

# **DOES ACCREDITATION ASSURE QUALITY?**

Doctor of Education Thesis

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## **Abstract**

This thesis delves into the question of whether accreditation can assure quality. To answer this, an accreditation scenario of a private international higher education institution is studied in depth. There are four principal objectives to the research question which are:

1. To investigate how quality is conceptualised by various stakeholders
2. To assess the effectiveness of accreditation standards
3. To examine whether the accreditation process is valid, reliable and relevant, and
4. To evaluate if the accreditation agency enacts what it purports to do.

Based on current theories and approaches to quality and quality assurance, certain elements are highlighted in the research process such as the use of quality standards, issues of accountability and continuous improvement, and the culture and context surrounding an accreditation event. The methodology used is one of participant observation applied to a case study. The occasion of the decennial reaccreditation of a for-profit Swiss school by an American accreditation agency serves as the field of research. Data were collected firsthand from the various constituents engaged in this reaccreditation. Fundamentally, the process comprised of self-evaluation and an on-site peer review, so there is focused discussion on these two critical audit methods and their interrelationship. The field notes are supplemented by longitudinal data representing the last twelve years of involvement in accreditation of the case study school including two other quality assurance approaches, one Swiss and the other, ISO.

After a review of the various school activities which come under the remit of the agency, the accreditation procedures are examined for validity, reliability and relevance. An analytic induction of the findings confirms that accreditation does indeed assure baseline quality, albeit its current orientation towards publicly funded establishments. Thus accreditation of for-profit schools represents an imminent domain of future research.

**Keywords:** accreditation, quality assurance, self-evaluation, peer evaluation

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## **GLOSSARY**

AHLA	American Hospitality and Lodging Association
AHMA	American Hotel and Motel Association
AMOS	Analyse Model voor het Onderwijs in Studierichtingen (A self-evaluation model for institutions of higher education)
AQIP	Academic Quality Improvement Program
Avg	Average
ASEH	Swiss Hotel Schools Association
BA	Bachelor of Arts
CAISA	Commission on American and International Schools Abroad
CD	Compact disc
CEA	Commissariat à l'énergie atomique
CEO	Chief Executive Officer
CHEA	Council for Higher Education Accreditation
CIHE	Commission on Institutions of Higher Education
CIS	Commission on Independent Schools
CTCI	Commission on Technical and Career Institutions
CNRS	Centre national de la recherche scientifique
CPEMS	Commission on Public Elementary and Middle Schools
CPSS	Commission on Public Secondary Schools
CV	Curriculum Vitae
EFAH	European Foundation for the Accreditation of Hotel School Programmes
ECTS	European Credit Transfer System
EFQM	European Foundation for Quality Management
EHEA	European Higher Education Area
ENQA	European Network for Quality Assurance
EQF	European Qualifications Framework
EU	European Union
F&B	Food and Beverage
Filemaker	Database management system
HCIMA	Hotel, Catering and International Management Association
HEFCE	Higher Education Funding Council for England
HEC	Hautes écoles de commerce
HES	Hautes écoles spécialisées
HR	Human Resources
HSH	Hotel School Helvetia
HSHAA	Hotel School Helvetia Alumni Association
INES	International Indicators of Education Systems
INSERM	Institut national de la santé et de la recherche médicale
ISO	International Organisation for Standardisation
IT	Information Technology
IWA	International Workshop Agreement
KPI	Key performance indicators
LRC	Learning Resource Centre
MAMBO	Website management freeware
ME	Module Evaluations

MERCOSUR	Mercado Común del Sur (Southern Common Market)
Mgr	Manager
MOODLE	Virtual learning software
NAFTA	North American Free Trade Agreement
NARIC	National Academic Recognition Information Centres
NCASC	North Central Association of Schools and Colleges
NEASC	New England Association of Schools and Colleges
NMSU	Northeast Missouri State University
OECD	Organisation for Economic Co-operation and Development
Ops	Operations
QAA	Quality Assurance Agency
PDP	Personal Development Planning
PIC	Person in charge
PL	Programme leader
PG	Postgraduate
ROA	Record of Achievement (transcript)
SC	Student Council
SCM	Student Council Meeting
SED	Self-Evaluation Documents
SMS	School Management System
SOW	Schemes of Work
SPC	Student Placement Centre
SPSA	Swiss Private School Agency
SSS	Student Satisfaction Survey
SWA	Strengths and Weaknesses Analysis
SWAT	Special Weapons and Tactics
SWOT	Strengths, Weaknesses, Opportunities, Threats
TQM	Total Quality Management
UK	United Kingdom
US	United States (American)
USA	United States of America
USDE	United States Department of Education
UNESCO	United Nations Educational, Scientific, and Cultural Organization
WCU	Westcreek University

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## **I. INTRODUCTION**

### **A. The Quest for Quality**

The purpose of this research project is to determine whether accreditation can assure the quality of a school. This is a question which increasing numbers of educational managers will face as the world moves towards internationalisation of education and greater reliance on academic quality recognition by various overarching accreditation bodies. While the issue of quality assurance of educational institutions is certainly not new, the impending demands of globalisation has put a new spin on what the world understands today as quality and the contexts in which schools must interpret quality. Quality assurance in the form of accreditation has been in existence for over a century. Today, new challenges are confronted when quality standards and processes are translated into new environments and cultures. This occurs if educational programmes go abroad to new destinations via franchise or articulation agreements or collaborative provisions. New challenges can also surface when non-native academic programmes spring up in emerging economies which have dissimilar pedagogic traditions. Some of the challenges exceed the more predictable theoretical or cultural differences. Many are linked to socioeconomic pressures. They are generated by shifts in industries and demographics and are bound to have a profound effect on global economics.

A boom in a certain industry sector will create a demand-pull that catalyses the burgeoning of vocational institutions. If public funding cannot meet the demand of the new sector, then certainly entrepreneurial education providers will fill the gap with a fresh supply of for-profit schools. An example of this is the tremendous growth which the tourism industry is currently experiencing and the rapidly expanding demand for hospitality education that cannot be met by public education. The same can be said for information technology, alternative energy and biotechnology to name another few areas where the private or corporate sectors must pick up the slack in developing human resources to keep up with the tides of progress. The numbers of private, for-profit educational institutions will grow and, along with it, the competition amongst them to be



the consumers' choice. Managers of private international schools will have to contend with achieving the same kind of recognition that public institutions benefit from in order to stay competitive, maybe even viable. So the importance of this research question is to determine whether accreditation is relevant, reliable and applicable to situations which did not exist before, in new industries, to new education providers, and for a new generation of learners.

## **B. Current Definitions and Approaches**

Potential areas of research into quality and quality assurance are many and broad in scope. The research design of this thesis is primarily shaped by the literature review which focuses on how quality is understood and made manifest in schools. In the literature review, I further identify and discuss some common quality assurance approaches in use today. Initially, I attempt to define quality by examining the perspectives of three groups of stakeholders of an educational institution. The first is that of students or individual customers. Delineating quality through individual perspectives, however, is rife with discord and personal biases or expectations, which usually do not objectively reflect quality. The fundamental conflict occurs, because students are both input and output of an educational system and as such, their perceptions are constrained not only by their scholastic abilities, but also by either their foreknowledge of educational programmes and services or their personal tastes as a customer. The second perspective is that of the institution as an entity. Institutional interpretations of quality are also variable. They depend on negotiated understandings of appropriate levels, programmes, curricula, levels of achievement, faculty profile, and so on. The complex multilateral negotiations embedded in the institutional perspective require a shared set of measurements to compare and assure quality. This necessitates that quality be functional and finite. Quality must be understood as a minimum baseline which can be implemented by all similar academic institutions. The third perspective is the systemic one, and this looks at the quality of a school in relation to the open system in which the school operates. In this perspective, the sociopolitical role of education and its context must be established in order to define quality. Whether the school is an engine of progress or whether it serves to train new labour forces, the hegemonic social order will determine whether, for

example, pure research or student placement constitutes quality. While this example may be exaggerated, it shows the spectrum of educational priorities in a given society and the variable weightings of school activities which calibrate a school's quality. The discussion of systems leads to a consideration of the cultural context of a school. Undeniably, pedagogic traditions have a significant influence on how a school will enact quality. There exists a vast array of pedagogic traditions. So to make the research question practicable, I selected only two. I compare the Anglo-Saxon curriculum approach with the Central and Northern European didactic approach. At first, the differences seem subtle, but the teaching, learning and assessment behaviours ultimately diverge due to the distinctly disparate philosophical underpinnings of these two streams of pedagogy.

The literature review would not be complete without consideration of the relevant quality assurance approaches. In order to classify the numerous quality assurance practices, I refer to four categories which are graduated by the intensity of outside intervention: self-evaluation, performance indicators, external audits, and external inspections. For each of these categories, I cite different examples and discuss the advantages and disadvantages of the way quality is assured through the various approaches. The oldest and most widespread quality assurance procedure seems to be that of American regional accreditation. It falls under the external audit classification, but it encompasses self-evaluation and peer review. It is structured according to accreditation standards and guidelines and is conducive to discerning both accountability and continuous improvement. The issue of accountability and continuous improvement as the two legs of quality assurance is an important one, since quality cannot afford to be static. If quality were limited to accountability, then its validity would erode with time. If continuous improvement were the sole criterion, then assurance would be a contra-indicator to the existence of sufficient quality. Yet without continuous improvement, the whole question of currency and relevance would be ignored. Accountability evolving through continuous improvement assures that quality remains fluid and recognises its infinite nature. Also included in this section is a closer scrutiny of substantive issues concerning self-evaluations and peer reviews. The literature review concludes with recent developments in accreditation practices. Finally, the literature review suggests that applying a long

established quality assurance procedure to newly emerging programmes and institutions would be an intriguing situation, one which would provide an opportunity to observe tensions between the two concepts of accreditation and quality. It would reveal areas of performance and correlating measurements to effectively locate quality assurance in today's international educational environment. The importance to theory lies in challenging the established methods and the manner currently being employed to assure quality, a critical analysis of which would inform future quality measurement constructs for new contexts. The importance to practice is that the research would inform educational quality initiatives of a new generation of educational managers as well as enhance the accreditation approach of quality assurance agencies in the zeitgeist of globalisation.

### **C. The Research Methodology**

To make the research question actionable, the scope and scale of research was pared down. The focus of this thesis is the accreditation of a private, for-profit international hotel school. The aim is to determine whether accreditation assures quality by looking at the accreditation standards and the evaluation process used by an American regional accreditation agency at the school. The research objectives are fourfold:

1. To investigate how quality is conceptualised by various stakeholders
2. To assess the effectiveness of accreditation standards
3. To examine whether the process is valid, reliable and relevant
4. To evaluate if the accreditation agency enacts what it purports to do.

The research methodology used is the case study approach. The researcher was an active participant observer throughout the entire accreditation process, which covered a period of 22 months. The official role of the researcher was accreditation Steering Committee Co-Chair. The data collected are almost entirely qualitative, except in the few instances where the school's own statistics are presented. The population and sampling of the research is limited to the case study school and is a unique-case sampling for reasons of feasibility, practicability and accessibility. The case study approach is invariably dependent on impressionistic field observations. They are supplemented by documentary analysis, both historic to provide the longitudinal perspective and concurrent to provide

real-time data for triangulation, to test rival theories and weigh against alternative accreditation methodologies. Specifically, the occasion of the decennial review by the Commission of Technical and Career Institutions (CTCI) of the New England Association of Schools and Colleges (NEASC) of a private Swiss hotel school, Hotel School Helvetia (HSH) serves as the research case study. Primary research begins with the review of the standards and guidelines of the CTCI. Examples of their implementation at HSH are collected and documented. This includes the institution's self-evaluation process, the site visits of the accreditation team, and the final decision-making by the Commission. The final decision is based on the follow-up report submitted by the visiting team to the Commission.

#### **D. Validity and Reliability of Participant Observation**

To ensure replicability of research and to bound data collection, a comprehensive case study protocol was formulated. Correctly charting the participant observer's territory and procedures through a predetermined protocol also promotes validity and reliability of the research. Validity and reliability are assured through triangulation which took the following forms. First, the researcher's notes were cross-validated against a quality manager's logbook. The quality manager was an independent observer assigned to monitor the accreditation process by the holding company of HSH. This assured researcher (or observer) triangulation. Second, the researcher's observations were verified against reports of HSH task team leaders who were the key participants of the self-evaluation process, thus engendering multiple data sources. Further, the accreditation visiting team's report, the initial accreditation documents of the school, interim accreditation visits and reports, and the reports of a Swiss accreditation agency are supplemental documentary data that compose alternative data types for external validation. The institution's quality control statistics as well as ISO internal audits of HSH constitute the means of an internal validity control.

Dependability becomes pertinent where research circumstances are not easily replicable, are impressionistic and interpretative. Thus, thick descriptions of the accreditation events were collated in a diary for the case study. The reliability of these observations were

verified through records of activities such as meeting minutes, interviews, respondent validation, and peer examination by the holding company's two quality managers. It was important that the quality managers were not institution-bound nor staff of HSH in order to safeguard against the researcher's personal bias or conflicts of interest. The quality managers and the researcher have no vested interests to promote or protect each other in any manner. This is pertinent in terms of the ethical issues which arise from participant observation. The basic ethical tenet applied throughout data collection was one of a deontological attitude. At the outset, I received consent from the owner of the case study school to use the NEASC reaccreditation material for research. The accreditation agency's Associate Director in charge of the school's reaccreditation was equally fully informed of my intentions as was one of the quality managers. All other participants were unaware. As the research process unfolded, it became increasingly clear that in order to portray the events as truthfully and accurately as possible without rendering any participant vulnerable, identities should remain undisclosed. So other than the identity of the accreditation agencies, all names, dates and locations in the case study are entirely fictional to protect the privacy of the research subjects and the integrity of the case study.

### **E. The Case Study**

As noted above, the case study is based on the decennial reaccreditation of Hotel School Helvetia. HSH is a privately owned, for-profit international hotel school in Switzerland. Switzerland is dense with independent international schools for all age categories and for a myriad of educational purposes. As with watches and banks, Switzerland enjoys a longstanding reputation of being a provider of quality private education to the world market. It is the perfect environment in which to observe how competition can drive quality in a free market. Like other for-profit schools in entrepreneurial Switzerland, HSH is beset with issues of quality assurance, because it needs to achieve recognition in order to stay competitive. This reaccreditation is particularly interesting as both the accreditation agency and the school are undergoing structural and strategic changes, the ramifications of which are not necessarily predictable. On the one hand, NEASC is in the process of consolidation and is migrating vocational schools into its higher education Commission in line with the global shift to homogenising tertiary education at the

Bachelor's degree level. On the other hand, the school is being spun off and restructured according to the decentralisation strategy of the holding company. This dual state of transition is perhaps the most compelling reason to use the case study method. It can accommodate any unanticipated critical incidents which may arise.

The case study starts with the background of NEASC, its areas of remit, and the recent changes in NEASC structure. Then the discussion moves onto the school, its historical context, programme development and the change of ownership which preceded this reaccreditation. The change of ownership was accompanied by a compendium of restructuring initiatives, which are described in relation to their significance for school quality and the eventual accreditation result. The school was first centralised, then decentralised. These strategic moves are put into context longitudinally in a chronology of the NEASC visits to HSH and within the macro-environment of Switzerland. Having established this background, I present the accreditation process itself beginning with the self-evaluation, or in NEASC nomenclature, the Self-Study Report. In this section, the ten CTCI Standards that comprise the criteria of the Self-Study are deliberated. The relevant HSH school processes were researched and they are presented in a set of flowcharts parallel to the corresponding Self-Study Standards. The Self-Study section closes with findings about activities during the final revision of the school's Self-Study. The final section of the case study is dedicated to the accreditation visit. The profile of the visiting team, the visit agenda and protocol, the school constituents' analyses of the Standards in comparison to the NEASC visitors' observations and the school's own survey results are considered. The case study generated an abundance of data which required careful sifting and verification to ensure that they were relevant, reliable and valid for analysis.

## **F. Data Analysis**

At this point, it was important to note the research question again: Does accreditation assure quality? The data analysis method that most naturally lends itself to this type of qualitative data is analytic induction. The data analysis closely follows the four research objectives listed under the research methodology. In the effort to understand how the

accreditation agency conceptualises its role in quality assurance, I study the mission statement of the agency and analyse it with regard to alternative accreditation approaches, namely the QAA, ISO and EFQM, mentioned in the literature review. Then I analyse the areas of remit of NEASC accreditation. They are the ten accreditation Standards. Each of these Standards are divided into their intended purpose, the results of the visit, questions remaining about quality assurance from the results, and recommendations about their application or improvement for future accreditations. The third research objective queried the validity, reliability and relevance of the accreditation process. Obviously, self-evaluation and peer review must be addressed as the principal components of the accreditation. Here again I draw heavily on the literature reviewed to situate the occurrences during this reaccreditation event. The Self-Study at HSH was not immune to the dangers of self-evaluation in general as denoted by other researchers. I also relate the three perspectives, individual, institutional and systemic, to the idiosyncrasies of this self-evaluation. As for peer evaluation, the findings make a strong case for the reliability of accreditation and the various observations are contemplated in detail. The last research objective, to determine if the accreditation agency enacts what it purports to do, was investigated by juxtaposing NEASC accreditation with other quality assurance processes that HSH undergoes. They are the Swiss accreditation and the ISO certification. The comparison reveals areas that are more or less effective vis-à-vis the rival approaches and their philosophies about quality assurance. The Swiss accreditation focuses on conformity, marketability and the utilitarian benefit of education. ISO is a TQM derivate that views an educational provider contingent to the external environment and prioritises its ability to undertake autogenic corrective action. Last but not least, the data analysis can only be as good as the research methodology and data allow it to be. I end with a brief reflection on the limitations of participant observation and the hermeneutic bias of a single researcher. I concede that, as with all qualitative research, subjectivity may be an issue. But given the circumstances, it is still the most effective tool to observe complex human behaviour.

## **G. The Conclusions**

My value proposition is that quality is phenomenological. Quality is temporary. It is relative, and it is as variable as the value-based cultural and contextual concerns of all who engage in its realisation. So, does accreditation assure quality? In the process of data analysis, I discovered that quality is not a synecdoche of quality assurance and I explain why. I ventured through the data, through cycles of analytic induction, as if in a baroque garden, unable to see over the hedges and find my way out of the labyrinth. This is the nature of qualitative research. It can become endless and the conclusions of this unique case study would need to be pitted against multiple case studies, before a truly satisfying conclusion can be drawn. To bring closure to this humble beginning, I opted to review the Standards and the accreditation process for actionability and immediate improvement for use within like institutions and hope that in the process, these finding will stimulate larger discussions about educational quality assurance during this epoch of globalisation.



## II. LITERATURE REVIEW

To answer the question whether accreditation assures quality, we must engage in a two-pronged discussion. First, we need some notions of quality as a point of departure and second, we need to understand quality assurance procedures including the accreditation process. The notion of quality in education, as in most fields, can be elusive due to the myriad of ways in which it is defined. In the first part of this chapter, I derive a working definition of quality for the purpose of this thesis. I have chosen to segregate the literature I have reviewed according to the various school constituents' perspectives. They are presented from three perspectives: the individual perspective – which considers the students or other individuals engaged in the process of education; the institutional perspective - which incorporates the various elements and processes within the school; and the systemic perspective - which places the school as an element in its greater environmental context. Further, the notion of quality is explored in the international context. Today globalisation, in particular of higher education, has led to a sense of urgency to understand the educational approaches of the various regions of the world. Accompanying the internationalisation of education is the effort to apply a single notion of quality to highly diverse systems. Yet this presents an enormous challenge, both in terms of measurements and interpretations. Furthermore, a single notion of quality is also evasive since the concept of quality in education varies with its place of origin. The various pedagogic traditions which exist express diverging philosophies and thus multiple definitions. Thus, I devote some time to cultural contexts and their significance to the meaning of quality. Comparing just two major Western traditions, Anglo-Saxon versus Central/Northern European, the cultural divide becomes salient.

The latter half of the chapter is dedicated to the question of quality assurance procedures. Literature about quality assurance wrestles with issues of accountability and continuous improvement. The ways in which these aspects of quality are monitored vary. Approaches to quality assurance may be through self-evaluation, performance indicators, external audit, and external inspection (Fidler, 2002). After a presentation of these four

approaches, I critically review the substantive issues they represent from the perspectives discussed previously. That is to say, from the individual perspective, consideration is given to Total Quality Management and its various manifestations in quality assurance approaches. The institutional perspective invites a discussion on self-evaluation while the systemic perspective, on external audits or inspections, including that of peer-evaluation. Finally, I explain the mix of approaches which are represented by accreditation, both European and American. I focus on the American approach since this is the one applied to the European case study school and which serves as a framework to observe what happens in this particular relationship between accreditation and quality.

### **A. Constituents' Perspectives about Quality**

The meaning of quality varies according to the constituencies who ponder its existence, whether it is the customer, the producer, the provider, a central authority or an intermediary agency. Moving from the individual to the institutional then to the systemic, I survey how the notion of quality can differ according to each perspective.

#### ***1. The Individual Perspective***

A most common occurrence is the belief that the customer or the end-user should be the one who determines what quality is. Throughout business history, attempts have been made at cornering quality to achieve customer satisfaction. Precisely this idea is debated by West-Burnham (2002) as he promulgates the total quality approach as a means to distinguish educational quality in pluralist societies. If school quality is a function of the students' ability to pay, then meeting customer needs and expectations must be the ultimate quality goal, since without revenue there can be no quality, perhaps even no school. The first difficulty with this definition is that customers are individuals and individuals have different preferences. In early management science, quality was measured by adherence or deviance from a standard which was set according to manufacturing guidelines. Thus, statistical process control was born (Deming, 1986). Quality became an aspect of business to be managed. Then Juran (1974) and Ishikawa (1985) took the ideas further to what we now know as Total Quality Management. In such a systems-oriented world from which TQM was born, meeting customer and

manufacturing specifications became the pre-eminent way of vouching for quality, demonstrating both accountability and ensuring continuous improvement. Needless to say that the core motivation must be entrepreneurial: the incentive is profit and therein lays the greatest weakness of this notion of quality. Customer satisfaction cannot be a metaphysical ideal when it is a function of value for money or changing tastes. Customer satisfaction, a particularly ephemeral concept in education, also tends to defy standard measurements characteristic to TQM. The most obvious fallacy to this approach is the state of enlightenment of the customer, for an uninformed customer will make uninformed judgments. As Miller (1991) states, a TQM based quality rating of an institution is “dependent upon what the public expects to be taught and learned”. Some activities, such as prescribing curriculum to meet customer needs and expectations, will not necessarily translate into quality education. The whims of students, markets and society at a given moment in time may oppose a well-rounded quality education, whatever that may be. Fitness for purpose (Ball, 1985) negates an absolute, constant or stable state and fitness to a certain group of constituents, de facto, negates consistent quality. Deming loyalists may retort that no matter how superbly designed an educational experience may be, it is of no value if it does not meet the customer’s expectations. To step beyond this ideological loop, let me present another angle on the definition of quality.

## **2. *The Institutional Perspective***

When trying to determine quality in education, various institutional processes are significant factors shaping the educational experience. The central process and one that is eminently fascinating is that of teaching and learning. This process is an eternal enigma for academic institutions. What students end up receiving and understanding i.e. learning does not necessarily reflect the teachers’ intentions, objectives or criteria for student learning (Preedy & Faulkner, 1998). In this relationship, the student is both the customer and the product. Initially the capabilities of the student, as raw material input to the value-adding process of education, may constrain the ability of the producer/provider or the teacher to achieve quality. Then, of course, the learning process is replete with mistakes and failures, which by definition are not quality. It is theoretically impossible for us to

stop learning; therefore, it is impossible for us to stop making mistakes. Hence, we can never attain quality in the sense of zero defects or even the highest degree of excellence. Yet this is the TQM definition of quality; otherwise, continuous improvement would be a moot point. In addition, at which point can a teacher or an institution appropriate a certification for sufficient learning? That is to say that a certain amount of mistakes and failures is acceptable quality, and this represents tensions between the individual and institutional perspectives of quality. Not surprisingly, real life experiences attest to conflicts where these definitions clash. For example, numerous are the occasions when I (as Academic Dean) have to mediate misaligned expectations for courses, and allegations about the level of quality of a teacher and a student can be hefty from both sides. Finally, where do the teachers' criteria originate? What level of expertise is required to formulate quality learning outcomes and thus a quality product? Is this judgment not limited to what a teacher can teach or what a teacher "knows"? Inasmuch as knowledge is not finite, the notion of quality cannot be finite. If quality can be "perfect", then it cannot be attained. Yet perfection cannot exist; otherwise, would it be perfection? This becomes a relevant point since knowledge is in a state of constant flux. Syllogistic acrobatics aside, this realisation forces us to reduce the notion of quality to something which can be acknowledged as a minimum standard, a certain baseline or threshold which assures that we do not lack any essential ingredient. This can also be frustrating, because it defeats any notion of quality. It can stifle the motivation for some academic institutions to pursue higher notions of quality. Many will settle for some common denominator: measures such as standardised tests, board examinations, licenses and such and not offer more. If an institution were to excel beyond, what would be the incentive? A cynic would well say that there is no need, since the accreditation has been earned, the funds will continue to flow in and a ranking can be bought. With this in mind, we approach the next level of factors in the quality formula. Who determines these minimum standards and how?

### ***3. The Systemic Perspective***

We move from the individual and the institutional to a broader group of constituents, one that is expanded to include the environment in which the institution functions. The school as an organism in a socioeconomic domain is dependent on ministries, agencies, sponsors

and other potentially forceful stakeholders. From this perspective, quality is determined by either central authorities or intermediary agencies. I start by addressing central authorities. The notions of quality in this domain tend to be relatively concrete and rigid. Most often, central authorities tend to be highly prescriptive with regard to curriculum, methodologies, percentage of population permitted into designated professional specialities, and so on. The state or the government decrees what quality is for a school in order to promote its own political and economic interests. A myriad of quality assurance systems exist at the national level depending on the country and level of education, which are governmental or ministerial. One example of a nationally driven system is the Singapore School Excellence Model. If a nation regards education foremost as an instrument of human progress, then in its most robust manifestation, quality in education should lead to social critique and progress in human thinking which in some way leads to betterment of life, economic or intellectual. How is that to be achieved by academic institutions? Certainly, teaching is an essential variable, but research and scholarship are more important for these ends. Then a question arises: is it appropriate to judge the quality of an institution by its research activities? Should an institution which produces excellent citizens for its society but does not engage in research be regarded less highly with respect to educational quality? What outcomes would be associated with quality under such academic regimes and who should inspect, evaluate and decide?

We all know the dangers to free thought and social critique if the locus of decision-making power lies in the political or parochial rather than purely intellectual. The greatest thinkers throughout history have typically been outliers, rejected and ostracised by their own societies' conformist institutions. There is an irreconcilable dichotomy in that to conform is to not stand out, not excel, and to not excel means to deliquesce the ethers of a fertile imagination into acceptability and normality. Not rarely have the engines of progress been throttled by well meaning Marxist ideologies. Inherent in this view of quality is the need for change and improvement, not just accountability. But compliance with social norms is not the only way to delimit progress or quality. In a system where a central body may sanction institutions, most commonly through funding, the need to obtain consistent funding is perhaps not too different from the need to generate profit.

Political ideologies can stoke tensions between what serves society and what serves a school through the way that government interprets the role of education. Enforced desegregation, for example, of bussing inner-city students to more affluent suburban schools in the US to level out the economic playing field, diminished the quality of public education that had been afforded by the elite neighbourhood (Schlechty, 1997). At some point, the institutions have to comply or possibly cease to be recognised. The matter of economic apartheid and responding to political ideologies is more complicated than ever now, in that education is becoming ever more international and commoditised.

## **B. Context of Quality**

### ***1. Internationalisation***

In the coming years, the trade of services including education is expected to accompany globalisation in a feverish manner. The demand for mobility of labour, the rise of new opportunities and the accessibility of information through virtual highways have multiplied demand for higher education. Further, the need for international transferability and recognition is a topic which cannot be neglected. Many national governments are being challenged to articulate with others, particularly in the same economic zone, in areas of education and quality assurance. The task is Herculean in scale and scope at both the national and international levels. NAFTA, MERCOSUR and EU zones have already laid the foundations for transnational and regional recognitions. In the EU, the Bologna Process incites changing architecture for many tertiary and postgraduate qualifications throughout the continent. As for quality assurance, a legislative framework has been set up to facilitate this process through the Lisbon Recognition Convention. Supranational bodies such as the OECD and UNESCO have been mandated to research and monitor international cooperation. The impending boom in higher education cannot be supported (Van Damme, 2002) by public spending and will inevitably be met by private providers in search of profit. Whatever efforts are made at the local or national levels to create social equity will be obliterated by commercial educational enterprises at the international level. The private providers may even have more autonomy in that they may not be subject to or may be able to circumvent national regulations concerning education by

arbitraging opportunities at other sites and through forms of incorporation in other countries. This poses an intriguing threat to quality control.

To date, the question of quality assurance of such organisations, not to mention the pre-existing state run schools, is still very much open. It is evident from various OECD and UNESCO studies and symposia that educational philosophies and programmes are highly diverse amongst OECD nations' school systems. This is partly due to the role of government in accreditation where it is perceived as either a necessary inconvenience or bureaucratic interference. In the absence of state regulation, "another development is the import of foreign accreditors, as is the case of American accreditors or the British Open University validation scheme..." (Van Damme, 2002) in countries where education is highly privatised. One clear statement that surfaces throughout the international discourse is the importance of converging quality expectations through outcomes and competencies measurements (Rauhvargers, 2002). An example is the International Indicators of Education Systems (INES) Project of the OECD, which maps educational goals and measures educational outcomes across the approaches used throughout the OECD nations. This project is a valiant attempt to measure more than language, science and mathematical skills through supplemental indicators of employability, communicative competence and citizenship. This long-standing study of over 20 years is a testimony to the complexity of defining quality in education on an international scale. As Sjur Bergan (2002) states, "It is impossible to say anything valid about any given qualification without knowing something about the education system, the higher education institution and/or the study programme from which the qualification stems..." So one must be vigilant to estimate quality, understand the input in terms of context and the output in terms of comparable, measurable indicators.

## **2. *The Cultural Divide***

Attempts to standardise the concept of quality internationally often lead to a maze of cultural riddles, because they defy quantitative measurement. The difficulties that the OECD encounters in trying to negotiate definitions of quality to fit its diverse member nations attests that quality is culturally coloured, not only in the way quality is understood

and assessed, but also in the way education is regarded. To illustrate this, I present Reid's model (1998) on disparate views on education and his observations about "curriculum" and "didactic". Reid categorises pedagogy to reflect the Anglo-Saxon and the Central/Northern European points of view. These two points of view are pertinent to the case study of this thesis. The differences are both subtle and distinct in the two approaches and are summarised in the table below.

**Table 1. Cultural Differences in Approaches to Education**

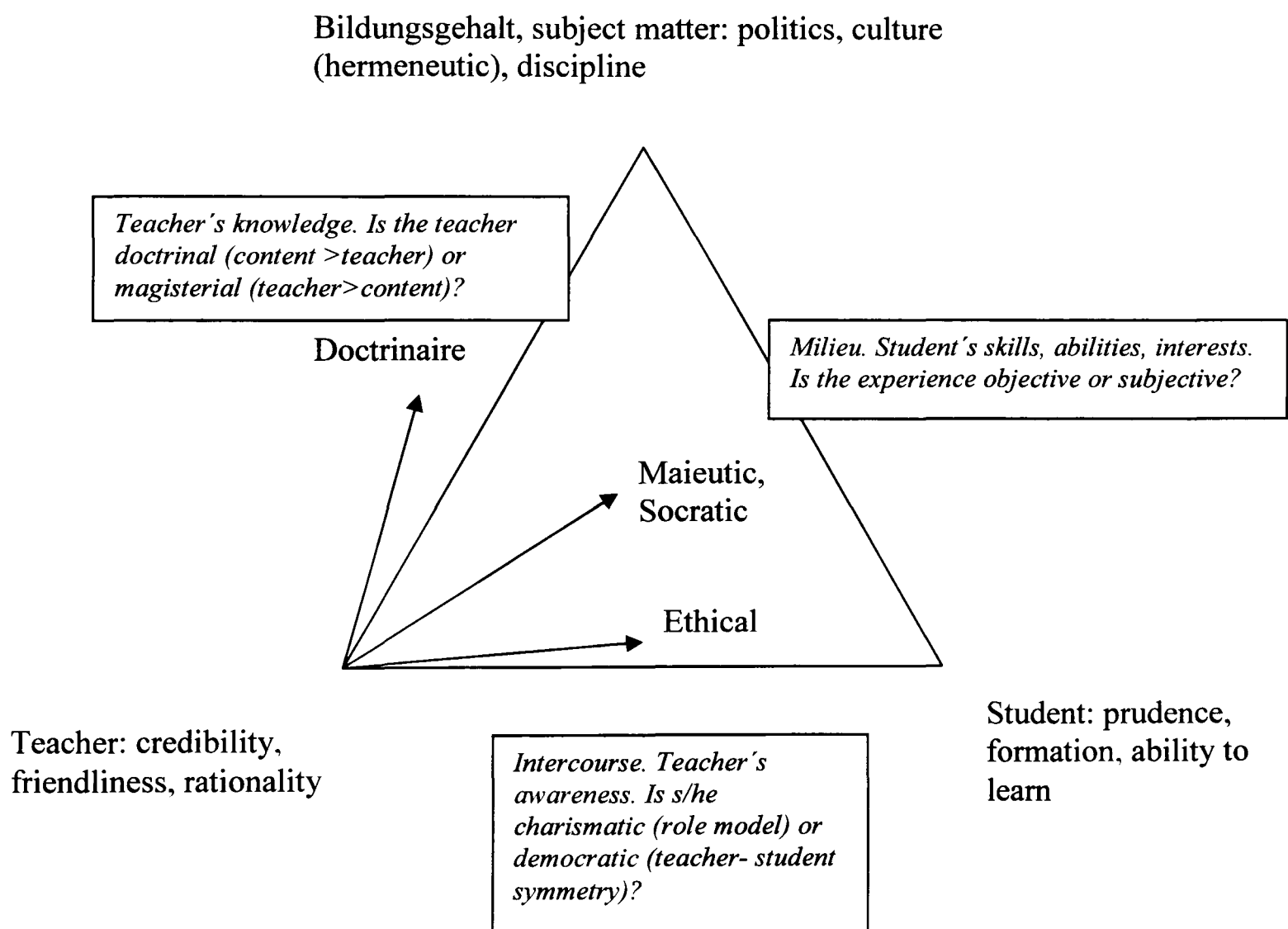
<b>Anglo-Saxon/ American – Curriculum</b>	<b>Central &amp; Northern Europe – Didactic</b>
Objectified world and knowledge	Subjectified interpretation
“Instruction”: select, display, control contents of curriculum. Teachers are technicians and teaching methods are determined.	Bildungsinhalt; teacher is “Erzieher”, a committed academic. There is a rationale to the teaching rather than a method.
Textbook and teaching aids	Cultural content, myths, poems, fables...
Context, utility	Student's personal development, Bildung
Curriculum of the institution or an agency determines the learning outcomes.	State-determined values, central Lehrplan
Students pursue own definitions and beliefs	Authoritative teaching; also when decoupled from the state
“Enlightened universalism”, republican	Religion, politics, monarchy
Individualist	Autonomy
Institutional; teacher is an employee who delivers the pre-set curriculum.	Teacher is “curriculum theorist”, a professional engaged in reflection.

Even more precisely, Künzle (1998) describes the basic tenets of didactic in the form of a “didactic triangle” illustrated in Figure 1 below. The didactic triangle serves to determine a standard of teaching or teacher-centred reflection rather than instruction. From this understanding of education, quality becomes a quasi-individual issue, which is teacher-determined, not student-determined. While the student experience is one side of the



triangle and the curriculum another, the teacher is perceived as the central figure, a magisterial expert and technician whose interaction with the other components significantly influences the quality of the learning experience. In this worldview, there are three forms of didactic: rhetoric, catechetical or learner experience which represent the points on the arrows in descending order on the diagram below.

**Figure 1. Representation of Didactic**



For Northern and Central Europeans who share this view of education, the willingness to subordinate the role of the teacher to student expectations or curriculum will not be forthcoming. Accordingly, the role of the teacher is much more significant to quality

from the didactic approach. Daniel (2002) confirms that, “cultural assumptions may colour the respect that people in one country accord to the arrangements for quality assurance in another”. He goes on to say that public and private institutions may also be sceptical of each other’s methods and motivations. While defining quality on a supranational level has its own challenges, not the least of which is cultural diversity, the discussion ultimately winds its way back to the individual and the institutional levels when seen in a cultural context. That is because with other worldviews, we witness how deep rooted cultural notions of quality can be.

### **C. Quality Assurance**

In the curriculum oriented Anglo-Saxon and North American countries, we see that quality control procedures also diverge. In the UK, quality control is conducted by the central government through the Quality Assurance Agency (QAA). In the USA, quality controls are conducted by regional bodies through accreditations, that are essentially a combination of self-evaluation and peer review. The group of peers that make up the accrediting Commissions shape the understanding of quality and such “non-partisan” intermediaries also have their share of challenges in determining quality. They are further addressed under “Approaches to quality assurance” section below. Suffice it to say for the moment, that the notion of quality invariably changes with the nature of the intermediary. Quality can be driven by industry bodies, which were born of real socioeconomic needs. This is the case in Central Europe with the Swiss Hotel Schools Association (ASEH) in Switzerland, and it is true to Reid’s schema of didactic where the role of industry experts are reminiscent of the ‘master-apprentice’ relationships predominant in this region. As diverse as they are, all intermediaries, central, regional or industry related, use institutional evaluations regardless of whether they are internal or external evaluation. A common thread through the various quality assurance processes is the central question why these evaluations are important. Is quality a function of accountability where academic institutions must heed customers’ expectations? Or is it a function of improvement where learning institutions should continuously rejuvenate and innovate? These reflections lead us closer to a working definition of quality.

## ***1. Accountability***

Probably the best reason for conducting institutional evaluations is to show accountability to stakeholders. This could be the society at large, the government agency, target markets or internal and external customers. Here already we are confronted with conflicts of interest and the tensions mentioned in the perspectives discussion above. Further, tensions exist between accountability and improvement in education if quality must be dynamic and current to keep up with the evolution in knowledge. One could argue that if evaluations make a school look good to a certain group of stakeholders, they are probably not serving their entire quality assurance potential or the best interest of the school in terms of improvement. The first part of the statement indicates the difficulty in satisfying everyone, while the second part recognises that a school must always move forward on developments to safeguard quality. So the question is whether accountability may be an end in itself or just a means to an end (Fidler, 2002), in which case actions and the policy-making history of the institution or the system must be inspected. On the one hand, the quality of an institution may be its accountability: public, moral, professional, contractual or cultural. It assures all those who interact with the school that they are harboured from any serious wrongdoing. Accountability is all-inclusive and protects internal stakeholders as well. The areas of accountability are both external and internal. For external stakeholders, statutory requirements, both educational and non-educational, are important. This encompasses employment legislation, health and safety conditions, publications of student performance and curricula, and so on. Within the institution, contracts of employment, governance and leadership as well as student-teacher relationships, academic progress, satisfaction rates, retention and attrition are important. On the other hand, evidence of accountability means that an institution has reached its lowest quotient of acceptability; quality reduced to its baseline level as discussed above.

## ***2. Continuous Improvement***

No matter how accountable an institution may appear, if there is no evidence of improvement, we cannot claim that quality exists. Maurice Kogan (2000) divides evaluating academic excellence into the intrinsic and extrinsic social outcomes achieved by a program. He adds that quality evaluation should embody some notion of change and

a movement towards improvements generally affecting quality: cost reductions, equal access and working conditions among other things. This is not far from the way Fidler (2002) breaks down areas of accountability: economic competitiveness and financial stringency, equality of opportunity and decentralisation, which through decision-making, devolution of authority and empowerment affect working conditions. Where Kogan would align the same four domains to improvement, Fidler associates them to accountability, because he claims that such evaluations tend to rely on past performance rather than potential performance. Thus they result in static reports that may be of limited use for improvements. In order to incorporate improvement into quality efforts, an evaluation should be forward-looking and reflect on the qualitative aspects of an academic programme or institution as well. Evidently, a definition of quality is difficult, if not impossible, to extricate from measurements of quality. Naturally, continuous improvement and change management present their own issues. It is an irony of sorts that if there is room for improvement, then an institution appears to fall short of quality. Yet again, a perfect set of improvement processes does not necessarily guarantee quality. For example, an offshoot of TQM is the ISO certification process. The notoriety of this certification is that an institution may uphold flawless processes but not achieve any quality. That is to say that quality control takes place even if quality is not attained. Heeding quality procedures is no assurance that quality is actually enacted. Somewhere in this quagmire, we need to acknowledge that quality must serve both accountability and improvement, be a blend of honest self-reflection and scrupulous external auditing, a balance between individual and systemic requirements, which must be negotiated through institutional teaching and learning processes. Let us now turn to see how quality is then assessed by the different approaches that exist today.

#### **D. Approaches to Quality Assurance**

When distinguishing approaches to quality assurance, it is helpful to determine whether the evaluation method is formative, i.e. experiencing qualitatively an interactive process, or summative, i.e. taking quantitative measures of outcomes or products. By the same token, it could be said that the two fundamental approaches to quality evaluations are the process approach (qualitative) or the product approach (quantitative). One can see that

quantitative approaches will be empiricist and “scientific”; whereas, qualitative approaches are illuminative research in which context and systems are essential to achieving a meaningful analysis. Yet another way to categorise quality assurance processes is to segregate them according to who conducts the evaluation and the degree of formative or summative assessment. This is the way Fidler (2002) classifies quality assurance processes into four types of formal evaluations: self-evaluation, performance indicators, external audit or review, and external inspection. Of course, there may be overlapping approaches within a single quality assurance procedure. Regardless of who conducts the quality control, the approach will still be either formative or summative or a bit of both. The quality assurance procedure presented in the case study below is accreditation, which is a combination of self-evaluation and peer review processes. Thus, I look at these processes in considerably more detail than those entailing pure external inspection. In the ensuing discussion, I submit examples of each of the formal evaluation approaches and delineate the unique challenges that each represent.

### *1. Self-Evaluation*

In many instances, there is a marked movement of longstanding, accredited institutions to perform self-evaluations in lieu of on-site visits by external authorities. Internal evaluations such as faculty, programme and student evaluations augment and enhance the quality of data collected by external agencies. Indeed, internal evaluations may even expose aspects that would not necessarily surface if the review were conducted only by an external agent. One example of self-evaluation is the process used by the National Board of Universities and Colleges of Sweden. The Board reports to the Cabinet, the central decision-making body in charge of social engineering for the state. The central government also exercises fiscal austerity. In the Swedish system, the institutions conduct self-evaluations based on the US accreditation model. The objectives are fourfold: to optimise resource allocation, strengthen programmes and reduce withdrawals, improve communications, and provide a comprehensive view of the institution. As Furumark (1981) reports, the process leads to increased workload and bureaucratisation with very little real critical appraisal due to goal conflicts and the difficulties in localising appropriate measures of quality. Obviously, the dilemma with such an exercise is the

penchant to “perform” academic quality rather than “enact” academic quality due to the pressure to look good to the government and the public. The ability to appeal to the central authority would generate the necessary funding for public institutions. This in turn works against the best of intentions to live up to the government’s trust in the institution’s ability to objectively assess itself. Furumark’s recommendation to improve the quality assessment process is to make it non-bureaucratic through engendering commitment and involvement in the institution’s culture and to establish an impartial decision-/stock-taking, interpretation and action plan process to implement quality.

Another example of the internal self-evaluation process is AMOS (Dreth, Van Os, Bernaert, 1987), used by the Free University of Amsterdam, The Netherlands. The focus of AMOS is to uncover intrinsic and extrinsic motivations which lead to study progress through a flowchart analysis of quantitative success rate data. The most significant shortcoming of this self-assessment, as admitted by the researchers, is the inability to take multi-causal phenomena into account. A quality educational experience cannot be limited to a single dimension such as the pass/fail rates in AMOS, because quality comes from the total experience of learning. This includes the physical and emotional environment, learning facilities available, comfortable access to resources and support among other factors. Yet another example is the Value Added Assessment Program (McClain, Krueger and Taylor, 1989) used by the Northeast Missouri State University (NMSU), which is also uni-dimensional. It determines the quality of the school through assessment of students before entry and after the conclusion of the course of study for development in knowledge, ability, skills and other awareness. Again context and environment are neglected. A final example is the strategic planning approach used by the University of Tennessee Knoxville (Banta, Fischer and Minkel, 1986). In this model, the culture and values of the institution are set in context with the internal and external environments in a SWOT analysis. The information is analysed to steer strategic decisions. These initiatives are then operationalised and evaluated. Although this approach takes into account the greater context in determining quality, the difficulty here is the open-endedness of the strategic decisions. The follow-up and performance indicators are unclearly defined and this due, to a certain extent, to the impossibility of measuring non-quantifiable goals. In

sum, self-evaluations do not lend themselves to objective appraisals, suffer from the need to appeal to the external environment for financial motivations, and depending on the institutional myopia, they may be too narrow and focused to present a multi-dimensional picture of whole school quality.

## ***2. Performance Indicators***

With the demise of assessment frameworks at the local or national levels due to globalisation, some schools now turn to internationally recognised certifications to convey quality assurance to their public. Here I review two approaches using performance indicators: International Organisation for Standardisation (ISO) and European Foundation for Quality Management: Business Excellence Model (EFQM). The first approach, ISO, promulgates quality management in business organisations through its certification process. The ISO certification is emblematic of the quality consciousness and customer orientation of an enterprise. Since version ISO9000, the certification process has also been applied to higher education and since year 2000, the standards have been modified into version ISO9001, which is designed to more effectively address service organisations. To this end, the International Workshop Agreement 2 (IWA2), ISO9001:2000 IWA2:2003(E), is now in force for quality control of educational systems. Whatever the ISO variation, two salient features are common to the ISO approach, the processes and the continual improvement cycle. Some typical areas of data collection to be considered for an ISO audit are:

1. measures of input and resources
2. portfolio analysis of balance of functions
3. measures of throughput (students) and output
4. measures of outcomes
5. cost based analysis
6. techniques for experimental control
7. student and employee attitude surveys
8. interviews
9. content analysis of meetings
10. analysis of the formal organisation

## 11. various performance indicators.

All performance indicators, documents and records substantiating data are collated, identified and presented to internal auditors on a regular basis. Every three years, a certification agency visits the school to either renew or retract the certification status. The challenges that implementation of ISO standards creates for schools lay in creating definitions: of inputs, outputs and processes in education, of satisfaction as a measure of quality, and of “non-conformities”. The quality control process also increases bureaucracy, because of the required document and records management. A weakness of ISO certification is that the role of culture and context are only perfunctorily dealt with; although, it is widely recognised that they are crucial for school effectiveness. Additionally, measuring results of discrete processes as those listed above neglects a holistic view of the organisation. The fit between the processes is not monitored. With ISO, the quality standards chosen by a school are accepted ipso facto. One could say that ISO certification can ensure consistency and, to a certain degree over time, reliability. But it cannot make a statement about validity, because this aspect is simply not questioned. Finally, certification for one school indicates no norm for comparison with other schools. More information would be necessary to ensure that any quality judgments are embedded in an appropriate context. ISO is, then, effective for ensuring that quality processes are in place but not necessarily the quality which results from these processes other than customer satisfaction, an area rife with conflict with regard to defining quality.

The second approach, which I review here, is the European Foundation for Quality Management: Business Excellence Model. In 1992, the model was introduced in Europe as a self-evaluation tool for business organisations and as a framework for benchmarking quality awards. Thereafter, as a quality management system, the model took hold not only in Europe but also worldwide, and not only in business but also in education. A notable example is the Singapore School Excellence Model. According to EFQM, their framework provides “Excellent results with respect to Performance, Customers, People and Society are achieved through Leadership driving Policy and Strategy, that is delivered through People, Partnerships and Resources, and Processes.” (EFQM, 2007).



The EFQM model divides institutional performance as a stream of innovation and learning into two areas: “enablers” and “results”. The enablers identify what the institution does, while the results identify what the institution achieves. The framework is cyclical in that the actions of enablers feed into results, and measurements of results inform the continuous improvement of enablers. There are nine broad evaluation criteria which are divided into five enablers and four results. Leadership, the first of the enablers, plays a key role as the central driver of organisational quality, filtering through other enablers into the fifth and final enabler, institutional processes. The three other enablers in between are comprised of people, policy and strategy, and partnerships and resources. Each of the enablers is assessed for appropriateness through various sets of evaluation criteria. The same applies to the results area which is made up of people-, customer- and society results as well as the outputs or key performance results. The key performance results are integrated into a balanced scorecard which incorporates not only the general performance measurements, but also the cost of quality, product and processes. Much akin to ISO, EFQM is a systems model and has its roots in TQM. The “Fundamental Concepts” of EFQM are not unlike the major areas of focus of ISO:

1. results orientation
2. customer focus
3. leadership and constancy of purpose
4. management by facts and processes
5. people development and involvement
6. continuous improvement and innovation
7. partnership development
8. public responsibility.

While ISO tends to be prescriptive, EFQM aims to be non-prescriptive and broad in its interpretations of quality assurance. Both approaches are process oriented, not in the qualitative/formative sense, but in the business model sense. EFQM emphasises results much more significantly than ISO, which as mentioned above, is very process focused. Another difference between the two lays in the definition of relationships; ISO defines relationships with outside agents as one of mutual suppliers rather than partnerships.

Finally, greater weighting is put on public responsibility and social consciousness in the EFQM framework; in ISO, these elements are more incidental to the systems approach.

### **3. *External Audit***

Let us compare the French, a Central European Approach, to the American approach. In France, quality reviews are conducted according to set national standards and are executed by a permanent body of evaluators representing, e.g. Centre national de la recherche scientifique (CNRS), Institut national de la santé et de la recherche médicale (INSERM) and the Commissariat à l'énergie atomique (CEA). Historically the process was conceived to support scientific and technological institutions and as such these high profile institutions provide the examining experts. Today the quality assurance system also covers social sciences and humanities, exact sciences, biomedical science, and finance. The comité itself is not regulatory, but serves an auditing function and it reports to the Minister of Education who decides the "verdict". The experts are free to choose a university for inspection and the fundamental focus is on how research and education at the institution live up to its mission. The evaluation is threefold: peer judgment, intrinsic responsibility in the university and the strengths and weaknesses in educational quality (Staropole, 2000). By contrast in the US system, "the power is in the middle (Kells, 1992)". Historically in the USA, there was no federal control and still today, it remains non-political. By the same token, a decentralised accreditation process means that the process evolves more slowly than through a government ordinance, because it is a system of institutional peer agreement and voluntary self-regulation. On the other hand, American institutional evaluation leaves room for more individualism and involvement from the bottom up. It involves working levels to participate in generating improvement strategies which culminate in the form of the institution's Self-Study. The evaluation is made up of two distinct phases: an institutional Self-Study Report, which includes strengths and weaknesses analyses, and an on-site visit by an accrediting Commission made up of peers. The early incentive for a peer review process was the mildly allergic to outright contumacious reaction that Americans have towards unnecessary government intrusion. By the end of the 19th century, voluntary peer review became established as the accreditation process. Over the years, the same attitude led accreditation agencies to

take on an increasingly market orientation and enter into greater competition with each other. At the same time, the wide proliferation of school accreditations nationwide spurred on regional division and autonomy. For the sake of credibility, and in order to uphold methodological consistency, the regions were forced to cooperate with each other. From this extremely condensed history of accreditation, one can already surmise how slow and cumbersome change can be in such a splintered network despite its great appeal for institutional autonomy.

#### ***4. External Inspection***

There is one prime example of this approach, the Quality Assurance Agency (QAA). The QAA was founded in 1997 in the UK as an agency of quality assurance of higher education. In this role, it informs the Higher Education Funding Council for England (HEFCE) about the quality of an institution which the HEFCE funds, and it informs the Minister of Higher Education about the candidacy of degree-granting institutions that make applications for official recognition. About 180 publicly funded universities and colleges and some 230 higher education institutions throughout England, Scotland, Wales and Northern Ireland come under the jurisdiction of the QAA. Since its role is to hold schools accountable for the use of public funds, it also believes that it is responsible for addressing continuous improvement in the subscribed schools. Governance of the QAA is enacted through a board of higher education representatives, representatives of the funding agencies, and independent practitioners or directors who are professional experts in their fields. The QAA is an independent agency funded by subscribing higher education institutions and through service contracts with funding bodies such as the HEFCE. Typically, the service contract consists of designing and implementing quality assurance methods, standards, benchmarks and specifications for all public institutions in the UK and for any collaborative provisions that these institutions engage in worldwide. To this end, the QAA has formulated the “Academic Infrastructure”, which comprises of four elements: a framework for qualifications, subject benchmark statements, programme specifications and a code of practice for higher education. While the self-evaluation and audit visit are not unlike other approaches to accreditation or quality assurance, the QAA is much more specific at the subject and programme levels and provides very explicit

criteria that must be achieved. Obviously, the goal of the QAA is to create uniform levels of achievement for the various academic awards, which then make them comparable across the system.

The evaluation process consists of an audit by QAA visitors and a self-evaluation by the institution at the subject and institutional levels. The audit visit is a peer review process which may include industry professionals as well as academic peers. The process typically takes six weeks starting with an initial visit, collection and review of both documentary and daily real-life evidence e.g. meetings with Student Unions, staff and faculty, and a final visit at the end of the period. In the British approach, democratic voice is relatively formalised in that the Student Unions have the option to submit a written report to the QAA visitors during the validation event. In any case, all visits are preceded by the submission of Self-Evaluation Documents (SED) which report on the manner and methods used by the institution at the institutional level to assure that the level of education provided complies with the legal and statutory requirements of the programme and that the disciplines offered are coherent with the mission of the institution. As part of the self-evaluation process, internal institutional self-evaluations which may include external examiners, should take place once a year and a periodic review with the QAA every five years. The use of external examiners is yet another way to ensure objectivity in the review and oversight of the institution. Each higher education institution in the UK has appointed external examiners whose function is to serve as independent experts or consultants to the management. External examiners must ensure that the quality standards are appropriate to the institution, that levels of student performance are comparable to those of other similar institutions, and that the assessment methods used are equitable and sound. As for the periodic visits, the results of an audit may fall into one of the three categories of judgements: broad confidence, limited confidence or no confidence. In addition to this, there would be a judgement about the accuracy or completeness of the institution's publications. Then the visiting team compiles a report with the results of the visit and three categories of recommendations, "essential", "advisable" and "desirable" to the institution, the contractor and the public. General summaries of visit reports will be

filed publicly as a way to assure the parents, potential students or recruiters about the quality of the institution.

The QAA's own perception of quality is concerned with the way effective learning opportunities are made available to students in the areas of teaching, support, and assessment to enable them to achieve their academic award. (QAA, 2006). This is implemented through subject validations which indicate that the institution is respecting its own objectives and mission in the provision of education by offering appropriate learning opportunities. At the subject level, subject benchmark statements set the standards with which subscribing schools must comply. Subject benchmark statements are a way of assuring stakeholders of the skills, competencies and knowledge that the students would acquire in the given disciplines. They are meta-school criteria and help to coordinate coherence amongst the various programmes throughout the British Isles. While there may be minimal regional differences, the overarching framework is the same. At the programme level, detailed information about the teaching, learning and assessment methodologies of the programme as well as expected career placement results must be provided in programme specifications. In addition, certain progress files must be maintained about student progress in the programme including the transcript, Personal Development Planning (PDP) and the student's own records and documents. Finally, the last element of Academic Infrastructure, QAA has defined a code of practice, which guides higher education institutions in ten key areas of quality management:

1. Postgraduate research programmes
2. Collaborative provision and flexible and distributed learning (distance-learning)
3. Students with disabilities
4. External examining
5. Academic appeals and student complaints on academic matters
6. Assessment of students
7. Programme approval, monitoring and review
8. Career education, information and guidance
9. Placement learning

## 10. Recruitment and admissions

It is evident from QAA validations processes that external inspection expects a very tight relationship between the school and the agency, and it provides much more explicitly prescribed benchmarks and practices. The degree of quality control is considerably more significant in this quality assurance process, due inevitably to the decision-making leverage of the central government or agency in the operations of the school.

### **E. Critical Review of Substantive Issues**

This section concentrates on self-evaluation and external audit through peer evaluations, since these two quality assurance approaches are commonly found together in various accreditation processes and are later addressed in the case study.

#### ***1. Self-Evaluation***

According to Romney, Bogen and Micek (2000), the self-evaluation process engenders some disadvantages. Their breakdown of this quality assurance method is to look at the four phases of the institution's goal achievement process: to set goals, commit resources, use resources, and measure outcomes. Each of these phases is a hotbed for conflict. The risks incurred in performing institutional self-evaluations may be classified as micropolitical, methodological, economic and philosophical. Micropolitics may result from the social discord that accompanies exercises of this nature. The need to meet goals and deadlines when commitment throughout the institution is misaligned could lead work groups to lose incentive. Given the opportunity to become or render visible, micropolitics could very much distort the image of an institution according to the political motives of its members. Further, it is challenging to drive a process with limited resources, be they human or other, and faulty management decisions may result from pressure to reach unrealistic goals and deadlines. To complicate matters, if linked to some type of external inspection, the intervention could be considered disruptive or even intrusive, which can in turn create resistance. In terms of methodology, the concerns tend to be similar to any researchers' and are cited from Romney, Bogen and Micek's observations below:

1. misapplication of measurement tools ; measurements that do not fit the context
2. non-measurable aspects; attempts to quantify soft elements such as the fit to a mission statement
3. joint outcomes measurement
4. difficulty in establishing the unit of analysis, e.g. whether by discipline or department
5. timelines of assessment; the institutional life stage and the style of performance assessment may be asynchronous
6. staff capabilities that vary in analytical skills or in sensitivity to institutional issues.

Other areas of liability may be economic in that the returns from assessment may be marginal and may require disproportionate resource consumption such that, in sum, the institution incurs an unfavourable opportunity cost. Finally the philosophical aspect of self-assessment is an area of debate. The questions revolve either around the autonomy and flexibility of the school or the span of control under scrutiny. When measuring teaching, learning and assessment, it is not only what the teacher does that should be taken into account, but also what the students are capable of learning which will co-determine outcomes. In the case of American accreditations, Kells (1992) feels that staff or faculty self-satisfaction, lack of awareness about problems and the unwillingness to confront change unavoidably result in the lack of objectivity. To note, usually bottom-up refers to faculty involvement and rarely to student involvement when it comes to accreditation.

## ***2. Peer Evaluation***

One of the stipulations in accreditation concerning peer evaluation is that the visiting team of trained peers must not come from institutions that are in direct competition. Such conflict of interest would be inadmissible, because decisions about accreditation status, sanctions or expected improvements by the regional Commission are based on the visiting team's report. Also, although the data collection and inspection methods may be technically correct, the evaluator may be coloured by his or her own experiences and

opinions. Even with the fairest, most neutral of inspectors, psychological biases can come into play unintentionally. Such may be the case if an evaluator has recently had a dramatically different inspection experience. As an analogy, if you stare at a red dot for a long time and shift to look at a blank white sheet, you will see a green dot on it. At an infinitely more complex and subtle neurological level, the same can happen to the judgments of an evaluator when he moves from experience to experience. This is why the question of who performs the evaluation is critical; when and how, even more so. What is the nature of the evaluation: Are the visiting evaluators looking for accountability? Is it strictly inspectorial or is it more of a consultative nature? Depending on the relationship with the agency, evaluators can rank anywhere from very influential, if not downright authoritative, to practically inconsequential. Having paused for these reflections, I now turn our attention to the specific quality assurance process that was observed in the case study. A brief discussion of the accreditation process under development in Europe, The Bologna Process, is presented since the case study school is European and exists in this context. This is followed by a discussion of the American regional agency's approach, which is the one observed in the research.

## **F. Accreditation**

What, after all, is accreditation? Dirk Van Damme (2002) refers to it as "the formal and public statement by an external body, resulting from a quality assurance procedure, that agreed standards of quality are met by an institution or programme." He claims that there is wide diversity in accreditation due to the variety of roles that governments play in quality assurance of education. American accreditors define it as "a status granted to an educational institution found to meet or exceed stated criteria of educational quality" and consider it non-governmental according to Jacob Ludes III, Executive Director/C.E.O. of NEASC (2006). The European view tends towards external preconditions and accountability; whereas, the American view bespeaks a freedom to choose a place on the quality spectrum. One could infer that the former incites enforcement while the latter advocates voluntarism. To what extent is this true? In this section, I explore the two predominant forms of accreditation which affect the thesis case study, the European and American, their history, developments, processes and purposes.



## ***1. European Higher Education Area***

Currently there is a movement in Europe to create a European Higher Education Area (EHEA) by 2010. There are some processes in place which are guiding the European nations involved in this goal. They are known as the Bologna Process and the Copenhagen Process. I describe here what the processes entail before moving onto the way quality assurance is envisioned within these initiatives. In 1999, 29 European nations signed the Bologna Declaration with a view to make education amongst member countries compatible, in order to ensure mobility of its workforce between nations, and to appeal to international students through the transparency and transferability of European programmes. The six major priorities of the Bologna Declaration are:

1. a comparable system of academic grades
2. two degree cycles:
  - a three year cycle for a Bachelor's degree
  - a two year cycle for a Master's degree
3. a comparable system of academic credits
4. mobility of students, teachers and researchers
5. cooperation on quality assurance
6. European area of higher education.

## ***2. European Quality Processes and Agencies***

The Bologna Process now involves around 45 countries of Europe. This Process has spawned several agencies and instruments. The European Qualifications Framework (EQF) was created to deal with recognition issues. The European Credit Transfer System (ECTS) and the Diploma Supplement are mechanisms established for transparency and transferability which are now receiving global attention. The National Academic Recognition Information Centres (NARIC) give updates on international qualifications to promote comparability of programmes and to assist acceptance of studies completed in other countries. The Bologna Process requires a smoothing of degree systems across the continent and a common quality assurance structure to be overseen by the European Network for Quality Assurance (ENQA). Speaking of a transnational recognition

framework, the Lisbon Strategy handles curricular reform and has created a legal platform. The Lisbon Strategy is the actual overriding directive for creating a globally competitive EHEA. Having said this, the nations still retain autonomy over content and organisation of courses while collaborating on student and teacher exchanges, such as the Socrates, Erasmus or Leonardo da Vinci programmes among others. For vocational training, the lesser known Copenhagen Process was initiated in 2002. In this domain, the Certificate Supplement is equivalent to the Diploma Supplement and is accompanied by a common CV format. For practical training conducted during the period of study, Europass is the mechanism which parallels ECTS for work-based credits for an internship or work experience from another European country. Internationally attractive vocational training is also considered to be an objective for the EHEA, and this is expounded by the Bruges Process that attempts to detail an integrated strategy to this end.

### ***3. The European Accreditation Process***

Given these movements in the educational environment in Europe, all countries involved in the Bologna Process are to make progress simultaneously towards quality assurance alignment. Spearheading and overseeing the initiatives in quality assurance also involves supranational agencies such as the UNESCO and the OECD, who conduct parallel research studies of quality assurance. A definitive accreditation process for Europe has not yet come into being. Of the various proposals that have entered discussions, the European choice is to deconstruct quality into three principal domains: internal and external quality assurance of the institution and quality assurance of the quality assurance agencies. The areas under evaluation for internal quality assurance comprise of (ENQA, 2005):

1. policy and procedures for quality assurance. This resembles an academic quality statement or handbook.
2. approval, monitoring and periodic review of programmes and awards
3. student assessment
4. faculty qualifications and competence
5. learning resources and student support

6. information systems, in the sense of their use in measuring institutional performance through data collection and analysis
7. publications which are objective and timely.

It is interesting to note that in their expanded definitions of these areas, no specific mention is made to student demographics or to the retention, attrition or success rates of students. Neither is any attention given to the professional development of the teaching staff. Certainly, these must be concerns for those undergoing review.

External quality assurance areas comprise of:

1. effectiveness of internal quality assurance
2. aims and objectives of external quality assurance
3. decisions from external quality assurance must be based on published criteria
4. fitness for purpose of external quality assurance
5. clearly written reports
6. recommendations for an action plan
7. periodic reviews
8. periodic reporting of general findings by the quality assurance agencies.

This section implies that external quality assurance should check internal quality assurance, so I am not certain why item 2 is relevant given item 1. Also items 5 through 8 are interrelated, since one would expect reviews to result in reports and reports to house recommendations by the reviewers. Further there is mention in the literature pertaining to the periodicity of reviews to occur in six year cycles. Why this should be the case when the programmes run on two and three year cycles is unclear.

#### **4. *Quality Assurance of Accreditors***

The third area under scrutiny in European quality assurance is the external quality assurance agency itself:

1. external quality assurance of the agencies
2. legal status and recognition in the EHEA
3. regular quality assurance activities
4. resources

5. mission statement
6. independence from any specific stakeholder interests
7. published quality assurance criteria and process

For this standard, it is suggested that the quality assurance should include, amongst other items,

“...a self-assessment or equivalent procedure by the subject of the quality assurance process; an external assessment by a group of experts, including, as appropriate, (a) student member(s), and site visits as decided by the agency...”.

8. procedures for accountability
9. peer reviews similar in fashion to the approach used by the Council for Higher Education Accreditation in the USA (see section below).

This section is intriguing, because it seems that quality assurance can become a compulsion of ever expanding loops of quality control. My next question would be who would assure the quality of those who assure quality assurance agencies. Have we ended up at the Ministry of Education? Because if so, that means we are back to national parameters and constraints. If not, it means we are back to the beginning of the problem with EHEA trying to determine regional quality assurance oversight. One has to wonder whether emulating the US model is appropriate in this phase of unification with such widely independent and linguistically different nations in Europe. It is considerably different to the Darwinian kind of evolution that occurred in the US. There the exuberance of a rapidly expanding network within a single linguistic and legal system was reined in to form cohesive regional Commissions under the aegis of the federal government. On this note, let us now delve into the American form of accreditation.

## **5. *American Accreditation***

In this section I present the historical background of accreditation which started in New England and the purpose, processes, and standards which are used in traditional American accreditation. I finish off with a discussion of a newer self-directed approach in use for accreditation in the North Central region of the USA to convey some of the changes that are encroaching on traditional forms of quality assurance in this country.

The process of accreditation started in the USA in 1885 in New England under the guidance of Charles Eliot, President of Harvard University, who was a strong proponent of applying standards to schools and colleges to assure quality. Originally, accreditation consisted of applying prescribed standards and incorporating a plan for continuous improvement. Over time, it became a system of voluntary peer reviews. By 1900, the peer reviews became specialised programmatic accreditations for such fields of study like medicine and science. By 1920, the process had moved from programmatic reviews to institutional reviews. Thereafter, six regional accreditation agencies were formed which cooperate autonomously within a single methodologically consistent system. Further alignment of the regional accreditation agencies occurred after World War II through the development of accreditation standards which all members must fulfill and through widespread agreement that member institutions need to align actions to their proclaimed goals and intentions. The accreditation model in use today can be considered an open systems model. The open systems theory postulates that input, goals and objectives, interaction with the environment, the processes or functions and outcomes make up the necessary basis to understand the way an institution performs.

In their function as auditors of quality, accreditation agencies are accountable to the constituents they aim to serve. As such, accreditors must also undergo periodic, external reviews by either the United States Department of Education (USDE) or the Council for Higher Education Accreditation (CHEA) to achieve recognition as a valid accrediting agency. In 1999, 19 recognised institutional accrediting agencies existed covering over 6,500 institutions and 61 recognised programmatic accrediting organisations, covering over 20,000 programmes. To orchestrate this plethora of activity, the recognition of an accreditor lies in the hands of the government, unlike accreditation which is strictly non-governmental. The USDE judges schools on the minimum quality required for the institution or the program to receive federal financial aid. The recognition process evaluates all general areas of education delivery and service. It also reviews the objectives and measures of degrees or credentials granted. The governmental recognition runs on five year cycles and USDE staff members serve as the auditors, who then relay a report to the National Advisory Committee on Institutional Quality and Integrity. This

advisory committee is made up of educators or members of the public whose mandate is to recommend to the US Secretary of Education whether an accreditor should or should not be recognised. The other formal organ permitted to grant recognition is the CHEA. The difference between the CHEA and the USDE is that institutions which are accredited with CHEA recognised accreditors are more concerned with academic delivery and accountability than with federal financial support. The major service that CHEA provides to its accreditors is credibility with the public, enabling the public to have faith in the accreditations which its agencies deem on the various institutions or programmes. Finer details on the CHEA are elaborated below.

## **6. *Council for Higher Education Accreditation***

The CHEA is the umbrella organisation for all accrediting agencies in the USA and oversees their activities in all 50 states as well as some foreign countries. The CHEA is prone to recognition and shared accreditation practices among its members. The CHEA is a private, non-profit national organisation which coordinates a vast profusion of institutional and programmatic accrediting organisations and degree-granting institutions which may be public or private, for-profit or non-profit, secular or parochial. While a CHEA recognised agency approval is required for federal funding, the Council is non-governmental. The recognition cycle for CHEA accreditors is every five years for interim on-site visits and every ten years for a review of the accreditor designation. To achieve recognition, an accreditor must file a Self-Study Report and undergo scrutiny with the Committee on Recognition who may effectuate an on-site visit. The Committee makes a final recommendation to the CHEA governing board to either grant or deny recognition. Accreditor candidates or status are judged on five criteria: advancement of academic quality, accountability, encouragement of purposeful change and improvement, fair processes in decision-making, and continual reassessment of accreditation practices. Interestingly these five criteria are rather different from the nine cited for the EHEA proposal above. All five practices are shared by recognised American accreditors and are based on a form of a decentralised peer review process. Even though the process is the same for all, the domains accredited are truly diverse. Accreditors can fall under three different categories: regional, national and specialised or professional. The regional

accreditors conduct comprehensive reviews of two- to four-year institutions. The national accreditors focus on single-purpose or private career institutions, religious schools and distance learning. The specialist or professional accreditors review specific programmes or schools which are health profession related, medical, legal or engineering programmes and schools. Regional accrediting agencies have also been called upon to serve countries all over the world either to directly accredit foreign institutions or to assist in the development of an offspring accreditation system.

## **7. *Purposes of Accreditation***

The purpose of accreditation is to assure students, parents, sponsors, government, and employers and any other relevant external stakeholder of quality. At the same time, accreditation also signals to the public that quality improvements are actively taking place. An institution may only be accredited if it has proven to be financially stable, is administered under responsible corporate governance, and communicates in an ethical and transparent manner. All accredited schools must uphold minimum standards of quality concerning student services, faculty, learning resources, facilities and programmes of study. An accreditation is as much a seal of approval for the health and safety of an institution as it is an indicator of academic processes which are valid and consistent. A major facet of an accreditor's mission is to protect not only the direct consumers, but also the general public. Because of the quality guarantee that accreditation signals, transfers between accredited institutions are simple; credits, courses and programmes are mutually recognised. In some cases, accredited schools may reject all credits for students transferring from non-accredited schools. The standards set by the accreditation agencies are also recognised by the local and federal governments. In the US, non-accredited institutions do not qualify for federal funding. As indicated by Eaton (2000), in 1997-98, federal student grants and loans totalled \$60 billion. In the US alone, the network of accredited institutions represented annual spending of around \$230 billion, 15 million credit students and 2.7 million employees. The final purpose of accreditation is to inform employers of the quality of job applicants and perhaps also to serve as an institution where staff development education may be approved. No approximation of corporate donations or funding is available for private or single-purpose institutions, but

in line with governmental spending, one can expect it to be significant. Thus the scope of accreditation activities is all-comprehensive and equally preoccupied with continuous improvement.

## **8.     *The American Accreditation Process***

Four stages make up the accreditation process as it is practised in the US: Self-Study Report, peer review through an on-site visit, Commission approval, and ongoing external audits. In the first stage, the institution must conduct a programme- or system-wide reflective study according to the standards and guidelines established by the accrediting agency. This typically takes around 18 months and requires the contribution of all staff and all departments. It is considered a bottom-up process. While work is in progress, an interim visit or a preview of the draft may be conducted before the final visit is scheduled. Once the report has been finalised, it is submitted to the agency who assigns a group of peers to conduct an on-site visit to review the institution's practices against what is claimed in the Self-Study Report. Completeness and honesty are important elements to a Self-Study, as the visiting team reserves the right to scrutinise all documents submitted as evidence in the report, randomly interview students, staff, faculty and board members and even "mystery shop" the school's services at any time during their visit. At the end of the visit, the peer review team submits a report of the institution's state of affairs to the presiding Commission of the accreditation agency. Based on this visit report, the Commission judges whether the institution will become or remain accredited or whether it will be denied accreditation. If the final verdict is positive, then the cycle of external visits will most likely be five year focus visits and decennial reaccreditations. If the verdict is not entirely favourable, more frequent visits are required. In a situation of substantial change, interim reports must be filed and the changes reported to the Commission. No matter which occasion for the visit, a Self-Study or Progress Report, which incorporates a critical self-analysis of strengths and concerns, and a continuous improvement action plan is required.



## **9.     *Accreditation Standards***

The standards for accreditation throughout all agencies: regional, national or specialised - professional are considered universal. They should address the fiscal viability of the institution, the quality of its student services, its programmes, faculty, facilities, administrative capabilities and organisational integrity. The framework of the standards is intended to encourage autonomy and creativity, and the Self-Study process is intended to promote innovation in self-improvement. As a result, an accredited institution should have the following characteristics:

1. appropriate mission
2. resources to accomplish the stated mission
3. demonstrate the ability to accomplish the mission
4. evidence of positive future performance

Embodied in each Self-Study Report and the visit report of an institution is a continuous improvement plan. The end of a visit is really a commencement into a new set of quality improvement activities, which are established by the Commission after deliberating the visitors' recommendations. Along with the improvement priorities are deadlines for Progress Reports and interim visits. More and more, the improvement plans tend to emphasise performance indicators in terms of student learning outcomes as well as measurements of other institutional activities. In line with developments in Europe, outcomes based measurements are overtaking as leading indicators of institutional quality.

## **10.   *Alternative Accreditation Process: AQIP Systems Portfolios***

The above traditional accreditation is the one that was used in the case study, but as a counterpoint even within American regional accreditation agencies, there are other newer alternative approaches to quality assurance. One such alternative promulgated by the North Central Association of Schools and Colleges (NCASC), which covers the Midwestern and Central states of the country, is the Academic Quality Improvement Program (AQIP). Coincidentally, AQIP is the quality assurance approach used by the case study school's partner university within the ramifications of a collaborative agreement. The AQIP approach allows qualifying members the option to monitor their

own quality performance. Members can qualify if they have a proven track record of accreditations which spans a significant period of time, usually decades. The AQIP process departs significantly from the traditional process in that site visits are no longer required as part of the quality appraisal review. Instead, AQIP uses ‘quality check-up’ visits. Also, the review runs on slightly shorter cycles of seven years rather than the traditional ten. Again the theoretical foundation is systems theory, but the view of an institution is expanded to a “portfolio” of major systems. For each of the major systems, the institution must explain the “context for analysis, processes, results and improvement” and be able to answer critical questions for their key institutional objectives (AQIP, 2005). They must address three essential questions: How do we do this now, what results are we getting, and how can we improve our performance? The general philosophy is that once a Systems Portfolio is established, the institution can use it to demonstrate accountability to the external environment as a tool for internal strategic planning and as a comprehensive document to give a comprehensive picture to anyone interested in the institution. The accreditation process as a strategic driver and transparency about corporate performance are highly valued in the AQIP process. All AQIP System Portfolios are to be considered public documents. They must be made available to all stakeholders and accessible for the general public.

From the three questions noted above, it is evident that the approach is very forward-looking. Once a Systems Portfolio is established, there is no need to repeat any historical data as is the practice in traditional accreditations. The Systems Portfolio is comprised of an Institutional Overview and a report on the Nine Standards which must be mapped against the five Criteria for Accreditation. The Nine Standards are:

1. Helping students learn
2. Accomplishing other distinctive objectives
3. Understanding students’ and other stakeholders’ needs
4. Valuing people
5. Leading and communication
6. Supporting institutional operations
7. Measuring effectiveness

8. Planning continuous improvement
9. Building collaborative relationships

The standards are correlated to the following Criteria for Accreditation:

1. Mission and integrity
2. Preparing for the future
3. Student learning and effective teaching
4. Acquisition, discovery and application of knowledge
5. Engagement and service.

Already the diction or jargon of the AQIP process indicates a rather post-modern *modus operandi*. In its attempt to be broad and flexible, there is a tendency towards soft and fuzzy standards and criteria; although, the process itself is well defined. The quality assurance process starts with the institution conducting a strategy forum to articulate its goals and objectives. These are generally limited to three or four major “Action Projects”. Typically, after a three year period, the institution collates a report on all the above listed elements to provide evidence of implementation and the results of the quality initiatives its constituents agreed upon. Once the report is finished for the given period, the accreditation Commission then reviews the institution’s progress through an appraisal process.

### ***11. AQIP Systems Appraisals***

In the systems appraisal process, as mentioned above, there are no ‘site visits’ by peers. Rather, a team of higher educators and systems oriented, continuous improvement experts convene to develop a consensus view of the Systems Portfolio. The team provides feedback to the institution undergoing review with a Systems Appraisal Feedback Report, which is made up of Critical Characteristics Analysis, Criterion Feedback and Strategic and Accreditation Issues Analysis along with an Appraisal Summary. In this manner, the appraisal team overtly identifies and gives recommendations about what it considers to be strategic priorities for the institution. There is great emphasis on mission, goals and context rather than on historical or technical details. The cycle of appraisals is seven years and shorter than the traditional decennial reaccreditation cycle. During this time, the institution must submit Annual Institutional Data Update Reports and undergo at least

one 'quality check-up' visit. The philosophy of the check-up visit is different in that it is conducted a posteriori as a Systems Appraisal follow-up to verify results of strategic actions chosen by the institution. Two other interesting differences to the NEASC accreditation process is that first, the mandatory follow-up visit after completion of the appraisal process must take place no later than one year before any consequent reaffirmation of accreditation. Secondly, the leader of a previous quality check-up visit serves as an evaluator on a subsequent team visit to the same institution. As institutions are appraised, an outstanding institution receives recognition from the Higher Learning Commission of the accreditation agency for its excellent practices. The Outstanding Practices Award requires that the report be formally shared with other contending institutions in an online, public best-practices sharing forum. The AQIP process, both in creating the Portfolio and undergoing appraisals, is rather extensive and very time and resource consuming, since all constituents must be involved and informed. Thus any institution which decides to opt out of the AQIP may do so freely and return to the traditional accreditation process. It could also happen that a member institution may be asked to leave the AQIP process if the NCASC deems it inappropriate or dissatisfactory.

## **G. Conclusion**

This chapter has explored various definitions about quality and surveyed a wide spectrum of quality assurance practices to determine what assumptions and approaches are at play, as diverse schools and agencies attempt to enact quality within their own systems. Current literature on educational quality leads to no single, unequivocal definition. The existing definitions vary according to the ontological assumptions made about the purpose of education and the educational ideology, which dominate the discourse about school quality. As evidenced in discourses regarding school effectiveness, the term "effective" is value ridden; it is not a neutral term. So it is with the way quality is perceived. Traditionally schools were viewed as relatively autonomous agents that could somehow independently engineer quality. Yet in this epoch of globalisation, it is hardly sensible to insist that such random heuristic methods can meet the demands of transnational mobility. A less simplistic model that takes into account contextual criteria, such as the stakeholders, systems, geographies, economic and legal infrastructures and so

on, is more relevant. Substantial departures about the notion of quality could be observed depending upon the perspective of the stakeholder. With the individual customer or surrogate customer perspective, the danger to interpreting quality is the high degree of subjectivity that varies with the individuals' preferences and foreknowledge, or lack thereof, of education. The individuals' diverse backgrounds imply conflicts to interpretation amongst the individuals and of each individual over time. A further complication is that students are as much input as they are output in an educational system. Thus a heavily TQM influenced approach is not ideal for education, a service which is not only insufficiently commoditised, but also highly dependent on personal experience. The same argument can be extended to the institutional perspective. The issues at an institutional level revolve around the teaching-learning process, where students as input co-create school effectiveness. When the expectations of students are juxtaposed to the teachers', it is most probable that the learned curriculum will deviate from the intended curriculum (Preedy and Faulkner, 1998). The other side of the institutional equation is the teachers' abilities, knowledge and judgements which are neither static nor infallible. The teaching-learning process is messy, ultimately because learning happens through mistakes and mistakes of course negate quality. The conclusion, at this point, about quality in education is that it has to be a certain baseline. Determining the baseline however is a function of the systemic perspective on the purpose of education in the correlating society. Whether education is seen as an intellectual or utilitarian pursuit will flavour the social dialogue of educational quality of a given system.

Quality assurance is not well served by the tensions that exist in definitions of quality, the vagaries of which have led to a myriad of quality assurance approaches. Also the international context of education comprises of dissimilar cultural renditions of educational processes, as exemplified in the discussion of curriculum versus didactic in Europe. Thus the conceptualisation of quality compounded by the complexity of these pluralistic traditions has brought on a set of divergent assurance processes around the globe. Two fundamental aspects however have been identified which should be managed at the quality implementation level: accountability and continuous improvement. A robust

quality assurance procedure would ensure that both of these aspects are present to ensure that quality is taking place in a dynamic and engaged manner. Accountability alone would be historic and static. Continuous improvement alone would not guarantee the ownership and involvement typically attributed to accountability. Then, at the level of precise assurance methodologies, Fidler (2002) identifies four types that vary with the extent of internal or external control exercised over the assurance process. Real life examples of the four approaches applied were discussed in different settings, along with an assessment of the advantages and disadvantages that each incurred. In particular self-evaluation and peer evaluation are of interest to the thesis case study and as such, the critical review of substantive issues focused on these two approaches. Briefly, the most significant risks to self-evaluation are micropolitics, methodology, resources and economics, and the philosophy about the approach. An onus to safeguard objectivity in self-evaluations is a healthy scepticism of staff self-satisfaction (Kells, 1992). As Rosenzweig (2007) relates, “If your data sources are corrupted by the Halo Effect, it doesn’t matter how much you’ve gathered.” The reliability of self-evaluations can be undermined. As for peer evaluation: neuropsychological biases, previous visits, peer evaluators’ personal experiences, as well as relationship factors such as who the evaluators are, what kind of relationship the evaluators have with the school, and when and how the evaluations take place are substantial factors for valid and reliable quality assessment.

Finally the broad objectives of this research, to explore established quality assurance models and to inform quality initiatives of educational managers and agencies for future practice, is supported by an in-depth look at the assurance process used with the case study at hand. The latter segment of the literature review relates the quality assurance procedure identified as “accreditation”, one European model and one American, the American accreditation being the process applied to the thesis case study. From this synopsis it is evident that the assumptions about quality, which underpin the two approaches, differ at the area level: EHEA and the CHEA, and at the methodology level: EQF and ENQA as compared to the US Regional Commissions and AQIP. Interestingly the European model is derived from the US model, but its current shape indicates that it

has been largely adapted to fit burgeoning priorities that come with the diversity of cultures and languages that Europe faces. On the other hand, one can see that quality assurance is not a static process in the US either, since there are changes to both the structure (consolidating Commissions) and the process (AQIP) for those institutions that have achieved relative maturity with quality assurance. Thus it would seem that the validity, reliability and relevance of quality assurance are very much dependent on the geographic context, the life cycle of the school and the life cycle of the quality assurance system in addition to the four methodological approaches discussed above. One cannot help but sense that the temporal and locational contexts of education are crucial to a more replete model of quality and its assurance.

### **III. METHODOLOGY**

A critical element in framing a research project is the research design. No matter how burning the research question, if the research design is not able to tease out the factors that make a true difference to investigating and analysing the situation, then the issues will have been bypassed. The effectiveness of a research design depends on appropriate methodology and analysis. For the purpose of this thesis, a fundamental decision was to opt for the qualitative approach of case study methodology. Why? A cursory look at the research question would indicate that either a qualitative or a quantitative approach could be applied, but the literature review illustrates the complexity and ambiguity, which cloud the conceptualisation of educational quality and the identification of an appropriate quality assurance process that correlates with a school's context. Because of this, a qualitative research approach that embraces all eventualities seems to be a more powerful tool to capture the complexities and ambiguities. Although previously available quantitative data are included in the case study as counterpoints to the descriptions accompanying the accreditation process, the focus is on understanding the issues and their interdependencies. It was important to streamline a vehicle for Verstehen, not disaggregating causal links. In this section, I further explain in detail why the qualitative approach is preferable, reflect on the figurative costs and benefits of participant observation and the case study method in general. Then I discuss the case study methodology in specific as applied to this particular research: the type, the observation method, the ethical implications, data collection, and the case study protocol. A section on the validity, reliability and triangulation follows as well as an explanation of analytic induction carried out with the case study.

#### **A. Choice of Approach**

##### ***1. Qualitative versus Quantitative***

There are four reasons for choosing the qualitative paradigm. First is that the quantitative approach is not more justified. Second, it is better aligned to the learning to be gleaned in the process. Third, the researcher's access to data is almost ideal for case study



observations, and finally the various theoretical, philosophical dimensions of this research project indicate that it is a better fit for purpose.

The initial consideration in choosing the methodology was to weigh the relative advantages and disadvantages of each paradigm for its own sake. According to Kvale (1996), the nature of the research question can determine the choice of approach and the tools applied. The research question for this study, expressed in a simplistic manner, is to determine if quality takes place i.e. if accreditation assures quality. As such the goal is to identify a phenomenon and determine whether it happens or not. The goal does not require fine calibration of measurements, nor does it require extensive statistical analysis to establish results. Seen from this standpoint, there is no need to use a quantitative approach, because there would be no value-added. Yet it is imaginable that the same question could be equally feasibly handled in a positivist manner. It is feasible to create data sets, use surveys or questionnaires for example, and quantify findings in order to answer the same question. The empiricist approach is certainly seductive, and if I were to go with personal inclination, then a mathematical, deductive approach seems neater, less ambiguous and more factual. Like Stanley Bing (2004) so incisively empathises, “We people in organizationland...seek to minimize the feeling that our world is governed not by laws of nature but by...greed, need and the desire for maximum power and booty.” As tempting as ‘truth’ by numbers is, the empiricist approach risks neglecting critical incidents that may make or break quality, because they were not identified as variables to be observed. Furthermore establishing metrics for such a slippery concept as quality seems as much prone to arbitrariness as any other methodology. In their paper on ethnostatistics and sensemaking, Mills et al (2006) echo the illusory nature of quantitative data, “The statistics that are produced can have multiple meanings...” Ironically their paper refers to statistics from accreditations and rankings of schools. While ethnostatistics may contend that social context is indeed heeded in data collection, the authors admit that sensemaking is necessary as a complementary heuristic to expose underlying assumptions. In sum, empiricism is feasible but in no way ideal, superior or even necessary for this research question.

Second, at the risk of sounding cliché, it is the journey to accreditation not the destination, which holds the greatest potential learning in store. As an analogy to sports, understanding how the school and the accreditation agency play out this accreditation game contributes conceivably much more to future research and practice than counting the exact number of passes or the final score. To maximise the learning to be gained, the research approach needs to be as non-invasive as possible; otherwise, the behaviours of the subjects could be disrupted and hence corrupt the data. This is yet another reason against overt, quantitative methodology. The periodic interventions that quantitative data collection would require would make it very visibly “research” rather than accreditation, and such interventions could make participants unnecessarily self-conscious. Keeping the research a covert investigation allows for observation of unadulterated quality management and assurance processes. The literature review reports that typically there is enough performance pressure anyway during a quality assurance event. It would be detrimental to compound it by making school staff feel that they are also subjects of research, particularly since the researcher was also Dean. A staff member may feel ambivalent, if she/he cannot separate the two roles. Making this a covert exercise eliminates the confusion of staff motives and preserves the authenticity of accreditation as experienced by the participants. Given these reasons, qualitative research is more likely to yield the gold nuggets of educational management practices to inform others who are concerned with the whys and wherefores of quality implementation.

A third consideration in choosing the qualitative approach is situational, to take advantage of the access at the researcher’s disposal. As Dean of the school where the accreditation is taking place, I can have practically unlimited access to data and participate intimately from beginning to end. Given this access and liberty, the more encompassing and emic the approach, the more replete the findings would be. Also as can be seen from the literature review, the views of the stakeholders are tantamount to various interpretations of quality. So getting into the mindsets of the different participants is crucial, and the access to drill deep into behaviours and attitudes of participants for ongoing inductive analyses is necessary to address the research question. Gummesson (2000) notes that gaining access to management realities is the greatest problem a

researcher confronts. Given this access, a qualitative approach is the most effective way to exploit the direct and constant contact with accreditors and the school staff, students and other stakeholders. All details or events that occur can be recorded, coded and analysed with deserved attention rather than being pre-empted.

Finally, the theoretical, philosophical basis for using the qualitative paradigm becomes salient when drawing upon Creswell's comparisons of the qualitative and quantitative paradigms (1994). Creswell looks at five different dimensions to differentiate the approaches, which I iterate here. First, the epistemological role of researcher begs a qualitative methodology due to the high interaction of the researcher with the variables. The researcher as a participant in the case study, as dean of the school during accreditation, is not independent. Second, the ontological assumption derived from the literature review supports multiple realities of quality and its assurance. This does not lend itself to a quantitative approach, which assumes and tests one reality. The problem is multivariate, and there should be no behavioural control of factors. Third, events are current and unpredictable; hence, methodology needs to be inductive to allow data and process to influence interpretation. Fourth, the event is value laden and de facto, the axiological approach is qualitative and phenomenological. Fifth and final dimension is the rhetorical approach, which in this study is personal and informal. The case study relates an experience imbued with the collegiality and the adversity that accompany an accreditation and all its pressures and expectations. The research is context-based rather than rule-based, and the researcher is both participant and observer. In the end, any research project can be framed with either the qualitative or the quantitative paradigm depending on the nature of the research question, the data to be collected, the abilities and the proclivity of the researcher, and the goal of the researcher or the research sponsor. But the abovementioned reasons make a stronger case for a qualitative, inductive approach.

## ***2. Participant Observation***

The thesis case study is a unique case sampling for reasons of feasibility, practicability and accessibility explained above, and the data was collected through active participant observation over a 22 month period starting early June 2005 until end of April 2007.

Given that the researcher is a complete participant, scepticism about the role of the researcher and the value of the data and analysis may arise. The fact that data collection happens covertly may also make some squeamish. Participation and observation methods can vary from complete participation, participant observation, observer participation to complete observation depending on the degree of participation and openness about the research process (Creswell, 1994). Thus covert investigation through complete participation is a valid and acceptable form of research. The British Educational Research Association guidelines for ethical research (2004) accounts for the possibility of “deception or subterfuge”. This applies to situations, where covertness is necessary to collect appropriate data, which I believe is certainly the case with this thesis project. I also believe it is necessary to alleviate the participants’ fear of having things attributed to them, which could endanger their relationships within the school, and in this way protect them in their professional sphere. The concerns here revolve around trust and deception. There has to be trust of the researcher in her judgements and between the participants and the researcher. My primary judgement call is to honour the contractual obligations vis-à-vis the staff and their trust in me as Dean. My secondary decision is to preserve the quality and authenticity of data by keeping the accreditation process completely untainted.

The observations took place in meetings and in cooperation with the accreditation task teams. They ranged from unstructured to semi-structured meetings, discussions, debates and predominantly conversational interviews to structured events such as certain interviews and the highly structured NEASC meetings. In the structured interviews, discussions focused on processes assigned to each of the formal departments of the school. The data collected underwent meaning condensation into the form of work process flowcharts that are integrated in the case study as illustrations rather than being transcribed into interview notes. This non-designation of informants enabled staff members to speak more freely about their activities. Also knowing that the final format would be a flowchart made staff members feel safer when divulging details about situations that had gone awry. The reason given for the flowchart was that as Dean, I was inventorying school processes in anticipation of the upcoming accreditation. The interviewees then signed off on the flowcharts by confirming and/or adapting them. In the

course of mapping out the school processes, observations were made about the pursuit of quality and the resources and obstacles to achieving quality as per the staff members' perceptions. After categorisation of the discussion points, some of the interview dialogue appears in the text under the Standards albeit not as quotations. Also most of the first draft of the Self-Study Report comprised of firsthand responses of the staff participants. These reactions are discussed in the findings in the Case Study and the Data Analysis chapters following.

Participant observation is prone to self-deception just as self-evaluation is susceptible to the same. Yet it is not more prone to it than other methodologies. At one level or another, there is some degree of hermeneutics that comes into play. Non-participatory observation does not circumvent researcher interpretation. Neither do quantitative techniques. Again I refer to sensemaking (Mills et al, 2006) as an example, but even before a scientific experiment begins, the decision about which variables to isolate or how to set up the control group or which sample to select are all personal judgements. And results do not always speak for themselves. The existence of Type I and Type II errors is blatant admission to the interpretive quality of quantitative research. Another example is the common error term in a linear regression model, which represents unpredicted variation in the dependent variable. As an analogy, this case study looks at the point off the trend line and tries to understand why it is where it is, and that can only be achieved through participant observation. Calculating least squares tells us where the point is but not why. The point is that ultimately all research is autobiographical and that oxymoron, "objective self-reflection", is an inherent part of any research methodology. What I observe is entirely dependent on my perceptions, which emanate from my participation. I can only guarantee that I was accurate to the best of my limitations and trust myself to not commit a Type III error of self-deception.

### ***3. Case Study Method***

To wrestle with an accreditation process and its effect on quality in education as a practitioner/manager and researcher, the only sensible way to approach the project was to use the case study method. Day to day, incident to incident observations have the

potential to be very revealing in a way that a positivist study could not. Though it could certainly be argued that quality can be quantified - inputs allocated, outcomes measured, quality is much more than that. Quality takes place in the minds and manners of the people enacting it in day-to-day life, which may never be captured in the numbers when they are crunched into statistical results. The purpose of this thesis is not calculated deduction; it is to convey to the reader a hallmark quality assurance event in the life of a particular school. Much like a play unfolding its plot with all its twists and turns, I hope to bring different insights, little moments of truth, to other practitioners and managers. The audience should be intrigued; “What would I have done? Having read this case study, what would I do now?” An empirical research project can prove things and draw up clear-cut scientific answers, but the added beauty of research in social sciences studying this fluid medium called life is to move beyond the answer and anticipate the next question. By drawing fuzzy generalisations, social research can equally contribute to a robust body of results, which can provide practitioners with best estimates of trustworthiness to enhance decision-making (Bassey, 2000). To this end, I discuss why in particular the case study method is most appropriate, what type of case study I used, the observation method, ethical implications, data collection methods including a case study protocol. I deliberated on issues of validity, reliability and triangulation to safeguard the robustness of data. Finally, I close with some thoughts on how the choice of approach aligns well with analytic induction, the most appropriate data analysis method for understanding the case study material.

## **B. Case Study Method Applied**

For this thesis, the case study research method was deemed the most appropriate methodology due to its ability to approach and observe real-life episodes at an intimate level (Adler & Adler, 1994). Observing the accreditation process requires continuous engagement because of the unpredictable nature of the process and the heterogeneity of participants. The method of observation must be emic (Silverman, 1993), all embracing, unstructured and open as much to critical incidents as to representativeness and generalisability. Such being the situation, it is impossible to eliminate subjectivity. The research conducted functions within the interpretive, not empiricist paradigm. The danger

of taking a positivist stance for such a question, “Does accreditation assure quality?” is that it may allow crucial events to escape attention which are essential to understanding the phenomenon. The challenges of defining quality lend themselves to a fluid, revelatory approach to capture and verify whether quality is truly the end result. In this vein, the case study approach is also more apt to establish cause and effect from the multifarious activities, which cannot be determined a priori. It can go further and render “intricately related...coincidental actions” into patterns or phenomena (Stake, 1995). The research question requires explanations of events, illustrations and interventions which occur in the way the school practices quality on a daily basis. Translated into Bassey’s variables for fuzzy generalisations, the research design was built on a case study of the NEASC decennial reaccreditation (x) of a private, for-profit Swiss hotel school, HSH (y) to test for assurance of quality (z). The population and sampling is limited to the case study school. The choice of a unique-case sampling is based on the belief that a single case can be either representative or critical enough to test theory. Because of the history of accreditation at HSH, the case is also longitudinal and typical of NEASC accreditations of for-profit schools outside the USA. Throughout the literature review section, I grappled with the concept of quality, and I concluded how the definition is context-bound, coloured by the culture, the epoch and the environment which surround it. The aspects that need consideration are rather phenomenological and hardly quantifiable. That the positivist paradigm is not a natural fit is evident from the four research objectives of this study:

1. To investigate how quality is conceptualised by various stakeholders
2. To assess the effectiveness of accreditation standards
3. To examine whether the accreditation process is valid, reliable and relevant
4. To evaluate if the accreditation agency enacts what it purports to do.

### **C. Type of Case Study**

An approach, which can at once explore causal links of a multifaceted problem, tread through unclear outcomes and offer some type of meta-analysis of a real-life example would be ideal. The case study method offers this possibility, but there are different approaches and types within the case methodology. A case study is appropriate when

dealing with contemporary issues, not historical events, and particularly effective since unlike a laboratory experiment, there is no behavioural control of events. According to Yin (2003), case studies may be exploratory, explanatory and descriptive in the sense that operational issues are reported, discussed and analysed over time rather than frequencies or incidents being counted and tabulated. Research documented in this fashion has no interest in being predictive. Instead, the hope is to provide analytic generalisation for a theoretical proposition through intimate observation of a simple unit of analysis, in this case the NEASC decennial reaccreditation. The thesis case study is situated between the explanatory and descriptive types (Yin, 2003) or perhaps between the descriptive and evaluative types (Merriam, 1998) in that the research aims to discern whether quality is assured or not. While it is a current and unique occurrence, it is one which is replicated with thousands of institutions as a standard quality assurance procedure. The actual case study event is representative and the fact that it is the decennial reaccreditation means that verification of school processes forcibly entails longitudinal data. This material is included in the matrices of the chronology of accreditation events in the Appendices.

Significantly, in the event of changing school structure, it is really only through describing and explaining that an observer can understand how and why accreditation can assure quality, if it does. Also, in the event that school structural changes are not strategy driven, then case study is probably the best method to show how accreditation cannot assure quality through its ability to penetrate the transfigurations which beset the school. The utility of the descriptive case study type is its potential to integrate thick descriptions (Morrison, 1993) of events in a natural environment, which are expository and revealing. While the descriptive type could lend itself to token “journalism”, measures were taken to avoid a singular view of the process. It must be acknowledged that given a unique situation, it is difficult – if even necessary – to claim validity or reliability in the traditional sense. Ultimately, the debate revolves around an epistemological question of whether the case study method is valid and reliable. I come back to this in depth later, but for the moment, I concede that the likelihood of repeating the exact same events is absolutely null. What is crucial here is the ability to penetrate truths about human behaviour through first-hand observations. The significance of the case study in



interpreting and understanding the accreditation process far outweighs the need to justify replicability. Education and accreditation are human endeavours which associate human intellect with human behaviour, thus the inherent complexity and unpredictability necessitates a holistic approach (Nisbet & Watt, 1984). Nonetheless, robustness of interactions and data reported can offer important insights and significantly reduce subjectivity. For this I now turn to the observation method used and the ethical implications encountered during the research process.

#### **D. Observation Method**

Within the case study method, the role and function of the observer is intrinsic to analysing the data gathered, or rather the experience conveyed. The current employment situation of the researcher is Dean of the case study school and one of the accreditation Steering Committee Co-Chairs. To encourage free flowing discussions and not put the school population in an awkward situation should they be shy about being objects of research, the greater part of the observations were carried out on a covert basis as a fully integrated participant observer. Although the role of the researcher in the case study school can bring up questions as to possible intervention, the role of the researcher in the field of research was to ensure complete immersion and intimate access varying from complete participation to participant observation. The crux is not what the Dean does in the accreditation process, but how accreditation does or does not assure quality. Having established that, wearing two hats obliges a clear separation of duties, that of Dean and that of researcher, and they must be held apart. Sometimes that means that objective self-reflection is part of the research process, because as researcher I must observe what I do in my role as a dean. Again I would say that all research in a way is autobiographical. In any case, it has been argued that all research is to one extent or another participatory (Adler & Adler, 1994). For this case study, the intention was to develop a real insider's perspective in order to transcend the boundaries of pre-ordained hypotheses. The objective was to avoid the myopia of an outside observer resulting from a highly structured approach.

As mentioned above, measures were taken to make the research data as robust as possible. There were two other persons involved in verifying the findings and writings of the entire accreditation preparation process as well as that of the accreditation visit: the accreditation Steering Committee Co-Chairperson whom I will refer to as Mr. Jack and the Accreditation Project Manager and co-editor whom I will refer to as Mr. George. In addition, direct observations of the accreditation preparation task teams and the accreditation visiting team are incorporated into the case study data. The perceptions of the various stakeholders in the process enable rival theories to emerge and debates to ensue about the existence and level of quality in the school. The accreditation task teams functioned in an autonomous, unstructured to semi-structured manner even though they were on a strict timeline. Their motivations and intentions as well as their scepticism and hesitations are brought to light through the discussions and documents they produced. Further, the very structured non-participant observations made by the accreditation visiting team during their visit and their exit interview are relayed in the text. The visiting team is “non-participant” in the sense that they have an auditing role rather than the quality performance or enactment obligation of the school’s insiders. They are excluded as participants; although, obviously they are central to the accreditation process as peer reviewers. Semi-structured observations collated in the form of Strengths and Weaknesses Analyses by the staff and students, which were conducted by Mr. George without the participation or intervention of the researcher, balance some of the findings which come directly from the researcher’s own notes. All structured events such as interviews with various task team members are summarised in flowcharts of the key school processes and cross-validated by respondents. Other structured events were accreditation meetings in the presence of the researcher, which were conducted by the Steering Committee Co-Chairs and recorded by the academic secretary in meeting minutes. Fortunately, a few of the meetings were also tape recorded by the secretary to check her own minutes writing accuracy rather than at the behest of the researcher. Finally historical and current results from non-accreditation motivated school surveys comprise the very structured, quantitative data material. They are summarised in the Tables of Module Evaluation and Student Satisfaction Surveys (SSS) in Tables 6 and 7 of the case study. They cover the last three years of the surveys’ existence. While there are

probably some inconsistencies longitudinally, the surveys do reflect student opinions in a very effective manner. They were completely anonymous, and their response rates were very high; between 67-85% for the SSS and between 86-93% for Module Evaluations since fall of 2005. The greater part of the case study narrative relies on the participant observations to weave all the information together into a tapestry, an event history.

### **E. Ethical Implications**

An insider's view to research brings with it ethical implications that were not necessarily evident at the beginning of the thesis. Because of the growing tensions within the case study school due to its continued restructuring and rationalisation, it became a moral imperative to anonymise the school and all participants. At the outset, the owner, the accreditation agency director and the Steering Committee Co-Chair were informed of the research, and their consent was readily given. However, the decentralisation initiatives of the school's holding company began to multiply and complicate the functions of several key players in the accreditation process. This brought on an unprecedented level of micro-politics hitherto unexpected. With the departure of some key personalities, implications of disclosing their identities prompted a change to the case study write-up. In addition, an unpleasant turn of events occurred with the sudden immediate dismissal of the Steering Committee Co-Chair, Mr. Jack, shortly after the accreditation visit. The owner abruptly decided to disband the central quality department. This event is discussed later during the case study as a critical incident. Suffice it to say for the moment that all names of persons and institutions, excluding accreditation agencies, are fictional to protect both the participants and the truthfulness of the process. Only in this way can the full details be revealed to the reader in a faithful account of the original observations. All material is naturally context bound. So descriptions of the internal and external contexts of the accreditation event are factually recounted, in recognition of the reality that all key processes of a school are in essence co-determined by the economic and political framework of the school. Only the locations but not the countries were disguised.

## **F. Data Collection**

Data relating to each of the four research objectives were collected from multiple sources. First, to investigate how quality is conceptualised by the accreditation agency, information was gathered from the published material of the accreditation agency (NEASC and CHEA websites and other publications) and through clarification interviews with the accreditation agency's directors. Then each of the Standards used as accreditation guidelines were recorded and analysed for effectiveness in assuring quality. Further, archival data such as previous accreditation reports and various statistical reports were used for documentary analysis to confirm the key areas of quality review of past performance. The third research objective deals with validity, reliability and relevance of the accreditation process. Information pertaining to the validity, reliability and relevance comes primarily from comparisons with other quality assurance procedures. In this case study, the quality assurance approaches used for comparison are the ASEH accreditation process which is industry based and ISO certification which is TQM focused. As the school is simultaneously undergoing ISO certification and had achieved ASEH reaccreditation in the fall of 2003, they were the most accessible counterpoints. Further comparisons were made to the quality assurance procedures introduced in the literature review. The final research objective, 'to evaluate if the accreditation agency enacts what it purports to do', interim accreditation visits and reports as well as the accreditation visiting team's final report were reviewed in conjunction to notes of real-life events and incidents which had occurred. Past NEASC recommendations were also followed up for the remedial measures they were to instigate, starting from the initial accreditation and as consequences of the interim visits by the accreditation agency. The following protocol identifies the various elements considered in the research process.

## **G. Case Study Protocol**

### ***1. Purpose***

The purpose of the protocol is to guide the data collection process in the form of a research agenda. The principal question is "Does accreditation assure quality?" The protocol used for this case study is based on suggestions from Miles & Huberman (1994).

**1.1: Definition of quality. Who determines it and how is it determined in the accreditation process? Under which circumstances is the accreditation exercise carried out?**

Is quality benchmarked? Is there an independent baseline or are all measurements intrapolated? If there is no recourse to “objective measures”, what is the value and relevance of the peer evaluations? Who are members of the visiting team, and what are their credentials/qualifications? Are their recommendations relevant? Is there a culture bias in the accreditation process? If so, is it suitable to the culture of the school and its environment? Could there be a cultural bias that overlooks or inappropriately perceives the workings of the school?

**1.2: Theoretical framework**

The theoretical framework for the research itself is open-ended in that the process is an inductive spiral, where the findings inform further research. Thus, it is a type of analytic induction, in which the researcher derives conclusions as the events unfold to explain and predict aspects of accreditation as a real-life experience in developing school quality. The theoretical framework for this case study itself, of the school under observation, is that of an open-systems model which is prone to ambiguity due to the school’s and the environment’s continual states of change.

**2.     *Data Sources and Collection Procedures***

This section outlines which data sources must be accessed and specifies which material must be gathered to ensure thoroughness. It is replete with timelines and checklist for data collection used in the accreditation process with an indication to where the data is housed, but these specific details are not included below.

**Table 2. Data Sources**

<b>2.1: Sites to be observed</b>	<b>Contact person</b>	<b>Material to be collected</b>
Central Administration	Quality Control Manager	past evaluations, statistics

		ISO documentation evaluation surveys
Marketing	Marketing Manager	brochures, flyers websites agents network
Human Resources	HR Manager	personnel information qualifications, salaries job descriptions staff development staff handbook
Admissions	Admissions Officer	student database enrollment process enrollment statistics dates and fees publications
Student Placement Centre	Placement Officer	job placement statistics industry contacts database
Internship Office	Internship Coordinator	internship statistics internship reports employer database employer evaluations
Alumni Association	Alumni Coordinator	alumni statutes alumni database alumni recruitment data personal interviews alumni comments
Academic Office	Academic Secretaries Academic Quality Manager	retention/attrition rates success/fail rates Quality Standards Manual student handbook student files ASEH documents

		NEASC meeting minutes
Faculty Task Teams	task team leaders	meeting minutes draft reports
Curriculum Committee	faculty representatives	course material assessment material
Governing Board	board members	statutes minutes personal interviews
Advisory Board	board members	statutes minutes personal interviews
Student Council	student members	minutes exit interviews personal interviews
Information Technology	IT Manager	facilities/technical data
Learning Resource Centre	Librarian	library collection list periodicals list electronic databases visit/usage statistics
Student Services	Nurse	medical reports
	Receptionist	incident reports/logbook
Accounts	Accounts Manager	payment/refund policies
Archives	Academic Secretaries	past accreditation reports past school publications past school records newspaper clippings affiliations

As each of the sites is visited, the researcher conducts personal interviews with key administrators and personnel. Flowcharts of job processes for the sites and/or between

departments are collated by the researcher based on the feedback. The flowcharts are used as reference points to understand how and where processes interact for quality to come about or not. A global school planning and assessment overview is created from knitting all the processes, or flowcharts, together to map the entire school system (Figures 2 and 3).

## **2.2: Data collection plan**

- Any prior accreditation reports and data
- According to schedules of general accreditation preparation meetings and their contents
- Post-accreditation visit reports and data
- According to the accreditation timeline and calendar of activities
  - Before the accreditation visit:
    - published Standards and Guidelines of CTCI (2003, 2005)
    - Internet research on NEASC / CHEA websites
    - correspondence (2 HSH folders)
    - clarification phone interviews with agency directors
    - two face to face meetings planned with agency directors
    - attendance at a Swiss accreditation symposium featuring NEASC and the Swiss federal representative in Geneva
    - longitudinal data of 12 archival documents from June 1994 to March 2004 including 6 HSH reports and 6 NEASC response letters
    - two in-house surveys (Module Evaluations and Student Satisfaction Surveys for three years from 2003 to 2005)
  - During the accreditation visit:
    - site visit agenda
    - visit protocol
    - interviews with peer evaluators
    - exit interview meeting and minutes/notes taken by researcher, co-chair, co-editor
    - post-visit meetings and interviews with staff



- After the accreditation visit:
  - The follow-up final report by the peer evaluators
  - Commission meeting decision letter
  - ISO internal audit report 2007 (for comparison)
  - ASEH reaccreditation report from 2003 (for comparison)

### **2.3: Preparation checklists for the accreditation**

**Checklist 1.** Available in the task teams' online database:

Calendar for the organisation of Self-Study

Progress report forms

Agenda templates

Minutes templates

Accreditation standards and guidelines

Electronic evidence

**Checklist 2.** Other hard copy data in various files:

Legal documents

Correspondence

Documents and records lists

Archival NEASC documents

Archival ASEH documents

Archived general school documents

## **3. *Outline of the Case Study Report***

The broad-based framework is intended to formulate the case study narrative without confining the incidents reported. Deviations or additions are most likely.

**3.1:** History and developments of NEASC

**3.2:** History and developments at HSH

**3.3:** Chronology of NEASC visits to HSH

**3.4:** Macro-environment of HSH

**3.5:** Decennial reaccreditation process (Self-Study, accreditation visit)

**3.6:** Illustrations, flowcharts of processes

### 3.7: Comparative analyses (staff, students, visitors)

## 4. *Case Study Questions*

### 4.1: To the interviewees

#### (accreditation task team participants)

- (a) Before: How will earning the reaccreditation affect the school?
- (b) After: What impressions did you have of the accreditation process?

#### (accreditation agency directors)

unstructured, depends on the phase and progress of accreditation

### 4.2: To the individual case

- (a) Are there signs of quality improvement over the years that have been brought about as a result of being accredited?
- (b) How are stakeholders affected by accreditation i.e. does it represent accountability?

### 4.3: To distinguish patterns of findings

The question I pose here is “What can or should be categorised or coded, if at all, to reveal patterns or trends?” Probably the best way to uncover patterns without any bias would be to not start with any categories or codes at all. On the other hand, since the research question deals specifically with accreditation standards, the CTCI Standards themselves must serve as generic categories for much of the discussion.

### 4.4: To the entire study including the literature

How does quality being assured by the accreditation process of the case study school relate to the definition of quality and the assurance processes presented in the literature review? Does practice fit theory and vice versa?

### 4.5 Normative questions about conclusions i.e. the case study question in sum.

## H. **Validity, Reliability and Triangulation**

The case study protocol is one way to secure that the body of evidence gathered attests to the methodological soundness of the research. Other means used for each of the issues:

validity, reliability and triangulation are explained in detail below. For content validity, the material and events observed were based, on the one hand on the literature found in the public domain on quality, accreditations, and quality assurance and on the other hand through reciprocal discussions about quality issues of the school with the accreditation task team members. As mentioned under the ethics section, by concealing identities, the case study can be completely honest about the observations, tensions and the micropolitical climate of the situation. To address concurrent validity, alternative instruments used such as ISO based Module Evaluation and Student Satisfaction Surveys and results of ASEH accreditation reports were used to create diversity and broaden the scope of material used by the school to justify quality. In relation to the reporting process, the participant observer attempted to remain as detached as possible from any bias concerning the research material through interim checks with Mr. Jack and Mr. George who shared the monitoring functions of the accreditation process and data gathered. Thus the Dean could not be tempted to present or forge any irrelevant or untrue data. In particular, Mr. Jack had no reporting relationship to the researcher and Mr. George, while in part reporting to the Dean as a member of the academic team, did not have a reporting relationship during the accreditation preparation. He was hired as the Accreditation Project Manager to act as a consultant and editor due to his previous experiences with UK universities undergoing validations and another Swiss school that had undergone the same accreditation process.

Again, reliability is a semi-relevant issue to an unstructured case study, but certain measures were taken to keep the research as consistent and replicable as possible. In terms of the accreditation report, each of the Standards was reviewed and edited with the task teams. Others were written by the Dean or with the Co-Chair, Mr. Jack, and edited by Mr. George. All accreditation reporting material and data were shared amongst all participants since the beginning of the accreditation process through an online Self-Study database, which served as a repository for their work in progress. Task teams could crosscheck to see if they shared the same interpretation of the Standards and guidelines and/or if they contradicted each other in some way philosophically or with physical evidence. The idea was to build complete transparency and synergy while allowing a self-

monitoring process for content and pace of work. Thus the task teams worked in tandem to formulate the Self-Study Report and gather data even if their team methods and interpretations varied widely. All task teams were requested to keep minutes of their meetings and post these into the database. The structure of the database was predetermined by the researcher and the quality manager for ease of navigation: each Standard was assigned an evidence folder and a report folder. The common folders amongst all teams were the central planning calendar, organisation material, task team charts with team responsibilities, and minutes of general meetings at which most participants were present. These folders created a system that enabled the researcher to trace the steps in the development of each team's work and provided a chain of evidence for an outside observer to follow the school's Self-Study process. The same folders are kept for the school for future reference.

Triangulation is of utmost importance especially when reliability is somewhat fuzzy as is the predicament with most case studies. Triangulation took place through three main aspects: time, space and investigator triangulation. Time triangulation occurred through the historical review of all NEASC visits and reports over the last twelve years preceding the decennial accreditation. This chronology indicated to what extent accreditation was successful or not in bringing about quality practices in the school and whether the problems which beset the school currently were pre-existing or not. Space triangulation occurred through the various experiences of Mr. Jack who was familiar with validations in other schools, Mr. George who had prior experience with QAA and NEASC procedures in other schools and the researcher who had a background in QAA and NEASC procedures at the case study school. This is, however, a unique case study, and no space triangulation takes place in terms of multiple cases in this thesis. Finally investigator triangulation was possible through the employment of the Steering Committee Co-Chair and the Accreditation Project Manager. This triad was so constructed since the researcher and the Co-Chair work at two separate, non-competing institutions while the project manager came from a competing institution. The researcher's knowledge of quality assurance and accreditation was balanced by the others' expertise in the same areas albeit at different schools. This mix of data sources

and investigators was also assurance of the construct validity of the research project. All those involved have independent goals and interests and none could influence the other in any non-trivial way. No previous relationship, neither of a professional nor personal nature, existed between the researcher and the other two investigators. The possibility of the researcher to develop bias as participant observer was kept in check by the Co-Chair's responsibility to communicate progress reports to the holding company on an intermittent basis. The Co-Chair was employed by the holding company as quality manager. Task teams could also be considered other investigators. Since the relationship between the Dean and the faculty members of the task teams is one of open discussion, productive conflict and debate, the need to elicit another point of view was not a problem. Neither was it an issue to invoke constructive criticism and suggestions for potential solutions. In order to maintain this open dialogue, most task teams included non-faculty staff members who did not report to the Dean at all. In addition, the quality controller of the holding company in charge of ISO certification attended various NEASC meetings enriching the discussion with his viewpoints. With all these variables, it was impossible to not be monitored along the entire process. Having established all this, I am conscious of the fact that it is also impossible to claim a certain "degree of confidence" with qualitative data. I cannot avoid being phenomenological, nor do I wish to be any other, for the goal is that the case study is as naturalistic as possible.

## **I. Analytic Induction**

Data collection and data analysis go hand in hand. One will inform the other and no analysis can be invented that does not fit the findings. All preceding explanations point to the use of analytic induction, which requires explanation building. In a process of analytic induction, the researcher needs to rely heavily on thick descriptions of events and rival explanations. Particularly investigator triangulation through regular meetings with either the Mr. Jack or Mr. George assured many opportunities to discuss approaches to quality and its assurance. The use of rival theories to a single case to replicate logic and come to the same results, findings and conclusions can serve as an indication of reliability. Due to a substantial portion of research data being inferential verbal and non-verbal material, journalistic and impressionistic content analysis has to be the predominant tool of

analysis. I confess to have an epistemologically constructivist attitude. The research approach and data type fall under the interpretive paradigm and though some numerical content did emerge from the school's statistics, they did not require extensive quantitative analysis. At any rate, even positivist approaches can result in subjectivity. As John Perkins in his book, *Confessions of an Economic Hit Man* (2005) writes about econometric models, "I discovered that statistics can be manipulated to produce a large array of conclusions, including those substantiating the predilections of the analyst." On the other hand, including quantitative data can only enhance the findings and make the analysis more rigorous. Primarily analysis happened through a process of building and trying on mental constructs, even if such constructs do not always lead to clean, conclusive repartition of causal links. Some causal inferences could be made based on historical records, but explanation building is the natural choice for the very organic data that emerged during the research process.

It must be noted that along with the research question itself, much of the learning that went on for the researcher during the thesis work was about the research process itself. Little did I realise at the beginning how significant a role the diary would have in this approach. The field notes and reflections became a very natural process of the intellectual metamorphosis which accompanied the research activities. At times, the researcher is inclined to actively participate, while at other times the researcher may be very detached and caught up in reflection. All these instances need to be recorded in a research diary. Also returning to parts of the diary after some time can bring to light new and different constructs. Research and analysis are like a double helix, interweaving through space and time. One would say *ad infinitum*; as the longer the process goes on, the more the ideas spiral on to further inquiry. The only thing that counts at the end of the research project is the real change it brings about in the way we view and understand the world. It is somehow irrelevant whether this is subjective or temporal for it will inevitably become both. Validity and reliability of all research are illusions for they will suffer obsolescence. Triangulation is also an illusion needed for self-affirmation and can be achieved with like-minded "scientists" in a like-minded society at a given moment in history. The verisimilitude of an incident is phenomenological. What matters are the conclusions that

we draw, that we are ethical and honourable in the process of seeking knowledge and that we do not succumb to our egos and compromise our integrity to prove ourselves “right”.

## **IV. CASE STUDY: NEASC DECENNIAL REACCREDITATION**

This chapter recounts the story of a school, Hotel School Helvetia (HSH), undergoing review for accreditation after ten years of membership within an association. Following a brief description of the regional accreditation association responsible for the quality assurance of the school, NEASC, I explain the school in detail: its history, its activities, its context, and a chronology of its developments within an accreditation cycle. The actual current decennial reaccreditation of HSH Self-Study process fleshes out most of the chapter and is divided into the Standards which were to be reported. Living through the process of accreditation in close cooperation with the school and the association provides an insider's view to the events, on what was being reported to NEASC and what was simultaneously happening in the school. Each Standard section is supplemented with these observations along with notes of events that followed the site visit. From the preparations for the decennial evaluation, I report how the management, staff and faculty perceive their own school, including a series of flowcharts created with members of various departments to illustrate school processes. This is followed by a report on the NEASC visit process. Two comparative Strengths and Weaknesses Analyses conducted respectively by the students and staff prior to the NEASC visit and the post-visit exit interview of the NEASC team provide viewpoints from other stakeholders. Finally, results of the school's Module and Student Satisfaction Survey (SSS) over the past few years close the chapter.

### **A. NEASC**

#### ***1. Organisation and Governance***

The New England Association of Schools and Colleges, Incorporated (NEASC) is the oldest of the six American regional accreditation boards. Founded in 1885, this year it celebrates 122 years of existence. The association is a private, non-profit organisation which is governed by a Board of Trustees working through the Executive Director/CEO and the six Commissions of which it is comprised. Each Commission is made up of the educators and public representatives from the sector that the Commission handles. More than 2000 public and independent schools in New England as well as international



schools in over sixty countries are part of NEASC. Of those, 1'908 are recognised as members while others are listed as candidates. Two years of candidacy are required before an institution can be recognised as an accredited member. The Association is divided into the following six Commissions, each with its own Commission Director who report to the Executive Director:

- 1) Commission on American and International Schools Abroad (CAISA)
  - 2) Commission on Public Elementary and Middle Schools (CPEMS)
  - 3) Commission on Public Secondary Schools (CPSS)
  - 4) Commission on Independent Schools (CIS)
  - 5) Commission on Institutions of Higher Education (CIHE) and
  - 6) Commission on Technical and Career Institutions (CTCI) of which HSH is a member.
- The CTCI is the smallest of the Commissions representing 88 technical or vocational schools out of the 1'908 total. The largest groups are the CPSS and the CIS, followed by the CIHE, CPEMS and the CAISA.

## **2. *Areas of Remit***

NEASC views the maintenance of quality standards of education for all schools under its jurisdiction, starting from the pre-kindergarten level all the way through to the doctoral level at degree granting institutions. Its mission statement is

“The New England Association of Schools and Colleges, a self-regulatory membership organisation, serves the public and educational community by developing and applying standards assessing the educational effectiveness of elementary, secondary, and collegiate educational institutions. Processes of self-evaluation and peer review utilising the Association’s goals assure and improve the quality of institutions, which seek its accreditation. It also endeavours to inform public discourse about educational improvement.”

It is the task of each Commission to gage institutional performance against the predefined school standards and thus assure the general public of the educational quality delivered. As stated in the mission statement, the accreditation process used is a combination of self-evaluation and peer review. The first part, self-evaluation, is conducted by the institution over a 12 to 24 month period and requires the school to substantiate that it is

upholding the Commission's Standards. The self-assessment is compiled into a Self-Study Report to be submitted to the association at least one month before the visit. The complete report along with the requisite annexes makes up several volumes of evidence.

Once the Self-Study Report is received and approved, the second part, peer review, is conducted by a visiting team of experienced academicians and administrators of the same NEASC Commission. The accreditation cycle, after completion of the initial candidacy period, is ten years. During the decade, a five year focus visit will be executed along with a number of interim visits in a space of two to three year periods as per the recommendations of the visiting peer teams. The exact events at HSH are discussed below and presented in Appendices 1 – 3. For the peer review, NEASC engages volunteers from member schools, which can number thousands of volunteers to complete hundreds of reviews each year. The visiting team will include different members each visit and their areas of expertise may be requested by the institution under review. Much like a group of consultants, the philosophy of the association is to promote self-regulation and efficacy of its affiliates. In so doing, the visiting team members are instructed as to the protocol of proper behaviour during the visit. Explicit directions are given to ensure that the peer review is not an exercise in intimidation and to inhibit any unethical behaviour on the part of the visitors. Once the visit has concluded, the visiting team submits a report of their findings to the relevant Commission for a decision; whereupon, the Commission will vote to either grant, suspend or defer accreditation. The Commission will respond to the school through a missive, which lists recommended priorities for the school's next cycle of improvement efforts. The cycle applies to all members and attempts to be as equitable and systematic as possible. Once affiliated, membership fees are contingent on the size of the institution, i.e. the number of students. The standards, while theoretically considered universal by the regional associations, are Commission-specific, hence specific to the scope of activities of the school or college. Finally, successful institutions are listed publicly as affiliated institutions on the association's website mentioning the years of initial and continued accreditations and their status. The listing is not a ranking but information for the public at large of the school's current accreditation status.

### **3. *Changes in NEASC Structure***

For each Commission, standards of membership are developed, established and reviewed by the members and the Directors of the Commission. NEASC standards are voluntary, as with all regional accreditation associations. They are acceptable substitutes for American governmental standards with regard to state or federal funding. Thus the standards must be comprehensive, inquire into all aspects of school operations and assure that statutory or federal regulations are met. On the other hand, the standards of membership, particularly at the post-secondary level will tend to be qualitative. The visiting team and the Commission are behest to judge the institution based on its ability to fulfil its mission, if the mission is considered appropriate to the nature and scope of the institution. The purpose and objectives of the institution are questioned in relation to the structure, the size, the resources and the institution's record of realising its stated objectives.

Currently, schools at the post-secondary level are being redefined into two Commissions with two separate standards of membership, those of the CIHE for degree granting institutions and those of the CTCI for non-degree granting schools. NEASC is now trying to migrate all degree granting institutions previously served by the CTCI as a technical or vocational school into the CIHE. All CTCI members have been contacted to initiate this transition if the school is a potential CIHE candidate. The goal is to have populated the CIHE with all degree granting institutions by 2009 and to make a clean break from those who fall strictly under CTCI. This process caused the drastic fall in membership of the CTCI to the meagre 88 mentioned above. Many traditionally vocational schools opted to add or adjust their programmes to meet degree requirements during the transition. This is also reflected in the behaviour of NEASC accredited international schools, particularly in Europe, which are interpreting the migration as a signal to become degree providers and are using the opportunity to boost their image as a "higher education" institution rather than a "post-secondary" institution. Their association in the minds of upcoming international student populations as a "university" gives them a competitive edge in the rapidly changing environment of the EHEA. The lack of public providers and

government funding is generating more mercantile education providers who will leverage branding, image and market presence to attract students.

## **B. The Case Study School**

Against this background of change, I now turn to the case study school, HSH, as a specimen in the European arena at the eve of its decennial reaccreditation. With HSH, one can see the multifarious influences which affect school quality, from the type of ownership, management, and governance structure to the for-profit business incentive of providing education and all the processes in between. The extremely international environment of the case study school makes the situation intriguing, varying as it does in its relationship to various stakeholders and their individual or categorically distinct goals.

### ***1. Historical Context***

HSH was founded in 1985 as a private hotel management school and registered with the Department of Public Instruction in the Canton of Vaud. In recognition of the increasing global demand for fine Swiss hospitality education, Mr. Pierre Olivier, the founder of the school, made a move to start a curriculum to be delivered in English, which could meet the needs of markets neglected by traditional schools. Traditional Swiss schools retained French and German as their languages of instruction which severely limited access to foreign students. To ensure the global relevance of the curriculum, HSH entered into a special license with the American Hotel and Motel Association (AHMA, now known as AHLA, American Hotel and Lodging Association) to deliver its diploma as well as the HSH diploma. Mr. Olivier was at that time a member of the board of AHMA. With the growth of the school, HSH moved from its rental space in a small mountain hotel to its current location, the fully owned historic Palace Hotel du Lac in Lutry in 1987. It was not long after in 1992 that the Swiss Hotel School Association (ASEH) recognised the programmes offered at HSH, and HSH was granted full accreditation. Still today, HSH is one of the 12 private hotel schools accredited by ASEH of over 50 in the country. HSH's drive for quality and recognition was further demonstrated in two other accreditations, European Foundation for the Accreditation of Hotel School Programmes (EFAH) and Hotel, Catering and International Management Association (HCIMA), which were earned

in 1995. Due to the American bias of the HSH curriculum, HSH applied for accreditation with NEASC in 1994 and by 1996, the CTCI of the NEASC recognised HSH as a free-standing institution which grants non-degree qualifications at the tertiary level.

## ***2. Programme Development***

Throughout the 1990's, competition amongst private hotel schools demanded that degrees be offered in order to stay abreast of changes in the international student market. HSH had been suffering a slow decline in student numbers towards the end of the 1990's and it was eroding the bottom line. The need to find a partner university and more capital were becoming pressing matters. The turn of the century hotel building which housed the school was in need of major repairs and renovation, hence the need for a significant capital injection. Thus in the late 1990's, HSH studied the option to expand its programme offerings in order to attract more international students and thus more revenue. It entered into a consultative agreement with Excelsior University, UK, to develop its own Bachelor's degree programme. By 2001, from the NEASC five year focus visit of the school, it became apparent that HSH would need to modify its strategy to avoid any tensions that would arise from re-fitting the Swiss-American diploma programme to suit the exigencies of a UK validated degree. The NEASC visiting team indicated that certain inconsistencies had infiltrated the original school concept in the process of trying to adapt to the British model. The constraints of the intended degree programme would prevent HSH from living up to its original mission as a provider of technical education. 2001 also brought along a shift in the management personnel of HSH due to organic turnover of key staff members. It was the culmination of management unrest that had been brewing for a few years. Since 1995, the positions of Head of Studies, of Operations and Principal continued to see new incumbents with increasing frequency. As yet, the governance structure of HSH was another item under scrutiny as it did not yet conform to the requirements of NEASC. Even though staff and faculty were long-standing and loyal, the instability of the management team and curriculum incoherence made the accreditation status of the institution vulnerable. On top of all this, the degree programme development became very laborious and finally came to a grinding halt. HSH then targeted the American universities with which it has transfer agreements

for an alternative partner. After a protracted search for a viable candidate, HSH chose to cooperate with an entirely new organisation, Westcreek University (WCU), to offer a final year of studies for HSH students to earn an American degree. At this crucial juncture and one week before the signing of the cooperation agreement with WCU, HSH was purchased by Swiss Private School Agency (SPSA). That was in 2002. Mr. Olivier entered into early retirement, and HSH was headed for a new era. Apprehension surrounded the activities of the school for many reasons and the sentiment was felt by many of the school's constituents. What elements of change gripped the soul of HSH?

### **3. *Change of Ownership***

HSH was acquired by one of its primary rivals which, although more recently established, managed to overtake HSH in the last few years. The aftermath of the purchase was widespread restructuring, in particular downsizing as well as curricular and operational alignment between HSH and the SPSA School. Since Swiss hotel schools offer boarding facilities to its students and feature extensive, paid internships as part of its curriculum, the school's academic strategy and its management are inextricable from operational, facilities and job placement functions. Because of this intimate relationship, any changes to or rationalisation of the school's operations has an amplified impact on academic quality. HSH was to change its academic calendar, curriculum, procedures, information technology, programme structure and staffing policies to match the SPSA School. Also, the continuing decline in student numbers attested to inefficiencies in HSH's previous marketing and network of agents. Clearly, the new owner had established himself as an undisputed champion in the field of hotel school marketing. Those who were remaining from the old marketing and admission team were suddenly put on the hot seat. It is evident that the school's processes are intertwined at many levels; effective marketing would bring in sufficient numbers of students. Greater student numbers would release funds and enhance scale economies to efficiently run the hotel building while creating a large presence for the school in the labour market. A change to one of the components in this chain of processes has a knock-on effect through all the links of value creation. The complicated changes imposed on the school, the lack of an articulated long-term vision for HSH or lack of communication thereof, and evolving centralised administration

functions, however, incited serious insecurities from the staff at HSH. Processes and policies became increasingly unclear and ambiguity reigned during the transitional phase. Finally, the original SPSA School and its British university partner provided franchised programmes at the Bachelor's and Master's degree levels and it seemed inevitable that that relationship would be built out to include HSH.

Interestingly, Mr. Jürg Schmidt, the new owner decided to proceed with the American BA degree strategy and in 2002, a Memorandum of Understanding was signed between HSH and WCU. The anxieties of repeating programme alignment for British validation while negotiating or perhaps even losing NEASC accreditation were put to rest. The BBA degree programme slowly began to give impetus to the diploma level to safeguard high quality academic content and pedagogy. Since the North Central Association of Schools and Colleges (NCASC) accreditation of the degree is built on the NEASC diploma accreditation, and since SPSA did not wish to lose its recognition through NEASC, SPSA began to express increasing interest in American accreditation. In 2003, it was decided that a Substantive Change Report be filed with NEASC to communicate the change of ownership.

#### ***4. Centralisation and Customer Expectations***

Not surprisingly, HSH management decisions had to be made according to suitability for the SPSA system. With system-wide cost sharing, occasional asymmetric resource allocation is inevitable, so school technology became unpredictable. Since HSH is a for-profit school, ultimately it is accountable to the customers, the students and to surrogate customers, the parents. Consequently, customer expectations comprise the prevailing, technology-shaping variable for HSH. Foreign students are the major customers for private hotel schools and their expectations are as diverse as the areas which they come from, and their needs and wants are diverse. The commonality of all students though is that they want value for money. So the school has to find ways to answer this customer expectation in a very economical fashion. This overriding expectation is most influential in the very competitive private Swiss hotel school market. Certainly, motives to streamline cost control and to eliminate a competitor must have prompted the

consolidation phase amongst the private hotel schools over the last decade. HSH was one of those affected. The ensuing cost-cutting measures such as centralising administrative functions, rationalising staff, and replacing full-time faculty with part-time faculty to make expenses more variable could not but affect pedagogy and quality. Eventually silos of authority were cutting into HSH processes through the creation of a layer of new SPSA central management. By promoting the SPSA original School staff to “SPSA Directors”, the reporting lines grew longer at HSH. Because HSH is not new but was previously self-governing, roles and responsibilities became ambiguous and inevitably power struggles between HSH management and SPSA Directors ensued. Cost-cutting by rationalising full-time staff also effectively cut out previous know-how; although, the drastic reduction in salaries meant that the school was now able to fuel reinvestment and growth.

HSH was confronted with the dilemma of balancing customer expectations with consequences of these cost-cutting measures. The paradox is that to offer quality means investment; whereas, to offer value meant cost-cutting and keeping prices affordable. In conjunction, the Bologna Process was beginning to create a general expectation for three year Bachelor degree programmes. Shrinking the length of the programme implies to cost controllers that less could be spent on academic items regardless of whether or not technology has become more expensive vis-à-vis other services. With new funds becoming available to ensure long-term viability of the school, a new direction was being forged by SPSA with HSH. The pressure to deliver value still remained and market pressures had in no way eased off. The twist in HSH strategy was to reframe its market. In an elite boarding school such as HSH, students look to location, reputation, facilities and services offered as important variables in choosing a school. While the carnage to staff and faculty created doubts and uncertainty, HSH had just succeeded in ASEH reaccreditation and had a rapidly growing Bachelor’s programme in tow. Rather than the development of academic programmes, the attention now turned to facilities to enhance the boutique hotel school image that the school would promote.



## **5.     *Decentralisation***

Also in 2003, a central SPSA Student Placement Centre (SPC) was established whose objective was to facilitate student employment after graduation. With this mandate, HSH students were to receive dedicated services such as recruitment presentations, interviews and placement opportunities. While the initiative was well intentioned, the results were disastrous due to complications at the personnel level. Micropolitics and the silo mentality ultimately resulted in zero placements for HSH in 2005. Since 2006, after more staff turnover, the centre was disbanded and the services returned to the individual schools within the SPSA portfolio. During this period, ineffective communication with the industry also meant that communications with alumni had deteriorated. While transitioning to the post-takeover HSH, the alumni had fallen by the wayside in the immediate aftermath of the purchase. Scepticism was rampant amongst alumni about the changes at HSH. In answer to this, in 2004, a new HSH Alumni Association, HSHAA, was created and the first general meeting was held in Lutry. It was attended by a seminal group of approximately 30 alumni from the world over. New officers were elected and statutes ratified. Recently, in the summer of 2005, the 20<sup>th</sup> anniversary celebration of HSH was hosted by HSH for its alumni, which again did not number many more attendants. HSH news is transmitted through the new HSHAA website. Given the extremely international nature of its alumni, maintaining contact with alumni is a daunting task, all the more so since it was SPC staff who had overseen the HSHAA website. After the demise of the SPC, the site floundered for lack of ownership. Further, annual reunions pose numerous organisational problems with such widespread membership covering over 80 countries. The next reunion and general meeting was therefore scheduled for three years later in 2008 in the hopes that a longer lead-time would allow more alumni to plan ahead and participate.

A positive repercussion of decentralisation was the need for SPSA to recognise HSH as a site of its own with its own development needs. The growth of the school led to the purchase of another building in Lutry in 2004, Hotel Beaufort, which now houses the BA students. With this move also came the sports, gym, sauna and jacuzzi facilities available to maximise students' quality of life while they are living and studying at HSH. Finally,

the space constraints which had confined the old HSH to limited student recreational activities were being overcome.

By the end of 2005, the inaugural meeting of the new HSH Governing Board took place in Lutry. The previous board, which had never really come to fruition as intended by NEASC, disbanded upon retirement of Mr. Olivier. Many of the members were, not surprisingly, personal contacts of the former owner and their allegiance lay with the former HSH. Both an advisory board and a governing board were reconstituted in the interest of practicing sound corporate governance in compliance with the exigencies of NEASC accreditation.

It is evident from the efforts listed above that advice from NEASC was taken to heart particularly in the areas of physical facilities and learning resources. On the other hand, several issues concerning HSH's autonomy remained pending. To this end, Mr. Schmidt decided to decentralise most of the SPSA central administration functions, which had frustrated HSH's ability to meet the requirements for degree level accreditation with NEASC in 2004. Now there was concerted effort to develop an even more distinct identity for HSH and devolve resource allocation through departmental budgets. For the first time since the purchase of HSH, the school is able to create an independent planning and assessment model, which it has so long struggled to establish at the behest of NEASC over the years. With new reporting lines between HSH and ownership, an empowered faculty, student government involvement and a new governing board in place, HSH has put the mechanisms in place to debate and enact institutional planning and assessment. Regular review of the mission statement and key measurements of institutional effectiveness are carried out to bring school efforts into strategic alignment.

### **C. Chronology of NEASC Visits to HSH**

The following section is a summary of the events that HSH undertook along with the visits conducted by NEASC. The material is collated from various reports and correspondence throughout the last twelve years of HSH's involvement with NEASC leading up to the current reaccreditation exercise and indicates the matters that arose as

the quality review process unfurled over the years of the school's development. The exact details are given in Appendices 1 to 3 in the form of time-ordered matrices. In the matrices, responses from the NEASC teams are indicated in blue. Author's notes are indicated by the green font. The following narrative weaves together the key points and obstacles encountered throughout the history of NEASC visits in a condensed form.

In April of 2002, HSH submitted the Substantive Change Report after Change of Ownership. A meeting with a NEASC director did ensue as a result of the filing. The meeting was also limited to a brief discussion off-site and did not incorporate a visit to the school premises. The NEASC director's recommendations are summarised under the column for the July 2002 letter. The NEASC visit that was suggested for October did take place and the same director visited the school premises. In April 2003, CTCI decided to continue accreditation of HSH and recommended a focus visit in 2005. Also in the same year, in November 2003, ASEH decided to re-accredit HSH after their visit in October 2003. ASEH, in their follow-up report (Appendix 5), recommended accreditation of SPSA University Centre, a new site of the SPSA where the WCU programme was housed. This ASEH recommendation eventually created havoc in HSH's efforts to have NEASC acknowledge the separateness of HSH from SPSA and its other schools. As a result of the May 2004 NEASC visit, the ASEH statement concerning the accreditation of SPSA University Centre, which did indeed take place later, was quoted to emphasise the current nature of HSH within SPSA as being both academically and financially interdependent. Later on in September of 2004, SPSA moved the SPSA franchised university programme to a newly acquired site in another town and left the premises entirely to the partnership between WCU and HSH which was then rapidly expanding. Having competing degree programmes at the same site had led to conflicts between students, cannibalism in student recruitment within SPSA and anti-synergies that outweighed the benefits of shared resources for university level learning and shared facilities for the students.

It became evident that as a result of the Substantive Change report following the change of ownership in 2002, HSH was soon to undergo an interim focus visit in 2005. In

addition, 2006 was ten years since initial accreditation, and the school was up for a thorough review of its status. Reviewing the state of affairs indicated that NEASC accreditation and the consequent practices intended for the school had been relegated to the back burner. On the other hand, HSH was rather aggressive about trying to become a degree provider; although, it was not yet offering its own degrees. The effort to convert to CIHE was largely unsuccessful, and as renovation activities of other SPSA schools were wrapping up, renewed interest was being shown by SPSA about the upcoming decennial visit at HSH. After receiving approval from NEASC to collapse the 2005 interim visit and the 2006 decennial visit into a single visit in 2006, planning on the reaccreditation Self-Study began. Major initiatives had to be undertaken to rectify the items that NEASC pointed out after the unsuccessful 2004 visit. These were:

1. Company by-laws and NEASC governance standards are not reconcilable. New governance structure must be mapped out.
2. NEASC requirements are predominantly set for public, non-profit institutions whereas HSH is a private, for-profit institution. There could be discussion about recruitment, marketing and publications as before.
3. Financial statements are reported on Swiss basis which are different from the American standards and are tightly held by the owner along with future strategic plans.
4. The recommendations from the 2003 ASEH accreditation gave NEASC the impression that SPSA and HSH are merged and HSH cannot act independently.

## **D. Macro-Environment**

### ***1. Swiss Accreditation Schizophrenia***

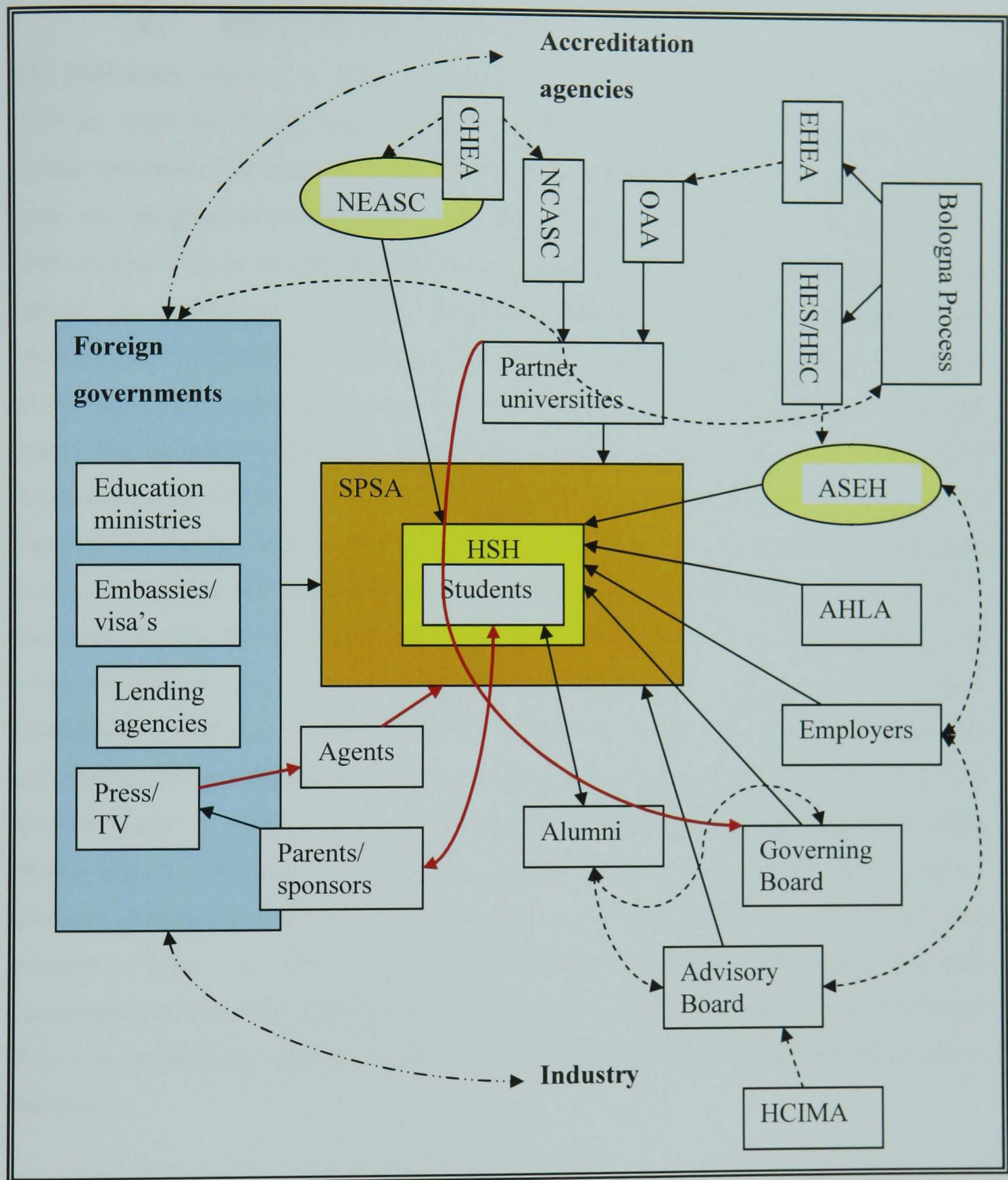
Switzerland is a turbulent environment for private schools where market forces are extremely influential. Because Switzerland exercises no federal governance over tertiary level private schools, its hotel schools are subject to the whims of the cantonal government and the international markets. The environment in which HSH functions is extremely competitive where private schools are considered 'just another form of commerce' by the cantonal education department. No entry or exit barriers exist for

anyone wishing to open a private school. In fact, it is easier to open a school than a restaurant or a café, because in the latter case, at least a Swiss license is required. In the absence of any accountability to an education ministry, there are no guidelines to underpin a school's policies or processes. As an example, in 2000, Lausanne Hotel School was the first to earn Swiss federal government accreditation as a School of Applied Science after 107 years of existence as the oldest, most prestigious hotel school in the world. This, it was able to do because of its relationship to University of Lausanne and because Switzerland is now moving towards standardisation with the Bologna Process for its public universities. That aside, cantons are free to decide how they wish to handle accreditation for private education, so there can be 26 different ways for the 26 cantons. In the Canton of Vaud, no accreditation exists for private schools. In the neighbouring Canton of Valais, accreditation is given for private schools. Same is the case in the Canton of Neuchatel. The irony of the situation is that amongst the four schools that belong to SPSA and that offer practically the same diplomas, only one can claim to have "governmental recognition" since it is located in the Canton of Neuchatel while the other schools are located in the Canton of Vaud. Two of HSH's most vehement competitors are located in Valais and although they have the same ASEH and NEASC accreditations as HSH, they can claim to have Swiss governmental recognition. International customers/students who have no idea about the way the Swiss federation works can find this a significant factor in choosing a school. Their motivation to look for governmental recognition is largely due to the fact that their governments will only recognise Swiss governmental approval as credible assurance for granting loans, recruiting for "official" or governmental positions in their own countries and finally, because governmental recognition is simply what they are used to from their home countries' educational systems.

## **2. *International Markets***

In this complex political environment, HSH faces complicated challenges in maintaining their attractiveness in international markets. Given these circumstances, not only is HSH interested in gaining access to some Swiss federal or cantonal recognition, but also it is interested in not losing any of the accreditations it has already earned, in particular the

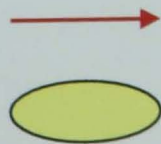
NEASC. The primary recruitment channel for HSH is through its network of marketing representatives and agents. For a private school that receives no government or other funding e.g. from a foundation or donors, it is critical to have a steady supply of tuition paying students. Further, in order to protect its image as a truly international school. HSH must have a well-diversified student body, one in which no single nationality or culture group has an inordinate representation. Figure 2 below illustrates the complex plethora of relationships and their levels of influence. Against this complex and ambiguous background, both in its internal and external environments, HSH was preparing a significant self-assessment exercise. Is HSH singular in this case? Yes and no. All private schools in Switzerland confront government recognition issues, all tertiary institutions are beset with Bologna Process revisions and all international schools are subject to economic influences around the globe. The internal environment is singular to the extent that it represents one school, but in today's avalanche of globalising education, which international school can escape change, restructuring and strategic realignment? The following chart depicts the current context for HSH during the decennial accreditation period.



**Figure 2. Context Chart**

**Legend**

- Direct influence
- - - - -→ Indirect influence
- · · · ·→ Some influence



- Strong influence
- School's accrediting agencies



### **E. HSH Self-Study Process**

The Self-Study process in HSH was structured as an institution-wide self-reflection exercise. Both the faculty and operations staff were involved in taking inventory of current practices. The Self-Study was broken down according to the Standards and a task team was assigned to each Standard. The goal of each task team was to research how HSH measures up to the Standards, which are regarded as the quality framework of the school. The duration of the research and data collection process was approximately one year until the completion of the preliminary Self-Study Report. To coordinate the efforts of the task teams, a two person Steering Committee oversaw all activities of each task team. The Steering Committee comprised of the researcher who is also the HSH Academic Dean and Mr. Jack, the SPSA Academic Quality Manager. The goals of the Steering Committee were twofold. The first was to ensure that the Self-Study progressed in a timely manner with the appropriate responsibilities delegated to the most appropriate members of staff. The oversight required that the Steering Committee support the process when task teams encountered challenges. In this respect, much of the Steering Committee's activities revolved around negotiating access for task teams to the information they required. The second goal of the Steering Committee was to ensure that the constituents in SPSA who were integral, however remote, to defining quality in HSH be kept informed and were active sources. In particular, since the decentralisation process occurred during the Self-Study, the Steering Committee served as gatekeepers and referees to keep a smooth flow of communication between the task teams and their counterparts in the SPSA administration when issues concerning strategic matters arose. This was certainly no easy task when rationalisation hit central administration positions full force.

The Steering Committee initiated the process by issuing a "Self-Study Timeline" to ensure that all task teams work in tandem throughout the research phase. Also a person in charge (PIC) was identified for each Standard in an overview table of "NEASC Standards Requirements" and each PIC was informed in person of his/her role by either or both of the Steering Committee members. Weekly meetings were held at various intervals by the Steering Committee and within the task teams for the greater duration of the Self-Study



process, which were documented in the form of “NEASC Reaccreditation Meeting Minutes”. The task team minutes were submitted to the Steering Committee to be checked against the Timeline for rate of progress. The contents of the minutes also served to identify areas in the NEASC Standards Requirements table which remained problematic. Overall, when the process kicked off in June 2005, most of the faculty team were enthusiastic. Most of them had had no experience in accreditations and perceived it as a learning opportunity as well as an opportunity to voice their concerns to a “higher” agency that may exercise influence over SPSA. As the Self-Study wore on and occasionally coincided with other work duties, however, the task team meetings fell by the wayside and progress became irregular. When major school events occurred such as graduation or intakes, the process entirely halted and was extremely difficult to restart. At one point, one of the task team leaders created a jest for the NEASC acronym: “Nobody, Everybody, Anybody, Somebody Can” as part of his email signature to nag other team members to work ahead. All staff who were either directly or indirectly implicated were invited to the monthly NEASC meetings in order to heighten awareness and participation throughout the institution. Here again, the meetings were well received until it became evident that the school owner and no SPSA Director were ever present at the meetings. At the beginning of 2006, the owner then reassigned Mr. Jack to another SPSA school to assist in their validation process, and even the weekly Steering Committee Meetings became irregular.

### ***1. The Self-Study Report***

Again, at the outset, all faculty and staff were debriefed about NEASC and the Standards. Having laid the groundwork for re-establishing the appropriate practices in the school, the task teams set about to compile the Self-Study Report. The decennial review comprises of an institution-wide self-assessment, which must report on the progress on each of the CTCL quality Standards since the last visit and set educational strategies and improvement targets into the next decade of membership. A further purpose of the Self-Study Report is to communicate this information to the appropriate Commission directors in NEASC. All measurements and statistics gathered by the school were submitted in original form without omissions of any details except for anonymous student comments.

which were made available in a separate folder upon request. All data and evidence gathered were therefore authentic and unadulterated. Some data were historical and no longer valid due to the restructuring of the company and the context within which some measurements were effectuated. For example, certain measurements were conducted on centralised SPSA University Centre basis, one of the units of SPSA which was disbanded and was no longer appropriate as a unit of planning and assessment due to decentralisation. For similar reasons, the changes in the organisation over the years also make detailed longitudinal analysis difficult or inconsistent for some data such as career placements or tracking of alumni. Broader issues like governance structure, learning resources or school-specific planning and assessment framework among other more general areas can however be desegregated and compared. The data and evidence of the Self-Study Report do not incur any significant risks to the reliability of accreditation, even though it is true that for some items, exact figures were no longer possible to attain. Most often, the access was limited due to changes in information technology systems, managers or databases. So, as indicated above, changes in personnel, procedures and organisational structure on several levels inhibited clean comparisons over time. On the other hand, data presented for the current decennial evaluation can be considered accurate, validated and authentic either through cross-validation amongst task teams or between HSH and SPSA counterparts, through systems checks and eventually by the NEASC site visit which will be discussed later.

## ***2. Overview of the Standards***

The Self-Study Report consists of an Introduction to the report followed by a chapter on each of the Standards. Each chapter mirrors the breakdown of the guidelines as published by NEASC. The final chapter, the Conclusion, reflects on the analyses and recommendations of all the Standards reviewed. A summary of each of the chapters pertaining to the Standards, as filed at the point of Self-Study Report submission, is given below. This is followed by observation notes of actual happenings and circumstances that accompanied each of the Standards' reporting process.

**Standard One, Mission:** The mission is reviewed and assessed annually or as the situation requires. The Guiding Principles, which are part of the mission statement, are important in narrowing decisions and prioritising school activities. While it is primarily driven by the Academic Department, all constituents may be involved in the process. The need to articulate an objective, which documents and allows general public access to school accomplishments has been identified for the next review of the mission statement preceding the Curriculum Review Meeting after the new School Management System (SMS) will have been finalised.

The expansion of the SMS to integrate all school processes beyond just academic recordkeeping was initiated by SPSA during fall semester of 2005. SPSA realised that in terms of NEASC, there was still shortfall in terms of planning and measurement of HSH processes from the previous visit recommendations. The pilot phase for the new SMS was planned for autumn 2006. Eventually SPSA decided to create a central SMS for all its schools and development of the system is still taking place in 2007. The combined results of the central SMS would be instrumental not only in measuring performance against each of the school's objectives, but also one school against another school within the SPSA system.

**Standard Two, Planning and Assessment:** HSH presents its long pending framework for planning and assessment in an overview of its school management processes. Flowcharts for processes and measurements are woven together with the meetings and the documents or actions produced in a single, global diagram presented in Figure 3 below. Details and flowcharts of school processes created during department visits that are built into the HSH Planning and Assessment Framework are included in the individual Standard sections. Figure 4 represents how the school uses data to implement continuous improvement policies and procedures.

For Standards 1 and 2, the entire full-time HSH faculty team was involved. The team is passionate (self-professed) about hotel management education. Indeed HSH's motto is "Passion for Swiss Hotel Management!" The teamwork, open communication and

bonding amongst faculty members result in a problem-solving culture and ethical consciousness about the purpose of the Self-Study and made it a valuable self-reflection exercise even though some pressures for performativity (Ball, 2003) could not be avoided. Team bonding exercises took place once per semester to fortify the cooperation. Since there was no budget set aside for such activities, activities were informal and conducted without a team coach. They included an all day mountain hike in the Alps, a bowling championship, pizza nights and even an eight kilometre sledging run with added members from the NEASC task teams who were not HSH faculty. After the NEASC visit in 2006, these events lost impetus partly due to staff turnover. The greater part was due to attention being drawn away to new SPSA corporate guidelines and ISO internal audits (Appendix 6) to ensure standardisation of all SPSA procedures in all schools. Some members of the previous NEASC teams are questioning whether decentralisation and the reaccreditation process have actually made HSH autonomous again or not.

**Figure 3. Planning and Assessment Framework**

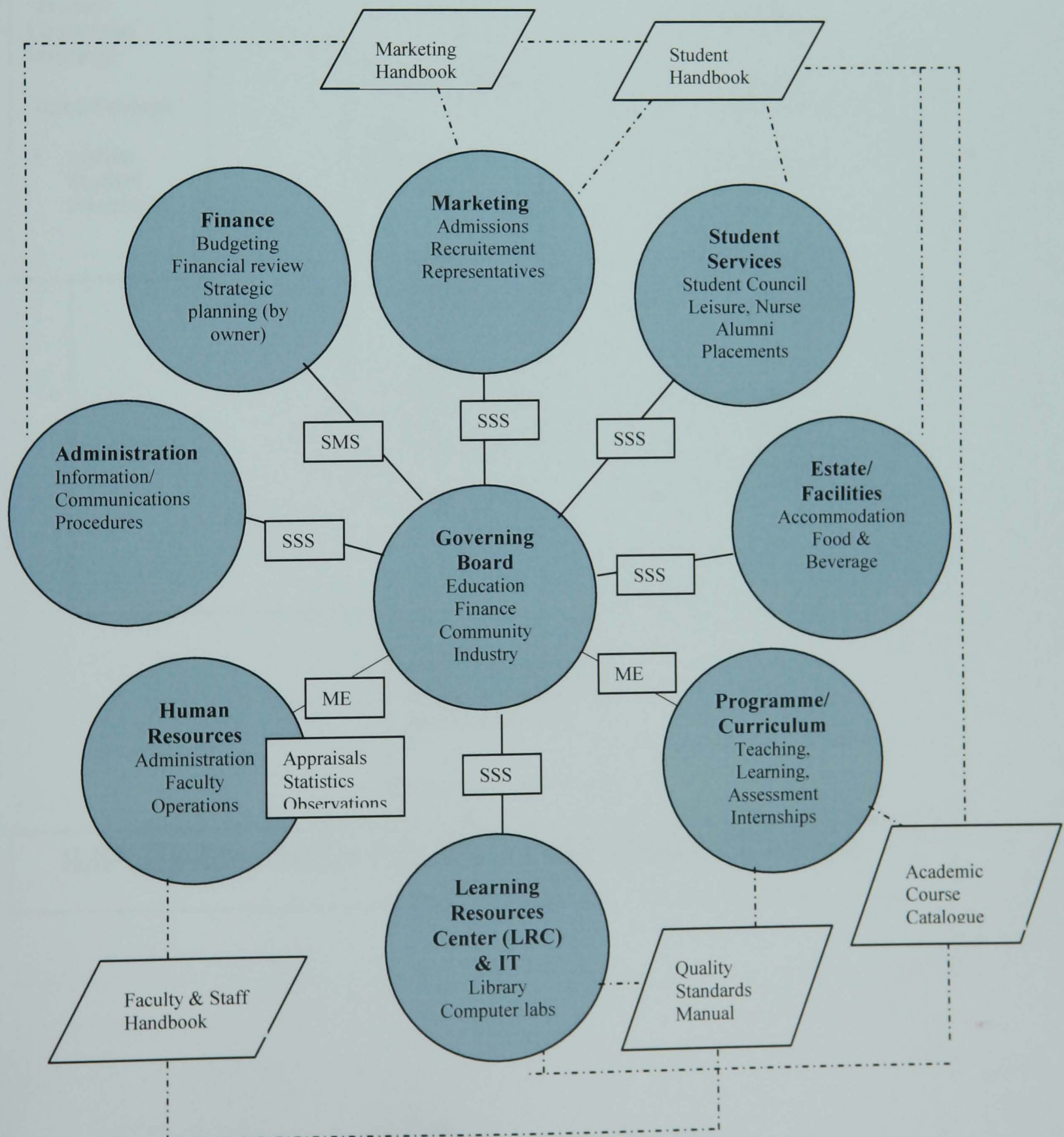
Circles indicate areas of planning. Each area has its own schedule of meetings.

Feedback mechanisms indicated on the “spokes” to the areas of planning:

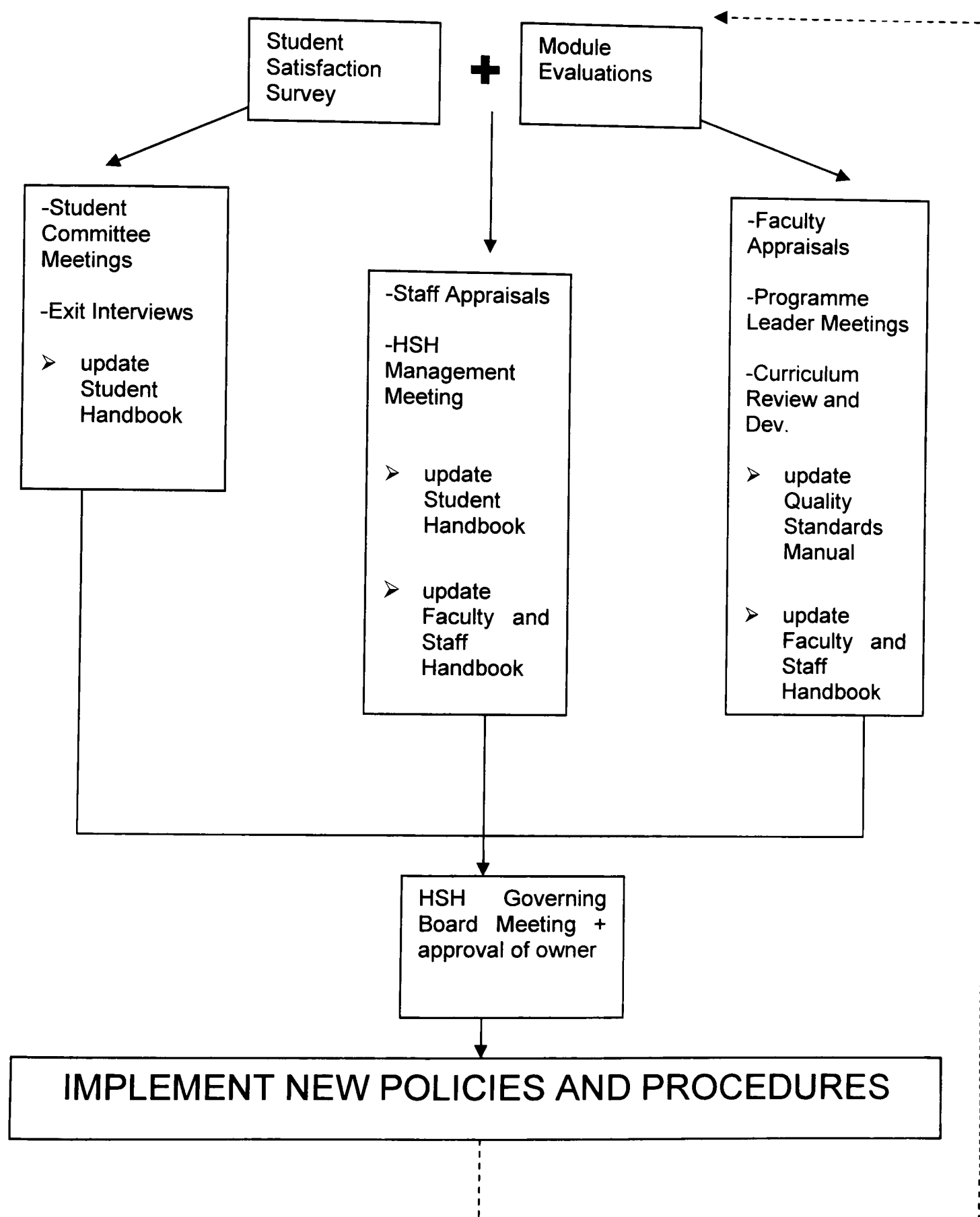
SSS = Student Satisfaction Survey

ME = Module Evaluations

SMS = School Management System



**Figure 4. HSH Continuous Improvement Mechanisms**



**Standard Three, Governance:** Due to the newness of the board, no means to effectively assess their performance was yet considered. This along with voting rights of replacement members are agenda items for the third Governing Board meeting in September 2006.

The new members of the HSH Governing Board:

1. Mr. Carlos (Senior Industry Consultant and alumnus)
2. Mr. Cuipers (Director of a prestigious international bank)
3. Ms. Lindquist (hospitality Human Resources Training Specialist in London and alumna)
4. Dr. Wharton (former Director and Dean of American business universities and Executive Development Director of a Fortune 100 company) and
5. Mrs. Taylor (Director of the regional economic development agency)

All enthusiastically accepted the invitation to be involved with HSH. Only Dr. Wharton had previous experience with accreditations. Mr. Carlos, Ms. Lindquist and Dr. Wharton all had experience in education, primarily teaching and training. They donated their time and expertise to meet on three different official meetings leading up to the decennial visit. Their authentic interest in establishing a new governance framework in HSH motivated the staff and students to communicate more freely about their needs and expectations. Since none of the staff had previously experienced a governing board in the school, many were at a loss about what would be considered appropriate to discuss with the board members. With repeated informal opportunities to mingle, the discourses became more relaxed and natural. Interestingly, the board members themselves offered to add a confidentiality clause to the draft statutes, which Mr. Schmidt did not find necessary and which was then eventually not incorporated. Mr. Cuipers and Mrs. Taylor also attended the opening evening dinner of the decennial visit. Their ability to relate their experiences of the school directly to the members of the evaluation team were of great support to HSH to demonstrate transparency and involvement.

**Standard Four, Finance:** Monthly and annual reviews are conducted by the internal and external accountants, heads of departments, the account manager and the owner. The owner and the department heads set the new pro-forma budgets according to projected

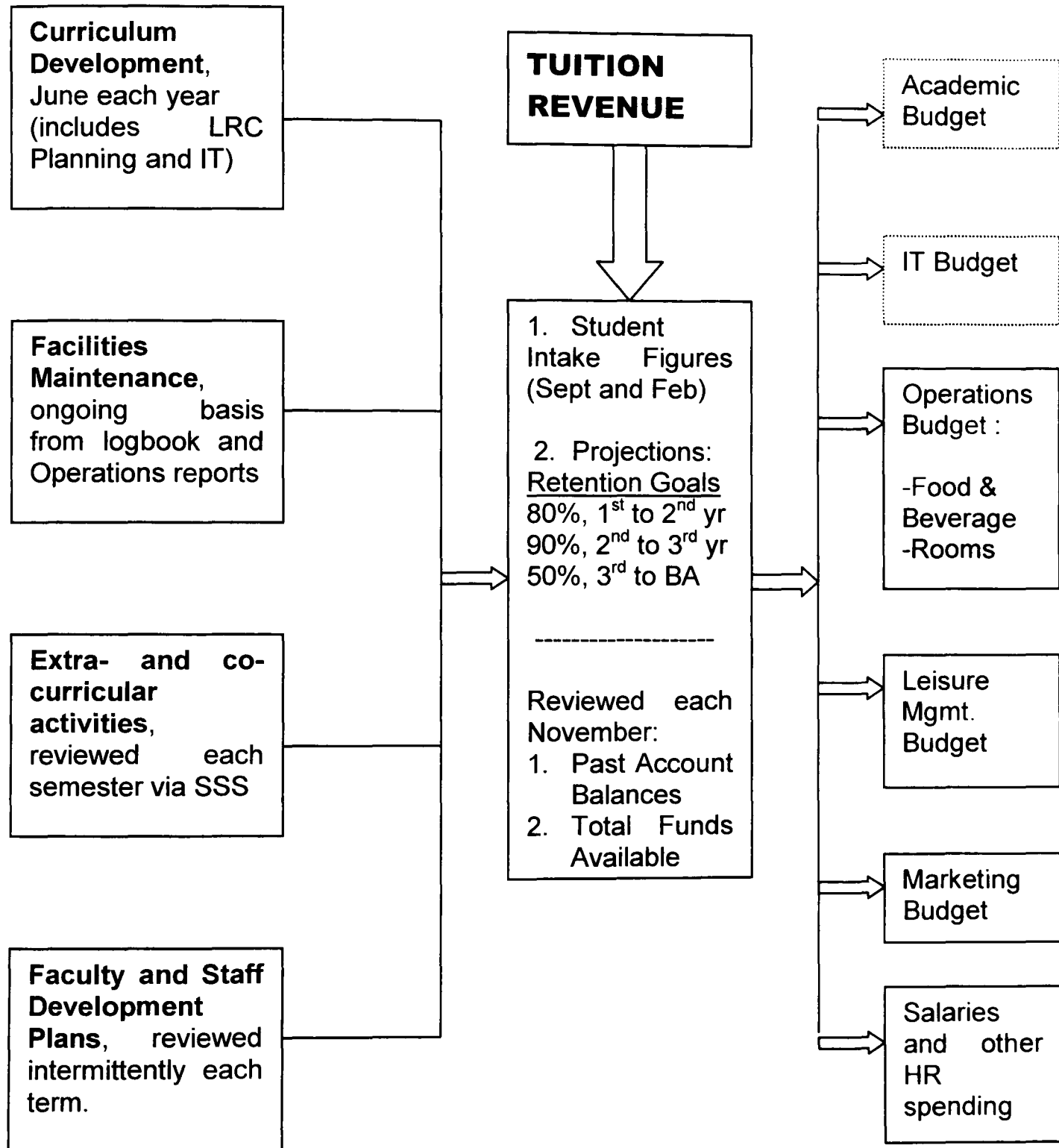


student numbers in November of each year. All other accounts, statements and plans are handled separately by the owner. Hence these aspects cannot be discussed.

Mr. Schmidt, the owner of HSH and SPSA, is the school's strategic driver. He alone determines how resources will be allocated after amassing feedback from different constituents in the school and weighing the various proposals submitted to him. Because HSH is a single proprietor enterprise, neither the staff nor the general public are privy to any financial statements or planning. In fact, the above statement about pro-forma budgets must be loosely interpreted, since it was claimed that that process would begin with the new SMS. The only budgeting that had occurred was that per capita amounts e.g. for cafeteria meals, textbooks or new LRC purchases, etc. were communicated to the heads of departments. Amounts relating to indivisible items such as staff development or classroom renovations remained nebulous, if not untouched. Any detailed financial statements as well as strategic long-range development plans were disclosed in a sealed, brown envelope by Mr. Schmidt personally to the Chair of the NEASC visiting team upon arrival at the school. NEASC was informed ahead of time that it would be handled this way. It was a penultimate display of Swiss financial secrecy. Further, I note that the duties of the "internal accountant" mentioned above is limited to entering invoice amounts into the correct accounts, which were determined by an external accountant. One rather consistent characteristic of the new owner's investment strategy that came out of the self-evaluation process was the fact that, sooner or later, a majority of the proposals concerning facilities were considered and approved wherever reasonable and/or approved by the local building commission. On the other hand, many proposals concerning improvement of student bedrooms and classrooms have been pending since before the Self-Study. However, since Mr. Schmidt dictated this section of the report, it remains a mystery to all if, when and to what extent these investments are in the strategic plans for the next five years. The budget planning process, as formulated by Mr. Schmidt, is mapped below in Figure 5. The Steering Committee contributed by adding the left hand column with Mr. Schmidt's agreement that some of the school feedback processes could or do inform the budgeting decisions.



**Figure 5. Planning and Budgeting Matrix**

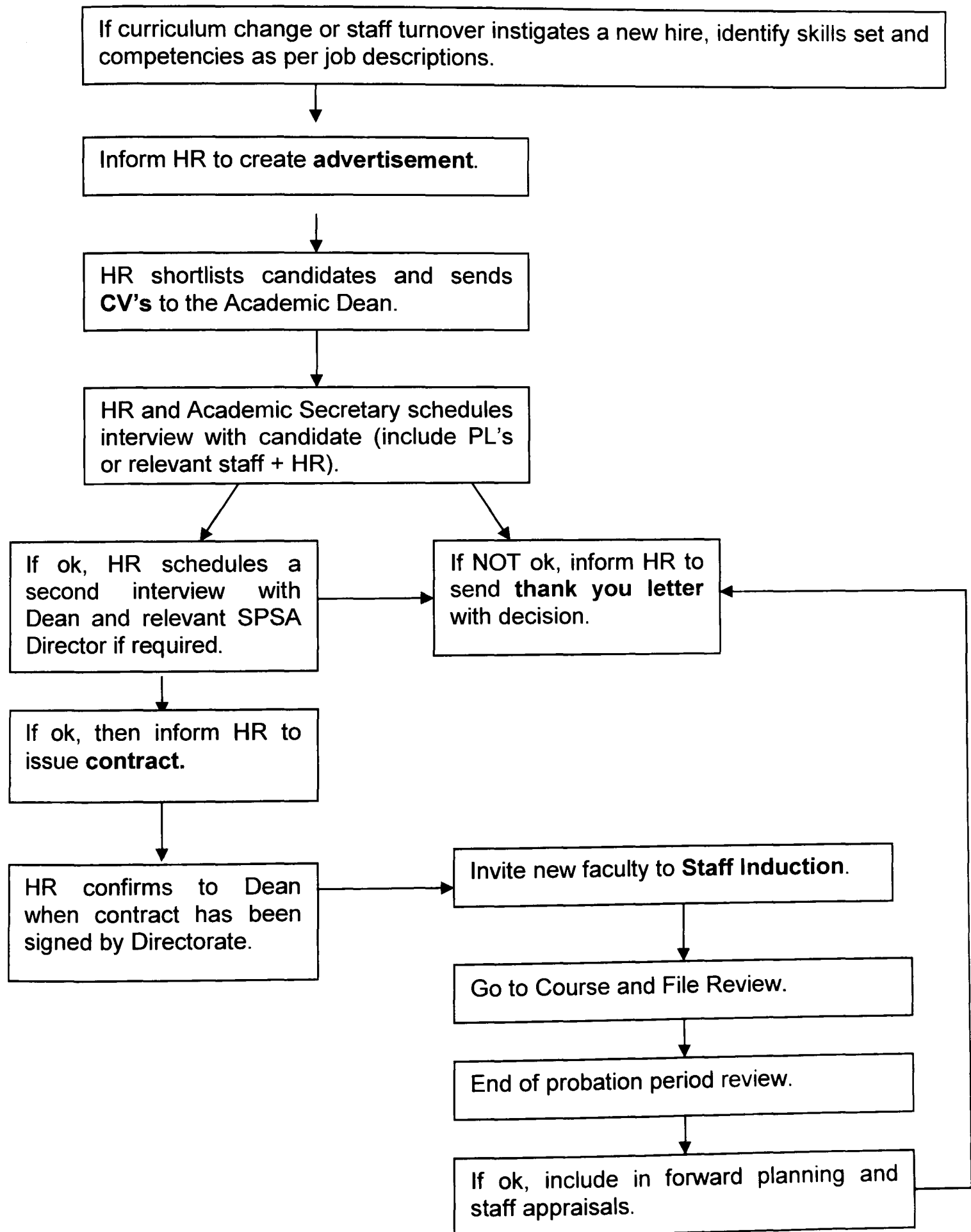


Input from various constituents - - - - - > Department budgets

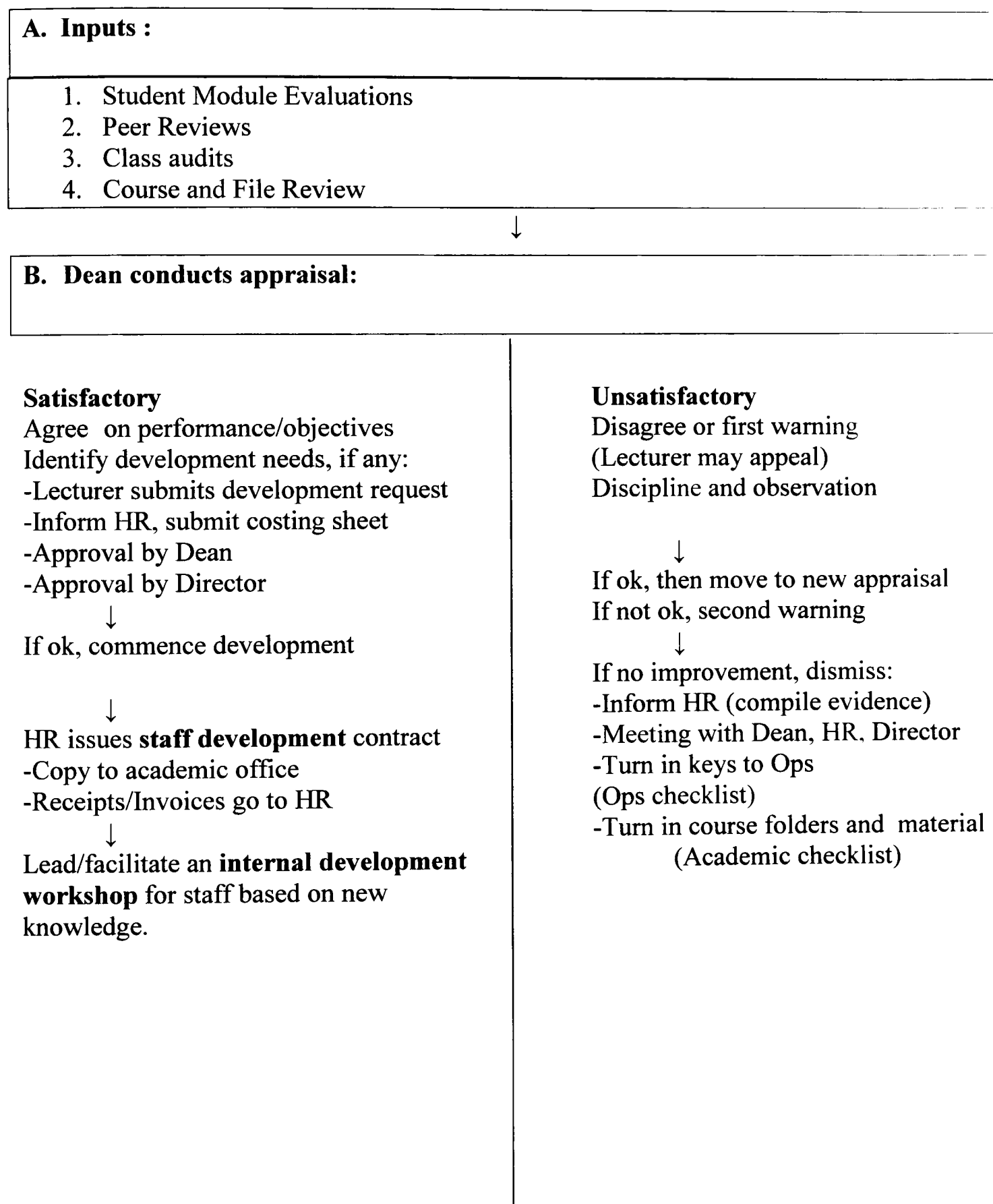
**Standard Five, Faculty:** Personnel policies, performance appraisals and handbooks concerning faculty and staff are at best inconsistent due to the centralisation and decentralisation of the group and the challenges incurred within the Human Resource department. Since 2005, measures have been taken to remedy recruiting and appraisal procedures, staff development issues and to reinstate the Faculty and Staff Handbook to its original purpose. Effectiveness of instruction is measured by the Module Evaluations given for all courses and all lecturers. Quality Standards Manual also guides the faculty in terms of teaching, learning, and assessment philosophy and procedures of the school.

Mr. Kisseleff served as task team leader until his departure at the end of the spring 2006 semester. His departure was premeditated due to his disappointment about not being appointed to assistant deanship at the end of 2005; although, he was the HSH Dean's and HSH university partner's preferred candidate. Unfortunately, his team member, Mr. Murray was given the assistant deanship instead. So teamwork for Standard 5, while remaining professional, was not necessarily cordial. One of the reasons Mr. Kisseleff was refused was because he had left SPSA to work at HSH while the schools were still rivals. Mr. Murray, on the other hand, had been a part-time instructor for a year until he was given a full-time contract in the summer of 2005. Due to his very extroverted nature, Mr. Murray achieved high visibility and advanced very quickly with SPSA directors. The SPSA Human Resource Manager, Mrs. LeCoultré, was also a team member until her departure during spring 2006. She decided to quit after decentralisation was announced for her department. Thereafter, Mrs. Maillard was named HSH Human Resource Coordinator on a 50% contract basis in autumn 2006. Ultimately Mrs. Maillard and the HSH Dean did the final edits of the Faculty and Staff Handbook that had been floating between SPSA and HSH hands, unopened since 2004. They also adapted and reinstated the recruiting and appraisal processes explained in Figures 6 and 7. The Dean created a series of four in-house staff development seminars and reinstated a professional pedagogic training to be given by external experts in summer 2006, which eventually was also offered to other SPSA schools' lecturers.

**Figure 6. Faculty Hiring Process Flowchart**



**Figure 7. Staff Appraisals**



**Standard Six, Students:** Performance indicators used by HSH to monitor student needs and expectations are in part related to the on-line quality control mechanisms of SPSA. These include Module Evaluations, student evaluations of each course and instructor per term, and the Student Satisfaction Survey, an institution-wide survey monitoring the effectiveness of the entire value chain of student support services. The Student Handbook, which is published each semester, is the central mechanism to review all policies and procedures applied in the school by all constituents.

The original task team leader, Mr. Gulyan was headhunted away during the spring semester of 2006. When he purchased HSH, Mr. Schmidt had changed all faculty contracts to a one month notice period. In this way, as he stated, he would not be confined to paying out three months salary if a relationship were to end and a disgruntled staff member would not be able to negatively influence the ambience in the school. The downside of this contractual rearrangement was that lecturers could easily leave anytime during the academic term, especially if they had holidays due to them. Mr. Gulyan had aspired to become the Operations Manager of HSH in autumn 2005, because of his extensive background as hotel general manager. HSH bypassed his candidacy and opted for an external candidate half his age with some initial experience as a cost controller. It was only a question of time when the faculty and this task team would have to be reconfigured. Mr. Long, who was originally the Standard 8 team leader was transferred to Standard 6 as team leader. Mrs. Bühler, Internship Coordinator; Mrs. DuPont, Admissions Officer; Ms. Santos, Accounts Manager; Mr. Miller, SPC and Alumni Coordinator; and Mr. Bonivard, Leisure Manager were the other team members. Mr. Miller resigned when SPSA dissolved the SPC and placements and alumni were reassigned to individual schools in autumn 2005. Mr. Bonivard resigned in spring 2006, when he was told that his position should become a part-time function which could be manned by, for example, a student at a university who wishes to make some money during his studies. In spring 2007, this was so implemented.

Mr. Miller's departure left a vacuum in communications with alumni. Now there was no one who had been officially reassigned to respond to their queries and requests. The

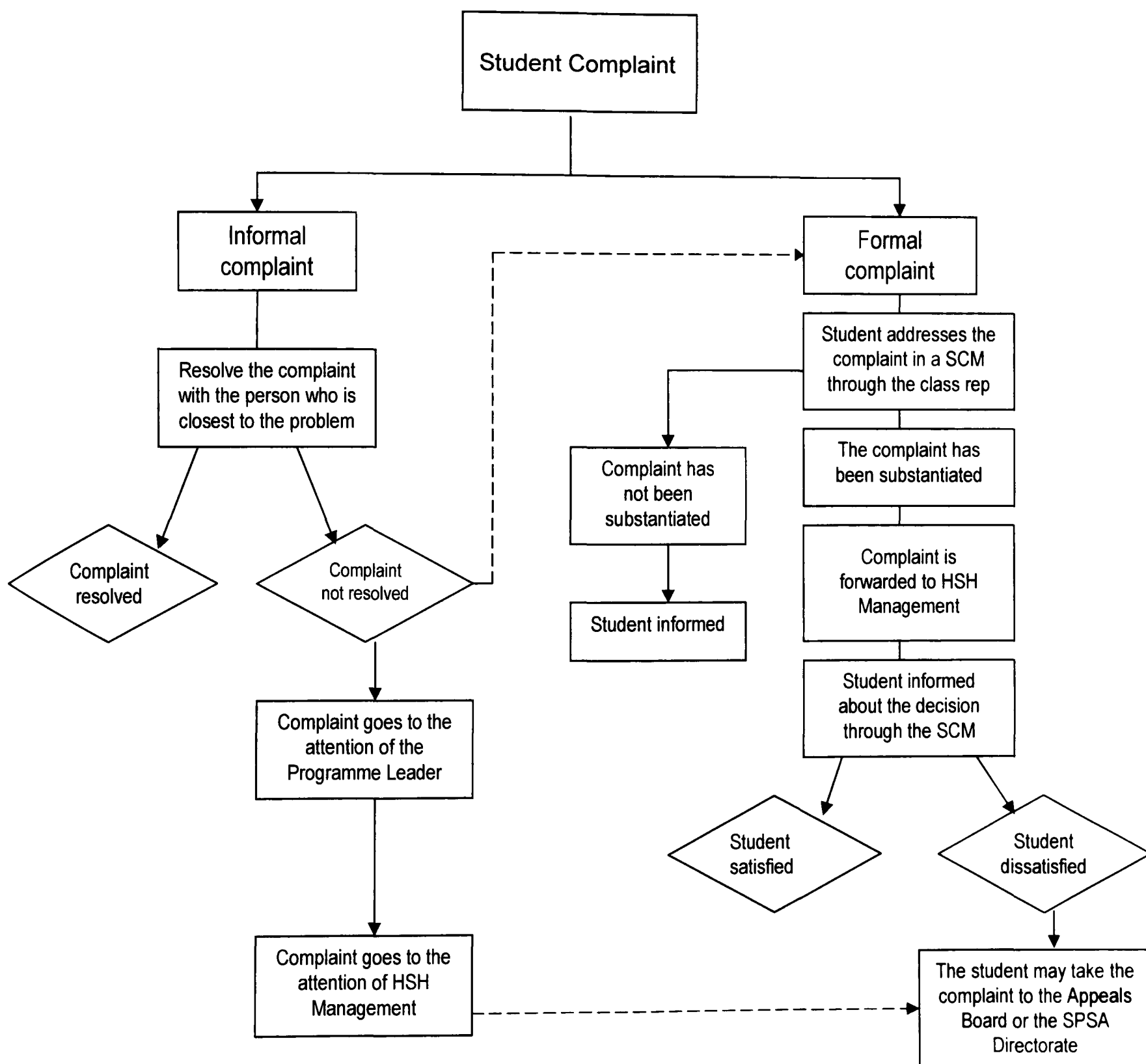
newly founded HSHAA website was overflowing with emails, announcements, photos, job offers and so on that were not being relayed further. Although this function was to return to the school's Internship Department, this department had lost one of its members even before the task teams were formed. His existence in the task team was no more than an ephemeral word-processing manoeuvre. Neither he nor Mr. Miller were replaced until autumn 2006. The internship assistant was replaced by a student from a Swiss university to work 60% (instead of 100%) to assist Mrs. Bühler, similar to the 50% Leisure Manager who replaced Mr. Bonivard (who was 100%). In essence, Mr. Miller did not get replaced since both new positions for student support had been whittled down to a total 110% in charge of student and/or alumni affairs. Mr. Bonivard had also served as the liaison person for the Student Council. It was he who oversaw extra-curricular activities of the school and guided students in organising social functions, sports events and excursions. Mr. Bonivard's departure more or less coincided with the arrival of the new Operations Manager, who as mentioned above, had no experience in handling such matters. For the greater part of 2006, both students and alumni were rather disadvantaged. Because of the drive of some outstanding students, social activities continued. It should also be noted that during this Self-Study period, one set of Student Council officers abdicated and now another president and vice-president are trying to abdicate. This has led Programme Leaders to question whether the Student Council should not report to the Academic Department instead. It has become a divisive debate amongst faculty.

Submitted to NEASC was a chart which was drawn up to prepare for SPSA ISO certification. One crucial procedure which must be in place is a mechanism to field customer complaints (please refer to the Literature Review chapter about ISO). As such, the SPSA Quality Control Manager, Mr. Hirse, and the HSH Dean drafted the following student complaint procedure (Figure 8). Since the Student Council technically reports to the Leisure Manager who in turn reports to the Operations Manager, the procedure was submitted to them. It was reviewed by the previous Operations Manager and Mr. Bonivard with the Student Council and ratified before they departed. However, since the departure of these two gentlemen, the Student Council has remained without a

“champion” to represent their activities. So, ironically, although the process was finally put in place, opportunities to exercise it have become restricted.

Another very important process concerning Standard 6 and 7, the internship process, is illustrated in Figures 9 and 10. Again, this department had been reduced to Mrs. Bühler for lack of a replacement candidate until fall 2006. The process is impeccable, because it has been tried and tested over many years of HSH’s existence. The challenge was rather that the department was limping on one leg until recently. As explained above, it is now limping on one and 60% of a leg (replacement student assistant), so to speak and is still struggling with how to handle the graduate placements and alumni communications which have been added to their functions since decentralisation. Just to give some dimensions to the internship officer’s routine tasks, Mrs. Bühler must place about 100 – 130 students in various internships each semester; about 80% in Switzerland and 20% anywhere in the world in a period of 16 weeks. In addition, she must schedule 12-15 recruitment seminars with hotel companies at the school and she should ideally conduct visits to students during their internships at their places of employment. These being the fundamental tasks of her position without the new responsibilities from decentralisation, it is easy to see why the demands can be overwhelming for one employee. The practical internship experience offered within the educational program is the most attractive, unique feature of the Swiss program. Students from all over the world can attain paid, work experience and receive college credit for it under the protection of the school. The internship placement, work permit and health insurance are all handled by the school. Due to the long history of accreditations of HSH, quality associated with internship and academic procedures was not a major concern. The most threatening element for this Standard was the enormous turnover of staff, which as reported by Mrs. Maillard was 70% overall in the academic year 2005-2006, including full-time and part-time staff.

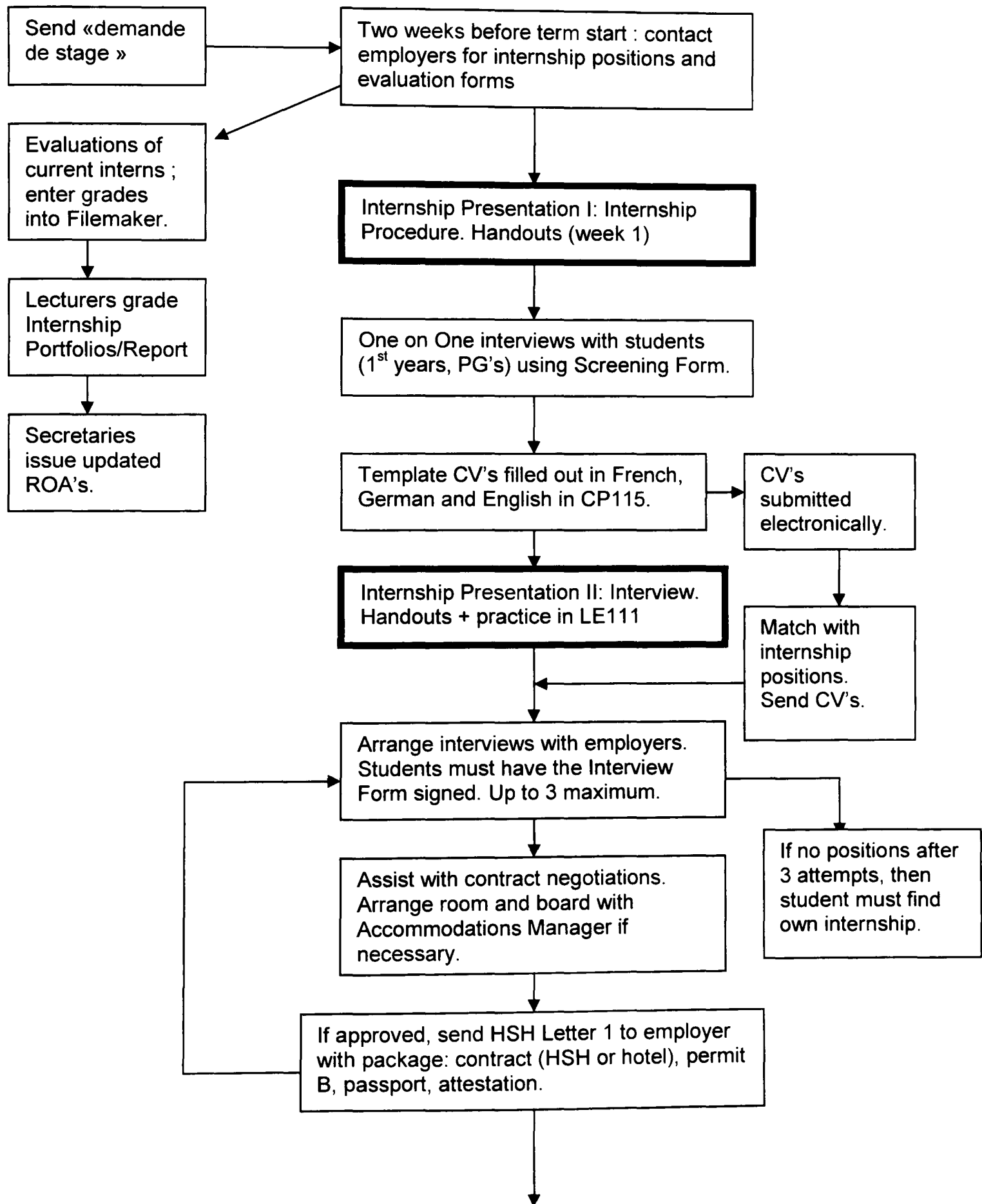
**Figure 8. Student Complaint Procedure**



Legend:  
SCM: Student Council Meeting

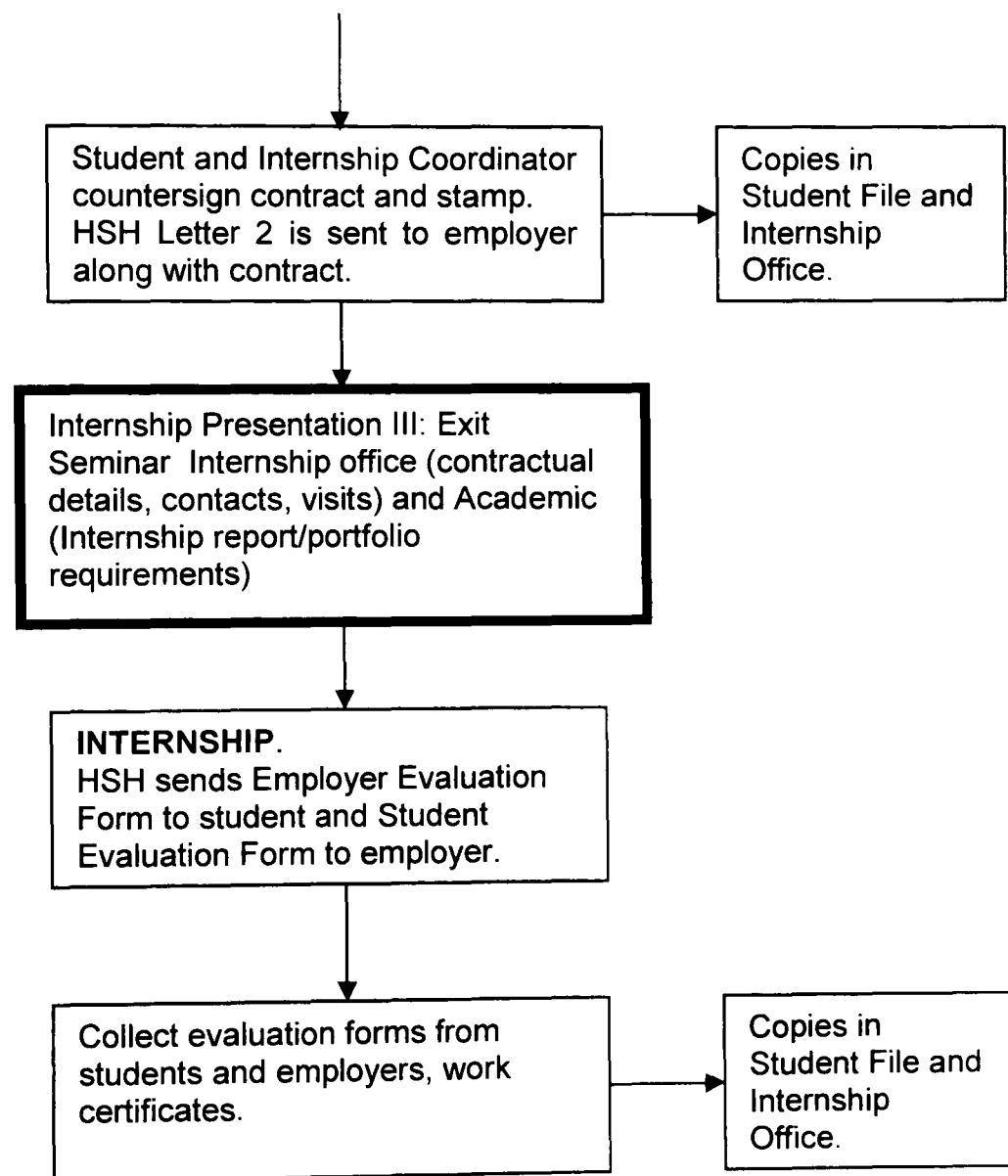


**Figure 9. Internship Procedure**



**Figure 10. Internship Procedure continued**

Approximately in weeks 10-12:

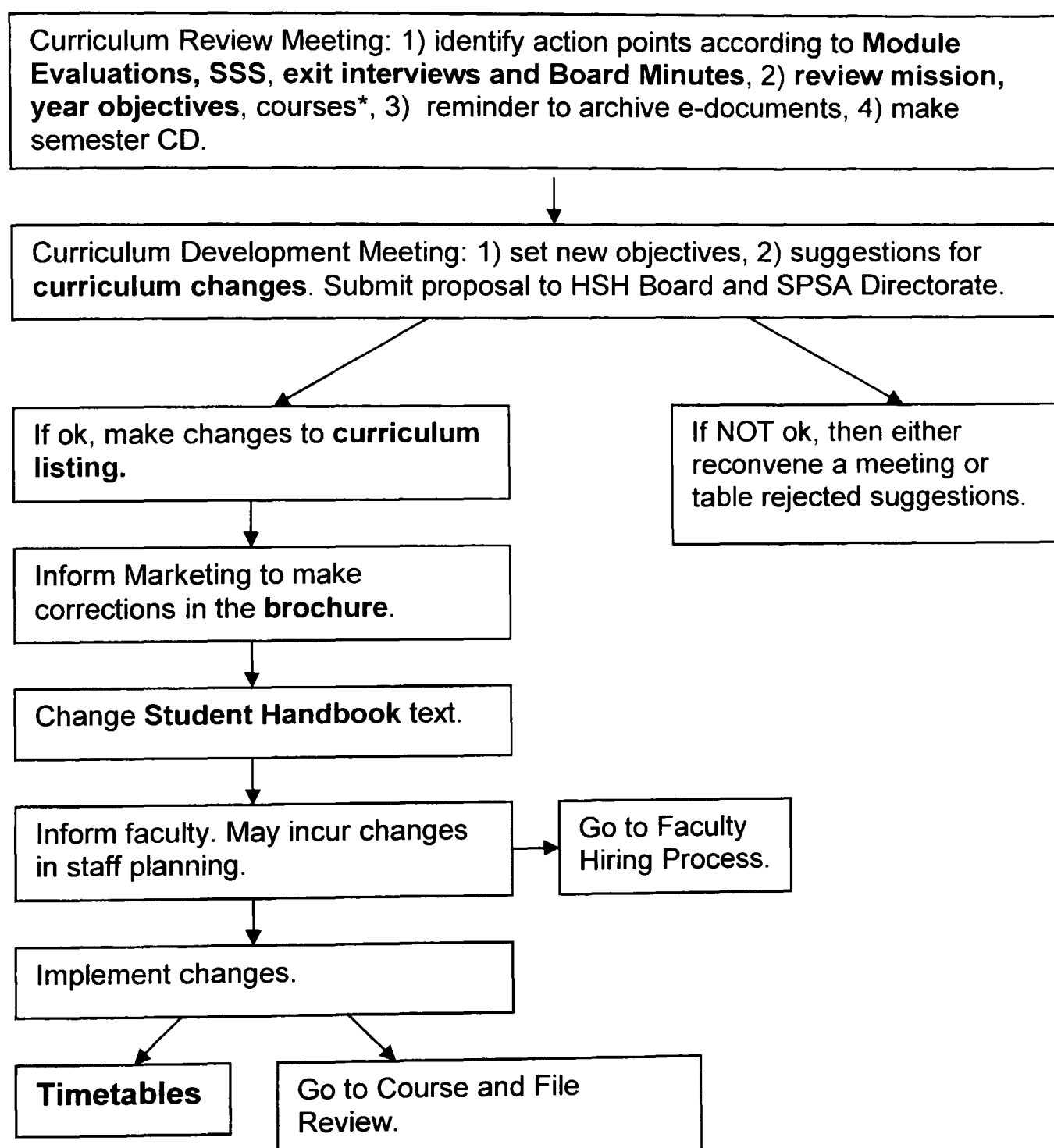


NB: PG's refers to postgraduate students.

**Standard Seven, Programs of Study** (NB American spelling of title as per NEASC): The Quality Standards Manual assures educational quality in terms of the teaching, learning and assessment methodologies and their coherence in the course and programme design. The Manual communicates the philosophy and objectives of each of the programmes. Further, the Academic Course Catalogue specifies all learning outcomes and their assessment methods for each of the courses identified through the Curriculum Meetings (Figure 11) for the respective programmes. Curriculum Review Meetings, which occur each year as well as the Course and File Review process (Figure 12), ensure thorough and proper assessment of courses and programmes offered. The yearly Curriculum Development meeting is held to modify the curriculum where necessary for the upcoming academic year. All constituents are involved to various extents in the process. The final element is assessment, represented by Figure 13.

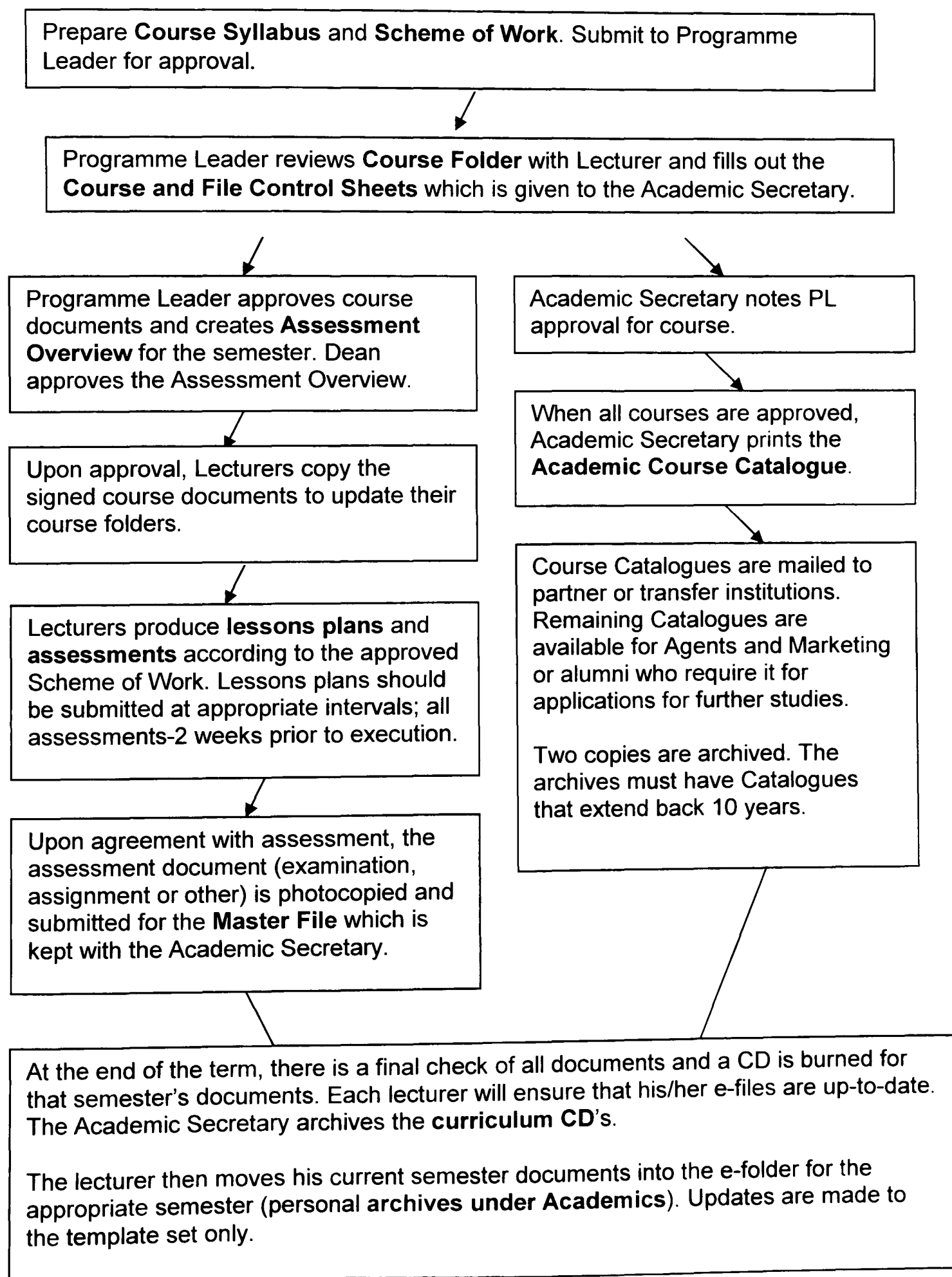
In forming the task teams for the Standards, the intent of the Steering Committee was to create balanced teams. The team leader was to be the most senior and experienced of the full-time faculty team along with members who work on the practical issues required for review. Because of the multitude of staff changes that occurred, the Standard 7 team also shrunk to two members, Mr. Trump and Mr. Kohl. Part of the motivation offered to the team was staff development, since they were left with a substantial portion of reporting even if most of the processes were in place. Mr. Trump had been with HSH for just over a year, and Mr. Kohl was a returning lecturer who had decided to “jump ship” when HSH was first purchased by SPSA. Their work was rather more voluminous than difficult. In general, a typical Swiss hotel management diploma comprises of alternating academic and internship semesters. This section outlines the procedures for the academic terms and the management of the evolving curriculum. Through the newfound autonomy since 2005, the HSH curriculum was developed entirely independently from other SPSA schools.

**Figure 11. Curriculum Review and Development Flowchart**

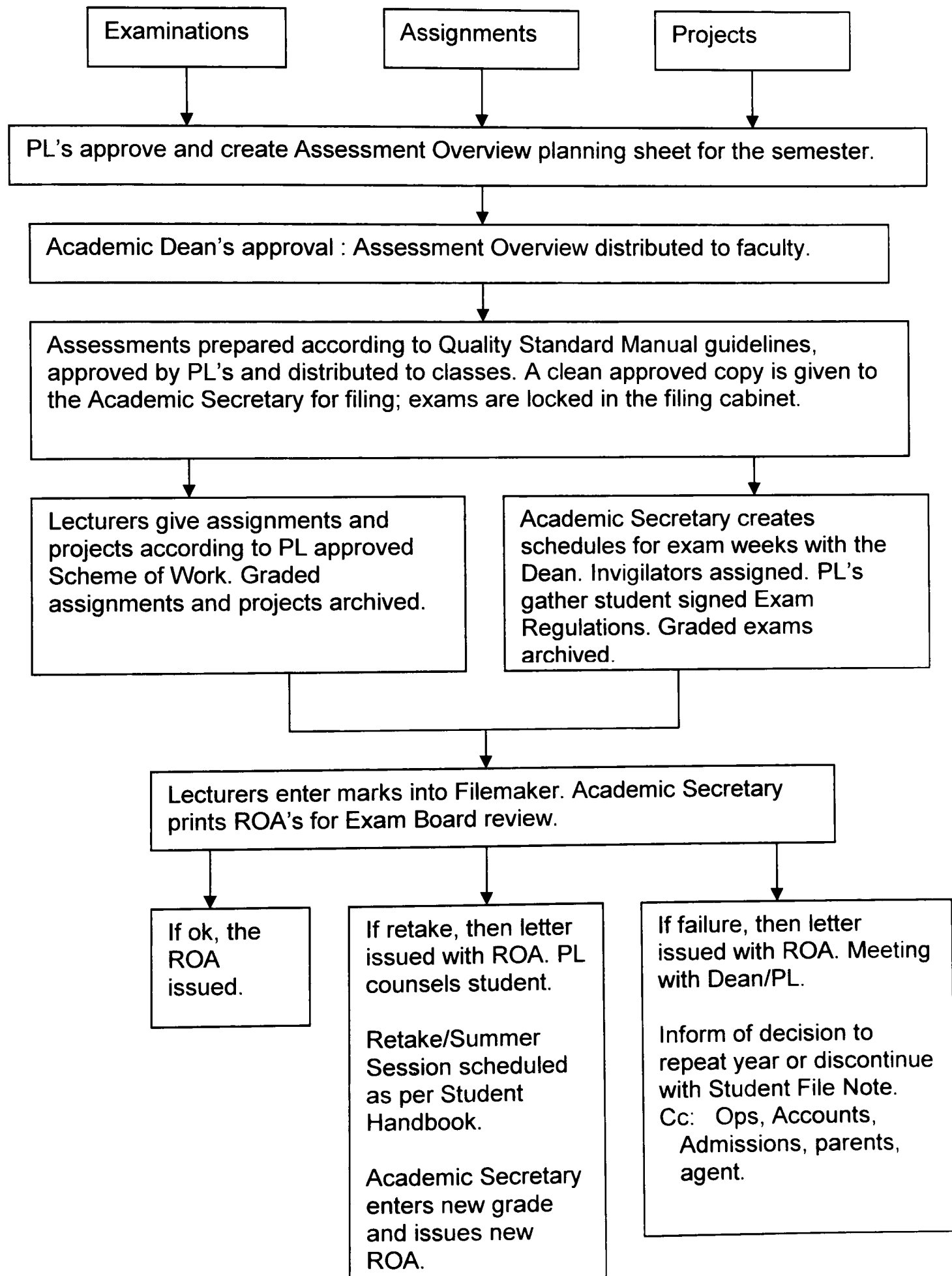


NB: The process is repeated at the end of each semester. \* Point 2 of the Curriculum Review Meeting is not relevant for the end of Autumn term.

**Figure 12. Course and File Review Flowchart**



**Figure 13. Student Assessment Procedures**



**Standard Eight, Facilities:** The Student Satisfaction Survey assesses the ability of both the Operations and Academic Departments to service student needs and permits feedback on the overall appropriateness of facilities, health care, counseling, extra-curricular activities, learning resources, information technology and student support during enrolment, admissions, academic term and internship processes. Other legal or statutory controls of facilities such as fire and safety inspections and building inspections take place at required intervals.

The original team leader for this Standard was Mr. Long, but due to Mr. Gulyan's departure, Mr. Wahlenberg was nominated to take over. Mr. Wahlenberg was originally one of the members of the Standard 7 team, who was transferred to this team to replace Mr. Long's operations expertise. Mr. Long had the best insight into student life and was transferred to Standard 6. Fortunately, Mr. Wahlenberg came to HSH with vast operations experience and had a Swiss diploma himself, so that he was at ease with the responsibility. In effect, he had been a part-time lecturer at HSH for about a year until autumn 2005. Since spring 2007, he has chosen to reconvert to part-time status after his observations of advancement possibilities. The other members of this team were Mrs. Schwarz, Front Office Manager; Mr. Dezaley, IT Manager; and Mrs. Verde, Head Housekeeper. On this team also personnel losses were suffered. Mr. Dezaley decided to leave in summer 2006. He was dissatisfied with his salary vis-à-vis his title and responsibilities. He was replaced by a new IT Manager (No. 2) who managed to last until winter 2006 despite his nervous breakdowns. He was released due to his inability to handle stress and replaced by another IT Manager (No. 3). Unfortunately IT Manager No. 3 gave his obligatory one week resignation notice during his initial trial period and his departure in spring 2007 was imminent. IT Manager No. 3 claimed to be "too much of a perfectionist" to work in the HSH environment. Currently HSH is on IT Manager No. 4 counting from the beginning of the Self-Study.

Also Mr. Schmidt decided to engage Mrs. Schwarz for marketing activities for 50% of her time as of spring 2007, so an 18 year old assistant receptionist was hired to cover the 50% of the time when the Front Office Manager is away on marketing trips. It is widely

believed that the fact that the Front Office Manager had completed her studies in Lausanne Hotel School but is doing marketing for HSH will create a pull factor for foreign students. As a personal testimonial, it is probably potentially effective. Because the Front Office Manager is now also paid on a commission basis, however, the school seems to be facing some conflicts of interest from the Front Office Department when it comes to care of current students versus potential students. The decision to have an itinerant Front Office Manager was made rather abruptly and along with a new Operations Manager who does not have Front Office experience, the young receptionist seems to be at a loss in managing many daily situations. It must be noted that all students must be at least her age or older to enrol in the school. A person of stereotypical Swiss beauty (young, blonde, blue eyed and thin) and an extremely calm nature, the assistant receptionist is not at all bothered to identify who is urgently trying to contact the management before transferring phone calls, to deliver overnight delivery packages upon arrival, to hand out mail and packages to students, amongst other items which have proven perturbing to the daily operations of a school. At first, the researcher found the entire situation immensely amusing, until the Dean got the hot rod for not responding quickly enough to marketing agents' postal inquiries. In this particular instance, it was uncovered that the DHL (i.e. urgent, overnight) inquiries had been locked away one week until the return of the Front Office Manager, because she had not had the time to train the assistant to deliver the mail. It must be confessed that the researcher still finds the situation hilarious, but as HSH Dean, I must also acknowledge that it is absolutely unacceptable for quality service in an upscale boutique hotel school. It has compromised my ability as Dean to proclaim HSH as a pinnacle of Swiss professionalism when prospective students and staff have encountered the Front Office as their first point of contact before their appointment with me.

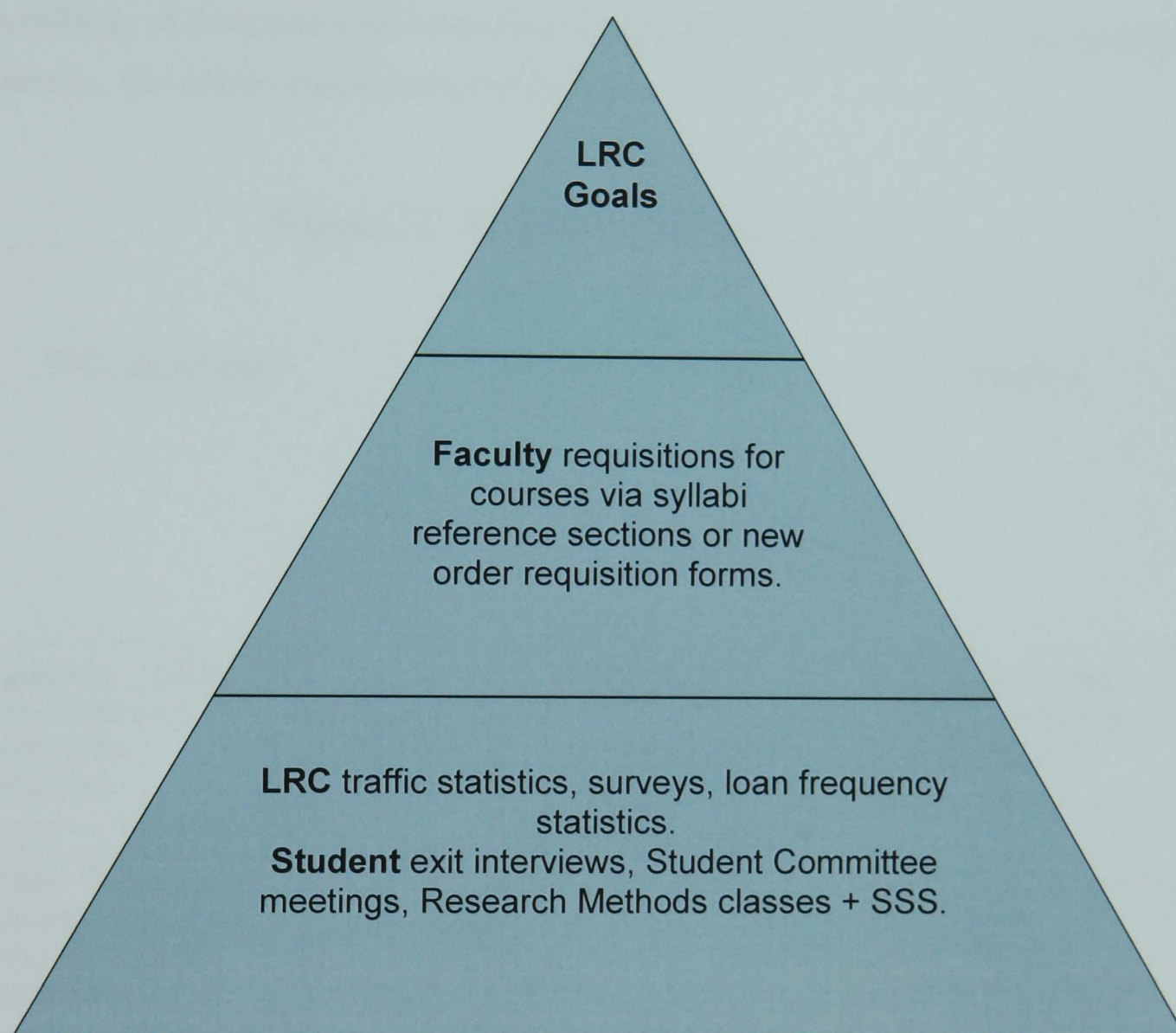
**Standard Nine, Library:** The HSH Learning Resource Centre (LRC) uses a battery of statistics and surveys to measure utilisation, appropriateness and effectiveness of resources and services. Planning is conducted in conjunction with the faculty at the annual Curriculum Development Meeting. The Academic Course Catalogue and the



Quality Standards Manual serve as references to align learning resources with learning outcomes.

The task team for Standard 9 was probably the only relatively stable task team throughout the Self-Study process if one disregards the fact that the library is staffed by interns who change each semester. The head librarian, Ms. Chapuis, and the two library interns did a formidable task of creating reports and statistics that bridged their existence both within the central SPSA library system and as an independent HSH library. Ms. Chapuis' talent as a meticulous and highly experienced library scientist became evident in the accuracy and consistency of her organisation of the resources despite the fact that she has had to physically move the entire library collection on almost an annual basis. Her misfortune is reflective of two causes. The first element is the restructuring or decentralisation of SPSA administration. The second element is the fortunate problem that SPSA has had with the increasing student numbers in HSH. Statistics show that since fall 2005, student enrolments increased by approximately 20% over the one year period due to revamped school promotion activities, tighter teamwork amongst departments, and constant and immediate contact with marketing representatives and agents. To accommodate increasing student numbers, SPSA acquired new residence and classroom space. In addition, since autumn 2006, SPSA had to rent supplemental residential space in the next village to accommodate the increasing student numbers. The upshot of all this was that with each expansion, the library was moved to a new location to convert spaces into more bedrooms and classrooms. In spring, Ms. Chapuis and her interns again moved to an entirely new "temporary" location. This situation is absolutely not amusing as now the LRC staff is expressing widespread dissension and Ms. Chapuis is threatening to resign if her responsibilities require more physical labour. On the other hand, collaboration between LRC and faculty is better than ever since the librarian has been fully integrated into the academic team. Figure 14 illustrates the cooperative processes put in place for LRC management.

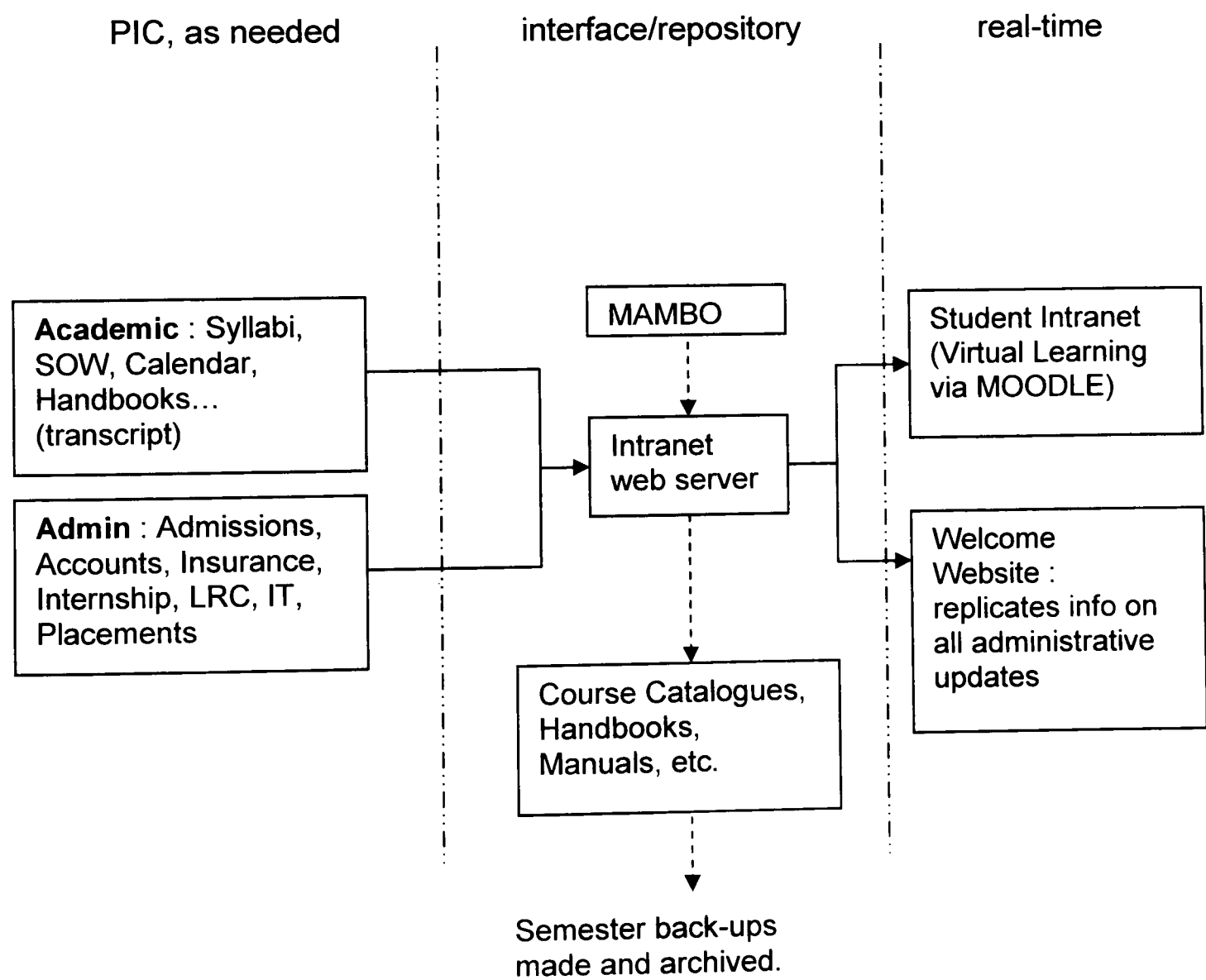
**Figure 14. LRC and IT Planning Pyramid**



"SSS" denote that the assessments are conducted through the Student Satisfaction Survey on library and information services. The Dean reviews the SSS results with the Head Librarian each semester and recommends short-term actions. Long-term LRC planning takes place on an annual basis, simultaneously with the faculty and the Dean at the Curriculum Development Meeting.

**Standard Ten, Publications:** All publications undergo a schedule of regular reviews by the persons responsible. The Documents and Website Management Schedule ensures that all publications are maintained properly and in a timely manner. Within SPSA, Mr. Jack had the responsibility of final editor for all SPSA school publications. The Dean had the responsibility of maintaining the document management schedule and records retention procedures. The online aspects are specified below.

**Figure 15. HSH Intranet Interface**



The intranet infrastructure was designed by a student-staff team. All faculty were given training on online document management.

### **3. *Format and Presentation of the Self-Study Report***

During the time of the Self-Study, the decentralisation of SPSA brought back to HSH a new level of independence. While the change and HSH's newfound autonomy was highly welcomed, it was challenging for all the task teams to finalise any chapters during the continuing institutional evolution. At repeated intervals when NEASC meetings were held, the task teams informed each other and sometimes even read parts of their chapters to each other during the collaborative edits. A rather frequent experience during these meetings was discovering overlaps of items mentioned in the guidelines. It became clear that several issues worked across Standards and they would simply have to be repeated in each chapter with a new angle to the activities being examined. An example of this would be student feedback under the Students chapter, student feedback on courses under the Programs of Study chapter, student feedback under the Faculty chapter and student feedback under the Planning and Assessment chapter. The final Self-Study Report comprised of 211 pages. Evidence from survey results, meeting minutes, corrective measures and such were submitted as "NEASC Self-Study Report Annexes" in ten separate binders, one for each Standard/chapter. Also submitted with the Report and the Annexes binders were the HSH Academic Course Catalogues, HSH Student Handbook, HSH Faculty and Staff Handbook, HSH Quality Standards Manual, HSH Career Management Handbook, HSH Staff and Faculty CV Booklet, HSH brochure and flyer along with promotional CD's and HSH floor plans. All print materials had to cover the last three years of HSH operations. Eventually a new bookshelf had to be added to the Dean's office to house the report and evidence.

Available for viewing on-line were the HSH website, HSH Welcome Website, HSH Student Network Services (Intranet), HSHAA website, SPSA Advisory Board website, Bibliomaker Library Management System, the School Management System and the back-up disks/CD's of the previous years. A computer and temporary password was given to each member of the visiting team to peruse the websites and the online data management systems. A complete collection of all textbooks issued was also made available with the annexes to the NEASC team as well. The print and on-line resources and archives in

Palace Hotel du Lac and Hotel Beaufort comprise the NEASC required supplementary evidence.

All material on the Self-Study process such as task team minutes, interim reports or other facsimile materials such as photocopy examples or affidavits were available in the set of NEASC Task Team Binders, one for each Standard and one for Steering Committee Planning and Organisation. As report writing and evidence gathering progressed, it was not efficient to continue without a database where electronic files could be shared amongst all task teams and their members. A new location was mapped out by Mr. Jack on the local server as “NEASC” and populated by all the team members according to their assigned tasks. The management of the “NEASC” database was handled by the Dean along with the numbering, renaming and reorganising of all annexes. The final report was due by the end of August 2006. One final edit was done during the summer of 2006, and the chapters were read into an electronic master document, burnt on a CD and sent off to a local print shop for printing and binding. Given the change HSH was going through in terms of radical reengineering, the reporting may have not “finished” for a long time, if ever. While the school was happy overall with the quality of the Self-Study and the report, most knew that by the time of the visit, processes may have been adapted again. There was nothing left to do but accept the inevitability of change and surrender to the report deadline.

#### ***4. Final Revision of the Self-Study Report***

At about the time of the preliminary visit, the shortage of hands on deck due to staff turnover was impeding finalisation of the Self-Study. New faculty were hired to fill the gaps, but they had no foreknowledge of the decennial reaccreditation or of quality assurance procedures in education in general. During autumn 2005, Mr. Jack was called away to oversee a validation at another SPSA school. The intensity of the validation at the other school kept Mr. Jack away for most of spring 2006. So a special project coordinator was hired amongst the new faculty who had experience with both validation and accreditation, Mr. George. His role was to edit the final report and accompany the Steering Committee, which had dwindled down to a single member, for the rest of the

Self-Study process. Mr. George came on board in July after the preliminary site visit by Dr. Lewis, Chair of the visiting team in June 2006. With the feedback from Dr. Lewis, Mr. George hashed through 22 versions of the report with the Dean, the leftover Steering Committee member. Dr. Lewis' advice was targeted to help the school formulate its Self-Study Report in a manner and language that would easily be understood by American accreditors and to query any inconsistencies between the Standards. His candid advice as a former director of the CTCI provided insight to corrections for the final report. Primarily they involved rewriting the report in a consistent, positive and forward-looking tone. It seemed that some cynicism or pessimism could be inferred in several sections. This was true since the Steering Committee had decided to leave the work of the task teams as genuine as possible. Dr. Lewis' feedback was extremely detailed and conscientious. Obviously, he read every single word of the report and this was flattering and intimidating for the authors. While there was quite some apprehension on behalf of the school to "prove" itself, the attitude of NEASC reflected very much a consulting style rather than that of an external inspection. Finally, Dr. Jefferson, Associate Director of NEASC provided feedback and coaching throughout the process. He met with the Dean in winter 2005 in Switzerland in person again and kept in fairly regular email contact about school developments. Dr. Jefferson was positive about HSH and wanted to assign a member to the visiting team who was employed at another Swiss hotel school. In that way, the person could get exposure to accreditation as the other school was in its candidacy stage. This was rejected by Mr. Schmidt unfortunately. It caused no animosity with NEASC, but it meant that reciprocally HSH would not be considered as peer visitors to similar sites. Dr. Jefferson's experience in Switzerland was invaluable for the interpretation of Standards and Guidelines for a single owner, for-profit Swiss professional school within an American accreditation system.

## **F. The Accreditation Visit**

One month following the submission of the Self-Study Report, the accreditation visit usually takes place. In the case of HSH, the visit took place from the 9<sup>th</sup> to the 12<sup>th</sup> of October 2006. This section of the case study details the profiles of the visiting team members, the visit agenda and protocol, the visiting team's data collection methods, and a

comparative analysis of the school's and the visiting team's perceptions. The comparative analysis encompasses Strengths and Weaknesses analyses conducted with the students and staff and is juxtaposed with the results of the exit interview feedback of the NEASC team.

### *1. The Visiting Team Members*

Sometime prior to the visit, Dr. Jefferson made known to HSH who the members of the visiting committee would be:

1. Dr. Steven Lewis, retired; former president, A. College, Maine, Chair of the visiting team
2. Dr. William Anderson, Director, Learning Resources, B. Community College, New Hampshire; Assistant Chair
3. Dr. Edward Johnson, retired; former president, C. College, Vermont
4. David Bedford, Department Chair of Culinary Arts, D. Technical College, Maine
5. Dr. Barbara Hendersen, Director of Learner Services, E. Community College, Connecticut

In addition to the members of the visiting team responsible for evaluating the school, Dr. Jefferson accompanied the group as a supporting NEASC staff member. His role was strictly observatory and to support the visiting team in logistical matters. The team consisted of extremely experienced administrators, two of whom were already retired, and was all the more impressive by being composed of either current or former members of the Commission directorate. In fact, four of the six total visitors were or are involved as CTCI directors. This piece of information was revealed at the Opening Dinner just prior to the official visit of the school. It was intended to put the school's Self-Study team at ease with the fact that some of those who will directly be deciding on the school's ultimate status were already present on the visit. Another piece of information that emerged during the visit was the reason for the elevated average age of the visiting team. Dr. Jefferson's explanation was that the CTCI has run into increasing difficulty to recruit visiting team crews, because most institutions have by now migrated over to the CIHE. Thus most of the schools that were formerly CTCI were now offering degree



programmes. Relatively few remained purely in the technical or vocational education niche. Since the visitors should represent peers, Dr. Jefferson was compelled to draw upon an ever diminishing circle of institutions. This seemed an echo of the global trend of education shifting towards degree granting programmes. The Opening Dinner was also attended by two Governing Board members in line with the request of NEASC to have an opportunity to meet directly with the board during their visit. The HSH owner, Dean and Mr. George comprised the rest of the dinner party. Curiously Mr. Jack was not on Mr. Schmidt's invitation list. The ambience during the evening preceding the official visit to the school was one of casual ceremony. HSH's owner and management eagerly wished to demonstrate Swiss hospitality at its best throughout the entire visit, so the dinner was held at the Lausanne Grand Palace Hotel, a historic icon of local five-star hospitality, to set the proper tone.

## ***2. Visit Agenda and Protocol***

The evaluation visits for accreditation follow a rigid agenda. The visit is comprised of three parts: an Opening Dinner as described above, the official visit, and the exit interview. The Dinner takes place on the evening before the official visit dates which tend to be Monday and Tuesday. In HSH's case, the official visit days fell on Tuesday and Wednesday, due to the transcontinental travel required. The Dinner must be attended by all members of the visiting team, key institutional personnel and where possible by members of the Governing Board. The objective of the Dinner is informal discussion and orientation for the activities that will follow. During the official visit, which is typically two days, interviews with faculty, students, administration and others are held. The interviews may be structured or unstructured, planned or spontaneous depending on the preferences of the visitors. Besides interviews, the team must receive the floor plans and tours of all premises. Further tours or extended interviews may be held in certain facilities such as the library (Learning Resource Centre), the nurse's surgery, the training restaurant and so on rather than in dedicated private meeting rooms. Also scheduled into the two days are planned and random class visits. In this respect, it became abundantly clear that the visiting team will be gathering information and evidence non-stop, all the time. While each member has his/her own Standards to verify, the overlap of content and



processes of the school meant that the team members would be able to effectively triangulate any claims made in the Self-Study Report. It would have been practically impossible to manoeuvre any situation or interview for appearances which were not true to actual school practices. After each full day of information gathering, the team met together to compare and write up the findings.

On the official visit days, the owner organised dinners for the team and the two accompanying spouses to be hosted by himself and the HSH management team. The Dean being a dual Swiss and American national, did not find this desirable from the point of view of American accreditation practices as it may be misconstrued. The Swiss side prevailed. One dinner, intended to be held in another SPSA school Mr. Schmidt owns, was moved to a local tourist restaurant due to transportation difficulties. The transportation difficulty was finding enough important HSH staff members to chauffeur the visiting team in the company cars. The second dinner showcased yet another SPSA school which is coincidentally the one that Mr. Schmidt founded. His intentions seemed to revolve around making a positive impression of SPSA and his portfolio of schools even though NEASC is only concerned with HSH. The invitations could have been awkward for the visiting team as it is not generally accepted practice for evaluation team members to be “wined and dined”. On the other hand, the visiting team graciously accepted the dinners as gestures of Swiss hospitality and requested that they be kept brief. During the second dinner in the sister school, Dr. Lewis had to go to the extent of making a remark to all present that he would have to refuse the tour of the school’s premises after dinner that Mr. Schmidt insisted upon, because it does not fit into the mission of their visit. He explained that the time would be better spent on finalising their report to the Commission instead. Dinner service followed five-star formality and civility, wine flowed ceremoniously and abundantly, and all discourse observed the strictest rules of propriety and courtesy...except the exchange of whispers between Mr. Schmidt and the Dean: the Dean earlier opined discretely to him that the before dinner tour was probably already sufficient and Mr. Schmidt accused the Dean of prioritising her private life. This is yet another example of the differences between the Swiss and American dispositions to hospitality and protocol.

The final portion of the visit is the exit interview which takes place the morning following the official visit. Duly following protocol, HSH received the team's feedback on Thursday morning. The debriefing of observations made and contents of the team's written report that will be submitted to the Commission were shared by the visiting team Chair with the owner and key institutional staff members. At this juncture, no further comments or questions from the institution are entertained. The school's role is basically to accept the findings, not to contest them or to add to them. Also no indication of the visiting team's recommendation to the Commission should be given. There are six different recommendations which can be made in the case of a decennial re-accreditation:

1. accreditation continued
2. accreditation denied
3. probation
4. warning
5. condition or a review procedure suggested
6. deferral.

On the other hand, the Chair encouraged as many of the school's key constituents to be present for the feedback which promised to be 'complimentary'. The intention seemed to be to put the school at ease and to use the opportunity to motivate the school through the positive elements of their feedback. There were no egregious errors to be anticipated. The details of the exit interview are expounded in the section on NEASC visiting team feedback in Table 5 below. Lastly, the school is informed about how the team will proceed: that they will send the school a draft of the visit report within two weeks for editing of factual inconsistencies only. Thereafter the final report is sent to the school as a copy while the original is submitted to the Commission for the next meeting. In the case of HSH, the next meeting would be in April 2007, where the Commission would deliberate on HSH's re-accreditation. The school has to attain majority approval of the Commission in order to maintain its accredited status for another ten years. Until the time that the final revision of the report gets submitted, the school can send further responses to the Commission by way of follow-up reports, new evidence of continuous

improvement and other items to indicate progress towards satisfying the recommendations received. Thus some post-visit reports can continue to be filed by the school until April and the school is advised to do so as a demonstration of its earnestness.

## **G. Comparative Analysis**

Prior to the visit by the evaluation team, it was decided that the school staff and students would conduct a Strengths and Weaknesses Analysis (SWA). The original motivation of conducting these analyses were to test to what extent the staff and students were prepared and had reflected on the various Standards. A further use of the SWA was the unintended opportunity to compare the NEASC team findings with those of the school's own staff and students', thus a certain measure of objective comparison was brought into the process. The analysis sessions were carried out separately. The staff SWA was done during a faculty meeting which for this occasion also included all the task team members outside of the academic department. The student SWA was done at a Student Council Meeting. Both meetings were held by Mr. George in his capacity as NEASC Accreditation Project Manager and recorded in the minutes by the Academic Secretary and the Student Council Secretary respectively. Their replication here has not been edited, neither in mechanics nor in spelling, etc. The secretaries chose to call weaknesses "concerns" in line with the terminology used in the Self-Study Report. The NEASC exit interview was given obviously after the evaluation visit and is inserted here for purposes of comparison with the pre-visit SWA. Notes from the exit interview were taken by Mr. Jack, Mr. George and the Dean. The notes were cross-compared for accuracy and rewritten in the form below by Mr. Jack. A discussion of the SWA's and the exit interview notes will ensue in the Data Analysis chapter. The discussion will also bring in the results from the Student Satisfaction Surveys and the Module Evaluation Surveys from 2003-2006 which are included at the end of this chapter.

### **Table 3. Staff Strengths and Weaknesses Analysis**

**Faculty and Task Team Meeting: 21<sup>st</sup> September 2006**

Standard	Strengths	Concerns
1	Location “Swissness” of the School	
2	Transparent Framework	
3	Governing Board Proactive	
4	No. of students	
5	Network of Faculty HR on-site	Training Retention / High Turnover
6	Reputation of the School Multicultural Nature of the School	Alumni
7	Knowledge and Language	
8	Upgrade and Renovation Wifi and Computers Location	Physical Rooms size Maximum capacity
9	Resources	Interns
10	Marketing and Publications	Rooms

**Table 4. Students' Strengths and Weaknesses Analysis**

**Student Council Meeting: 2<sup>nd</sup> October 2006**

Standard	Strengths	Concerns
1		Mission no longer displayed in the Library
2	Developments of courses Student Committee	number of Students
3	Governing Board members supportive	
4		
5	Cultural Diversity	Printer
6	Mix of Cultures and the Learning Environment	Working in Classes and not using English English used throughout the School
7	Books very fast to get on arrival Course Feedback & Development	
8	Renovations very nice	
9	Internet (very useful) – Journals on-line Spacious Library	Physical Distance of Library number of books not enough
10	Really good communication with students before enrolment Welcome Website	

## Table 5. NEASC Exit Interview

12<sup>th</sup> October 2006

STANDARD	ITEM	NEASC RECOMMENDATION
Standard 1 – Mission	1.1	Higher education goal of the higher diploma needs to be more explicit
	1.2	Unique character of HSH needs to be promoted
	1.3	Mission Statement must be in all publications
Positive points		<ul style="list-style-type: none"> <li>• Commitment to the mission</li> <li>• New mission statement and Guiding Principles</li> </ul>
Standard 2: Planning and Assessment	2: 2.1	Disconnects between the data gathered and the outcomes
	2.2	All processes to be used for all functional areas including HR and Governing board
	2.3	Measurable KPI required - 4-6 elements to be identified and evidence needs to be available to measure performance
	2.4	Longitudinal statistics
Positive points		<ul style="list-style-type: none"> <li>• Planning and Assessment Model is appropriate</li> <li>• All functional areas are covered in Planning and Assessment</li> </ul>
Standard 3: Governance	3: 3.1	Instill a culture of governance processes
	3.2	“Conflict of interest” statement needs to be included in the governing board statutes
Positive points		<ul style="list-style-type: none"> <li>• Positive constituents, broad representation, commitment</li> <li>• Successfully addressed in Student Handbook</li> <li>• Succession planning is evident</li> <li>• Owner engaged in financial and strategic planning.</li> </ul>
Standard 4: Finance	4: 4.1	Formative budget process
	4.2	Still a minimal participatory budget process

	4.3	Separate BA and Higher diploma expenditures
	4.4	Academic centres and programmes to input into budget processes
Positive points		<ul style="list-style-type: none"> <li>• Strong financial underpinning of the school</li> <li>• Good facilities and resources</li> <li>• Revenues lead to budget surpluses</li> </ul>
Standard Faculty	5: 5.1	Limited office space
	5.2	Faculty staff lounge
	5.3	Merit raises and incentives
	5.4	Part time faculty participation
Positive points		<ul style="list-style-type: none"> <li>• Commitment from faculty, teamwork, enthusiasm</li> <li>• Diversity</li> </ul>
Standard Students	6: 6.1	Student files need to be kept confidential (nurse's medical records)
	6.2	Identify processes for SPC placements
	6.3	Need for personal counselling i.e. student counsellor
	6.4	Need leisure and extra-curricular person
Positive points		<ul style="list-style-type: none"> <li>• Diversity of student body, professional attitude, politeness</li> <li>• Learning environment</li> <li>• Improved retention</li> <li>• HSHA email addresses are given to all alumni</li> <li>• Student government</li> <li>• Student activities</li> </ul>
Standard Programmes of study	7: 7.1	Tracking of alumni after initial position is missing
	7.2	Impact of faculty turnover and attrition on quality
Positive points		<ul style="list-style-type: none"> <li>• Variety of assessment tools</li> <li>• Faculty agreement with mission and objectives</li> <li>• Low attrition (faculty commitment, student and faculty mentoring, resources and enrolment process)</li> <li>• Internship placements</li> </ul>
Standard	8: 8.1	Lack of office / faculty space

Physical  
resources

- 8.2 Improvement in ventilation in offices and classrooms
- 8.3 Classrooms are crowded

Positive points

- Remarkable renovations
- Staff are happy with support from Dean for resources
- Outlets are well-kept

Standard 9: 9.1  
Library and  
Information  
Resources

Library needs serve the HSH community and woven into the teaching and learning culture

- 9.2 Small
- 9.3 Requires quiet study spaces
- 9.4 Insufficient computers
- 9.5 Isolated
- 9.6 Insufficient books / journals/ resources in enough subject areas
- 9.7 Librarians office and duties shared with reception
- 9.8 Surveys and usage statistics need to be separate for Higher Diploma and BA
- 9.9 No LRC budget
- 9.10 Book shelving is lightweight and inappropriate
- 9.11 More seating
- 9.12 Extension of current collaboration with Westcreek University to Higher Diploma suggested
- 9.13 Need to extend breadth of collection overall including full-text journals, databases etc

Positive points

- Enthusiastic librarian
- Improved resources
- Participation in faculty meetings and curriculum development meetings
- Updating of collection
- Value chain and feedback from students
- Library induction



Standard	10: 10.1	Mission statement should appear in the brochure
Publications		
	10.2	HSHA should be updated to include a further education page
	10.3	NEASC is only HSH, not SPSA or other schools in SPSA
Positive points		<ul style="list-style-type: none"> <li>• Clear, ethical processes</li> <li>• Nice brochure</li> <li>• School publications and document management process</li> <li>• Websites</li> <li>• Student intranet site</li> </ul>

**Table 6. Student Satisfaction Survey Results**

<b>Term -&gt;</b>	<b>Fall 03</b>	<b>Spring 04</b>	<b>Fall 04</b>	<b>Spring 05</b>	<b>Fall 05</b>	<b>Spring 06</b>	<b>Fall 06</b>	<b>Avg</b>
Agents	71.9	75.3	71.2	73.4	64	68	72	71
Arrival Weekend	66.7	88.5	72.8	76.1	70	80	74	75
Accommodations	63.6	78.1	65.7	68.3	68	59	64	67
Leisure Activities	48.5	67.3	75.7	81.9	85	79	52	70
Student Care	63.8	80.7	75.3	77.1	67	70	61	71
Reception	49.3	75.4	76.3	88.0	76	79	71	74
Admissions	82.6	88.3	83.3	84.2	82	86	82	84
Academic Office	77.6	85.5	77.8	84.6	80	82	83	82
Teaching Facilities	75.6	83.3	75.2	80.4	76	80	77	78
Assessment	68.3	76.5	75.7	74.2	77	84	73	76
Library	79.1	87.3	79.9	90.4	80	85	84	84
IT	46.6	71.0	43.8	51.9	71	65	43	56
Food & Beverage	58.1	65.2	59.7	59.3	57	62	63	61
Housekeeping	81.8	84.4	82.0	82.7	80	91	91	85
Duty Management	89.5	91.6	93.5	89.3	87	91	88	90
Internship Office	68.6	66.9	68.1	69.5	55	64	66	65
SPC	74.6	90.1	87.5	87.3	78	92	NA	73
General	70.1	78.1	76.7	80.1	72	82	77	77
<b>Average</b>	<b>68.7</b>	<b>79.6</b>	<b>74.5</b>	<b>77.7</b>	<b>73</b>	<b>77</b>	<b>71</b>	<b>75</b>
Participation rate					84	85	67	
“Overall, the school community and environment met my expectations.”	64.0	69.7	68.3	76.2	N/A	N/A	N/A	

NB: Highlighted percentages are those at 70% or below since the start of the Self-Study.

**Table 7. Module Evaluation Survey Results**

Term ->	Fall 03	Spring 04	Fall 04	Spring 05	Fall 05	Spring 06	Fall 06	Avg
Year 1		84.2	85.2	89.7	87	83.9	82	85
Year 2		95.8	80.0	83.8	83	87.3	76	84
Year 3		71.8	75.2	69.0	80	71.4	78	74
Postgraduate		98.2	80.3	89.9	88/85	93/81	89/79	88
Average		87.9	81.3	83.5	84	81.2	80	83
Participation rate					93	86	92	
Faculty turnover						3	1	
Notes	New Dean			New Dean at mid- term	New Ops Mgr		New Ops Mgr	

NB:

1. Results are given in percentages.
2. Results are rounded up as of Fall 2005 surveys.
3. Double entries under "Postgraduate" connote separate results for the two PG programmes as of Fall 2005 surveys.



## **V. DATA ANALYSIS**

The objective of this chapter is to analyse the data gathered through the preceding case study in order to determine whether accreditation can indeed assure quality. The primary areas of inquiry fall into the following four subordinated objectives. First matter of interest is the way NEASC conceptualises quality in the way it defines its own mission and its interpretation of assuring educational quality with the use of standards. Second, I look at the NEASC Standards one by one to analyse their effectiveness. This section draws upon the events at HSH and observations of the NEASC visitors' vis-à-vis school stakeholders' to discern whether quality was assured in the case of HSH, and if so to what extent. Third, I debate the NEASC quality review process, its methodology in terms of enacting its mission: the Self-Study Report and peer review. Fourth, I discuss if the accreditation agency enacts what it purports to do. Finally, I reflect on methodological issues of this thesis itself.

### **A. The Accreditation Agency's Mission Statement**

The mission statement of NEASC, cited also in Chapter 4, consists of three parts and each of the parts is dissected below. The first part describes the agency as a self-regulatory organisation whose purpose is to serve "the public and educational community by developing and applying standards assessing educational effectiveness..." The second part of the mission refers to the way it assures and improves quality of schools. The final part describes the agency's goal to "inform public discourse about educational improvement." I repeat the NEASC mission statement in entirety here to facilitate discussion:

"The New England Association of Schools and Colleges, a self-regulatory membership organisation, serves the public and educational community by developing and applying standards assessing the educational effectiveness of elementary, secondary, and collegiate educational institutions. Processes of self-evaluation and peer review utilising the Association's goals assure and

improve the quality of institutions, which seek its accreditation. It also endeavours to inform public discourse about educational improvement.”

Any effort to investigate how quality is conceptualised in the mission statement must question the assumptions underpinning these three areas. As can be seen in the previous chapter, NEASC does literally develop “Standards” for educational effectiveness of an institution. By developing and applying these Standards, does the agency most effectively discern the quality of academic institutions? Options other than the use of Standards could be the application of benchmarks, which allow the school to be placed in the greater context of other similar schools. This is demonstrated by the QAA in the use of subject benchmark statements for ease of comparison amongst all schools in the British Isles. Alternatively, if a TQM approach were used such as the ISO certification, the processes at HSH would undergo review in terms of statistical control and audits attesting to the internal coherency of the school’s value-delivery processes. In the same vein, applying some EFQM criteria would take into account the social environment of the school, because partnership development and public responsibility would be considered. This would be more relevant when seen in conjunction with the third part of the NEASC mission to “inform public discourse”. Distinction must be made in terms of priorities for quality assessment and that depends on the way NEASC perceives its role and the role of education in society. The ontological doctrine embedded in the NEASC mission, seemingly, is to review the school for its own sake rather than as a mechanism for social evolution and may be indicative of the laissez-faire attitude of North America in general. Yet other aspects may be factored into the quality equation such as leadership, policy and strategy as is the case with the EFQM Business Excellence Model. In the EFQM approach, these three aspects are integral as drivers (or “enablers”) of excellence. The pan-European vision of quality, represented by EFQM, attempts to associate “enablers” with “results” in a cyclical relationship. When juxtaposed with the TQM derivatives that delineate movement and social consciousness, NEASC Standards seem to be rather more static.

As defined in the literature review, quality seems to escape a singular definition but may be narrowed down depending on the constituents' perspective. The NEASC approach apparently does not provide direct means for expression of individual perspectives. Case study examples follow in the itemised Standards discussion below. The claim is that accreditation is a "bottom up" approach, since the Self-Study requires input from staff and students. Yet compare, for example, with the QAA practice of allowing student unions to have direct input through their own written report in a validation event. As we look through the Standards, it is evident that, although various constituents' viewpoints are taken into consideration, they are weighted less in the overall judgment of school quality. The NEASC approach leans towards a mix between institutional and systemic perspectives. It is institutional in that NEASC accepts the school's mission more or less at face value, and the school is gauged according to its mission during the review. As indicated in the literature review, the characteristics of an accredited school are:

1. appropriate mission
2. resources to accomplish the stated mission
3. demonstrate the ability to accomplish the mission
4. evidence of positive future performance.

In the case of HSH, there was some difficulty in interpreting the final characteristic: how does one provide evidence of future performance? For the sake of simplicity, this was relegated to a semantic rather than an ideological issue, but it does introduce tensions in understanding "evidence" of the "future" as assurance of quality in the present. The NEASC approach is also systemic in that the standards are the same as those applied to American public schools. For the case study, it is important to question whether these standards are appropriate given the particular context and culture of the case study school. We will see below how they were applied to the Central/Northern European traditions and practices of HSH.

There are advantages and disadvantages associated with the choice of using Standards compared to the use of rankings, ratings, benchmarks or other means. The manner in which the Standards are applied to assess educational effectiveness must be explored. Thus the next section of the data analysis is based on data reduced into categories that

mirror individual NEASC Standards. Each of the Standards as they were applied to HSH is discussed. I determine how the application of the Standards either reveal or do not reveal certain aspects of school quality.

## **B. Effectiveness of Accreditation Standards**

The contents of the Self-Study Report recount that ten Standards are applied by NEASC to school evaluation. Here I review each of the Standards, describe what NEASC intends by using the Standards and the results of the Self-Study and peer review visit. For each Standard, there are questions that come to mind from the case study data. In some instances, I rely heavily on data made available through the ISO related Student Satisfaction and Module Evaluation Surveys (Tables 6 and 7) and the chronology of NEASC visits (Appendices 1-3) to underline my field observations. They are followed by recommendations that could elevate the quality assurance of the Standard area.

### ***1. Mission of the School***

**Intended purpose:** This should indicate school values and the reason for its existence, its purpose as an institution.

**Results of the visit(s):** NEASC did judge the appropriateness of the mission statement of HSH. They noted that the new statement does not explicitly emphasise the higher education goals of its programmes. With HSH, it can be seen in the case study that NEASC was careful to monitor any changes in the mission as the school went from owner to owner and structure to structure over the years (Appendices 1 - 3). Despite the “no change in mission” advice in 2002, SPSA did change it in 2003. Then in 2004, CIHE dismissed HSH’s application for candidacy. In 2005, the mission was revised to include the original Guiding Principles of the previously accredited programmes.

**Questions remaining:** It is likely that a discussion about the long term vision and strategy for the school took place in the meeting with the owner, but strategy or management are not elements which are explicitly noted for review in the NEASC Guidelines or stated on the visit agenda. It would seem, however, that changes to the mission statement may be a reflection of a shift in vision which could significantly affect the future of a school, particularly when it is a single proprietorship. In this instance,

reassurance that the owner has a vested long-term interest in the school would engender a greater sense of accountability to all HSH stakeholders. Given the widespread mergers and acquisitions which beset Swiss hotel schools, it is not beyond imagination that the school could rapidly change hands again. Another factor important in determining values of a school would be the culture of the organisation. In the case of HSH, there was a continual dissolution of the old culture under the school founder and the onset of the new culture as a “subsidiary” within the bigger SPSA system. This culture erosion led to an aggravated sense of uncertainty. Many staff members were ambiguous about their relationship or loyalty to the school. Due to strategic and structural realignment, it could be argued that the subsequent lack of a coherent organisational culture may inhibit the school in meeting its mission and endanger quality, both assurance and improvement.

**Recommendations:** Although the mission may be broadly consistent with HSH’s current activities, both the vision and culture of the organisation could be taken into consideration. On the other hand, the peer review was very effective in pointing out the lack of focus on the educational goals of the school.

## ***2. Planning and Assessment***

**Intended purpose:** The school must be able to demonstrate systematic planning and record its performance towards set school goals and procedures. This Standard requires schools to identify and develop processes that operationalise their institutional purpose and to relate them to key performance measurements. Tracking performance ensures that schools regulate their activities and that they stay the course or alter it as behoves the school.

**Results of the visit:** NEASC does ensure that continuous improvement can happen if a school integrates planning and assessment procedures. The visitors were able to identify that the current data gathered betrayed some disconnects with some of the school processes. Actually the data gathered were not correlated to NEASC Standards. The fact that some of the data accounted for some of the NEASC requested outcomes was a happy coincidence, since the data collection strategy and methods were designed by SPSA to monitor the holding company’s value chain itemised under Table 6. They were developed by SPSA for ISO certification, which HSH claimed was its next goal during the ASEH



reaccreditation in 2003. The advice from NEASC was for the school to identify key performance indicators for the remaining school processes to substantiate its autonomy. Most urgently Human Resources and Governing Board need to be integrated into assessments. It was noted that the staff and faculty who had bonded together as the 'HSH entity' to formulate the Planning and Assessment Framework were questioning their autonomy after the accreditation visit. The NEASC advice here is particularly relevant, because it seems that despite all the data gathering which takes place, data does not get converted into knowledge to inform practices, corrective actions or resource allocation effectively. We see some examples of this later as I turn to the discussion on "Facilities" below.

**Questions remaining:** The current planning and assessment model fails to look at the HSH system holistically and autonomously. Measuring separate areas of competence, which in real life overlap, could encourage individual or departmental achievement to take precedence where cross-functional activities would more effectively improve quality. At HSH, the metamorphosis from a randomly managed one-man show to a technologically refined management system was taking place. Of course, the new initiatives were not without their own challenges: a HSH database management system was being added onto a pre-existing SPSA system architecture, but such design overlay may not make good sense. A system which integrates a portfolio of disparate schools would typically require redesign and new generic architecture, since the schools do not share a common platform. Exacerbating the situation is that, due to staff changes at the programmer and IT Manager levels, coding and debugging became labyrinthine - to the extent that new IT staff members were no longer sure what they have managed to decipher or recode. Undoubtedly, the quest for technocratic control is ubiquitous and such problems plague many complex organisations. For any school that wishes to stay abreast in the globalisation of education, some extent of commodification and its attendant headaches cannot be avoided. To conclude, planning and assessment is essential, but difficult to implement due to the complexity of systems architectures when an organisational structure is in transition, compounded by rapid technological developments and the pressures of global competition.

**Recommendations:** None, unless the quality assurance paradigm were to look at the means rather than the ends. In this case, the assessment would change entirely to monitor horizontal value-adding processes rather than outcomes, results or key performance indicators. In this scenario, the outputs are defined and the processes measured, as with ISO.

### **3. Governance**

**Intended purpose:** Particularly important for accountability, there must be a mechanism for corporate governance which gives voice to all stakeholders of the school. During the reaccreditation visit, peer reviewers were exceptionally busy meeting with all constituents of the school, sometimes in a formal interview setting and sometimes in a very casual chat in the corridors, to get a sense of representation that the constituents felt.

**Results of the visit:** At the Opening Dinner, two of the Governing Board members were present who were informally engaged in conversation about general governance practices and the performance of the school. Due to HSH's recent developments, the Governing Board is nascent. The previous one was disbanded. Aware of this, the peer reviewers focused on reviewing the statutes. The visitors pointed out that a 'conflict of interest' clause should be added to the statutes as a matter of good practice.

**Questions remaining:** In the future, NEASC expects to see measurements of effectiveness of the Governing Board itself. This will prove to be an interesting challenge since the influence of the school governing board is next to nil, and the legal executive board is certainly not going to allow anyone, staff, students and least of all, external accreditors to meddle in their affairs. The relationship is very different than what is expected by Americans under corporate governance, just as the Swiss legal system and the Swiss accounting system are very different. In Switzerland, secrecy and reserve are valued whereas in America, transparency and forthrightness prevail. Thus a governing board may be a group of extremely impressive personalities who have no clout in terms of school accountability.

**Recommendations:** To "instill a culture of governance processes" within HSH as per point 3.1 of Table 5 of the NEASC exit interview is moot due to the external environment, the legal infrastructure and the Swiss culture.

#### **4. Finance**

**Intended purpose:** The school must be financially viable for the long-term. Probably if NEASC were to accredit a public American school, there may be other mechanisms to guide schools in setting policies and budgets. For international, profit driven schools, there are no guidelines pertaining to acceptable financial practices or policies. NEASC gives no benchmarks or guidelines for resource allocation. It limits itself to admonishing any redirecting of resources away from educational programmes.

**Results of the visit:** The visiting team established that the budget process was formative, not summative, and that no one other than the owner was involved. They also noted that all the financial statements and budgets combined the diploma and degree programmes, so that it was impossible to determine either the performance or the allocations dedicated to the diploma programmes undergoing accreditation with NEASC. They requested and received a quick breakdown of a few figures separating the diploma from the degree programmes for the current semester.

**Questions remaining:** Any financial review conducted could only be an isolated, vertical analysis and rather hypothetical at best, given that audited financial statements were available up to 2005 only and on a combined basis. Since 2006 was still in process, all figures submitted for 2006 were pro forma. The formative nature of budgets and gaps in the financial information (such as the correlation between student statistics and budgets) should raise scepticism. NEASC visitors had also noted that revenues generated budget surpluses, but they could not determine whether HSH surpluses were redirected to the degree program or even other SPSA concerns. There was not enough transparency to determine if finance does support quality with effective appropriation within HSH or SPSA. Theoretically, separating schools financially is antithetical to the owner's goal of having a portfolio of schools to create synergies. Simply put, he will leverage one school against another to maximise his own wealth.

**Recommendations:** Identify templates for financial statements that apply to international for-profit schools which are otherwise not required to produce financial information. Perhaps requiring interim financial reports, as demanded of other types of businesses, could be considered.

## **5. Faculty**

**Intended purpose:** Well qualified faculty indicate a level of quality of instruction.

**Results of the visit:** NEASC was thorough in reviewing the qualifications of the faculty and the personnel provisions. I would have to add that, above and beyond qualifications, faculty motivation adds a great deal to the quality of instruction offered at a school. Despite the fact that centralisation and decentralisation can account for some of the staff turnover, it was obvious that staff were not being recognised and promoted in any systematic manner. This does receive a mention in the visitors' feedback.

**Questions remaining:** The staff offices were still overcrowded and the staff were still without a staff room or clerical support despite their relatively heavy teaching load. This has been the case since 1994 when HSH first applied for candidacy and was reported again to the Commission in 2007. The prolonged lack of improvement in this area left staff to wonder how much influence NEASC really has on the owner(s). In addition, the faculty felt that there was almost no avenue for them to communicate with NEASC other than random interviews. In HSH, faculty teams were involved in writing the Self-Study Report, but there was suspicion that top management will censor any undesirable text. In the faculty task team meetings, it was abundantly clear that faculty wanted to bring attention to the fact that they had not been receiving inflation-indexed salary adjustments let alone raises. On the other hand, this point was not mentioned in the Self-Study nor was it brought into the legal domain for fear of reprisal.

**Recommendations:** NEASC could require uncensored reports to be sent directly from the constituents themselves: owner, faculty, students, administration, and so on. At the risk of receiving unjustified complaints from some rancorous staff, the probability of having real problems illuminated by the people who must deal with them outweighs the potential discomforts of such a process. If a school can be trusted to know its mission, then its constituents can probably be trusted to prioritise their issues. If reports are too divergent, it would be a clear signal to the visiting team of areas which must be investigated. Further, information could be requested about exact HR practices and statutory regulations with the intention to situate them in the greater context of the Swiss

labour market. This gives the assessment something “objective” to work from if staff wish to contest the owner’s policies and practices.

## **6.     *Students***

**Intended purpose:** The purpose of this Standard is to ensure service to the students and to measure outputs in terms of student achievements and placements. It was necessary to provide statistics of achievements: qualifications granted, retention, placements, and so forth.

**Results of the visit:** The lack of a Leisure Manager after Mr. Bonivard’s departure and a student counsellor were noted by the visiting team. These factors are reflected in the alarming drop in satisfaction rates during this time for “Leisure Activities” (from 85% to 52%) and “Student Care” (from 67% to 61%) in Table 6, Student Satisfaction Survey Results. Repercussions on student care because of other staff turnover were not mentioned by NEASC. The most critical of these was the handover of the SPC and HSHAA by SPSA to the school internship office. Mr. Miller who was responsible for SPC and HSHAA left in the downsizing torrent, which accompanied the decentralisation of SPSA. The staff and students were informed that SPC was being devolved and graduate placements were now the responsibility of the Internship Coordinators. The effect of the changes can be noted in the simultaneous fall in ratings for both “Internship Office” (69.5% to 55%) and “SPC” (87.3% to 78%) under “Fall 05”. Shortage of hands on deck and the simultaneous increase in tasks assigned to this office eventually also stifled all communications with alumni. Similar repercussions during the Self-Study due to loss of other staff were incurred, but without enumerating, it is not farfetched to say that staff turnover (high) and student satisfaction (low) at HSH are negatively correlated. Perhaps the alumni would react the same way to some items if they were asked.

**Questions remaining:** Not long after the accreditation visit, the HSHAA President wrote a complaint email to the school about the complete lack of response of HSH to alumni queries. Areas of assessment of the SPSA Student Satisfaction Survey imply that whatever students do after they leave school is not important enough to be measured: alumni do not figure into the value chain. Neither are any surveys conducted with them after their departure. Also neglected in the process are areas which pertain to the external

environment of the school i.e. the international markets. The school's relationship with agents and tracking of recruitment activities could be subjected to more scrutiny. NEASC did not question how the markets, agents and the school cooperate to fill school capacity. The visiting team Chair did receive a sample copy of an agent's contract and was informed that agents' seminars took place on a yearly basis. Some decisive areas, such as the choice of agents, regulations applicable to relationships or contracts with agents, the type and method of remuneration to agents, recruitment practices of agents themselves amongst other items, received little or no attention. Probably because it is not acceptable to use agents for recruitment in American schools, no stipulations exist in the Standards.

**Recommendations:** It would be useful to incorporate additional requirements concerning agents in accredited international for-profit schools. For most of these schools, the dependency is great. The demographics of the student body can often be dictated by the behaviour of heavyweight agents who produce significant enrolments as well as significant demands. Good practices need to be shared about marketing strategies and recruitment practices. These must fall in line with the school mission and deserve to be highlighted as ingredients in school quality. As discussed in the literature review, input is an essential determinant of quality. NEASC could extend its assessment even prior to 'enrolment' to include 'sales and marketing'.

## **7. *Programs of Study***

**Intended purpose:** The program offerings of the school and its pedagogical philosophy are considered integral to school quality. Accreditation does not require a school to identify its curriculum approach, e.g. humanist, progressivist, utilitarian and so forth. At the CTCI level, NEASC does not stipulate any content or curriculum design. There is no designation for number of credit hours to be allocated to vocational subjects, management theory or general education to ensure breadth of higher education. All that a technical school knows is that it must offer these components at an "appropriate level" (Appendix 1, "Recommendations...December 5, 1996").

**Results of the visit:** The visiting team was satisfied to know that HSH takes the traditional Swiss approach to pedagogy with the alternating theoretical and internship semesters that comprise a higher diploma program. With regards to the theoretical

modules, the curriculum has not significantly changed over the past couple of decades. This is asynchronous given the rapidly changing industry environment. They could have also noted that two practical, classical hotel diploma subjects, kitchen and housekeeping, were dropped after the purchase by SPSA. Certainly, kitchen and housekeeping have not disappeared from the hotel industry. Many alumni wrote to the new owner to express their disapproval and explain that the knowledge is critical to a real-life hotel management position. Negative feedback from alumni is not heeded nor saved, so NEASC could not possibly know this.

**Questions remaining:** Should reinvestment into sauna, gym, jacuzzi, etc. take precedence over a demonstration kitchen or a showcase housekeeping bedroom? Is space truly a constraint when a hotel building was bought during the same year to house more students? Is the mission of the school really that clear? As for the alternate semesters of practical training, the types of internships offered have shifted. With some digging about, this information could have surfaced. A list of internship placements before the purchase of HSH and a list of the internship placements after the purchase of HSH would have exposed the trend. The shift in the HSH academic calendar, which used to finish the fall semester before Christmas holidays was refitted to the SPSA calendar to finish mid-January. One consequence was a loss of internship opportunities at winter resorts (many in the Swiss Alps), since hotels are already fully staffed before the vacation season. The academic calendar is no longer in rhythm with industrial placement supply and demand. The internships had to be replaced by small ethnic restaurants, typically Asian or fast food, which have mushroomed in Swiss towns. Unfortunately, such restaurants are neither typically Swiss nor do they employ the classical training that the students learn in school as part of their compulsory internship preparation. On the other hand, the visiting team was concerned with how the programme performs with industry placement after graduation. It was finally noted under this Standard that no tracking after initial placements of alumni was taking place. It was further noted under this section that faculty turnover may affect quality. Why these aspects were mentioned under Programs of Study rather than the previous Standards concerning Students and Faculty is unclear.

**Recommendations:** Survey results in Table 7 of the case study, Module Evaluations, bespeak of growing student discontentment as the years of the diploma program progress.

The results drop year by year with a total decrease of 12% to 13% in satisfaction from the overall year one averages to the overall year three averages. This trend is baffling and certainly merits greater research.

## **8.     *Facilities***

**Intended purpose:** The school must be able to demonstrate that it has the appropriate facilities to achieve its mission and deliver the services that it claims to do.

**Results of the visit:** All constituents agree that the renovations at HSH were impressive. The facilities cannot be faulted. The problem lays in overselling the school to oversubscribe capacity. If most student visas come through, which has generally been the case, the school does not have enough bedrooms, classrooms, teachers, work spaces, and learning resources to deliver quality. At this point, most outsiders smile and say what a wonderful problem this is for a school to have. Teachers are unhappily cramped into offices with too few computers and printers. The students are not happy with their room assignments, and canteen food prepared for 300 is not the same as for 200. Perhaps food is a common complaint in most schools, but should this be a persistent complaint in a four/five-star boutique hotel school? If we were to apply the cut-off score at 70% as we do for student marks, in both of these areas, “Accommodations” and “Food and Beverage” (Table 6), the school would fail.

**Questions remaining:** Deployment of human resources throughout the Operations Department could be investigated. A new Operations Manager was appointed twice and the IT Manager position changed hands four times over this period. There was a reduction in the availability of the Front Office Manager who was partially reassigned to Marketing and replaced by a junior receptionist. One could point the finger and blame individuals. One could accuse the Operations Manager No. 1 of being more concerned about generating revenue from F&B outlets than tight inventory control. One could accuse IT Manager No. 2 of being more occupied with the junior receptionist than the school computers. But would that not ultimately reflect on corporate hiring and appraisal practices?

**Recommendations:** Staff turnover must be factored into this Standard also. Smooth operations require right personnel deployed in the right manner, in the right quantity, at



the right time to ensure that facilities usage is optimised. There is no use in having a beautiful building with insufficient maintenance staff or a designer buffet with insufficient chefs. Conversely, if space and resources are limited, then consideration can be given to cap the number of students accepted for the semester.

## **9. *Library and Information Resources***

**Intended purpose:** The library and information resources must support the learning environment and enhance educational opportunities in the school.

**Results of the visit:** Although there are no benchmarks about the size and nature of a library collection for this academic level or a technical school, the visiting team was able to determine that the library and information resources were insufficient. This has been an enduring observation over the years (see Appendices). It has been argued by SPSA that the LRC is supplemented by electronic libraries. While this is true, there is an enormous problem with the lack of a formal library budget and lack of investment into information technology allowing access to the e-libraries. One cannot avoid wondering if the remuneration for the IT Manager is not in line with the work that is required. Student satisfaction with “IT” is the lowest of all value chain areas with an overall average satisfaction rating of 56% over the last three years. This is not a presidential election poll. This is a situation where every single student requires fast and easy access to computers and the Internet. Even “Food and Beverage” scored higher at 61%. With such a diverse student body (please recall: alumni chapters in over 80 countries), one might anticipate more complaints about food than Internet speed. Is that not telling?

**Questions remaining:** The case study reports a nearly annual relocation of the LRC. NEASC did not question why, with each of their visits in 2003, 2004 and 2006, the library was in a new location. Such items may escape notice, because each visiting team is a completely new set of peer reviewers. Such observations are not in their collective memory. As attrition continues within the CTCL, there will be even less continuity.

**Recommendations:** If possible, there could always be one peer reviewer to bridge between two visits as is the practice used by AQIP. In the AQIP system, the leader of a previous visit must serve as an evaluator on a subsequent visit to the same institution.

## ***10. Publications***

**Intended purpose:** The accreditation agency attempts to discern the integrity of the school in the way it presents itself to the general public and to establish honest and accurate reporting of its activities.

**Results of the visit:** The visiting team noted that the mission statement was not printed in the brochure. Honestly, that is because of the major disconnect between HSH policies and SPSA practices. Mr. Jack is officially in charge of all SPSA publications review, but he was called away to oversee validations at other SPSA schools during the reaccreditation Self-Study period. Mr. George was hired by HSH to replace Mr. Jack's functions as far as report editing goes, but he did not have other SPSA duties. Therefore, the delineation of duties in the formal organisational structure between HSH and SPSA made it possible for Mr. Jack's SPSA job tasks to fall between the cracks. Even if organisational structure or bureaucratic rigidity were not the issues, NEASC information policy and procedures about publications are also not located in time. This implies that undue lag time until communications get through to destinations could potentially turn outdated information into misleading publications. Further, as mentioned under the Students Standard above, there could be guidelines for oversight of communications with agents. Problems could arise from, but are not limited to, translations of school publications, incomplete dissemination of information due to marketing representatives' travel schedules and even their ability to negotiate time zones. Even if all parties' intentions are honest, asymmetric and inaccurate information dispersion can happen. For these reasons, HSH created the Welcome Website and the SNS to enable real-time communications. As long as one is in cyberspace, one can be instantaneously up-to-date.

**Questions remaining:** So much for theory, because here again, the issue cannot be divorced from IT capabilities.

**Recommendations:** The schools could be asked to provide a schedule of document publications. NEASC may wish to integrate guidelines for the use of information technology in institutional communications.

### **The validity, reliability and relevance of the accreditation process**

As I disentangle issues of validity, reliability and relevance of the accreditation process, I first divide the process into two phases: self-evaluation and peer review. The discussion on validity, reliability and relevance of the self-evaluation phase is further broken down into individual, institutional and systemic perspectives of quality. In a sense, it is a matrix, which correlates the data analysis of the Standards above to the discussions from the literature review.

## **C. Self-Evaluation**

### ***1. Individual***

Validity and reliability are tied into the way quality is measured. First, a systems oriented approach is concerned with inputs, outputs and the processes in between. Second, quality requires a long-term perspective. We begin by looking at the issue of appropriate resource allocation. The way a school allocates resources can be classified into three methods: Input-based, output-based and needs-based allocation. On what basis should resources be allocated in a school? Should resource allocation be input-based on the cost of mounting a programme or should it be output-based on the cost to achieve the desired results? This requires an estimation of student abilities, learning outcomes, outcome levels, differentials in needs and capabilities and, not in the least, a consideration of the professional development of teachers to ensure informed teaching practice. If the measure is input-based, the challenge is enormous in terms of measuring student abilities at HSH given the extremely wide diversity of the student body. The same applies to dedicating funds for staff development at HSH. If the measure is output-based, then the problem is how student related outcomes should be measured. From the literature review, we are aware of the difficulties of customer definitions of quality. Therefore, it may be preferable to use outputs by defining and comparing learning outcomes and competencies. Then the product becomes more significant than the process, but the choice of a Swiss hotel school is made based on the fact, that it is precisely the process which determines the product. That is to say, that the traditional didactic approach used in the HSH pedagogy is the product that international students aim to acquire in earning their Swiss diplomas. With the multitude of educational systems available, there will

naturally be a multitude of processes, and they must inevitably play a role in the overall quality of education and the institution. In the case of HSH, how the competencies are earned, by a mix of formal education and experiential learning through work experience, is an important element of quality. Finally, the needs-based approach has a shorter perspective and thus may compromise quality. Here goals and resource allocation would be determined per student according to the level or year, to diploma or degree in the case of HSH, to supplement the educational needs of students and to address site needs such as plant repairs. This is clearly the approach used by HSH as stated in the case study Finance Standard section. The owner claims that the budgets are allocated on per capita basis, which unequivocally begets a short-term perspective of fiscal planning and, by default, of strategic planning. From the discussion above about the same Standard, the secrecy around strategic planning and the paucity of financial information along with the owner's emphasis on plant enhancements exacerbate issues of validity both of quality at HSH and in the quality assurance process of accreditation.

## ***2. Institutional***

In reviewing the Standards, it can be seen that the accreditation process is conducive to seeing only bits and pieces of the school, firstly due to the way Standards are defined and secondly due to the ability of a school to present itself. The Self-Study Report, to a certain extent, comports much in line with criticisms expressed by Romney, Bogen and Micek (2000). Their view interweaves the goal-setting processes of a school with the resource allocations as determinants of school quality control, and certainly, the disadvantages associated with these functions are numerous. Let us review each of the difficulties they bring up in terms of self-evaluations.

### **(a) misapplication of measurement tools; measurements that do not fit the context**

This matter was brought up by the NEASC visitors, when they noticed disconnects between performance indicators and the Planning and Assessment Framework. As discussed above under Standard 2, the misalignment persists and creates doubts about HSH autonomy amongst staff and faculty.

**(b) non-measurable aspects; attempts to quantify soft elements such as the fit to a mission statement**

There were many elements which were non-quantifiable according to the Standards. Here I limit the discussion to the major non-measurable aspect of the Self-Study, in particular, the philosophy of those participating in the process. The ambiguity of the mission statement according to the interpretations by HSH's various constituents generated conflict about the goals of reaccreditation. The goal of the owner was to safeguard the attractiveness of the school in the markets as well as wealth maximisation. The goal of the faculty was to access better classroom technologies, and the goal of the student body was greater recognition for their living and learning needs. Even if all these goals were measurable, they are not compatible. For any valid claim that quality is taking place, there must be a balance of individual and systemic requirements as discussed in the literature review section on accountability and continuous improvement.

**(c) joint outcomes measurement**

In the case of HSH, figures or data concerning only HSH are impossible to extricate from the statistics collected by SPSA when it was centralised and during its transitioning period into a portfolio of autonomous schools. The same can be inferred of the financial statements, firstly because of the legal status of SPSA and secondly because no separate accounting or budgeting procedures were in place. This was explained under the Finance Standard in the case study and in the analysis above. Somewhat tangential but also relevant to muddled measurements, is the case of facilities. It would be inappropriate to say that quality did not exist considering everyone's satisfaction with the newly renovated school. It would be just as inappropriate to claim that it does exist when all the student complaints about room and board are taken into account. While these are contradicting results, I mention them because of the way Standards tend to clump several issues together.

**(d) difficulty in establishing the unit of analysis, e.g. whether by discipline or department**

This is exemplified by the way faculty qualifications, student services, and programmes of study seem to overlap in the Standards. The confusion is highlighted in the data analysis above by the NEASC observations about faculty turnover and alumni placements under Standard 7, Programs of Study, rather than under Faculty or Students.

**(e) timelines of assessment; the institutional life stage and the style of performance assessment may be asynchronous**

It is highly probable that the decentralisation that was taking place made it difficult, if not improbable, for the NEASC visitors to notice the consequences of certain shifts in strategy and structure. Theoretically, the structural modifications were positive as they assured autonomy for HSH, but practically they resulted in mayhem as not all resources, human and capital, were in place to make the modifications functional. This is illustrated by the handover of SPC and the absolute lack of communications with alumni described in Standard 6 above. The case study shows that a HSHAA website and contacts existed, but no HSH personnel or budget to support it. Institutional life stage either confused or convinced outsiders that the right things were happening.

**(f) staff capabilities that vary in analytical skills or in sensitivity to institutional issues**

Certain issues were not exposed due to the micropolitical climate of the school; hesitations by the faculty to honestly express their concerns were mentioned under Standard 5. The real ethical dilemma for staff was either to be honest about their growing discontentment concerning salaries and professional development or to endanger his/her job. With select information withheld, certain incidents will simply escape the NEASC visitors' attention. Even when information is not withheld, it is impossible that some elements will not escape attention as demonstrated in the case study by the repeated displacement of the school library. Particularly in the case of HSH, the Self-Study limped along for a good while due to limited or changing human resources. Several task teams had undergone changing group formations. Even the reassignment of Mr. Jack. the

reaccreditation Steering Committee Co-Chair, was a major impediment to completing the Self-Study Report on time. This was due to competition for resources by another SPSA school, but it was not mentioned in the Self-Study, simply because there is no request for information about disruptions to the self-evaluation process. Other staff turnover incidents received minimal mention in the acknowledgements section preceding the Self-Study Report and were underplayed during the visit.

The HSH self-evaluation did indicate many of the difficulties listed by Romney, Bogan and Micek and as such, validity and reliability concerning institutional quality assurance procedures used by NEASC in the reaccreditation process are debatable.

### **3.     *Systemic***

From the European perspective, with reference to the ENQA, quality evaluations should not be based on inputs, curricula, programmes, length of study in the provision of education or on the value-adding links, but instead on outputs which are essential for transfers between schools in different nations and for employment in other countries. This is the underlying goal of the Bologna and Copenhagen Processes and gives rise to query whether a Swiss school functioning in the same geographic region would not take this into account as it moves towards international recognition. The same can be said about the way NEASC accredits international schools in Europe that provide curriculum with English as the medium of instruction. To heighten validity and reliability, NEASC may wish to interchange accreditation practices with European counterparts, for example with the ENQA and the QAA. Though the latter emerged later and have based some of the quality assurance procedures on the American accreditation model, they have also modified the process to make it more relevant for an international framework. Further, there is a greater emphasis on external inspection or audits than in American regional accreditation, which is more reassuring to international markets. I reiterate that the results of OECD studies on comparative learning outcomes and cross-cultural competencies led to the conclusion that there is a need for supranational assessment and accreditation. As it stands, reliability in quality assurance is a crucial issue, which must be wrestled with at both the national and international levels. This applies not only to international schools,

but also to transnational programmes. Considering the explosion of such programmes, the next generation transnational learners need another type and level of quality assurance when a programme no longer belongs to a particular school, system or a country. On a grander scale, education is becoming increasingly globalised and this inevitably undermines relevance of any local quality recognition regimen including NEASC. A final note on relevance, and this applies to all accreditation systems not only NEASC, is that very few have embraced institutional Internet communications as an aspect of school quality. This is not about e-learning, but about the changing communication channels which predominate information access today.

#### **D. Peer Evaluation**

Quality assurance is both a qualitative and quantitative process. Where peer evaluation is concerned, it is subject to the same criticisms that any qualitative approach would encounter about validity, reliability and relevance. The choice of the evaluators, their relative influence, the nature of evaluation, and their observations and behaviour during the accreditation process are all aspects to be scrutinised. To further the discussion, I compare the NEASC exit interview with the HSH staff' and students' analyses. It makes evident that subjectivity is less rampant if evaluators are not school constituents, and hence peer review is an effective element of a quality assurance process.

The list provided in the case study shows that the choice of team members was determined by the fact that many CTCI members have moved to the Higher Education level. Therefore, the average age of the visiting group to HSH was rather advanced. This was an advantage, because the evaluators embodied many years of experience. While everyone can be subjective, certainly such a team would make more valid and reliable judgements about institutional processes and practices based on their extensive experience. Of the team of five evaluators and one support staff, two evaluators were retired presidents. Some visiting teams have mid- to upper level school administrators, but rarely presidents. Can we assume that having at least two presidents on board would boost the evaluation to a more complete, holographic quality review of HSH? Three members either were currently on the Commission or were previously on the



Commission, which meant that the impressions of the visiting team were highly influential. The fourth member of the Commission directorate was the accompanying support staff, the Associate Director of NEASC. Since the process requires the Commission to vote on the final report of the visiting team and since members of the visiting team were also members of the Commission, they probably would not vote against themselves. Pressure was on for HSH to really perform during the decennial visit. How that pressure affects the reliability of a quality assurance process is an interesting question, because it is not everyday behaviour that the visitors will observe. The Chair of the visiting team to HSH was also a former President of the CTCI Commission. Compared to other visiting teams that are made up of less influential personalities, if the Chair's advice was followed to the letter, the likelihood of a successful reaccreditation was very high. Conversely, HSH history with NEASC gave no reason to doubt a successful reaccreditation, and the efforts made towards during the Self-Study phase were greeted positively. Neither side had any need to be concerned. Finally, a couple of the visiting team members had direct experience with hospitality, in culinary and tourism. The team collectively represented schools as small as 180 to as many as several thousand students. In any case, the fact that there were at least five evaluators indicates more validity and reliability than a single evaluator.

The observations and recommendations given during the exit interview were in line with the school's expectations and more. The team was very perspicacious and had uncovered items that had eluded the Steering Committee and the task teams. The most significant observation was the fact that no educational purpose was stated in the mission statement, but others including the disconnects between KPI's and institutional processes, a further education page missing in the HSHAA website, lightweight shelving in the library, and the unlocked confidential medical records on the nurse's desk were surprising. What was not surprising to HSH were the lack of a governance culture, lack of SPC processes, lack of a dedicated student counsellor and that the mission statement was not printed in the brochure. From the school perspective, the NEASC evaluators had uncovered all and more of the problem areas than anticipated. The peer review process as enacted by the NEASC evaluators left little room to manipulate anything if that were a goal of an

institution. They verified all data submitted, they crosschecked with staff and students. they triangulated their daily research amongst themselves each evening and were relentless in hunting down information. From the moment they hit ground (Opening Dinner) until the final morning exit interview, they remained focused on their mission for the trip. As stated in the case study, they worked non-stop, which literally means that none of them could be spotted having a cigarette or a coffee break. If anything, their behaviour completely cured HSH staff from any prejudices about age, jet lag and rubber-stamped accreditations. In terms of validity and reliability in conjunction to the Self-Study, a peer review conducted in this highly disciplined manner is a very sound way to triangulate. Despite the efforts by the owner to entertain the visitors with impressive Swiss hospitality, he could hold no sway. Going from a gastronomic dinner, to a touristic evening to the final tour of the other beautiful palace style SPSA school, the team remained friendly but firm. This was demonstrated by their refusal to visit the other SPSA school premises. The NEASC visit protocol was consistently applied and every morning, the visitors looked like an academic SWAT team again. The team completely separated professional from social functions, and so their observations are highly credible and reliable. Finally, probably since all team members had achieved significant career success, there was absolutely no power play observable in their interactions which could affect the reliability of the process.

### **E. Staff and Students' Strengths and Weaknesses Analysis**

Included in the case study were two analyses conducted by Mr. George as a way of triangulating internal perceptions of the NEASC Standards. It is evident from the sparse and rather superficial comments that the staff and students were obviously not interested in details. Of course, they did not have the same amount of time to make the observations. On the other hand, they lived or worked in the building constantly, so it is somewhat baffling how minimal the minutes of these meetings are. However, I do note a couple of items from them. Most of the observations that the staff and students make were taken into account by the NEASC team, but their opinions diverge. For instance, the staff found the resources in the library to be a strength, the students found the library to be spacious, and the evaluators found that the library was too small and insufficient.

Some items were simply perplexing: why would staff put “room” as a weakness for publications and students put “printer” as a weakness for faculty? On the other hand, most other comments are fairly coherent, so the analyses are not rejected entirely, but seem to be of limited use to triangulate against NEASC who are light years ahead in such an exercise. Other biases observable are the self-perceptions of staff and students. It is interesting to note that “number of students” is noted on opposite sides of the analyses: The staff consider it a strength in terms of financial resources; whereas, the students see it as a concern in terms of institutional planning and assessment. It is also interesting that the staff note “Network of Faculty” as a strength while the students mention “Student Committee” as a strength. Neither mentions the other as strengths in their analysis, but both mention the diversity or multicultural nature of the school to be a strong point.

As for Programs of Study, the staff mention “knowledge and language”; whereas, the students are concerned with book delivery and course feedback. Here the NEASC evaluators mention faculty turnover and placement tracking. Perhaps the answer to the riddle why these observations are mentioned under Standard 7 is that the evaluators view the programmes as the overarching purpose of the school rather than courses they have to give (faculty) or courses they have to take (students). In the evaluators’ world view where the educational purpose and programmes determine quality, then faculty and students are subservient to the achievements of the academic mission. There must be some reason why five experienced academicians collaboratively writing the visit report decided to classify this way. What would be more fitting than an academic orientation? It is also evident that the “concerns” in both of the analyses tend to focus on the need for resources for themselves. Thus the staff point out training and high turnover of staff while the students point out more enforcement of English. After all, they are international students who came to HSH for hospitality education in English. Again, they both look to their own needs. The staff mention no concerns for students, while the students mention “printer” for the staff; I suspect that students expect teachers to go print things for classes. Many of the other concerns are left blank by both staff and students, which as both Dean and researcher, I find incredible. A final observation here relative to NEASC priorities is that both staff and students are somewhat off the topic when it comes to the “mission”. When

viewed against the evaluation team feedback, it is undeniable that the observations made by the internal constituents are highly socio-centric and skewed, primarily towards their own benefit. If nothing else, this most uncontestedly reinforces the need for external experts regardless of whether they conduct a peer review, an audit or an inspection. From this, I can state with complete confidence that conducting a peer review is valid, reliable and relevant to the extent that conducting no peer review cannot be valid, reliable or relevant.

#### **F. Does the Accreditation Agency Enact What It Purports to Do?**

One way to locate the effectiveness of the agency is to compare it to other quality assurance agencies and be mindful of rival theories underpinning other quality assurance approaches. For this purpose, I turn to the ASEH accreditation and to the ISO certification process, both of which were being effectuated at HSH. I compare these to that of NEASC to expose the advantages and disadvantages of the different quality assurance approaches.

Some of the shortfalls that were uncovered in sifting through the areas of remit above revolved around the fact that NEASC is accrediting a private Swiss hotel school. In the process, it neglected areas such as marketing, agents and internships. Because ASEH only accredits Swiss hotel schools, it is mandated to address the specific needs of these private schools. There are separate “handbooks” for agents and internships including a template internship contract. An ASEH “handbook” is really a two page appendix to their rules governing membership, but regardless of their nomenclature, the guidelines do exist. The aim of ASEH is to protect the image of Swiss hotel schools abroad and to counter unfair marketing practices of so-called “illegal” schools. Since anyone can open a private school in Switzerland, ASEH is an attempt by serious private hotel schools to protect themselves against the riff-raff hotel schools that just come and go. The ASEH process requires no self-evaluation as such. There are over 100 “Criteria standards” covering 19 different areas of the school (counted 0 to 18) that must be substantiated through evidence provided to ASEH auditors when they visit. I will not go into them in detail but point out the three major ways they diverge substantially from the NEASC accreditation. First,

education is broken down into “training” and “practical training”, reflecting a strict trade bias. Second, some criteria are meticulously defined. They attempt to be specific and prescriptive rather than broad and all embracing. Third, “Subjective Criteria” such as “Reputation”, “Management”, “Care of students”, and “Career possibilities” must be accounted for. “Subjective Criteria” are preoccupied with the way the school is perceived by the students, parents, the press and other countries. Thus the ASEH definition of quality is subjugated to various individuals’ perspectives on quality, and the disadvantage is the heavy-handed role which consumers play in this regard. Another aspect about the ASEH quality assurance process is that the external audit is conducted by two “experts”. In the case of HSH reaccreditation in 2003, one expert was a retired Swiss Army officer. The other expert was Director of the Education Centre of the Swiss meat industry and was assigned by ASEH to oversee all ASEH audits. Given the background of the experts, the NEASC peer review approach appears more germane to assessing academic educational effectiveness. Finally, ASEH comprises of 12 members of which three belong to SPSA. At the HSH reaccreditation, ASEH recommended that the then newly established SPSA site, which housed SPSA partner universities’ degrees, be accredited through ASEH. It is a strange suggestion since the degrees were already either validated (UK) or accredited (US), so one wonders what jurisdiction ASEH has over degrees given through collaborative provisions of foreign universities. Their argument was that it not only serves sales and marketing needs, but is also necessary for the transparency and credibility of SPSA and ASEH (Appendix 5). It is plain to see that quality and accreditation are interpreted fundamentally differently by ASEH.

That was 2003, and now we look at 2007. Alongside the ASEH and NEASC accreditations, ISO certification was also taking place on and off at HSH throughout the same four year period. I relate the findings of the ISO internal audit report from 6 March 2007 (Appendix 6). Some audit results echo the findings in the Standards above and others were not noticed by NEASC. In brief, the auditor noted that:

1. HR: there are no performance indicators for HR processes
2. Operations: no formal supplier evaluations or procedures for purchases
3. IT: no inventory for IT material and equipment, no safe backup system

4. Admissions: no indicators to monitor the admissions process
5. Academic: database does not correspond to ISO process control
6. Library: cannot audit since moving
7. Internships: not audited.

Of the areas audited, he discovered 25 non-conformities of which 11 were major non-conformities and the rest minor. The auditor's conclusion was that the quality management system of HSH was "not able to demonstrate sufficient conformity with ISO standards and could not provide sufficient structure to support continuous improvement". Mr. Hirse, the internal auditor and SPSA Quality Control Manager, was involved with the NEASC Standard 6 task team, and the HSH Dean worked alongside Mr. Hirse to introduce ISO quality management processes to HSH. This collaboration and the parallel work on NEASC and ISO revealed that the two quality assurance approaches are inverted. In ISO, outputs are predefined and the processes are managed to ensure conformity; whereas with NEASC, the academic programmes are predefined and outputs measured. ISO and NEASC overlap on a few points, but significantly differ on the systems paradigm: ISO is oriented towards the external environment, and relationships with suppliers play a significant role in quality. In Tables 3 and 4, staff and students express how they are affected by the efficiency of delivery and maintenance of books, equipment, learning resources, printer and such. These spheres of activity are neglected by NEASC, because they do not have the same open systems vision of an organisation. By contrast, almost every recommendation under the Standards above implies a certain disregard for the relationship between the school and the outside world. This accentuates the social retraction in the NEASC approach as compared to that of EFQM mentioned earlier.

## **G. Methodological Issues**

To close the data analysis, I revisit some issues pertaining to the methodology applied. Determining whether accreditation assures quality could be researched via alternative methodologies, so how efficacious was the case study approach implemented here? Not surprisingly, obstacles were encountered along the way, which represented challenges and indicated certain methodological limitations. Could these be overcome with a tighter

research design? The reflections here flow in the reverse order of the Methodology Chapter. First I review some technical details of the case study method as they were applied. Then the benefits and limitations of the qualitative approach in HSH's turbulent internal environment are considered. A separate mention is given to the challenges exacerbated by the growing participant observation polemic during the research process. The final section consists of reflections on how to more effectively investigate and report on the same question and the lessons learned. Methodological issues constitute as significant a learning experience as that of educational quality management and assurance. The most fascinating part of the thesis was choosing the methodology and designing the research, because these decisions set the foundation for everything that follows. Without a clear, focused design, there is the danger of collecting too much and/or irrelevant data. Thus good information, analysis and learning about the research topic are engendered by good research design. Ironically drawing the blueprint for this research helped me become a better manager, because the process pushes the envelope: the research problem must be viewed from non-dogmatic angles, information sought is perhaps not easily available, and the inductive spiral can seem infinite. Skills of recognising unconscious assumptions, illusive appearances, and points to drill deeper are inevitably honed through a qualitative methodology.

First of all, the case study method still seems to be the most appropriate choice for the circumstances of the accreditation event, but the exact sub-questions and application of the methodology could be improved. When formulating the case study protocol, I was overly ambitious to cover all relevant data and did not ask optimal questions. Point 2 of the protocol, Data Sources and Collection Procedures, was very extensive and required an enormous amount of time. A good portion of the material collected was superfluous: although, some of it was extremely useful for indicating discrepancies between what was declared and what was enacted. As for questions, case study questions 4.1 and 4.2 could be rephrased. Question 4.1 to the accreditation task team participants, (a) before the event: 'How will earning the reaccreditation affect the school?' was not appropriate, because technically the participants cannot know this, and it bypasses the information required. Something like 'What do you expect of this accreditation to be a valid quality

assurance exercise?’ would be better aligned. When the question was posed as stated, it met with cynical retorts along the lines of “It’s for Schmidt’s marketing” or “Isn’t it another rubber stamp like ASEH?” Instead of revealing the participants’ conceptualisations of quality or quality assurance, it invited opinions which were better suited to a micro-political study. The question was distracting and dropped early in the investigations. Also question 4.2, to the individual case, (a) ‘Are there signs of quality improvement over the years that have been brought about as a result of being accredited?’ was not practical, because of the incessant turnover in the school. Although there were a few operations staff who had been with HSH for over a decade, they were not very aware of or did not care to know what accreditation was. Lastly for question 4.3 to distinguish patterns of findings, I had decided to use the CTCI Standards as generic categories. Another approach, if used for another isolated case, could be to start the research process with a questionnaire to each participant group: students, staff, board members and then code their responses to derive the categories. That could more effectively explore the school stakeholders’ conceptualisations of quality. The disadvantage would be that it would be more complicated with a multiple case study. Obviously using NEASC Standards as categories is more practical for replication with other case studies later. From this methodology, I learned the supreme importance of a well-established research agenda and the discipline to execute the case study protocol.

While the case study methodology stands relatively undisputed from this experience, there are benefits and limitations to the qualitative approach, especially in the HSH environment. Because of the fuzziness of qualitative data, research activities can feel uncomfortable within a rapidly changing organisational structure. Consequently it becomes difficult to state anything very clearly about anything. To a certain extent, this dynamic occurred to both the research and the accreditation. This tendency could be alleviated through a mixed methodology, which incorporates some performance metrics, structured quantitative reports, and separate school processes. In order to make some observations gel, some supporting metrics are unavoidable. The school’s own strategies and tactics, not just a global vision or mission statement, need to be explicitly articulated. Only then can relevant metrics, be they qualitative or quantitative, be devised to evaluate



quality; otherwise, it is impossible to see if any performance indicators make sense for either accountability or continuous improvement. The same applies to the lack of reference points due to changes in ownership, restructuring and turnover. Neither the research nor the accreditation could possibly generate a reasonably consistent horizontal analysis, particularly in terms of resource allocation. As confirmed in the literature review, prudent resource management is integral to any notion of quality. At HSH there was no transparency about resources. From the observations, there was unequivocally something wrong with the human resource management. Common sense tells us that, but for finer financial manoeuvres, detailed statements cannot be circumvented. A stricter, more structured quantitative approach would generate the necessary data to the benefit of a more piercing analysis. Also though the qualitative approach efficiently uncovers critical incidents, a disaggregation of processes could benefit the research. For instance, an incident that appears to be an operational failure may have human rather than mechanical origins. The causes may be the wrong team profile, misunderstood motivations or a breakdown in communications. So processes could be separated to develop a more accurate picture of school effectiveness; people/political processes and operational/technical processes combined create (anti-)synergy. In another case study, processes could be an alternative layer in the coding matrix.

Other benefits and limitations pertain to the participant observation aspect of qualitative methodology. I present here my “tortured, self-flagellating disquisition on the ethical and methodological difficulties of participant observation” as Kate Fox (2004) in her book, *Watching the English*. She went as a native to explore her own culture, and that is exactly what I did as a researcher in the school where I work. So the same litany of hermeneutic dangers belongs here; my position as dean in both the old and new HSH most likely coloured my interpretations. Admittedly, in the heat of the moment, I did not feel too detached when the new owner found the Self-Study Report insulting. I had to jot that down in the diary and wait until the feelings cleared, so I could place that bit of information in rational context. On the other hand, the accreditation team was impressed with the honesty and transparency of the Self-Study Report. That was also jotted down separately in the diary until later classification. Anything inciting an emotional reaction

went into the diary before it was sorted into a data set. Data without emotional content went directly into the separate category files. A major benefit of a research diary is that revisiting the entries can help build or shift mental constructs, so that some very productive induction can take place through this method. Case study interpretation is highly reflexive, but was I self-indulgent? Did I also avoid delicate "juicy" details of participant reactions in fear of an ethical minefield? At the risk of sounding impertinent, I agree with Ms. Fox that despite its limitations, "this rather uneasy combination of involvement and detachment is still the best method we have for exploring the complexities of human cultures..." Special other difficulties incurred by this research project were the changing personnel for cross-validations of observations and the absence and eventual departure of Mr. Jack in terms of triangulation. Eventually the case study analysis had to become much more document based than originally intended. This made me realise what a threat power shifts and micro-politics are to fieldwork. Not only does it impede data collection, but it is also difficult to remain neutral during times of war.

Finally if another research opportunity presented itself, what would I do differently to more effectively investigate and report on the same question? Perhaps other researchers suffered the same dilemma of being inundated with data, trying to cover all bases and trying to make sense out of too much material. The aspects where I would give more attention to are the culture and context of the school. In this thesis, culture and context were always assumed to influence quality, and they could be brought more to the foreground as counterpoints to quality standards. That would be a more harmonious orchestration of the quality themes. For improved reliability and consistency, a crucial precaution for future research would be to have a contingency plan and a mix of methodologies for an ambiguous research environment. Rather than being dependent on the school's own statistics, its samples and whims, researcher driven surveys or questionnaires would potentially generate better quality data. While the goal of this thesis was to avoid rigidity and allow emic landscapes to transpire, there were moments of frustration as qualitative data floated in entropy. The biggest problems encountered were:

- the changes of heart the owner had towards accreditation related projects (governing board, advisory board, resentment about mentions of the school before

purchase, taking comments about the restructuring as an affront to the holding company)

- the continuing loss of participants due to staff turnover (academic director, steering committee co-chair, co-editor, operations manager, IT manager, task team leader for Standard 6 were significant)
- the continual development of the database system (constant user-unfriendliness and inaccessibility).

For these issues, I am uncertain as to how research could be conducted differently. By the same token, it is easy to understand that ethical challenges were compounded. In changing times, what may have been considered quite acceptable may become heterodox and should no longer be made available to a wider public. Although all identities are fictional, the events betray enough of the unique circumstances that I doubt anyone can remain protected or anonymous forever. As painful as it seems, perhaps the most failsafe solution to that dilemma would be to abandon research or not publish it.

In conclusion, engaging in research is ultimately a reckoning unto oneself about one's worldview. My goal in doing this research was a purely intellectual exercise. I only have to account to myself, since I purposely did not ask for or accept any funding. From this research, I learned the most about recognising my susceptibilities, both intellectual and emotional. Both aspects are hugely significant to qualitative researchers who strive to maintain detachment and objectivity. This lesson was largely due to the way this case study evolved. It heightened my awareness of all the delicate political and ethical issues that can arise in research. The greatest challenge was to ensure that I was making justifiable choices about what I was reporting by cross-validating with others and underpinning it with relevant theory. It is also hard to know if one has covered enough theory, as literature and theory continue to evolve. Although I think "facts" are relative, too much emphasis on qualitative data makes a study more susceptible to debate especially during periods of radical change. To avoid sensitivities, I would include more empirical (positivist) data e.g. questionnaire in lieu of the case study questions listed under the case study protocol, particularly if I needed to influence someone with "facts". There is still rampant resistance to the idea that good qualitative research is as demanding.

rigorous and “factual” amongst some educational practitioners. Such are my thoughts about managing change during a research project and wonder if it is possible for researchers to draw honest, original, politically correct, diplomatic, and inspired conclusions without also using some empirical ammunition.

## **VI. CONCLUSION**

### **A. Defining Quality in an Educational Setting**

The initial purpose of this research project was to verify whether undergoing accreditation is a worthwhile pursuit for assuring educational quality of a school. From the various quality assurance processes I had encountered, I had developed a certain curiosity about their conceptualisation and effectiveness. Whence the research question: Does accreditation assure quality? This first led me to question what quality means in an educational setting. I decided to take the perspectives of three major groups of constituents that would need to agree upon and negotiate notions of quality: the individual (consumer, i.e. student), the institution (the education provider) and the system (the dominant socioeconomic authorities). As I attempted to arrive at a definition of quality, I learned that it varied with each of the constituents' perspectives and that the construct escaped common grounds. The individual perspective proved to be awkward and almost self-contradictory in that customer satisfaction could potentially result in no educational quality at all if the customer is uninformed. Educational quality cannot be a function of a consumer's personal tastes and preferences. The institutional perspective, on the other hand, was wrought with value-adding processes, competing curriculum philosophies, and the metaphysical dilemma of the infinite nature of quality. The increasing complexity in defining and measuring quality confronted through this perspective led me to conclude that, to be functional, quality had to have a baseline. It needed to have some minimum standards to give it shape. The final systemic perspective linked the standards that an educational institution must meet to achieve quality with its socioeconomic purpose: either the progress of humankind, therefore, research and scholarship or development of population for full employability of human resources. From this perspective, quality assurance processes tend to be governed by central authorities and this in itself presents potential dangers: should education and quality be subservient to political ideologies? The attempt to define quality also brought to light the richness of pedagogical traditions that exist in the world and made it evident that the

context and culture of an educational institution invariably influences the way that an institution enacts quality. To demonstrate, I juxtaposed the curriculum approach against the didactic approach of pedagogy endemic to the European continent. It was a comparison of the Anglo-Saxon versus the Central and Northern European philosophies, which noted how they become embedded into notions or even traditions of quality. The discussion on quality then led onto the discussion of relevant quality assurance procedures.

## **B. A Panoply of Quality Assurance Approaches**

It became increasingly clear that in order to measure quality, we need to understand the purpose of establishing quality. Is quality assurance important for accountability or for continuous improvement? If the purpose of quality efforts is directed to accountability, then, de facto, quality will be reduced to its lowest common denominator. If the purpose is continuous improvement, then the irony is that the institution cannot have attained quality. The quandary is though that a school which is static cannot retain quality in the real world of change. I conjectured that, to be effective, a quality assurance process needs to integrate both accountability and continuous improvement in a judicious balance and ventured to inventory quality assurance procedures. I used Fidler's (2002) classification of quality assurance approaches to frame the real-life examples I had researched in the literature. The four formal evaluation types used are self-evaluation, performance indicators, external audit or review, and external inspection. As I forged on to explore approaches to quality assurance in the literature review, I discovered that there exists a vast panoply of accreditations, validations and other quality assurance methodologies, each underpinned by varying ontogeny and guided by different epistemologies and purposes. Some quality assurance approaches are all encompassing, probing into issues of the public and social order in the greater systemic context of an educational institution. Others are very focused and restrained, limiting the assessment to a well-defined scope of student outcomes. Such is usually the case of specialised education where certification or licensure is necessary to confirm that quality instruction has taken place in order to allow students access to career practice. Yet other approaches target institutional evaluation of various sorts. Under self-evaluation, the Swedish National Board of Universities and

Colleges approach, the Dutch AMOS process, the Value Added Assessment Program at NMSU and the strategic planning approach from University of Tennessee were identified, compared and contrasted. Under performance indicators, ISO9001 and the EFQM Model were presented. As for external audits, the French and the American evaluations were discussed; whereas for the last category, external inspection, the QAA procedures were considered in detail. The literature review ended with an extensive discussion on European and American accreditations and their related processes.

### **C. The Case Study**

Given such a vast territory and to make the research question actionable, I decided to focus on a unique accreditation incident using the case study approach. An occasion presented itself in which I could participate in a significant landmark event and observe firsthand the reaccreditation of a private international school in Switzerland. The accreditation approach was one of institutional evaluation, conducted through an American regional accreditation agency, NEASC. It consisted of a multi-tiered process which included a Self-Study by the education provider and a peer evaluation visit by the accrediting agency including a final Commission vote on the peer reviewers' report of the institution. I revisit these procedural components of accreditation at the case study school, but I start by addressing the accreditation criteria used by NEASC, the ten NEASC Standards. This is because in the literature review, it seems that for institutional accreditations, standards are necessary to define a baseline of quality. The overriding concerns of NEASC in the application of standards are to determine whether the school has an appropriate mission, allocates the necessary resources and demonstrates the ability to accomplish the mission. In addition, the school has to provide evidence of positive future performance. This means that the accreditation process is longitudinal and dynamic, a process which lends itself to catalysing improvements. At HSH, the occasion was its first decennial reaccreditation. In the section below, I discuss the Standards, the self-evaluation and the peer review, followed by a retrospection of accreditation at HSH and the challenges encountered over the years in a condensed summary of the data analysis chapter.

## **D. Use of Standards**

The point of departure for any quality assurance procedure is the criteria used for evaluation. American regional agencies develop and use a set of accreditation standards which lend objectivity to the assessment process. In the case study, the Standards are set by NEASC, and they are used with all member institutions in the CTCL. They allow peer evaluators to formulate a basis of comparison to discern school productivity and performance. The assessment results are comparable amongst similar institutions and serve as a baseline of minimum quality. In this respect, quality expressed as accountability can be assured. We know from the literature review that accountability and continuous improvement combined constitute quality. Neither one nor the other alone sufficiently assures quality of an institution. In terms of continuous improvement, the NEASC accreditation provided an effective gap analysis. The peer reviewers' comments accurately pointed out areas which need to be addressed to improve quality at HSH. NEASC was able to establish the following state of affairs at HSH listed below. It can be seen that some Standards are more amenable to validating accountability; whereas, others are more conducive to inciting continuous improvement at the school.

**Standard One:** The mission statement of HSH, while articulated in a more appropriate fashion than the earlier versions, continues to lack focus on the academic goals of the school and its programmes. This observation can lead to quality improvement.

**Standard Two:** There are disconnects between the current Planning and Assessment Framework and the performance indicators already in place. There is a need to further identify key educational processes and relevant measurements to facilitate quality management in the school. HSH was undergoing considerable transformation at the time of the accreditation and a clean slice through school structures and processes was nearly impossible due to the plethora of decentralisation activities taking place. Advice about planning and assessment can lead to improvement.

**Standard Three:** The quality assurance paradigm associated with the American accreditation process emphasises a democratic approach. An educational institution must



implement a governance framework, which allows transparent communications and lends voice to all stakeholders of the school. For an independently owned for-profit enterprise, the exigencies of this Standard are likely to be perceived as impingements on the freedom to conduct business. No sanctions on the part of NEASC can be upheld by the legal or the accounting system as practiced in Switzerland where HSH is incorporated. In essence, the Governing Board has very little leverage. This Standard has limited applicability at HSH.

**Standard Four:** Again, in the Swiss economic setting, it is entirely the owner's choice to supply the accreditation agency or the public with financial statements. Since the incentive to attain accreditation seems considerable in the case study school, it may be to the advantage of the agency and to those it serves to demand specific financial information of HSH and similar institutions. Without predetermined financial statements using common templates and benchmarks, fiscal stability can hardly be assured. This Standard has limited applicability depending on the economic context of the education provider.

**Standard Five:** The composition of faculty and their qualifications were deemed to be suitable for the educational purpose of HSH and staff development fitted for purpose was seen to be taking place on a regular basis. Concerning personnel issues of faculty, I noted in the data analysis that the school constituents could either be required or given the option to file independent confidential reports. At HSH, staff were hesitant to divulge any information which they felt may be politically incorrect and so compromise their standing in the school. This attitude can lead to crucial information being excluded from a quality assurance process, because obviously they would be negative remarks that would be withheld. In the "Critical review of substantive issues" for self-evaluations in the literature review, this micropolitical risk was pointed out. Direct confidential reporting would give the team of peer evaluators an early start in triangulating claims, even before the site visit. In conjunction, Swiss or local labour conventions could be required as support documents to ensure relevant and objective interpretation of local personnel issues. This Standard does ensure accountability and, if made more ample, could lead to improvement.

**Standard Six:** Because HSH is a private school dependent on its customers for its existence, its marketing and recruitment activities should be scrutinised. NEASC requires appropriate statistics on student performance, qualifications issued, retention, attrition and other student welfare related items, but with regard to recruitment, NEASC remains aloof. The measurements required are output based, rather than input or process based. Sales and marketing activities of the school that lead up to the admissions process are not currently under the remit of NEASC accreditation. This Standard partially assures accountability.

**Standard Seven:** Programs of Study would benefit from integrating feedback from multiple sources, but especially alumni and industry. The economic conditions of the industry should inform HSH curriculum in the same way other professional or vocational programmes take industry supply and demand into account, both in terms of teaching foci and placements of graduates. This was noted by NEASC along with high rate of faculty turnover and its knock-on effect on academic quality. The observations give evidence of the potential this Standard embodies to drive improvements in educational effectiveness.

**Standard Eight:** HSH was newly renovated and it looked impressive with its trendy boutique style facilities. Problems occurred when the school employed an overbooking strategy, which often led to shortage of classroom equipment and facilities, accommodations, unsatisfactory food and beverage service and an overload on IT capabilities. Space constraints were also noticed in the cramped offices and by the absence of a staff lounge. If strictly adhered to, this Standard could bring about important improvements.

**Standard Nine:** The evaluators noticed that the library resources were insufficient in relation to the school and its programmes. What the evaluators did not notice was the frequent relocation of the library and the perturbation it created for the library staff and users. While this Standard can verify accountability and lead to improvement, it coincidentally highlighted the fact that the accreditation procedure uses an entirely new

team of peer reviewers each visit. This practice can delimit the reliability of quality assurance since there is no collective memory of previous visits which the evaluators can draw upon.

**Standard Ten:** All publications were checked for misleading or inaccurate material. Recommendations were made to include the mission statement in the school brochure and other key publications. NEASC does not yet have any specific information policies concerning electronic communications or websites. This Standard can assure accountability but would benefit from updating to contemporary communication channels to enhance its ability to induce improvements.

Although none of the Standards were directed at accountability or continuous improvement exclusively, the results of the case study indicate that Standards One, Two, Seven, Eight, Nine and Ten tend to guide improvements, while Standards Five, Six, Nine and Ten emphasise accountability. Standards Three and Four were of limited applicability in the context and culture of the case study school. Interpreting the Standards is a way for the school and the agency to develop a common understanding about quality with the broader public, funding agencies and/or the government. In the USA, the process would be used to substantiate the allocation of state or federal funding. At HSH, the accreditation was entirely voluntary. The accreditation had no association to external funding, resources or authority. In the Swiss context, accreditation serves primarily to substantiate accountability of private schools to the international student markets. The peripheral advantages from improvements to quality ultimately hinge upon the school's own means and ends. A review of the accreditation procedure will help us determine whether the application of Standards was valid and reliable. so I now turn to self-evaluation and peer review, the most significant components of accreditation.

### **E. Self-Evaluation through the Self-Study Report**

At a general level, the inherent conflicts of interest embedded in a self-evaluation can be likened to any researcher's battle to attain detachment and objectivity. At the level of this unique case study, the rewarding aspects of self-evaluation empowered HSH constituents

to explore and assure quality for themselves, while the frustrating aspects tempered the overall transparency of the report. In certain instances, they hampered the ability of the task teams to report precisely, objectively and completely. As such, the ability of accreditation to assure quality depends on the validity and reliability of the Self-Study task teams' work. Let us review some of these instances. The Self-Study was cross-validated, because it involved teamwork amongst all faculty and key staff members working on overlapping areas. In verifying whether the alignment between the processes and the school mission was taking place, the task team members had the opportunity to gain insight into many aspects of educational quality management that they were either not privy to or not interested in hitherto. Thus, the Self-Study implicitly tests the construct validity of a school and its educational purpose. Giving various stakeholders a channel to express their understanding of school processes enhanced the probability of effective quality assurance through a more holistic view of the school. In some instances, however, the reliability of self-analysis was questionable, because there was a real lack of knowledge on behalf of some constituents about school processes. In other instances, wariness about what may or may not be reported, such as the fear of censorship in the Faculty Standard could impede reliability of accreditation. This is not dissimilar to ethics of any research where the greater personal, academic and social contexts must be weighed against the sensitivity of the material being reported. Another threat to the reliability of accreditation was the turnover of several important staff members which disrupted both the Self-Study and the school's own operations. Many of these issues would be illuminated if the agency required a chapter on the limitations of the Self-Study. In sum, self-evaluation is a valid means to assure quality, but its reliability is limited. These are counterbalanced by the peer review process.

## **F. Peer Review**

While everyone can be subjective, having a team of external evaluators triangulate what is claimed in the Self-Study greatly improved the reliability of accreditation. There are three aspects to the peer review which must be examined: the profile of the visiting team, the triangulation process and the visiting team's reporting process. The data analysis pointed out the socio-centric biases of the staff and student (see Tables 3 and 4), when

they were asked to conduct an analysis of the Standards. Each constituent expressed their own needs and preferences; whereas, the NEASC evaluators were disinterested in promoting any one constituent over another (see Table 5). Peer review assures quality more effectively than self-evaluations, even when constituents evaluate each other. This is most likely due to the extensive experience of the members on the peer review team at the HSH decennial reaccreditation. Because of their profile as a team, with their combined expertise, they were able to make perspicacious judgements about institutional processes and practices at HSH. The team had uncovered items that had escaped the Steering Committee and the task teams, which is a clear demonstration of the weaknesses of self-evaluation – that of institutional myopia. In this respect, effective quality assurance is supported by the fact that the evaluators are peers, have relevant experience, represent independent institutions that have no conflict of interests and are several in headcount. The individual expertise of the evaluators is further enhanced when they apply their knowledge synergistically during the site visit as they did at HSH.

The triangulation process used by NEASC is a review of the Self-Study support evidence supplemented by interviews with school constituents to verify claims made in the Self-Study Report. As discussed in the literature review, the dangers of performativity can plague any quality control process. Could a site visit also be fraught with performance and artificiality? Since many of the interviews held at HSH were unscheduled, it would have been impossible to pretend compliance or script anything beforehand. The fact that they could catch someone off guard inhibited artificiality. As a team, they triangulated their findings with each other daily and collaboratively wrote the final report. The peer review process conducted in this case study exhibited due diligence as per the NEASC guidelines and protocol for site visits. The visitors could not be influenced with too much courtesy and attention. They obviously appreciated the famous Swiss hospitality but consistently maintained a friendly professional distance. The exemplary application of the protocol at HSH make the validity and reliability of the visiting team's work relatively incontestable from a methodological standpoint. The reliability of an accreditation is significantly enhanced by adding the peer review to the Self-Study.

The third part of the peer review is the post-visit report which is submitted to the NEASC Commission. A draft report is sent to the school for verification of factual details only, such as dates or figures. Once the response is received from the school, the corrected final report is submitted to the Commission for review and a decision. This represents the last level of control. So seen, the accreditation process is a system of three way checks and balances: the school, the peer reviewers and the Commission. Contrast with the 2003 ASEH reaccreditation report of HSH discussed in the previous chapter. Firstly, the ASEH report comes after the accreditation decision. It includes no list of concerns or recommendations other than to accredit the new SPSA campus. Secondly, compared to the non-academic background of the ASEH visitors (experts) who are the authors of the report, the NEASC peer review approach appears more germane to assessing educational effectiveness. Thirdly, ASEH comprises of only 12 members, of which three belong to the SPSA group. The association resembles an oligopoly in the market of Swiss hotel schools. Finally, ASEH conducts an “inspection”, not an evaluation to drive continuous improvement. Remember that accountability and continuous improvement together constitute quality assurance. As opposed to the Swiss accreditation, the NEASC peer review does assure educational effectiveness by enumerating items explicitly in their written recommendations which must be addressed for the next visit. Comparatively speaking, but also when considered alone, NEASC accreditation through its use of the peer review and its reporting process effectively assures quality.

### **G. Longitudinal Perspective of Accreditations**

For sake of brevity, I focus on the most recent visit just prior to the decennial reaccreditation, the 2004 NEASC visit by the CIHE team of evaluators. Their four major observations are cited in the case study and repeated in part below to demonstrate how certain cultural attributes of the school obstruct quality assurance. The first two are concerned with conflicts in broad cultural values. The external culture is a major determinant of the internal culture: Namely the privileges of free enterprise in Switzerland clash with the propensity to promote corporate responsibility in the US. The last two NEASC observations underline the clash of specific practices. financial reporting

and Swiss accreditation, where Swiss proclivity to secrecy and collusion does not bode well with American insistence on transparency and public accountability.

Let us start with the values conflict. First of the NEASC observations in 2004 was that HSH company by-laws and NEASC governance standards are not reconcilable, so a new governance framework was necessary. In 2006, HSH presented a new governance structure. However, it can be seen that in the Swiss legal framework regulating private enterprise, there is no requirement to knit together a company's executive/board decision-making with fair representation of the company's stakeholders. Private enterprises are the expression of the fiercely independent Swiss spirit and the way they exercise the principles of a free economy. So while the new HSH governance structure is theoretically correct, it is not practicable in everyday Swiss life. On the one side, ASEH demands that HSH uphold its Swiss character, while NEASC demands a culture of governance that contradicts Swiss values. Reinforcing this cleft is the fact that HSH belongs to a Swiss entrepreneur who proudly claims that SPSA is the only Swiss owned private hotel school. This substantiates the second observation made by CIHE in 2004 that NEASC requirements are fitted for public, non-profit institutions. Areas not under the remit of NEASC are recruitment, marketing and publications of for-profit organisations. The data analysis shows that the same issues were pending after the 2006 CTCI decennial visit, and indicates that they are weighed differently by different Commissions within the same agency.

Another level of misalignment deals with specific business practices. The third observation concerned the opacity of financial statements, which are reported on the Swiss basis, along with the insight that future strategic plans are entirely at the discretion of the owner. From the data analysis, there was obviously no change to this after the decennial visit. To assure quality within the financial domain, the only retort would be that NEASC require detailed financial information in the format that meets their desired level of transparency. Although it is not inconceivable to demand the owner to communicate his future strategies to all stakeholders, to demand him to involve others in strategy setting would be unrealistic. This is because the goals of the different

constituents at HSH are eternally contradictory: the owner wants low cost, the staff wants more pay, and the students more comfort. The owner's short term, needs-based approach to financial planning betrays his acute cost consciousness. In contrast to output based long-term investments, budgets allocated on per capita basis indicate that keeping costs variable is of the highest priority and a major tactic to eking out profits. Secrecy about strategic planning and the financial status of the company are the owner's prerogative, but it hampers NEASC's ability to assure quality. In Swiss accreditation, however, this is acceptable practice. The standard procedure is that an independent auditor reviews the financial information. Of course, this is not necessarily better practice; we all know about Enron.

This brings us to the last observation by the CIHE that HSH seems to have merged into SPSA; therefore, it is not eligible for accreditation. In 2003, ASEH recommended that SPSA accredit a new SPSA campus through ASEH, which led NEASC to believe that SPSA schools were not independent entities. The NEASC model assures quality of an academic institution in its autonomous and democratic governance of educational operations and activities. The ASEH model is not concerned with autonomy. It assures quality of an academic institution in its ability to meet the exigencies of the Swiss trade associations which control ASEH. Recall ASEH's reasoning that accrediting all SPSA sites would boost the credibility of SPSA and ASEH when recruiting students in international markets. Making the distinction between the purposes of quality assurance of these two agencies would have assisted CIHE to understand ASEH's intentions. These perceptions were later corrected by CTCL, thus allowing reaccreditation of HSH. It can be seen that certain circumstances can be rectified or reconciled due to the longitudinal aspect of accreditation, making it a more valid process than an isolated incident of quality assurance.

## **H. Challenges to Quality Assurance at HSH**

It was established in the data analysis, that the HSH self-evaluation did succumb in part to the difficulties of a self-evaluation as listed by Romney, Bogan and Micek, and this makes the validity and reliability of an accreditation process questionable. Further, at



HSH, key performance measurements used in the Self-Study Report did not always fit the context, because they were not originally conceived as part of the HSH Planning and Assessment Framework. The observation was made by the NEASC evaluators that there were some disconnects between the indicators and processes, but they accepted that this was inevitable due to the changing organisational structure between SPSA and HSH. As such, a significant challenge to effective accreditation is the timing of the event. The assessment took place at an odd juncture in the life stage of HSH, not long after its purchase and during the SPSA decentralisation phase. Some of the statistics were joint outcomes measurement in the sense that they were collected while SPSA was centralised. In addition, the change processes which beset HSH created an ambiguous atmosphere in the school. ASEH noted the same in 2003 and deemed that it was understandable given the consolidation process that was taking place between SPSA and HSH. Ironically in 2006, it seems that NEASC also deemed the confusion understandable given the decentralisation that was occurring between SPSA and HSH. As people, processes and policies were in a constant state of flux, some Standards simply could not be definitively answered. Other requirements were not completely met, because of micropolitical issues. Not surprisingly, the climate was electric due to downsizing, high turnover, and understaffed departments such as Leisure and Extra-curricular Activities or the newly combined Internships, Student Placements and Alumni Office. Still other items remained nebulous, because they were undergoing construction such as the database management system and the intranet sites. It is difficult to pass judgement on work in progress. Quality improvement was happening, but it almost negates quality assurance, because things are not yet running as they should.

## **I. Does Accreditation Assure Quality?**

For the greater part, quality was assured at HSH as can be seen from the Standards and the ability of the NEASC accreditation process to ensure validity and reliability of an institutional review through its system of checks and balances and extensive triangulation. I must add that quality was only temporarily assured, because at HSH, the decennial reaccreditation coincided with the ongoing decentralisation of SPSA. The maintenance of the current baseline of quality would have to be monitored by another

interim visit after decentralisation will have concluded. Quality assurance could also become more robust if NEASC takes the external culture and environment more into account. These are undeniably quality defining areas as explained above by the literature review. On the other hand, the question whether accreditation assures quality is not the same as whether HSH has attained quality. It is important to separate NEASC processes from the school's results. This is not as easy as it seems. Consider the following: to be able to state that quality does not exist is quality assurance. It sounds like a self-contradiction, but it is not. Put in another way, quality assurance is the ability to determine if quality exists or not. Add to this the possibility that if quality is fuzzy and infinite, then the difficulty of assuring quality as well as the difficulty in separating quality from quality assurance could become mind-boggling. The only remedy would be to run many more iterations of accreditations and search for consistency. For this, research would need to be expanded to multiple case studies. Future considerations that stem from this work are many. As yet, it would be premature to generalise from these limited findings that the same conclusions would be drawn in other accreditation scenarios; however, the research methodology can be replicated with other cases, and the same case study protocol employing the same data sources and collection procedures could be applied to other for-profit schools. Although HSH represents a unique situation, it nonetheless affords us an opportunity to deal with issues that affect quality assurance. The worldwide demand for education is increasing and with it, the demand for transferability of knowledge and academic credits. The velocity of change in education is accelerated through globalisation, increasing competition and the lack of institutions that can fill the gap in the higher education boom (Van Damme, 2002), so it seems that the problems which beset HSH are more generalisable than they appear and the need to answer them will only intensify with time.

## **APPENDICES**

### Appendix 1. Time-ordered matrix of accreditation visits from 1994-1996, Candidacy and Initial Accreditation

Event/ Document(s)	<b>June 1994, HSH submits Self-Study Report for Institutional Candidacy for Accreditation</b>	Recommendations by the visiting team <b>October 3-6, 1994 Visit Summary</b>	<b>II. July 1996 HSH submits Self-Study Report as an Associate Degree Programme</b> 2006 Visit Summary	Recommendations by the visiting team <b>Letter dated December 5, 1996</b>
A) legal status	<ul style="list-style-type: none"> <li>• Nov 25, 1985, recognised by Canton of Vaud Department of Public Instruction</li> <li>• Dec. 11, 1985, legally registered with the Vevey Chamber of Commerce</li> <li>• Member of the State Association of Private Schools (AVDEP)</li> </ul>		Unchanged	
B) mission	Version 1994	Rework mission statement	Faculty involved in reworking the mission statement	Consistent mission statement that outlines the programme options
C) planning & assessment	<b>Strategic Planning</b> <ul style="list-style-type: none"> <li>• Determined by the Board of Directors &amp; Advisory Board</li> </ul> <b>Measures of institutional effectiveness used to develop the academic programme</b> <ul style="list-style-type: none"> <li>• Feedback from professional recruiters</li> <li>• Advisory board input</li> <li>• Third year student exit interviews</li> <li>• Student course &amp; instructor evaluations</li> <li>• School staff visits abroad/alumni meetings</li> </ul>	<ul style="list-style-type: none"> <li>• Empower faculty into organisational planning</li> <li>• Empower faculty in decision-making (responsibility but no authority to deal with e.g. disciplinary matters, include faculty in disciplinary board.)</li> </ul>	<b>Strategic Planning</b> <ul style="list-style-type: none"> <li>• To incorporate more constituents</li> <li>• Strategic planning committee includes a senior faculty member</li> </ul> <b>Measures of institutional effectiveness used to develop the academic programme</b> Unchanged	
D) Manage- ment committee	<ul style="list-style-type: none"> <li>• Mr. Olivier, founder, owner &amp; Director HSH</li> <li>• Mrs. Nicole Olivier, owner &amp;</li> </ul>		Ms. Connelly replaces Ms. Aberg as Head Adviser.	

	<b>Director of Finance</b> <ul style="list-style-type: none"> <li>• Mr. Fisch, Administrative Director</li> <li>• Ms. Donald, Academic Coordinator</li> <li>• Mr. Santori, Operations Coordinator</li> <li>• Ms. Aberg, Head Tutor</li> </ul>			
E) governing board/board of directors	comprises of the owners with Mrs. Olivier serving as Chair and the school accountant as Secretary, Mr. Quartier (legal constraints governing limited companies)	Name a “provost” to liberate the director from day to day activities	To be abandoned.	
F) advisory board	Nine industry leaders		Unchanged	
G) executive advisory board	chaired by Mr. Woods, the governing board & 4 additional members to be named		To become the Governing Board without the membership of the owners. Chaired by Mr. Woods, the owners, Mr.Petri, Hyatt International; Dr. Sundt (UNLV).	Combining the Executive Advisory Board with the Governing Board
H) finances (added in 1996)			HSH shows a continuously decreasing annual surplus of 44% between the years 1991-1994 and has suffered decreasing student numbers over the last two years due to competition.	
I) student profile	<ul style="list-style-type: none"> <li>• 275 students: 174 on campus (51 yr.1, 60 yr.2, 63 yr.3), 94 internships</li> <li>• 40-55 nationalities</li> <li>• Student Committee</li> </ul>			
J) student records	<b>Admissions</b> <ul style="list-style-type: none"> <li>• Letter of inquiry</li> <li>• Admissions application</li> <li>• Transcripts</li> <li>• Medical certificate</li> </ul>		Unchanged. Back-up disks are kept locked. All student records are kept permanently.	Data for student placements

	<ul style="list-style-type: none"> <li>• Résumé</li> <li>• Acceptance documents &amp; correspondence</li> <li>• Entrance essay</li> </ul> <b>Post-Admissions</b> <ul style="list-style-type: none"> <li>• English placement test</li> <li>• Term transcripts</li> <li>• Internship certificates</li> <li>• Medical &amp; insurance documents</li> <li>• Correspondence</li> <li>• Student permit</li> <li>• Professional attitude transcripts &amp; supporting records</li> <li>• AHMA certificates</li> </ul>			
K) faculty	<ul style="list-style-type: none"> <li>• 18 international faculty</li> <li>• 45 full time staff including faculty</li> <li>• 2 part time staff</li> </ul>	<ul style="list-style-type: none"> <li>• Reduce teaching contact hours (26 per week observed)</li> <li>• Develop faculty handbook</li> <li>• Establish a salary scale</li> <li>• Faculty must attend professional development courses</li> </ul>	<ul style="list-style-type: none"> <li>• 16 full time faculty</li> <li>• notice period reduced to one month for some faculty</li> <li>• Faculty handbook created</li> <li>• A salary scale with minimum and maximum salary ranges was created</li> <li>• Yearly teacher seminars since 1995 &amp; CHE workshops since 1993, policy still to be formulated</li> </ul>	Faculty development plan
L) programmes of study	<ul style="list-style-type: none"> <li>• Swiss Diploma in Hotel Management, ASEH accredited</li> <li>• “AA” programme (2 year programme for students with two years professional experience)</li> <li>• American Hotel and Motel Association Diploma</li> <li>• 3 academic terms, 2 internships</li> <li>• external programme advisor class advisor system &amp; school counsellor</li> </ul>	<ul style="list-style-type: none"> <li>• Formulate credit transfer system</li> <li>• Remedial mathematics should be offered</li> </ul>	Remedial Maths and Remedial English courses introduced.	<ul style="list-style-type: none"> <li>• Monitoring of internships</li> <li>• Appropriate level general education courses</li> </ul>
M) facilities	<ul style="list-style-type: none"> <li>• 200 beds</li> </ul>	<ul style="list-style-type: none"> <li>• Faculty workroom/lounge</li> </ul>	Unchanged. Plans to renovate the	Investment in technology

	<ul style="list-style-type: none"> <li>• 9 classrooms (2 basement, 2 ground floor, 3 first floor, 2 fifth floor)</li> <li>• computer lab (basement)</li> <li>• professional kitchens (2, main &amp; pastry)</li> <li>• self-service cafeteria</li> <li>• practice restaurant</li> <li>• nurse (1 hour/day)</li> </ul>	<p>space or private meeting space needs to be considered</p> <ul style="list-style-type: none"> <li>• Emergency kits to be made available in the kitchen and laundry</li> </ul>	<p>exterior of the building and to expand computer lab.</p>	
N) library	<ul style="list-style-type: none"> <li>• 2475 books, many duplicates</li> <li>• 40 periodicals</li> <li>• 160 audio-visual material</li> <li>• no computers, CD-ROM, nor microfiche</li> <li>• limited weekend hours, not open on Sunday</li> <li>• No evidence of student use documented</li> </ul>	<ul style="list-style-type: none"> <li>• Library requires more staff, better catalogue system, non-teacher librarian</li> </ul>	<ul style="list-style-type: none"> <li>• 2145 books, many duplicates</li> <li>• 40 periodicals</li> <li>• 180 audio-visual material</li> <li>• no computerised referencing system</li> <li>• limited opening times</li> </ul>	<ul style="list-style-type: none"> <li>• Library to have a place in the culture of learning</li> </ul>
O) publications		<p>Publications are not factually accurate and must be rectified</p>	<ul style="list-style-type: none"> <li>•</li> </ul>	<p>Publications overstate institutional resources, misleading</p>
P) goals	<ul style="list-style-type: none"> <li>• Achieve accreditation with NEASC and EFAH</li> <li>• Develop articulation agreements with 2 US universities</li> <li>• Develop a programme to accommodate students with industry experience</li> <li>• Improve English language training</li> <li>• Develop staff development policies for faculty and staff</li> </ul>		<ul style="list-style-type: none"> <li>• Articulation agreements with feeder schools overseas</li> <li>• Packaging academic programmes for more flexibility</li> <li>• Faculty to be empowered as “project managers” as well as lecturers</li> <li>• Executive Advisory Board will become a Board of Directors &amp; incorporate a member of HSH Management</li> <li>• Marketing representative will be named</li> <li>• Complimentary course offerings with non-competitive schools will</li> </ul>	

			be sought <ul style="list-style-type: none"> <li>• Academic partnerships outside Switzerland to take place</li> <li>• Joint marketing efforts with other schools in the Lutry region</li> <li>• Director to step out of daily operations to concentrate on strategy</li> </ul>	
Q) other			<ul style="list-style-type: none"> <li>• candidacy with NEASC, EFAH accredited in 1995, HCIMA accredited in 1995</li> <li>• Articulation agreements in place with seven US universities</li> </ul>	
R) result of visit		HSH is listed as a NEASC candidate.	HSH is accredited on December 4, 1996 as a non-degree granting institution.	Focused visit scheduled for fall 2001.
S) Notes about the data			Official copy of the NEASC Visit Report is missing. The data are from other documentation for the same Self-Study Report.	



## Appendix 2. Time-ordered matrix of accreditation visits from 1998-2001, Interim visits and the pending sale of HSH

Event/ Document(s)	<b>III. 20 February 1998</b> <b>HSH submits Progress Report for Focus Visit</b> March 23-26, 1998 NEASC Focus Visit Summary	Recommendations by the visiting team <b>Letter of June 4, 1998</b>	<b>IV. Fall 2001</b> <b>HSH submits Fifth Year Focused Visit Report</b> October 8-10, 2001 NEASC Fifth Year Focused Visit Summary	Recommendations by the visiting team <b>Letter dated November 15, 2001</b>
A) legal status				
B) mission	Must be rewritten by August 1998. New version 1998 in compliance to advice.		Mission statement needs to be more specific to express HSH's distinctive character and to be part of institutional assessment and effectiveness.	
C) planning & assessment	Strategic Planning Committee is in place.	planning & assessment model for implementation by 2006	<ul style="list-style-type: none"> <li>• No formal planning and assessment process in place.</li> <li>• Develop a data-driven model for planning and assessment.</li> <li>• Alumni database developed with alumni chapters in 31 countries. Should be used for institutional planning and assessment.</li> </ul>	<ul style="list-style-type: none"> <li>• Assessment model for Fall 2006 which provides feedback to improve TLA effectiveness</li> </ul>
D) Management committee	New School Director, Mr. Ronald, was appointed so that the owner/director could relinquish day-to-day control.		A) The previously appointed school director did not work out, so a new "Operations Director" was hired. Positions undergoing personnel changes are Academic Dean, Director of Administration and Marketing.	
E) governing board/board of directors			Governing Board postponed due to HSH's possible alliance (sale) to improve its financial situation.	
F) advisory board				

G) executive advisory board	Executive Advisory Board is still transitioning into the Governing Board. Must be accomplished by summer 1998.			
H) finances (added in 1996)	<ul style="list-style-type: none"> <li>Investment into technology, library, and staff development are advised.</li> </ul> <p>Alternative sources of revenue to relieve dependency on tuition revenue are recommended.</p>		<ul style="list-style-type: none"> <li>Articulation agreements with schools in Spain, Mexico and Greece established.</li> <li>Franchise agreement with a school in Bahrain signed.</li> </ul>	
I) student profile	<ul style="list-style-type: none"> <li>Part-time Internship Coordinator assigned.</li> <li>Career advisors named and a career handbook created.</li> <li>Alumni updates are printed and better statistics are being generated for placements. Still needs to be developed.</li> </ul> <p>Four day orientation with students and Student Handbook and Student Manual are "excellent".</p>		Personal interviews with new applicants to ensure better assessment of language abilities.	
J) student records				
K) faculty	<ul style="list-style-type: none"> <li>Faculty and management must develop a faculty development plan and provide for it financially in the annual operating budget.</li> <li>Investigate alternative pedagogic approaches to reduce teaching loads.</li> </ul>		<ul style="list-style-type: none"> <li>Individual personal development plans for each faculty member is not sufficient. A staff development plan for all faculty must be established.</li> <li>Slight modifications to teaching methods to reduce faculty workload.</li> </ul>	
L) programmes of study	<ul style="list-style-type: none"> <li>First 5 Postgraduate and Professional Diploma students graduated. 6 enrolled.</li> <li>New Intensive English Programme created for Fall 1998.</li> </ul>		<ul style="list-style-type: none"> <li>The remedial intensive English course discontinued. An English Foundation Course has been created to start January 2002.</li> <li>Endorsement of programmes</li> </ul>	<ul style="list-style-type: none"> <li>Educational technology plan</li> <li>Decision about Associate's degree and how to approach it</li> <li>"In no case should the</li> </ul>

	<ul style="list-style-type: none"> <li>• Internship placement agency, Resort Recreation and Tourism Management (RRTM) programme, assists in placing and supervising students in Florida.</li> </ul>		<p>abroad may cause conflict with regard to Standards of Membership which should be avoided.</p> <p>Proposal to deliver the Excelsior Bachelor of Science degree at HSH would be subject to the CTCI Standards of Membership if delivered by or with Excelsior. Any conflict in this regard should be avoided.</p>	<p>institute proceed to establish its own baccalaureate degree programme under the present umbrella of accreditation.”</p> <p>Articulations are acceptable as long as HSH makes clear who grants the degree.</p>
M) facilities	<ul style="list-style-type: none"> <li>• Limited student recreational space. Regular review of space utilisation should be established.</li> <li>• Limited expansion. Same as above.</li> </ul>		No space utilisation review process in place. Future planning needs to occur and may be incorporated into the mission.	
N) library	<ul style="list-style-type: none"> <li>• Limited library space. Timeline and financial commitment required.</li> <li>• All previously stated problems with the library persist. No action had been taken.</li> </ul>	library mission statement & development plan	Library has been enlarged. Emerald, an online database, has been added. 40 new computers were added. A formal written development plan is recommended.	Library resources included in all courses, integrate electronic resources, library plan to address print collection weaknesses.
O) publications			Ambiguous statements must be reviewed.	
P) goals				
Q) other	<ul style="list-style-type: none"> <li>• University of South Texas gives students access to a Bachelor’s degree.</li> <li>• The school still needs to correct misleading statements, update material and align with the mission statement.</li> </ul>	<ul style="list-style-type: none"> <li>• validate claims in advertising &amp; publications</li> </ul>		If change in ownership, then substantive change filing required.
R) result of visit	<ul style="list-style-type: none"> <li>• Courses in English, social sciences and mathematics (general education component) are needed for Associate’s Degree accreditation.</li> <li>• If HSH decides to offer an Associate’s Degree, a substantive</li> </ul>	<ul style="list-style-type: none"> <li>• The letter affirms continued accreditation of HSH.</li> <li>• In 2001, a fifth year visit is scheduled.</li> <li>• if Associate’s degree, then substantive change request must</li> </ul>	NEASC decided to continue accreditation without further action. Special Progress Report due in May 2002.	

	change would be required. Particular areas of concern would be Faculty, Programmes of Study and Library.	be filed • notify NEASC of any organisational changes.		
S) Notes about the data				

### Appendix 3. Time-ordered matrix of accreditation visits from 2002-2004, Substantive Change of Ownership and Status

Event/ Document(s)	June 10, 2002 NEASC Visit Summary <b>Letter dated July 8, 2002</b> Requirements of HSH following purchase.	<b>V. October 2002 Visit by NEASC based on the Substantive Change Report from 2002.</b>  Letter dated April 23, 2003	<b>VI. 12 November 2003 HSH submits Substantive Change Report for BA Degree</b>	<b>VII. 1 March 2004 HSH submits Special Progress Report to Change Status to CIHE</b> 31 May-1 June 2004 NEASC Visit Summary
A) legal status	Evidence of fiscal “bona fides” of new owner and institution			ETMC has been renamed SPSA.
B) mission	Evidence of no change of mission		New version 2003 despite advice.	The mission, programmes of study, organisational structure and governance has not changed since “re- accreditation” in October 2001. Note that this is a misnomer since the October 2001 visit was a focus visit.
C) planning & assessment			(CENTRALISED SPSA ADMINISTRATION) <ul style="list-style-type: none"> <li>• Learning Resource Centre</li> <li>• Graduate Placement Office</li> <li>• Quality Control</li> <li>• Cost Control</li> <li>• Information Technology</li> <li>• Marketing</li> <li>• Student extra-curricular activities</li> </ul>	<ul style="list-style-type: none"> <li>• Academic Board, Disciplinary Board and Appeals Board are created and chaired by a SPSA director.</li> <li>• All administration departments remain centralised, but a differentiated marketing team is created for each school.</li> </ul>
D) Manage- ment committee	New organisation chart of management		<ul style="list-style-type: none"> <li>• Mr. Murphy, Academic Dean</li> <li>• Mr. Obrist, Director of Operations</li> </ul>	
E) governing board/board of directors	<ul style="list-style-type: none"> <li>• Evidence that the school board (newly appointed) endorses the</li> </ul>		<ul style="list-style-type: none"> <li>• Mr. Schmidt, owner and Managing Director</li> </ul>	Unchanged

	school mission, narrative about the governance relationship between owner & school. Show compliance of new owners with Standard 3, Governance.		<ul style="list-style-type: none"> <li>• Dr. A. Schmidt, brother of owner</li> <li>• Mr. Snipe, friend of owner (Legal Board of Directors)</li> </ul>	
F) advisory board		Expand Advisory Board to have substantial presence of industry members.	<ul style="list-style-type: none"> <li>• Dr. Robert, VP of Westcreek University</li> <li>• Mr. Egger, International HR Director, A Hotel Group</li> <li>• Mr. Ross, Director of HCIMA</li> <li>• Mr. Bonjour, International Hotel Consultant</li> </ul>	<ul style="list-style-type: none"> <li>• Became the SPSA Advisory Board and includes the Academic Deans of each SPSA school.</li> <li>• Mr. Washington, Director, Compass Group appointed new member.</li> </ul>
G) executive advisory board		Reach an agreement between this board and the Advisory Board through establishment of By-laws and document all meetings.	<ul style="list-style-type: none"> <li>• Mr. J. Schmidt, Managing Director</li> <li>• Dr. Crane, Academic Director</li> <li>• Mr. Fleury, Operations Director (SPSA Directorate)</li> </ul>	
H) finances (added in 1996)				
I) student profile				
J) student records				
K) faculty				
L) programmes of study		Any change in non-degree status must be reported through a Substantive Change Report.	The substantive change requested was to replace the Westcreek University BA accredited for delivery at HSH by the NCASC in 2003 with a HSH BA degree	<ul style="list-style-type: none"> <li>• Higher Diploma in International Hotel Management</li> <li>• Post Graduate Diploma in Hotel/Hotel Operations Management (i.e. 2 PG's)</li> </ul>
M) facilities				

N) library	Library report			
O) publications		Submit all publications in a Special Progress Report by March 1, 2004 for review of accuracy.		
P) goals		Report on any merger possibilities between the various schools.		
Q) other	<ul style="list-style-type: none"> <li>Explanation and justification of any full or partial merger in administration between HSH and SPSA original school.</li> <li>On-site visit in October 2002</li> </ul>	<ul style="list-style-type: none"> <li>Clarify relationship between HSH and SPSA University Centre in Special Progress Report.</li> <li>Follow-up visit planned for October 2005.</li> </ul>		NEASC accreditation applies to the institution only and not the group.
R) result of visit		Commission voted to retain the accreditation without change of status based on the Director's report of the visit.		The visiting team observed that SPSA and HSH are so interrelated and centralised with SPSA that HSH does not satisfy the Requirements for Affiliation.
S) Notes about the data				In order to pursue status as a degree granting institution (CIHE), members have to file a change of status report, have successfully run a degree programme for at least two years, issued leaving certificates in its own name and indicate their ability to comply with degree programme requirements.

#### **Appendix 4. Condensed Summary of the NEASC Visiting Team Report 2006**

Total length: 27 pages

5 authors

Major sections consist of:

- Standard One: 2 strengths, 3 concerns, 3 recommendations
- Standard Two: 3 strengths, 3 concerns, 3 recommendations
- Standard Three: 6 strengths, 1 observation, 1 recommendation
- Standard Four: 4 strengths, 2 concerns, 2 recommendations
- Standard Five: 2 strengths, 3 concerns, 1 recommendation
- Standard Six: 10 strengths, 4 concerns, 4 recommendations
- Standard Seven: 6 strengths, 3 concerns, 0 recommendations (overlap with Standards Five and Six)
- Standard Eight: 3 strengths, 5 concerns, 2 recommendations
- Standard Nine: 6 strengths, 8 concerns, 7 recommendations
- Standard Ten: 4 strengths, 2 concerns, 2 recommendations

Total recommendations: 25 recommendations of which 9 unanticipated.



## **Appendix 5. Condensed Summary of the ASEH Reaccreditation Report 2003**

Total length: 4 pages

2 authors

Major sections consist of:

- Background:
  1. Basis (in accordance with statutes)
  2. Task (four year cycle of reaccreditation audit)
  3. Information about the school (change of ownership in 2002)
  4. Team members (2 day visit, 2 auditors i.e. “experts”)
- Pre-visit remarks:
  1. school was duly informed of reaccreditation visit
  2. school did prepare very professionally for the audit
- Observations: Management (4 paragraphs), Infrastructure (2 paragraphs), Faculty (1 paragraph)
- Conclusion (1 paragraph)
- Other (recommends accreditation of a campus site housing the partner university degrees)
- Recommendations
  - A) ----- is reaccredited for another four years.
  - B) New campus site should undergo accreditation as soon as possible.

## **Appendix 6. Condensed Summary of the ISO Internal Audit Report 2007**

Total length: 4 pages

1 author

Major sections consist of:

1. Human Resources: 3 minor non-conformities, 2 major non-conformities
2. Operations: 5 minor non-conformities, 4 major non-conformities
3. IT: 3 minor non-conformities
4. Admissions: 2 minor non-conformities
5. Academic processes: 1 minor non-conformity, 5 major non-conformities
6. Library: could not be audited due to moving
7. Internship and Placements: not audited

Total non-conformities: 25 non-conformities

Total major non-conformities: 11

Total minor non-conformities : 14

Conclusions: 5 major gaps identified:

- no indicators related to performance criteria for control of processes
- no consistent reporting of QMS outcomes
- suppliers' evaluations not conducted
- staff development and evaluation process not in place
- no safe backup system of electronic records

Therefore, "the ----- quality system was not able to demonstrate sufficient conformity with ISO standards and could not provide sufficient structure to support continuous improvement."

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