both programme and course levels are recorded, reported and reflected upon, as well as that strengths are built upon, and weaknesses are addressed. While the other participants believed that the existing policies require the programme /coordinators or heads of department to take responsibility for ensuring that insights from reviews at both programme and course levels are recorded, reported and reflected upon, as well as that strengths are built upon, and weaknesses are addressed.	

Interview Question 7 *Despite clear reporting lines for quality management, what is your view on why there are still problems with implementation, monitoring and evaluation of QIPs?*	• *Motivate your answer* • *How would you feel if IPQE/CILT/Assistant Dean were more involved in the monitoring and evaluation of the QIP implementation?* • *How do you ensure sustainability (accountability and reporting lines) of the QIP to be effective?* • *How can the QIP implementation be improved specifically in your faculty/department in terms of monitoring and evaluation?*
There seems to be uncertainty as to who should support the QA committee, and the responsibility of the Teaching and Learning Committee/Faculty Quality Enhancement Committee/Director: IPQE and the Assistant Dean: Teaching and Learning. *Interview Question 8* *In your view, what is the responsibility of the following structures?* • *Teaching and Learning Committee* • *Faculty Quality Enhancement Committee* • *Director: IPQE* • *Assistant Dean: Teaching and Learning*	• *How are these responsibilities clearly communicated?* • *Which structure do you feel should play a more active role in supporting you with the implementation, monitoring and evaluation of QIPs?* • *What kind of training/workshops do you think would be beneficial to your faculty/department in the implementation of QIPs? (Please motivate).*
In terms of the existing guidelines and procedures for reviews, quarterly reports on the implementation of QIPs are required to be submitted to IPQE/UAPQC/Senate. *Interview Question 9* *Do you feel that this could assist in the process of integrating the implementation, monitoring and evaluation of QIPs?*	• *Motivate your answer.*
SECTION 3: EXAMPLES OF OPERATIONAL EFFECTIVENESS FOR QUALITY IMPROVEMENT	
The majority of the participants stated that students/those teaching in the programme,	

external examiners, and other stakeholders, are part of the review process and their feedback is critical for purposes of informing the review methods and ensuring quality improvement. Some of the participants stated that they were not sure how the perspectives of students, those teaching in the programme, external examiners, and other stakeholders are sought, for purposes of informing the review methods and ensuring quality improvement. Interview Question 10 *At course and programme levels, how are feedback and findings communicated to stakeholders? (Please motivate).*	• *Motivate your answer.* • *How is feedback from diverse stakeholders during course and programme reviews used to effect curriculum improvement? (Please motivate).*
Interview Question 11 *Do you have any suggestion for the operational effectiveness for CUT's quality improvement plan practices?*	• *Motivate your answer.*

Thank you for your participation!

APPENDIX F: PROOF OF LANGUAGE EDITING