SHARINE A. ISABELLA

Tying Down
Global to Local

Identifying the
influential factors
affecting the progress
and outcomes of
accreditation processes
in Dutch-Caribbean
universities

TYING DOWN GLOBAL TO LOCAL

IDENTIFYING THE INFLUENTIAL FACTORS AFFECTING THE
PROGRESS AND OUTCOMES OF ACCREDITATION PROCESSES
IN DUTCH-CARIBBEAN UNIVERSITIES

TYING DOWN GLOBAL TO LOCAL

IDENTIFYING THE INFLUENTIAL FACTORS AFFECTING THE
PROGRESS AND OUTCOMES OF ACCREDITATION PROCESSES
IN DUTCH-CARIBBEAN UNIVERSITIES

DISSERTATION

to obtain

the degree of doctor at the University of Twente,

on the authority of the rector magnificus,

prof. dr. H. Brinksma,

on account of the decision of the graduation committee,

to be publicly defended

on Friday 31 October 2014 at 14:45hrs

by

Sharine Annij Isabella

born on 26 July 1963
in Willemstad, Curaçao

This dissertation has been approved by the promoters:

Prof. dr. J. Enders
Dr. D.F. Westerheijden

Preface

Based on an incessant professional curiosity to gain more knowledge and insight into the factors that might have an impact on the progress and outcomes of accreditation processes, I embarked on a PhD journey to quench my thirst. I knew in advance that I had to find a way to tie down the global requirements to my limited professional and scientific possibilities in Curaçao in order to achieve this coveted personal goal. "It wasn't easy, but it was worth it", as the main verse of one of my favourite songs express. A song I played countless times during my work out walks at Koredor and Janthiel to reflect on my doctoral thesis, to cope with the doubts and triumphs and to receive inspiration to continue my tough, yet pleasant PhD-journey. It was during one of these moments that I was inspired with the words for the content of this Preface, as also happened with several parts of this dissertation. By repeating countless time "Push Sharine Push", surrounded with relentless support of a wonderful group of family, friends and colleagues, it was possible for me to *'Tie down global to local'*.

I want to thank all who contributed in one way or another to providing me with this wonderful opportunity to go through a doctoral journey and supported me to reach a successful end. First of all I want to deeply thank my supervisors. Jürgen Enders, I am grateful for your efforts to guide me through this process, even though for the last part you were no longer employed at CHEPS. You provided me with critical feedback at the most important crossroads during my PhD process. Don Westerheijden, I greatly appreciate your invaluable guidance, constant support, critical but constructive feedback, in-depth expertise and open-hearted empathy. A special thanks to the CHEPS family who made me feel at home each time I was working on my thesis in Enschede. Particular gratitude to the CHEPS-secretariat, Ingrid, Karin and Miriam, for providing me with the necessary administrative and operational support.

A special word of thanks to my university, University of Curaçao, for granting me the opportunity to embark on this PhD-journey. You will receive returns on your investment. With the acquired knowledge and expertise I will further contribute to paving the internal roads towards attainment and maintenance of the achieved accredited status.

Furthermore, I owe a great deal to the universities I could work with during my dissertation project. In this respect, I am indebted to Juliet Chieuw (University of Aruba), Glen Yeung and Marianne Visser (University of St. Martin), Walter van Uden and BartJan Wattel (HZ University of Applied Science) and Marie-Jet Fennema (Utrecht University) for arranging the possibilities to conduct the interviews and facilitating me with all the documents needed. Thanks as well for your great support during the data collection period and your critical review of draft case descriptions. Gert Schaap (University of Curaçao) thank you so much for providing me with critical feedback on the draft UoC-case and the comparative analyses. A warm-hearted thanks go also to the 46 interviewees who participated in my study. Your immediate

willingness to provide valuable information of your experiences with accreditation processes made conducting my research a feasible endeavour.

My two paranimphs: Margo Groenewoud, my imperishable colleague at the UoC, thank you very much for your continuous encouraging words and for our professional and academic debates helping me through each step. My special nephew Destry Isabella, you contributed in many ways to the realization of this effort. Thank you for always being there whenever I needed you.

Deep grounded thanks to my family: my lovely brother Lionel and my two great sisters, Monica and Aishel, who in their own special way supported me through this process. I will never forget the relaxing moments we shared together while I was exhausted from sitting behind my PC and your encouraging words each time we talked. A profound appreciation to my nieces Janice, Sue-Ellen and Nicole and my nephews Jason, David and Randy who took care of my house, plants and dogs while I was away in the Netherlands working on my thesis. Your contribution means a lot to me.

I want also to extend my warm-hearted gratefulness to many friends who encouraged me during this PhD-process. Special thanks to Jan, Synella, Setty, Percy, Royston and André for your continuous positive words, your patience, endlessly inspiring me to hold on, supporting me each time again and above all for your thoughtful love. I will always remain grateful that you were there helping me to stand up again during the difficult moments and for celebrating with me each step forward I made.

Thanks to all my colleagues, in particular Yrdja, Sammy, Daynara, Gerda, Louella, Peter and Liesbeth, for your support and endurance. You helped me more than you can imagine.

Last, but not least, a profound and lovely thanks to my late parents. My beloved mother Imelda Isabella-Piar, who in her special Bonairean way raised me, coached me, taught and showed me unconditional love. My treasured father Wilfred Isabella, who taught me to believe in myself, to have firm discipline, to persevere in life and who always told me that there is no love without care. I know that where you two are now, you are enjoying my achievement as much as I do and that you are proud of me. Thanks Mama and Pachi for all you did for me, you did an awesome job. Yes, WE did it!

Sharine A. Isabella,
Curaçao, October 2014

Contents

List of Tables

16

List of Figures

List of Abbreviations

BKO	Basic level of teachers' certification applied in universities in the Netherlands (Basis Kwalificatie Onderwijs)
CHEA	Council for Higher Education Accreditation in USA
CHEPS	Center for Higher Education Policy Studies
CQA	Center for Quality Assurance of the University of Aruba
DQA	Department for Quality Assurance of the University of Curaçao
EHEA	European Higher Education Area
ENQA	European Association for Quality Assurance in Higher Education
EQAR	European Quality Assurance Register for Higher Education
ESG	Standards and Guidelines for Quality Assurance in the European Higher Education Area
EUA	European University Association
FDA	Development Fund Aruba
HBO	Professionally oriented programs according to the Dutch higher education system
HE	Higher education
HZ	HZ University for Applied Science
IFQM	Institutional Quality Steering Group of the University of Aruba
INQAAHE	International Network for Quality Assurance and Accreditation in Higher Education
ICUC	Inter-Continental University of the Caribbean
IPA	Teachers Training Institute at Aruba (Instituto Pedagógiko Arubano)
LUA	Legal Act of the University of Aruba
LUoC	Legal Act of the University of Curaçao
NACSI	Netherlands Antilles Centre for School Improvement
NQA	Netherlands Quality Agency
NVAO	Accreditation Organization for the Netherlands and Flanders
O&K	Departement of Education & Quality at HZ University for Applied Sciences (Bureau Onderwijs en Kwaliteit)
O&O	Department Education & Research at Utrecht University (Directie Onderwijs en Onderzoek)
OECD	Organisation for Economic Co-operation and Development
PDCA	Plan, Do, Check and Act cycle
QANU	Quality Assurance Netherlands Universities
SACS	Southern Association of Colleges and Schools in USA
SKO	Senior level of teachers' certification applied in universities in the Netherlands (Senior Kwalificatie Onderwijs)
SOAB	Stichting Overheidsaccountants Bureau

TEP	Teachers Education Program offered at USM
UA	University of Aruba
UDC	University of the Dutch Caribbean
UNA	University of the Netherlands Antilles
UNESCO	United Nations Education, Science and Culture Organization
UoC	University of Curaçao, Dr. Moises Da Costa Gomez
USM	University of St. Martin
USONA	Funding agency in Curaçao distributing financial resources granted by the Dutch government
UU	Utrecht University
UVI	University of Virgin Islands
UWI	University of the West-Indies
VBI	Evaluation agency doing the external peer review of existing programs in the Dutch accreditation system
VSNU	Association of Dutch Academic Universities
WHW	Higher Education Act in the Netherlands
WO	Academic higher education programs according to the Dutch higher education system
WUB	Legal Act of university's governance structure in the Netherlands

1 Introduction

This chapter provides an introduction to the study that is reported in this dissertation. First, the topic of study is introduced, followed by a brief explanation of the research domain: accreditation process in (small) universities. Then, some background information of the three target universities in the Dutch Caribbean is presented, followed by the main highlights of their accreditation processes. Next, the research objectives and questions are discussed as well as the relevance and contributions of this study. Subsequently, the research process is outlined, including a concise explanation of the research method and the process of data collection and analysis. The chapter ends with an overview of the further content of the dissertation.

1.1 Topic of study

This study aims to identify encouraging (enablers) and hindering (barriers) factors during accreditation processes in three Dutch-Caribbean universities, namely University of Curaçao (UoC),[1] University of Aruba (UA) and University of St. Martin (USM). The focus will be on UoC, since this is the only one of these three universities which has completed the first accreditation cycle for its programs. According to the strategic plans of these universities attaining and maintaining accreditation will provide them with a worldwide recognized confirmation of the quality of their programs (University of the Netherlands Antilles, 2011b; University of Aruba, 2004; University of St. Martin, 2011). In addition, according to these strategic plans, accreditation guarantees that academically oriented and highly skilled manpower are delivered to the communities of Curaçao, Aruba and St. Maarten, who in turn will contribute to the further sustainable socio-economic development of these young countries and the achievement of the national goals.

This study is necessary to contribute to the understanding of the accreditation processes at the universities. It is important for universities to attain and also retain an accredited status in this globalized world, regardless of their external and internal contexts. Kwikkers et al. (2003) claim that in this contemporary world not being accredited simply means not being globally competitive. Dodd (2004) asserts that as the world seems to grow smaller and smaller non-accreditation entails a general depreciation of the perceived capacity of an educational institution to fulfil its mission, even to its surrounding community. Non-accreditation can have serious implications for the further development and even continued existence of the higher education institution. Thereby, from national and international perspectives small universities, especially when located in less-developed regions such as the Dutch Caribbean, face great challenges to tie down the global quality standards to their local possibilities (Miller, 2002; Beckles et al., 2002; Goddard and Puukka, 2008; Parkins, 2007). This briefly explains the title of this study "Tying down Global to Local".

Studying the accreditation processes in the Dutch-Caribbean universities is important in order to gain in-depth knowledge and understanding of the different kinds of internal organizational forces that exert influence on the progress and outcomes of these processes. Eventually this understanding will facilitate the future course of these processes and in the long run enhance the universities' chance to attain and maintain the accredited status. To contrast with these three Dutch-Caribbean universities, the accreditation processes of two universities located in the Netherlands—their former colonization motherland—is examined to find out if, regardless of the perceived differences, the identified enabling and hindering factors during accreditation processes in the Dutch universities have the same effect in these processes in the Dutch-Caribbean universities. All these universities ought to be accredited by the Accreditation Organization of the Netherlands and Flanders (NVAO). In order to

---

[1] Previously the *University of Curaçao, Dr. Moises Da Costa Gomez* (UoC*)* was named University of the Netherlands Antilles (UNA). As of November 6, 2013 UNA became UoC.

determine similarities in the processes at the universities, besides the main focus on the accreditation processes and the achieved results, relevant subtleties of the national context of both groups of universities are also disclosed.

1.2 Research domain

An accreditation process in higher education implies that the institute is working towards the attainment of an accredited status by an (inter)nationally recognized accreditation organization. Accreditation is awarded when the institution complies with the agreed quality standards. According to the European University Association (EUA) "The basic idea of accreditation (of which there are different interpretations) is that it is a formal, published statement on the quality of a programme or institution, following an evaluation based on agreed standards" (European University Association, 2001, p.60). In the Salamanca Convention of EUA it is further stated "Accreditation is a process and a status: a process in that it gives the opportunity and incentive for improvement and a status in that it provides public certification of acceptable quality" (Ibid). Kwikkers et al. (2003) affirm this statement by emphasizing that attaining accreditation is a guarantee that the accredited entity meets an internationally approved set of quality standards. Accreditation is hence considered as a widely used instrument for external quality assurance, mostly linked to an internal quality assurance system.

To receive accreditation higher education institutions need to prove that mechanisms and processes that guarantee continuous quality improvement are effectively implemented. Douma (2004) states that implementing a continuous quality improvement process within a solid quality assurance structure is essential for reaching the goal of accreditation. According to this author accreditation is about both quality assurance and quality enhancement. Redmond et al. (2008) note that quality assurance addresses the issue of product or service conformance. The aim is to prevent poor-quality products or services from being delivered in the first place by focusing on processes and emphasizing prevention rather than cure. Dew and Nearing (2004) and Houston (2007) indicate that quality enhancement requires a deliberate change process that is directly concerned with adding value, improving quality, and implementing organizational transformational change. These authors further state that quality enhancement aims to develop a commitment to continuous improvement. This implies that the concept of always trying to do things better is applied at all organizational levels. It requires the development of a culture within the organization where staff strives consistently, effectively and incessantly to improve the quality of the education provided as part of an integrated quality culture.

Several researchers point out that while going through accreditation processes higher education institutions experience different kinds of influential forces, which can become enablers or barriers during such a process and are determinative for its progress (Dodd, 2004; Lomas, 1999; Martin and Stella, 2007; Redmond et al., 2008. Eventually these forces also affect the final result of these processes. Analysis of literature, which will be elaborated in the following chapters, reveals that some

internal organizational factors have an impact on the progress of accreditation processes and consequently on the achieved outcomes. In fact, in order to lead accreditation processes in the desired direction of achieving the accreditation goal the reinforcing (enabler) or countervailing (barrier) forces during such processes need to be identified. This overview of enablers and barriers of accreditation processes will contribute to the expansion of the current body of knowledge and create more in-depth insights with regards to successful design, implementation and monitoring of accreditation processes. Accreditation processes generate several issues that require attention. One issue is the way internal quality assurance and improvement is organized and carried out. What should be done, when, who are involved and how these processes are directed and implemented are important issues to take into consideration while planning and executing an internal process to guarantee both quality assurance and quality enhancement. Another significant issue concerns how the external quality assurance process, e.g. accreditation, is prepared and realized. The question of accountability, responsibilities and ownership determines the progress and success of both the internal and the external quality assurance processes. As will be explicated in chapter 4, evidently the link between the internal quality improvement processes and the external quality assurance process is of great relevance for the accreditation results. In fact, literature analysis underlines this relationship as a determinant for the attainment of an accredited status.

Literature analysis further reveals that insufficient attention has been paid to the particularities in accreditation processes in (small) universities located in less developed global areas. Most available contributions mainly address accreditation from the demands and requirements attached to accreditation processes taking place in resource-full, large universities located in the developed part of the world. Alderman and Brown (2005), Gouws and Waghid (2006), Uvalic-Trumbic (2007) and Wright et al. (2004) contend that while the attainment of internationally accepted quality standards is of paramount importance for higher education institutions located in less developed countries, there are too few resources available to assist the academic staff to improve the quality of their teaching. In addition, generally, the higher education institutions in these countries still need to build up a quality culture and mostly do not have the infrastructure to sustain the realization of their goals. They have to function with limited resources, yet despite these limitations they need to cultivate and project both the national and the international profiles associated with a university status of worldwide quality. These higher education institutions recognize that becoming part of international networks will depend crucially on worldwide recognition of the quality of the degrees that they award. Beckles et al. (2002) and Miller (2002) observe that in order to attain such recognition, higher education institutions in less developed nations must undergo accreditation processes that have been primarily designed for the industrialized nations.

This makes studying accreditation processes in Dutch-Caribbean (limited resources, located in less developed area) and Dutch (resource-full and located in an industrialized country) universities to finally identify the influential factors a rich,

relevant and interesting object of study. In fact, the main determinant factors during accreditation processes in small universities require elaborate attention. The current body of knowledge does not seem to provide enough support for the implementation of such processes and the identification and elimination of potential limitations they are confronted with. The current body of knowledge requires expansion through integrating existing insights and developing new ones in order to obtain a more coherent perception on the influential factors during accreditation processes, in particular in small universities located in less developed regions. This research is therefore tailored to a particular type of universities, while concentrating on both their internal quality assurance policy and the external quality assurance process in order to attain and retain accreditation.

1.3 Higher education in the Dutch Caribbean

The Dutch Caribbean consists of Suriname, Aruba and the five islands that until 2010 were part of the Netherlands Antilles. As of October 2010, the constitutional constellation of the Netherlands Antilles has changed and this country ceased to exist. Curaçao and St. Maarten, like Aruba already did in 1986, have become autonomous countries in the Kingdom of the Netherlands. The remaining three islands Bonaire, St. Eustatius and Saba are integrated in the Netherlands as municipalities with a special status. Currently, apart from Suriname, which obtained its independent status from the Netherlands in 1975, all the Dutch-Caribbean islands still have a dependent political relationship with the Netherlands, though this bond for Curaçao, Aruba and St. Maarten seems to be loosening up during the past decades.

1.3.1 Higher education development

Institutions providing higher education are located in all Dutch-Caribbean countries. Not all are nationally funded, and some are even American 'off-shore'[2] universities. The higher education institutions funded by the national government are considered as key players in the pursuit of a higher level of socio-economic development and the training of highly educated professionals. Researchers such as Narain (2000, 2004) and Duits (2004, 2005) argue that increased investments in higher education in these small communities have to be considered as a very important instrument to keep up with global developments and to create a knowledge economy for the 21st century. UoC, for instance, was established in 1979 as the national university for the Netherlands Antilles to produce more local graduates at a higher educational level to contribute to the further sustainable socio-economic development of these countries and as such was

---

[2] Off-shore universities mostly cater to foreign students who during their study immigrate to another country to obtain (part) of their (under)graduate degree. These institutions are merely private medical schools with worldwide, wealthy students, whose entrance into American universities has been denied. They are willing to invest highly in their education to be able to eventually become medical doctors. Local governments agree to the establishment of these institutions on their territories based on their apparent contributions to the national economies.

and still is considered to be an important tool for national capacity building (Commissie Hoger Onderwijs, 2002; Narain, 2004). The government also envisioned that with the establishment of a national institution for higher education the phenomenon of 'brain drain'[3] could be addressed and controlled as this still is one of its serious concerns.

In the Dutch-Caribbean countries during the past decade higher education has expanded both in terms of numbers of students and the types and number of programs offered by public and/or private higher education institutions, as will be explicated in chapter 6. As pointed out by several authors, this expansion, diversification and privatization of higher education in the Caribbean region can be considered as a response to a variety of developments (Commissie Hoger Onderwijs, 2002; Duits, 2005; Leo-Rhynie and Hamilton, 2007; Miller, 2002; Parkins, 2007). First, the emergence of the globalization era affected higher education in the (Dutch) Caribbean (Duits, 2005). Globalization and rapidly evolved changes in almost all sectors affected the labour market. Consequently there is increased need for highly skilled manpower willing to keep up with worldwide professional developments. Globalization has also led to easier access to information, which for many people created the need to be educated, personally and professionally. Thereby, the recognition of the importance of lifelong learning linked to the need for continuing professional education is also a factor affecting higher education in the Dutch-Caribbean, based on the emergence of globalization[4] (Commissie Hoger Onderwijs, 2002). Secondly, national governments more and more expect higher education institutions to deliver qualified manpower to contribute to the sustainable development of the country (Commissie Hoger Onderwijs, 2002; Marginson and Van der Wende, 2007; Parkins, 2007). This increasing demand for more highly-skilled workers is reflected in the quantitative and qualitative development of higher education in the Dutch Caribbean.

1.3.2 Particular characteristics of the Dutch-Caribbean universities

The three Dutch-Caribbean universities, UoC, UA and USM, can be described as small or even very small. They offer a wide variety of educational programs to meet national needs and demands in relevant professional fields. Table 1-1 contains some basic data of these universities to illustrate the size of these universities.

Table 1-1 Basic data of the Dutch-Caribbean universities in 2012

	Established in	Number of Faculties	Number of programs	Number of students
UoC	1979	5	27	2200
UA	1988	4	8	550
USM	1989	2	3	200

---

[3] To be further explained in section 6.3.

[4] Chapter 3 explores various aspects of the globalization trend related to higher education.

The common cultural, political, economic and educational developments have a great impact on the functioning of the Dutch-Caribbean communities and thus also on their national universities. Several educational reports and educational specialists note that the studied universities are considered as a national strategic instrument for knowledge development and for facing economic, social and cultural challenges the communities need to deal with, especially with the recent changes in their political status within the Kingdom of the Netherlands (Commissie Hoger Onderwijs, 2002; Departement van Onderwijs, 1995, 1999; Directie Onderwijs Aruba, 2002; Narain, 2004; University of St. Martin, 2011). This particular function is also specified in their legal Acts (Antilliaanse overheid, 2004; Arubaanse overheid, 2011; University of St. Martin, 2003).

From an analysis of some literature on globalization, and contrasting the literature on the Dutch-Caribbean context, three elements stand out that make those national universities potentially different from the 'typical' university that most authors addressing issues concerning higher education institutions seem to have in mind:

- They are located in a low/medium income environment in a post-colonial society, not in a rich and powerful, former colonizer country;
- They are the only university funded by the local government, located in a very small community, not in a large country with tens or hundreds of higher education institutions;
- They are quite small universities, offering a wide range of programs, both professional and academic.

The national context of these universities has various common characteristics, e.g. geographical position, demographic features, political background, economic developments and socio-cultural aspects. Moreover, several similarities can be pointed out with regards to the high expectation of their contribution to the sustainable development of their countries. Creating leaders for the future, initializing and/or formalizing debates on current national issues, executing research on local concerns which advises policy, and participating as experts in national committees are some of the permanent contributions these universities are projected to provide as specified in their regulations and anticipated from the public (governmental and non-governmental) and private sector (Antilliaanse Overheid, 2004; Arubaanse Overheid, 2011; University of the Netherlands Antilles, 2011d; University of St. Martin, 2003). Although it is nowhere clearly articulated, the target entities are aware that they are expected to operate bearing in mind two main objectives:

1. To produce high level manpower that plays an important role in the further sustainable socio-economic development at national level;
2. To connect and adapt to international developments and standards in higher education so the first objective complies with worldwide requirements.

Both objectives imply a specific set of expectations and demands regarding the managerial, educational and operational processes. Attaining and retaining accreditation for their educational programs is an essential requirement to allow them to realize these objectives (University of the Netherlands Antilles, 2005; University of

Aruba, 2004; University of St. Martin, 2009, 2011). In order to work towards the achievement of their objectives and furthermore attain the accredited status these small universities need to deal with challenges due to their national and internal organizational contexts. Some of these challenges are: instability in institutional leadership, limited resources (human, financial and infrastructural); moderate focus on continuous quality improvement; slow development of quality culture and little experience with internal and external quality assurance processes. Furthermore, due to the small scale and economic state of their country no possibility for objective and independent peer review at national level exists. There is a lack of a critical mass to maintain a vibrant academic culture. Even the internet, although it provides a wealth of information, is not a viable means of connecting to the networks which embody the communities of practice of international quality assurance. The lack of the means for attending conferences and associations' meetings limits possibilities to remain in contact with the international academic communities. However, the major challenge for this study is to identify the internal influential factors that contribute, facilitate or impede the accomplishment of the accredited status.

1.4 Background of accreditation in the Dutch-Caribbean universities

During the past decades the issues of quality improvement and accreditation have been discussed in the Dutch-Caribbean countries at governmental levels as well as within the national universities. Most governments would like their universities to be accredited on short notice, even if the mandate for accreditation is not yet legally binding. During the past decade these universities have been experiencing significant pressure to improve quality and meet national expectations as well as international demands, even if they are constrained by their size, limited resources and particular contextual factors. Consequently, to achieve accreditation is a challenging process, particularly for these small universities located in a less developed region as they are vastly influenced by external and internal forces. Nevertheless, in response to (inter)national developments in the field of quality in higher education the national universities in the Dutch Caribbean have initiated accreditation processes to prove that they can produce highly qualified graduates.

The start of the accreditation processes in the Dutch-Caribbean universities was driven by various external developments in the field of higher education. The Bologna Agreement (1999) and its implications for higher education institutions in Europe, and the Netherlands in particular, can be considered as the starting point for this effort. This European development was indeed followed by an agreement between the three ministers of education in the Kingdom of the Netherlands (Aruba, the Netherlands and the former Netherlands Antilles), which specifies that all Dutch-Caribbean universities funded by the national government have to seek accreditation by the same accreditation organization as the one operating in the Netherlands, namely NVAO (Departement van Onderwijs, 2001). However, by the end of 2012 there was still no legal Act on this issue available in these countries.

According to several reviewed documents, another reason that led to the start of the accreditation processes in the Dutch Caribbean was the incessant concern of Antillean and Aruban governments with regards to the 'brain drain' dilemma and consequently the responsibility the national governments granted to the national universities to address this issue (Directie Onderwijs Aruba, 2002; Commissie Hoger Onderwijs, 2002; University of St. Martin, 2011; University of Aruba, 2004; Narain, 2004). Offering accredited programs would most probably have a positive effect on the amount of students who stay on the islands to continue their study at tertiary level. As a consequence, more highly qualified leaders could be educated to contribute to the achievement of national goals enabling further sustainable socio-economic development of the communities.

In addition, as is stated in their strategic plan, the Dutch-Caribbean universities also want to position themselves more prominently on the international market of higher education and the attainment of an accredited status will enable this endeavour (University of the Netherlands Antilles, 2001; 2005a; 2011d; University of St. Martin, 2011; University of Aruba, 2004). For these universities, holding an accredited status implies the achievement of a more acceptable position on the national, regional or even global market and their potentials for strategic alliances with other higher education institutions all over the world would be improved. An accredited status will also enable these universities to engage in structural exchange of teachers and students and moreover provide their graduates with more possibilities to continue further study abroad. In fact, these universities already have working relationships with several higher education institutions, mostly in the Netherlands and in the United States. However, more and more these collaborative partners require these universities to have their programs accredited so their level of quality could be secured. Consequently achieving accreditation has become essential.

While UoC by the end of 2012 has successfully gone through the accreditation process for 24 of its 27 programs, UA expected its first site visit in November 2013 and USM in December 2014. These two universities are thus in a preliminary preparatory stage of accreditation compared to UoC. At UA during the past years a wide variety of activities have been implemented in order to assure and improve the quality of all its undergraduate and graduate programs, whilst by the end of 2012 USM was in the starting blocks of its first accreditation process by NVAO, directed to only the Teachers Education Program.

1.5 Research objective and research questions

In this study the focus is on identifying internal influential factors during the accreditation processes in three small Dutch-Caribbean universities, contrasting with two larger ones in the Netherlands. The route of the accreditation processes that took place in these five universities will be examined. Internal organizational variables are the objects of the study, whilst aspects of the national context of each studied university will be taken into due consideration.

The research objective can be divided into two sets of goals. The first set of goals is the scientific-theoretical goals which refer to acquiring a more comprehensive understanding of the variables that have a positive or negative effect on the progress stages and finally the outcomes of accreditation processes. This knowledge and understanding will expand the current body of knowledge on accreditation processes in general. A more comprehensive understanding of the internal influential variables affecting the progress and outcomes of accreditation processes will be acquired.

More practical-oriented goals form the second set of goals. This study can contribute to improving the future organization of accreditation processes in small universities located in less developed global areas, and hence make a successful result more easily feasible. More in particular, this study seeks to provide systematic insight in the way UoC, UA and USM have organized and are still organizing their accreditation processes. Then, based on the comprehensive understanding of accreditation processes in general, enhanced knowledge and insights of the accreditation processes in the universities in Curaçao, Aruba and St. Maarten in particular could be developed to be used to eventually improve their progress and hence make accreditation more attainable.

In order to achieve the research objective and the inferred set of goals the following overall research problem has been formulated:

> **What are the internal influential factors that impact accreditation processes in nationally funded universities in the Dutch Caribbean and how do they affect the final result of such processes?**

This leads to the following research questions:

1. **What are the general needs and requirements for accreditation, considered from an international point of view?**

In order to provide an answer to this research question relevant organizational theories are reviewed, followed by a discussion on organizational change processes in higher education. This information serves to set the universal background of the focus on international quality standards in higher education. Actually, the topic accreditation will be examined as an external quality evaluation instrument that causes internal organizational (change) processes in higher education institutions. Information will also be gathered on the main reasons for this type of institutions to embark on accreditation processes; the requirements, benefits, limitations and consequences will be discussed. This first research question is necessary to explain the national, regional and international background related to the accreditation trend, so the accreditation effort of the studied entities can be better understood.

2. **Which are the potential internal influential factors that in general might have an impact on the progress and outcomes of accreditation processes?**

This question concerns the identification of potential encouraging and impeding factors during accreditation processes, finally affecting their results. To answer this second research question based on literature analysis potential internal influential

factors will be identified and how they can operate will be described. Consequently, a research model is conceptualized based on the theoretical framework (literature review), and the exploratory phase of this study (a pilot case study and interviews). This conceptualized research model is the main instrument used for the empirical part of this study which examines the impact of the identified potential internal influential factors on the progress and outcomes of the studied accreditation processes.

3. **How do the three target universities organize their accreditation processes, and how do they contrast with the two comparative universities?**

This research question implies a thorough description of the way the accreditation processes in the five studied universities are organized. Based on the research model, the identified dependent and independent variables guide the case description of each university: UoC, UA, USM, UU and HZ. This will result in an overview of the impact of each independent variable on the dependent variables. Finally, the actual internal influential factors of each of these accreditation processes will be identified.

4. **Which factors influencing the accreditation processes can be identified as actual enablers or as actual barriers during such processes and what lessons can be learned for the benefit of the three focus universities with regards to their future attempts to attain and retain accreditation?**

After identifying the actual internal influential factors during accreditation processes in the studied entities based on a within-case analysis, two within-group analyses, followed by an across-group analysis will take place. The comparative analyses will contribute to a deeper understanding of the effect of the internal influential factors during the accreditation processes. This will lead to an answer for the main research question and provide the necessary in-depth knowledge and insights to manage accreditation processes more successfully in the future. Finally a practical framework will be developed based on the conclusions from the data analysis and a reflection on the conceptualized research model. This concluding framework can be used as a guidance for decision makers in higher education institutions to determine on which variable and/or indicator the focus should be, thus contributing to the expansion of the current body of knowledge on the research topic.

1.6 Relevance and contributions of the study

This study seeks to contribute to ongoing scientific research as well as to current policy discussions on accreditation in general, and accreditation processes in small universities in particular. A review of the literature demonstrates that a wide range of studies is available on the organization of accreditation processes in higher education institutions and its impact on the accreditation goal. Several authors dedicated themselves to explain the effect of possible internal influential factors during such a process. As will be elaborated in chapter 4, often these explanations are directed towards large higher education institutions in relatively rich countries and not towards small universities in less-developed world regions. By the end of this study the variables exerting influence on the effort of small universities located in the Dutch

Caribbean, to reach their accreditation goal will be described. This will be one of the novel contributions of this study to scientific research.

Based on the current shortage of scientific investigation on how small universities located in a less-developed region deal with international accreditation processes designed (perhaps implicitly) for wealthier universities, this research is unique. More specifically, influential factors related to the internal organizational context of the studied Dutch-Caribbean universities while aiming to achieve the accredited status will be identified.

A comprehensive overview of influential factors that are particularly relevant for informed decisions prior and during accreditation processes in small universities is not yet available. A framework will be generated based on the research findings that may also be utilized in similar studies regarding comparable case studies. Also the body of knowledge containing information on the internal influential factors during accreditation processes is expanded due to the insights generated from this study.

The research findings can also be used in the daily practice of higher education institutions, while they aim to attain and retain their accredited status. At institutional managerial level the research findings have great relevance and importance for the studied institutions and also for the governments of these countries with regard to their higher education policy. Such insights are particularly desirable since most higher education institutions, regardless of their context, characteristics and resources are forced to embark on accreditation processes to prove the quality level of their programs. Not only are they expected to be well managed and operating in an effective, efficient and innovative manner, but they have to provide high quality education offered by qualified teaching staff as well, regardless of their specific environment. This study will reveal these challenges for small universities located in less-developed global areas.

Each variable and indicator will be dealt with independently, although the link between them will be noted. The comparative case study analysis however, does provide information on the extent to which each particular indicator affects the accreditation process. Thereby, the research findings could be useful for other researchers interested in this research topic. The results of this study can also be relevant for similar higher education institutions worldwide, and can contribute to global debates on issues such as organizing and managing accreditation processes.

1.7 The research process

This study is based on a qualitative research approach and implies an explanatory, comparative case study analysis within and between two groups of higher education institutions:

A. Three, to a great extent nationally funded universities located in the Dutch Caribbean: University of Curaçao, University of Aruba and University of St. Martin;

B. Two predominantly nationally funded universities, located in the Netherlands, functioning as comparative cases for contrasting the first group: Utrecht University and HZ University for Applied Science.

The comparative case study approach best fits the objective of the study, in particular, to underpin empirically the assumption that the target universities are different from the ones that make up the 'tacit knowledge' of editors of the NVAO accreditation standards and manuals.

In figure 1-1 the research process is outlined. A pilot case study in one of the category A universities, namely UoC, some interviews at the start of the research process, and literature analysis have led to the conceptualization of a research model that guides the empirical study, and serves as the structure for the description and analysis of the five research entities.

Three methods for data collection are used in this study: document analysis, observations (participatory and direct) and semi-structured in-depth interviews. These methods of data collection as part of the description of the case studies are highlighted in figure 1-1 to illustrate that the study is mainly based on qualitative data analysis.
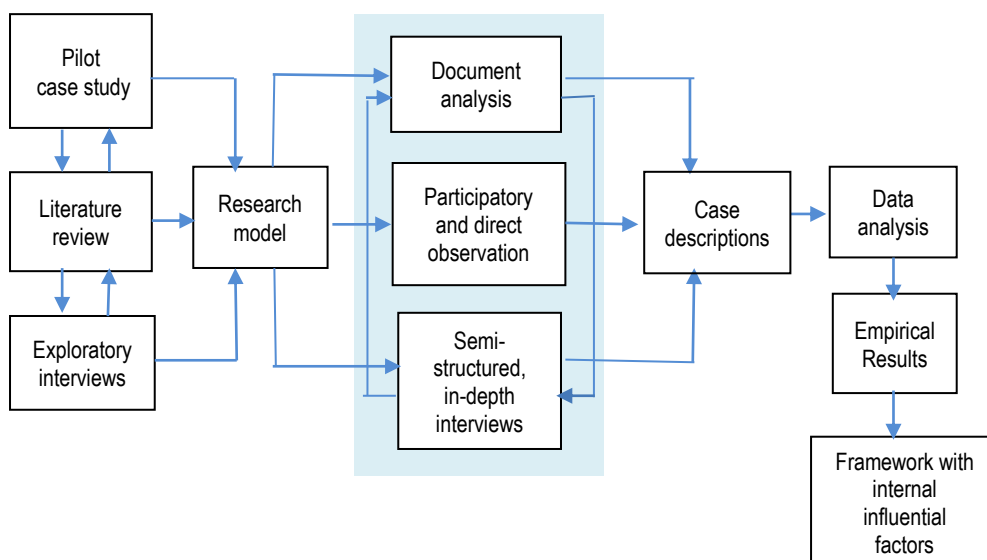
Figure 1-1 Outline of the research process

After conceptualizing the research model, based on literature review on the research topic (research questions 1 and 2), the national context and consequently the internal organizational context related to accreditation processes of the five studied universities are presented in order to obtain a comprehensive picture of the organization of these processes in the studied universities (research question 3). The within-case analysis will reveal the actual internal influential factors during accreditation processes and the similarities and differences between the five universities. Subsequently, comparative analysis is done between the category A universities, then between the two category B universities and then between group A and group B, illustrating the within-group and across-group analyses. At the end, the focus will be on the exerted influence of the identified internal influential factors on the progress and results of any accreditation processes, the UoC in particular (research question 4).

1.8 Outline of the thesis

The schematic overview of the research process in figure 1-1 illustrates the outline of this study. Besides this introductory chapter, this study is structured in three parts, as explained in table 1-2. In the first part the theoretical framework is presented. Part II contains the case descriptions. Finally, in Part III the main focus is on the comparison within and between the five studied cases and on conclusions that can be drawn in order to answer the research questions. The thesis concludes with some reflections and suggestions for future research.

Table 1-2 Outline of the thesis

	1.	**Introduction**	Introduces the accreditation concept and provides brief information on the accreditation process of the target universities; explains the research objectives and research questions; presents the outline of the thesis.
I. **THEORETICAL FRAMEWORK**	**2.**	**Influences on organizational change processes**	Elaborates on organizational theories and then focuses on organizational change processes, including internal and external change driving and restraining forces during such a process.
	3.	**Higher education institutions as changing organizations**	Presents the findings from the literature review on developments in the organizational context of higher education institutions and the encouraging and hindering factors during transformation processes in these types of organizations.
	4.	**Quality assurance and Accreditation in higher education**	Focuses on the accreditation process, considered as an organizational change process within higher education institutions and as one of the main instruments used to guarantee compliance with external (national and international) quality standards; explains the link between internal and external quality assurance; identifies the external and internal factors affecting an accreditation process within a higher education institution.
	5.	**Methodology and Operationalization**	Reports the methodological considerations and research design of the study and the case descriptions; presents the results of the exploratory pilot case study, relates the findings to the conceptual framework and conceptualizes the research model; elaborates on the operationalization of the independent variables, the design of the empirical case study and the method used to collect the necessary data.
II. **CASE DESCRIPTIONS**	**6.**	**Higher education context of the studied universities**	Describes the higher education context of the five studied universities based on the five descriptive factors; provides specific information on the educational context, in particular higher education and the emergence of accreditation in these countries; presents the external context of Dutch accreditation and the rules, procedures and quality standards of NVAO in order to explain the accreditation frameworks the studied universities need to comply with.
	7.	**The Dutch-Caribbean universities**	Describes the accreditation process of the three Dutch-Caribbean universities according to the five independent variables of the research model, specified in 17 indicators.
	8.	**The Dutch universities**	Same as Chapter 7, but for the two studied Dutch universities.
III. **COMPARISON AND CONCLUSION**	**9.**	**Comparative analysis**	Addresses the comparative analysis of three parts: a) comparison between the Category A case-studies b) comparison between the category B case-studies c) comparison between the two categories Relates the findings of the empirical study and the comparative analysis to the theoretical insights obtained previously.
	10.	**Reflection and Conclusion**	Concludes the research by answering the research questions; reflects on the designed research model to evaluate its applicability, its usefulness, its validity and its implications for further implementation in similar case studies; presents the final overview of internal organizational factors affecting accreditation process in small universities; provides recommendations for future research.

2   Influences on organizational change processes

The theoretical framework starts with an analysis of literature on organizational change processes. This chapter is relevant because accreditation processes can be considered as one of the reasons for diversified organizational change processes in higher education institutions. This chapter contributes to identifying internal organizational factors that may affect the progress and outcomes of organizational change processes. Describing organizational characteristics and explaining factors that may influence organizational change processes contribute to understanding where and how quality assurance as part of organizational improvement processes is positioned. By this means, accreditation as an instrument for external quality assurance in higher education institutions to serve as evidence of compliance with international quality standards could be better comprehended. By doing so, the conceptual foundation for this study is established and the topic under investigation is framed.

At the beginning of this chapter some relevant organizational theories are presented. Thereafter, the dynamics of emerging organizational changes are discussed. Next, external developments affecting the functioning of organizations are examined, followed by an analysis of literature concerning those internal organizational factors that may have an impact on organizational change processes. At the end the main organizational elements to be further studied in this dissertation are defined, the first step towards the conceptualization of the research model. This chapter focuses on the level of organizations in general; the specification towards higher education institutions will follow in the next chapter.

2.1 Organizational theories

A large body of literature on organization, organizational processes and organizational developments is available. Analysis of some relevant empirical studies reveals that during the evolution of organizational theory organizations have been classified in many ways depending on e.g. the life period, function and purpose, structure, culture, focus group, personnel characteristics, use of technology, size, relationship with their environment, and if they are directed for profit or non-profit purposes. In order to lay the groundwork for further examination of higher education institutions this section starts with identifying the main organizational characteristics. Then, some related organizational theories are explored. At the end, the implications of these findings for this study are explained.

2.1.1 Organizational characteristics

According to several scholars, an organization can be broadly defined as a group of people who cooperate with each other to pursue a common goal, create a product or perform a service (Boddy, 2008; Clark, 1972; Dent and Goldberg,1999; Donaldson, 2006; Gumport, 2000; Mintzberg, 1979; Senge et al., 2001; Vermaak, n.d.). Basically, organizations exist to perform tasks, produce outputs and/or generate and disseminate information. Dent and Goldberg (1999) state that members in the organization generate information and perform tasks based on the available resources to produce outputs in the form of products and/or services. They further declare that the purpose for which an organization exists has to be the foundation for everything its members do, including the choice of an appropriate way to organize. Organizations are geared towards a common goal in order to deliver products and/or services at an accepted quality level.

Several elements are required to create the appropriate organization that reaches its set objectives (Boddy, 2008; Bridges, 2009; Donaldson, 2001, 2006; Mintzberg, 1979, 1980, 1981; Vermaak, n.d.). Many authors listed main organizational elements to point out the commonalities and differences among organizations. For instance, according to Mintzberg (1979) the most important elements that contribute to achieving the desired set of outcomes in an organization are strategy, structure, people, resources and processes. Vermaak (n.d.) mentions with regards to the same issue the following elements: structure, strategy, systems, culture, management style and personnel and Boddy (2008) identifies structure, size, objectives, members, focus group, input resources, transformation process and outcomes as important organization elements.

In addition, Senge et al. (2001) express that each organization is a product of thought and interaction of its members. According to these authors actual challenges in the organizational behaviour are not only due to changes in policies, rules and procedures but also because of the mental patterns of individuals. They indicate that the organizational culture is important for the achievement of successful organizational performances. How people interact at all levels within and outside the organization and how they react to changes require appropriate arrangements at the organizational

level, thus illustrating the importance of leaders and managers as well as cultural elements in the organizational operations.

Literature on organizational behaviour shows that effective organizations need to take into account the environment in which they operate, their internal characteristics and the individuality of its employees (Boddy, 2008; Bridges, 2009; Dent and Goldberg, 1999; Giesecke and Mc Neil, 2004). Table 2-1 presents an explanation of some basic organizational elements, while at the same time categorizing them at these three aggregation levels: macro (environment), meso (organization) and micro (individuals) and some basic organizational elements, illustrating also that there are external and internal organizational factors influencing the organizational process towards the achievement of the set organizational objectives. However, as will be exemplified later on, there exist some grey areas in these strict categories, e.g. personnel is identified as individuals operating at micro level, while at the same time they form the human resources as part of the organization at meso level.

Table 2-1 Overview of main organizational elements

Aggregation level	Organizational Elements	Description
Macro	Interaction with external environment	The degree of interaction and interdependency between organizations and their environment differs depending on a variety of factors, such as the extent to which an organization depends on resources from its environment, the extent to which stakeholders are involved in daily organizational operations and the legislative rules and procedures organizations need to adhere to. This can be local, national, regional and international interactions.
Meso	Age	The years of existence of an organization.
	Size	The quantitative statistics of any organization, such as number of personnel, amount of financial resources, surface area, number of locations, etc.
	Mission statement	The reason for the existence of the organization that explains its added value and the directions it wants to take.
	Goal	The particular objectives the organizations are geared to reach.
	Structure	The way an organization is structured depending on their nature, type, rules, regulations and goals.
	Organizational process	The activities taking place within an organization in order to transform the input resources into the desired outcomes to reach the objectives.
	Resources	There are different kind of resources, such as human resources, financial resources, infrastructural facilities, technology and communication services, but also knowledge, talents and skills, all influencing the organizational processes.
	Culture	Customs, traditions, shared beliefs and values, and the way of interacting with each other create an organizational culture.
	Communication and information channels	The way people interact with each other and share information in an organization. There are formal and informal communication and information channels within any organization.
Micro	Leadership and management	The way an organization is managed, depending on the organizational structure and management and leadership style of those in that position. Managers can operate at different organizational level.
	Personnel	Organizations have employees, varying from small to large numbers of workers. There are also great differences between employees, their tasks, roles, skills, performances, salaries etc.

Actually, the commonalities of organizations attest to the large variety and divergence between them. Organizations vary in a number of ways: they are geared towards different goals and objectives; their customers and clients are not the same; they are built upon divergent structures; they differ in management approach; they create their own culture; their employees differ on numerous aspects; they make use of various technologies; their communication system differs; their relationship with their environment is not the same. Organizations also vary in age, size, scope and focus. So, no two organizations are really the same, even though they are all comprised of some basic elements. Clearly, this also applies to higher education institutions.

2.1.2 The open-system perspective and the contingency theory

Organizations can be considered as open systems as they are continually interacting with their environment. Open: they learn and develop in order to consistently adapt to their environment. System: a collection or combination of parts whose relationships make them interdependent (Boddy, 2008; Birnbaum, 1989; Carnoy, 2005; Hooiberg and Choi, 2001; Kraatz and Zajac, 2001). An open system interacts with its environment and elements of the environment have an influence on the open system. Open-system organizations are characterized by concrete goal-oriented strategies, hierarchical structures and solid delineation of roles and tasks. Interdependency and connections within subsystems in- and outside the organization and clustering at different levels are some main characteristics of open systems.

Following on the open-system theory, the relationship between the organizational environment, its structure and functioning receives more in-depth attention in the contingency theory (Donaldson, 2001, 2008; Lawrence and Lorsch, 1967; Mintzberg, 1980; Thompson, 1967). This theory holds that organizations adapt their structures in order to maintain a fit with changing contextual factors, so as to attain high performance. Consequently, according to the contingency theory it is important to identify the contingency factors that are relevant in the environment in which an organization operates. Actually, successful organizational performance is highly dependent on how the organization interacts with its environmental features. For any organization it is therefore important to determine the most effective internal organizational design that fits the organizational context. This theory for instance, suggests that stable environmental conditions call for centralized structures, while a dynamic environment requires a decentralized structure, thus assuming that the type of organizational structure is dependent on the organizational context.

Contingency theorists further claim that there is no single best way to organize an organization, to lead a company or to make decisions. An organizational leadership and decision-making style that is effective in one situation may not be successful in other situations. In other words, as Donaldson (2001), Lawrence and Lorsch (1967) and Thompson (1967) indicate the optimal organizational leadership and decision-making style depends upon various internal and external elements. The size of the organization, how it adapts itself to its environment, differences among resources and operations activities, assumptions of managers about their employees, strategies and

technologies being used are some of the contingent factors affecting the organizational functioning. Furthermore, the contingency thinking lies in the assumption that all these features have to be considered together: if one changes, this also requires changes in other features.

Contingency theorists perceive organizations as open systems interacting with their environment. Organizations need to be open to change in order to improve their performances. For decades, studies of Donaldson (2008), Negandhi and Reimann (1972) and Schoonhoven (1981), have addressed the environmental impact on organizational structure and function as part of the discussions on the contingency theory. Negandhi and Reimann (1972) added an additional environmental factor into the debates, while they explored the impact that socio-cultural variables in developing countries exerted on organizational structure. They found that the extent of industrialization of a country had different effects on the organizational design than other studies, e.g. Lawrence and Lorsch (1967). These findings seem to be of relevance for this study since the comparison will be done between two groups of universities; one located in a developed global-south area, while the other in the highly industrialized Western Europe.

2.1.3 The concept of the learning organization

The term 'learning organization' is widely used in literature, but a universally accepted clear definition is not acknowledged. Dill (1999) refers to a learning organization as "an organization skilled at creating, acquiring, and transferring knowledge, and at modifying its behaviour to reflect new knowledge and insight" (p.127). Senge[5] (1990, p.3, quoted by Meade, 2000, p.240) defines learning organizations as those organizations "where people continually expand their capacity to create the results they truly desire, where new and expansive patterns of thinking are nurtured, where collective aspiration is set free, and where people are continually learning how to learn together". Giesecke and McNeil (2004) point out that "learning organizations encourage their members to improve their skills so they can learn and develop. The staff becomes more flexible as they acquire knowledge and are more able to move around the organization. Learning organizations translate new knowledge in new ways of behaving" (p.55). Meade (2000) argues that learning organizations have to be able to learn and grow by searching for knowledge and are focused on developing and implementing new knowledge that will improve the core processes of the organization directed to continuous improvement. This review of definitions illustrates three basic elements of learning organizations: an organization skilled at acquiring new knowledge, transferring this new knowledge across the organization and modifying the way it operates. Several studies, including those of Dill (1999) and Meade (2000)

---

[5] Senge has gained worldwide popularity with his book "The Fifth Discipline: The Art and Practice of the Learning Organization" (1990). He described a framework with five key theoretical concepts for organizational learning: personal mastery, mental models, shared vision, team learning and systems thinking.

state that organizations need to operate as 'learning organizations' in order to guarantee their future existence in the globally competitive arena.

Dill (1999) declares that learning organizations can be generally identified by their concern with the persistent and systematic acquisition of internal and external knowledge, and on the processes and structures that will promote these activities. Giesecke and McNeil (2004) specify that a learning organization can acquire new useful knowledge through a variety of activities. On the one hand knowledge is gained through direct experience within the organization, on the other hand by searching for new knowledge from outside the organization's environment. Senge et al. (2001) assert that an organization can learn in two ways: either its individual members gain new knowledge or it incorporates people who bring with them knowledge new to the organization. In either case the information has to be transmitted to other members. Both the acquirement and dissemination of knowledge are necessary steps for an organization to develop as a learning organization.

Amidon (2005) emphasizes that in learning organizations empowering employees to be creative, self-motivated and eager to learn and improve themselves, and develop personal goals that are in alignment with the organizational goals is more meaningful than managing people. According to this author a learning organization is created when it is managed by individuals working collaboratively towards a common vision, rather than by top-down coercion. Learning organizations have the ability to adapt to the rapidly changing environment of the contemporary world and to anticipate the future. A learning organization thus acquires new knowledge and then shares and implements that knowledge in order to improve its functioning.

The main activities of a learning organization are: systematic problem solving, experimenting with new approaches, learning from past experience, learning from the experience and practices of others, transferring knowledge quickly and efficiently throughout the organization and changing of its behaviour (Amidon, 2005; Dill, 1999; Giesecke and McNeil, 2004). In a learning organization managers and staff seek professional learning, the exchange of information between employees to create new ideas and knowledge, and continuous improvement. To create a learning organization a foundation for constant learning is required, these authors further stated.

Giesecke and McNeil (2004) point out that the main elements in the establishment of a learning organization are awareness of the extreme relevance of learning and willingness of all employees to change and an environment that encourages openness. The organization's decision-makers are expected to be committed to the organization's goals, and the vision of the organization needs to support its core values. Enthusiasm, eagerness and willingness of the managers at all organizational levels are needed in order to share their power with employees and be committed to promote learning. Employees need to be willing to change because they want to change, not because of a top-down approach to change. So, at all levels in the organization there has to be commitment to learn, share and change.

2.1.4 Implications for this study

This overview of literature provides insights in the context of this study. Organizations can be often labelled as open-systems, operating in constant interaction with their environment, and can function as learning entities continuously acquiring, sharing and developing (new) knowledge. This illustrates the connection between open-system theory, the contingency theory and the theory on learning organizations. This study will use all three theoretical perspectives in order to elaborate and analyse accreditation processes. These theories will prove to be of extraordinary importance in the understanding of accreditation processes and the identification of internal organizational factors exerting influence on the progress and outcomes of these processes.

To conclude, a number of authors have addressed the complexities organizations have to deal with in order to perform successfully. One of the issues arising out of this literature exploration is the means by which organizations can best function in this contemporary changing world, while they are being pushed and pulled by external developments influencing their internal organizational characteristics. To better comprehend this interaction the next section contains an elaboration on how organizations are expected to adjust in order to meet the external and internal changing demands. The factors affecting organizational (change) processes taking place in order to enable the achievement of the organizational objectives will be further discussed, while considering the external and internal contextual subtleties.

2.2 Dynamics of emerging organizational changes

From the organizational theories presented in the previous section, we can conclude that an organization is not static, but dynamic, regularly being pushed and pulled by influencing factors. Becoming an effective and proficient organization, while achieving its goals by using its resources efficiently, depends on the match between the various organizational aspects presented in table 2-1; as one aspect changes, the others are usually affected too. Organizations can and do adapt, and organizational survival is often reliant upon the ability of the organization to be dynamic, i.e. to respond to its environment (external and internal), which makes it uncertain and potentially threatening. In other words, organizations need to 'change' in order to be able to consistently meet the changing demands coming from outside as well as inside the organization.

2.2.1 Transforming and changing organizations

The word 'change' is an umbrella term. In empirical studies defining the concept of organizational change is done from different points of view, each leading to different meanings and interpretation of the 'change' concept. For instance, according to Kezar (2001) change in an organization entails alteration of values, beliefs, myths and rituals. Torraco and Hoover (2005) comment that change means 'developing'. According to them change is part of the organizational development process. However, aiming to

perform better and to adapt to modifications in external and internal needs, demands, and developments requires that a well-defined change process takes place. Zajac and Kraatz (1993) argue that "organizations are often heavily influenced by institutional environments that dictate how legitimate, successful organizations should look and behave, and constrain the ability and motivation of their decision makers to conceive of and implement certain types of organizational change" (p.85). As a result, they further state that "such environments often lead to the uniform adoption of certain practices and structures by organizations (institutional isomorphism), and to the persistence of these practices and structures (inertia), independent of rational efficiency or effectiveness concerns". In contrast, some studies indicate that change cannot be realized by following the same formula during all changes processes, regardless of the commonalities in aspects that are part of each change process (Bridges, 2009; Dent and Goldberg, 1999; Manley, 1990; Palmer, 2004; Torraco and Hoover, 2005). While analysing change particular contextual characteristics need to be considered as change processes are affected by these particularities.

According to several studies organizational processes refer to activities that take place by people using the technologies at hand and available resources to reach the organizational objectives (Baer et al., 2008; Boddy, 2008; Bridges, 2009; Dent and Goldberg, 1999; Giesecke and McNeil, 2004; Manley, 1990; Palmer, 2004; Torraco and Hoover, 2005). In most of these studies 'organizational change' is defined as an organizational transformation process with input factors, throughput activities and output results. Palmer (2004) asserts that input factors are part of the environment the organization operates in; they can be tangible, yet also intangible factors. Boddy (2008) defines input factors as the concrete available resources (financial, people and materials), but also information, ideas, licenses and permissions needed to perform the activities that lead to transformation of other input factors into a specific product or service, along with reputation, goodwill and waste. The achieved results provide feedback to the organization on the whole transformation approach. They supply all involved participants with crucial feedback and also indicate the modifications that need to take place in the input factors and in the transformation process itself as well. Torraco and Hoover (2005) apply contingency theory to change management theory. They state "when change is desired in an organization, it is important to design or adapt a process that fits the mission, culture, and environment of the institution rather than using a prefabricated process that was used successfully in another institution" (p.426). These authors further argue that the organization needs to be transformed to meet the new situation, while taking the relevant contingency factors into due consideration.

Palmer (2004) further argues that to make change work, taking due account of the human resources (quality and quantity) is essential. Furthermore, Palmer stresses that tools used during organizational change processes need to be useful (practical) for that particular situation, emphasizing once more that the formula must fit the situation. Diversification and differentiation during organizational processes seem to be important for obtaining effective performances.

44

Based on our review of literature on organizational change approaches, we could identify some influential elements affecting organizational transformation processes, which are presented in table 2-2.

Table 2-2 Important elements during change processes

Important change affecting elements	Description
History	Historical development within the organization has an impact on change attempts; every change is the product of a history of the organization.
Environment	Characteristics of the organizational environment (external and internal) can have an impact on its functioning.
Objectives and outcomes	The non-ambiguity, comprehensiveness and degree of feasibility of the objectives and outcomes the change is aiming to realize and accomplish.
Strategy and approach	The strategy comprised a set of complete and cohesive rules, procedures and activities to be realized in different phases/stages of the change process. Strategy can be specified in advance or can emerge step by step through actions and outcomes of an organization.
Participants	The actors involved in the change process and their different roles and interactions during change process.
Communication lines	How does communication take places, vertically and horizontally and which technologies are used to facilitate and/or improve the communication lines.
Monitoring process	Continuous monitoring of the process and progress of the change development.

Table 2-2 illustrates that even though change processes may differ depending on several organizational characteristics, they also have common characteristics exerting influences on the results and on the integration of these changes in the organizational operating systems (Bridges, 2009; Dent and Goldberg, 1999; Giesecke and McNeil, 2004; Manley, 1990; Palmer, 2004). The success rate of change attempts is expected to be enhanced if these elements are taken into account.

2.2.2 Phases of organizational changes

Based on further analysis of the previously mentioned studies we generate figure 2-1, containing steps that are usually taken during organizational transformation processes: diagnosis, initiation, implementation and institutionalization. In theory these phases need to be followed one after the other in order to achieve the prospected results. However, as will be elaborated at the end of this section during most transformation processes going through these phases is not a linear process.
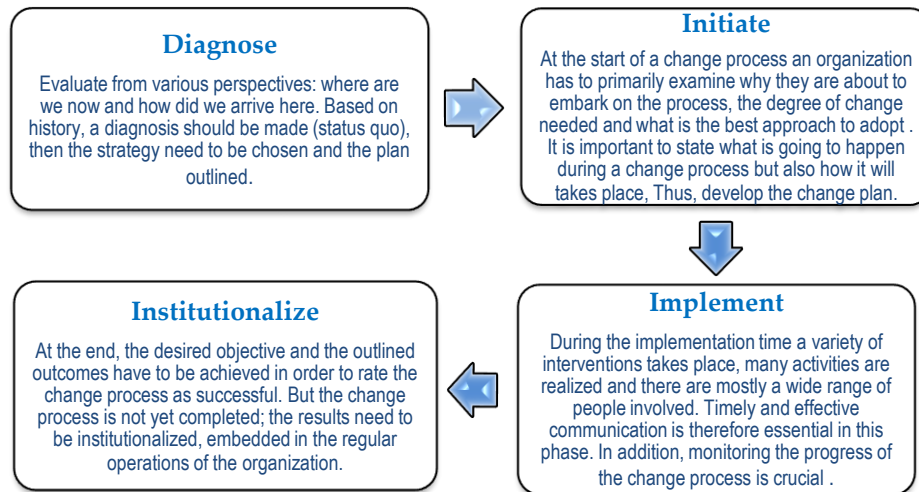
Figure 2-1 The main phases of organizational change processes

Torraco and Hoover (2005) argue that at the beginning of a change process, before the strategic and implementation plans are laid out, conducting a thorough needs-assessment will provide in-depth information on the needs of the organization and its personnel during the change process. This needs assessment will contribute to acceptability and applicability of the change goals by the people who will be involved in the change process. In order to reduce bias in the diagnosis, they suggest to involve stakeholders who generally have a different view on happenings or have different experience. The history of the organization and its environmental characteristics will exert influence on the change processes. Hence, prior to moving forward to strategic planning, the diagnose phase is needed to map the current situation.

Kezar (2001) indicates that strategic planning has to be a process of deliberation, based on the diagnosis and the aimed outcomes, resulting in a change plan. Joint design of this change plan among the participants enables the implementation process (initiation phase). By doing so, ambiguity in the desired objectives tends to be eliminated. An organization could have tried various things in its years of existence, through earlier experience, and gradually consolidated a perspective, a strategy around what worked, what will affect the change plan.

Palmer (2004) stresses that sufficient attention needs to be paid to the first two phases of diagnosis and initiation prior to starting an implementation process, as they are the fundament of the change strategy and the change plan that need to be implemented in the next phases. These two first phases are the essence of change management as they are the connecting link between the aimed objectives and the process to reach them. Furthermore, Palmer sums up the following strategic activities to be realized in different phases of the change process: delineation of change management approach, acquisition of additional resources, use of external support, training of personnel, implementing changes in rules and procedures, new division of tasks and roles,

employment of extra and different personnel. Depending on the progress of the transformation process and the organizational characteristics the change activities are usually arranged in a certain order to ensure successful results. However, developing the change plan along with deciding on the change management approach are considered as important elements in the initiation phase of the change process in order to enhance the possibilities of obtaining the desired results.

Boddy (2008), Manley (1990) and Palmer (2004) emphasize the importance of timely participation of all relevant stakeholders during the initiation and implementation phases. Often within an organization there is a difference between what managers aim to accomplish and what employees are willing to accept as change purposes. Involvement of participants contributes to a more harmonious change process. As Bridges (2009) and Petrides et al. (2004) articulated, voluntary participation in change is necessary in order for changes to be successful. In addition, during implementation the communication needs to flow in various directions, as involvement of the different stakeholders is dependent on the information received and the guidance provided. Timely and effective communication is therefore essential in this phase. Also the capacity, the capability and the competences of all involved play an important role while implementing organizational change. However, many procedures and steps previously planned will not occur accordingly. So, during implementation flexibility but also adaptability to changes and/or the unexpected are of great importance.

According to Bridges (2009), Kezar (2001) and Palmer (2004) monitoring the progress of the change process is also crucial. Monitoring and objective evaluation of the change process facilitate timely adjustment to stay on track in order to reach the set goals and objectives. A cyclical process of evaluation related to the objectives and outcomes will facilitate the necessary adjustments. This evaluation cycle consists of the following elements: evaluation topics stated beforehand (what), the frequency of the measurement (when), the instruments and means to be used (how), the responsible person(s) involved (who) and the (shared) responsibilities concerning taking decisions and making the necessary adjustment in plans. Based on the achieved results and the evaluation findings change processes could be continuously improved, providing new information to enhance the chances of achieving the organizational goals, which in turn are reliant on environmental changes.

After obtaining positive results at the end of a change process, adequate attention is required for the institutionalization phase. The results need to be embedded in the regular operations of the organization; otherwise the organization can easily revert to its former status.

The reviewed studies disclose that initiating, implementing and institutionalizing change is a complex process that is highly dependent on how it is started, organized, monitored and guided. In fact, not all change processes go through these phases as a linear process. Sometimes implementation starts before the strategic plan is completed. The diagnose phase is also not always (properly) addressed. At times during the implementation phase steps of the initiation or diagnose phases are still taking place, which can hinder the process of change and the involvement of particular participants

as well. It is also possible that due to the feedback given the change process is facilitated and moves forward more easily.

To conclude, going thoroughly through the above mentioned change phases facilitates the change process and provides opportunities to oppose the resistance to change in a timely manner. Change process must include diagnosis of the current situation, followed by developing a change plan and thereafter a step-by-step implementation plan, and the necessary evaluation and feedback stages.

2.2.3 Connecting change elements with change phases

As can be surmised from the previous section, there exists a relationship between how changes are initiated, implemented and institutionalized and the main change elements that have to be taken into account whilst going through the various phases of a change process. In figure 2-2 an outline is conceptualized portraying the amalgamation of the organizational change phases (figure 2-1) and the most important change elements (table 2-2).

The three levels of organizational reality identified in table 2-1, section 2.2.1 (macro, meso, micro) have an impact on the organizational transformation process as well: the environmental characteristics, the organizational features and the individual characters and personalities of the employees can be encouraging or hindering factors during a transformation process when changes occur. Several of the aforementioned studies, including those of Boddy (2008), Bridges (2009), Manley (1990), Palmer (2004) and Torraco and Hoover (2005) conclude that there is constant interaction and interchange between the organization, its environment, and its team of workers (managers, executing and supporting staff. Change processes are hence affected by internal factors, but also by external influences. The factors that enable change processes and those that can act as stumbling blocks are relevant to this study.
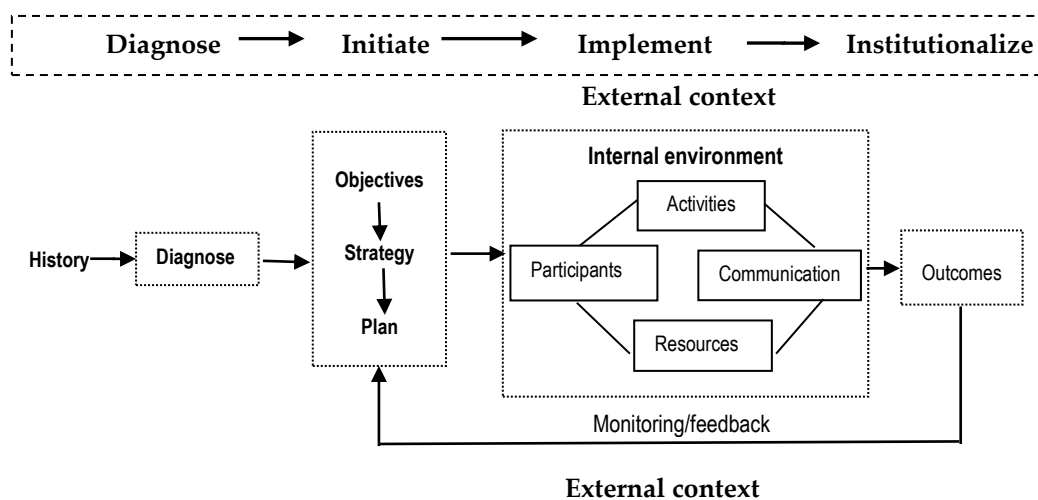
Figure 2-2 Link between phases and elements of a change process

2.2.4 Change driving and restraining forces

The previous sections hold that presently due to all political, ecological, economic, social and technological developments change is endlessly happening on all levels within and outside an organization. Several researchers assert that as a result, different theories and models emerged to shed light on the continuously changing world and the adaptability of organizations, expecting organizations to move along those external and internal trends (Baer et al., 2008; Bridges, 2009; Dent and Goldberg, 1999; Kezar, 2001). If an organization wants to move forward and realize the desired changes to meet its strategic goals and objectives and the alterations in its environment as well, it needs to deal with a variety of factors that have an encouraging or impeding effect on the progress and eventually the outcomes of its change processes. Kezar (2001) affirms that change is reliant on many factors due to the regular environmental changes. Most organizations operate within the possibilities offered by their external and internal context, which one way or another influences organizational change processes. Hence, besides organizational inertial forces, environmental threats are also among the major sources for change.

While going through transformation processes organizations are confronted with change driving and restraining forces. Dent and Goldberg (1999, p.30) note:

> The status quo represents equilibrium between the barriers to change and the forces favoring change. Some difference in these forces—a weakening of the barriers or a strengthening of the driving forces— was required to produce the unfreezing that began a change. For the resulting change to become permanent after moving to a new level, refreezing is required to freeze at the higher level.

According to these researchers it is more effective to weaken the barriers than to strengthen the drivers in order to reach a desired status. They further state that making changes effectively in organizations requires specific, targeted actions. Specific contextual strategies must be developed to deal with challenges that are anticipated. Change needs to be strategically planned, taking into consideration those factors in the organizational environment (table 2-2) that facilitate the change process, in particular. Hereby the contingency theory is once more linked with change management approaches.

Further literature analysis reveals several studies that identify driving forces during organizational change processes. For instance, Strydom et al. (2004) declare that effective change management is essential to be able to overcome resistance, contribute to the transformation process, and ensure the successful implementation of the change phases illustrated in figure 2-1. Palmer (2004) argues that regardless of their own concerns, anxiety and uncertainty, leaders and managers at all organizational levels are expected to be able to lead with confidence, communicate with clarity, and assure their employees that they know where the organization is heading. For Bridges (2009) top management support for the establishment of a change culture is imperative. Pertrides et al. (2004) state that for change to be successful, management is expected to act

proactively and neutralize any potential resistance efforts, adapting its change attempts in a way that is appropriate in that specific context. Leadership and management can hence be considered as an important change driving force. If not dealt with effectively leaders and managers can become restraining factors during the several stages of a change process.

Baer et al. (2008) annotate that organizations have to allow for broad involvement in order to become responsive, adaptive, entrepreneurial, and flexible in an increasingly market-based environment. Organizations seeking to fit better with new market forces are expected to be open to ideas linked with new horizons. According to Strydom et al. (2004) the importance of participation in any change initiative cannot be emphasized enough. Any change effort can only be successfully implemented if it becomes part of all functions and processes within the organization. In addition, administrative and support systems need to be simultaneously enhanced in order to sustain the core change activities. The transformation from the current status to a new one must be recognized as a learning process, not as a single event. This perspective matches the point of view of Giesecke and McNeil (2004) indicating that becoming a learning organization will help to create a culture with more willingness to change. As previously cited, Palmer (2004) also stressed the importance of timely involvement of participants. This brings us to another change driving force: the organizational culture. The existing organizational culture, i.e. the way people work and interact with each other during change processes, does affect the progress and outcomes of these processes.

Many efforts to cope with change attempts have however resulted in failure in the change interventions. Senge et al. (1999) argue that understanding the factors that are obstructing change is essential to successfully manage any change driven process. Kondakci and Van den Broek (2009) indicate various reasons for the lack of success in organizational change processes. To begin with, detachment of the change process from its broader environmental socio-economic and historical context will have a negative impact on change processes. While going through the various change phases its context has to be taken into account. Again, with this organizational perspective the fundament of the contingency theory is once more emphasized. Kondakci and Van den Broek (2009) indeed stress the importance of considering the contingency theory while addressing organizational change processes. These authors further argue that fragmented implementation with deficient coordination hampers the chance for success. Good planning, organization and coordination are essential during change processes, illustrating over again the determinative role of the leaders and managers within an organization. Also, underestimation of the impact of organizational culture can be a barrier during change processes. Furthermore, according to these researchers insufficient appreciation of the importance of the human side of change and concentrated attention on technical aspects do not contribute to successful implementation of changes.

People at work do not always welcome change and key people may resist it the most. Strydom et al. (2004) acknowledge that employees may resist the unknown, being

dictated to, or management ideas that do not seem feasible from their standpoint. The solution for those managing change is finding out what the change means from the employee's perspective. Dent and Goldberg (1999) discuss the conventional statement concerning human behaviour with regards to organizational change "people resist change" (p.25). They assert that people do not resist change per se. People may resist loss of status, loss of pay, loss of comfort, but these are not the same as resisting change. These scholars argue that "the place to begin an organizational change is with the knowledge and attitudes of individuals. The belief in inherent resistance to change is the fundamental flaw of these change efforts" (1999, p.26).

2.2.5 Relevance for this study

Having reviewed studies concerning the dynamics of emerging organizational change processes, we can conclude that changes are better served if they are well planned and implemented according to four phases of a change process, We also disclosed that change driving forces can come from inside or outside the organization, and that change processes are also influenced by the factors which are pushing and pulling the change objectives.

Accreditation processes—especially the first one a university goes through—are almost by definition change processes, consisting of several stages and with different internal influential factors affecting them. In this section some theories addressing organizational change processes were explored. We acknowledge that there are many other theories regarding the way this type of processes can be dealt with. From our perspective, in this study we will investigate the accreditation processes in the five participating universities aiming to achieve accredited status as organizational change processes in this contemporary globalized higher education market. While doing so these universities are influenced by external and internal change driving forces, enabled or hindered by internal organizational variables.

According to our point of view, as will be further detailed in chapter 4, accreditation processes involve going through standardized steps and stages. We hold that to attain the accredited status it is of prime importance to go through accreditation processes and manage the enabling factors in such a way to outweigh the hindering factors, while taking into account the internal organizational context.

2.3 External developments affecting organizational change processes

In this study we are looking for internal organizational forces affecting accreditation processes, but we cannot disregard the external context since it is indeed the effort of national universities to tie down the global quality demands (international) to their local possibilities (national and internal). Globalization, localization, glocalization: all are concepts to be discussed in this section to enable us to frame the topic under investigation into a comprehensive view and also to position the complexity of accreditation processes in Dutch-Caribbean universities located in the global south.

2.3.1 Globalization, localization and glocalization

The concept of globalization and its fundamental features, effects and outcomes has been widely studied. According to Carnoy (2005) globalization means that with regards to transmission of knowledge and innovative ideas, barriers between nations are limited. He further states that globalization also implies that national boundaries to a nation's investment, production, and innovation barely exist anymore. Marginson and Van der Wende (2007) describe the term globalization as "the widening, deepening and speeding up of worldwide interconnectedness" (p.8).

Other researchers, including Bell and Cullen (2006) and Daniel et al. (2006) assert that this globalized age is also characterized by fast technological changes. According to them the globalization process has been facilitated by the rapid development of information and communication technology. New technologies enable information to be spread worldwide, regardless of time and space. Knowledge can be transmitted easily to any other point on the planet. So, the use of information and communication technology has dramatically increased the accessibility of knowledge. Therefore, information and knowledge have become highly mobile, moving at an unprecedented speed across countries and accelerating the process of globalization. With the widespread use of internet and social networking, and other such tools, the whole nature of operations and communication has changed dramatically compared to a few decades ago. Globalization has considerable impact on the creation and distribution of knowledge and vice versa, and affects organizational processes.

Jakobi (2007) explained that since knowledge is becoming important everywhere, it has become a key resource in today's globalized 'knowledge society' and 'knowledge economy'. Many countries consider themselves as part of the knowledge society and they are geared to adapt to emerging needs in this regard. He states "Knowledge society is both an enabler for national policy reforms as well as a major source for observable global dynamic in education politics" (2007, p.39). According to Carnoy (2005) a community's ability to compete and prosper depends crucially on the ability of its educational institutions to create, transfer, and apply knowledge in a highly adaptable way in a rapidly changing economy (learning organizations). Therefore it has become important to create new knowledge on a continuous basis and to constantly make this knowledge globally available.

Globalization is also conditioning the labour market. Viara (2004) indicates that educational systems and the programs being offered need to be adapted and/or renewed in order to produce the proficiencies and competences required in a globalized work force. This is necessary to meet the rapidly changing needs and demands of the labour market as a result of this universal globalized development. Hence, entire educational systems at (inter)national level are impacted. Educational innovations are regularly implemented to be able to finally produce skilled knowledge workers to be active and productive on the rapidly developing labour market due to globalization. It is expected that a better educated labour force will be needed due to the rise of a knowledge-based economy.

National developments, needs and demands are also external factors affecting internal organizations' functioning and outcomes. Localization, adapting international demands to specific national characteristics, is receiving more and more attention in literature dealing with the evolving competitive world (Carnoy, 2005; Jakobi, 2007). In this study five descriptive factors are used to further elaborate on the national context of the studied universities related to organizational change processes aiming to achieve accreditation. To start with the geographical position of each country: is it part of the (post-)industrialized economies or is it positioned in the developing areas on this world globe. Furthermore, the demographic parameters, such as land surface area and population size, are to be considered while studying influential factors during organizational change processes. In addition, the stability of the national political environment and the legal rules, regulations and procedures an organization needs to abide by affect the organizational functioning. For instance, is the political setting stable, and not affected by regular disturbances and uncertainties? Also the extent to which politicians are involved in the functioning of public organizations, such as higher education institutions, is relevant to determine the national political context. Unstable political conditions, coupled with regular political and policy diffusion, can sometimes lead to ungrounded changes in policies, e.g. higher education can be part of constant changes in policies, regulations and approaches, which requires continuous adaption to new national policies and regulations (Minor, 2006).

Besides the geographic position, demographic parameters and the political context, the economic situation at the national level also exerts influence on organizational possibilities. The financial potentials of a country determine its economic potentials and as a result also its funding possibilities. Industrialized countries are part of the well-developed part of this world and are more likely to have sufficient financial resources to deal with necessary investments, whilst in less-developed countries limited financial resources restrict their investment potentials. The labour market, as part of the national setting is also one important economic factor in this regard (Viara, 2004). As mentioned above, the population has to be educated to meet the consistently changing demands and needs of the labour market. Obstructions and limitations in the economic situation, resulting in distortion of the labour market are also influencing the performances of different kind of organizations, private and not-for profit ones, including higher education institutions.

Finally, socio-cultural aspects, such as communication behaviours, interpersonal relationships, individual and/or mass behavioural responses to rules and regulations and commitment attitudes have according to Lomas (1999), Harvey and Stensaker (2008) and Kezar and Eckel (2002) an impact on organizational behaviour and therefore also on change processes. The perceptions and interpretations of individuals within organizations reflect the socio-cultural external environment. These coupled with the existing organizational culture seem to affect individual performances in organizations and thus the progress and outcomes of change efforts.

Relevant to this study is also the concept of 'glocalization'. Robertson (1994) voices this development as a global outlook adapted to local conditions, viewed as a critique of the homogenizing trend associated with globalization, which assumes that locality is overridden by uniform, globalized developments. Robertson believes the contrary; that globalization can be defined as the compression of the world, yet "has involved and increasingly involves the creation and the incorporation of locality, a process which itself largely shapes, in turn, the compression of the world as a whole" (1994, p.48). According to Patel and Lynch (2013) "Glocalization is a good description of blending and connecting local and global contexts while maintaining the significant contributions of the different cultural communities and contexts" (p.223). Glocalization is thus a blend of globalization and localization. Instead of focusing only on complying with global developments, these authors advocate glocalization as an alternative for internationalization; not only global standards need to be taken into consideration in an organization while aiming to achieve the organizational objectives, but also the local demands and needs are to be considered. According to these authors, glocalization empowers and encourages all stakeholders in organizations to work harmoniously toward a sustainable future.

2.3.2 Contribution to this study

The previous section reveals that a global competitive environment has emerged. The universal focus is on a knowledge society and the need for corresponding education policy reforms. In national politics it is more and more widely accepted that a well-educated population enhances a country's global competitive capacity, despite the local contextual particularities. We acknowledge that international developments have a major impact on developments at national, organizational and even individuals' level in (higher) education, but further discussion of this topic is beyond the scope of this study and therefore will not be further addressed in this dissertation. Nevertheless, national needs, demands and trends in higher education cannot be separated from global developments. In fact, there is an interdependent relationship between these developments.

Although in the coming chapters some attention will be paid to the topic of international and national developments, in this study the focus is on the impact of the internal organizational environment on accreditation processes, perceived as one of the causes of organizational changes. Relevant to this study is how national universities tie global quality demands down to their local possibilities in order to attain accreditation, as such connecting globalization and localization into glocalization. We claim that glocalization is what the national Dutch-Caribbean universities are supposed to adhere to during their embarked accreditation processes. While aiming to reach the accredited status, they are expected to tie down global to local. Of great relevance for this study is to determine which factors enable or hinder this accreditation endeavour.

2.4 Internal factors influencing organizational performances

So far, we have discussed the main elements of organizational change processes and the kind of effect external factors can have on the progress and outcomes of these processes. We now explore the internal organizational factors that might have an influence on these processes and consequently on the achieved results.

The immediate context of the organization is composed of particular components that make up the internal environment within which an organization operates (Bridges, 2009; Hanna and Latchem, 2002; Mintzberg, 1981). A search through literature on internal organizational factors generated four interrelated elements of organizations that have proven to be key factors in organizational theories since they dominate the debates on the functioning of organizations and their interdependency with the external environment: organizational structure, leadership and management, organizational culture and resources (Baer et al., 2008; Boddy, 2008; Bridges, 2008; Gumport, 2000; Hanna and Latchem, 2008; Hooiberg and Choie, 2001; Kondakci and Van den Broek, 2002). These factors are part of the 'in-house' daily organizational operational situation.

Moreover, the literature review demonstrates that the performance and outcomes of organizational change processes are to a large extent helped or hindered by these internal organizational elements; as such they can be identified as potential enablers and/or barriers during organizational change processes. This study focuses on the impact of these internal factors during accreditation processes. These factors are briefly explained below as an introduction to the more in-depth discussion in the next two chapters on the effect of the factors in higher education institutions and the accreditation processes. In this section we will therefore stay at the organizational level in general.

2.4.1 Organizational structure

The first identified influential internal organizational factor is the organizational structure. This structure is commonly used as an organizational component to identify certain types of organizations. The structure of an organization is generally closely linked to the organizational goals and objectives and the strategy chosen to achieve them. Currie and Procter (2005) and Mintzberg (1980) declare that organizational structure determines the manner and extent to which roles, power, and responsibilities are delegated, controlled and coordinated. The organizational structure explains how information flows between levels of management and displays the roles of the members of the organization and the division of responsibilities. Based on the organizational structure, the authority lines become explicit and it refers to how people and processes are managed.

A graphical representation of the organizational structure is the organization chart, showing the different positions in an organization, the different levels of management and their direct subordinates. According to Mintzberg (1980) each configuration of organizational structuring contains six components, as shown in figure 2-3:

- *Ideology*: the traditions and beliefs that make the organization unique;
- *Strategic apex*: the top management who control the organization;
- *Middle line*: the managers who connect the strategic apex with the operating core;
- *Operating core*: the people directly related to the production of products or services;
- *Techno structure*: the analysts who design, plan, change or train the operating core; they apply analytic techniques to the design and maintenance of the structure and to the adaptation of the organization to its environment;
- *Support staff*: the specialists who provide support to the organization outside of the operating core's activities;

None of these elements are complete by itself; each shares some aspects with the others and it is the combination that defines the different organizational types. These elements are dynamic, mutually reactive parts of an organization interacting with and within an environment. The ideology of an organization, translated in its mission, vision, goals and objectives, largely determines on which element in an organizational structure the organizational functioning mostly relies.
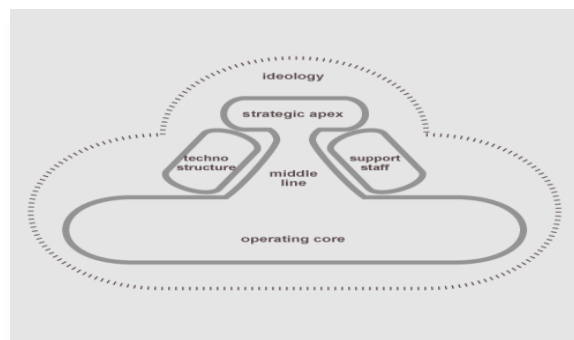
Figure 2-3 Mintzberg's elements of organizational structure
Source: Mintzberg, 1980, p.324

Mintzberg (1980, 1981, 2001) suggests five typologies of basic configurations in organizational design. Each configuration represents a force that pulls organizations in different structural directions, based on a combination of the organizational components. These typologies are used by many scholars in organizational theories to indicate, among others, how organizations are managed, how tasks are divided, how the decisions are taken, how the rules and procedures are regulated, how performances are controlled and how activities take place. 'Simple structure' refers to basic organizational structure, which is highly centralized and mainly dependent on the management strategy; it relies on direct supervision from the strategic top. In the 'Machine Bureaucracy' the power is vertically centralized at the strategic apex with limited horizontal decentralization to the techno structure, while it is primarily coordinated by the mandatory work standards from the techno structure; jobs are highly specialized and formalized. In the organizational design of 'Divisionalized form' a good deal of power is delegated to market based unit in the middle line, whose efforts are coordinated by the standardization of outputs, through the extensive use of

performance control systems. The 'Adhocracy' is characterized by a highly organic structure with little formalization. Mutual adjustment is the key coordinating mechanism within and between the project teams, calling especially for the collaboration of its support staff.

Most relevant for this study is Mintzberg's 'Professional Bureaucracy'. This structure relies on the professionals' standardization of skills and knowledge in the operating core; jobs are highly specialized, but minimally formalized. The focus is on extensive training (skills and knowledge acquirement) and workers are grouped in operating units based on purposeful functions. The well-developed professionals apply standardized skills and have considerable control over their own work; they have a good deal of autonomy and so work relatively independently of the colleagues, but closely with the clients they serve. Both the vertical and horizontal dimensions of decentralization have far reaching effects. The support staff is typically very large in order to back up the high-priced professionals. So whereas the machine bureaucracy relies on authority of a hierarchical nature or power of office, the professional bureaucracy emphasizes authority of a professional nature or the power of expertise.

For this study, only the organizational structure named professional bureaucracy will be further explored in the next chapter and related to higher education institutions in particular.

2.4.2 Leadership and management

An extensive body of research is dedicated to studying leadership. Although traditionally a rich diversity of theories have been postulated to define leadership, it has commonly been described as a vertical process of a leader with followers. The (individual) leader is the main source of influence which shapes the emergence of collective actions (van Ameijde et al., 2009; Birnbaum, 1989; Bridges, 2009; Dent and Goldberg, 1999; Gumport, 2000; Middlehurst, 1997). Leaders are usually not involved in the daily operations of an organization, but set the stage for the work to be done. They are supposed to have the overall view and be in charge of creating the vision, setting the strategic goals and facilitating their implementation in order to achieve the organizational objectives.

By the end of the 20th century new theoretical developments emerged challenging this view of leadership. Theories on traditional leader-centric approaches shifted due to the increased focus on team-based work in organizations (van Ameijde et al., 2009; Middlehurst, 1997; Pearce and Sims, 2002). Many organizations increasingly depend on cross-functional, self-managing teams to deal with growing complexities of work due to environmental changes and to sustain their effectiveness, efficiency and competitiveness. Working with (project) teams to implement particular organizational changes for instance has become a common approach to realize certain strategic goals. In addition, development of new knowledge is worldwide gradually more dependent on team-based cooperation and collaboration and requires the coordination and integration of diverse professionals from a variety of fields.

Following on these developments, it is worthwhile to mention in the context of this study two emerged theories on leadership: distributed leadership and new managerialism. Distributed (shared) leadership focuses on the mechanisms through which diverse individuals contribute to the process of leadership, while attempting to understand the subtleties of leadership in realistic organizational settings (van Ameijde et al., 2009; Pearce and Sims, 2002). Distributed leadership seems to be particularly useful in settings of highly interdependent conditions where no single individual is capable of possessing all the relevant expertise for reaching a common goal. According to Pearce and Sims (2002) distributed leadership patterns lead to higher performance as compared to traditional leader-centric forms, though the acknowledgment among the team workers of each other as leaders (distributed-coordinated leadership) is essential for the successful results. Critics of this theory on leadership argue that distributed leadership cannot fully replace vertical leadership yet ought to be complementary to it, as this type of traditional leadership is still necessary in case of e.g. team design, disruptive team functioning and directive decision making.

The concept of 'new managerialism' emerged in the nineties as part of the discussion of leadership and management of non-profit organizations shifting more towards management models found in the private for-profit organizations. According to Deem (1998) "the term 'new managerialism' is generally used to refer to the adoption of the public sector organisations of organisational forms, technologies, management practices and values commonly found in the private business sector" (p.47). Characteristic of this shift in management theory is the increased focus of public or voluntary organizations on cost effectiveness, efficiency, competitiveness (internal and external) through measurement of outcomes and individual staff performances, resulting in changes in the leadership and management styles and organizational culture. Increased attempts of national governments to reduce public expenditure and the growing tendency to demand 'value for money' together with tighter monitoring and auditing regulations on public services also contributed to the shift in managerial approaches in not-for-profit organizations, including higher education institutions. In chapter 3 these two emerged theories in leadership will be coupled to academic leadership in higher education institutions.

Leadership and management take place at different organizational levels, each leading to a variety of implications for the organizational processes. Baldridge (2001) notes that organizational characteristics are critical for determining the styles of leadership and management that work best in unique settings. For example, in bureaucratic organizations leaders are expected to be technically knowledgeable of their organizations and exceptionally skilled to solve its problems, while in democratic organizations leaders ought to be more socially oriented, focusing on collegial decision making.

Bridges (2009) states that among other responsibilities, "managers are also expected to monitor the organization-environment interface, determine appropriate strategies, and develop effective bridging and buffering mechanisms" (p.25). Boddy (2008) also emphasizes that adapting to the realities of this new globalized world brings managers

a great challenge. In this contemporary world managers are no longer expected to only describe what has to happen, or to control what will happen, but to foster improvement by promoting knowledge acquisition and diffusion at all organizational levels (learning organization) and by encouraging people to really understand the process in which they participate. They are expected to be able to manage, but also to move their organization from the current position to a new unknown situation in a rapidly transforming environment. Thus, the challenge managers are currently facing is how to make the transition in the daily operations in organizations of getting people to stop doing things the old way and getting them to start doing things a new way. Boddy (2008) further discloses that most of the times it is the quality of the management that determines whether an organization is successful or not and accordingly how well an organization performs its value-creating role.

Management tasks are those of planning, organizing, leading and controlling the use of resources to add value to them to meet their customer's needs and to innovate by using the correct strategic approaches. While doing so, managers need to take into account that the workforce itself also continues to change. Managers also depend on the employees. In today's organizations employees are not simply compliant anymore. According to Baer et al. (2008) staff members like to think for themselves, have no need for close supervision during their work processes. Furthermore, they like to be creative, and go the extra mile to reach quality products and services for the clients. Managers usually tend to control and direct, while the subordinates want to operate more independently and are reluctant to accept direct supervision. This kind of conflict is common in professional organizations as the dominant positions are more evenly distributed; even more so in universities, where 'knowledge' is the primary process.

According to Mintzberg (2009), leadership and management of organizations are strong indicators of the success rate of the accomplishment of organizational objectives. It is essential to determine how well the organizational structure reflects and responds to organizational objectives. Management structures and approaches resulting from the organizational structure are to some extent also dictated by the legal regulations of an organization, i.e. in some organizations the boundaries and scope of control of managers can be regulated by law. But still there can be a wide variation in the interpretation and practicing of these rules and regulations at institutional and departmental level. The leadership and management style however also determines in many ways the role, functioning and performances of the other internal organizational factors, beginning with the organizational culture.

2.4.3 Organizational culture

Considerable literature is available on organizational culture and a wide range of research has been conducted in a variety of organizations in different countries to acquire better understanding of this topic and to find ways to address it in organizational change efforts. Through the years many definitions have been formulated for organizational culture. For instance, Tierney (1988) states "an organization's culture is reflected in what is done, how it is done, and who is involved

in doing it" (p.3). Lomas (1999) defines organizational culture as "the values, myths, heroes and symbols that have come to mean a great deal to the people who work in particular organizations" (p.31). According to this author organizational culture refers to the way things are done in an organization; it is the glue that holds an organization together. Lomas furthermore contends that the organizational structure, the distribution of power and its context greatly affect its culture. Kezar and Eckel (2002) label organizational culture as "the deeply embedded patterns of organizational behaviour and the shared values, assumptions, beliefs, or ideologies that members have about their organization or its work" (p.438). Silver (2003) refers to organizational culture as "a shared way of thinking and a collective way of behaving". ….. "the way the employee's deal with each other, their communication habits and practices and their shared set of values, beliefs, understanding and ideas" (p.158). Silver further states that organizational culture can be identified by some artefacts as particular jargons, dress codes, rituals, rules and regulations, myths, logos, and office furniture, which reflect the underlying basic assumptions, beliefs and values of that particular organization. The artefacts shared more keenly by individuals and groups in an organization may not be those most treasured by the organization itself. According to this scholar the implications of this mismatch can be considerable in decision-making and change processes. Harvey and Stensaker (2008) refer to culture as "a system of shared beliefs, values, customs, behaviours and artefacts" (p.429). They link culture firmly to a way of life.

In accordance with the definitions cited above, the organizational culture is about basic values and fundamental principles which the people believe in and act according to. Organizational culture is grounded in the shared assumptions of individuals participating in the organization; it connects and largely determines the development and work within an organization.

To be able to identify organizational culture(s) Tierney (1988) pointed out the following components: environment (defining the environment, including the socio-cultural aspects), mission (how the mission is defined, its use for decision making and the individual support of it), socialization (the way employees become socialized), information (the content, controllers and venues of information), strategy (the strategies used for decision-making and the ones involved in this) and leadership (identification of the leaders and their specific roles). Each cultural component occurs in organizational settings, yet the way they occur, the forms they take and the importance they have, differs significantly, affecting the organizational culture(s).

Literature explored shows that each organization creates its own specific organizational culture during its years of existence. Individuals who regularly interact with each other tend to develop their own culture that determines their mutual attitudes and ways tasks are accomplished. Cultural influences occur at various levels: external at national level and internal at institutional and departmental levels. These cultures can differ considerably. Several of the articles on this topic indicate that organizations are an amalgam of a variety of different cultures rather than just one pervasive culture (Hofstede, 1990; Lomas, 1999, 2004; Kezar and Eckel, 2002; Vermaak

(n.d.). Mainly in large organizations it is more likely that various subcultures coexist. The threat of this is that certain employees being part of different subcultures lose or even do not know what the common organizational culture is.

A central goal of understanding organizational culture is to minimize the occurrence and consequences of cultural conflict, which can hinder organizational change processes. According to Fralinger and Olson (2007) effective organizational culture implies a shared sense of commitment, consensus on communication lines, clearly defined roles, and inherent sense of obligation to that role. However, because conflict sometimes exists between the different internal stakeholders (management, employees, and supporting staff) with regard to the interpretation of underlying organizational values and belief systems, efficient resolution of problems is often hindered. Strydom et al. (2004) state that effective communication and group involvement in decision-making processes are thought to be key elements, as opposed to internal cultural conflicts, leading to successful organizational performances and outcomes. These authors also relate organizational culture and its effect on organizational performances to leadership characteristics.

Culture is dynamic (subject to change) and thus continuously evolving as people interact, negotiate and communicate, and external influences infiltrate. Culture change can serve as a basis for positive organizational change and further development. Fralinger and Olson (2007) and Soverall and Khan (2009) are some of those researchers that link cultural change to leadership and management within organizations. According to Fralinger and Olson (2007) essential in this regard is the identification and modification of the leadership and management style, strategic plans, and reward system since they are important elements of an organizational culture. Soverall and Khan (2009) contend that organizational culture and management effectiveness are interdependent variables that need to be considered because they significantly influence performance outcomes in both private and public sector organizations.

The main issue to be addressed in this study is the role organizational culture plays in change processes, more specifically the quality culture, to be explicated in chapter 4. Different researchers of this topic state that one of the most change-averse elements within an organization is its culture. Kezar and Eckel (2002) point out that change processes can be thwarted by violating cultural norms or enhanced by culturally sensitive strategies. These scholars assert that the organizational culture has a major impact on the accomplishment of the expected changes. They suggest that institutions need to have a "culture" that encourages change. The aspects of culture that need to be fostered to promote institutional change according to them are: strong organizational design, senior administrative support, collaborative leadership, staff development and visible actions. These researchers, and Lomas (1999) and Silver (2003) consider a strong organizational culture based on shared beliefs and values within the organization as advantageous, because it provides clarity of purpose. It facilitates goal congruity between the different employees (management and staff) as it is clear what the expected and acceptable types of behaviour are.

2.4.4 Resources

Resources are needed in order to realize the organizational goals and objectives. A distinction can be made between tangible and intangible resources (Boddy, 2008; Baer et al., 2008):

- Tangible resources: human capital, financial assets, physical facilities, organizational age and size, licenses and permissions;
- Intangible resources: goodwill, information channels, reputation, knowledge, managerial talent, relationships.

In this study attention will be mostly paid to the tangible resources. Intangible resources will be only addressed if relevant to the tangible ones.

Useful for this study is to differentiate between resource-rich and resource-poor organizations. As Kraatz and Zajac (2001) indicated the availability of resources within an organization affects the way it perceives and searches its environment. On the one hand resource-rich organizations are more inclined to resist environmental pressure to change. Due to their availability of resources they can function more independently of their external developments. They tend to be less likely to experience a sense of urgency regarding adaptation and more likely to perceive an increased (perhaps false) sense of certainty about the future. A resource-rich organization will be able to sustain itself (maybe for a limited period of time) even as the organization faces a situation of increasing environmental misfit. However, this approach to reject change strategies due to environmental changes can lead to decreasing performances. According to Kraatz and Zajac (2001) decision makers ought to become well aware of this temptation and act proactively to promptly oppose this organizational behaviour. Also failure to adapt to environmental change due to restricted resources is subjective to negative performance consequences.

On the other hand, resource-rich organizations still have a primary need to maintain environmental co-alignment through strategic change. Large organizations, rich with various resources are more likely to survive external threats due to their greater capacity for innovative and imitative change. Resource-rich organizations are more highly adaptive and also more likely to achieve performance benefits from leveraging existing resources in new ways. Resources such as financial assets, research and development capability, production capacity, general management experience (all these three as part of human resources) and contemporary facilities can all be considered as potential facilitators of organizational change. They allow their possessors to respond better to environmental changes and to more readily imitate or develop appropriate organizational innovations that strengthen their survival. Kraatz and Zajac (2001) indicated that "Resource differences may affect both an organization's propensity to change strategies in response to environmental changes, as well as the outcomes of such strategic change" (p.633).

Thus, the availability of resources plays an important role in shaping organizational behaviour (organizational culture) and performance, and consequently the potentials and capabilities to change. The literature review reveals that the availability of resources, the management of them (their acquisition, maintenance and internal

allocation) and the management of resource relationships between the organization and its environment are organizational features influencing the organization's performances.

2.5 Conclusion

This chapter has laid out a conceptual basis for understanding organizational theories that in the next chapter will be coupled to higher education institutions. This chapter therefore merely serves as background information to frame the topic under investigation in the existing body of knowledge on organizational theories, laying the ground work for further discussion of accreditation processes, considered as organizational change processes in higher education institutions.

In this chapter we have reviewed current literature that applies to organizational change processes, and attention was paid to external developments affecting these processes. Three organizational theories were explored: the open-system theory, the contingency theory and the theory of 'learning organizations'. In this study these theoretical perspectives are used to enhance our knowledge and understanding of organizational change process in general, accreditation processes in particular.

The review of literature also provided us with several insights we can use to construct our research model. Terms as globalization, localization and glocalization were explained so the external context of organizations could be framed, and the relevance of these concepts for this study was addressed. Our objects of study can therefore be examined also based on the context within which they operate. In this conclusion we want to underline that the external organizational context is nowadays highly dynamic. It is a complex and fast-changing world (macro) that asks both for stability and change at meso and micro levels in the organizational reality. Most organizations are thus facing high external pressures, being expected to deliver quality products and to provide better services, which in turn depend on the proper mix of the internal organizational characteristics.

During organizational change processes, illustrated by several characteristics and four phases (diagnose, initiate, implement and institutionalize) many encouraging and hindering forces can be experienced. Besides the external context, four internal factors have been identified potentially affecting the progress and outcomes of organizational change process: organizational structure, leadership and management, the organizational culture and resources. Consequently, effective organizations are supposed to favour some sort of organization that searches for harmony in the elements of its internal processes and consonance with its environment. The different components ought to be in alignment with each other; one of them cannot be changed without considering the consequences for the others, without influencing the progress of organizational change processes and eventually their outcomes. In the next chapter this theoretical basis will be coupled to higher education institutions in order to provide more specific information on the effects of the four identified internal organizational factors on change processes in this particular type of organization.

3. Higher education institutions as changing organizations

Having reviewed the literature to identify which factors generally affect organizational change processes, in this chapter these are linked to higher education institutions. Basically, the external and internal contexts in which higher education institutions function as daily operating organizations are explored and attention is paid to the influence of these contexts on their inner transformation processes. The four identified internal organizational factors exerting influence on organizational processes are mirrored to higher education institutions to detect their possible impact on the transformation processes and their outcomes in these institutions. Actually, from the reviewed literature in chapter 2 we could conclude that understanding and identifying factors that may influence change processes from different perspectives are necessary in order to enable their progress and successful outcomes. This chapter will explore the relevancy of this rationale for transformation processes in higher education institutions.

The main objective of this part of the theoretical framework is to provide insights in the factors influencing organizational change processes within higher education institutions to further enable the development of the research model. This literature review is meant to identify the elements from the current body of knowledge that can serve as building blocks to conceptualize the research model, which will guide our empirical research. Understanding the external and internal contexts in which higher education institutions operate will also contribute to the examination and interpretation of the findings coming from the analysis of the case studies.

3.1 Characteristics of higher education institutions

Higher education institutions have existed for many centuries. A great variety of issues related to this type of educational institutions have been studied from different perspectives. Consequently, a wide range of contributions can be found in literature addressing higher education topics. Higher education institutions can be public or private organizations, typically led by professionals who are mostly the academic staff. These institutions are usually considered as complex, open, decentralized, loosely coupled systems, whose academic staff is accorded a significant degree of professional autonomy in their work (professional bureaucracy), whilst dealing with contingency factors related to their international, national or internal contexts (Birnbaum, 2000; Graumans, 2000; Gumport, 2000; Mintzberg, 1980; Weick, 1976).

The functions of higher education include preparing a knowledgeable cadre of individuals at tertiary level to work in a global, knowledge economy as well as to deliver highly skilled professionals who can contribute to further sustainable socio-economic development at national level (Baldridge, 2001; Birnbaum, 1989; Dill, 1999; Pertrides et al., 2004; Wright et al., 2004). These functions directly relate to the literature analysis done in chapter 2 and underpin the role of higher education as a contributor to the creation of the emerging knowledge societies. For this study these functions are of great value since the three target Dutch-Caribbean universities in their accreditation efforts are trying to reach both objectives (see section 1.3).

Reviewed studies also reveal that the aim of higher education institutions is to produce positive outcomes for all stakeholders: students, teachers, labour market, government and community at large (Baldridge, 2001; Daniel et al., 2006; Graumans, 2000; Hanna and Latchem, 2002; Pertrides et al., 2004). Therefore, the main purpose of these institutions is to deliver highly skilled professionals, who are able to continue their further development. Universities in particular have been considered as knowledge centres at national or even at international level (van Ameijde et al., 2009; Luijten-Lub, 2007; Marginson and Van der Wende, 2007; Viara, 2004). In addition, higher educational institutions are expected to develop and implement knowledge for the improvement of their own basic processes. External pressure and worldwide competitive environments are forcing universities to become active learning organizations. Based on knowledge gained from inside and outside they ought to be able to promote the enhancement of the quality of their internal processes (Birnbaum, 2000; Wood, 2000; Zajac and Kraatz, 1993)[6].

Based on our literature analysis, the following characteristics of higher education institutions could be identified. These characteristics are relevant for further analysis in this study:

---

[6] Higher education institutions can be typified as teaching-oriented or research-oriented institutions or a combination of both. In this study however, the focus is only on accreditation processes as part of the teaching and learning processes, not the research processes.

Goal ambiguity: Although in general goals of higher education institutions are often formulated as teaching, researching and service to the national community, specific goals are not always clear for the different stakeholders.

Client-serving: Most activities are directed to serve the specific needs and demands of its clients, which can also impact the decision-making process of these institutions.

Distinct management style: The academic governance can be considered as bureaucratic (authoritarian), collegial (focus on mutually respectful approach) or political (negotiator to bring groups together to reach a common goal) or organized anarchy (lack of central coordination).

Professional staff: Highly trained experts with specific professional skills are employed so that a high level of teaching and learning can be offered in order to serve the clients best; they are considered to be highly autonomous workers with diverse professional backgrounds and operating with a high level of professionalism.

Vulnerable for environmental events: Higher education institutions are exposed to outside pressure and external changes. Although these institutions are not yet entirely captured by their environments, they are steadily being penetrated by outside forces. More and more the operating autonomy of the academic professional is reduced significantly due to the impact of external forces.

Considering these characteristics in this study changes in higher education institutions are considered to be slow and challenging processes. This topic is addressed in the subsequent section.

3.2 Transforming higher education institutions

As stated in several studies, higher education institutions are facing a period of unprecedented change as they struggle to respond to more external pressure (international and national) and also internal modifications (Dent and Goldberg, 1999; Jacobi, 2007; Gumport, 2000; Kezar, 2001; Minor, 2006; Torraco and Hoover, 2005; Wright et al., 2004). A wide variety of factors contribute to these external and internal developments, such as more funding regulations, the emerging national emphasis on expected quality level related to the accountability responsibility, mass education due to expansion of students' population, diversity in students' background and increased possibilities of distance learning. According to many authors these developments have become part of a permanent feature of constant instability in academic daily life. Gumport (2000) for instance notes that higher education institutions are presently going through a tough time. According to this author the fundamental components are shaking on different levels. "In addition to a difficult political climate with diminished public confidence, financial realities loom large alongside pressure to consider alternative structural and resource commitments to various knowledge areas" (p.68). Rapid external demands often require frequent adaptation and institutional change in order to implement strategies for improved efficiency and effectiveness, accountability and increased output. Many higher education institutions find themselves in an awkward position and are in a continual struggle to build and maintain connections

with the external environment, both global and local, while meeting their own particular, institutional demands on teaching and research.

However, although higher education institutions have gone through many change efforts during the last decades, according to Baer et al. (2008) these have not resulted in transformative change, namely deep, pervasive and consistent changes in how they function as educational institutions. These researchers indicate that change attempts frequently resulted in administrators and faculty members blaming each other for the lack of shared progress. According to them 'smart change' ought to be directed "through a focus on principles over practices, data analysis over myth, leadership over management, continuous over episodic improvement, communication over sound bites, system over silos, and partnership over competition" (2008, p.6). These authors further state that depending on the phase of the change process (section 2.2.3), particular mechanisms must be applied. Maximum results can be obtained if the appropriate change mechanisms are identified and deployed at the right stage of the planning process to simultaneously sustain the routine as needed, support the reform and navigate the transformation required. 'Smart change', as Baer et al. (2008) describe it, increases the efficiency and effectiveness of changes in higher education institutions, resulting in institutional (meso) and individual (micro) transformations, which may have an impact on external (macro) developments (see table 2-1).

In the literature there are discussions on the forces that influence the change processes and responses in higher education institutions (van Ameijde et al., 2009; Baer et al., 2008; Bryman, 2007; Gumport, 2000; Kezar, 2001; Kezar and Eckel, 2002; Kondakci and Van den Broek, 2009; Viara, 2004; Wright et al., 2004; Zajac and Kraatz, 1993). These authors indicate that the transformation process causes unexpected consequences at different levels of the organization. The dynamic ever-changing environment requires higher education institutions to be highly adaptive in response to constant challenges and competition.

3.3 Changes in the higher education environment

The environment of higher education is changing due to multiple causes. Higher education institutions often are pursuing fitness with their environment in order to survive and progress. This section addresses the factors as part of the external environment that generally have an impact on change processes in higher education institutions.

3.3.1 Globalization and its impact on higher education

There exists a strong interrelatedness between higher education and its environment. The globalization trend has an impact on the developments in the field of higher education and vice versa. (Bell and Cullen, 2006; Marginson and Van der Wende, 2007; Jakobi, 2007; Viara, 2004; Van Vught et al., 2002). On the one hand globalization and its impact on national policies together with increased use and advances in information and communication technology induce changes in organizational processes in higher

education institutions and the relationship with their stakeholders. On the other hand, higher education institutions are recognized as the principal venues for the creation of new knowledge. They are expanding the innovative application of existing knowledge and are considered as one of the main contributors to the existence and preservation of knowledge economy as a major element of this globalized world. As Marginson and Van der Wende (2007) brought forward while higher education institutions often consider themselves as objects of globalization, they are also one of its key agents.

These authors further argue that there is a strong positive correlation between the enrolment ratio in higher education in a country and its global competitive performance. Developed countries are more financially equipped than others to invest in their higher education sectors and therefore can allow more students to enrol in higher education. There is a mutually beneficial feedback mechanism as well as a positive correlation between increased investment in higher education institutions in developed countries and these countries' increased participation in the globalized economy.

Producing new knowledge and investing in the education of high level manpower have become crucial if a country wants to compete in the globalized market. As a result investments in higher education at the national level have become a widely discussed issue (Badrawi, 2001; Birnbaum, 1989; Miller, 2002; Van Vught et al., 2002; Wright et al., 2004). More and more nations, regardless of their developmental stage, are realizing that they need to invest in higher education, not only to create new knowledge, but also to keep up with worldwide developments in all fields. Therefore, countries are investing in their higher education in order to lay the foundations for their knowledge-based economy.

According to several authors nations worldwide have the desire to become and stay globally competitive (Hanna and Latchem, 2002; Jakobi, 2007; Viara, 2004). Therefore nations are paying increased attention to their policy on higher education and the restructuring of their higher education institutions. Until a few decades ago higher education policy was mainly influenced by the national context and political strategies. Due to globalization and all international forces, this policy nowadays is also widely shaped by rapidly changing developments worldwide in all business areas. Luijten-Lub (2007) and Van Vught et al. (2002) affirm that internationalization and globalization have largely shaped the structure, organization and content of higher education at national levels.

Jakobi (2007) also argues that educational reforms are not only dictated by specific national traditions anymore, but are directed to meet developments taking place on a worldwide level as well. This author further specifies that global dynamics have a major influence on national education policy. We can even talk of 'globalization in education policy'. Policy choices of one country are shaped by the choices of others.

This phenomenon of policy diffusion[7], described by Dobbin, Simmons and Garrett (2007), is taking place globally, leading to educational policies that show resemblance across countries.

Moreover, due to international developments, countries are converging towards the same direction with regards to education policy. The concept of 'isomorphism'[8] was born due to globalization trends in the educational field (DiMaggio and Powell, 1983). As a consequence, increased similarity in education policy of different countries has emerged. This phenomenon of isomorphism is also reflected in higher education reform policies.

Another development that affected higher education institutions is the rapidly increasing use of information and communication technology. As Badrawi (2011) and Daniel et al. (2006) claim through global media and communications technologies, virtually everyone on earth is exposed to foreign ideas and practices, especially those of a handful of industrialized and post-industrialized countries. The scale of globalization has begun to break down national identities. As the global system develops and penetrates localities, individuals become consciously attached to the global system. This attachment illustrates the link of policy diffusion at national level, isomorphism among higher education institutions and the emerging ICT developments. As a result, national authorities are constantly seeking a balance between on the one hand directing their higher educational policy to meet the needs and demands in their specific country while on the other hand being part of the competitive global market (glocalization). Goddard and Puukka (2008) state that it is therefore essential for all nations to think seriously about how to blend the global tendencies in higher education, including increased attention to external quality assurance, to local, national and regional responsibilities and possibilities.

3.3.2 National demands on higher education institutions

Higher education institutions are getting more concerned about their legitimacy due to the changes in demands from their external stakeholders, while at the same time these changes are affecting their internal operations. Widening access, increased demand, new ICT, borderless education, reduced government funding, new forms of governance are some of the challenges that have impacted these recent changes. According to Baer et al. (2008), Gumport (2000) and Wright et al. (2004) traditionally, higher education institutions were considered as keepers of the wisdom and the core values of society. Now these institutions are expected to create and maintain their own learning capacity. They are designed to operate as a learning organization, promoting

---

[7] Policy diffusion: the transmission of similar policies (diffusion) across countries, leading to new ideas or incentives (Dobbin, Simmons, & Garrett, 2007).

[8] Isomorphism: the tendency to become alike (Jakobi, 2007). In the 1980s this concept emerged since organizations were becoming more homogenous due to change processes and revised demands, internationally and nationally, making them more similar but not necessary more efficient (DiMaggio & Powell, 1983).

learning, acquiring and disseminating knowledge, while at the same time they are constantly subjected to environmental modifications. By maintaining their own learning capacity they legitimize their role, function and added value for the community they are part of. Public higher education institutions are currently facing major legitimacy challenges. Therefore, stakeholders in the field of higher education, the academic management in particular, are expected to realize that we are living in a dynamic ever-changing environment that requires higher education to be highly adaptive in response to constant challenges and competition (van Ameijde et al., 2009; Bryman, 2007).

In this context, Baer et al. (2008) argue that becoming a 'learning organization' is essential for higher education institutions. The institution needs to learn, adapt and move on to the subsequent level expecting the next challenge. Knowledge acquisition and distribution at all organizational levels require constant expansion of the organization's core capacities across all levels and units and involve working together differently and in a more systematic way. Patel and Lynch (2013) state that learning experience based on academic and cultural exchange of global and local socio-economic and political issues can lead to enhanced knowledge acquisition among the participants in higher education. Students and teachers will learn from the global developments, and their local situation will also be relevant for their learning and teaching process, illustrating the emerged glocalization trend in higher education.

As outlined in assorted studies, higher education institutions are considered to be a firm contributor to the further sustainable national development (Badrawi, 2011; Ebong-Harstrup, 2004; Miller, 2002; Parkins, 2007; Pertrides et al., 2004). National governments are expecting these institutions to deliver highly qualified professionals that can add value to the professional developments in public and business areas. Higher education institutions have to play a prominent role of becoming national capacity builders.

A wide range of new public policy instruments has been introduced to guarantee that higher education institutions comply with mandated national policies and indicators measuring their activities, performances and also their outcomes. According to Baer et al. (2008) and Dill (1999) these institutions are functioning under increasing national pressure in the form of performance indicators, teaching assessments and academic audits to maintain or improve the quality of teaching and learning and finally the students' outcomes. These new public instruments are reshaping the environment in which higher education institutions carry out their organizational processes. In particular, these institutions have become accountable for their outcomes, based on the resources offered to them, meeting the 'value for money' requirements. This kind of academic accountability urges these institutions to perform differently and to become more receptive and adaptive to a new, rapidly changing and competitive environment.

The issue of accountability is widely discussed in higher education debates at national level (van Ameijde et al., 2009; Kristensen, 2010; Miller, 2002; Pertrides et al., 2004; Wright et al., 2004). Organizational and individual performances are publicly scrutinized and indicators are outlined to measure to what extent higher education

institutions meet the needs and demands according to a set of governmental requirements. In addition, the quality of the outcomes, e.g. graduates, is also subjected to external evaluation (accreditation). Public higher education institutions are more frequently asked to demonstrate the achieved levels of faculty productivity as well as student learning outcomes.

Pertrides et al. (2004) explicate that performance-based funding in higher education has nowadays become quite common in many countries. Governmental funding is more and more linked to performance on outcome measures. These are related to increased public demands for higher education institutions to improve quality, productivity and effectiveness. This emerging trend is illustrated by the organizational management theory of 'New Public Management', to be addressed in section 3.4.2. As Pertrides et al. (2004) note, formerly legislators were satisfied to receive information on indicators such as college's enrolment figures, the number of credit hours delivered and the types of classes students were taking. Now they are demanding information that can be more directly linked to academic results, such as the percentage of graduates and their quality level linked to accreditation mandates. These indicators of the quality level of the outcome are then linked to state allocation of funds, in a bid to provide these institutions with a strong impetus to focus on and improve student outcomes. Hence, governments have mandated performance measures to be put in place to improve student success. In fact, as will be explicated in this study, higher education institutions are using quality improvement mechanisms (internal) and peer review evaluation (external) as tools to meet the actual national demands as they face the increasingly rapid changes in the globalized world.

The rapidly increasing significance of higher education has also led to an increase in the numbers of higher education providers (Badrawi, 2011; Bridges, 2009; Dew and Nearing, 2004; Goddard and Puukka, 2008; Kristensen, 2010). Growing demand for new and higher level skills on national labour markets has put pressure on national governments to support an increase of higher education providers and/or to make more distance learning opportunities available to their citizens. Therefore, the higher education map of most countries, regardless of their level of industrialization, has come to be characterized by a diverse mix of public and private institutions. At the same time, national universities located in less developed countries are aiming to attract larger numbers of international students and academic staff in order to become players in the global arena of higher education. Internationalization is now considered to be a fundamental goal of tertiary institutions worldwide (Luijten-Lub, 2007).

In conclusion of this section, we can state that rapid external demands often require frequent adaptation and institutional change in many higher education institutions in order to implement strategies for improved efficiency and increased output. Presently for these institutions it is a continual struggle to maintain and build connections with their external environment, both global and national, while meeting their own particular, institutional demands of teaching and research. Higher education institutions therefore find themselves in an awkward position to deal with the challenges originating from national forces and at the same time to comply with

international demands. Nations are now expected to equip themselves with the tools for 'tying down the global to the local', while higher education institutions are facing continuous pressure to do the same.

3.3.3 Summing up

As can be summarized from the two previous subsections, according to several studies diverse developments in the higher education arena can be identified as affecting and transforming the functioning of these institutions (van Ameijde et al., 2009; Baer et al., 2008; Baldridge, 2001; Badrawi, 2011; Dill, 1999; Goddard and Puukka, 2008; Jakobi, 2007; Miller, 2002; Pertrides et al., 2004; Wright et al., 2004). In this study, we label these developments as 'multi-dimensional'; some developments originated from one perspective, yet they are also followed and felt in different ones. As mentioned earlier, developments affecting the field of higher education can originate within or outside the institution and can occur at the macro, meso and/or micro level.

Based on literature analysis we have generated an overview of the multidimensional external developments affecting changes in higher education, as outlined in table 3-1.

Table 3-1 External developments influencing higher education

Environmental setting		Developments in higher education arena	
		External environment (macro)	Organizational level (meso)
External	International	Knowledge society coupled to knowledge – based economy	
		Market forces and pressures	
		Evolution in quality approach, resulting in accreditation requirements	
		Technological advances	
		Globalization of universities	
		Political diffusion, followed by adaptation of educational policy and more cross-countries similarities.	
		Cross-border higher education	
		Increase possibilities of distance and e-learning	
		Focus on lifelong learning	
	National	Knowledge society	Increase higher education providers
		Political calls on accountability	Intense competition among universities
		Coupling of state funding to student performance	Expansion of non-profit institutions
		Influence of market forces and pressures	Shift towards restructuring of higher education as a market place
		Massive/growing demand for higher education	
		Demands to be contributor of sustainable national development	
		Rules related to the allocation of financial funds	
		Emerging evaluative environment	
		Output and productivity measures	
		Higher demands on quality level	
		Demands to acquire an accredited status	

Table 3-1 illustrates the many international and national reasons why transforming higher education institutions is currently quite irreversible. In addition, table 3-2 presents an overview of the internal causes of changes in higher education institutions.

Table 3-2 Internal causes changing higher education institutions

	Developments in higher education arena	
Internal context	**Organizational level (meso)**	**Individuals (micro)**
	More emphasis on quality assurance	Lack of personal time/ time pressure
	Demands on higher level of education of the academic staff	A general and significant increase in the amount of time spent engaged in research (more stress on getting PhD).
	Continuous quality improvement approach	More focus on performance and responsiveness to stakeholders, including employees, students and employers
	Strategic planning based on organizational learning and creativity	Increasing involvement demanded in innovation
	Partaking in accreditation prospects	
	Research became the primary standard for promotion and tenure	
	High demands of faculty's time	
	Changing demographics of the students' population	

In order to prepare the students for working and living in this contemporary world higher education institutions are expected to be continuously involved in organizational change processes at all levels, consistently working on quality improvement, ultimately aiming to attain and/or maintain an accredited status, either at institutional and/or at program level.

3.4 Internal organizational factors affecting higher education institutions

Besides the explored external trends, higher education institutions have to deal with their own internal environment as well. As Tierney (1988) states "institutions certainly are influenced by powerful, external factors, such as demographic, economic and political conditions, yet they are also shaped by strong forces that emanate from within" (p.3). Looking back to chapter 2, the key internal organizational components explained in section 2.4 can be evidently related as well to the internal environment of higher education institutions (Baldridge, 2001; Berings et al., 2011; Hooiberg and Choi, 2001; Kezar and Eckel, 2002; Kondakci and Van den Broek, 2002; Kraatz and Zajac, 2001). The organizational structure, leadership and management, organizational culture and the available resources are also affecting change processes in higher education institutions, such as accreditation processes, as will be discussed below.

3.4.1 Structures of academic institutions

Mintzberg (1980, 1981, 2001) and Weick (1976) characterize educational institutions as professional bureaucracies that are based on a series of separate, yet loosely interrelated departments, structures and work processes partitioned in different units.

These units are managed by persons with professional expertise based on educational credentials and/or relevant experience. As explained in section 2.4.1 and portrayed in figure 3-1, an organization structured according to the dimensions of a professional bureaucracy is characterized by a flat structure with a thin middle line, a tiny techno structure and a fully elaborated support staff. A great deal of power is located at the bottom of the structure and is possessed by the professionals of the operating core; in case of higher education institutions the academic staff.

Figure 3-1 Structure of Professional Bureaucracy
Source: Mintzberg, 1981, p106.

Mintzberg further describes that in professional bureaucracies rules and regulations are made at the institutional level but these are usually general enough to permit varying interpretations at lower levels. A great deal of the organizational power is in the hands of the professionals. As a result, the organizational structure reflects decentralization; power over many decisions, both strategic and operating, flows all the way down the hierarchy to the professional of the operating core. The operating procedures are complex yet standardized and each professional can operate independently of his or her colleagues. These characteristics are generally reflected in the organizational structure of higher education institutions. For instance, because of their professional autonomy, teachers often work independently with the students and are not subject to direct control of colleagues. Birnbaum (1989) notes that linkages within most units in (higher) educational institutions are stronger than linkages between units. Sometimes what happens in one unit has little to do with what happens in another because units operate quite autonomously. According to Weick (1976) this loose coupling between units is often caused by the fact that the responsibilities assigned to them do not always promote coherency and cooperation among them.

Baldridge (2001) opposes the typology of Mintzberg, labelling universities as professional bureaucracies. This author argues that universities are 'organized anarchy'.

> It is an organization in which people talk past each other, in which generous resources allow people to go in different directions without coordination, in which leaders are relatively weak and decisions are arrived at through the non-coordinated actions of individuals. Since goals are ambiguous, nobody is quite sure where the organization is going or how it will get there. The situation is fluid. Decisions are often by-products of activity that is unintended and unplanned (2001, p.156).

This point of view was earlier identified by Cohen et al. (1972) as the 'garbage can model' in which they describe the main elements of organizational anarchy: "problematic preferences, unclear technology based on trial-error procedures and fluid participation" (p.1). They typify this type of organizations as having no shared goals, with no clearly defined boundaries and decision makers resolving problems without reaching consensus among the participants. According to these authors "To understand processes within organizations, one can view a choice opportunity as a garbage can into which various kinds of problems and solutions are dumped by participants as they are generated" (1972, p.2) Furthermore, they state that specific elements of the organizational structure influence outcomes of a garbage can decision process by affecting the time frame for application of the problems choices, solutions, or decision. In addition, the involvement and investment of the potential participants in the decision making process, together with the linkages among the various groups are organizational features affecting the result. These organizational factors are applicable to the theory of organized anarchy. Cohen et al. (1972) specify further that universities tend to make use of the garbage can model during their decision making process, therefore acting as organized anarchies.

Regardless of the incorporated organizational design and attached decision-making structure several researchers in higher education suggest that alteration of the academic structure, sometimes reflected in the addition or deletion of units takes place in order to meet modified external and internal demands (Gumport, 2000; Graumans, 2000; Hanna and Latchem, 2002; Kezar, 2001; Meade, 2000). According to these authors for instance, the emergence of accountability requirements set by governmental policies described in section 3.3.2 has led to fundamental change in the structure of academic organizations.

Relevant for this study is to determine if the organizational structure incorporated in the studied universities did indeed affect the accreditation processes. Is the theory behind professional bureaucracies indeed valid for the five universities under investigation? Or are they operating as organized anarchies? And how does this affect the accreditation processes? In chapter 9 these questions will be addressed when analysing the results of the case studies.

3.4.2 Leadership and management in academic settings

A wide range of information concerning the role of leadership and management in higher education institutions has been presented in the previous sections. Accordingly, institutional leaders are expected to secure a sense of stability as the organization navigates through times of environmental uncertainty and turbulence, while taking into account a variety of demands of external stakeholders as well as of a diverse group of organizational members internally. Hayward (2008) states that staff members in leading and/or managerial positions in higher education institutions are increasingly confronted with a variety of challenges when addressing the fundamentals of globalization. Hooiberg and Choi (2001), Koen and Bitzer (2010) and Middlehurst and Lewis (1992) affirm that the context of leadership and management in higher education

is dynamic, complex and multidimensional. According to these authors, academic leaders need to lead, motivate or direct their units to accommodate transformation collaboratively. In addition, Baer et al. (2008) contend that leadership skills and competencies are supposed to be strong in adaptive, flexible scenario-based problem solving. Following on what was stated in section 2.4.2., these authors claim that distributed (shared) leadership, a high level of commitment and shared accountability are necessary for transformative change (see section 3.2). They further argue that interconnected relationship, social interactions and networks influence leadership. A high level of commitment, also indicated as integrative engagement, refers to the level of involvement of the individual workers in the change process. This is assessed by the extent to which expectations, goals, resources, risks and benefits are shared as well as by the quality of the work relationships. According to a number of authors, including Baer et al. (2008), Bryman (2007) and Hooiberg and Choi (2001) leaders and managers encouraging this type of organizational behaviour are to be considered as contributors to the achievement of the perceived institutional and/or departmental goals.

During the past few decades there was a shift from the traditional principles on academic leadership to what has been termed 'New Managerialism' or its synonym 'New Public Management' (see section 2.4.2). According to Deem (2001) new managerialism is "the extent to which contemporary business practices and private sector ideas or values have permeated publicly funded institutions and work practices" (p.7). Those promoting new managerialism claim that the concept is based on the objective search for effectiveness, efficiency and excellence, heading towards a continuous improvement management approach (van Ameijde et al., 2009; Deem, 1998, 2001). This type of leadership also penetrated the higher education sector. Local governments more and more mandate accountability responsibilities from higher education institutions as part of their funding support and of their improved quality control regulations. Van Ameijde et al. (2009) mention:

> As a result, Higher Education institutions are no longer the protected entities whose legitimacy is taken for granted, but instead are expected to face the complexity of balancing the need to operate according to market pressures, teach an increased number of students despite diminishing financial means while struggling to maintain traditional academic and educational principles of quality (p.764).

Debates in the higher education field pinpoint the paradox arising from this shift. The introduction of performance measurement and quality control procedures aimed at improving the effectiveness, efficiency and accountability of higher education institutions have at the same time contributed to the creation of additional bureaucratic layers of control, which have often been experienced as inhibiting organizational effectiveness and responsiveness. A number of authors also address the negative effects of these external measures through the pressure they create on academic and non-academic staff, and the resulting tensions between management and staff in higher education institutions (van Ameijde et al., 2009; Deem, 2001; Kondakci and van den Broek, 2009; Middlehurst, 1997). These pressures affect the staff's internal

performances, while it is precisely these performances that are being measured and judged. According to van Ameijde et al. (2009) distributed leadership, characterized by collegiality and professional autonomy can deal with these paradoxes: sharing accountability and responsibility jointly with encouraging high level of commitment, while at the same time making use of the available expertise of a multidimensional group of professionals. Still, these authors argue that besides shared leadership vertical leadership needs to be well in place too.

Nowadays, academic leaders are supposed to possess more collegial and political characteristics than an authoritarian attitude (Baer et al., 2008; Baldridge, 2001; Bryman, 2007; Fralinger and Olson, 2007; Gumport, 2000; Pertrides et al., 2004). Fralinger and Olson (2007) indicate that collegial governance allows the academic community to work together to find the best answers to issues facing the university. Collegiality consists of shared decision-making processes and a set of values agreed upon by university hierarchies.

Research also indicates collegial decision-making as the ruling ideology regarding management approaches in higher education. Baldridge (2001) for instance, comments that management in higher education institutions is expected to take place based on the consensus approach: listening, facilitating, persuading and negotiating; not commanding, leading and giving orders. To fulfil their task the academic decision makers have to possess both professional expertise to insure high esteem among their colleagues and interpersonal abilities for developing the professional consensus needed to carry out the organizational goals. Clearly, negotiation and compromise rather than authoritarian dictates are the strategies that are supposed to be most employed. Baldridge also indicates that the contemporary academic president ought to play a more political role, pulling together coalitions to fight for desired changes. He emphasizes that the academic president is not the key figure anymore, "It is the 'staff', the network of key administrators who actually make most of the critical decisions. The university has become much too complicated to be ruled by any one person, regardless of its stature" (Baldridge, 2001, p.169). In addition, Baldridge asserts that in educational institutions authority is usually given to a senior staff member, who has an extensive knowledge of the typical issues encountered in the unit or department and is therefore responsible for coordinating the work to be performed by members of a team, committee or group of faculty members within a department or division. This view can be linked to the organizational structure according to professional bureaucracy, described in sections 2.4.1 and 3.4.1.

Van Ameijde et al. (2009) and Mintzberg (2001) indicate that professional autonomy granted by the universities is necessary in order for faculty staff members to effectively address problems raised during the core processes of teaching and learning. Moreover, Mintzberg (2001) notes that standardization of skills and knowledge is the key to coordination between the operating professionals. It is thereby necessary that the professionals stay in a continuous training process, generating new knowledge and developing new skills, and therefore upgrading their professional expertise (learning

organization). According to Dill (1999) the academic structure must permit these staff members to consistently and effectively work on their professional development.

Legislative rules and procedures, including for instance certification and accreditation requirements by various external regulatory agencies, also have an influence on the management configuration in educational institutions (Baer et al., 2008; Dill, 1999). Leaders of higher education institutions and/or managers of particular units are allowed the level of managerial freedom provided by the national act on higher education and/or their own statutes.

In order to analyse leadership and management styles in the complex context of academic institutions four major models have been identified: bureaucracy (structure), collegial system (people), political system (political influences) and organized anarchy (Baldridge, 2001; Birnbaum, 1989; Boddy, 2008). According to Birnbaum (1989) however, each model highlights certain aspects of an organization while obscuring others. "Some elements of each are revealed in institutional functioning in some ways, at sometimes, in some parts of all colleges and universities" (pp239-240). None of these models are found in the absolute sense in higher education institutions since these institutions clearly can have characteristics of more than one model.

We can conclude from our literature review that academic leaders and managers in higher education institutions are not all-powerful as many assume them to be. Power is more diffuse, blocked by the professional experts (professional bureaucracy) and split into many departments and subdivisions (distributed leadership). Moreover, also external forces mandate accountability responsibility to higher education institutions (new managerialism). Under these circumstances, in general, the ones in leading and managing positions neither have the power nor the information to consistently make laudable decisions.

One of the key questions that can be derived from the discussion addressed in this section is how accreditation processes are being led in the studied universities and what management principles are being used? What kind of management approach will become manifest while examining the studied universities? Kezar and Eckel (2002) argue that there is no one-to-one relationship between actions and results. The same leadership style can easily produce divergent results in two apparently similar institutions. Likewise, institutions with very similar missions and curricula can perform quite differently because of the way their identities are communicated to internal and external stakeholders and because of the varying perceptions these groups may hold. This can be captured under the concept of 'organizational culture', in case of universities identified as academic culture, to be explored below.

3.4.3 Organizational culture in academic settings

Fralinger and Olson (2007) define organizational culture in the context of academic settings as "the values and beliefs of university stakeholders, based on tradition and communicated verbally and nonverbally" (p.86). They further indicate that an effective academic culture teaches and exhibits appropriate behaviour, motivates individuals,

and governs information processing. According to them cultures are created in part by management and these key persons in organizations have an important role to develop, deal with and even confront existing cultures within their organizations. They also note that university's leaders for instance are more and more becoming aware of the concept of culture and its significant role in institutional change and development. Fralinger and Olson (2007) further argue that as such, good knowledge of the assumptions, values, norms and intangible signs among faculty members, support staff and administrators is required for successful leadership in higher education institutions. However, cherished values, beliefs, assumptions and practices that are part of the organizational culture in universities are frequently questioned due to the unprecedented challenges around the world that higher education is facing. Strydom et al. (2004) assert that these changes have profound implications for the organizational culture within higher education institutions.

Tierney (1988) states "organizational culture is a useful concept for understanding management and performance in higher education" (p.3). He further contends that this internal dynamism has its roots in the history of the organization and derives its force from the values, processes and goals held by those most directly involved in the organization's operations: board members, administrators, faculty, support staff and students. Furthermore, Tierney indicates that studying the cultural dynamics of educational institutions contributes to understanding the internal personal interactions and can reduce adversarial relationships; it will enable the recognition of how those actions and shared goals are most likely to succeed and how they can be best implemented. Culture influences the change strategies and decision-making process. Moreover, according to Tierney effective leaders and managers are expected to be well aware that they can take a given action in some institutions but not in others. Understanding the institutional culture will help leaders and managers assess the reasons for such differences in institutional responsiveness and performance. According to Tierney (1988) this will allow those in leading and managing positions to evaluate likely consequences before, not after they act. The understanding of culture will thus aid them in spotting and resolving potential conflicts and in managing change more effectively and efficiently.

Since organizational culture can be considered as one of the factors affecting organizational change processes (section 2.4.3), according to a number of authors, academic culture in higher education institutions can be linked with organizational success (Berings et al., 2011; Harvey and Stensaker, 2008; Kezar and Eckel, 2002; Lomas, 1999; Silver, 2003; Strydom et al., 2004; Tierney, 1988). According to these authors, it is best for higher education institutions to have a culture that encourages change, yet culture can also be modified due to change. In other words: culture shapes the institution's change processes and strategies, whilst the outcome of change is a modified culture, illustrating the mutual feedback loop between organizational culture and the organizational performance outcomes.

Silver (2003) questions however the existence of only one dominant culture within higher education institutions and affirms the coexistence of several cultures within one

organization (see section 2.4.3). This author argues that there can be differing cultures within higher education institutions which are linked to the departments and the different disciplines. Silver consequently states that universities are not 'monocultural', but rather multicultural organizations, consisting of different cultures adaptively coexisting in the organization. Accordingly, there is an amalgamation of the corporate culture (the culture felt of common shared beliefs and values that mostly reflected management approach), academic culture (how is research dealt with and how does the different disciples related to each other), faculty culture (the shared beliefs and values at this layer of the organization) and competition culture (competition for promotion based on teaching and research criteria). So, according to Silver, a unitary culture is less apparent in contemporary higher education institutions.

3.4.4 Available resources in academic institutions

The fourth internal organizational factor affecting change attempts in higher education institutions are resources. Wright et al. (2004) state that human resources, financial funds, facility services, infrastructural provisions, ICT facilities and library services are the main resources necessary in higher education institutions to meet the demands set by their diverse stakeholders. However, often the availability of these resources does not meet the demand. According to Wright et al. (2004) higher education institutions are faced with diminishing budgets and growing demands on scarce resources. Lack of the required financial means due to restricted grants from the national governments is one of the recent developments that have led to limited possibilities with regard to the other resources needed, such as expansion of personnel, upgrading of infrastructural provisions and implementation of advanced technological and communication facilities. Higher education institutions are facing these challenges whilst the expectation on their performance is growing.

Institutional leaders and departmental managers are responsible for effective utilization of the limited resources and motivating the staff members (faculty and administrative) to perform at maximum quality level. However, in many cases, as Wright et al. (2004) indicate faculty members experience an increase in their workload, which has an influence on their willingness to participate and contribute in change processes. According to Kraatz and Zajac (2001) a reduced amount of financial funds available for the increased tasks for the employees is currently one of the distressing developments in the higher education arena. Moreover, Kraatz and Zajac identify this development as an evident threat in reaching the goals and objectives set by higher education institutions, potentially leading to challenges for survival and progress. According to their study the quality of the products and services is presently therefore at risk and for this reason higher education institutions need to become more innovative, responsive and efficient in their use of resources, time and funds (Kraatz and Zajac, 2001).

3.5 Conclusion

Developed as well as developing countries have become aware of the ever growing importance of knowledge, the emergence of knowledge societies and their impact on their national economy and further socio-economic development. Accordingly, the development of the higher education sector has become a priority in most countries, regardless of their size and phase of development. Higher education institutions are the major suppliers of the intellectual capital the communities need to survive and prosper in the era of globalization. However, complexity, conflict, uncertainty and instability have penetrated the daily lives of academic staff. They have difficult commitments and decisions to make regarding unwelcome or confusing national or institutional policies that affect their daily operations and even their long term professional implications. Technological developments have also led to procedural, structural and cultural change in academic settings worldwide. Higher education institutions therefore, are facing continuous pressure for change. Changes in the external environment require appropriate adaptations of the operations of higher education institutions. Among others, the stringent demands for accountability and responsiveness as well as continuous improvement of the quality of the outcomes are some main challenges these institutions are facing due to the contemporary worldwide trends. For this reason higher education institutions can be thought of as a complex maze, challenged to continuously make the match between the external influences and their internal components.

While reflecting on this chapter some key issues relevant for this study with regards to higher education institutions stand out. Four internal factors might affect change processes were identified which will serve as the basic fundament for the conceptualization of the research model. Higher education institutions are primarily considered as professional bureaucracies, with decision-making structures at all institutional levels. Leadership and management in academic settings are influenced by a wide variety of external trends, yet also by internal particularities. The emerged concepts of distributed leadership and new managerialism more and more have been discussed in higher education debates to explore the most effective ways of leading and managing academic institutions. Effective leaders and managers are characterized by being a political negogiator, having a high level of professional expertise and possessing encouraging interpersonal abilities. Furthermore, a collegial culture based on collegiality and professional autonomy was identified as part of the academic culture in higher education institutions needed to be taken into account when trying to understand organizational change processes. The availability of financial and human resources, together with other institutional facilities were the last internal factors identified as potentially exerting influence on the progress and outcomes of change processes in this type of institutions. In this study we will analyse the impact of these four internal organizational factors on the progress and outcomes of accreditation processes. In the next chapter we will explore the main characteristics of accreditation processes as the last step towards the conceptualization of the research model, which will guide the comparative analyses to be done afterwards.

4 Quality assurance and accreditation in higher education

Having introduced the fundamental aspects of organizations and how higher education institutions as changing organizations can function in this rapidly developing world, in this chapter we continue with our literature review and will concentrate on accreditation, mostly considered as the provoker of significant organizational change processes within higher education institutions. Together with chapters 2 and 3, this chapter outlines the theoretical background of this study: possible encouraging (enablers) or hindering (barriers) factors that can have an impact on accreditation processes within higher education institutions.

This chapter serves two purposes. On the one hand it provides theoretical background information on the core object of analysis in this study, namely accreditation processes worldwide used as an instrument for external quality assurance. Understanding the distinct characteristics of accreditation processes will enhance our insights on this topic in order to better comprehend its complexities. On the other hand, the acquired knowledge and insights on accreditation processes will result in the identification of possible enablers and barriers during such processes. This information will build the bridge to the remaining parts of this study and guides the empirical part.

Before defining the concept 'accreditation' and going into details of the characteristics of accreditation processes and their possible consequences for higher education institutions, the concepts 'quality', 'quality assurance' and 'quality improvement' and consequently internal and external quality assurance are explained in order to clarify why embarking on accreditation processes has become an important vehicle to prove the quality level delivered.

At the end, considered from the perspective of the internal organizational context, possible enablers and barriers of the progress and results of accreditation processes are discussed. These factors are then linked with the theoretical information on organizational characteristics of higher education institutions presented in chapters 2 and 3. By doing so, the literature review will reveal the variables to be included in our research model, which will be conceptualized in chapter 5.

4.1 Quality and quality assurance in higher education

This chapter starts by defining the concepts 'quality', 'quality assurance' and 'quality improvement' in order to inform on the relevance of these concepts for the topic under study.

4.1.1 Defining quality

In literature there is a wide variety of conceptualizations of quality in use. The concept 'quality' lacks a common definition that could be applicable in all fields. Multiple meanings have been given to quality depending on the perception, perspective, focus and individual analysis of the particular author or based on the view of the customer. Csizmadia (2006) states "There is no single, absolute, agreed or universally accepted definition of the term, but there exists a range of overlapping interpretations of it" (p.23). Van Bruggen et al. (1998) describe that "Quality is a multi-dimensional concept; it is dynamic and expresses itself in continuous innovation" (p.84).

According to Westerheijden (1992) "There are (at least) as many definitions of quality in higher education as there are categories of stakeholders (such as students, teaching staff, scientific communities, government and employers), *times* the number of purposes, or dimensions, these stakeholders distinguish" (p.13). Various analysts in the field of higher education, among others Harvey and Green (1993), Billing (2004), Lomas (2004), Parri (2006) and Douma (2009) have perceived five ways of defining quality in higher education based on the view of the stakeholder:

Exceptional: quality is linked to high standards and refers to something distinctive, special and exceptional. It implies continuous striving for excellence. Quality is achieved if the standards are surpassed. The quality provided has passed a set of quality checks and reached exceptional results. Excellence in the exceptional view claims that excelling in input always leads to quality output.

Perfection: quality is focused on flawless performance and strongly related to consistency in the process. It aims for zero defects and getting things right and done well. Perfection is ensuring that everything is correct, there are no faults. Perfection should also be delivered consistently. In this view the process determines the quality delivered.

Fitness for purpose: quality is judged by the extent to which the product or service meets its stated purposes. These purposes can be externally (customers) and/or internally (providers) defined. This approach is developmental as it recognized that purposes may change over time. So, it implies continuous evaluation of the product in order to fit the changed purposes. In this case not the process, but the output is crucial to define quality.

Value for money: quality is assessed in terms of return on investment. The investors expect accountability of the granted funds. For instance, public services are expected to be accountable to the funders (taxpayers) and to the customers (the users of the service). Performance indicators have been largely used to monitor efficiency and to check if the granted funds are well invested.

Transformation: quality is seen as a process of change. Through a process of transformation value is added to the product or service. Transforming the input through a well-defined process leads to output meeting quality standards.

To further explain, according to the *exceptional view* on quality, academic settings must set the goal of always trying to be the best, achieving better outcomes than the others. Harvey and Green (1993) state that admitting only the best school leavers is one of the ways higher education institutions use to achieve higher quality output based on their view that high level input leads to high level output. The *perfection view* indicates that the process which a student goes through has to be perfect; there is no room for errors.

Douma (2009) posits that in higher education *fitness for purpose* generally refers to the extent any institution is capable of reaching its goals and objectives. This counts for quality at the institutional as well as at the program levels. A high quality institution is one which clearly states its mission or purpose and is efficient and effective in meeting the set goals. Quality is seen as compliance with goals, regardless of the relevance or importance of the goals to be met. In debates concerning quality the discussion has been raised regarding the concepts 'fitness for purpose' or *'fitness of purpose'*. Besides achieving the goals (fitness for purpose), it is also important to set goals that are appropriate and adequate for higher education purposes (fitness of purpose). In order to achieve quality in higher education both point of views are relevant (Luckett, 2003; Harvey and Newton, 2007).

Concerning *value for money* more and more higher education institutions are expected to be accountable to their stakeholders. Demands for more accountability to higher education institutions can be explained by this view on quality and can be easily linked to the ideology of 'new managerialism' (van Ameijde et al., 2009; Westerheijden, 2013). Governments invest financial resources, but mandate that the institutions need to present their outcomes related to the investment made, considered from a cost-effectiveness approach. In addition, students are one of the stakeholders that demand value for money. They expect high quality programs that meet international standards and that guarantee worldwide recognition of their diplomas, otherwise they can easily move to another (inter)national provider. As Parri (2006) indicates this means that higher education institutions are to a greater extent compelled to improve their quality standards in order to comply with these high demands from a range of interested stakeholders and achieve a more competitive position at (inter)national level.

Nowadays, the perspective of considering quality offered as part of *transformation* processes in higher education is noticeably assessed (Csizmadia, 2006; Douma, 2004; Harvey, 1999; Harvey and Newton, 2004; Parri, 2006). Students pass through a teaching process in order to transform them into graduates with the expected competences. At the same time, the institution itself is transformed continuously to be able to fit constantly changing external settings. The students' competences have to meet quality standards set at (inter)national level, which are in most cases assessed via the accreditation status. Csizmadia (2006) argues that as a result, the emphasis in the transformation view is one of improvement and change oriented rather than stakeholder or product focused; the focus is on the change process.

4.1.2 Quality assurance and quality improvement

Several authors assert that approaches to quality assurance are predominantly about establishing quality monitoring rules and procedures (Harvey and Green, 1993; Billing, 2004; Dew and Nearing, 2004; Harvey and Newton, 2004, 2007; Lomas, 2004; Parri, 2006; Douma, 2009; Kristensen, 2010). These rules and procedures are set at different levels and directed to assure the attainment of the desired quality outcomes. Systems of 'quality assurance' are established in order to guarantee the attainment of the required quality level. Mechanisms are put in place to create a quality culture.

Harvey and Green (1993) use the concept of 'quality assurance' in order to monitor the quality of services delivered. "Quality assurance is ensuring that there are mechanisms, procedures and processes in place to ensure that the desired quality, however defined and measured, is delivered" (1993, p.22). These authors further indicate that quality assurance is a systematic approach to do the right things in the right way. It is about having systems in place so that at any time the organization can deliver the desired product or service to meet the customer's requirements (fitness for purpose). They also specify that the purposes of quality assurance are: compliance, control, accountability and improvement. According to Douma (2009) quality assurance involves ensuring fitness for purpose and it describes all aspects of the ways in which organizations try to make sure that their activities are fully adequate for their intended purposes: they are 'doing what it says on the tin'. Douma indicates that the reasons why organizations might want to do this are numerous, including client satisfaction, financial accountability and marketing strategies.

Several authors reflect on the link between quality assurance and quality improvement, considered from the perspective of quality as part of a transformation process (Harvey and Newton, 2004; Lomas, 2004; Vroeijenstijn, 1995; Westerheijden, 2013). Harvey and Newton (2004) state that there is an improvement function connected to quality monitoring mechanisms and procedures to encourage institutions to reflect upon their practices and to further develop what they do. They also notice that a considerable amount of information and data about stakeholders' views need to be generated to provide feedback for quality improvement purposes. These researchers further argue that to be effective in quality improvement, data collected from surveys and peer reviews must be transformed into information that can be used within an institution to effect change. Furthermore, this information must be linked to a process of feedback and action. In short, there must be a means to close the loop between data collection and effective action, followed by adjusted planning. This approach to quality assurance, directed to continuous quality improvement is known as the Plan, Do, Check and Act (PDCA) cycle (figure 4-1), advocated by Deming in the industrial sector in the 1950s and later adopted in all other sectors.

This PDCA-quality improvement cycle shows great resemblance to the four phases of organizational change processes displayed in figure 2-1 (section 2.2.3): diagnose, initiate, implement and institutionalize. Working on continuous quality improvement means that the organization is going through organizational change processes, leading to transformation.
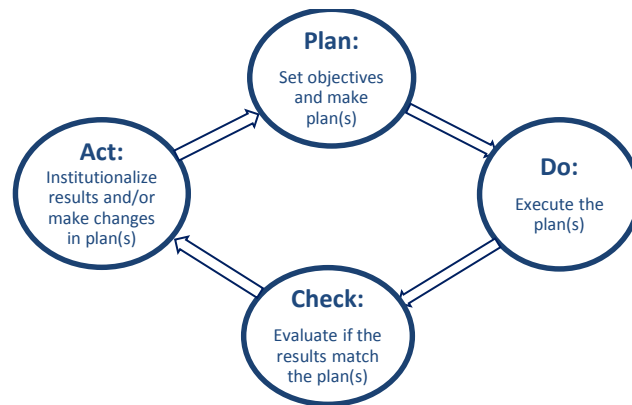
Figure 4-1 The PDCA-cycle

The work of Deming[9] is dominant among contemporary educational leaders seeking to improve institutional performance and stakeholder's satisfaction level in order to facilitate their collaboration. His point of view on continuous quality improvement has become widely supported by several authors. Dew and Nearing (2004), Douma (2009), Harvey and Newton (2004), Lomas (2004), Parri (2006) and Redmond et al. (2008) explain that for quality assurance, the continuous quality improvement cycle starts with good planning (P). Then, the activities necessary to achieve the plans have to be performed (D). After the doing phase the results must be checked against the original plans while trying to understand the causes of the results and thus learn from the results (C). After analysing and understanding, actions need to be taken in order to improve the process and/or institutionalize the achieved results (A). Suggestions from the A-phase provide the input for a new P-phase, enabling the whole cycle to be repeated again and again. Hence, through a process of continuous planning, implementing, evaluating, analysing and eventually revising plans and restarting the cycle, quality improvement becomes an integral part of the operational process within an organization. Deming declares: 'Quality never ends'.

With regards to quality assurance systems in higher education institutions, Lomas (2004) contends that quality assurance activities give these institutions a means by which they can find out whether their academic programs and performances are comparable with those of other institutions and are meeting national expectations and international demands. These institutions are expected to go through the cycle of continuous quality improvement —also indicated as quality enhancement— to

---

[9] The PDCA-cycle is also known as the Deming Cycle, the Deming Wheel or the PDS(Study)A cycle. Dr. Edward W. Deming's (1900–1993) philosophy is that by implementing appropriate principles of management, organizations can increase quality and simultaneously reduce costs. The key is to practice continual improvement and think of manufacturing (or education) as a system, not as bits and pieces. Dr. Deming is considered to be one of the founders of the total quality management (TQM) approach in the private sector, later adopted to almost all other sectors.

guarantee the quality of their programs remains consistently high. To this end, external review or evaluation offers an independent perspective, a mirror without the distortion caused by familiarity. This author considers continuous improvement as a crucial and integral part of quality assurance. Moreover, Lomas (2004) argues that in a mature and reflective institution, the self-knowledge is important. If this knowledge is related to internal and external review and evaluation, inevitably it will lead to the conscious recognition of strengths and weaknesses and the identification of areas for improvement and development on a continuous basis. Accordingly, Lomas (2004) advocates that quality assurance and quality improvement are complementary to each other.

This dichotomy is frequently discussed in quality literature (Frederiks et al., 1994; Harvey and Newton, 2004, 2007; Parry, 2006; Vroeijenstijn, 1995; Westerheijden, 2013; Williams, 2002). Vroeijenstijn (1995) questions the use of quality assessment instruments endorsed by governments to check both quality assurance (accountability) and embedded quality enhancement mechanisms (improvement). Williams (2002) draws attention to the movement of quality assurance to quality enhancement seen from the perspective of external quality reviews, mostly linked to accountability, inspection and/or accreditation. Harvey and Newton (2004, 2007) assert that quality assurance involves a variety of monitoring procedures mostly aiming to achieve various objectives: accountability, improvement and information. These authors affirm that there is a growing pressure on higher education institutions to be more responsive to a range of stakeholders [10] (accountability) and to continually improve to meet changing needs (improvement). Generating viable information is necessary for meeting both of these objectives. Information gathered can be used for external funders, mainly governments, to prove that public money is spent appropriately since higher education institutions are increasingly made more responsible for decisions taken and investments made. Information is also needed that helps inform choice and to aid funding allocation decisions. This view links information to accountability, instead of improvement.

Meade (2000) opines that higher education institutions often are expected to explain to the society what they are doing and how well they are doing it, according to pre-set indicators. Higher education institutions are expected to become more accountable for their actions. In line with this perspective, Westerheijden (2013) also questions if quality assurance can be indeed related to quality improvement. According to this author "what the national schemes actually did to higher education systems overwhelmingly remained assessment, without affecting enhancement much" (p.40). Westerheijden concludes that since many of the national quality assurance systems, coupled with accreditation purposes are focused on maintaining standards and achieving set of performance indicators, enhancement is actually not encouraged. The

---

[10] There are a variety of stakeholders in higher education, including governments, external funding agencies, academic and non-academic staff, students, alumni, science communities and the employment sector related to each specific program. However, stakeholder's views on the purposes of higher education may vary. They also use different criteria to judge quality.

focus is hence merely on accountability rather than on improvement, "what gets measured, gets done" (p.41). He notices that some national external quality assurance systems are trying to switch their focus though. The ideology of new managerialism, together with the increased attention for accountability responsibilities for higher education institutions contributes to this discussion on the link and/or disconnection between quality assurance and quality improvement in higher education.

4.1.3 Globalization affecting quality assurance in higher education

According to Harvey (1999) quality has become a major concern in higher education since the 1990s, "During the 1990s 'quality' evolved from a marginal position to being the foremost concern in higher education alongside funding issues. The evolution of quality has been one from vague concept to articulated procedures" (p.2). Charles (2007) affirms this statement by explaining that although the concern with accountability and quality assurance in higher education goes back to the medieval age, it was not until the latter part of the 20th century that these concerns came into the sharp focus that they enjoy today. Daniel et al. (2006) acknowledge this advanced attention to quality in higher education by indicating that the technological revolution has affected higher education as well, along with massive market opening for profit-based institutions. So, as discussed in chapter 3, globalization is changing the demands made to higher education systems (Daniel et al., 2006; Enders and Fulton, 2002; Martin and Stella, 2007; Meade, 2000).

Martin and Stella (2007) contend that the massification, diversification and privatization of higher education systems worldwide as well as the growing mobility among professionals and students require greater standardization among qualifications. As a consequence, international instruments designed to assess the quality of higher education were urgently needed to address this demand and to combat academic fraud. According to these authors, within this context new mechanisms of quality assurance have become an essential component of the globalized world of higher education. Higher education institutions that want to become part of this highly competitive world have to be prepared to prove that they meet international quality standards. These researchers further argue that if an institution for higher education wants to compete on a worldwide level, it must be 'accredited'. Hence, accreditation, as will be elaborated in section 4.4, has become one prime vehicle that higher education institutions use to prove that the quality of their educational programs complies with quality standards on an international level. Having a diploma from accredited higher education institutions has increasingly become a prerequisite for entry into the (inter)national labour market, but also for access to further study at a higher level. As a consequence, globalization changes the direction of national policy making decision in education, leading to policy diffusion (see chapter 3). Higher education institutions have to meet the terms of global and national requirements. These institutions often use internal quality assurance systems to meet the external quality assurance standards linked to accreditation mandates.

4.1.4 Implications for this study

We acknowledge that while addressing influential factors during accreditation processes, different perspectives of quality could be perceived. In this study however, we will be considering quality as compliance, perceived as combination of *fitness for purpose* and *fitness of purpose*. In fact, accreditation can be linked to both concepts: the object to be assessed (e.g. institution, program,) sets its goals to deliver quality and the quality assessors evaluate if the goals fit the standards at that particular higher educational level according to (inter)national criteria. Above all, this study will explore the concept of quality as a result of change (*transformation*). Oftentimes higher education institutions go through transformation processes in order to achieve the accredited status. This transformation process will be the main focus while analysing accreditation processes in the studied universities.

Furthermore, in this study, while considering quality as part of the institutional transformation processes, we will implicitly look at the quality improvement processes taking place in order to transform what is needed to meet the accreditation standards. The purpose is to identify those enabling and hindering factors affecting these processes. By doing so, we will to a limited extent assess the extent to which the accountability obligations are served by the studied universities *(value for money)*, but we will actually concentrate on the improvement activities implemented in order to achieve the accredited status (*transformation*).

It is in this context, that we study accreditation processes. We consider how the universities internally organize their accreditation processes in order to meet the external set of accreditation standards, while aiming to identify the factors that one way or another have a determinant influence on these processes. This is the reason why in the next section the link between internal and external quality assurance is further explored.

4.2 The two dimensions of quality assurance

As can be concluded from the previous section, during the past decades external quality assurance has emerged at (inter)national level. In their effort to meet national demands and also become competitive worldwide most higher education institutions aim at reaching the internationally set quality standards and consequently receiving the accredited status. To gain this international recognition these institutions introduced various internal quality monitoring tools and implemented a system of internal quality assurance. Below the commonalities, distinctions and relation between these two dimensions (internal and external) of quality assurance will be further addressed, preceded by an explanation of both concepts.

4.2.1 Internal quality assurance

Internal quality assurance involves the evaluation, assessment and improvement of the quality conducted by the institution itself. The prime goals of internal quality assurance systems are information, accountability and improvement, related to the

delivered quality of the products and services. As observed by several authors, the PDCA-cycle (figure 4-1) is often used as the main guiding vehicle during the internal process of quality assurance (Dahlgaard et al., 2000; Dew and Nearing, 2004; Douma, 2009; Harvey and Newton, 2004; Redmond et al., 2008). Actually, these studies indicate that this continuous quality improvement cycle is implemented as a means for internal quality assurance. Furthermore, these studies describe that a dynamic, open, self-examining, interactive system is required to achieve a continuous quality improvement approach. Based on literature analysis, table 4-1 contains the different steps to be taken in order to implement an internal quality assurance system according to the PDCA-cycle.

Table 4-1 The internal quality assurance process based on a PDCA-cycle

PDCA-cycle	Systems in place	Activities
Plan	• Identify the responsibilities related to the actions to be implemented; • Encourage ownership of plans of action; • Indicate accountability for action taken or not taken.	• Determine strategic goals and targets; • Develop policy plan on quality assurance; • Standardize policies formulation, rules and procedures; • Define (improvement) processes in order to implement plans; • Develop evaluation instruments.
Do	• Encourage an open approach of learning and developing among employees; • Implement creative and innovative ideas guided by institutional rules and procedures; • Make contemporary technology available; • Commit appropriate resources.	• Implement activities as outlined in policy plans; • Implement rules and procedures regarding quality assurance (control) and quality improvement.
Check	• Collect data in a structured and systematic manner; • Execute good analysis and interpretation of collected data; • Provide feedback to generators of the data and relevant stakeholders.	• Gather information on results and data needed for evidence-based decision making and improvement, using the evaluation instruments; • Execute data-analysis and interpretation; • Execute self-assessment to measure the achievement of the pre-set level of quality and quality standards.
Act	• Create feedback loop of the results to all concerned; • Modify the quality policy based on the acquired results and feedback.	• Based on data-analysis, make the approved results permanent in the institution; • Based on data-analysis and results define improvement processes, where necessary; • Review standards, rules and procedures to reflect the results of the Check-phase and to make possible adaptations to plan, in order to start the next cycle; • Based on the self-assessment, prepare for external evaluation according to a given quality framework of the external review agency.

A wide variety of instruments are employed as part of an internal quality assurance system, including surveys of students[11] and recent graduates, internal peer review of teaching, internal audits and analysis of experiences of employers of graduates (Dew and Nearing, 2004; Harvey, 1999; Kristensen, 2010). The internal quality assurance system encompasses all the steps taken as part of the implementation of the PDCA-cycle (table 4-1). Critical reflection together with self-assessment contribute to the process of continuous quality improvement. Internal stakeholders are however responsible for their own part and have to be made accountable for the achieved results concerning their work. Did you do your job well, is a guiding question in this matter. Dew and Nearing (2004), Harvey (1999) and Kristensen (2010) acknowledge that establishing these systems is not an easy task, which is why so much institutional data generated by surveys or peer reviews is not well used to encourage developments and/or to effect change, irrespective of the good intentions of those who initiated the enquiries. According to Dew and Nearing (2004) encouraging a bottom-up quality improvement process alongside a top-down accountability requirement seems to be necessary in order to enable the implementation of the internal quality assurance system. According to these authors the Plan, Do and Check phases are facilitated by a top-down leadership model, but actual involvement of the employees and students is critical (C) if a higher education institution aims to adapt its quality plans (A) or launch new quality objectives (P).

Dew and Nearing (2004) explain that an essential feature of evaluation for continuous quality improvement in the perspective of internal quality assurance systems is the incorporation of peer review with input from external stakeholders and visiting international experts, mostly connected to an (inter)national quality review organization. Meade (2000) affirms that this approach is oftentimes accompanied by performance indicators reflecting the views of external stakeholders to monitor outcomes and informed policies and strategies geared towards improvement and/or accountability responsibilities. Internal quality assurance efforts are consequently link to external quality review.

4.2.2 External quality assurance

As Bogue (1998), Douma (2009), Harvey and Green (1993) and Parri (2006) have articulated, external quality assurance is an all-encompassing term that covers a variety of quality-related evaluations undertaken by agencies or individuals external to higher education institutions. 'External' in this regard refers to the fact that those involved are not part of the internal organization of the higher education institution under review. External quality assurance means that external experts furnish a judgment about the quality delivered, e.g. in teaching. This is usually done using pre-set quality standards and following standardized procedures. In general, it includes external assessment of the quality at the level of institution, program or subject area directed to ensure that the

---

[11] These surveys are mostly directed to the content of the programs, teaching staff, testing and examination.

institution has clearly defined internal quality monitoring processes and systems that guarantee effective and efficient learning results. Theoretically, this link highlights the close relationship between internal and external quality assurance, but the practice could be different, as will be further explained in section 4.2.3.

The development of external quality monitoring systems is a result of changes in the environment of higher education. In the literature reviewed a variety of reasons are mentioned to explain the initiation of external quality assurance, ranging from the emerging focus on accountability to continuous attention to improvement and international comparison due to globalization (Bell and Cullen, 2006; Billing, 2004; Bogue, 1998; Dew and Nearing, 2004; Harvey, 1999; Kristensen, 2010; Stensaker, 2003). Changed market forces, improved government directives to ensure that granted funds are well invested and increased demands to provide accountability to stakeholders are national developments that have directed enhanced use of external quality assurance systems. In addition, changes in the international environment as a result of globalization, internationalization, policy diffusion and emerging competition have led to systematic implementation of external quality assurance systems.

Billing (2004) is one of the researchers that contend that besides external driven motives for external quality assurance, higher education institutions have to deal with internal forces as well. Improving teaching and learning is one of the internal drivers for implementing an internal system of quality assurance and allowing external quality review. Other driving forces are: informing all stakeholders on quality, compliance with performance indicators and legal demands at national level, securing funding resources, achieving a more competitive position on international ranking lists and attainment of the accreditation status. Billing remarks however that external quality assurance systems are usually directed to achieve accountability and to prove to the public that the quality level provided is indeed on the agreed internationally competitive level.

Over the years there has been an evolution of external quality assurance, moving towards a system that is legally managed by the national government, externally driven, making use of internationally recognized external quality agencies, and resulting in public reports based on summative judgments. But in many cases both the internal and external functions of quality assurance (improvement and accountability) are served. As several scholars notice these institutions are responsible for demonstrating to their wide range of stakeholders (i.e. government, students and employers) that they are committed to the fulfilment of their mission (effectiveness), that they use granted resources efficiently (efficiency), that they meet the legal expectations (legitimating) and that they comply with pre-defined externally set quality standards (compliance). Improvement and accountability is a common thread through the different aims (Billing, 2004; Bogue, 1998; Dahlgaard et al., 2000; Harvey and Newton, 2007).

Commonalities and variations in external quality assurance models have been noted in studies (Billing, 2004; Harvey, 2004; Lomas, 2004; van Damme, 2000). The system and focus of external quality assurance can be quite diverse. Van Vught and Westerheijden

(1994) have presented a general model of external quality assessment, consisting of five aspects: the independent meta-level role of managing agent(s), self-evaluation, external peer review and site visits, the degree of confidentiality of reporting and the relationship between quality review outcomes and funding. According to these authors at that moment in time these elements were reflected in external quality assessment systems found in USA, Canada and Western European countries. In the literature of the 21st century, some similar elements of external quality assurance systems could be identified, as specified in table 4-2. This table however also illustrates the differences between the existing systems.

Table 4-2 Elements of external quality assurance in higher education

Topic	Main elements	Characteristics
Purpose and legitimate reason	Constitutional basis	Variation in the constitutions (legislation, rules and requirements) and authorities given to the involved external quality agency.
	Rationale	Differentiated purpose, e.g. accountability, competition, accreditation, (legal) compliance with performance indicators, recruiting of funding resources, improving teaching and learning, steering the national higher education systems in terms of resources and planning.
	Driving force	Internally and/or externally driven.
	Participation	Voluntary or compulsory participation.
Design	Aggregation level	Teaching, research or both.
	Agency	National or international quality agencies.
	Focus	Institution, discipline or program.
	Review panel	National and/or international members of external quality review agencies.
Site visit	Participants	Various stakeholders to be included during the site visit, e.g. management, academic and non-academic staff, students, graduates, representatives of the work field.
	Documents analysis	Wide range of documents need to be available for the review panel. Type of documents depends on whether the aim is to show compliance with performance indicators or merely proving that quality is provided.
	Activities	Meetings with various stakeholders (see list of participants), direct observation of teaching and/or guided tour.
Review Report	Openness of results	Confidential or public report.
	Focus of results	Encouraging development (formative: emphasizing recommendations for improvement) or judgment (summative: pass or fail) or graded judgment.
	(Inter)national focus	Results directed to ranking or not.

The differences aside, many researchers have pointed out that there is an emerging uniformity in the methodology of external quality assurance in the higher education sector (Billing, 2004; Douma, 2009; Harvey, 1999; Jeliazkova and Westerheijden, 2002; Watson and Madison, 2005). Three key steps are undertaken: self-evaluation resulting in a self-evaluation report, followed by external peer review, including site visit and finally the external review report[12]:

---

[12] These three steps related to the external quality assurance methodology will be further detailed in section 4.3.2, while addressing the main elements of accreditation processes.

I. *Self-evaluation process:* This process consists of two interrelated steps:

a. *Self-evaluation* is one of the most prominent tools used by higher education institutions to ensure that the institution focuses on quality issues on a regular basis. During this process the institution needs to be critically self-reflective on the achieved goals in relation to the original objectives. Watson and Madison (2005) argue that previously the self-evaluation process was mainly considered as purely part of the external review process and was not really internally embedded. More recently, the process of self-evaluation, followed by the peer-review visit is designed to enable a process of self-reflection by the institution. The involved parties are mostly obliged to reflect on what, why and how they are doing things the way they are doing them. Harvey (1999) asserts and Lomas (2004) affirms that the establishment of internal rules and procedures and the development of a culture of continuous improvement contribute to the implementation of internal quality systems which help long-term effectiveness as requested by external quality agencies.

b. The *self-study report* to be written by the institution is part of the internal process of self-evaluation. This report can be considered as a mirror which critically reflects the institution and/or the program to be evaluated. This report needs to be written according to the requirements of the external quality agency. This report is the initiating step of the external quality process and serves as the main information source for the external peer review. The self-study report concludes the internal quality assurance process while initiating the external one.

II. *External peer review:* The process of external review starts after submission of the self-study report. This report is scrutinized by the external organization, followed by a site-visit to the institution, done by respected peers. Time spent during site visits depends on the procedures of the quality agency. Site visits are usually used to validate the self-study report and ensure that the prescribed norms and standards are met. During site visits the review panel meets with several internal and externals stakeholders in order to verify the content of the self-study report and to evaluate if the object assessed indeed meets the set quality standards.

III. *Peer review report:* The reviewers produce an external evaluation report. In this report the results of the validation and verification of the self-study report linked to the external quality framework is presented, followed by a judgment. Most of the times this report also provides the object assessed with improvement suggestions that will be judged during the next assessment. This approach also illustrates that PDCA-cycle is related to the external review process as well.

To elaborate on the effects of the achieved results after going through an external review process, we can state that depending on the focus of the external review and the legal environment the peer review report can be made confidential or accessible to the wider public. A number of scholars claim that an encouraging effect on the behaviour

of higher education institutions will be created if the peer review reports are made public (Billing, 2004; Douma, 2009; Martin and Stella, 2007; Stensaker, 2003; Van Vught and Westerheijden, 1994). According to these scholars publishing the report will allow everyone to be informed about the quality of the institution or program and about the discrepancies between the higher education institutions. These institutions are therefore urged to perform better in order to attract enough funding and students. However, despite the stimulating effect that making evaluation reports public often has a on the internal operations of the institution, this method also shows that there has to be some external pressure on the institution to take internal quality assurance more seriously and work consistently to achieve the required quality level. In contrast, according to Van Vught and Westerheijden (1994) review reports that are public are mostly directed to the accountability purpose and therefore more restrained with their suggestions for improvement. In addition, these authors claim that institutions will be less open when they know that the report will be public. Therefore, publicizing review reports weakens the improvement function of the external evaluation process, while strengthening the 'compliance culture' as will be explained in the next section.

4.2.3 The link between internal and external quality assurance

During the internal quality process standards and procedures laid out by the external quality agency often serve as the guiding thread. Incorporating this external set of standards and procedures during the internal activities directed to quality assurance and improvement is expected to enable the external review process. The literature review discloses that higher education institutions often adopt an internal quality assurance process which mirrors the external review process (Dew and Nearing, 2004; Lomas, 2004; Martin and Stella, 2007; Meade, 2000; Parri, 2006). Most of the times this internal quality assurance process is clearly designed to assure that each external quality standard scores well on the assessment. However, while such a process may lead to organizational learning and improvement in outcomes, there is a danger that a focus on conforming to external assessments may encourage a 'culture of compliance' (Dew and Nearing, 2004; Martin and Stella, 2007; Kristensen, 2010). This implies that the development and dissemination of new knowledge designed to improve the core processes of teaching and learning is substituted by the production of quality documents, policies and procedures in order to meet the external quality standards. Transformation as an important form of quality improvement is then not the prime focus, but depends on the space granted to it by the external quality agency. In this regard, Kristensen (2010) and Parri (2006) emphasize that management of the internal quality improvement process directed to external review is essential for guiding the quality processes from conformance to transformation.

In several studies the two most prominent functions of both quality assurance systems, namely improvement and accountability, are discussed (Billing, 2004; Douma, 2009; Dew and Nearing, 2004; Harvey and Newton, 2004; Martin and Stella, 2007; Meade, 2000). Improvement, which is the main focus of the internal quality process, is directed to enhancing the quality of the teaching and learning content and process. Higher

education institutions are generally more interested in this quality assurance function, together with the consequences linked to the results of the external quality process, e.g. funding possibilities. In contrast, external stakeholders, e.g. the government, are mostly interested in the accountability of the system in order to receive justification for the granting of funding. Actually, due to the wide variety of stakeholders and their divergent interests, higher education institutions are expected to comply with both the improvement and the accountability functions of the systems of quality assurance.

Hence, there is an overlap between internal and external quality assurance systems. This overlap consists of different features shared by both systems, including the focus, the stakeholders involved, the standards and procedures used and the self-study report. A well-operating system of internal quality assurance is a prerequisite for most systems of external quality assurance. This can be better linked to the accountability goal rather than to the improvement goal. Compliance with external quality assurance does not automatically imply that the aim to continuously improve is also reached. Accordingly, we can conclude that internal and external quality assurance systems ought to be integrated, interconnected and complementary to one another in order to reach both the improvement and the accountability goals.

According to Harvey (1999) the introduction of external quality monitoring, despite the added workload of self-evaluations and peer reviews, has been a useful exercise in focusing attention on quality issues, including what institutions are for, how they operate and how they could do things better and in a more responsive way. But, the question remains if this is indeed the case in all cases of external quality review. Positive results of the quality review by external stakeholders often seem to be a proof of a well-functioning internal quality assurance system. As will be exemplified in section 4.4.5, this study will investigate if the internal quality assurance policy of the five studied universities has indeed affected their accreditation process, as part of the external quality assessment system.

4.3 Accreditation as vehicle for external quality assurance

Global and national trends have led to increased concern with the quality of higher education in developed and developing countries. The proof of the achieved level of quality has turned out to be of great significance for higher education institutions, as they persist in their efforts to provide educational programs of high international quality. By doing so, they aim to issue qualifications with worldwide recognition based on international quality standards. Attaining and maintaining an accreditation mark is considered as evidence of the provision of at least the minimum required international quality level. In this section the concept of accreditation will be clarified.

4.3.1 Defining Accreditation

As we stated in chapter 1, accreditation is a public statement that a certain minimum level of quality has been achieved or surpassed by the institution or program

assessed[13]. Billing (2004) defines accreditation as "legitimation of institutions and programmes to award degrees and diplomas" (p.118). Westerheijden (2001) states that "Accreditation has as a distinguishing characteristic in comparison with other quality assurance methods the public statement that a certain threshold of quality is passed" (p.68). Westerheijden further characterizes accreditation as "… an evaluation based on agreed standards, resulting in a formal, public recognition of an institution or a programme"[14]. In other literature accreditation is considered as strongly connected with compliance to pre-defined standards as it is seen to be an objective instrument to measure quality (Bogue, 1998; Casile and Davis-Blake, 2002; Parri, 2006; Harvey, 2004; Kristensen, 2010; Martin and Stella, 2007; Watson and Madison, 2005).

Accreditation in the USA is distinguished by the fact that it is a nongovernmental form of quality assurance whereas in Europe it is a governmental instrument, mostly related to funding and accountability (Martin and Stella, 2007; Watson and Madison, 2005). The purpose of accreditation may vary; the focus may be on evaluation, improvement, funding, state control, scholarship possibilities and the legal right to award degrees and diplomas. According to Martin and Stella (2007), degrees obtained from non-accredited institutions of higher education are gradually not recognized anymore at both national and international levels, with consequences for graduates in terms of accessibility to the labour market and/or opportunities for further study. These authors project that enrolment rates of students in non-accredited institutions will be dropping rapidly. This trend is already perceptible in the Dutch Caribbean; parents and students started to question the quality of non-accredited programs and more and more are demanding the accreditation mark as a proof of the offered quality level.

Accreditation can take place at institutional or program level. Harvey (2004, p.208) defines accreditation of an institution as

> … an evaluation of whether the institution meets specified minimum (input) standards such as staff qualifications, research activities, student intake and learning resources. It might also be based on an estimation of the potential for the institution to produce graduates that meet explicit or implicit academic standard or professional competence.

According to Westerheijden (2001) "Institutional accreditation is intended to guarantee that the establishment is a 'serious' higher education provider that has effective quality assurance mechanisms for its programmes" (p.68). Institutional accreditation is also designed to ensure that institutions of dubious merit do not become established as bona fide higher education institutions. With the attainment of accreditation higher education institutions generally gain the license to operate. Institutional accreditation or re-accreditation, in Europe for example, is usually undertaken by national organizations, either government departments or government-initiated agencies that make formal judgments on recognition. However, in the USA, with a large private

---

[13] Even though there are many other accreditation subjects, in this study we only focus on institution or program accreditation since these are relevant for the objects under investigation.
[14] This quote is cited in Westerheijden (2001) from Sursock, 2000.

sector, accreditation is a self-regulatory process of recognition of institutional viability by non-governmental accreditation organizations. Yet, despite the voluntary nature of the process, there has been a funding link through eligibility for federal aid.

Program accreditation refers to the fact that not the institution offering the program is assessed, but each particular program is the accreditation unit (Bogue, 1998; Harvey, 2004; Westerheijden, 2001). Westerheijden (2001) states that "In programme accreditation, the actual delivered quality of the study programme is assessed, more or less ignoring how the higher education establishment reached this result" (p.68). So, basically within one institution there can be accredited and also non-accredited programs. The quality of each program is assessed to guarantee the quality level of the graduates. It depends on the assessment framework of the accreditation organization if an institutional and/or program accreditation is demanded[15].

The focus of accreditation can be on input, process or output or any combination of these (Casile and Davis-Blake, 2002; Harvey, 2004; Martin and Stella, 2007; Watson and Madison, 2005). To become accredited higher education institutions or their programs are expected to meet the standards set for the input, process and/or output factors. Institutional accreditation tends to focus on the quantity and quality of the staff members (academic and non-academic) and on the overall infrastructure, i.e. the physical space, the use and appropriateness of information and communication technology and availability of (library) resources. It might address this from the point of view of the student learning experiences. In addition, institutional accreditation can focus on financial arrangements and viability, governance and regulation, and administrative support. Also the internal system of quality assurance in place is included in the institutional accreditation. Program accreditation tends to focus on input factors, e.g. staffing, program resources and curricula design and content. Sometimes it addresses the teaching process, the level of student support and it explores outcomes, e.g. graduate abilities and employability.

After going through the process of external peer review, the report often leads to granting or refusing an internationally recognized mark signifying the achieved quality level. In most cases, getting accredited is a binary condition: either a program or an institution is accredited, or it is not. Harvey (2004, p.209) comments:

> However, the absolute of this binary state is blurred or softened by a "holding" decision that permits, in effect, progression to accreditation. This ranges from accreditation subjects to further actions, through probationary accreditation to permission to reapply for accreditation.

---

[15] There exists also 'professional program accreditation', implying that an external professional organization evaluates if the preparation of the graduates is suitable for entering a specific profession on the labour market (Harvey, 2004). The preparation of students is expected to meet or exceed the pre-defined set of standards appropriate for professional employability. No further attention will be paid to this type of accreditation, since it is not relevant for this study.

The trichotomy of accreditation results is further detailed in section 4.3.3 and illustrated in figure 4-3.

According to Harvey (2004) the primary value of accreditation is to be found in the process itself, not in the formal results of the process, i.e. the decision as to whether a program is accredited or not. Becher (2000), Billing (2004), Douma (2009), Harvey (2004) and Redmond et al. (2008) are some of the authors that state that the practice of continuous improvement implemented according to the PDCA-cycle as part of the internal quality assurance system usually contributes to enhancing the chances of attaining and maintaining an accredited status. These authors contend that in order to reach the accredited status higher education institutions have to develop and implement an internal quality assurance system that is internally acceptable and feasible and externally credible. Internal quality assurance systems are considered as the main instrument aiming to control and improve the quality level of the offered programs. Aiming for accreditation usually involves compliance with a set of procedures designed to gather evidence to enable a decision to be made about whether the institution or program can be granted an accredited status. The responsibility is on the applicants to prove their aptness and demonstrate that they accomplish the pre-defined set of standards and criteria.

4.3.2 Key elements of accreditation processes

To attain an accreditation mark, higher education institutions go through a process, mostly characterized by a variety of changes geared towards compliance with pre-set norms, procedures and standards of the accreditation organization. Based on the reviewed literature, in this study we consider accreditation processes as organizational change processes used as an important instrument for external quality assurance.

In section 4.2.2 the main elements related to external quality assurance processes were presented, which are generally indeed the steps to be taken during accreditation process (figure 4-2): self-evaluation resulting in a self-study report, site visit by peers resulting in a peer review report. This report is submitted to the accreditation agency by the higher education institution requesting the accredited status. Attaining the accredited status is the final result of an accreditation process (Douma, 2004, 2009; Harvey, 2004; Kwikkers et al., 2003, 2011).
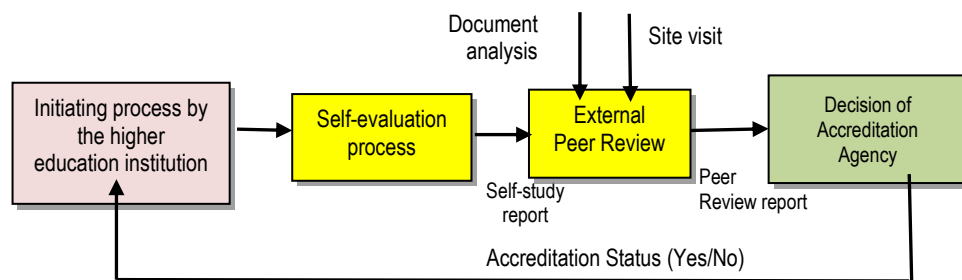
Figure 4-2 Steps to be taken during an accreditation process

The specific activities taken place in each step of the accreditation process are detailed in table 4-3. Traditionally, each accreditation organization has its own procedures that the institution or program to be accredited needs to follow. These procedures are set beforehand, so from the start the institution is well informed.

Table 4-3 Steps during an accreditation process

Steps	Key activity	Brief overview of related activities
I. Self-evaluation process done by the subject to be evaluated	1. Self-evaluation process	Quantitative and qualitative data gathering and analysis
		Development or adaptation of necessary (policy) documents
		Involvement of stakeholders
		Implementing additional improvement activities.
	2. Writing of the self-study report	Appointing of writing group or individual.
		Writing the report based on generated data, documents and results of improvement activities.
		Involvement of stakeholders.
	3. Contact with accreditation agency	Negotiating with accreditation agency, concerning components of the site visit, e.g.: - Date of submission of self-study report - Additional document to be submitted - Date and program of site visit - The constellation of the review panel
		Submission of the report to the accreditation agency.
II. External peer review process by selected peers	1. Reading of the self-study report	Selection of peers by the accreditation agency.
		Thorough examination of the self-study report.
	2. Review of additional documents and data-analysis	Analysis of policy documents and obtained data.
		Preparation of the site visit based on the analyses.
	3. Site visit: One to four days duration	Observation of facilities.
		Access to and studying of other learning materials.
		Studying of more documents.
		Meetings with groups of selected stakeholders, i.e. leaders, managers, deans, operational core (academic and non-academic staff), students, representatives of the professional field, alumni.
		Observation of the teaching and learning process
	4. Writing of external review report	Drafting of the external review report, based on the documents analysis and the results of the site visit, including a judgment on the quality of the object studied.
III. Granting accreditation by the accreditation agency	1. Studying of the review report	Submission of the external review report by the higher education institution.
		Thorough study of review report by the accreditation agency
	2. Decision making about the granting of the accredited status	Taking a decision concerning the quality of the object studied, based on the review report and possible collected additional information and/or documents.
	3. Granting or not of the accreditation status.	Announcement of the final decision.

As previously elaborated, the result of an accreditation process used to be a binary product: pass or fail. But, as the literature reveals, recently more and more an improvement period is granted in the case of a negative accreditation outcome allowing the institution to make the indicated upgrading, progresses and advances in order to finally get accredited (Douma, 2009; Harvey, 2004; Kwikkers et al., 2011). Sometimes also a probationary accreditation is granted under certain conditions; the institution needs to implement the necessary improvement plans in order to attain the final approval and accredited status. Figure 4-3 shows the results of an accreditation process shaped in a flow chart and illustrates the international common consequences related to the outcome of an accreditation process. The green block means that 'unconditional accreditation' is obtained; the orange block indicates 'conditional accreditation obtained', implying permission to continue with re-check after one or two years of necessary improvements; the red block implies 'non-accreditation', mostly with negative consequences, e.g. withdrawal of recognised degree, no more governmental funding and no students' grants.
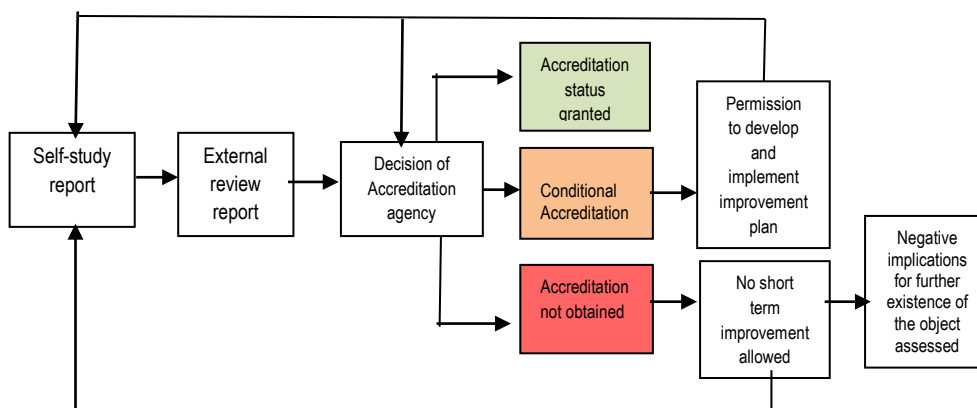
Figure 4-3 Possible outcomes of an accreditation process

Accreditation organizations always have their 'own' requirements and standards which are mostly derived from those that are universally acknowledged. The applying higher education institution needs to comply with requirements and standards. INQAAHE and UNESCO are worldwide organizations trying to regulate quality assurance and accreditation in higher education. Both organizations have published guidelines to facilitate comparability of accreditation frameworks and sustain the implementation of quality assurance mechanisms and tools at institutional level across the world (INQAAHE, 2007; UNESO, 2007; UNESCO & APQN, 2007). Also for the European context standards and guidelines for quality in higher education were formulated and approved. For instance, for the NVAO accreditation framework the 'Standards and Guidelines for Quality Assurance in the European Higher Education Area' provides the main input (ENQA, 2005). In any case, standards, procedures and criteria of accreditation organizations are subjective to global trends and demands on

quality assurance and quality improvements in higher education. As was emphasized by several researchers, these agreed accreditation standards, procedures and requirements evidently have an impact and shape accreditation processes and direct the institution or program under review (Becher, 2000; Bell and Cullen, 2006; Billing, 2004; Douma, 2009; Harvey, 2004; Martin and Stella, 2007).

In the accreditation framework the specific quality standards that a higher education institution are expected to meet are outlined. In most cases these standards are validated by the national government. These standards are used to evaluate the quality of the object to be assessed. In many cases, e.g. in case of NVAO, the system for internal quality assurance is usually part of this framework so the accreditation organization is assured of the continuous quality improvement approach of the institution and/or program after the process of accreditation. Generally, one of the requirements for the object to be assessed is that the self-study report is drafted in accordance with the accreditation framework. In order to attain the accredited status the institution and/or program has to comply with the set criteria of the accreditation organization. These criteria vary between these organizations and are also regularly revised so the accreditation organization stays up to date with global developments in this field and possible modification regarding the national requirements.

4.3.3 Implications of the accreditation trend

Although several reasons have been put forward that argue that accreditation is highly linked to the internationalization and globalization developments, the desire of a national government to control the quality of the country's higher education cannot be ignored. On a worldwide basis countries have introduced legal provisions emphasizing 'accreditation'. As a consequence, most higher education institutions are going through quality processes (assurance and/or improvement) in order to meet pre-defined accreditation standards at national level. These external quality standards are in many cases part of the national policy on higher education. However, these standards are highly influenced by international developments, e.g. the evolution of the global knowledge economy and its impact on schooling and employment.

The literature analysis reveals that the national context in which a higher education institution operates can have an impact on the embarked accreditation processes and helps to explain why certain approaches to quality assurance and accreditation were done in a particular way. Several authors have contributed to the discussion on the fact that external quality assurance system is more often initiated by the state (Bell and Cullen, 2006; Bogue, 1998; Westerheijden, 2001). In many countries, minimum standards are applied to ensure that higher education institutions reach a certain level of quality. National systems of higher education put pressure on their higher education institutions to meet those international quality standards related to accreditation. At the same time, these institutions also are expected to meet the needs and demands at national level so as to contribute to the community's further socio-economic development.

Generally, accreditation demands set by the national policy and politicians are often embedded in the national Higher Education Act. These legal procedures, rules and regulations regulate the functioning of higher education institutions. Moreover, at national level governments usually base higher education policy on accreditation outcomes. Successful completion of the accreditation process is linked to different benefits, depending on the legal framework of the country where the institution under review is located. In most cases government funding is attached to holding an accredited status. Another common positive consequence is the legal empowerment of the institution to grant titles and diplomas (van Bruggen et al., 1998). Furthermore, students of accredited institutions or programs become eligible for study grants (Douma, 2004; Kwikkers et al, 2011). There are also sanctions due to negative external evaluation reports. Billing (2004) among others contends that in an increasingly tight financial environment, government agencies are looking for justification to close programs or institutions, so that an unsatisfactory accreditation result often results in losing state funding, and in some instances closure of the institution or program. Harvey (2004) notices that accreditation also monitors the developments in the higher education field to ensure that accredited institutions continue to fulfil the national and international expectations awarded to them. National governments also use accreditation result as an instrument for weeding out the poor quality higher education institutions, addressing also the quality of "for-profit" higher education institutions.

Positive accreditation outcomes serve more purposes. Since accreditation is granted for a restricted number of years continuous improvements is stimulated. Internal regulations leading to the development of improvement plans based on accreditation results are not uncommon, illustrating the interrelatedness between internal and external quality assurance (Harvey and Newton, 2004; Martin and Stella, 2007; Parri, 2006). Basically, improvement can be identified as a spin-off of accreditation processes, which some agencies emphasize more than others (Martin and Stella, 2007). Nonetheless, improvement plans resulting from the external review reports are generally confidential, if disclosure is not mandated by the government or the accreditation agency. Also monitoring of the realization of improvements based on external review is uncommon. Only in cases where the accreditation agency links the attainment of an accreditation mark to the implementation of certain improvements, does such monitoring take place. More often, institutions or programs that have gone through the accreditation process and attained a positive result including some improvement suggestions tend to lie back for a while instead of moving on with developing and implementing plans for improvement. In other words, they relax with compliance instead of moving on to continuous transformation.

Attaining or securing a competitive position in the international higher education field is another purpose of accreditation. More and more higher education institutions demand that their collaborative partners hold the accredited status (Billing, 2004; Martin and Stella, 2007; Meade, 2000). This seems to provide the guarantee that the quality level of the institution and/or its educational programs is secured. Hence, for a higher education institution that wants to position itself on the international market

and be competitive in this globalized world it has become quite imperative to hold the accredited status; this independently of its geographic position, its development stage and/or its population size. The exchange of teachers and students is hereby facilitated. Also students who want to continue their studies at a different institution for higher education are currently confronted with the mandate that their (under)graduate qualification must hold the accreditation mark as evidence of the quality level of the program attended. Marginson and Van der Wende (2007) articulate that besides collaboration and cooperation there is also competition between higher education institutions, both at national and international levels. As the world has become smaller, students have more possibilities to attend programs offered at institutions for higher education all around the world.

To conclude we can state that higher education institutions on the one hand need to provide accountability of their performance to stakeholders while on the other hand they need to satisfy the requirements of an external quality agency. These two goals in themselves do not have to be at odds, yet where these two goals diverge, institutions face major challenges in complying with both.

4.4 Internal organizational factors affecting accreditation processes

Besides the international and national contexts affecting the performances of higher education institutions, the progress and eventually the outcomes of their accreditation processes are also influenced by their internal organizational context. Following on the generated information in the two previous chapters, four internal organizational factors are identified as variables affecting accreditation processes: the organizational structure, leadership and management style, quality culture and the availability of resources. In addition, the internal quality assurance policy is expected to encompass all these four variables to enable the accreditation process. These five variables are discussed below.

4.4.1 Organizational structure

As explained in sections 2.4.1 and 3.4.1, the organizational structure defines the roles, power, and responsibilities at the different organizational levels and distributes them among the internal stakeholders. This structure is in many cases dictated and regulated by national rules and regulations (Higher Education Act). The organizational structure provides the room for all stakeholders to manoeuver within the institution. For instance, it provides the possibilities for managers at the different institutional levels to exercise certain managerial styles. At the same time managers can feel hampered by the limits imposed by the established structure (Gumport, 2000; Graumans, 2000; Hanna and Latchem, 2002; Kezar, 2001; Meade, 2000). As was indicated in chapter 3, higher education institutions are usually structured as professional bureaucracies (Mintzberg, 1980; 2001; Weick, 1976)). The responsibilities are granted based on professionalism. According to Donaldson (2001) the most effective organizational design is where the structure fits the contingencies.

In general, the division of the tasks and responsibilities during accreditation processes are expected to be in accordance with the delineated powers and accountabilities lines set by the organizational structure. Graumans (2000) states that the organizational structure has great impact on the planning, organization and implementation of quality improvement processes geared towards accreditation. Organizational structures that are organized as an open system, interacting with internal and external stakeholders seems to encourage the progress of accreditation processes as these types of organizations react more promptly and in a timely manner to external trends. The question to be answered in this study is if this is indeed the case in the five universities.

4.4.2 Leadership and management style

Leaders and managers are expected to ensure that plans are executed and that everybody takes his/her own responsibility. Those in decision-making positions need to encourage ownership of plans of action by all stakeholders (Baer et al., 2008; Baldridge, 2001; Birnbaum, 1989; van Ameijde et al., 2009). In the context of this study, leadership in academic settings involves the development of a vision on quality assurance and accreditation, promoting this vision, encouraging its implementation and ensuring that this institutional vision is seen and used as an opportunity for continuous quality improvement (Gordon, 2002; Harvey, 2004; Keller, 2006; Middlehurst, 1997; Parri, 2006). However, literature reveals that institutional leaders sometimes are too focused on the achievement of the accreditation status (compliance). The actual (daily) involvement of institutional leaders in accreditation processes mostly depends on their own leadership style and also tasks and responsibilities granted to them by the organizational structure. Having the final responsibility for quality delivery does not necessarily mean that they themselves ought to be doing the job. Generally the responsibility for implementation is delegated to the managers at the different institutional levels.

Managers in academic settings are expected to be engaged in planning, organization, coordination and control of their respective department, based on roles, tasks and responsibilities granted to them according to the organizational structure, including those to be executed during accreditation processes (Baldridge, 2001; Bryman, 2007; Fralinger and Olson, 2007). According to several researchers accreditation can be considered as a shift of power from educators to managers, infiltrating the professional autonomy at the operating level (Baer et al., 2008; Bridges, 2009; Dodd, 2004; Keller, 2006). These managers are in charge of managing the implementation of the institutional quality vision and are often granted with the leading responsibility of accreditation processes as well.

Accordingly managers at the different levels of higher education institutions play a prominent role as steering officers in quality management and implementation of the internal quality policies and hence in the accreditation processes (Csizmadia, 2006; Dahlgaard et al., 2000; Gordon, 2002; Meade, 2000; Pratasavitskaya and Stensaker, 2010). The steering managers are expected to have the management capacity to lead the accreditation processes in the required direction so as to meet the pre-set standards of

the accreditation organization. These managers are considered as the initiators, leaders and key figures of successful accreditation processes. Moreover, they are supposed to be able to plan, direct and control the necessary organizational change processes so as to make them efficient and effective whilst aiming to reach the agreed objectives. By doing so, the managers have to continually strive to create the encouraging setting (quality culture) that according to them will influence all relevant stakeholders to act in ways that can meet their accreditation objectives.

Implementation of the PDCA-cycle is often used as a management tool during accreditation processes (Billing, 2004; Dill, 2000; Dahlgaard et al, 2000; Redmond et al, 2008). Deming has formulated 14 principles on how the management has to act to promote and sustain the implementation of such PDCA-cycle (Dill, 2000). Quality management starts with the quality vision, describing strategies and goals to be reached. The outline of the quality goals, quality policies and quality plans need to be derived from the institutional strategic plan. Managers are in charge of the implementation of the departmental internal and external quality assurance system. The internal quality assurance policy and system usually aim for improvement and describe the lines of authorities, responsibilities and ownership. Dill (2000) explicates that management has to facilitate the implementation of the quality policy document, document the course of all activities and analyse the results, which will lead to decisions. Finally, policy decisions need to be taken on whether to change the plans and if so, how this ought to be done, initializing the start of the next PDCA-cycle.

Birnbaum (1989) contends that shared responsibility instead of an authoritarian management approach is an essential element of management strategy in higher education institutions in order to enable the progress of accreditation processes. Following on this perspective, the emerged management approach of distributed (shared) leadership is more likely to be beneficial for the progress of accreditation processes (van Ameijde et al, 2009; Baldridge, 2001; Deem, 1998; Pertrides et al., 2004). In this regard, collegiality and professional autonomy are essential elements to be taken into account by the decision makers. Employees have to experience the accreditation process as a collegial approach rather than a top-down command. Collegial approach will encourage their commitment and investment in this process so as to reach successful accreditation results. According to Dahlgaard et al. (2000) management of educational institutions has the critical tasks of creating an environment that ensures that employees will work effectively towards quality goals and make suggestions about quality improvement. All of this contributes to the course of accreditation processes.

In this study we will verify if the leadership and management style used in the five universities had an effect on the progress of accreditation processes and eventually affecting its outcomes and if differences could be recognized between them. It is interesting to examine if and what kind of differences can be identified between institutional leaders and management at faculty level and possible consistencies and/or dissimilarities in their leadership and management styles.

4.4.3 Quality culture

As Kezar and Eckel (2002) state change processes, and accreditation process as one of them, can be highly influenced by the organizational culture. In this particular study the organizational culture is related to the care for quality, identified as quality culture, enabling among employees an open and innovative approach focused on quality delivery. Quality culture within an organization enables the focus on quality delivery. According to Harvey and Green (1993) "A culture of quality is one which everybody in the organization, not just the quality controllers, is responsible for quality" (p.17). The concept of 'democratizing' quality —everyone involved in a product or process is made responsible for quality at each stage— is related to the process of enabling a quality culture. Moreover, these researchers specify that the responsibility for quality is encouraged in the organization if each person is considered as a customer, a provider and a processor of quality. As a quality provider each person has the responsibility to ensure that his/her outputs fit the required inputs of the receivers. As a customer the requirements of quality must be clearly stated to the supplier. And as a processor quality must play an eminent role while executing it tasks and roles. This approach will create a quality culture at all levels of the organization. Harvey and Green (1993) conclude that with the existence of a quality culture within an institution there is basically no need for quality control at the end of a transformation process, because during the process all involved has the responsibility to deliver quality. These researchers criticize the implementation of quality control to check the final output. They argue that quality control will lead to destruction of the quality culture.

According to Berings et al. (2011) "quality culture is an organizational culture which contributes to the development of effective and efficient care for quality" (p.38). They also declare that a wide range of factors can affect the quality culture: traditions, customs, people's behaviour and the professional and collective orientation of the organization. As was previously stated, these factors contribute to create coexistence of several cultures between and within higher education institutions. Quality is not in all institutional units perceived with the same lens. So, while addressing quality issues, the coexistence of several quality cultures within the higher education institutions need to be taken into consideration.

Berings et al. (2011) further state that in case there is an appropriate fit between the quality culture and the internal quality assurance system the achievement of the strategic, organizational and educational goals can be maximized. Quality culture sustains the care for quality and therefore contributes to the process of accreditation. Well-timed involvement of the stakeholders enables the progress of accreditation processes since the care for quality of the products and services is encouraged. Reflection on the weaknesses and challenges of the people involved in the internal quality assurance process stimulates the creation of a quality culture and will enhance the chances of more successful accreditation processes.

The literature often mentioned that in order to meet accreditation standards within the institution there is a 'compliance' culture instead of a 'quality' culture. In many cases this compliance culture hinders the progress of the accreditation process (Berings et al.,

2011; Harvey and Stensaker, 2008; Gordon, 2002; Lomas, 2004). People are not really committed to deliver quality, but their main focus is only to comply with the pre-set quality standards. Building up an internal quality system and developing a quality culture is a challenge many managers of higher education institutions face.

As detailed in many studies, quality culture is actually greatly affected by the leadership and management style applied within the institution (Berings et al., 2011; Lomas, 2004; Kezar and Eckel, 2002). Leaders and managers can control how people deal with each other and how things are done within the institution. However, conversely, traditions and commonalities direct leaders and managers and the implementation of certain management tools, showing the tight connection between leadership and management, and quality culture, as was also indicated in section 3.4.3. Working towards obtaining an accredited status thus means in this regard that the institutional leaders and the managers at faculty level are expected to encourage the development of a quality culture. Traditions, customs and practices of the institutions exert influence on the accreditation process and may act as an enabler to more systematic engagement across the institution (Keller, 2006; Lomas, 2004). Also the way the internal stakeholders interact with each other during the accreditation process can ease or impede the progress of this process and therefore affect its results.

4.4.4 Available resources

Literature analysis shows that the availability of resources also has an impact on the progress of accreditation processes (Baer et al., 2008; Hayward, 2008; Kezar, 2001). The available resources, their quality and quantity, can facilitate or hinder accreditation processes. Insufficient availability of resources can obstruct the implementation of quality improvement actions and therefore hold back the accreditation process.

As mentioned in section 3.4.4 three types of resources can be identified: financial, human and facilities resources. Those in leading and managing positions of accreditation processes are generally also in charge of the available resources (Hayward, 2008; Keller, 2006; Lomas, 2004; Pertrides et al., 2004). They are expected to negotiate with the government and other funding agencies to receive the necessary financial resources in order to execute the internal quality assurance policy. In addition, they are also accountable for the use of the financial resources during accreditation processes. Human resources and facilities are also entrusted to leaders and managers. They need to deal with them in such a way so as the institutional objectives, among others the attainment and maintenance of an accredited status, are accomplished. Also the quality culture of an institution is affected by the availability of resources. A culture can be created based on the potentials and limitations of the available resources within the organization. In general, employees will act in accordance with these possibilities and limitations.

Efficiency is quite often one of the indicators used to evaluate the quality level of an institution or program (Hayward, 2008; Keller, 2006; Pertrides et al., 2004). Efficiency is connected with the resources used in order to meet the objectives (value for money

quality approach). Several governments have strengthened the bond between the quality of education and its monetary value mainly through demands of efficiency (see section 2.4.2 and 3.4.2.) (Deem, 1998, 2001). The concept of new managerialism has brought increased attention on the efficiency issue within higher education institutions. Furthermore, a minimum of resources needs to be available in order to develop, implement and complete for example a PDCA-cycle as an integral part of the internal quality assurance system and to comply with quality standards of external quality agencies (Pertrides et al., 2004).

4.4.5 The internal quality assurance policy

Besides the four previously identified potential influential factors a fifth internal organizational factor will be studied 'the internal quality assurance policy', which is closely related to accreditation processes. The institutional quality assurance policy entails the strategies, goals, objectives principles and operational guidelines for delivering quality products and services (Douma, 2009; Harvey and Newton, 2004; Redmond et al., 2008). In general, higher education institutions have a quality assurance policy plan containing the specified policies, guidelines, rules, procedures and regulations and where the internal quality assurance system is outlined. In this policy document the interrelatedness of all the other four influencing factors during the internal quality assurance process become evident. The organizational structure is taken into account, the management and leadership approach of the internal quality system is outlined, attention is paid to the creation and development of a quality culture and the guidelines for dealing with the available resources are laid out.

The internal quality assurance system contains the activities that need to be realized in order to deliver products and services that meet predefined quality standards, either at institutional, national or international levels (Dahlgaard et al., 2000; Dew and Nearing, 2004; Douma, 2009; Harvey and Newton, 2004; Redmond et al., 2008). Sometimes, at departmental level the institutional policy on quality assurance is specified by particular policies, rules and objectives, but these are expected to be in line with the institutional ones (Dew and Nearing, 2004). However, there may be interdepartmental differences. Consequently, within one institution there can be differentiation between the internal quality policies and systems at different organizational levels.

As previously explained in section 4.2.1, the internal quality assurance policy is mostly directed to comply with two functions: accountability to internal and external stakeholders, and improvement of the quality provision of delivered products and services (Billing, 2004; Bogue, 1998; Dahlgaard et al., 2000; Harvey and Newton, 2007). However, in general, the internal quality assurance policy is highly directed to comply with the quality standards as mandated by the external quality agency. Demands of customers and stakeholders (internal and external) provide input for the institutional quality assurance policy as well and are directed to stimulate quality improvement. Several researchers proclaim that it is not an easy task to comply with the customer's needs and demands as the customers' perspective vary (Keller, 2006; Pratasavitskaya and Stensaker, 2010; Westerheijden, 1992). There are internal (students and employees)

and external customers (government, work field of the graduates and the society as a whole). Creating customers' satisfaction depends on their expectations and demands. Measuring the extent of customer's satisfaction (internal and external) is necessary for obtaining knowledge of the customers' experiences of the products and services. This knowledge is essential in the process of continuous quality improvement that is fundamental for both the internal quality assurance policy and the external quality review process directed towards accreditation. Continuous measurement, collection and reporting on quality facts provide the information needed for internal adjustment of the quality process as well as for external accountability purposes.

The involvement of stakeholders is also relevant in this regard: how, when and what. The participation, commitment and engagement of the stakeholders (academic and non-academic staff, students, representatives of the working field and alumni) during an accreditation process function as an important indicator for the course of this process. Moreover, external experts are in many cases also hired during accreditation processes. The roles and responsibilities assigned to these experts besides their quality and the promptly use of them are also relevant. However, as many researchers indicate, the sustainability of using external experts may be low, as there often are few options to gain lasting commitment from permanent staff based on their temporary presence (Billing, 2004; Dahlgaard et al., 2000; Lomas, 2004).

4.5 Conclusion

While finalizing chapter 4 the first part of this study containing the theoretical background is completed. The research topic has been first placed within the broad concept of organizational theories related to higher education and then linked to quality assurance and accreditation. In this study two groups of potential influencing factors on accreditation process are identified: the external context and the internal organizational context. Both contexts might have a direct influence on accreditation processes. As will be elaborated in chapter 5 the focus in this study will be only on the effect of the internal organizational variables on accreditation processes. Description of the national context will merely serve to complete the external background information significant to understand the context in which each studied university operates. The information on the effect of globalization on higher education has served to explain why at national and institutional levels embarking on accreditation process has become essential, regardless of external and internal particularities.

In this study accreditation is considered as an external quality assurance instrument providing contemporary response to external and internal environmental developments in this rapidly changing globalized world. In the context of modern higher education, quality is about development and improvement, which is embodied in the *transformative quality approach*. However, quality indicators are also widely used to assess accountability as the key for improving the performance of the higher education sector (*value for money approach*). Transformative quality encourages an approach that sees quality as dynamic and continuous; that does not simply encourage improvement but enables a process of transformation too. In this chapter the link

between quality improvement and the *fitness for purpose perspective* was also illustrated. It turned out to be evident that quite often compliance becomes the main quality objective instead of improvement. Hence, the purpose of quality assurance systems is on the one hand to encourage educational improvement and on the other hand to demonstrate accountability. Therefore, compliance with external quality standards while implementing innovation strategies for transformation from the current status quo to a higher level is a battle still to be won by most higher education institutions, including those located in the Dutch Caribbean. In this study quality assurance systems will be further analysed from the perspective of transformation processes, characterizing accreditation processes.

Internal and external quality assurance are closely related. In many cases, higher education institutions organize their internal quality assurance policy and system in such a way that it reflects the requirements of the external quality assurance agency (accreditation organization), while using the PDCA-cycle, again demonstrating the compliance approach in quality assurance efforts.

The core of this chapter is accreditation and its attached process. Accreditation is oftentimes mandated by the national government. By doing so, governments aim to guarantee the quality level of national higher education and their international competitiveness. The progress and outcomes of accreditation processes seem to be influenced by five internal organizational variables: organizational structure, leadership and management style, quality culture, availability of resources and internal quality assurance policy. The impact of these factors will eventually affect the achievement of an accredited status. In chapter 5 these elements are blended into the research model that will guide the empirical study.

5 Methodology and operationalization

This study is a qualitative multiple case study research. First, this chapter presents a brief summary of the exploratory phase and how the results have led to the conceptualization of the basic outline of the research model. Secondly, based on the literature review presented in the previous three chapters, the potential internal influential factors during accreditation processes were identified and the research model was further shaped. In this chapter this research model is conceptualized and consequently, the variables reflected in the research model are operationalized.

Then, the road map that was followed to design the empirical study is detailed. We elaborate on the choices made and the decisions taken during the research process. Next, the organizing framework of the research done in this study is presented, explicating the research strategy and methodology used to generate information that can provide an answer to the research questions. Subsequently, the research instruments used to collect the data are presented.

This chapter ends with a summary of the research methodology and some conclusions are drawn to guide the empirical study in the remaining chapters.

5.1 The exploratory research phase

This study started with an exploratory phase, consisting of two components: a pilot case study and ten interviews. In Appendix 1 the main findings of both components are presented. Below, a summary of these research activities is presented, leading to the basic outline of the research model.

The pilot case study

At the beginning of the research process in 2009 a pilot case study was set up to explore the possibilities of conducting this research and to provide directions for the remainder of the study. In this way, an attempt was made to improve the efficiency and effectiveness of the main empirical study in order to conduct the research more successfully. The pilot case study took place at the University of Curaçao (UoC). Selecting the UoC as the pilot case study was convenient and feasible, given that the researcher is employed at this university. The research method of 'organizational self-ethnography' was applied (Alvesson, 2003; Hamdan, 2012). The researcher was able to examine all organization documents, initiate, attend and participate in the design and planning of the accreditation processes, planning of meetings and coaching and training of involved stakeholders. Field notes, personal diaries, work documents and email correspondence of the researcher were used to generate information needed for this pilot case study.

The pilot case study had various objectives. First, the case study was meant to refine the research objective. Having a well-defined research objective brought more concrete directions for formulating the research questions. This was also the second objective of the pilot case study: to screen, detail and amplify the research questions based on the results of this particular case. Then, the first draft of the basic outline of the preliminary research model was sketched and the research design defined. This objective was meant to identify those variables that may play a vital role during accreditation processes and to indicate influential contextual elements. This information was used to focus the remainder of the empirical study more explicitly. This action was specifically desirable to ensure that the study addresses those main issues during an accreditation process and does not dwell on possible irrelevant topics. The pilot case study was also intended to supply guidelines and directions to the literature to be reviewed. Moreover, it was meant to help to refine the data collection plans related to both the content of the data and the procedures to be followed. Another objective of the pilot case study was to assist the development of relevant lines of questions for conducting the in-depth interviews at a later research stage (2012). The pilot case study also helped to focus the semi-structured interviews, conducted as the second part of the exploratory phase. Finally the pilot study provided great input to make the main empirical study more efficient and effective. It provided valuable insights into the design and implementation of accreditation processes from a more objective point of view and added meaning and sense to the practical relevance of this study.

The exploratory interviews

During the period of July 2010 till August 2011 ten exploratory, semi-structured interviews were conducted in order to generate some additional empirical information on the feasibility, relevance and applicability of this study. The interviewees were: staff members of NQA[16], QANU and NVAO. All three organizations are involved in the accreditation processes of the studied universities. These staff members had experience with accreditation processes in both parts of the Kingdom of the Netherlands. They were involved in the baseline assessments and (trial) site visits in the Dutch-Caribbean universities and also had experience with Dutch higher education institutions. Since the interviews were semi-structured the course of the interview was determined depending on the background of the interviewee and his/her experiences in the Netherlands and in the Dutch Caribbean.

The interviews provided extensive information on mainly their experience with the organization and implementation of the accreditation processes in the Dutch-Caribbean universities. Analysing the ten interviews contributed in many ways to sharpen the research questions, and to narrow down, identify and operationalize the variables to be further considered during the research.

After analysing the main findings of both the pilot case study and the exploratory interviews, the basic outline of the preliminary research model was drafted, as presented in figure 5-1.
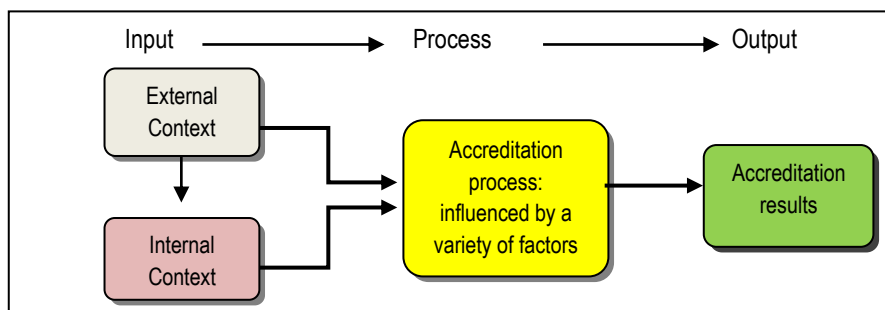
Figure 5-1 Basic outline of the research model

5.2 The conceptualization of the research model

The theoretical background presented in the previous chapters and the exploratory phase provided information that highlighted the main characteristics and the potential influential factors during accreditation processes. This information contributed to the definition of the variables in the research model. At the end, the research model shown in figure 5-2 was conceptualized based on a) results of the exploratory phase, b) the

---

[16] QANU is an external evaluation agency involved in accreditation processes of academic programs; NQA does the same job but mainly for professionally oriented programs.

basic outline of the research model, c) literature review and d) information gathered during early direct observation at the University of Aruba (UA). With regard to the structure of the model, an input-process-output structure is used as it best fits the research objective and research questions.

The research model was conceptualized from the perspective that the course of an accreditation process is influenced by the external context (international and national) of the higher education institution. However, in this study the influence of the international context is not further examined and the elements of the national context are analysed at a high aggregate level. In fact, the national context only provides data relevant for understanding the particular context within which the target universities operate. The main focus of this study is however the identified potential internal organizational factors. Moving towards the attainment of an accredited status and consistently working to maintain this status assume that these factors are predominantly present as enablers during such challenging endeavours.
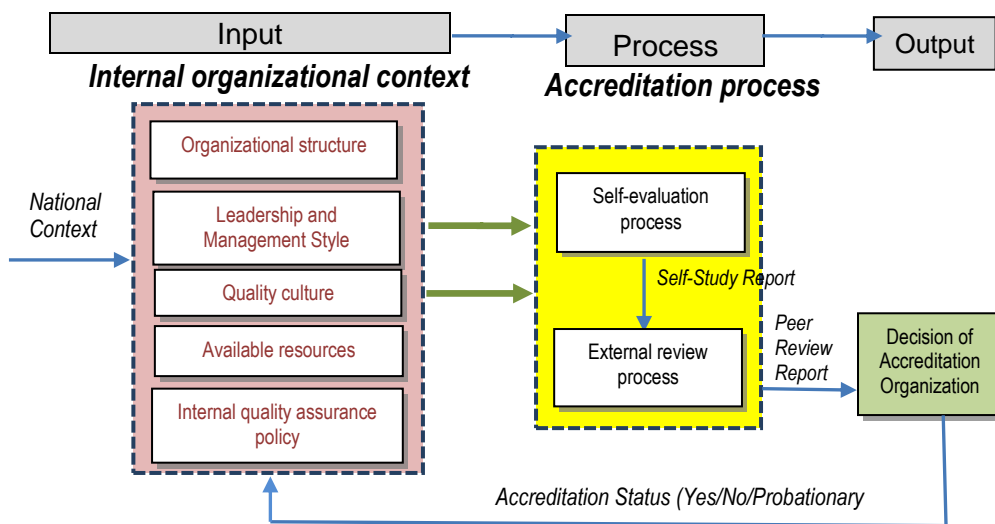
Figure 5-2 The Research Model

The study mainly addresses the 'outgoing' green arrows from the box of independent factors in figure 5-2, i.e. the potential influence of these internal organizational factors on the progress of accreditation processes. The literature analysis confirms that this set of factors may have the greatest effect on the progress of accreditation processes and eventually on their outcomes.

The empirical part of this study was conducted during the period of 2009 to 2012. During this period some of the universities were going through the accreditation process for the first time (UoC), the second time (HZ and UU) or were preparing to reach the accreditation goal (UA and USM).

5.3 Operationalization

As was noted in chapter 3, higher education institutions are open systems influenced by their contingent factors. Generally, during accreditation processes these institutions go through several organizational transformation processes geared towards the achievement of the accredited status. These transformation processes are affected by internal organizational factors (independent variables), which may have an encouraging or hindering effect on the progress towards accreditation and eventually on the achieved outcomes (dependent variables). In this study five independent variables and two dependent variables were identified. In addition, there are descriptive factors used to provide information of the national context of each studied university. NVAO is considered as the common factor in this study: all studied universities went through accreditation processes according to the accreditation system applied by this accreditation organization. Table 5-1 provides an overview of all the variables involved in this study.

Table 5-1 Overview of variables

Structure	Type of variable	Specification	Indicators
Input	Descriptive factors	Description of the national context according to these factors	Geographic position
			Demographic parameters
			Political context
			Economic situation
			Socio-cultural aspects
	Common factor	Accreditation system of NVAO	Accreditation framework, including the quality standards
			Accreditation procedures
	Independent variables	Internal organizational factors	Organizational structure
			Leadership and management style
			Quality culture
			Available resources
			Internal quality assurance policy
Process	Dependent variable	Accreditation process influenced by the independent variables	Self-evaluation process, followed by the self-study Report
			External review, including site visit, followed by peer review report
Output	Dependent variable	Accreditation outcome	Yes, No or probationary period

In this section all variables are operationalized in measurable indicators. Before the operationalization of the variables, this section starts with defining the concepts 'enablers' and 'barriers' in order to better comprehend the potential influence of the independent variables later on.

5.3.1 Defining enablers and barriers

As previously indicated, the external (national) and internal (organizational) contexts in which higher education institutions operate have a major impact on their organizational change processes. As Minor (2006) stated "Understanding the contextual aspects of an institution helps to better situate it and comprehend its organization activity" (p.29). Contextual factors can be potential enablers or barriers.

An enabler can be defined as a factor that has a positive effect on the progress and outcome of organizational (change) processes. Enablers will stimulate and facilitate the progress of the organizational processes towards the desired outcomes. In the end, enablers will have a positive impact on the results of the particular organizational process. An enabler mostly consists of several elements, which together will create its force. The absence of these elements can form a barrier that hampers this same process. A barrier brings challenges and complications to this process and can have an undesirable impact on its results. The results of organizational change processes depend largely on the mix of enablers and barriers experienced during such processes and the force of the enablers to neutralize the barriers.

According to the contingency theory it is difficult to indicate a priori what the 'best' value of a variable is; in other words, what makes a variable an enabler. In fact, it depends on the circumstances (Donaldson, 2001, 2008; Negandhi and Reimann, 1972; Lawrence and Lorsch, 1967). When attempting to reach the accreditation goal the institution can encounter various enablers and barriers at different levels, in different sectors and at different times. The effect of potential enablers and barriers become evident during the accreditation process. Finally the collective force of the enablers and barriers will lead to a particular result of the accreditation process. Identifying the *potential internal influential factors* (potential enablers and potential barriers) during an accreditation process is an important step in planning ways to stimulate this process, as a positive result is more likely if strategies are specifically chosen to make use of the enablers and address the identified barriers in an appropriate and promptly manner.

In section 5.3.3 we operationalize the identified *potential* enablers (and potential barriers) in this study: on the basis of high or positive values of most of the indicators of an independent variable we *expect* a variable to have a positive influence on the process of accreditation in the studied universities. Whether it *actually* has the expected impact, is described in chapters 7 and 8 (within-case analysis) and analysed in chapter 9 (within-group and across-group analyses). That is when next to enabler/barrier the category of neutral is introduced: some variables did not appear to act as barriers even though not all positive conditions were present to call them enablers.

5.3.2 The input factors

The descriptive factors

In this study descriptive factors as part of the national context are used in order to provide relevant external factual data of the studied universities, since this is most relevant for the topic under investigation. These descriptive factors have been selected as part of the real-life context wherein the contemporary phenomenon of accreditation takes place. Generating factual data and some qualitative information on the Dutch Caribbean and Dutch contexts shed light on the university's environment enabling a more in-depth understanding and a better comprehension of decision and steps taken during the progress of the initiated accreditation processes. Qualitative information

was also gathered to describe trends and patterns in the national context of the universities, such as information on the national policy on higher education and Higher Education Act. Eventually, this provides relevant background information to aid answering the research questions. However, as explained earlier, the prime focus in this study is the collection of data on the potential internal organizational variables.

As explained in table 5-2, the descriptive factors are the geographical position, demographic parameters, the political context, the economic situation and some socio-cultural aspects to serve as background information. Overall, this type of statistical data were collected from documents.

Table 5-2 Descriptive factors of the national context

Elements of the national context	Data collected
Geographical position	Information on the geographical position and the developmental stage of the country of each studied university,
Demographic and educational parameters	Information on the country format (km^2), country's population, population density, school attendance rate, repetition rate in primary education, graduation rate, dropout rate and participation rate in higher education.
Political context	Information on the political status, national political conditions, political involvement in higher education, national higher education policy, the national Higher Education Act and national regulations on accreditation.
Economic situation	Information on per capita GNI, Unemployment rate, Economic growth rate and Inflation rate.
Socio-cultural aspects	Information on cultural background, cultural pattern, communication behaviour and interpersonal manners.

The descriptive factors are in chapter 6 briefly discussed at a higher aggregated level compared to the potential influential variables in the internal organizational context.

Geographic position: the position of a country on the global map often affects its developmental stage; the difference between being located in the Caribbean Sea or in the European continent will be highlighted in chapter 6.

Demographic and educational parameters: some factual data on the national environment, mostly population and educational parameters, are collected. The question in this regard to be analysed later on is whether size matters to successfully complete the accreditation processes. Small, less-developed countries have, for example, limited financial and human resource possibilities, and therefore may have difficulty meeting particular demands of accreditation organizations.

Political context: Information on the national political conditions of the studied universities is also relevant to create a true picture of the national environment. Political changes and political involvement in higher education can have an influence on accreditation processes. Politicians, regardless of their expertise and background, decide on the national higher education policy and on the political approach to the higher education institutions (Jakobi, 2007). The ministers of education, during their political term, can also have an impact on higher education institutions, as it is not

uncommon for ministers to bring in their own philosophy and approach to education policy, causing constant changes in higher education policies. Additionally, politicians can operate at a distance with regards to higher education institutions, but they can also be highly involved, even in the daily operations of the institution. In this latter case, the institutional leadership is dependent on the extent to which politicians are involved in the institutional strategies, procedures and guidelines and consequently the level of autonomy granted to the institution. In those cases, the autonomous status of the institution is not acknowledged by certain types of politicians. In many such cases, this hampers the decision-making process and causes delays in decisions taken at institutional level (Minor, 2006). Consequently, this may lead to difficulties at leadership, managerial and operational levels, affecting the accreditation process.

Economic situation: Economic factors determine the financial potential of a country and consequently its funding possibilities. Industrialized countries in the well-developed parts of the world are more likely to have enough financial resources to deal with investments in the educational fields, including higher education (Marginson and Van der Wende, 2007). In contrast, less-developed countries have limited financial resources to invest in their higher education, but still aim to achieve accreditation for their higher education programs, which requires sufficient financial resources (Miller, 2002). Information on the financial potential of the population of a country, best represented in its GNI, is part of this study since lack of sufficient funds at national and institutional level can lead to restricted investment potential in higher education, which consequently may result in fewer possibilities to comply with the pre-set accreditation demands.

Socio-cultural aspects: As Lomas (2004) indicated oftentimes in the organizational culture of an organization socio-cultural characteristics at community level can be recognized. Socio-cultural aspects such as communication behaviour, interpersonal manners and individual and/or group behaviour in response to rules and regulations can influence the perceptions and interpretations of quality assurance in higher education institutions therefore affecting the progress of accreditation processes and their outcomes.

The common factor

The Accreditation Organization of Netherlands and Flanders (NVAO), which functions as the accreditation body for all five studied universities, is the common factor in this study. NVAO is thus not studied as a variable in this study.

All the studied universities had to comply with the accreditation procedures and pre-set quality standards as part of NVAO's accreditation framework, regardless of their location. In chapter 6 information of this accreditation framework is specified, together with its procedures and guidelines related to both accreditation frameworks applied during the research period. In the research model no concrete indication of the NVAO is portrayed since it is considered as part of the external context of the studied entities, which is not studied as part of this research.

5.3.3 The independent variables

As shown in the research model the independent variables in this study are all part of the internal organizational context that may affect the accreditation process and its outcomes: organizational structure, leadership and management style, quality culture, availability of resources and the internal quality assurance policy. The assumption is that these five internal organizational factors have a determinant influence on the choices made and steps undertaken during accreditation processes, and consequently on their outcomes. The progress of the different steps to be taken during accreditation processes is reliant on the enabling or hindering force of the mix of these internal organizational variables. The independent variables are operationalized into indicators that shape the description of the case studies and form the basis for the comparative analysis. Each indicator is a potential enabler (*enabler$_p$*) or a potential barrier (*barrier$_p$*) during accreditation processes and thereby may have a positive or negative effect on its progress and results. Below, each variable is defined and subsequently operationalized in indicators. After that, information is given on how a variable can become an enabler$_p$ and which data collection methods were used to assess the potential of the indicators.

A great challenge of this study is the assessment of each variable and its indicators individually as the variables are highly interconnected with each other. During the operationalization of the variables this challenge of interrelatedness is addressed by clearly indicating which indicators are parts of each variable. However, the descriptions of the variables below will show that a strict assessment of the variables and indicators individually is not always feasible.

Organizational structure

As mentioned in chapter 3, higher education institutions are usually considered as professional bureaucracies due to their organizational structure (Mintzberg, 2001). The division of the tasks, authorities and responsibilities during accreditation processes are expected to be in accordance with the delineated roles and accountabilities lines set by the organizational structure. This is mostly needed in order to comply with governmental and legal directives.

This variable is operationalized by two indicators: organizational chart and decision-making structure. The organization can operate as an open system, with a structure that facilitates the decision-making procedures. An organizational chart is an *enabler$_p$* if it supports and encourages accreditation processes with unambiguous hierarchical delineation. The extent to which an organization is formalized and/or centralized is examined in the case studies. The decision-making structure can become an *enabler$_p$* if it closely reflects the organizational chart, based on clear definitions of roles, responsibilities and authorities and decisions are taken according to a well-balanced system of formal and informal decision-making activities. These characteristics need to be found on paper, but also in the 'day-by-day' activities. Document analysis and deepening questions during the interviews provided information on this variable.

Leadership and management style

In the context of this study, according to reviewed literature successful leaders and managers in academic settings develop a vision on quality assurance and accreditation, promote this vision, translate this vision in institutional strategies and policies and support and encourage its implementation (Gordon, 2002; Harvey, 2004; Keller, 2006; Middlehurst, 1997; Parri, 2006). However, literature reveals that those in leadership or management position sometimes are too focused on the achievement of the accreditation status (compliance). The actual (daily) involvement of them in accreditation processes mostly depends on their own leadership and management style and also tasks and responsibilities granted to them by the organizational structure.

In this study this independent variable is split into two indicators: the role of the institutional leader and management at faculty level. The role of the institutional leader is operationalized in terms of the level of commitment and involvement of this decision maker to support quality assurance and accreditation efforts. Management at faculty level, i.e. deans/academic directors, is measured by roles and responsibilities given and taken by these line managers, and the extent they performed as steering officers, planning, organizing, commanding, coordinating and controlling the accreditation processes at faculty level.

For this study the assumption is that for institutional leaders to act as an *enabler$_p$* they are expected to be committed, involved and supportive during accreditation processes. This attitude needs to be reflected in clear set objectives, an acceptable and feasible internal quality assurance policy, of which the implementation is facilitated, on time policy decisions taken, and an appropriate leadership approach depending on the issue being addressed. Furthermore, encouraging and committed institutional leaders provide the management conditions for the line managers to lead their accreditation processes and distribute in a responsible manner the available resources. With regards to the faculty managers to become an *enabler$_p$* encouraging the accreditation process means that they are expected to act as steering officers during these processes, being highly involved, initiator, motivator and leader, involving the required stakeholders in a promptly manner and capable of creating a quality culture. Being a steering officer will create an environment that ensures that employees will work effectively towards quality goals enabling the attainment of an accredited status for their programs.

Observations, analysis of documents and thorough questioning during the interviews have been used as data collection methods for both indicators.

Quality culture

Higher education institutions are multicultural, where different cultures coexist within and across the different organizational levels. Each person has the responsibility to ensure that his/her outputs fit the desired quality standards and is expected to contribute to the development of an effective and efficient care for quality, by doing so creating a quality culture at all organizational levels. According to Berings et al. (2011), Gordon (2002), Harvey and Stensaker (2008) and Lomas (2004) accreditation processes can be highly influenced by the existing quality culture in the institution.

The quality culture is affected by a wide range of factors. In this study the indicators of this variable are: care for quality; shared responsibility, ownership, cooperation and collaboration; commitment of the internal stakeholders; norms, values, traditions, customs, people's behaviour, and communication channels and interaction among internal stakeholders. A quality culture can encourage accreditation processes ($enabler_p$), if the indicators positively influence the progress of these processes. This implies that the internal stakeholders take their responsibility to deliver products and services that meets the agreed internal and external quality standards and, where needed, collaborate and cooperate to achieve this goal, based on, among other things, shared responsibility and ownership; they are committed and involved in quality assurance activities; they interact based on an open attitude and are not stuck in traditions and customs but leave room for innovation and changes.

To assess the quality culture, the interviewees of the universities are questioned on the institutional and faculty dominant cultural characteristics, the extent in which the involved stakeholders care for quality delivery and are committed to do so, the formal and informal communication patterns, existence of norms and values and the perceived commitment of personnel to quality delivery, quality assurance and continuous improvement.

Available resources

This independent variable does not only refer to the quantity, but also the quality of the three types of resources studied: financial, human and facility resources. During accreditation processes these tangible resources are expected to be in place in order to act as potential enabling factors. For the financial resources to act as $enabler_p$, the available budget at institutional level, its distribution among the various departments and the additional funds, are expected to be sufficient in order to positively affect the accreditation process. Human resources are an $enabler_p$ if the quantity of the personnel in general and of those involved in the accreditation process in particular, and the quality of the personnel with regard to their expertise in this field of work and their involvement in quality assurance and accreditation meets the requirements. Facilities ought to be adequate to become an $enabler_p$ if the available facilities meet what is needed for accreditation.

So, sufficient amount of financial funding, well-distributed and efficiently used among the departments, satisfactory quantity of well-educated professionals and adequate infrastructural facilities are the measurable indicators to assess if this variable act as a potential enabler during accreditation processes. In order to examine the quality and quantity of the available resources factual data on the different resources are gathered, and document analysis is done to provide a description of these resources in each participating university. In addition, during the interviews further questions on this issue are asked.

Internal quality assurance policy

The last independent variable to be studied is the internal quality assurance policy. Bell and Cullen (2006) and Pratasavitskaya and Stenstaker (2010) stated that one of the most well-known factors influencing accreditation processes is the internal quality assurance policy of the higher education institution involved. This policy plan outlines, among other things, the internal quality assurance system and the lines of authorities and responsibilities among the involved stakeholders. This institutional quality policy plan is usually arranged in such a way to comply with the quality standards of the involved external quality agency, illustrating the link between internal and external quality assurance, as specified in chapter 4.

The value of the internal quality assurance policy is measured by five indicators. Enabling accreditation processes means that there is a well-outlined quality policy plan, a soundly implemented quality assurance system, an effective quality structure, promptly and proper involvement of stakeholders and the necessary involvement of external experts. To become an *enabler$_p$* the institutional quality policy plan must be available. In case that an internal quality assurance system exist and is also implemented accordingly, considering the principles related to a PDCA-cycle this indicator can be considered as an *enabler$_p$.* Furthermore, it is investigated if the quality structure is delineated and accordingly implemented, so also to become an *enabler$_p$*. The appropriate and promptly involvement of stakeholders (academic and non-academic staff, students, representatives of the working field and alumni) are assessed to determine if it acts as an *enabler$_p$*. The participation, commitment and engagement of these stakeholders during accreditation processes are important indicators for the course of this process. Finally, the extent of the involvement of external experts, the roles and responsibilities granted to them and their actual contribution to the progress of these processes are measured to assess if this indicator is an *enabler$_p$*. Document analysis followed by clarification and probing questions during the interviews are used to collect data on this last independent variable.

In figure 5-3 the independent variables and their respective indicators are summarized.
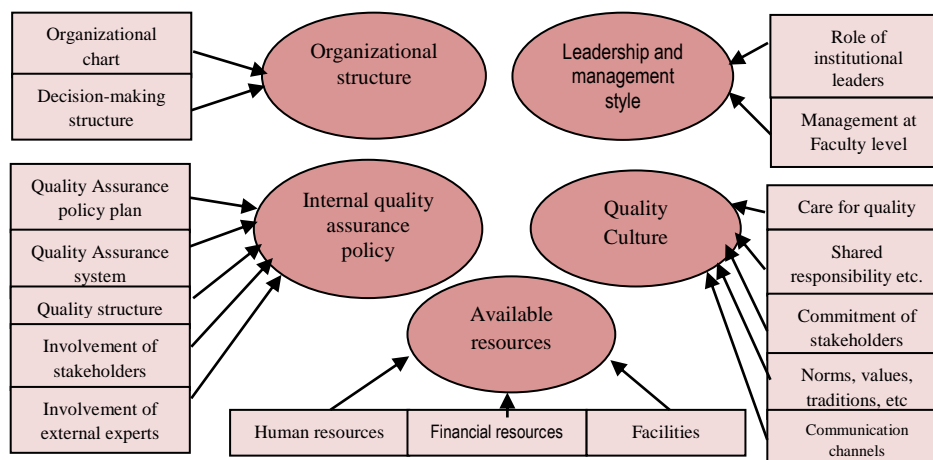
Figure 5-3 Overview of the independent variables and their indicators

5.3.4 The dependent variables

The dependent variable is the observed result of the independent variable being manipulated. It refers to the event studied and expected to change whenever the independent variable is altered (Boeije, 2005). In the research model (figure 5-2) the accreditation process and the achieved results are identified as the dependent variables. In this study the accreditation process is defined as the process a university needs to pass through aiming to comply with agreed norms, procedures and standards of an accreditation organization in order to attain the accredited status for the object being assessed. As outlined in chapter 4, the main elements of this process are the writing of a self-study report resulting from a self-evaluation process, followed by a site visit mostly done by peers who finally formulate a peer review report to be used as the main input for the accreditation organization to decide whether or not to grant the accredited status.

In the self-study report the actual situation of the object being assessed is presented according to the accreditation framework of the accreditation organization. The developmental process of the self-study report and its content can be influenced by several of the identified potential independent variables. A well-formulated self-study report reflects the accreditation framework and serves as a mirror of the reality of the object to be studied. It helps to provide the external peers an objective, authentic picture of the object of study. The self-study report closes the self-evaluation process while at the same time it opens the external evaluation process. A good self-study report enables the external review process and facilitates the peers in their evaluation task. In fact, the self-study report ought to direct the external reviewers in such a way that they receive all necessary information clearly in advance on paper and there is no room for misunderstandings and/or ambiguities requiring unnecessary clarifying inquiries. The external reviewers need to find all required information in this report according to the agreed procedures and standards.

The external reviewers have three main tasks: analysing (additional) documents, conducting the site visit and drafting the review report. The site visit takes place according to the procedures of the accreditation organization. This period of time (usually two days) serves for the peers to evaluate the object to be assessed and to verify and validate the self-study report. Site visits are better conducted when there exists a pleasant and friendly ambiance, since the interaction between the reviewers and the stakeholders should not be characterized as a school exam. However, the attitude of the reviewers does have great impact on the progress of the site visits. Based on the self-study report and the experiences and information granted during the site visit the reviewers draft a review report, which serves as the main information source for the accreditation organization to take their final decision regarding granting of the accredited status: the second dependent variable. In chapter 4, figure 4-3, possible outcomes of an accreditation process were outlined: the accredited status can be obtained immediately, or a probationary period can be granted to allow the object assessed to make the required additional improvements, or the accreditation request can be fully denied.

Positive accreditation results can be achieved if the force of the *enabler$_p$* exceed that of the *barrier$_p$*. In this case the two dependent variables will be positively influenced by the five independent variables so as to attain or maintain the accredited status.

5.4 Design of the empirical study

Now that the research model has been framed, followed by the operationalization of the variables, in this section the methodological characteristics of the empirical study are discussed. In fact, the section focuses on the research method used and elaborates on the steps taken to go through the description and analysis of the five case studies. Table 5-3 presents a summary of the different methodological choices made and steps undertaken during the research process. The first step was addressed in chapters 1 to 4 and sections 5.1 to 5.3. The remaining sections in this chapter address step 2 in more detail. Steps 3 and 4 are discussed in the following chapters.

5.4.1 Case study approach

The main research question to be answered in this empirical study is:

> ***Which are the internal influential factors that impact the accreditation processes in national universities in the Dutch Caribbean and how do they affect the final result of such processes?***

Gaining knowledge and understanding of the encouraging and hindering factors during accreditation processes will significantly contribute to the theoretical insights that is required in order to know how to reinforce the *enablers$_p$* and debilitate the *barriers$_p$*. These insights will improve the success rate of accreditation processes, particularly in the three studied universities located in the Dutch-Caribbean. Considering this research objective a case study approach was the most appropriate research strategy, as will be explained below.

Why case study?

While studying literature on research methodology, it soon became clear that a qualitative research approach, in particular case study is the most appropriate research method to be used to carry out this research. The main reason is that a method is needed that allows flexibility to consider a phenomena in-depth, not taking them at face value, e.g. as if every quality assurance policy is the same. Only by looking at details of the phenomena and at how they are interacting with each other, will it become evident if the selected variables can be actually identified as encouraging or countervailing factors during the process towards accreditation in the studied cases. This type of flexibility is given by qualitative methods. More in particular, conducting a case study allows thorough investigation of a particular, contemporary phenomenon (accreditation process) in a well-defined context (national universities). This matches with how Yin (1981, 2009, 2011) described case study, namely as a research strategy to do an empirical investigation of a contemporary phenomenon in its real-life context, especially when the boundaries between phenomenon and context are not clearly evident. It implies that the context is part of the study and not only the specific subject

under investigation, explaining the main reason why preceding the case descriptions in chapters 7 and 8 the national context of the studied cases is presented in chapter 6.

Table 5-3 Overview of the research steps and choices

Steps	Activities	Choices
1. Exploring the research	Define research questions	One main research question, specified in four sub-questions, shaped and sharpened by literature review and results of the exploratory phase
	Conduct exploratory phase	Pilot case study: Select the pilot case, Participatory observation and documents analysis Exploratory interviews: Select the interviewees: staff members of evaluation agencies, Conduct the interviews (10) Analyse the findings : Design the basic outline of the research model
	Literature analysis	Review of relevant literature to create a theoretical framework as input for the research model and to guide the further study
	Conceptualize the research model	Analyse results of the exploratory phase Reflect on the basic outline of the research model Analyse literature
2. Design the empirical study	Multiple case study design	Multiple cases Explanatory case study approach
	Selecting the cases	Holistic unit of analysis: higher education institution Select cases in the Dutch Caribbean, based on literal replication Select cases in the Netherlands to contrast with Dutch-Caribbean cases
	Ensuring the quality of the study	Ensure construct validity, internal validity, external validity and reliability
	Defining the sources of evidence	Multiple sources of evidence: Observation (participatory or direct), Document analysis, In-depth interviews
	Selecting the respondents	Select interviewees: managers and staff members functioning at different organizational levels involved in accreditation process of the studied universities
	Crafting of research protocol and semi-structured interview	Develop case study protocol Develop guiding questions for the semi-structured interviews
	Generating contextual data	Collect of information based on the descriptive factors
3. Case description	Contextual description of the five cases	Outline relevant elements to clarify the national context (descriptive factors) of group A (Dutch Caribbean) and group B (Dutch) cases enabling a better understanding of choices made by the institutions during the accreditation process.
	Description of each case according to the research model	Describe the case studies according to the dependent and independent variables in the research model
4. Comparative analysis and conclusion	Data analysis techniques	Coding of interviews, making matrices for categories, creating data display, analysing and comparing the results, pattern matching and time-series analysis.
	Within group analysis	Analysis of the independent and dependent variables in groups A and B separately
	Across group analysis	Analysis of the independent and dependent variables across the two groups A and B
	Construct final framework	Answer the research questions Reflect on the research model Identify the actual enablers and barriers during accreditation processes Construct final framework
	Conclusion	Theoretical and practical implications of the study Suggestions for future research

In addition, in this study examining the cases in their real-life context also means that the research took place primarily during or shortly after the process toward attaining the accredited status. The participants' perspective of the process is examined. According to Yin (2009) this approach is one of the characteristics of a case study.

Another reason to choose the case study methodology is the fact that this type of research mostly concentrates on "how" and "why" questions (Flyvbjerg, 2004; Gerring, 2007; Maxwell, 2008; Yin, 2009, 2011). Using this research method provides the right approach to answer the main research question and hence to identify potential internal influential factors during accreditation processes and to determine 'how' these factors affect the final result of such processes.

Two of the four research questions (section 1.4) clearly addressed the 'how' part of the research study. Research question 3 "How do the three target universities organize their accreditation processes, and how do they contrast with the two comparative universities?" is derived from the first two research questions and is linked to the identification of potential internal influential factors during an accreditation process (research question 2), based on literature reviewed on the main elements of such a process (research question 1). Providing an answer to these three research questions addresses the last research question as these answers contribute to enlightening and comprehending the effects of potential internal influential factors on accreditation processes and to finally utilize this knowledge and understanding for future improvements in approaches towards accreditation (research question 4). Eventually providing an answer to the main research question.

Finally, as case studies can be characterized as a research method that provides the possibility to do intensive analyses and descriptions of a single unit or system in its natural context bounded by space and time the choice for using this research method is further substantiated (Hancock and Algozzine, 2006; Yin, 1981, 2009). By doing a case study in-depth understanding of the accreditation process as the phenomenon that is investigated is gained.

Design of the empirical study

The investigation of the phenomenon 'accreditation process' is in this study conducted mainly from a qualitative approach. In fact, it is a *qualitative, multiple case study research*, enclosing five cases divided between two categories: category A-cases are the three universities in the Dutch-Caribbean and category B-cases are two universities in the Netherlands. The selection of cases in each category followed the replication logic (Eisenhardt, 1989), as will be elaborated in the subsequent section.

This study can be characterized as a combination of an exploratory and an explanatory multiple case study. As was described in section 5.1, after formulating the research proposal, a pilot case study on one of the cases was initially done in an *exploratory* way. As earlier indicated, the fact that the researcher is a leading participant in the accreditation process of the pilot case, contributed largely to making this pilot possible and thorough exploration could take place. During the pilot case study, besides

exploring the possibilities of conducting this study, attention was paid to indicate the factors that play an important role during the progress of the accreditation processes. This explorative study contributed to a great extent to the further design of this study as it provided information to draft the preliminary research framework (figure 5-1), which ultimately became the fundament of this study.

Answering the research questions entail the *explanatory* part of this study. These answers explain the choices made during the accreditation processes, the implementation of them, the variables which had an impact on the progress of such processes and the effect that they had on the results. This study seeks to establish a cause-effect relationship between the internal influential organizational variables and the accreditation process and hence its results. The primary purpose is to determine how the accreditation process occurs and which variables have an influence on its progress and outcomes. The presumed causal links in real life interventions to be studied are the green arrows illustrated in figure 5-2: the impact of internal organizational variables on an accreditation process and eventually affecting its results.

5.4.2 Comparative analysis

One of the important steps while conducting a case study is the selection of the cases as part of the comparative analysis later on (Yin, 2009). The research question guided the process of deciding on the sampling and number of cases to be included in this comparative study. We needed to sample cases that provided an appropriate setting to study accreditation processes and hence identify the internal influential factors during such processes, eventually affecting their outcomes.

Unit of analysis

Defining the unit of analysis in this study is essential as it sharpens the boundaries of the in- and outside context of the organizing framework of the study. It distinguishes data related to the subject of the case study from data external to the study (Yin, 2009). In particular, what is part of the context of this study (national factors) and which are the elements (internal organizational variables) that are included in the unit of analysis (university at institutional level). In this study this *holistic* design is used. In contrast, case studies can employ an embedded design that refers to multiple levels of analysis within a single study, which is not done in this study. Accordingly, in this study each studied university as an organization is the unit of analysis (five cases). These institutions as a 'whole' are examined, not the individual participants in the accreditation processes, neither the different departments nor the educational programs within the organization. The focus is on the organization: its structure, its management, its quality culture and the available resources, its policies on quality assurance, all at institutional level. In fact, to attain the accreditation mark each educational program goes through a process. But it is not each 'accreditation process' separately that is studied, but the 'package' of accreditation processes of each studied university. Actually, each individual case study (each studied university) consists of a 'whole' study, in which facts are gathered from various sources (units of observation)

and conclusions drawn on the analysis of those facts. The study subject refers therefore to the accreditation processes directed from the institutional level. The core attention is thus on how accreditation processes are organized, managed and implemented at institutional level. Based on this specific interpretation of the unit of analysis accurate information about the cases was collected and analysed.

Multiple cases and sampling strategy

In the study, the choice between single and multiple cases was easily made based on the research objective. It was necessary to have multiple cases in order to obtain the desired information on the progress of accreditation processes in different, even contrasting universities in both the quantitative and qualitative sense. Although a single case provides more in-depth information, the generalizability of its findings are limited. In contrast, multiple cases within each category allow the findings to be replicated within the categories. This research strategy of replicated, multiple cases is also followed in order to enhance the generalizability of the findings and the building of theory regarding the potential enablers and barriers during accreditation processes and how they could be best dealt with. Being able to compare the enablers and barriers on the one hand within each category and on the other hand across the two categories will strengthen the precision, validity and stability of the findings, although some in-depth information on the specific cases may be lost (Stake, 2007).

In this study theoretical sampling rather than random sampling was done. The goal of theoretical sampling is to choose cases that are likely to replicate or extend the emergent theory (Eisenhardt, 1989). The cases chosen should offer the best opportunity to collect the required data. Yin (2009) advocates following a replication logic for sampling of cases and distinguishes between literal and theoretical replication. In the case of literal replication, cases are selected to provide similar results, whereas in the case of theoretical replication, cases are selected to provide contrasting results, but for predictable reasons.

In this study both forms of sampling were used as the combination was expected to provide most information about potential enablers and barriers during accreditation processes. The strategy of literal replication was used when selecting the three universities located in the Dutch Caribbean. In contrast, the selection of the cases in the Netherlands was based on theoretical replication, as contrasting cases, expected to provide different information of the variables that affect the progress and outcomes of accreditation processes than those in the Dutch Caribbean. After all, in replication logic, cases which confirm emergent relationships enhance confidence in the validity of the relationships (Yin, 2009). Cases which disconfirm the relationships often can provide an opportunity to refine and extend the theory. In this study, indeed the causal relationship between the potential internal influential variables and the accreditation processes and eventually their outcomes has to be confirmed.

The choice to involve besides the University of Curaçao, the University of Aruba and the University of St. Martin in this study lays in the fact that all three universities are located in the Dutch Caribbean, they also aim to attain the accredited status, they use

NVAO as their accreditation organization as well, and they can be considered small or even very small. So, they were more or less literal replication of the University of Curaçao.

The second group of cases consists of the Utrecht University (UU) and the HZ University for Applied Sciences (HZ). Utrecht University is a contrasting university in many ways: extremely large student population, extensive resources and positive results on all accreditation attempts; HZ University for Applied Sciences has double the student population of the UoC, yet the number of educational programs offered is quite similar. Also the availability of resources in the two Dutch cases is already at first glance much higher (table 5-4). Since UoC and UA offer both academic and professionally oriented programs, the choice to have one academic university (UU) and one professionally oriented university (HZ) as contrasting cases can be justified. One more reason to choose these two universities in the Netherlands is the fact that the researcher was well acquainted with them since she has a good working relationship with the colleagues in charge of their accreditation processes. Therefore, accessibility to data was facilitated.

Table 5-4 presents some main quantitative data of the studied universities in order to provide a concise picture of them. The table also illustrates the first notable differences between the two groups of universities. Detailed analysis and interpretation of the comparison between the cases is done in chapter 9.

Table 5-4 Quantitative data of the studied universities

	UoC	UA	USM	HZ	UU
Age of existence	33	24	22	25	375
Student population	2100	530	200	4200	30.500
# Faculty/ Academies	5	4	2	7	7
# Educational programs	26	8	3	28	214
# FTE Academic staff	53	39	n.a.	312	2900
# FTE Non-academic staff	50	35	n.a.	125	2400
Budget 2011(in millions €)	21	9	2	43	749

Reference date: September 2012

Comparative case study analysis

From the above descriptions, it can be concluded that the core of this study is a multiple case study analysis, across five cases, divided into two categories: A) Dutch Caribbean vs. B) the Netherlands. Comparative analysis within (figure 5-4, (a) and (b)) and between the groups (figure 5-4, (c)) are done. After doing this, suggestions are formulated for improvements of the accreditation processes in the A-group focused on reinforcing the potential enablers and timely and proper handling of the barriers. The 17 indicators making up the five independent variables lead the cases' description and the comparative analyses.
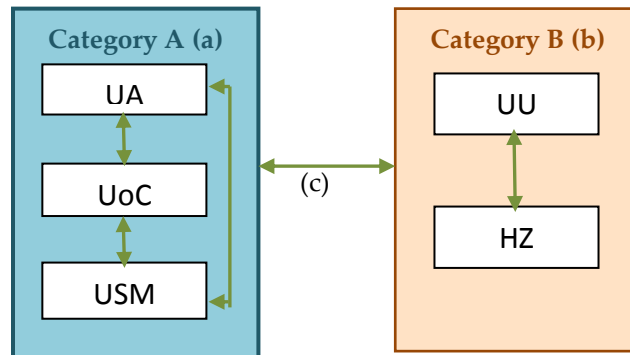
Figure 5-4 Preliminary overview of the comparative analyses

The descriptions presented in the chapters 6, 7 and 8 help to become closely familiar with each case as a stand-alone identity. They allow the unique patterns of each case to emerge before the study is directed towards generalized patterns across cases (Eisenhardt, 1989). With the within-group and across-group analyses the aim is to detect patterns, based on dimensions chosen beforehand, namely the independent variables (Eisenhardt, 1989; Stake, 2007; Yin, 2009, 2011). The comparative analyses are presented in chapter 9.

5.4.3 Validity and reliability

This research has been carefully prepared and conducted in order to ensure its quality. General criteria for evaluating the quality of case study research are its construct validity, internal validity, external validity and reliability (Yin, 2009; Stake, 2007). These criteria and also the strategies used to ensure the validity and generalizability of the research findings are discussed below.

Construct validity

Construct validity has to do with establishing correct operational measures for the concepts being studied (Yin, 2009). Potential investigator subjectivity has to be ruled out as well as incomplete information gathering. In terms of this study several tactics were used to counteract these threats: (1) multiple sources of evidence were used to triangulate the research findings (section 5.5), (2) multiple respondents holding the same job position were where possible interviewed to avoid single-rater bias, (3) a chain of evidence was established from the initial research questions until the analysis procedures and (4) each draft case study report was reviewed by key informants. The use of multiple sources of evidence was tested in the pilot case study and, where deemed necessary, later adjusted. During the research period special attention was paid to the subjectivity risk, as the researcher is one of the key players in the accreditation process of one of the cases. By the coaching of the supervisors and the review of susceptible sections by key informants this threat was controlled as much as possible (Alvesson, 2003). Asking fellow workers and respondents to read the case descriptions enhanced construct validity and ruled out investigator bias.

Internal validity

Internal validity is related to establishing a causal relationship, whereby certain conditions are shown to lead to other conditions, as distinguished from spurious conditions (Yin, 2009). In the literature reviewed on case study research it is stated that internal validity is a main concern in explanatory cases as they are directed to point out causal relationships. According to Eisenhardt (1989) when a relationship is supported, the qualitative data often provide a good understanding of the dynamics underlying the relationship, that is, the 'why' of what is happening. This is crucial to the establishment of internal validity. As this research encompasses an explanatory study various tactics were employed to ensure that it is the internal organizational variables that have a significant impact on the course of the accreditation process and hence its results: (1) a research model was conceptualized based on the research findings of the pilot case study, exploratory interviews and literature reviewed that guided the studying of the independent variables, (2) each variable was studied according to several indicators (3) possible other explanations for the assumed causal relationship between the variables and the phenomenon were explicitly looked at, (4) the replication logic used to select the cases in each category led to replication of data and therefore ensuring their validity and (5) the research findings were at the end compared with the existing literature. In this way, the identified enablers and barriers during the studied accreditation processes arose from the case studies, survived rival explanation, were verified through replication and are tied to existing insights.

External validity

External validity addresses the extent to which the outcome of a study in one instance or in a group of instances can be applied (generalized) to instances other than those in the study (Yin, 2009; Dul and Hak, 2008; Boeije, 2005). It is the ability to generalize research findings to other people and other situations. Important elements are people, situations and time. Are the results of a study due to the choice of the participants, the specific situation or the time it was done? Or are the results generalizable beyond the immediate case? Case study research is often criticized for offering a poor basis for generalization, because the sample size is often much smaller than in statistical research. However, as Yin (2009) states it, generalizing from cases takes place according to analytical generalization instead of statistical generalization. This means one concentrates on expanding and generalizing theories rather than enumerating frequencies. Within the context of this study, external validity entails whether the identified enablers and barriers during an accreditation process hold outside the five case situations. As this study (1) deals with multiple cases selected using the literal replication method and (2) is based on a research model applied to all the five cases, the question of external validity is neutralized. The results of the comparative analyses include indications on their generalizability (chapter 9).

Reliability

Reliability is the last criterion for judging the quality of a case study approach. Reliability is about demonstrating that if the operations of a study, such as the data

collection procedures, are repeated the same results will be obtained (Yin, 2009, 2011). The goal is to minimize the biases within the study. This means providing the guarantee that if another researcher or the same researcher at another period of time for that matter repeats the study, the same results will be obtained when following the same procedures for the same case. Reliability is addressed in many ways in a case study. The procedures of the research have to be documented, so if a different researcher conducts the same study the same findings can be obtained. One of the most important methods to ensure reliability is the development of the case study protocol. Important elements of a case study protocol are: field procedures (credentials and access to sites) and specific questions that the researcher must keep in mind during data collection. This case study protocol will guide the realization of the case study at any time, regardless of the researcher. And it will guarantee the attainment of the same results (Gerring, 2007). With respect to this study the following strategies were employed to ensure its reliability: (1) a case study protocol was developed to guide the data collection and was particularly important in order to explicitly work out the field procedures (Appendix 2), (2) all interviews were recorded and extensively detailed on paper based on the variables and their associated indicators, (3) a chain of evidence was established, allowing the readers to follow the research process (figure 1-1) from the beginning to the final conclusions and (4) choices made and the main steps undertaken during the study are summarized in table 5-3 and further documented in this chapter. All of these strategies are expected to contribute significantly to the reliability of the research findings.

5.5 Methods of data collection

In this section the data collection methods are discussed, including an elaboration on the collected type of data and their relation to the five cases and the variables.

5.5.1 Multiple sources of evidence

In a case study different methods of data collection can be combined. Literature analysis shows that a case study can be done by using either qualitative or quantitative evidence (Baxter, 2008; Dul and Hak, 2008; Gerring, 2007; Stake, 2006; Yin, 2009). Qualitative techniques are the core of the research method in this study, along with some quantitative data added to describe the national context of the five cases. Drawing upon extensive participatory observation during the last decade at the UoC and direct observation at UA since 2010, analysing relevant documents of all studied universities, having regular contact with the involved evaluation agencies and the accreditation organization and conducting in-depth interviews with experts in the field of accreditation in the Netherlands and also with managers and (quality) staff members of the universities, helped to collect a wide range of qualitative data. These collected qualitative data were particularly useful for understanding 'why' or 'why not' emergent relationships hold. For example, why can the organizational structure be a potential enabler or perhaps a barrier during accreditation processes?

To confirm the validity of the research process in this study triangulation is used as a research strategy. Triangulation is the combination of at least two or more theoretical perspectives, methodological approaches, data sources, investigators, or data analysis methods (Eisenhardt, 1989). According to Eisenhardt (1989) triangulation through multiple data collection methods makes it possible to substantiate the findings more strongly and to empower the building of theories. Mathison (1988) explains that the intent of using triangulation is to decrease, wipe out, or counterbalance the deficiency of a single strategy, thereby increasing the ability to interpret the findings. As mentioned earlier, participatory and direct observation, document analysis and semi-structured in-depth interviews were chosen as the three sources of data collection in order to obtain extensive information on the five cases (figure 1-1). Combining these three sources supplied data acquisition from a variety of respondents and also provided more in-depth information from different perspectives, which contributed to enhance the validity of the study.

5.5.2 Data collection in the studied cases

The information needed for each case to be able to identify the internal influential factors during the various accreditation processes was:
- Description of the national context of each studied university;
- Description of the institutional internal background;
- Description of the steps taken during the accreditation processes;
- Description of the results of the accreditation processes
- Experiences of the respondents with regard to each indicator;
- Experiences of the respondents with regards to the effect of the identified potential internal influential factors during the accreditation processes in general;

The obtained information based on the multiple sources of evidence provided a clear picture of each case, free from respondent bias. The different methods of data collection were used to gather extensive data for all five independent variables. As shown in table 5-5 most methods of data collection were used in all cases, with the exception of observation, done only at UoC and UA.

Table 5-5 Methods of data collection in each case

	UoC	UA	USM	UU	HZ
Document analysis	√	√	√	√	√
Observation	√	√			
In-depth Interviews	√	√	√	√	√

During a great part of the research period data were collected. At UoC data collection started in 2009 as the researcher had kept field notes with information on all the events and activities of the accreditation processes, which were used for the first draft description of the UoC-case during the pilot case study. Then, systematically additional information was collected to finalize the UoC-case description in 2012. At

UA data collection started in 2010, when the researcher was first hired as an external consultant to support the initiated accreditation processes. This continued during the research period and was input for the drafting of the UA-case description. For the remaining three cases the systematic data collection took place during 2012 when relevant documents were collected and analysed and interviews were conducted.

5.5.3 Explaining the data collection methods

As Yin (2009) indicated, usually not all data-collection sources are relevant for all cases during a multiple case study analysis. Each case presents a different opportunity for data collection. Below the three data collection methods used in this study are elaborated: observation, document analysis and interviews.

Observation

In this study both participatory and direct observation were used as sources for data collection. In participatory observation the researcher is an active participant in the events being studied (Baxter, 2008; Yin, 2009). Participatory observation encompasses different methods of information gathering: the researcher observes, while others are acting; goes along with the research group; assists, participates and contributes to the activities; is involved in conversations and does interviews. The aim of participatory observation is to collect data on what people think, what people do and on artefacts people use or develop. In this study the researcher had, as previously mentioned, a leading position in the accreditation attempts of UoC. During her participatory observation activities a wide variety of data was collected relevant for the pilot case study and the UoC-case description (section 7.1). Some of the activities carried out during the participatory observing period were developing of quality documents and instruments, describing and planning the accreditation processes, guidance and monitoring of the progress of the accreditation processes, point of contact for the external evaluation agencies and NVAO, writing and/or providing feedback on policy documents, (co)writing of self-study reports, training of participants, organizing (trial) site visits. The participatory observation was merely a source of informal data collection and therefore no observation protocol was specified.

In order to counteract the 'subjectivity' of the researcher, in 2012 ten interviews were conducted with staff members at UoC. These interviews were one of the main sources of information during the case description of UoC (section 7.1). Moreover, the draft UoC-case was scrutinized by three respondents in order to avoid personal interpretations and add more objectivity to the research findings. The researcher was also involved during this process at the two other Dutch-Caribbean universities as facilitator and external consultant as so facilitating the process of the data collection for this study.

Direct observation took place at UA. The researcher was involved as a consultant in the setup and implementation of the accreditation processes in this university. Information gathered was used to provide input for the UA-case description (section 7.2). During the observation period the researcher provided feedback on many documents, trained

personnel on several curriculum development topics and coached UA's institutional quality manager in managing, implementing and monitoring of the accreditation processes.

Active and passive involvement in the UoC and UA-cases helped the researcher to gain in-depth knowledge of the course of the accreditation processes in these two cases. Hence, a rich picture of these two cases could be described. Participatory and direct observation also facilitated the selection of respondents and contributed to the willingness of these respondents to participate in the interviews due to the accrued personal contact. Obtaining easy access to the required documents can also be attributed to this form of information source.

Document analysis

As listed in table 5-6, a wide variety of documents of the involved universities was studied to collect the required information. Depending on the information to be gathered and the questions to be answered these documents were selected.

Table 5-6 Overview of studied documents

Studied documents	UoC	UA	USM	UU	HZ
Higher education policies at national levels	√	√		√	√
Legal frameworks on higher education	√	√	√	√	√
Administrative documents at different levels	√	√	√	√	√
Strategic plans at institutional level	√	√	√	√	√
Policy documents on quality assurance at different organizational levels	√	√	√	√	√
Research reports on quality issues	√	√	√	√	√
Description of quality instruments	√	√	√	√	√
Minutes of meetings with relevant stakeholders	√	√			
Letters and memoranda addressed to external partners and internal participants	√	√	√		
Selection of Self-study reports of educational programs	√			√	√
Reports of review panels related to (trial) site visits	√	√	√	√	√
Internal newsletters relevant to the research topic	√	√			

For each university documents concerning the institutional policy plans in general, and quality assurance and accreditation in particular, were analysed. In addition, documents regarding higher education at national level were included in the analysis so the direct external background and its relation to the accreditation process would become clear. Furthermore, during the interviews with the managers at institutional and faculty level the researcher inquired about documents that would give additional insight about their managerial approaches during the accreditation processes.

The variety of documents studied was in the interest of triangulation of evidence. The documents serve to substantiate the evidence from other sources. From these documents information could be derived for four of the independent variables: the organizational structure, leadership and management style, availability of resources and the internal quality assurance policy. The acquired information was checked against statements made in the interviews. Gaps and ambiguities with regards to the

organization and progress of the accreditation processes that could not be filled in by document analysis were discussed during the interviews.

In-depth interviews

Many people are in one way or another involved in the accreditation processes of the studied entities. These persons have their own view and perspective on the progress of this process and have gone through personal experience during such processes. Data were collected during semi-structured interviews with some of these professionals.

Conducting semi-structured interviews enables a combination of addressing the topics that have to be covered on the one hand and leaving enough room for the respondents to tell their story on the other hand (Yin, 2009, Boeije, 2005). This was also the reason to choose this type of interview in this study. Based on the literature analysis, the observations, and the results of the document analysis a semi-structured questionnaire was used to guide the interviews (Appendix 3). These in-depth interviews helped to substantiate the document analysis and, where applicable, the observations. Therefore, it was important to provide the interviewees with sufficient opportunities to express themselves as openly as possible in order to receive in-depth information on the accreditation processes related to their experiences with regard to potential stimulating and hindering factors during such processes. Talking to a wide range of respondents involved in the accreditation processes made it possible to avoid respondent bias and the authenticity of data could be verified, independent of a single informant.

In this study the interviewees can be divided into experts (external and internal) and active participants. As explained in section 5.1, the first group of ten interviewees included collaborators of evaluation agencies and NVAO partly involved in the (trial) site visits during accreditation processes in the Dutch Caribbean cases as well as in in the cases in the Netherlands. Most of these interviews took place at the end of the (trial) site visits of one or a group of educational programs of UoC or UA during the period July 2010 and August 2011. The second group of 35 interviewees consists of participants involved in the accreditation process of the five universities. These interviews were conducted during July till December 2012. A list of target respondents was developed that was quite consistent over the cases, as displayed in table 5-7.

Table 5-7 Overview of interviewees per studied university

Interviewees	UoC	UA	USM	UU	HZ
(Former) Institutional leader	√	√	√		
Business Director/Board secretary		√			√
(Academic) Dean	√	√	√	√	√
(Former) Manager quality assurance at institutional level	#	√	n.a.	√	√
Quality Assurance Officer at institutional or faculty level	√	√	n.a.	√	√
Staff member supporting the accreditation process		√	√	√	
Department Heads	√			√	

is the researcher.

The following criteria were used to select the respondents:
- their position in the organizational structure;
- their involvement in the accreditation processes;
- the relevance of their participation in identifying potential enablers and barriers during an accreditation process;
- the possibility that they could enrich the description of commonalities and differences between the participating universities.

The list of interviewees is specified in Appendix 4. Each interviewee was invited by a formal letter (Appendix 5) and an appointment for the interview was made. The duration of the interviews varied between 52 and 98 minutes.

As shown in Appendix 3 the topics covered during the interviews were strongly related to the five independent variables. Issues regarding quality culture were discussed specifically since information on this variable could barely be gathered from documents analysis.

Relevant for this study is the key role document analysis played. The availability and content of the analysed documents were determinant for the content of the interviews. For example, if one studied entity did not have a quality policy plan, information on the implemented quality approach was collected from interviews instead of from documents. Lack of information on a particular issue was filled in with information gathered from the interviews.

5.6 Conclusion

In this chapter the research model, research method and research design are explained. The choices made with regard to a wide range of methodological aspects were explicated and the main dimensions of the comparative analysis described.

The research model was conceptualized, which consolidates the findings from the pilot case study, the exploratory interviews and the literature review to guide the empirical data collection and analysis. Then, the five independent variables were operationalized into indicators to facilitate the collection of data, followed by an explanation of the dependent variables. With comparative case study as the research strategy we obtained opportunities to explore and describe a phenomenon (accreditation process) in a particular context (universities) making use of a variety of data sources. Multiple sources of evidence for data collection (participatory and direct observation, document analysis, semi-structured in-depth interviews) are used, thereby triangulating the collected information and ensuring validity and reliability of the research findings.

This study is based on a *holistic, multiple case replication design*:
- *Holistic* meaning one unit of analysis: the accreditation process, managed at institutional level;
- *Multiple case*: five cases, divided into two categories, are described, analysed and compared;

- *Replication*: two different categories of cases, within each category the cases are replicated and the two categories contrast in many aspects to each other.

The indicators to be investigated in the empirical study outlined in the next chapters will describe the five cases in order to identify the potential enablers and barriers during their accreditation processes. However, the question that remains is whether this list is complete. Based on the pilot case study and the literature review it is expected that these variables are worth investigating, but each variable might have other indicators that prove to be a potential enabler or barrier *(enabler$_p$ or barrier$_p$)*. For example, there might be another indicator that plays an important role in developing a quality culture within the studied universities. In addition, besides the five indicated independent variables, there might be other variables that prove to play an encouraging or hindering role during the accreditation process. The research findings and the results of the comparative analysis will guide the conceptualization of the final framework with actual enablers and barriers *(enabler$_a$ or barrier$_a$)* relevant for the Dutch-Caribbean cases at the end of this study.

This study was outlined mainly according to *exploratory-explanatory* methodology as the most suitable choice for this study. Exploration took place during the pilot case study and ten exploratory interviews at an early stage of the research process. The explanatory strategy came from the need to determine the extent of the impact of the enablers and barriers on the results of the accreditation processes and if this is applicable in other small universities as well. Analysing the collected data also provides information on the choices made during the accreditation processes and explains the different steps taken. Eventually this research design coupled to the research model makes it possible to formulate suggestions for improvements that will have a positive influence on results of the accreditation processes, in particular in the Dutch-Caribbean universities.

From the research model it can be concluded that the main objective for the empirical study is to determine the effect of five internal organizational variables on the progress and outcomes of accreditation processes. Were these variables really enablers or barriers during such processes? And what was finally their impact on the accreditation results? This will provide an answer to the main research question. Gaining knowledge and understanding of these enabler$_a$ or barrier$_a$ linked to their possible impact on accreditation result will contribute to creating a body of knowledge required to design and direct a successful accreditation process, in particular in the participating universities located in the Dutch-Caribbean region. In the next chapters the five cases are described according to the conceptualized research model.

6 Higher education context of the studied universities

This chapter presents the higher education context in which the studied universities operate. This information is meant to explain the particular characteristics of their national context relevant for a comprehensive understanding of the five cases. Understanding the context will also contribute to identifying the differences and similarities between the national contexts of category A and B universities. This information is required to facilitate the comparative case study analysis in chapter 9.

This chapter consists of three parts. The first part includes information on the national context of higher education in Curaçao, Aruba, St. Maarten and the Netherlands, according to the descriptive factors identified in chapter 5. Thereafter the role of higher education to empower the achievement of national goals, in particular in the Dutch-Caribbean countries, is explicated and then this background information is coupled to the national higher education policies.

The second part of this chapter covers the emergence of accreditation in Europe, then in the Netherlands and consequently in the Dutch Caribbean. Explaining this historical development of external evaluation processes in higher education will shed light on the importance of accreditation processes for the studied universities, considered from globalized and nationalized perspectives.

At last, the main characteristics of the accreditation organization NVAO are discussed. Both NVAO's accreditation frameworks are reviewed to provide relevant information on the procedures, prerequisites and quality standards the five studied universities need to comply with in order to attain and maintain the accredited status for their programs.

6.1 The national contexts

The focus in this section is on the national context of the studied universities in order to provide background information that could have an impact on their operation strategies in general, and their accreditation processes in particular. The description is done according to the following five descriptive factors: geographical position, demographic parameters, political context, economic situation and social-cultural dimensions.

6.1.1 Geographic position

The Caribbean region includes Anglophone (English-speaking), Hispanic (Spanish-speaking), Francophone (French-speaking) and Dutch-speaking territories. Ali (2008) specifies that from a geo-political perspective, the Caribbean region can be considered an archipelago of islands in the Caribbean Sea. These countries are diverse in many aspects, e.g. language, scale, population size, political status and development stage. Tromp (2007) states that Caribbean countries are characterized by their small scale, open economy and consequently economic weaknesses, and their vulnerability to external shocks including natural disasters such as hurricanes. The Caribbean region can therefore be identified as quite diverse in many aspects, although there are several similarities as well.

The former Netherlands Antilles[17] and Aruba form part of the Caribbean archipelago and reflect also the abovementioned characteristics. These Dutch-Caribbean countries consist of two groups of islands: the Leeward Islands Aruba, Bonaire and Curaçao, located 60 kilometres from the South-American mainland, in front of Venezuela, and the Windward Islands Saba, St. Eustatius and the southern part of St. Maarten located in the northern stream of the group of Caribbean islands. The distance between the Leeward and Windward Islands is 900 km.

The Netherlands is situated in the mid-western part of the European continent, with a distance of about 9000 km from the Dutch-Caribbean countries.

6.1.2 Demographic parameters

The population of the Leeward Islands is predominantly a mix of African and Indian descendants that are mainly Latin-American and Netherlands' oriented, contrasting with the inhabitants of the Windward Islands that are Anglo-Caribbean oriented with

---

[17] Even though the country Netherlands Antilles ceased to exist in 2010, in this dissertation the islands Curaçao and St. Maarten are still referred to as part of the former Netherlands Antilles since these islands internationally continue to be referred to as part of this group of islands. Actually, by the end of 2012 in almost all international reference books and information sites details of the Netherlands Antilles as one country are still presented instead of separate information of the islands Curaçao or St. Maarten.

mainly American influences. Table 6-1 contains information on some demographic parameters.

Table 6-1 Demographic data

	Km^2	Inhabitants	Population density
Curaçao	444	150,500	344
Aruba	180	101,500	579
St. Maarten	87	77,700	1.078
The Netherlands	37,354	16,7 million	498

Sources: CBS Aruba, 2010, CBS Curaçao 2012, www.sintmaartengov.org, www.stateline.cbs.nl

With its 444 km^2, Curaçao is the largest island of the former Netherlands Antilles and operated as its financial and administrative centre. According to the latest census in 2011 Curaçao has approximately 150,000 inhabitants divided over more than 50 nationalities (Central Bureau of Statistics Curaçao, 2012).

The island of Aruba is the second largest one of the Dutch-Caribbean countries with 180 km^2 as land surface area. This island has also known a wide range of regional migrants, resulting in more than 40 nationalities (Central Bureau of Statistics Aruba, 2010). During the past decade Aruba's population has grown from 65,000 to more then 100,000, of which the vast majority are Arubans.

St. Maarten-Saint Martin is the smallest land mass in the world to be shared by two different nations. Only 87 km^2 is divided between France and the Netherlands. The French territory covers about two thirds of the island and is part of the European Community. The Dutch side is an autonomous island in the Kingdom of the Netherlands. In St. Maarten above 90 nationalities work and live together, mainly migrants from the neighbouring Caribbean islands, mostly living on the island on an illegal basis (www.sintmaartengov.org). Due to the object of this study, in this dissertation only additional information of the Dutch side of St. Maarten, with a land mass of 34 square km and about 41,000 inhabitants, will be further specified.

With a population of about 16.7 million inhabitants the Netherlands is relatively small compared to its surrounding neighbouring countries (www.stateline.cbs.nl. retrieved November 2013). Compared to the remaining countries in the Kingdom of the Netherlands however, the Netherlands is quite a large country. As of the mid-20th century gradually the Dutch community became a mix of many nationalities and by now the Netherlands counts about 190 nationalities. About 145,000 Antilleans and Arubans are now part of the Dutch community, living in the Netherlands.

Migration has been a very important factor throughout the demographic history of the Dutch-Caribbean islands. There is still a lot of travelling movement and migration between the Caribbean islands and the European motherlands in general, and between Dutch-Caribbean islands and the Netherlands in particular (Goede, 2008; Isabella, 2011). Also a lot of migration takes place between the Dutch-Caribbean islands. As of the 1950s the Dutch-Caribbean countries are facing the 'brain drain' phenomenon, considered as one of the results of this mobility as is observable as part of this type of

decolonized relationship (Amigoe, 2007; Goede, 2008). Too many students leave the country to participate in higher education in the wealthier world convinced that there high and accredited quality is provided, many of them after graduating never returning to contribute to the socio-economic development of their home country. In Curaçao for example, on an annual basis about 300 students leave the island to study in the Netherlands after graduating from secondary education. Investigation shows that 70% of them do not return to Curaçao after graduating (Amigoe, 2007).

6.1.3 Political context

The Netherlands together with Curaçao, Aruba and St. Maarten constitutes the Kingdom of the Netherlands. During several centuries, starting from the 17th century, the Netherlands was the colonization motherland of the other countries in the Kingdom of the Netherlands. The "colonial" status of the islands of the former Netherlands Antilles, including Aruba, changed in 1954, when the islands became Dutch overseas self-governing countries in the Caribbean (Antilliaanse overheid, 1954). Defence and foreign affairs remained kingdom responsibilities, while the Dutch-Caribbean citizens hold Dutch nationality and citizenship and have full mobility to the Netherlands.

In 1986 Aruba obtained an autonomous political status within the Kingdom of the Netherlands, whilst it took Curaçao and St. Maarten till 2010 to do the same (Overheid Aruba, 1985; Overheid Curaçao, 2010; Overheid St. Maarten, 2010). So, gradually the Dutch-Caribbean countries gained more political autonomy. Still, most of these countries continue to have a dependent political relationship with the Netherlands, and Bonaire, St. Eustatius and Saba, the so called BES islands, in 2010 even became part of the territory of the Netherlands.

The national governments of Curaçao, Aruba and St. Maarten are in charge of decision-making at national level, yet still as part of the Kingdom of the Netherlands according to the agreed constitution the Council of Ministers at kingdom level can give specific instructions to their governing coalition in order to guarantee national stability in the political, financial, economic and social-security fields (Overheid Aruba, 1985; Overheid Curaçao, 2010; Overheid St. Maarten, 2010).

The former Netherlands Antilles were until October 2010 governed by a national government, while each island separately also had its own local government. Through the last decades this so called 'double governance level' has been broadly discussed as it was considered to be a barrier for effective decision-making, especially in the case when the coalition constellation at the two governmental levels differs (Goede, 2008). Actually, one of the main reasons of Aruba leaving the former Netherlands Antilles in 1986 was indeed the apparent experience of blockage in their further development by the Arubans due to this governance constellation (Goede, 2008). With their autonomous status they claim that they can manage their own business without being obstructed, especially by Curaçao.

6.1.4 Economic situation

The main subjects to be analysed in this study, i.e. the Dutch-Caribbean universities, are located in the Caribbean region, which is marked as a region of small island development states (SIDS)[18]. Some main characteristics of SIDS are relative poverty, vulnerability to natural hazards, high population growth and mobility, excessive dependence on international trade, food imports, limited resources, high external debt, scarcity of skilled human resources and weak institutional capacities (GEO Yearbook, 2003). Tromp (2007) indicated that Caribbean countries, e.g. the Dutch Caribbean are confronted with severe constraints on material and labour inputs. Furthermore career opportunities are limited, which promotes brain drain.

The economy of Aruba, Curaçao and St. Maarten has gone through continuous developments and changes of focus. All the Dutch-Caribbean countries developed one way or another from a slavery background in the previous centuries into being economically dependent on mostly tourism lately (Goede, 2008). For many years the oil-refinery has played a major role in national economic developments in Aruba and Curaçao. At the beginning of the 21st century Curaçao can be considered as a service island with a large financial service sector and a growing tourism sector; the economy of Aruba is mostly focused on tourism as the income generating and economic development instrument; St. Maarten is mostly dependent on touristic revenues. Table 6-2 presents some economic indicators to shed light on the economic situation of these three countries and the Netherlands.

Table 6-2 Economic indicators

	GNI per capita	Unemployment rate	Economic growth rate	Inflation rate
Curaçao	$15.400 (2011)	9.8% (2011)	3.1% (2012)	3.2% (2012)
Aruba	$23.200 (2011)	5.7% (2010)	8.9% (2011)	4.4% (2011)
St. Maarten	$15.600 (2008)	12.2% (2009)	1.5% (2012)	4.0% (2012)
The Netherlands	$ 37.300 (2012)	8.5% (2012)	-1.2% (2012)	2.5% (2012)

Sources: www.data.un.org, CBS Aruba, 2011; CBS Curaçao 2012, 2013 www.sintmaartengov.org, OECD, 2013

Notwithstanding the relatively high GNI of the Dutch-Caribbean countries, they are still considered as part of the non-industrialized world due to their other characteristics as SIDS countries. In contrast, as illustrated in table 6-2 the Netherlands is considered as a wealthy, industrialized country with high income levels.

Because of their economic situation all three Dutch-Caribbean islands are also great receivers of migrants from the other Caribbean countries. While locally the economic situation is considered as weak and highly vulnerable, in the rest of the Caribbean these islands are seen as well-developed and many Caribbean residents move to them to pursue a better life. For instance, residents from Dominican Republic, Haiti,

---

[18] Islands located in the regions of Pacific, Caribbean, Africa, Indian Ocean, Mediterranean and the South-China Sea are reported as SIDS.

Venezuela and Colombia have migrated to these islands running away from their impoverished home situation and seeking an enhanced way of living in this Dutch-Caribbean group of islands (CBS, 2012).

6.1.5 Socio-cultural aspects

During the past 500 years the inhabitants of the former Netherlands Antilles and Aruba have been influenced by various political, economic and social developments, which have marked their cultural developmental process. Several countries have exerted their influence on the islands (Knight and Martinez-Vergne, 2005). Originally there were the Indians, followed by the Europeans, first the Spaniards, Englishmen and then the Dutch. The latter eventually brought slaves from mainly African countries to be enslaved on the islands (Allen, 2007). All these people have their own culture and brought forth from it the mix of cultures that nowadays coexist on these islands.

According to Allen (2007), the actual culture of the Dutch-Caribbean countries, Curaçao in particular, was mostly developed based on their social-historical developments back in the slavery era. These countries' social-cultural characteristics can be considered a mixture of European and African cultural elements, yet also including Caribbean, Latin and American influences. During decennia the Antillean society was characterized by an economic and social dominance of the white coloured elite over the black coloured slaves. Due to this perception the European cultural elements of the Antillean culture are still perceived as superior to inhabit cultural features (Marcha and Verweel, 2003). Historical evolutions in the 18th, 19th and 20th centuries, including the high rate of migration, have overwhelmed the cultural development and the population of these Dutch-Caribbean countries is in the 21st century a mix of many nationalities (Allen, 2007). A unique society was created, illustrated by the multicultural melting pot the islands are today.

The multicultural society of the islands was crucial for the emergence of the existing cultural elements and an eclectic mix of customs and traditions (Römer, 1995). Rich cultural diversities and low social tension between cultural groups result in cultural interactions at all levels in these small communities, creating a crossroad of cultures: people of different cultures encounter each other and live in close proximity. This large diversity of different peoples is still maintained and fed by incoming migrants during the past decades, mostly from the Latin-America and Caribbean (Goede, 2008). Presently, many people from countries in the immediate vicinity of the studied Dutch-Caribbean countries find their employ on these islands and therefore continue to enrich their culture.

Due to their geographic position, their political context and their socio-cultural history, the Dutch-Caribbean islands are multilingual. As of 2007, in Curaçao there are three official languages: Dutch, English and Papiamentu (Curaçaose overheid, 2007). In Aruba and Curaçao during their educational career the youngsters receive education in four languages. Besides the three official languages, Spanish is also taught due to their geographical position nearby Latin America. Thus, most inhabitants of these islands

can use four languages in their daily communications, which stimulate the cross-national communication and the integration and exchange of the mix of cultures[19].

According to Marcha and Verweel (2003) the slavery history has created a culture of fear that dominates the population, characterized by an indirect communication approach: opinions are withheld due to a fear for reprisal; direct critical remarks are not easily given or accepted and there is an informal way of getting things done. Opinions and comments are barely given 'face to face', but behind someone's back to prevent confrontation and keep peace, while afraid of reprisal. Graduates from higher education in the Netherlands coming back home are considered in the Dutch-Caribbean countries as becoming 'strangers'. They are often accused of having integrated characteristics of the Dutch culture, such as being straight forward and more critical, and thus not fitting anymore in the local culture.

Also the Netherlands can be characterized as a multicultural community with more than 190 nationalities (http://mens-en-samenleving.infonu.nl, retrieved December 2013). Due to a high level of development the Netherlands is attractive for migrants of other European and non-European countries, including the Dutch-Caribbean countries, creating a mix of cultures in the Dutch community. The Netherlands is well known as a country of high tolerance and freedom of expression. In general, people live peacefully together, although sporadic tensions between different cultural expressions can be sensed. The difference between locals and migrants is emphasized by the names of natives ("autochtonen") and immigrants ("allochtonen"). The Antilleans and Arubans living in the Netherlands are also identified as "allochtonen", despite their Dutch citizenship and passport.

6.2 Higher education as national instrument for capacity building

The importance of higher education to support the continuous globalization and internationalization trends and the achievement of national objectives has been discussed widely during the past decades (see chapter 3). In this section the role of higher education institutions, considered of eminent importance to contribute to nation building and the further development of the country, is addressed. Preceding a brief description of the importance of higher education for national development in general, some facts and figures related to the national educational contexts of the studied universities are presented. Then, the section zooms into the increased significance of higher education in the Dutch Caribbean countries. Reaching the accreditation goal is in fact considered as an enabling factor in the role granted to the Dutch-Caribbean universities in the pursuit of achieving the national goals.

---

[19] Papiamentu is the native language of the vast majority of the population (81%) of the population of Curaçao, Aruba and Bonaire. Papiamentu is considered a Creole language with its heritage taken from Spanish, Portuguese, English, French, Dutch and West African. This Creole language originated during the slavery period as a communication medium between the slaves and their masters and among the slaves. It is spoken on all levels of the population, and across all nationalities (Curaçaose overheid, 2007).

6.2.1 The educational contexts

As of the 19th century the educational system in the former Netherlands Antilles and Aruba was a replication of the one in the Netherlands. Over time, the many shortcomings of this non-contextualized educational system were identified, content-wise as well as with regards to didactic approach (Isabella, 2011). Document analysis reveals that this Eurocentric system has become an impediment to the attainment of national educational, economic and social objectives in the Dutch-Caribbean islands (Arubaanse Overheid, 2011; Departement van Onderwijs, 1988; 1995; 1998; 1999; Emerencia, 2007; Ministerie van Onderwijs, Cultuur, Jeugd- en Sportzaken, 2000; Stuurgroep Herstructurering AVO, 1998). Among the many problems identified were lack of connection between educational content and local needs and failure to incorporate Antillean and Aruban language, culture and society into the educational process. As a result, educational output in the Dutch-Caribbean countries has been low, with a high percentage of repeaters and dropouts. For instance, according to the Department of Education on Curaçao, about 70% of all pupils repeat at least one class during their years at primary school (Ministerie van Onderwijs, Cultuur, Jeugd- en Sportzaken, 2000). Furthermore, only 13% of the graduates of primary school go on to the higher tracks of secondary education (Havo/VWO), while in the Netherlands this is 21% (CBS, 2012; Inspectie van het Onderwijs Nederland, 2013).

Although the content and quality of education at all levels have been highly criticized by those involved in educational policy and practice, it was not until the late 1990s that educational changes were implemented at primary and secondary level in the former islands of the Netherlands Antilles and Aruba (Department van Onderwijs, 1995; 1999, Emerencia, 2007; Stuurgroep Herstructurering AVO Aruba, 1998). The newly implemented education system in the former islands of the Netherlands Antilles is considered to be more adapted to national needs and conditions, thus fostering higher success rates. The main goal of the new education systems is to ensure that all children have equal access to and benefit from quality education. Another objective is to increase the number of students that after completing primary education continue at the higher levels of secondary education. Eventually more students will enter higher education and in the long run become graduates. Though, no researches have been conducted yet in these countries to compare the educational output prior and after the educational reforms were implemented. It is worthwhile noting however, that as educational reform progresses and the system becomes more relevant to national needs, language, culture, and society, progress is being made. For instance, the student dropout rate in Curaçao has decreased from 50.3% in 1992 to 41.8% in 2001 to 36.9% in 2011[20] (Central Bureau of Statistics Curaçao, 2012). In the Netherlands the dropout rate was 28% in 2012 (OECD, 2013).

---

[20] The drop-out rate used by the Department of Education on Curaçao is: pupils leaving the school without any secondary level diploma. Yet, it is known that drop outs sometimes have not even completed primary school.

With regards to Aruba also some major changes have been implemented in the education system (Emerencia, 2007; Stuurgroep Herstructurering AVO Aruba, 1998). The implemented educational reform at primary and secondary levels did not really modified the educational structure, but mostly the content has gone through a thorough modification to better fit with the Aruban's necessities and reality.

The educational system of all three Dutch-Caribbean countries is characterized by some features of education systems in developed countries, such as high compulsory participation rate of students from 4 till 18 years of age in Curaçao (96.1% in 2011), and a high proportion of government spending on education (around 20% of government budget) (Central Bureau of Statistics Curaçao, 2012). St. Maarten's statistics show a slightly lower enrolment rate than the other islands (95.2%), but this may mainly be attributed to the presence of non-governmentally funded schools, which are not included in the official statistics. In Aruba the participation rate during the compulsory education period, 6–15 years is also high, 98.3% (Central Bureau of Statistics Aruba, 2010). The Netherlands also has a very high participation rate of pupils of 101% during their compulsory education period (Inspectie van het Onderwijs, 2013). On the other hand, the education system of the Dutch-Caribbean countries has some characteristics in common with developing countries, like the fact that in educational policies there is still a great tendency to adopt (mostly without modifications) new developments from the mother country and high drop-out rates (Departement van Onderwijs, 1988; 1998; 1999; Stuurgroep Herstructurering AVO Aruba, 1998). These characteristics reflect the dilemma in which these countries operate: on the one hand characteristics due to their colonial history, while on the other hand effects because of their geographic, demographic and economic parameters.

In the Netherlands the educational system has been modified by the end of the nineties too. Major resemblance of some of these modifications, such as a new system for the higher levels of secondary education, is once more reflected in the new education system in the Dutch-Caribbean countries, illustrating over again the influence of the colonized motherland nowadays (Departement van Onderwijs, 1999). One of the main reasons for this resemblance is the aim of the national governments to guarantee seamless transfer of secondary school graduates to higher education in the Netherlands (Commissie Hoger Onderwijs, 2002; Departement van Onderwijs, 1999).

All countries as part of the former Netherlands Antilles have institutions that provide higher education. There are nationally funded higher education opportunities, private universities and also some 'off shore' universities, mainly medical schools. The nationally funded institutions at the higher educational level can be labelled as small or even very small, compared to higher education institutions in the Netherlands. They provide a wide range of educational programs, mostly to meet specific national demands in certain working fields. Being small, with limited resources and with particular contextual distinctive puts a specific pressure on them to improve their quality so they can meet the national expectations as well as the international demands. According to census results of 2011, in total 15% of the population in Curaçao has had tertiary level education, 13% of households are headed by a person

who has had tertiary level education and 5% of the population in school was attending a higher education institution (Central Bureau of Statistics Curaçao, 2012). In contrast, in the Netherlands the completion rate of tertiary level education was 33% in 2011 (OECD, 2013). In September 2007, the governor of the former Netherlands Antilles formally set an objective stating that in every household at least one person should attend a tertiary educational institution (Isabella, 2011). However, up until the present no ministry level office exists in Curaçao neither in St. Maarten to directly address higher education issues or to monitor developments in this field at the national, regional or international levels.

6.2.2 Increased importance of higher education worldwide

As explained in previous chapters, the interrelationship between globalization and innovation in the higher education sector has been explored by several scholars (Badrawi, 2001; Bell and Cullen, 2007; Howe, 2003; Jakobi, 2007; Marginson and van der Wende, 2007; Viara, 2004). Rapidly developing trends are having a major impact on higher education institutions worldwide. However, while those institutions located in the industrialized and post-industrial part of the world are playing a role in shaping those trends, those located in less developed regions can be said to be fully occupied just in doing their utmost to keep up with them. Goddard and Puukka (2008) and Howe (2003) contend, however, that it is these less developed countries that have the most at stake in higher education, in terms of achieving their long term socio-economic goals. Higher education institutions in less developed countries are often highly constrained by e.g. a vulnerable political context, an unstable economic situation and, in some cases, small scale. Nevertheless, according to several researchers in less developed countries higher education is considered to be an important instrument for national capacity building, regardless of the limitations encountered at the national level and the impact of international trends (Ali, 2008; Duits, 2005; Goddard and Puukka, 2008; Howe, 2000; Miller, 2002; Leo-Rhynie and Hamilton, 2007; Parkins, 2007; Wright et al., 2004). Actually, higher education institutions are by their national governments considered to be of great importance with regard to the achievement of national goals related to human capital and the building of capacity for participation in an increasingly competitive global economy. Furthermore, Goddard and Puukka (2008) and Howe (2003) assert that governments in less developed countries have realized that it is no longer acceptable to have a large proportion of the population educated at the lower and intermediate levels. Gradually they have started to acknowledge the importance of investment in higher education to facilitate the teaching, learning and research necessary to register real progress toward national socio-economic, socio-cultural and environmental goals. So, despite their limited financial resources, investment in the higher education sector is considered to be of great value in the training of highly skilled professionals who are capable of making their nation's vision for the future a reality.

Industrialized and post-industrialized countries have more resources to invest in their higher education institutions than do less developed countries and can usually recruit

from a wider pool of highly skilled personnel (Billing, 2004; Marginson and Van der Wende, 2007). The great availability of resources explains why they are generally more competitive in the contemporary globalized world. For less developed countries however, participation in the emerging worldwide knowledge economy is a major challenge. Due to their limited financial resources, governments in less developed countries are less able to sustain substantial levels of investment in higher education (Howe, 2000; Miller, 2002; Narain, 2004; Parkins, 2007). Consequently, in these countries fewer students have the opportunity to continue their educational careers beyond the secondary level. As a consequence, low concentrations of students in higher education are mostly found in nations and regions that are relatively detached from the globally networked economy. Enrolment growth in less developed regions, however, is accelerating as more governments see the rapid expansion of higher education as a key element in the achievement of their national goals (Duits, 2005; Leo-Rhynie and Hamilton, 2007; Narain, 2004; Parkins, 2007).

Literature analysis specifies that less developed countries are facing major challenges with regards to the best way to allocate their limited available resources (Ebong-Harstrup, 2004; Howe, 2000, 2003; Miller, 2002; Narain, 2004; Parkins, 2007). Should the limited financial resources be invested in higher education to attain longer term socio-economic goals, or in the lower-skilled work force to enhance competences over the shorter term? Should more money be spent on education or on health care? If more resources need to be invested in higher education, what is then required to provide this type of education at an international quality standard? Literature shows that in the aim of such countries to achieve national socio-economic goals, while at the same time taking international demands into account, answers to these questions still need to be found.

6.2.3 Higher education in the (Dutch) Caribbean

As elsewhere, the (Dutch) Caribbean faces numerous challenges in a world that is becoming more and more interconnected. Several Caribbean authors state that these nations are facing difficult challenges in their efforts to keep up with global trends (Duits, 2005; Ebong-Harstrup, 2004; Gift et al., 2006; Miller, 2002; Narain, 2004; Parkins, 2007). According to these authors the role of higher education is critical in order to meet these challenges. To illustrate, Parkins (2007) states that: "higher education is an indispensable component in the society that governments wish to create in the twenty first century" (p.1).

Most national governments in the Caribbean region indeed recognize the critical importance of higher education in the process of meeting their stated goals and objectives (Duits, 2005; Leo-Rhynie and Hamilton, 2007; Miller, 2002; Parkins, 2007). Therefore, increased investment in higher education is considered as an important instrument in keeping up with global developments and creating a society that meets the demands of the 21st century. Several Caribbean authors emphasized the contribution that higher education has already made not only to social mobility, but also to meeting national and regional goals (Beckles et al., 2002; Gift et al., 2006; Miller,

2002; Parkins, 2007). For instance, the University of the West-Indies (UWI) is the dominant provider of higher education in the English-speaking Caribbean and its faculties offer a wide range of undergraduate, master's and doctoral programs. According to several Caribbean authors during its 50 years of existence, alumni of UWI have held high positions in the private and public sectors, and so have made substantial contributions to efforts to achieve national and regional goals (Gift et al., 2006; Leo-Rhynie and Hamilton, 2007; Miller, 2002). The same could be said for the alumni of UoC. Since its establishment in 1979, UoC has provided the Curaçao community with a large number of highly skilled graduates who have held important positions in the public and private sectors, and as such have contributed to realizing national objectives (Duits, 2005; Isabella, 2011; Narain, 2004).

The rapid growth in demand for highly skilled graduates has provided incentives for the development of private institutions in the Caribbean, including cross border franchise and virtual universities, which have posed novel challenges to national systems of internal and external quality assurance. Gift et al. (2006) confirmed that in the Caribbean region cross-border higher education is fast developing with the establishment of many transnational and offshore universities, such as medical schools and/or non-accredited private higher education institutions that are having an increasing impact in the national and regional higher education arenas. To illustrate this trend, on all the Dutch Caribbean islands American offshore medical schools have been established. In addition, in Curaçao many private higher education institutions have emerged, such as the University of the Dutch Caribbean (UDC), founded in 2007 and the Inter-Continental University of the Caribbean (ICUC), founded in 2011. By the end of 2012, besides UoC (the only governmentally funded university) there were at least six private higher education institutions, all operating without any particular governmental directives related to higher education (Isabella, 2011). The national government considers this development as an enabling factor for the further creation of a new, modern nation complying with international standards, and also as an instrument to fight the brain drain phenomenon (Commissie Hoger Onderwijs, 2002).

So, in the Caribbean higher education institutions, mostly those funded by the national government, are indeed considered as key players in the pursuit of a higher level of socio-economic development and the delivery of highly qualified man power. They are expected to function as 'capacity builders'. According to some Caribbean authors, besides the initiatives of regional and international organizations to contribute to achieve sustainable developments in these countries, the national policy makers and leaders need to formulate and implement nationally embedded yet internationally oriented policies, regulatory frameworks and instruments (Miller, 2002; Leo-Rhynie, 2006; Leo-Rhynie and Hamilton, 2007). A structure and culture need to be created that enable the realization of quality education provision at tertiary level. The enabling role of the state is especially critical in making these developments possible. In order to elaborate on this topic, considering its relevancy for this study, the next section elaborates on the national higher education policies in the studied countries.

6.3 The higher education policies

In this section the main elements of the higher education policies as part of the national context of the studied universities are detailed. The main purpose of this section is to shed light on the differences and commonalities between these policies and their possible effect on the choices made prior and during the accreditation efforts.

6.3.1 Higher education policy of the former Netherlands Antilles

According to Ali (2008) the political sovereignty of the Caribbean territory has implications for the governance of its higher education system. In fact, in most Caribbean countries, regardless of their political status, governance of higher education is coordinated by the politically elected or negotiated government with support from its administrative team at the involved ministries. The governments' responsibilities may include the policy and funding role led by a ministry of education with responsibility for higher education and research, which oftentimes is supported by established departments and state enterprises in charge of coordinating and controlling the policies implementation. This is also the case in the Dutch-Caribbean countries.

With regards to the former Netherlands Antilles after the innovative reforms had been launched at the primary and secondary levels, at the beginning of this millennium it was time to invest more at the tertiary level as well. In 2002 the educational reforms, together with worldwide developments in higher education shaped the formulation of the first national policy on higher education for the former Netherlands Antilles (Commissie Hoger Onderwijs, 2002). This higher education policy plan is still applicable for both Curaçao and St. Maarten, since at the end of the research period in neither country a new one has been developed. However, this national policy was never translated into meaningful nation-wide legislation. In Curaçao UoC, as the national university, is regulated by its own specific Act, whilst in St. Maarten the private-public university USM by its own statutes (Antilliaanse Overheid, 2004; University of St. Martin, 2003). The other providers of higher education are not regulated under any legal framework and there are no governmental directives or standards by which to monitor and control the quality of their programs, neither in Curaçao nor in St. Maarten.

Since 2005 the committee that drafted the higher education policy started to formulate a Higher Education Act for the Netherlands Antilles. In 2009 a first draft of this legal act was submitted to the minister of education of that moment in time, yet due to political sensitivities this draft has never gone through the established political and legal procedures in order to become legally enacted (Commissie Hoger Onderwijs, 2009). In 2011 the committee renewed its activities focusing now only on regulating higher education in Curaçao, but this is still a work in progress and no deadline has been set to complete this project. Nevertheless, analysing the draft Higher Education Act reveals that accreditation will become the core instrument to regulate higher education in Curaçao.

An important objective of the national policy on higher education of 2002 was to ensure that highly skilled professionals would be trained locally as much as possible to counteract the brain drain phenomenon (Commissie Hoger Onderwijs, 2002). Another objective of this policy plan was to promote the education of highly qualified human resources in order to meet the national goals of the islands of the former Netherlands Antilles. The policy was also aimed at increasing the flow of students from secondary education to local higher education institutions and to make opportunities for continuing education available to citizens already in the workforce to meet the changing demands in the local labour market.

This higher education policy also aimed to guarantee seamless transfer of local secondary school graduates to higher education in the Netherlands. Following up on this, policy initiatives in this field in Europe also played a crucial role in developing a new vision for higher education in the former Netherlands Antilles. Among these initiatives, the Bologna Process deserves special mention here, since, as will be detailed in section 6.4, it can be considered as the major driver of European developments in the field of quality assurance and accreditation in higher education (Schwartz and Westerheijden, 2004).

With the official endorsement of the higher education policy, the basis was set for the governments in the former countries of the Netherlands Antilles to mandate the implementation of a new bachelor-master structure in nationally funded universities and to improve mechanisms for quality assurance in tertiary education (Departement van Onderwijs, 2001; Commissie Hoger Onderwijs, 2002). However, as earlier mentioned, this policy has yet to be legally enacted.

As previously indicated, the higher education policy of the former Antillean government was directed to create more local graduates at higher educational level to contribute to the further sustainable socio-economic development of the islands, explaining the main reason for the establishment of UNA[21]. This university is therefore considered to be a key vehicle for national capacity building (Commissie Hoger Onderwijs, 2002). The government hoped also that with the establishment of a national institution for higher education the phenomenon of 'brain drain' could be addressed and controlled as this is still one of its serious concerns. In addition, UNA as the national university for the former Netherlands Antilles and Aruba was conceived to operate for the benefit of the government and the communities as a centre that was and still is expected to give impulses to promote further development of the Dutch-Caribbean societies. This university has always been considered as a national strategic instrument for knowledge development and nationally there is high expectation for its contribution to solve the many evolving economic, social and cultural challenges within the community.

---

[21] At this point in order to ensure clarity, it is important to repeat that as of November 2013 the former University of the Netherlands Antilles (UNA) became the University of Curaçao, Dr. Moises Da Costa Gomez (UoC).

At the celebration of the 25th anniversary of UNA Narain[22] (2004, p.4) affirmed the importance of this university for the community:

> The added value of UNA must not only be seen in the number of students and activities, but primarily in the fact that, in the course of their study, these students are faced with specific national and local challenges that require specific solutions. In other words, what must be considered is the contribution this national university has provided in reflecting on our own political, economic, social, political, cultural and educational issues[23].

Narain (2004) further specified that the role of UNA as a national university is to continue delivering highly skilled graduates that can contribute to the sustainable development of the country. The key note speaker at that ceremony, Prof. Dr. Ashley Duits, confirmed the importance of a national university for finding solutions for challenges the community was confronting (Duits, 2005). Duits further pointed out that UNA as a national university is important for the deliverance of high level man power that can contribute to academic activities, research and knowledge development at national and local levels. Narain (2005) stated that as a national university UNA is expected to direct, support, guide, assess and monitor developments in its society, be the trend setter in crucial societal debates and have a leading ethical role to fulfil as well (see UoC-case, section 7.1).

With regards to St. Maarten, till the end of the research period no governmental effort could be detected to start drafting a national higher education policy or regulating higher education providers in this country. However, based on recent involvement of the government in St. Maarten in the development of the Teacher Education Program offered at USM, some increased involvement of this government concerning higher education developments on the island can be expected (see USM-case, section 7.3).

6.3.2 Higher education policy in Aruba

As is the case in the former Netherlands Antilles, also in Aruba reforms in primary and secondary education have eventually led to more governmental attention for higher education. The Aruban policy for higher education dates from 2002 (Directie Onderwijs Aruba, 2002). According to this policy plan, due to globalization and the information era, higher education plays an increasingly important role to guarantee economic prosperity and welfare of the community. Nationally funded higher education institutions have the prime role to contribute to achieve these national objectives. Nevertheless, in Aruba as well a legal Act on higher education is still missing. The University of Aruba (UA) is regulated by its own specific Act (LUA)

---

[22] Dr. Goretti Narain was the rector of the UNA from September 2000 to August 2006. Dr. Narain was leading the university when the accreditation processes were started at the beginning of this century. She is one of interviewees in this study.

[23] Translated from Dutch to English by the researcher.

(Arubaanse overheid, 2011). In the LUA there are no regulations concerning accreditation of UA programs. The Teacher Training Institute (IPA), also funded by the Aruban government, is still regulated by the Act for Secondary Education. The other private higher education institutions and off-shore medical schools operate without any legal regulations.

In the Aruban higher education policy it is stated that the government is committed to deliver high standard quality higher education that can compete with the main reference countries, USA and the Netherlands (Directie Onderwijs Aruba, 2002). Comparison with these two countries is considered to be of eminent importance since it is there where most secondary school graduates and undergraduates continue their further study. Hence, in any case, the quality level offered in higher education institutions in Aruba must be compatible with and acceptable by those countries. The same as in the other Dutch-Caribbean countries, the Aruban graduates are expected to contribute to the further sustainable socio-economic development of the country. So, UA and IPA are indeed considered as key instruments for national capacity building (Directie Onderwijs Aruba, 2002).

The Aruban policy on higher education is furthermore directed on consolidation and expansion of local higher education provision. At the same time attention is paid to international collaboration. The Aruban scholarship policy has to facilitate this dual approach. In Aruba, there is therefore a complementary system of higher education divided in national and international possibilities. So far, Aruba has a quite liberal national policy on higher education. Everyone is free to offer higher education, as long as no application for recognition or funding is done. This has led to the establishment of several private institutions, both complementary and competitive to the official national higher education institutions UA and IPA.

In the Aruban higher education policy it is indeed stated that the governmentally funded higher education institutions must connect to the external system of quality assurance in the Netherlands, which was confirmed during the tripartite ministers' meeting in 2005 (Arubaanse Overheid, 2009; Directie Onderwijs Aruba, 2002). This was therefore one of the main reasons for the start of the accreditation processes in UA (and IPA) as nationally funded Aruban's higher education institutions (see UA-case, section 7.2).

6.3.3 Higher education policy in the Netherlands

The national context of the Netherlands, characterized by a high developmental stage, located in a developed part of the world and financially more equipped than the Dutch Caribbean, has more than 55 universities (academic and applied sciences) funded by public revenues. For decades the Netherlands has had legal rules and regulations for its higher education, embedded since 1993 in the Higher Education and Research Act (Wet op het Hoger Onderwijs en het Wetenschappelijk Onderzoek, WHW). This Higher Education Act regulates the operation of all higher education institutions in the

Netherlands, such as governance, funding, admission policy, the rules and regulations concerning the examination board and accreditation (Ministerie van OC&W, 2010).

The higher education institutions in the Netherlands are also operating in a rapidly changing environment. So, over time WHW has been modified to continuously adapt to national, European and global changes and demands and advances in the scientific world. The past years several reports and agreements between the ministry of education and the association of academic universities (VSNU) and the council of universities for applied sciences (HBO-Raad/Vereniging Hogescholen) indicate the way ahead for higher education in the Netherlands (Commissie Toekomstbestendig Hoger Onderwijs stelsel, 2010; Ministerie van OC&W, 2011a, 2011b; VSNU, 2011). An ambitious educational mission for the academic universities, universities of applied sciences and the responsible government agencies was delineated, entailing among others greater differentiation of the educational system (both between and within universities), higher study success rates and lower dropout rates (Ministerie van OC&W, 2011a, 2011b). Furthermore, increased attention for quality of higher education, including the focus on accreditation, is considered to be of eminent importance for the Netherlands, in particular to reach the aim to achieve a better position in the world ranking in this educational field.

As of academic year 2003 – 2004 a bachelor-master structure has been introduced in the Dutch higher education following one of the objectives of the Bologna Declaration (Kwikkers et al., 2003; Van Kemenade, 2009). This can be considered as a major transformation and improvement process in the history of most Dutch higher education institutions. Most of these institutions, among others the Utrecht University, took this system modification as an opportunity to introduce a wide range of procedural and substantive changes at institutional and program levels (Fennema et al. 2010).

The Dutch higher education system is based on a so called 'double binary' system, as illustrated in table 6-3.

Table 6-3 Dutch higher education system

	Bachelor	Master
Professional orientation (HBO)	√	√
Academic orientation (WO)	√	√

Academic universities provide academic programs (WO), while universities for applied sciences offer the professionally oriented programs (HBO). A smooth transfer is possible from bachelor graduates to master programs within the same orientation, whilst transfer from HBO to WO is usually coupled to additional terms and conditions, such as completing a premaster program by HBO-bachelor graduates before admission to a WO-master program (Ministerie van OC&W, 2010). Recently there is an ongoing debate to harmonize this complex higher education system in a more internationally compatible one. Besides the nationally funded universities a wide scale of private

higher education institutions also operate in the Netherlands. All of them need in principle to comply with most of the rules and regulations dictated by the WHW, but only if they want to offer recognized degrees and make their students eligible for state support.

Since 2003 mandates regulating accreditation and the operation of the NVAO are also included in the WHW (Ministerie van OC&W, 2010). From then onward accreditation plays a major role in funding agreements between the national government and the nationally funded universities. In the next section the emergence of accreditation, which forms the fundament of the establishment and operations of NVAO are detailed.

6.4 Accreditation developments in Europe and the Netherlands

Several developments in the European higher education area were directed to meet common goals in the field of quality assurance. Below a brief overview of these developments are presented. As will be described in the second and third parts of this section, following the European agreements and trends in the higher education field at a very fast pace at the beginning of this third millennium accreditation became a reality in the Netherlands.

6.4.1 The start of quality assurance in the Europe

Globalization, internationalization and Europeanization are interconnected developments that make the world seem smaller and easily reachable for worldwide citizens (Carnoy, 2005; Marginson and van der Wende, 2007; Viara, 2004). With time as part of the Europeanization process gradually more efforts were done to provide guidelines to improve quality and enhanced comparability in higher education institutions in the European countries. The Sorbonne Joint Declaration of 1998 can be considered as a point of departure in the course of the latest developments of European higher education. Four ministers of education[24] agreed that besides the monetary and economic unification of the European continent the intellectual, cultural, social and technical dimensions have to be strengthened as well (Sorbonne Joint Declaration, 1998). The universities will have to play a prominent role in this endeavour. These ministers shared the view that regardless of the diversification in the higher education systems across the European continent and respecting the university's autonomy, the effort to reach a European area for higher education will bring several benefits for the societies at large and the students in particular. In this declaration enhanced mobility for students and teachers and closer cooperation among the institutions were mentioned as positive outcomes of such an effort. In addition, the foundation was set for the implementation of a two cycle higher education system (undergraduate/ bachelor and graduate/master or PhD) to promote international recognition, comparison and equivalency.

---

[24] These were the ministers of (higher) education of France, Germany, Italy and the United Kingdom.

The objectives of the Sorbonne Declaration were underpinned and confirmed in 1999 in the Bologna Declaration, originally signed by 29 European countries (Bologna Declaration, 1999). The contour of the agreements of 1998 in the Sorbonne Declaration was expanded and made more concrete and solid in the Bologna Declaration. The Bologna process, which is a voluntary harmonization process of the participating countries, aimed to create a European higher education area by promoting convergence to improve compatibility, comparability and transparency at this educational level. By becoming members of this process, countries committed themselves to engage in the reform of their higher education structure in order to adopt a system of easily readable and comparable degrees.

This Europeanization process can also be seen as an important driver in quality assurance. In fact, the promotion of European cooperation in quality assurance and thereby implementing a wide range of quality assurance mechanisms was also one of the objectives mentioned in the Bologna Declaration (1999). Compatible quality assurance frameworks and accreditation were considered as instruments to facilitate the achievement of the agreed goals, ensuring comparability of degrees and promoting students' mobility within Europe but also at international level.

Another objective linked to the Bologna process was to increase the international competitiveness of the European system of higher education. By encouraging mobility in higher education, internationalization of higher education and improvement of the position of the graduates on the labour market these objectives will be supported (Brussee et al., 2005).

The diversity of cultures, languages, national educational systems and the fundamental principles of the university's autonomy were acknowledged and supported in this agreement (Bologna Declaration, 1999). The course was set for convergence, to achieve greater compatibility and comparability of the systems of higher education, though this did not imply to standardize or uniform these systems. Thus, the interpretation and implementation did vary greatly between the participating countries. In 2010 during the ministerial conference in Budapest-Vienna the first decade anniversary of the Bologna process was celebrated and the European Higher Education Area (EHEA) was officially launched.

Another important development in the European higher education field relevant for this study was the establishment of a European Network for Quality Assurance in Higher Education in 2000 to promote European cooperation in the field of quality assurance. In 2004 this network was extended from an EU-club to the whole EHEA and was transformed into the European Association for Quality Assurance in Higher Education (ENQA), a membership association of quality assurance organizations from EHEA[25]. Also the Bologna Declaration of 1999 provided a firm impulse to the creation of this association. ENQA has as its mission "to contribute significantly to the maintenance and enhancement of the quality of European higher education at a high

---

[25] www.enqa.eu, retrieved September 2013.

level, and to act as a major driving force for the development of quality assurance across all the Bologna signatory countries" (www.enqa.eu). In order to guarantee the quality level of the members' organizations once every five year they need to go through an external quality review, coordinated by ENQA in accordance with the "Guidelines for external review of quality assurance agencies in the EHEA", based on the "Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG)" (ENQA, 2005, 2009). Approval of the ENQA is needed in order to become a member or maintain the membership over the years. The same external review may be used by quality assessment agencies to be registered in the European Quality Assurance Register for Higher Education (EQAR). NVAO is one of the members of ENQA and is registered in the EQAR.

6.4.2 Historical overview of external quality assurance in Dutch HE

Historical overview shows that the developments concerning quality assurance for higher education in the Netherlands started in the mid-eighties (Frederiks et al., 1994). In 1985 the ministry of education and science published its policy paper entitled "Higher Education: Autonomy and Quality", which specified that quality assurance is entrusted to the higher education institutions. Internal quality assurance was the responsibility of these institutions, whilst the external quality assessment was considered as a task of the inspectorate. The focus was on improvement and no legal consequences were coupled to the achieved level of quality; weak performing institutions were granted unlimited time for improvement.

The realization of a nation-wide system for external quality assurance actually happened in 1988, when the Association of Universities in the Netherlands (VSNU) implemented an external quality assessment system for all universities bypassing the intended inspectorate's role (Brussee et al., 2005; Douma, 2009; Frederiks et al., 1994; Jeliazkova, 2002; van Kemenade, 2009). This system consisted of the following steps: writing of a self-evaluation report based on a pre-set format, including the topics to be addressed, followed by a site visit by a peer review committee to clarify and verify the information provided in the report. Meetings are held with all relevant stakeholders, such as management, teachers, students and graduates. Then, the committee produces a review report, containing the judgment on the achieved quality level and suggestions for improvement. This review report was public and the assessed program was expected to act in response to the recommendations so as to implement improvement activities suggested by the review panels. In those times, all programs in the country of the same discipline were evaluated simultaneously. The review report contained a general part indicating the 'state of the art' in that discipline and also the similarities, followed by conclusions and recommendations at program level. In 1990 a similar system was implemented by the HBO Council (HBO-Raad) for the universities for applied sciences, so called 'hogescholen'.

Also in the Netherlands, investment in higher education and increased attention to the quality delivered were considered to be beneficial for the society in both economic and socio-cultural terms ((Brussee et al., 2005; Schwarz and Westerheijden, 2004; van

Kemenade, 2009). This vision was also the reason for more attention to quality assurance from the government perspective, starting with legal embedment of external quality assurance mechanisms. Consequently, in 1993 the national Higher Education Act (WHW) regulated that all higher education institutions on a regular basis needed to let their programs be assessed by external experts (Brussee et al, 2005). The inspectorate did the meta-evaluation of monitoring and controlling the work of the review committees, the content of the review report and the implementation of quality improvements activities at program level. Also programs about which there were serious concerns regarding the quality offered were identified. Programs that for many years failed to make the necessary quality improvements could receive a warning, which theoretically could become a threat for their right to grant diplomas and to receive governments' fund. During those years however, none of the insufficient performing programs were shut down by the government. The outcomes of this external quality assessment were mainly used for choices made by students and questioning of the government regarding the implementation of the recommendations.

In 1994 the second cycle of this external quality system was implemented. Again, no formal sanctions by the Dutch government were connected to the achieved quality level. The focus was to enhance quality and this was the responsibility of the higher education institutions; accountability was not the prime concern at that moment in time. A research project to find out the effects of this new quality management system in higher education in the Netherlands reported that this system has led to increased attention for quality within higher education institutions (Frederiks et al., 1994). These researchers concluded "… quality of education has certainly gained an important place on the agenda of decision makers" (p.196). The report further specified that although higher education institutions are considered as relatively autonomous organization, the respondents were fairly satisfied with the implementation of this external quality assessment system.

6.4.3 The emergence of accreditation system in the Netherlands

In 2002 a shift took place from an external quality system mostly associated with improvement to the introduction of an accreditation system directed to accountability as well, and thus launching the next period of external quality assessment in higher education in the Netherlands. This marks a fundamental change in the regulation of higher education (Douma, 2004; 2009; Kwikkers et al. 2003; Schwarz and Westerheijden, 2004; van Kemenade, 2009). The nationwide government has become to a larger extent involved in quality control and supervision in higher education. Several reasons might be forwarded to underpin the transition from an external quality assurance system merely directed to improvement to an accreditation system: international recognition of the quality of Dutch higher education, promotion of international benchmarking, increased transparency in the quality of the programs, strengthening of the independent assessment of quality and explication of the governments' consequences (VSNU, 2001; Douma, 2004; van Kemenade, 2009). In addition, explored literature reveals that without the increased impact of globalization

and the previously described Bologna process this focus on accreditation would not have been effectuated at such a fast pace even though at national level there was no need of such a rush (Brussee et al, 2005; Kwikkers et al, 2003, 2011; van Kemenade, 2009). Hence, the globalizing and European contexts and the increased competition on international higher market can also be considered as driving forces behind the accreditation development in the Netherlands.

Another important rationale to initiate this type of external evaluation is that accreditation provides the guarantee to students, work field and the society at large that the program meets a certain international level of quality demands and standards (Brussee et al., 2005; Douma, 2004; van Kemenade, 2009). Subsequently, instead of a national quality assurance system mainly oriented toward improvement, the government determined that international benchmarking and positioning of Dutch higher education is important in this globalized world. Accreditation is thus considered as the final component of a more comprehensive system of quality assurance in Dutch higher education, and an important instrument for quality assurance and control. Accreditation results in the award of a formal certification. It is linked with recognition of programs by the government, which manifests itself in national legal consequences, in terms of ratification coupled to the civil effect of diplomas, the funding of programs and eligibility of students for state support (Douma, 2004; van Kemenade, 2009; VSNU, 2001). In 2002 the accreditation system applicable in the Netherlands was approved by the national government and in 2003 officially regulated in national Higher Education Act WHW.

6.5 Accreditation characteristics in the participating countries

In this section the focus is on the main characteristics of the accreditation system in the Netherlands and in the Dutch Caribbean. First the main elements of the Dutch accreditation system are discussed and subsequently this section addresses the emergence of accreditation in the Dutch-Caribbean countries in order to keep track with European and consequently Dutch accreditation trends.

6.5.1 Characteristics of the Dutch accreditation system

The main starting point of the new Dutch accreditation system was that it had to build on the existing system of external quality assurance. Accreditation did not replace the existing system, but has added a new component to it: providing a certification signifying that pre-set quality standards have been met (Douma, 2003; Kwikkers et al, 2003, 2011; van Kemenade, 2009). WHW regulates the Dutch accreditation system (Ministerie van OC&W, 2010). According to WHW accreditation in the Dutch higher education system is defined as the granting of a certification indicating that agreed quality standards have been reached. This certification can only happen after verification and validation done by a group of external peers. An accreditation framework that is linked to international developments in this area is the basis for the work of these peers.

With reference to table 4-2 (section 4.3.2), table 6-4 provides an overview of the main elements of the Dutch accreditation system. During the first accreditation period from 2003 to 2010 the program was the evaluation unit. Each program had to go through an accreditation process and submit a self-study report based on the agreed accreditation framework (Brussee et al., 2005; Douma, 2004, 2009; Kwikkers et al., 2003). Building on characteristics of the former external evaluation period, in many cases the external peer review was done simultaneously for programs in the same cluster or discipline. In such cases, the evaluation report contained general evaluative remarks on this cluster and detailed findings of each program.

Table 6-4 Main elements of the Dutch accreditation system

Main elements	Description
Legal basis	WHW requires accreditation of all programs awarding bachelor and master degrees. Three legal consequences regulated in WHW: government funding, permission to award diplomas, students' scholarship.
Goals	Increased governmental control on quality assurance in higher education; Better information provision for students and the labour market; International recognition and benchmarking.
Participation	Compulsory for higher education institutions wishing to award recognized degrees.
Aggregation level	Program is accreditation unit.
Accreditation body	NVAO
Evaluation agencies	Selected evaluation agencies allowed to assess existing programs, but accreditation decision is made by NVAO. New programs are assessed by NVAO.
Source of Input	Self-study report of the program to be assessed based on the guidelines and standards provided in NVAO accreditation framework.
Review panel	External national and/or international peers that provide an independent and objective judgment of the quality of the reviewed program. Finally they produce a review report.
Site visit	Done by the review panel, consisting of meetings with several stakeholders (management, teachers, students, alumni, representatives of professional field). In addition, documents are analysed and the facilities are evaluated.
Review report	Information needs to be provided on the constellation of the review panel, a summary of the review results, an evaluation based on the accreditation framework, including the findings on each quality standard. In case of a simultaneous assessment of several programs a comparison of these programs and a state of the art description in the discipline need to be added. The review report is made public on the NVAO website.
Focus of results	Summative: Pass or fail of the accreditation test, with limited possibilities for improvement period.

The steps to be undertaken during the accreditation process were the same as the ones in the first period of external quality assurance in the Dutch higher education. A decisive step was however added: the decision of the NVAO to grant the accreditation status to the assessed program. Figure 6-1 illustrates the steps to be undertaken by each program that aims to be accredited by NVAO, which slightly differs between a new and an existing program. In case of a new program, the request for accreditation must be done before the start of the program. A positive result of the quality assessment had to be followed by a macro-efficiency test, which entails that the ministry of education will evaluate the relevancy of the new program for the Dutch labour market. Only after approval, the program can start. After six years the new program will have to go through the same accreditation procedure according to that of an existing program

(figure 6-1). The result of an accreditation process reflects the trichotomy illustrated in figure 4-3 (section 4.3.3), to be elaborated in section 6.6.1.
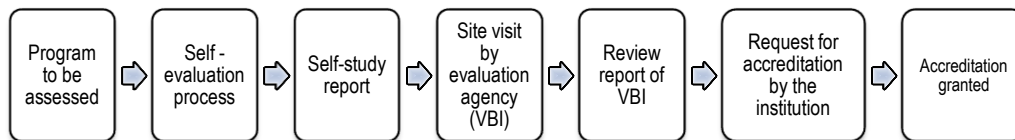
Figure 6-1 Accreditation steps for an existing Dutch program

Not only subsidized higher education institutions had to pass through accreditation processes. For the first time also private institutions were subjected to quality assessment, with the intention to separate the wheat from the chaff. During the past decade this has led to a serious purification of the private higher education sector (Brussee et al., 2005; Douma, 2004; van Kemenade, 2009).

As will be detailed in section 6.6.3, during the second accreditation starting in 2011 period some changes were introduced in the accreditation framework, together with the possibility of an institutional audit.

6.5.2 Accreditation in the Dutch-Caribbean context

In the Dutch-Caribbean countries accreditation originated based on globalization, internationalization and also European trends in the higher education field (Arubaanse Overheid, 2009; Commissie Hoger Onderwijs, 2002; Directie Onderwijs Aruba, 2002). Increased attention to the quality of programs by higher education institutions was also induced by the stringent mandates of the national governments. Accreditation serves several purposes. First, accreditation is considered as an important instrument to guarantee that highly qualified graduates are delivered to the community who can contribute to sustainable socio-economic development. Second, accreditation serves as an instrument for accountability to funding agencies, including the national government. Moreover, accreditation will ensure seamless transfer of graduates to foreign higher education institutions, in particular the Netherlands and USA. Thereby, the endeavour to get accredited became an unquestionable effort in the publicly funded universities in Curaçao, Aruba and St. Maarten.

Consequently, during the past decade the national universities UoC, UA and USM have initiated accreditation processes. Reaching the accreditation status was intended as evidence to prove that they indeed deliver highly qualified graduates and meet international quality standards (University of Aruba, 2004; University of St. Martin, 2011; University of the Netherlands Antilles, 2005a). Furthermore, in the strategic plans of the studied universities attaining an accredited status for their programs was an instrument used to improve the quality of education, and to become more competitive on the international higher education market as well. By doing so, they would also meet the terms according to the agreements made during the 3th tripartite meeting of

ministers of education in the Kingdom of the Netherlands in 2001 (Departement van Onderwijs, 2001). In this meeting the ministers agreed that the higher education institutions located in the Netherlands Antilles and Aruba would have to meet the same accreditation standards set for higher education in the Netherlands. The minister of education of the Netherlands in 2005 officially assigned the NVAO with the responsibility of assessing the quality of higher education programs offered in the Netherlands Antilles and Aruba.

The pressure to be accredited is in the meantime widely felt by the studied Dutch-Caribbean universities (University of Aruba, 2006; University of the Netherlands Antilles, 2006c; 2011b; University of St. Martin, 2011). The national governments would like these institutions to be accredited on a short term, even if this 'obligation' is not yet legally enacted (Arubaanse Overheid, 2009; Commissie Hoger Onderwijs, 2002, 2009). However, despite internal and external environmental drivers that led to the development and implementation of quality assurance within nationally funded institutions for higher education in Curaçao, Aruba and St. Maarten, these small-developed countries encountered practical difficulties in attempting to operate an objective and expert process of peer review in the absence of sufficiently large academic communities to provide objective peers. Consequently, they are highly dependent on international quality agencies, such as the NVAO, that from their side have difficulties mirroring their Netherlands-built accreditation framework to these specific national situations (Isabella, 2011). According to Narain (2004) the progress of accreditation processes is even so hindered by limited resources (financial and human), but also by fragile governments and insufficient political commitment.

Since the WHW is not applicable in the Dutch Caribbean and these countries have no national higher education act, NVAO is not entitled to grant an 'accredited status' to higher education programs offered in these countries. The ministers agreed however, that NVAO still can judge the quality of these programs and grant them with the mark 'positively assessed' which is equal to an accredited status. The programs to be assessed need to go through exactly the same evaluation process as portrayed in figure 6-1. The only difference regards the assessment of the quality of new programs. In contrast to the Netherlands, in the Dutch Caribbean assessment of new programs is done when these programs have already started and no macro-efficiency test is conducted. When a higher education act is introduced in these countries the government can replace the mark 'positively assessed' granted by NVAO with an accredited status provided by the national government. For the sake of this study however, since there is no difference between the mandates of NVAO for Dutch or Dutch-Caribbean programs the mark 'accredited' is indicated for the programs of all studied universities.

6.6 NVAO as the accreditation organization

In 2003 the Flemish government joined the Dutch accreditation system and the Accreditation Organization for the Netherlands and Flanders (NVAO) was established. The NVAO is in charge of accrediting programs in the Netherlands and Flanders, and

as of 2005 also in the Dutch Caribbean. Two accreditation frameworks of NVAO were used during the research period: the first accreditation framework during the period 2003 to 2010 and from January 2011 onward a modified one. Both frameworks are presented below since during the research period one of the cases went through accreditation according to the old framework (UoC), two through both frameworks (HZ and UU), while two had to comply with the quality standards associated with the modified one only (UA and USM). This section contains brief information of the NVAO and a short presentation of its two accreditation frameworks in order to enhance the understanding of the case descriptions in chapters 7 and 8.

6.6.1 Roles, tasks and responsibilities

The NVAO operates as an independent, public accreditation organization with international acknowledgment. NVAO's quality is assured by its membership of ENQA and INQAAHE, the worldwide association for accreditation organizations (www.nvao.net, retrieved September, 2013). Transparency, consistency and objectivity are main features of the NVAO quality assurance approach. Furthermore, NVAO further acknowledges the importance of and respect for institutional autonomy.

NVAO has the following core tasks (NVAO, 2003; 2011). First, NVAO does the verification and validation of the external evaluation of existing programs based on the accreditation framework. NVAO has to verify if all the procedures were executed correctly by the review panel and validates the content of the review report according to agreed standards. NVAO may ask the evaluation agency or the reviewed programs additional questions, request additional information and extra documents in order to validate the review report. NVAO is in charge of granting the official quality certification (accreditation) to those programs that successfully passed through their accreditation process and the validation of the results. In case of a positive outcome of the verification and validation process the accredited status is granted. If the outcome is negative, a limited improvement period can be granted. However, in most cases of negative outcomes the institution withdraws the accreditation request in order to prevent this information from being made public on NVAO's website, potentially leading to harmful consequences for students' enrolment and government funding. In due time, after implementing the recommended improvement this program can re-submit a new accreditation request, provided that the accreditation period did not expire.

Secondly, NVAO also awards 'accreditation' to new programs. New programs are officially not 'accredited', but endure a 'toets nieuwe opleiding' (TNO = evaluation of a new program), also called 'initial accreditation', based on a slightly different accreditation framework. Since a new program has no graduates, this standard is not measured in a TNO, but instead there is attention for the guarantee of the institution that students can finish their program. In this regard the financial potentials of the institution play a determinant role. The results of a TNO can also be positive, negative or probationary, as outlined in figure 4-3.

Thirdly, NVAO has to contribute to the acceptance of the quality of Dutch programs in international context and advises on relevant matters concerning higher education policies to the Dutch minister of education.

The duration of the achieved accreditation mark is six years and must be updated in time in order not to lose the three previously mentioned legal rights in the Netherlands: funding by the government, authorization to issue diplomas and scholarship for students. In the Dutch Caribbean the same accreditation period is applicable, yet no governmental consequences are coupled to the accredited status of programs due to the absence of a national Higher Education Act in these countries.

6.6.2 NVAO's procedures and requirements

The universities located in the Netherlands were involved during the development of the first accreditation framework, so as to ensure that it matches the contextual circumstances. The context in which these universities operate was one of the guided principles during this developmental process. Furthermore, while developing this accreditation framework due account was taken of the expertise of other quality assurance and accreditation frameworks (Douma, 2004, 2009; Van Kemenade, 2009; VSNU, 2001). In principle the Dutch accreditation framework is basically the same for all programs. However, a differentiation has to be made due to the 'double binary' higher education system (table 6-3). So, the quality standards differentiate between the four types of programs: professionally oriented bachelor, academic bachelor, professional master and academic master.

The first accreditation framework consisted of six subjects: intended learning outcomes, curriculum, staff, services and facilities, internal quality assurance and the achieved learning outcomes (NVAO, 2003). Each program that wants to be accredited must prove that it meets these quality subjects, divided over 21 standards. Each subject consists of at least two standards. For instance, the intended learning outcomes need to reflect national and international demands in the professional field and be oriented according to the desired orientation (academic, professional) and level (bachelor or master); the quality and quantity of the staff has to be sufficient to guarantee the quality of the program. The six quality subjects are interconnected and interrelated. For instance, the curriculum needs to make it possible for the students to achieve the intended learning outcomes. The curriculum also needs to be offered by qualified staff using correct resources.

A self-study report has to be drafted by the program according to the 21 standards indicated in the accreditation framework. This report is validated and verified during the site visit done by an external audit panel. The results of their quality review are presented in a review report. In case these are positive, the program submits it to the NVAO, which takes the ultimate decision of accrediting or not (figure 6-1).

6.6.3 Changes in the accreditation system

At an early stage of the implementation of the first accreditation system, many complaints arose concerning its operational organization, complexity and focus. Some of the complaints were: increased number of personnel in charge of quality management instead of academic staff, resistance of the academic staff due to limited attention on content of the program being reviewed, bureaucratic approach, too much power of the review panel, tight framing of the panels of experts providing less space for particular professionalism of each member, unclear role of inspectorate versus that of NVAO (Douma, 2009; Kwikkers et al., 2011; Inspectie van het Onderwijs, 2009; Staatssecretaris van Onderwijs, Cultuur en Wetenschap, 2005; van Kemendade, 2009).

These criticisms and objections directed the initiation of a widespread national discussion on the first Dutch accreditation system. The starting point on these debates was however, that the first cycle of accreditation has to be completed before any new forms of accreditation become in force. In addition, the new set up must seamlessly connect to the existing system of registration, funding and accreditation of programs. The aim was simplification of the accreditation system, meaning simplify the process and information load and increase meaningfulness of the process for the programs, professionals and students. Other elements indicated that had to be taken into account during this modification process were the introduction of an improvement period, possibility for institutions to do institutional accreditation and encouragement of expansion of programs, and in case of new programs reversing the order of quality assessment and macro-efficiency test.

All stakeholders (higher education institutions, NVAO, evaluation agencies, national students' organizations, and employers' organizations) were involved in the development process of a modified accreditation system. As of January 2011 this new accreditation framework with adapted standards and criteria was implemented in the Netherlands, with the following new elements (Douma, 2009, Kwikkers et al., 2011; NVAO, 2011):

- Possibility for higher education institutions to do an institutional audit, to be conducted only by NVAO;
- Following positive assessment of the institutional quality, limited program evaluation with more attention for the substantive assessment of the program;
- Assessment of new program (initial accreditation) only to be conducted by NVAO in contrast to the first accreditation cycle where also evaluation agencies could do this job;
- Modified accreditation framework: seven quality subjects divided over 16 standards instead of six quality subjects with 21 components;
- Increased attention on formative and summative assessments of the students' level (testing and examination) during and at the end of the program;
- A new program to be funded by the national government has to do the macro-efficiency check before going through an accreditation process.

The main elements of the Dutch accreditation system described in table 6-4 remain basically the same. The largest change is the possibility to do an institutional quality

assurance assessment, which can be considered as the major difference between the first and second Dutch accreditation cycle. An institution can choose between institutional audit, followed by limited program evaluation (focused on three, broad standards) or an extensive program evaluation (16 standards). Finally as of January 2011 the new Dutch accreditation system is organized according to the flow chart portrayed in figure 6-2.
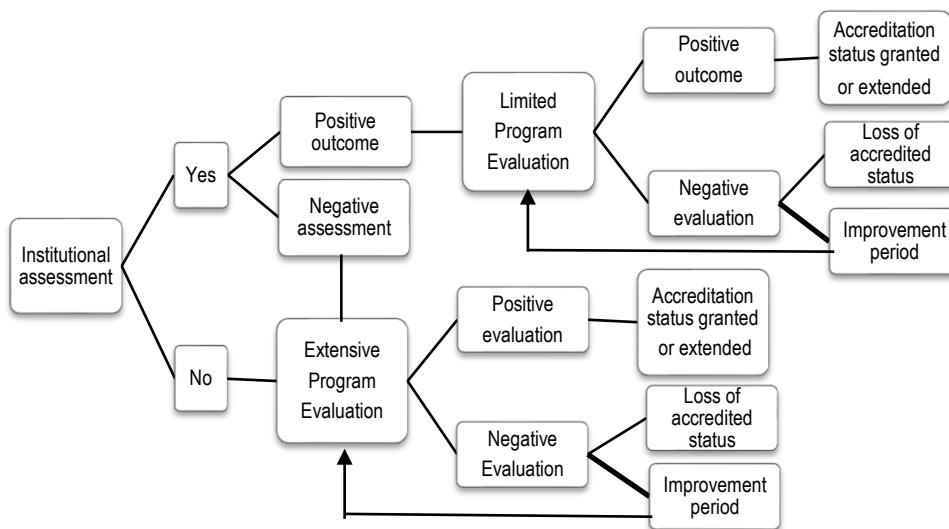
Figure 6-2 The new Dutch accreditation system

An important requirement for obtaining a positive assessment for the institutional quality assurance assessment is that the institution has to demonstrate to have a stringent internal quality assurance system in place, based on a broadly supported vision of the quality of its education and the development of a quality culture (NVAO, 2011a, 2011b, 2011c). The institution has to prove that it systematically improves the quality of its programs wherever required. Furthermore, the institution has to have an effective organization and decision-making structure with regard to the quality of its programs, which clearly defines the tasks, authorities and responsibilities and which encompasses the participation of students and staff. So, the institutional audit is all about the internal system of quality assurance and the quality culture at all levels within the organization.

The stakeholders, in particular the higher education institutions expected that for a long period of time the Dutch higher education arena will have institutions with and those without institutional audit. After the introduction of this modified system however, all academic universities have chosen to do the institutional audit and the great majority of the universities for applied science made the same choice. This choice was motivated by several reasons: the projected lighter administrative burden, the conviction of the existence of a solid internal quality assurance system, and the expectation that the limited program assessment will be more focused on content and

therefore less resisted by the teaching staff. It is still to be seen if this will be indeed the case. In 2012 the institutional audits started and Utrecht University was one of the first universities to be positively assessed (NVAO, 2012). HZ also decided to go through the institutional audit. In contrast, the UoC decided to continue with extended program evaluations, since at institutional level no internal quality assurance system is in place yet (see chapters 7 and 8).

6.7 Conclusion

The national context of Curaçao, Aruba and St. Maarten has several similarities, but also some major differences. They are located in the Caribbean geographic area and with an autonomous political status in the Kingdom of the Netherlands. These countries are economically highly dependent on the tourism sector as main financial revenue. The Dutch Caribbean are considered as SIDS-countries with a population of less than 150.000 citizens, however based on their GNI per capita of around $20,000 they can still be compared with industrialized countries.

Curaçao, Aruba and St. Maarten are multicultural and multilingual societies. These countries faced widespread migration growth since they are attractive for inhabitants of surrounding Caribbean islands. The ability of much of the population to communicate in four languages also contributes to encouraging outsiders to become part of these communities.

Even though the Netherlands Antilles ceased to exist in 2010, there is still a strong political and social relationship among the different countries as part of the Kingdom of the Netherlands. Also the educational policy is still highly influenced by developments in the Dutch educational system, though this bond has been loosening up during the past decades.

The three Dutch-Caribbean universities, UoC, UA and USM, can be considered as small or even very small universities, mostly funded by their national government. As relatively young universities, with less than 40 years of existence, they profess similar roles and goals with regards to their contribution to the national sustainable socio-economic development and work towards the mission to create future leaders. Their political, economic, socio-cultural and educational context has an impact on their possibilities and limitations. Compared to the Netherlands, all the educational and economic parameters demonstrate that the Netherlands is far more developed then the Dutch-Caribbean countries.

Due to the opening up of the higher education market worldwide, an increasingly international environment and the European harmonization process, in the Netherlands the need was created for an external, independent evaluation of higher education programs based on agreed quality standards. Consequently, the Dutch government in its aim to guarantee competitiveness at national and international levels introduced in the mid-eighties an external quality review system in higher education, followed by an accreditation system at the beginning of this century, which is coupled to legal consequences. The introduction of a national accreditation system in the

Netherlands intended to convert the commitments made in the Bologna process into concrete actions and to follow international trends. The accreditation system was a follow-up of the existing external review system and strengthened the emphasis on quality assurance and quality improvement in order to enable (inter)national comparison and competitiveness. When looking back at the general characteristics of external review processes, accreditation processes in particular, as outlined in chapter 4 and comparing them with the NVAO's requirements no differences could be detected in the focus and methods of quality assessment.

The process of systematic external quality review of UoC, UA and USM is relatively young (less than 10 years). During the past decade these universities started their accreditation processes in order to attain the accredited status for their higher education programs by NVAO too. The accredited status is considered as an important tool to prove to the world that the quality of the programs meets international standards. By doing so, a more competitive position in this globalized universe could be achieved. In this process they are expected to tie down the global demands to the local possibilities.

In the meantime in the Netherlands the second accreditation period has been introduced, aiming to continue to compete worldwide with high quality higher education programs. The Dutch-Caribbean universities follow the Dutch accreditation trend. At UoC most programs successfully went through their first accreditation cycle, while UA and USM are in the run for achieving the first accredited status. While doing so, several internal organizational factors seem to have an impact on the progress and outcomes of the accreditation processes. In the next two chapters the accreditation processes of the five studied universities are described according to the identified independent variables in the research model, indicated as potential internal influential factors.

7   The Dutch-Caribbean universities

In this chapter the accreditation processes of the three Dutch-Caribbean universities are described: University of Curaçao (UoC), University of Aruba (UA) and University of St. Martin (USM). These case descriptions are presented according to the five variables included in the research model (figure 5-2), and their 17 indicators (figure 5-3).

Each case description starts with some institutional background information to inform on the internal organizational context in which the university operates, in addition to the external national context that has been presented in chapter 6, which provided important background information about Curaçao, Aruba and St. Maarten, the home country of the studied Dutch-Caribbean universities. This additional information contributes to deepening our understanding of the institutional context and its possible implications for the embarked accreditation processes. Then, the accreditation processes undertaken by each university are outlined. First, the dependent variables are explained. Since there are major differences in the phases of the accreditation processes between the three studied Dutch-Caribbean universities, in this part of each case description the profundity and extent of the described elements vary.

The largest part of each case study is reserved for the presentation of the five independent variables and their possible impact on the university's accreditation processes: organizational structure, leadership and management style, quality culture, available resources and internal quality assurance policy. The description of these five variables is supported by the 17 indicators. The case descriptions are based on data generated during 2009 to 2012.

Three sources of evidence contributed to the collection of data for these case studies: document analysis, observation (participatory observation at UoC and direct observation at UA) and semi-structured in-depth interviews. Every effort has been made to present the variables as independently as possible. However, the link between them is in each case clearly noticeable.

Each case description concludes with a short within-case analysis to be used as input for the within-group and across-group comparative analyses in chapter 9.

7.1 University of Curaçao

The University of Curaçao (UoC) emerged in 1979 as a merger of two higher education institutions. The government of the Netherlands Antilles at that moment in time aimed to establish a national university for all islands of this country[26].

The section starts with some institutional background information to provide a complete picture of this university's particularities. Then, the accreditation processes of UoC are presented according to first the dependent variables, followed by the independent variables, based on an analysis of a wide variety of institutional and faculty documents, participatory observations during the whole research period and ten in-depth interviews conducted in July 2012. The interviewees were institutional leaders, deans, department heads and quality officers at institutional or faculty levels. In this group all organizational levels were represented, thereby experiences during the accreditation processes could be specified from different perspectives.

In 2009-2010 an exploratory pilot case study was conducted in UoC to determine the feasibility of this study (Appendix 1). This case description includes the results of this exploratory case study and also the additional collected data in 2011 and 2012.

7.1.1 Institutional background information

The University of Curaçao has three core tasks: education, research and community service. This university is playing a pivotal role in national capacity building and is therefore primarily directed to meet specific needs arising from the labour market. As a national university, UoC is expected to direct, support, guide, assess and monitor developments in the society, be the initiator and trend setter in crucial societal debates and play a leading ethical role as well (Duits, 2004; Narain, 2004, 2005). Accordingly, the prime focus of UoC is to educate future leaders to contribute to the sustainable socio-economic development of Curaçao.

By the end of 2012 UoC consisted of five faculties, offering 27 programs at the bachelor or master level to students, of which one in Bonaire, as illustrated in table 7-1.

Table 7-1 Overview of UoC programs

Level	Orientation	Curaçao	Bonaire	Total
Bachelor	Professionally-oriented (HBO)	13	1	14
	Academic (WO)	3	0	3
Master	Professionally-oriented (HBO)	7	0	7
	Academic (WO)	3	0	3
	Total	26	1	**27**

Reference date: December 2012

---

[26] At that moment in time the island of Aruba was still part of the Netherlands Antilles. So, UNA/UoC originally had to cater for six Dutch-Caribbean islands: Curaçao, Aruba, Bonaire, St. Maarten, St. Eustatius and Saba.

Since its start UoC has been offering professional (HBO) and academic (WO) programs according to the Dutch higher education system, yet also bachelor and master programs in accordance with the USA system. Several interviewees indicated that this complex educational profile has hampered the development of one institutional educational vision. Furthermore, according to these interviewees UoC needs to gradually become more harmonious in its educational approach in order to secure the achieved accreditation results. Other interviewees contrasted this position by arguing that centralizing and unifying UoC is not possible precisely because of the great differences among the faculties. By the end of the research period some harmonization projects across the university have been initiated in order to improve the quality of the products and services in general and to better meet the quality standards of NVAO in particular.

The UoC has a student population of about 2400 students, mostly coming from Curaçao (85%), and aims to reach 2500 students by 2017 (University of the Netherland Antilles, 2011d). All interviewees indicated that to reach this aim offering accredited programs is an essential requirement.

The historical output of UoC has demonstrated considerable progress in achieving the original goal of becoming a national 'capacity builder'. During its existence more than 2000 diplomas have been awarded at the bachelor or master level, with its graduates occupying important positions in the private sector as well as in public organizations on the island or internationally. Many graduates have also successfully continued further study abroad (Isabella, 2011).

Besides its focus on delivering highly skilled human capital as national capacity builder, UoC has lately paid increased attention to its international potentials, partly because NVAO also assesses the extent of 'internationalization' of a program. Document analysis illustrates that sustained attention has been paid to the further development of collaborative relationships with regional and international institutions to further assure that the quality of its programs meets international standards (Duits, 2005; Narain, 2004, 2005; University of the Netherlands Antilles, 2005a, 2011d).

Responding to both national and international demands, UoC's strategy is to remain abreast of European and Dutch developments in the higher education field, while ensuring that an optimal number of secondary school students proceed to tertiary studies and eventually become graduates equipped with the tools necessary to support the attainment of national goals. Obtaining an accredited status not only helps UoC to achieve both of these objectives, but also provides UoC with a more stable competitive position, needed to survive in the context of a small island with divergent providers at higher education level. In addition, UoC will also acquire a more competitive position on the international higher education market.

7.1.2 The dependent variables

This section contains an elaboration on the two dependent variables with regards to UoC. First, the start of the accreditation cycle is described, followed by an outline of the different steps undertaken. At the end the achieved accreditation results are presented.

Start of the accreditation processes

In the years before the start of this millennium the three existing faculties of UoC put attention on the quality of their educational programs. However, this was not done in a systematic nor structural way. During the 1990s peer reviews were indeed conducted, following the same trend taking place in the Netherlands. The year 2000 can be however considered as the great breakthrough regarding the improvement of quality and students' output in this university (University of the Netherlands Atnilles, 2001). The absence of a system for quality assurance, among other challenges, urged the university to start a profound quality improvement process (Commissie Totaalbeeld UNA-problematiek, 2000). In that same year Ernst & Young also conducted a study on the effectiveness and efficiency of the activities of the university (Ernst & Young, 2000). In their report they indicated that at organizational, personnel and financial levels urgent changes were needed in order for the university to become more effective and efficient.

Based on these two reports considerable pressure has been exerted on UoC to improve its quality in order to meet national expectations as well as international demands. It thus became imperative for the UoC to obtain evidence of the level of quality of its programs. Therefore the institution initiated its first accreditation process in 2003 (University of the Netherlands Antilles, 2003, 2005a, 2005b, 2006c).

In addition to the external pressure, all interviewees were convinced of the importance of attaining an accredited status, mentioning the following accreditation objectives: to improve and ensure the quality of the programs; to deliver highly qualified graduates; to prove that the programs meet internationally set quality standards; to reclaim the image and position of the university in the local community; to gain credibility in the outside world; to increase the student population; to demonstrate that the provided quality level is equal to that in the Netherlands and therefore obtaining a more competitive position; to comply with demands of collaborative partners, particularly those in the Netherlands; to guarantee smooth transfer of graduates to further study abroad and to meet the terms of funding agencies, e.g. the national government.

In the year 2000 a profound reorganizational process started in UoC, resulting in a new vision encapsulated in the motto: 'Pursuing excellence in values, knowledge and skills' (Universiteit of the Netherlands Antilles, 2001). From that date the focus was and still is on quality improvement of the programs in order to create future leaders for the community by offering accredited educational programs of high quality (University of the Netherlands Antilles, 2001, 2005a). The vision and mission, stated in UoC's latest vision document also maintain this course in order to contribute to further sustainable development of Curaçao (University of the Netherlands Antilles, 2011d). The following strategic goals that have been set for the period 2012 – 2017 are relevant for this study:

creating an unambiguous governance structure, accrediting all educational programs and operating with a balanced budget. Moreover, according to this policy paper UoC also aims to gradually operate more independently of government funding and intends to become an internationally recognized and respectable research centre focusing on the further development of the country Curaçao and the Caribbean region as well.

Steps undertaken during the accreditation processes

The UoC has gone through an incremental approach to reach the accredited status for all its programs, guided by an all-encompassing quality improvement process. Originally this aim was meant to be achieved in 2007 (University of the Netherlands Antilles, 2005b, 2006b, 2006c). The appointment of a new rector in 2000 with the mandate to profoundly reorganize the university and enhance its quality was the first step in the effort to improve the quality of its managerial, educational and operational processes. Furthermore, to give firm impetus to the start of the quality improvement process, in September 2002 a new staff member, also called the 'institutional quality manager', was appointed in charge of all institutional educational and quality issues. The roles and tasks of this manager were to initiate, organize, facilitate, support, coordinate and monitor the accreditation processes, with the focus to promote a continuous quality improvement environment within the university, finally aiming to achieve the accredited status (University of the Netherlands Antilles, 2006c). This 'manager' was responsible for a smooth course of the accreditation processes to enable positive results. In addition, before submitting the self-study reports by the rector to NVAO, this manager's approval was needed. Figure 7-1 illustrates the steps to be taken during each accreditation process. To initiate the accreditation period at UoC an accreditation scan of the programs was conducted in 2003, followed by a baseline study for the support departments in 2004 (University of the Netherlands Antilles, 2003, 2004b). Then, from 2004 onward a wide range of actions were implemented geared towards quality improvement at all institutional levels.

Figure 7-1 Steps undertaken during the accreditation processes at UoC

The self-evaluation process aims to review the program thoroughly according to NVAO's quality standards and if deemed necessary, additional actions for quality improvement were undertaken. At institutional level manuals for these processes were written to guide the drafting of the self-study report at program level (University of the Netherlands Antilles, 2008, 2009c). Depending on the results of the baseline study,

related to the amount and the intensity of improvement actions to be done the timeframe of the self-evaluation processes was determined.

According to the internal quality assurance policy it is mandatory for each program to go through a trial site visit to prepare for the official one (University of the Netherlands Antilles, 2006c, 2011b). Review panels, consisting of national and international educational experts and peers, were entrusted with the trial site visits, which were organized and executed in exactly the same way as a NVAO site visit, so that each participating group could be trained and build experience in how to successfully comply with all the required tasks involved in such visits. Each review panel wrote a report focusing on all pending improvements, content wise and at operational level. Trial site visits usually took place about 6 months before the site visit. Most times the trial site visit was done for a group of related programs, since this is also how most official site visits took place. The official site visit concludes the accreditation process.

The timeline for each process depends on the amount and the intensity of improvement actions needed. Several years passed by before the first trial site visits took place. An extensive list of quality improvement actions had to be implemented before the university's programs were ready for external quality review. At the beginning of the accreditation period the deadline was set for the end of 2007. However, after doing the baseline studies in 2003 and 2004, which resulted in an extensive list of quality improvement actions to be implemented by all programs, it soon became obvious that this deadline could not be met and since then the deadlines have been constantly postponed.

According to a majority of the interviewees, the main reason for this delay is the lack of sufficient human capacity to be able to deal with all the expected additional tasks in time. They further observed that the fact that it was the first time the programs offered at UoC were going through an accreditation process had influenced its progress and the determination with which the improvement activities could be conducted. Lack of experience and expertise with external evaluation processes also led to postponements of the (trial) site visits. In addition, the interviewees pointed out that changes of deans and insufficient additional funds have led to postponement in the accreditation processes.

The first site visit took place in December 2009. During site visits a national expert of the involved professional field has been added to the NVAO panels to ensure that the particularities of the national context are taken into due account in the evaluation of the quality level delivered by the programs.

The achieved accreditation results

As illustrated in table 7-2, by the end of 2012 20 (83%) of the 24 programs that went through an accreditation process had received the accreditation mark by NVAO, including one in Bonaire. The one that did not achieve this goal is in the process of curriculum modifications and organizational adaptations in order to re-submit its request for quality assessment. Three programs received probationary accreditation to

be re-assessed in 2014. With these achieved results, UoC did fulfil her accountability obligation according to the performance indicators in her funding agreement (Antilliaanse Overheid, 2010). In addition, according to the draft Higher Education Act for Curaçao, this university has also met the most important goal for its further existence: obtaining the international accreditation status for its offered programs (Commissie Hoger Onderwijs, 2009).

Table 7-2 Overview achieved accreditation results of UoC

Educational programs	Accreditation granted	Probationary Accreditation	Permission for Improvement Plan	Accreditation not obtained	Accreditation process to be started
27	20 (74%)	3 (11%)	1 (3%)	0	3 (11%)

Source: Department of Quality Assurance UoC. Reference date: December 2012.

Participatory observation and the in-depth interviews indicate that going through accreditation processes has led to many beneficial spin offs for the UoC. A majority of the interviewees are convinced that the ongoing character of an accreditation process did and will have a positive influence on quality improvement. They specified that UoC is going through a great developmental process and that major quality improvements have been realized thanks to the accreditation process, e.g. the content of the programs, the involvement of stakeholders, a more professional approach of the managerial, educational and operational tasks, upgrading of the quality level of the facilities and improved relationship between faculties and facilities. In contrast, the interviewees were concerned about the rapidly changing accreditation demands of NVAO, including more severe quality standards, wondering if they could continue to meet these standards.

The second accreditation cycle for most UoC programs will take place during 2014 – 2018, whilst all recently started programs still need to go through their first accreditation process. As could be observed, by the end of 2012 no recognizable activities concerning the second accreditation period had been started yet.

7.1.3 The independent variables

In this section the five independent variables in the research model are discussed related to UoC. This information was gathered through participatory observation from 2009 till 2012, analysis of a variety of institutional and departmental documents and ten in-depth interviews.

7.1.3.1 The organizational structure

Organizational chart

The University of Curaçao is regulated by two official documents: the "Landsverordening University of Curaçao" (LUoC), the legal Act for UoC, and the "Bestuurs- en Beheersreglement (BBR), the internal management and administration regulations (Antilliaanse overheid, 2004; University of the Netherlands Antilles, 2006a). The BBR regulates the governance, management, and organization of the university, which can be internally modified as long as it is in line with LUoC. The organizational chart according to the LUoC is presented in figure 7-2.
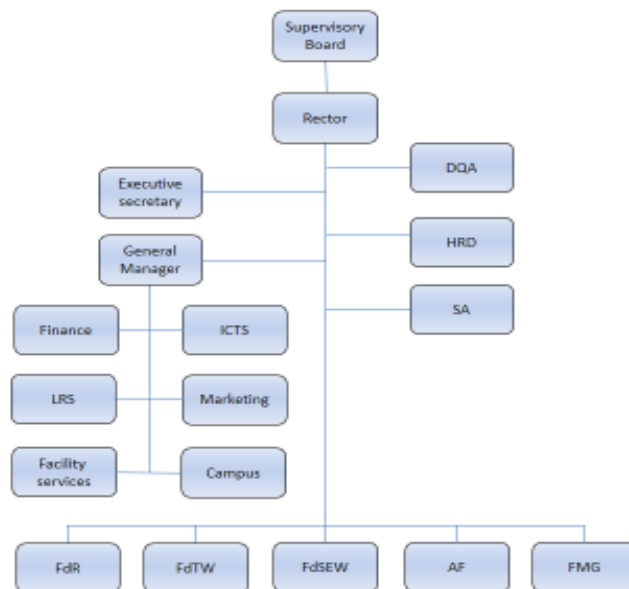
Figure 7-2 Organizational chart of UoC

The minister of education appoints the members of the Supervisory Board and they appoint the rector for a period of four years; re-appointment is possible. The rector has the ultimate responsibility for leading the university. The management structure and operational procedures of the faculties are legally regulated by a faculty regulation[27]. The dean is in charge of the faculty's management, has the responsibility for the further development and implementation of the institutional policies at

---

[27] The faculties of UoC are: Faculty of Law (FdR), Faculty of Engineering (FdTW), Faculty of Social Sciences and Economics (FdSEW), General Faculty (AF) and the Faculty of Social and Behavioral Sciences (FMG). The support departments are: Library and Research Services (LRS), Finance Department, ICT Services (ICTS), Facility Services, Marketing, Campus & Mensa, Department of Quality Assurance (DQA), Human Resource Department (HRD) and Student Affairs (SA).

faculty level and the distribution of the assigned resources. Deans are also responsible for the accreditation process of the faculty's programs and the implementation of a system of quality assurance. The dean reports to the rector, who decides on the length of the appointment of each dean (Antilliaanse Overheid, 2004).

UoC has two types of support departments: three staff departments, of which the managers report to the rector, including the Department of Quality Assurance (DQA) and six departments as part of the Department of General Affairs, headed by the general manager with its team of department heads. The general manager has the final responsibility for the financial and operational processes within the university.

Decision-making structure

The LUoC dictates a one-head top management, so all institutional decisions within the framework of quality management and accreditations ought to be formally taken by the rector (Antilliaanse overheid, 2004). In the daily practice however, the managerial power is habitually decentralized and lies mostly in the hands of the Council of Deans, consisting of all deans and chaired by the rector. As could be observed during the research period and affirmed by a majority of interviewees, deans are quite powerful and without their support implementation of institutional management decisions is mostly doomed to fail. Several interviewees argued that on a regular basis they could notice that during decision making processes deans lose sight of the benefits for the institution, while focusing mostly on the needs of his/her faculty, regardless of the consequences for the university. According to these interviewees, deans showed great resistance to central leading and act based on a less efficiency-based thinking. This behaviour was thought to be due to fear of loss of autonomy and authority at the faculty level. In contrast, most interviewed deans claimed that more authority should have been granted to the Council of Deans during the first accreditation period, as they argue that all decisions must be at least primarily supported by them. The interviewed deans criticized their lack of apt involvement in the decision making process. According to these interviewees the Council of Deans should have been granted even more decision making responsibilities. Even though the institutional quality manager regularly attended the meetings of the Council of Deans to inform and discuss with them the progress of the accreditation processes, they insisted that their role and involvement during these processes should have been more extensive. These line managers can therefore be considered as important stakeholders in the decision-making structure.

The institutional policies are actually set collectively and are expected to be carried out in compliance with the decisions (University of the Netherlands Antilles, 2006c). During the research period it was observed that not all decisions taken concerning the implementation of quality improvement activities geared towards accreditation were implemented as agreed upon. Faculties were granted relatively substantial space for self-initiative and deans could deviate from agreed procedures, rules and regulations without any intervention by the rectors. This leadership style has led to diverse and contrasting approaches in the accreditation processes among the faculties, even within

a faculty if there was a change of dean. As a consequence, the interviewees have indicated that the university cannot be considered as a tight knot, but still consists of loosely coupled units with little interconnection. They further commented that despite UoC's 35 years of existence there is no internal cohesion and solidarity within the university. "Every man for himself and God for all of us" is a quote formulated by one of the interviewees to illustrate the discrepancies and dissimilarities within the university, also with regards to addressing of accreditation processes.

Thus, as most interviewees assert, instead of a hierarchical structure as portrayed in figure 7-2, in practice UoC has a collegial decision-making structure. So, although according to LUoC the Council of Deans is a representative advisory body, in daily practice it actually takes the position of a management team.

The faculty council, consisting of academic and non-academic staff and representatives of the students at faculty level, has the final responsibility for the programs offered at faculty level. This body is chaired by one of the academic staff members and the dean is not included in the constellation (Antilliaanse overheid, 2004).

The institutional quality manager was and still is in charge of the internal and external quality assurance process at institutional level and during the past decade was granted the huge responsibility to manage the accreditation processes. Through the years however, UoC became aware that this could no longer be the responsibility of just one employee. The sudden emergence of the Department of Quality Assurance (DQA) however, was due to some personal conflicts and was not founded on a university's quality vision. By the end of the research period (December 2012) the institutional quality manager, who became the manager of DQA, was still the only person at institutional level in charge of external evaluation processes, NVAO's accreditation in particular.

By the end of the research period DQA consisted of three employees: the department head, a quality assurance officer, mostly responsible for internal quality research activities, and a legal advisor. The driving force behind the accreditation processes lies within this department. The manager of DQA coordinates the accreditation processes, monitors the time frame, recruits external experts, provides the necessary training, support the development of the self-study reports, allocates financial funds, informs the rector and Council of Deans on the progress and challenges and encourages them to take timely decisions. In addition, she is the liaison with NVAO and chairs the Quality Team at institutional level, consisting of the program managers, also called quality officers, at faculty level. Furthermore, DQA issues an information bulletin regarding internal and external development in quality assurance field and supports all faculties and departments to facilitate the quality improvement processes in order to reach the accreditation goal.

During their weekly meetings, the general manager informs the department heads of the institutional decisions including those concerning accreditation and their implications for the support departments. Interviewees at this level observed that the two years of vacancy of the position of the general manager has hampered this

communication channel. Consequently, during the accreditation processes these managers were highly dependent on information received from the institutional quality manager (process-oriented) and the dean (content-oriented) of the particular educational program going through that process. Depending on the dean, the information flow and required participation of the department heads were judged more or less positively.

As shown in table 7-3, in order to inform relevant stakeholders on the progress of accreditation processes UoC has several formal meetings in place.

Table 7-3 Formal meetings at UoC

Meetings	Frequency	Stakeholders	Topics addressed
Supervisory Board	Biweekly	Representatives of political parties as part of the governmental coalition	Internal and external developments relevant for the functioning of the university.
Council of Deans	Biweekly	Rector and deans	All institutional developments and proposed decisions, before the rector takes the final decision, including plans and proposals concerning quality improvement and accreditation.
Faculty Council	Depends of the faculty	Academic and non-academic staff and representatives of students	All developments at faculty level and decisions (to be) taken by the dean.
Managers' meeting	Monthly	RM, general manager, deans and department heads	Institutional developments and proposed decisions, including issues regarding quality assurance and accreditation.
Quality Team	Monthly	DQA and program managers at faculty level	All developments in the field of quality improvement and accreditation, sharing of information between the faculties and where possible, focus on institutional alignment.
Department of General affairs	Weekly	General manager and department heads	Information on institutional and departmental issues and the implications of decisions taken by the rector, supported by the Council of Deans with consequences for these departments, including the improvements needed to be implemented in order to meet accreditation standards and to facilitate the accreditation processes at faculty level.

7.1.3.2 Leadership and management

Role of institutional leaders

UoC does not operate fully independently of political involvement, since the members of the Supervisory Board are appointed by the minister of education and are representatives of the political coalition. A great majority of the interviewees stressed the consequences of this political involvement, in particular related to the appointment and dismissal of institutional leaders and hence the institutional managerial instability of the past decade. Changes in the governmental coalition often resulted in changing the rector and his/her term. During the period 2006 to 2012 five different rectors were in charge of leading the university; most of them stayed in the position for about 1

year[28]. Most of the dismissals were based on professional and even personal disputes between the Supervisory Board and the particular rector.

According to LUoC the rector is in charge of the daily management of the university at the institutional level. Many interviewees stressed that the fact that UoC has been managed by so many different rectors in a short period of time has impeded sustainability in institutional leadership, which according to them has hampered institutional stability and development. There was no consistency in decision making at the institutional level and this caused major instability. This observation was one of the main grievances of the interviewees while addressing this indicator during the interviews. Each new rector started a new process to formulate a new (own) strategic plan, aiming to make a difference in leading the university to achieve more organizational success. Yet, their term was too short to finish this developmental process. Quality needs stability, as many interviewees proclaimed, and as long as there is no stability in institutional leadership, developing the university to a quality level required to attain and maintain accreditation remains a great challenge for the university.

Interviewees at faculty level complained further that rectors should have been more involved in the accreditation process at this level since according to LUoC they are finally accountable for the quality of the university. They further criticized the fact that the involvement of rectors in the accreditation processes was from a distance and mostly directed to ad hoc problem solving, not focusing on the development of the university, caused mostly by the short term of the rectors' appointment. They agreed that for any rector to be able to lead the university properly and add value to an accreditation process, a leadership period of at least four years is imperative.

The interviewees affirmed however that all rectors were committed and supported the accreditation processes to enable the achievement of the accredited status for the programs, yet from a distance. Participatory observations demonstrate that their focus on accreditation was diverse; some were more closely involved, paid special attention to accreditation and took centralized decisions, including lobbying for and receiving priority funds for accreditation, while others left much space for variety across faculties, resulting in a less coherent quality improvement approach at the various university levels, diverting from the guidelines in the quality policy plans. Despite these diverse actions none of the rectors ever intervene. The continuous extension of the accreditation time frame by the deans reflects one of the consequences of this differentiated quality management approach at the university level.

All rectors granted the institutional quality manager with extensive responsibility to manage the accreditation processes, which according to the interviewees was the constant factor that consistently pushed the progress of these processes. Due to the unstable institutional leadership most of the management strategies and a wide range

---

[28] In six years' time five different rectors were appointed: in September 2006, in December 2008 (the president of the Supervisory Board acted as interim rector), in April 2009, in June 2010, and an interim rector in August 2011, who was officially appointed in October 2012.

of managerial interventions related to the progress of the accreditation processes were initiated by the institutional quality manager and not by the rectors. Most of these strategies were not based on a well-formulated and widely supported quality vision, but were oftentimes implemented due mostly to sudden and unexpected situations merely to solve particular problems, reflecting an ad hoc leadership and management approach.

According to a majority of the interviewees the role of the rector did not have any added value during the accreditation processes. It was mainly the institutional quality manager who has guided this process, coaching, facilitating and supporting the deans. Conversely, both interviewed rectors indicated that there were insufficient tools available to lead UoC properly and direct quality improvement and accreditation efficiently. They pointed out that lack of funds and of human resources were the main constant struggles during their leadership period.

Management at faculty level

Deans are appointed by the rector after consultation with the faculty council (Antilliaanse overheid, 2004). At faculty level deans are ultimately responsible for the quality of the programs. With regard to the accreditation process, most deans have played a prominent role. However, as was the case with the rector during the research period, the management styles of the deans varied, which was reflected in the role they played during the accreditation process at faculty level. The extent of their involvement varied. Some deans can be considered as the steering officers at faculty level as they were highly committed to reach the accreditation goal by being to a great extent involved in every aspect of the accreditation processes. These deans were highly engaged in the planning, organization and coordination of each accreditation process within their faculty in close cooperation with the institutional quality manager. Other deans were merely participants, leaving their program manager and even the institutional quality manager with full planning and control tasks, and major responsibilities. There were deans who wrote the self-evaluation report with barely any consultation with their faculty staff, others did involve the staff at every step that was taken; others hired external experts to do this job and were only involved at the end of this developmental process. Due to the diverse managerial approaches of the deans differences between the faculties could be identified regardless of the achieved results.

The extent of involvement linked to the management style of the deans is one of the many contrasts within the university as will be revealed in the remaining sections of this case description. We can conclude that the rector did not play an important role in leading the accreditation processes, but the deans supported by the institutional quality manager did. The progress and eventually the obtained accreditation results at faculty level have reflected the extent of involvement of a dean during the accreditation process and his/her particular management approach.

7.1.4.3 Quality Culture

Care for quality

As could be observed and affirmed by the interviewees, during the past years within UoC the focus has been on the achievement of accreditation and not really on the development of increased quality awareness. An often heard statement during the research period was: "Tell me what is needed to reach for accreditation and I'll do it". One of the interviewees described the attitude of many colleagues as "Let's do just what is necessary for accreditation".

Participatory observation also showed that quality assurance and accreditation have been used as synonyms by most internal stakeholders, considering accreditation as a proof of the existence of a quality culture. Even though going through the first accreditation process has largely contributed to initiating quality awareness within the university, the required level of quality awareness needed in order to work consciously on continuous quality improvement as demanded by a PDCA-cycle approach has not yet been reached (University of the Netherlands Antilles, 2005b). People have become more aware of quality standards and procedures, though the structural implementation of all quality aspects is not yet the case. There are, of course, differences between the various universities' units in the level of quality awareness and implementation, but no institutional harmony could be observed. One of the faculties stands out because of the structural use of a faculty quality team and a quality calendar, based on the PDCA-cycle (University of the Netherlands Antilles, 2010a, 2010b, 2010c).

The constant change of rectors affected the development of a quality culture within the university. In addition, none of the deans succeeded in creating a faculty culture directed towards continuous improvement of the quality of the offered programs. All deans were mainly focused on reaching the faculty goals, disregarding whether these are in line with the institutional ones or any efficiency rules. "Deans fight for their faculty and forget the others", as one interviewed dean observed. But, participatory observation also revealed that the extent of harmony at faculty level varied depending on the management style of the dean. In cases where the deans were more open and received support from the faculty members, more involvement of the staff during the accreditation process was perceived.

As pointed out by most interviewees, one essential lesson the university has learned from the experiences during site visit practices in the period of 2009 – 2012 is that quality improvement should not only be directed towards the attainment of the accredited status anymore as has been the case previously, but should become an integral part of the daily working routine of all units within the university. As one of the interviewed deans formulated, "Attaining the accreditation goal is a milestone, but not the finish line". All interviewees have argued however, that many colleagues still do not realize the implications of continuous quality improvement, not even in order to maintain the accredited status. After achieving this mark they have the tendency to lay back and think that they can wait for about five years to restart the accreditation

process all over again, not realizing that quality issues need to be addressed permanently. One of the interviewees explained this behaviour by posting that "We are so occupied with daily operational activities that little time remains to spend on quality issues". Furthermore, many interviewees have coupled the development of quality awareness with minimal prerequisites that should be in place. According to them, to be able to meet the quality standards and act in accordance with set quality procedures in the quality policy plans, the university needs to have some basic preconditions in place, such as sufficient financial funds, consistency in institutional leadership, appointment of sufficient and qualitative adequate staff, diminished workload of the teaching staff and training of internal stakeholders. "Otherwise it remains a kind of muddling through", was the remark of one interviewee.

The key role granted to the DQA in promoting the development of quality culture has been acknowledged during the interviews. A majority of the interviewees considered the main task of this new department to encourage, support and facilitate quality awareness and control quality performances, provided that this department is sufficiently staffed. The interviewees indicated that, besides this department, more quality tools are needed to contribute to the development of quality awareness, among others the implementation of a system of internal audit, quality improvement as performance indicator for managers and their high level of commitment. They all affirmed that the development of quality culture, based on thorough quality awareness during daily activities should be considered as one of the most important factors in the quality improvement process to be able to maintain the achieved accredited status.

Moreover, many interviewees indicated that the development of quality awareness is a process which will take time. People need to realize that quality issues must become part of their daily routine, not only when accreditation is nearby. A majority of the interviewees argued that quality awareness still needs to be cultivated, followed by the development of an open culture to address quality issues. Now that accreditation has been achieved, the time has come to work systematically towards quality awareness, they further asserted.

Shared responsibility, ownership, cooperation and collaboration among actors

In case of UoC, depending on the management approach of a dean, more or less shared responsibility and ownership could be detected. For instance, in the faculty where a quality team has been installed, consisting of representatives of the various subdivisions, more shared responsibility and ownership could be noticed; the dean was not the one in charge of the accreditation processes but this quality team made the decisions and controlled the progress of these processes. In contrast, in the case of the faculty where the dean did most of the writing of the self-study report independently and without timely involvement of the remaining teaching staff, the sense of shared responsibility and involvement for the accreditation process could not be noticed.

Many interviewees pointed out that the accreditation process was considered a top-down demand and therefore the ownership of this process has not been cultivated by many colleagues. "Not everybody is aware of the importance of quality assurance and

the implications of it", one of the interviewees stated. Without this quality awareness, shared responsibility and ownership are quite difficult to achieve, this interviewee specified. Many of the remaining interviewees affirmed this statement and have indicated that the university needs to focus more on this matter. Management commitment is one of the elements mentioned that will have to play an important role in this endeavour. And creating a sense of shared responsibility and ownership will automatically lead to improved cooperation and collaboration among all involved stakeholders, they concluded.

Participatory observation during many years has revealed the development of the non-academic staff, realizing more and more that their focus has to be directed to support and assist the faculties. Therefore, they cannot act as isolated units anymore, as was often the case in the past. A more interdependent functioning could be observed. Strengthening of the collaboration and cooperation between the faculties and support departments is gradually taking place, although some interviewees pointed out this as a major concern, since there is no well-outlined coordination between the support departments and the core universities' tasks. All interviewees have emphasized this relationship as a quality issue that urgently needs to be improved. The interviewed deans and department heads confirmed that close involvement of various department heads in the accreditation process has contributed to more awareness of their facilitating and supportive role to the faculties and has enhanced the collaboration and cooperation between the faculties and the support departments. Because of the widely supported accreditation goal, during the preparation of the (trial) site visits the utmost was done based on teamwork, which was also acknowledged by the interviewees as one of the prime factors for successfully reaching the accreditation goal. However, there is still room for improvement, as these interviewees voiced.

Commitment of internal stakeholders

During the past years the level of involvement of internal stakeholders has increased and staff members have become more and more committed to realize quality improvement activities in order to reach the accreditation goal. However, as was illustrated previously the focus was on obtaining the accredited status rather than performing systematically according to quality rules and procedures. Nevertheless, most staff members have become more aware of what quality means and were committed to doing the utmost to deliver quality to comply with the NVAO standards.

Almost all interviewees have indicated that there was a high level of commitment by the internal stakeholders to reach accreditation. Many of the staff members were willing or even enthusiastic and often participated actively in the preparatory work towards (trial) site visits; they were willing to invest a great deal of their leisure time in finalizing documents, working long hours and executing additional tasks during the accreditation process to meet the set quality standards. All interviewees were convinced that this high level of commitment was the main reason for the positive accreditation results. Regardless of all stumbling blocks, most faculty teams were

committed to prove internally and externally that they can meet the pre-set quality standards of NVAO.

Interviewees also indicated the development of solidarity within the university. Especially during the site visits, the internal stakeholders joined forces to prove the realized quality of the assessed program(s). "Remarkable is how the organization has put off all troubles and frustration and has grown together to reach accreditation", as one of the interviewees formulated. However, interviewees emphasized that the great challenge is the embedment of quality awareness within the university in order to maintain the achieved accredited status, guided by a high level of quality awareness, reflected in a quality culture. A majority of interviewees pointed out that people want to deliver quality, but the conditions to do so still need to be in place, such as adequate financial and human resources (quantity and quality).

Norms, values, traditions, customs and people behaviour

During the interviews the following aspects were specified as part of the existing institutional norms, values and traditions: enormous freedom and little control; the regular basis that people ask for exemption to the rule; the importance of informal channels regardless of the formal structure; the tenacity to stay in one's comfort zone created by many years in the work they do and the way they do it; thoughts and actions based on limitations, not on problem-solving; fear to show shortcomings and deficiencies mainly based on a panic to lose power, mostly resulting in resistance to participate and to be open; closed culture based on distrust. The small scale within and outside the university has been pointed out as one main reason for the existence of this organizational culture. "Everybody meets everyone everywhere", as one interviewee has described this disadvantage of small scale.

Interviewees consider dealing with professional topics without getting personally involved as a major challenge during work processes, including accreditation processes. Several interviewees described "They take things personally instead of professionally". According to them, this cultural characteristic also affected the progress of accreditation processes.

The impact of these organizational cultural characteristics on accreditation processes differs from faculty to faculty and depended on how the dean dealt with them. If these characteristics were not well taken into consideration the processes towards accreditation were confronted with several challenges, illustrating once more the interaction between the management style at faculty level and the development of a quality culture needed to encourage the progress of accreditation processes.

The process towards accreditation also meant a change in the participants' mentality to more self-exposure. One interviewee noted "In our culture it is not common to tell how good you are, but this is needed to achieve accreditation. Accreditation requires showing how good you are, exhibiting all information needed to prove this and talking openly about the things you are doing well to guarantee quality". This need for a mentality shift was acknowledged by all interviewees. In addition, the characteristic 'fear' as part of the national cultural context has been pointed out by some interviewees

as one of the stumbling blocks during the accreditation process, hindering the development of a quality culture. Furthermore, interviewees also indicated the deans are afraid of losing power and consequently they act in such a way that the involvement of internal stakeholders is not sufficiently stimulated, hindering the development of quality awareness.

Communication channels and interaction among internal stakeholders

At the beginning of the accreditation process a lot of time was invested in distributing information on the implications of such a process in order to raise the quality awareness within the university, including the organization of an international conference on accreditation (University of the Netherlands Antilles, 2006d). Many staff members initially did not agree with this process as they considered it another effort to meet educational standards set in the Netherlands, while according to them the local professional fields were satisfied with the quality of the graduates delivered during the preceding years. Many meetings were spent to convince part of the universities' population of the importance of such a process and the internal and external benefits linked to it. The staff members who believed in the benefits of accreditation processes were highly engaged in them, while the sceptics had a more laid back attitude, although gradually more staff members became committed to reach the accreditation goal. This can also be marked as one of the reasons why the preliminary progress of the accreditation process went really slowly and the set deadlines to achieve accreditation could not be met.

The interviewees confirmed that UoC's community reflects the national context and consequently the same socio-cultural characteristics have been manifested. In small communities the communication is mostly based on friendship and is generally less objective. Also informal communication channels are vital components of the national culture and were characteristic of the UoC. Table 7-3 reflects the many meetings at institutional levels as part of the communication channels within UoC. There are great opportunities for discussion, yet it takes quite some time before decisions are taken due to the diverse approach at all levels and the lack of a feeling of unity at the university. Interviewees emphasized that creating a harmonious culture is of eminent importance if the achieved accreditation results have to be maintained.

As of 2005 a quarterly internal newsletter was published to provide the internal stakeholders with up to date developments on quality assurance and accreditation. During 2008 – 2011 due to work overload of the institutional quality manager this newsletter was not issued anymore. As of October 2011 with the emergence of DQA's this newsletter was issued again.

We can conclude that UoC has no perceptible quality culture, as was confirmed by all interviewees. However, the opinions concerning the level of existence of quality awareness differ among the interviewees: some indicated that within their faculty signs of the presence of a quality culture can be lightly perceived, while others indicated that development of a quality culture should be one of the most important concerns of the university in the coming years. In any case, accreditation contributed in many ways to

start the development of quality awareness at all levels within the university, they further commented. However, a majority of the interviewees was aware of the fact that quality awareness still needs to be embedded within the institution, which in the long run will have to lead to the development of a quality culture at all levels within the university. A prime role in this endeavour has been granted to the emerged DQA.

7.1.3.4 Available resources

As portrayed in figure 7-2, in UoC all support departments are organized at institutional level. According to literature reviewed UoC can be categorized as a resource-poor organization, both with regards to the quantity and quality of the available resources, to be explicated below.

Human resources

By the end of 2012 UoC had about 125 permanent staff members, more or less evenly divided between academic and non-academic staff. In addition, UoC's faculties work with about 300 national and international guest lecturers that do not have an employment contract with the UoC but are mainly involved in providing classes based on their specific expertise (University of the Netherlands Antilles, 2006b). Consequently, to monitor the quality of these lecturers is quite a challenge as they are barely bounded to the university; a challenge that still needs to be properly addressed, as reflected in the research report on this topic (University of the Netherlands Antilles , 2012a).

As mentioned in all reviewed strategic plans of the university, one of the main identified goals of UoC in the human resource area is to enhance its influence on the quality of teaching and learning by reducing the amount of guest lecturers, whilst increasing the number of permanent teaching staff members, aiming also to contribute to a more efficient financial policy (University of the Netherlands Antilles, 2001, 2005a, 2006b, 2011c, 2011d). However, this is a major challenge given the lack of experts in Curaçao, limited financial resources and lower salaries compared to the private sector.

The institutional quality manager, the deans and the program managers were primarily the staff that had to enable accreditation to a successful end. This group was highly supported by external experts, as will be explained later on. Within UoC it is widely acknowledged that the quantity of the permanent staff is by far not sufficient, resulting in highly overloaded personnel. It is believed that introducing guidelines for the workload of academic staff in 2012 would counteract this bottleneck, yet this still needs to become apparent (University of the Netherlands Antilles, 2011a).

As a majority of interviewees voiced, because of the shortage of human resources many long working hours together with outstanding efforts of some dedicated staff members were needed to meet the quality standards while going through the accreditation process. These interviewees emphasized that expanding, reorganizing and strengthening the Human Resource Department with more highly qualified staff members is also required to better deal with accreditation demands in this matter.

Since UoC's programs were going through their first accreditation process, lack of experience with these external quality evaluation processes, but especially deficiencies in the expected working approach according to NVAO guidelines could consistently be observed at this university. Academic and non-academic staff members were not used to operating according to quality standards as was expected by the NVAO. This was particularly obvious with the academic staff who were not used to following certain educational rules and procedures related to quality delivery at international level.

Financial resources

The UoC has an annual turnover of about 21 million Antillean guilders, equivalent to about €9 million, of which more than 60% are provided by the Curaçao government. Other sources of income are tuition fees, research grants, campus fees, contributions and revenues from activities such as conventions and seminars (University of the Netherlands Antilles, 2005a).

Annually the government demands a financial report, an activity report and a report on the achievement of the agreed performance indicators in order to guarantee the funding for the next year. Regardless of the explosive expansion of the student population and the increased number of offered programs, the financial funds UoC has received has remained the same since 2004. This insufficient financial resources has had repercussions for the availability of other resources, such as the expansion and training of personnel, upgrading of infrastructural provisions and implementation of advanced technological and communication facilities.

Interviewees also mentioned the small scale of the island as a limiting factor in finding additional funds to facilitate all quality improvements processes required to attain accreditation. The fact that on a regular basis the country has been confronted with economic challenges and an unstable economic position is also reflected in the budget granted to the university. The received budget has also not been subjected to indexing. Interviewees mentioned this political financial approach as another indication of the importance politicians actually gave to the university.

In 2009 and 2010 some additional funding for the accreditation process was granted to the university from the Netherlands through a cooperative fund to meet the high financial costs involved. The institutional quality manager was in charge of these additional accreditation funds. During the years thereafter, all expenses related to the accreditation process had to be paid from the regular annual university's budget.

Through all the interviews the most common issue was the lack of financial resources. Several times all interviewees mentioned this as a hindering factor during the accreditation processes. "We need more money", was the catchphrase of all interviewees. They all emphasized that the permanent staff at all levels is getting tired of always being told that there are insufficient financial resources to do whatever is needed, content and facility wise. The interviewees further complained that the annually granted subsidy by the government is far less than what is required to run a modern, high quality higher education institution, which is expected to be the prime national capacity builder. This lack of financial resources also has repercussions for the

motivational level of the staff. How much more can the input of staff members be stretched in order to keep the attained quality level was the question asked by a great majority of the interviewees. This has become a serious concern at all university's levels.

Finance is also considered as a barrier for good leadership and management at all university levels. With scarce finances not all the plans and projects can be executed. In addition, many questions were asked by the interviewees with regard to the management of the awarded budget. Money earmarked for accreditation sometimes was used for other urgent purposes leading to major dissatisfaction by some deans and department heads. All interviewees concluded on this indicator that due to scarce financial resources it is difficult to guarantee the expected quality level. The utmost has been done to meet the quality standards demanded by the NVAO. However, if the university's financial position is not addressed adequately on short notice major challenges can be expected, in particular to maintain the achieved accreditation results.

Facilities

The university aims to offer an inspiring learning environment, suitable and adequate for the demands and needs of didactical approaches used during educational processes, as stated in the various self-study reports (University of the Netherlands Antilles, 2009a, 2009b, 2010a, 2010b, 2010c, 2010d, 2011e). As mentioned earlier, the general manager is in charge of all facilities within the university, although the support departments on a daily basis are managed by the department heads. The past years, these departments have also gone through a quality improvement process, based on the results of their baseline study (University of the Netherlands Antilles, 2004b). During the past years these results have led to major quality improvement actions at facilities level, such as the development of business plans, the expansion of the building facilities, including classrooms and staff offices, wireless internet all over the campus and expansion of the book collection and licensed academic e-journals and other e-resources. As one interviewee at departmental level formulated "We had to make sure that it is not due to the support departments that accreditation is not obtained".

Interviewed department heads brought forward that for them it was a major challenge to meet the NVAO standards in their field as they differ in many aspects from the available facilities in the Netherlands. These interviewees were critical of the collaboration with the faculties, as many new plans are plotted without taking into considerations the implications for the facilities, such as the implementation of new programs and the expansion of UoC's working territory to Bonaire and St. Maarten. These interviewees insisted that more alignment is urgently needed, in particular to guarantee the quality of the services and the timely availability of the necessary facilities.

7.1.3.5 Internal quality assurance policy

Document on internal quality assurance policy

Even though numerous activities aiming to improve the quality of UoC's products and services have been initiated since 2000, it was not until 2006 that the first institutional policy plan for quality assurance was approved (University of the Netherlands Antilles, 2006c). This policy plan outlines the framework for all quality work and provides guidelines for the implementation of various quality improvement actions. It furthermore advocates the introduction of a new internal and external quality assurance system. According to this policy plan the quality vision of UoC is strongly linked to its commitment to continuously work on quality improvement, which is based on three main pillars: total quality management, customers' satisfaction and continuous improvement, performed according to Deming's PDCA-cycle approach. The implementation of an integrated total quality management approach entails that continuous quality measurement, assessment and improvement have to become integral parts of all working processes and be consistently included in the daily practice of the university. Consequently, the internal and external customers' satisfaction will be enhanced, and thereby align with the accreditation goal.

The 'unity in diversity' principle is another belief the integrated quality approach of the university is based on. This implies a central management approach to quality combined with a decentralized implementation at the operational levels; at institutional level policy guidelines and directives are set, which the faculties and support departments, taking into consideration their particular situation, can adopt and implement. To move towards this integrated approach of quality management during the past years a phased implementation has taken place. However, as mentioned earlier, most of the management strategies used to stimulate and support the internal process of quality improvement were not spelled out beforehand in any policy plan, but eventually took place based on experiences gained during the progress of this process and recognition of issues to be promptly addressed. The interviewees indicated that the sudden emergence of DQA to counteract this ad hoc approach is another example of a management strategy implemented due to an unexpected organizational dilemma and not based on a quality vision.

According to the second quality policy plan (2011-2015), the achieved quality level has to be consolidated and improved continuously according to the title of this plan (University of the Netherlands Antilles, 2011b). The slogan of this new quality policy is encapsulated in the phrase "Say what you do, do what you say!"

One of the institutional leaders positioned himself as a fervent supporter of quality assurance and continuous quality improvement and consistently emphasizes his quality vision "Tell me, show me, prove me!" This envisioned quality approach is acknowledged by UoC's community, although the remaining interviewees differ in their opinion about the way this quality vision has to be implemented. They all agreed however, that the main focus for the coming years has to be the enhancement of quality

awareness within the university, followed by internalization of quality thinking and acting to be reflected in the daily activities.

To meet the NVAO requirements each faculty developed a quality policy plan, outlining the quality management approach at this organizational level, the quality instruments to be used and the stakeholders to be involved in order to ensure continuous quality improvement. There was no control to see if these plans indeed fit into the agreed institutional quality policy plans. As previously mentioned, the deans were granted total freedom to implement and structure their quality assurance system as they preferred, resulting in a differentiated approach towards quality assurance and the implementation of different quality instruments across the university. As could be observed UoC's small size did not facilitate a more unified quality approach across the faculties.

Internal quality assurance system

As can be derived from the preceding indicators, the internal quality assurance system of UoC is fully decentralized; there is no institutional quality system. The implementation of the PDCA cycle to ensure continuous quality improvement and the attainment of accreditation are the only guidelines derived from the institutional quality policy plans directing the faculty's internal quality system. The faculties are guided by NVAO's quality standards and thereby all quality improvement activities were directed to be in compliance with the accreditation requirements. Staff, students, alumni and representatives of the professional field related to particular programs were the identified stakeholders relevant to measure the quality level delivered by the faculty.

On the institutional level two quality instruments were used during the research period: satisfaction survey among students and guest lecturers. Based on a two-year cycle a student satisfaction survey (STO) was conducted in 2008, 2010 and 2012, initiated by the Department of Student Affairs in close cooperation with the student advisory board and DQA. Each faculty and support department receives the STO-reports. But history shows that in most cases little has been done to implement improvement actions based on these results. As of 2012 the intention is that all faculties and support departments develop a STO-improvement plan, the implementation of which will be monitored by DQA.

In 2012 the first satisfaction survey was conducted among guest lecturers (University of the Netherlands Antilles, 2012a). The results indicated that improvement is needed from different perspectives, including coaching and guidance of guest lecturers and their financial payment process. The policy plan regulating the involvement of this group of lecturers is in the process of being modified to fit the survey results (University of the Netherlands Antilles, 2006b).

With the emergence of DQA, UoC has embedded an institutional instrument for continuous monitoring of quality assurance and improvement at the various organizational levels. According to the draft position paper of this department its focus will be to consistently bring UoC to a higher quality level (University of the

Netherlands Antilles, 2012a). This department aims to ensure the process of continuous quality improvement at all university levels and the implementation of the PDCA cycle by all internal stakeholders. This department will have to play the primary role in the quality structure of the university and furthermore contribute to more effective and efficient internal and external quality assurance approaches. Even so, all interviewees emphasized that this has to be done in strong collaboration with the faculties and facilities. Several interviewees were sceptical towards this new department, since they considered it as a tool for centralization and unification, an approach that they don't seem to approve of. A sense of reluctance could be perceived towards this new development within the UoC, which can be explained by the fact that until recently the faculties could operate quite independently.

During the past years several activities have been initiated by DQA in order to collect information on university-wide quality management approaches and create a more unified institutional quality approach. To mention a few: the exploration of possibilities to implement an institutional digital evaluation system; the development of a system for internal audit to ensure continuous quality deliverance in all UoC units; the evaluation of the site visit processes to collect information to improve such processes in the near future and the development of institutional rules, regulations and guidelines for exam committees in order to enhance the independency and objectivity and thus the quality of the work of these committees.

At faculty level quality instruments were used to measure the satisfaction rate among stakeholders at that organizational level. Despite the fact that course and exam evaluations take place on a regular basis, in many cases these were not processed. In the cases where they were processed the results were barely discussed and converted into concrete improvement actions. In most faculties the program manager is in charge of coordinating the evaluations, processing of the results and presenting them in meetings to be discussed as part of the PDCA cycle. As was observed however, and confirmed by a majority of the interviewees, after ten years of quality experiences in the university, still the structural embedment of the PDCA cycle in the daily activities has barely happened. Most faculties and support departments recognized that this way of working has not yet taken root.

Most interviewees at faculty level indicated that now they have been accredited they will be able to focus more on incorporating the continuous quality improvement approach in the faculty's activities. They have specified that even though they do already work on quality assurance, this is not organized yet in a structural manner as demanded by a PDCA-cycle method. Furthermore, they pointed out that they bear in mind that most probably NVAO will be more stringent during the next accreditation cycle. They have to meet the accreditation standards and implement a continuous internal quality improvement approach. By doing so, UoC's second internal quality policy plan focusing on consolidation and improvement of quality will also be matched. Nevertheless, accreditation still seem to continue to be the driving force instead of a continuous internal quality improvement approach.

While evaluating the stages of the successful accreditation processes (figure 6-1) most actions related to these processes in UoC can be labelled as part of the D-phase of the PDCA-cycle (figure 4-2); little advance planning (P-phase) could be detected, barely any activities related to the C-phase could be identified, not to mention the A-phase at all. In order to correct this quality management approach at institutional level initiatives for many internal evaluation studies have been proposed to collect quantitative and qualitative information that can contribute to further quality improvement at all organizational levels. In this regard it is worth mentioning the comment of one interviewee saying that in the near future implementation of a quality approach has to be fully based on the PDCA-cycle, starting with well thought-out plans. "If you fail to plan, you plan to fail", is one of his often used quotes.

Quality structure

Through all three data collection methods it became evident that the quality structure within UoC is not yet well delineated. The quality policy plans state the centralized directives guiding the quality improvement processes followed by decentralized implementation and indicate the tasks and responsibilities granted to involved stakeholders (University of the Netherlands Antilles, 2006c, 2011b).

The ultimate responsibility for quality management at institutional level is in the hands of the rector (Antilliaanse overheid, 2004). According to LUoC, deans have a delegated responsibility for quality and therefore have the authority to implement a specific quality approach at faculty level, as long as this is in line with the institutional quality policy. No one, however, ever intervened if the chosen approach of a dean or department head was in conflict with the quality vision or the agreed quality operating procedures. The institutional quality manager could inform the rector of a possible deviation, yet it was the latter that decided whether to intervene or not.

As elaborated upon previously, an important body in the decision making process and quality structure of the university is the Council of Deans. Quality issues have become a structural agenda item during the biweekly meetings of this council. Experiences in the past have demonstrated that if a decision taken by the rector is not supported by the deans, the implementation runs great risk. For instance, the introduction of performance contracts for deans has not been accepted by them and therefore it could not be implemented by the rector. Thus, the Council of Deans can be considered as a powerful group during the accreditation processes. The interviewees who are not in that position agreed but the interviewed deans did not.

During the research period the institutional quality manager played a determinant role as the main stakeholder in the quality structure at UoC; she was accountable to the rector. By the end of the research period no modification took place in this approach, despite the emergence of DQA.

In table 7-4 the tasks, roles and responsibilities of the stakeholders involved in the quality structure of UoC are summarized.

Table 7-4 Responsibilities of internal stakeholders at UoC

Internal Stakeholder	Tasks and responsibilities
Supervisory Board	Supervises the performances of the rector, based on information received during their biweekly meetings; is accountable to the minister of education.
Rector	Has the ultimate responsibility for the quality of all teaching and research activities and reports to the Supervisory Board.
General Manager	Is responsible for the quality of the support departments, including all financial and operational activities.
Council of Deans	Discusses all internal developments and proposed decisions of the rector, including issues regarding quality assurance and accreditation; functions in part as a management team.
Dean	Is responsible for the quality of teaching and the accreditation process at faculty level; is in charge of the implementation of an internal quality assurance system.
Faculty Council	Consists of academic and non-academic staff and students; is co-responsible for the quality of all programs at faculty level.
DQA	Initiates, coordinates, supports and guides all accreditation processes; advises the rector and business director; is in charge of the organization of the (trial) site visits; is responsible for allocation of accreditation funds; chairs the institutional quality team.
Institutional Quality Team	Consists of staff members of DQA and the program managers at faculty level; shares information, experiences and expertise; aims to reach unified quality approaches; works on alignment of quality approaches.
Program manager at faculty level	Is in charge of the evaluation surveys and the dissemination of the results among relevant stakeholders; presents the evaluation results to academic teams; is in charge of quality improvement actions and the documentation of them; participates in the institutional quality team.
Academic staff	Discusses quality issues in team meetings and faculty council; is responsible for the quality of the course he/she teaches.
Department Heads	Discusses implications of the accreditation process for the support departments and quality improvement actions to be taken; supports accreditation processes in their respective field of work; is responsible for the quality of the products and services delivered by his/her department.
Student	Participates in students' surveys, student panels and faculty council, and thereby provides suggestions for improvement.
Examination Board	Ensures the quality of testing and examinations.

Most faculties have a program manager, in charge of quality assurance and improvements activities at faculty level. Some faculties however, did not appoint one due to the particular deans' vision, illustrating once more the freedom of deans to act according to their personal beliefs and disregarding the institutional guidelines. Even though the tasks and responsibilities of the program managers are specified in their job descriptions, in practice the tasks executed by these staff members greatly vary among the faculties, depending on the dean who decides on the tasks to be realized by the program manager; again demonstrating the differentiated quality approach among the deans.

The previously mentioned institutional Quality Team has monthly meetings to confer on relevant proposed institutional decisions and other developments related to quality assurance, to discuss quality improvement and accreditation issues such as the bottlenecks and challenges at faculty level and the challenges faced by the support

departments, and to discuss significant documents (University of the Netherlands Antilles, 2004a). At the beginning of the first accreditation period quality instruments were also developed by members of this Quality Team. During the years its role has moved from developing quality instruments to more in-depth discussions on quality issues and sharing of documents, accreditation experiences and expertise. All interviewed members of this Quality Team indicated the importance of this body for monitoring the accreditation processes from a joint institutional perspective and for sharing experiences and expertise. "There is no need to constantly re-invent the wheel" as one of them asserted. With the establishment of DQA the tasks and roles of this Quality Team are expected to be reviewed.

Involvement of stakeholders

According to the two quality plans, the intention of UoC is to position itself as a university that focuses on great involvement of internal and external stakeholders to guarantee high level quality deliverance (University of the Netherlands Antilles, 2005b, 2011c). As described in the reviewed self-study reports to meet the NVAO requirements during the accreditation process the following stakeholders were involved: staff members (permanent staff and guest lecturers), students, representatives of the professional field related to the particular programs and alumni (University of the Netherlands Antilles, 2009a, 2009b, 2010a, 2010b, 2010c, 2010d, 2011e). Table 7-5 provides an overview of the involvement of the different stakeholders during the accreditation processes, although differences could be perceived depending on the faculty and in particular the dean.

Table 7-5 Involvement of stakeholders at UoC

Stakeholder	Type of involvement
Permanent staff	Involves in staff meetings and discussions on curriculum development and improvement; increased involvement of the permanent staff could be perceived since the accreditation purpose is more and more acknowledged by them.
Guest lecturers	Involve through formal and informal contacts with permanent academic staff. Unsatisfied students' evaluations of guest lecturers most of the times have led to dismissal of this lecturer.
Students	Involve in the student advisory board, faculty council, course and test evaluations and STO and some faculties also have student panels to address quality issues more in-depth.
Professional field	Participates in field advisory boards for a (group of) program(s); meetings usually take place twice a year by the faculty in order to receive input for the set end qualifications and the curriculum and to inform the academic staff in a more structured manner on contemporary national and international developments in their professional field.
Alumni	Barely any involvement, except for those participating in field advisory boards.

With regards to both permanent staff and guest lecturers however, interviewees at faculty level indicated that there still is room for improvement concerning their timely involvement in the accreditation processes.

UoC considers students as important stakeholders. The involvement of students is indicated in table 7-4 and table 7-5. Students however regularly complained in the

STO's of lack of involvement at all levels within the university, leading to low students' satisfaction level, contrasting with one of the university's quality policy goals, namely high customers' satisfaction rate. In this regard, various interviewees have referred to the noticeably increased demand of students for quality performance. Students have become more critical, and going through an accreditation process has promoted this attitude in an increased number of students. During the site visits students showed a high level of enthusiasm, which also contributed to the achieved accreditation results.

The professional community which eventually employs UoC-graduates is also involved in the accreditation processes at UoC. In general, the members of these boards have shown great willingness to invest their time to contribute to the further development of the programs in order to promote sustainable national socio-economic development, as was stated in the self-study reports. However, after obtaining the accredited status most programs tend to limit the meetings with these boards.

Alumni of UoC form part of the field advisory boards, illustrating the small scale of the community in which the university operates. Any other formal contact with alumni is limited across the university. Nevertheless, during site visits alumni also had an enthusiastic performance, contributing thus to the achieved accreditation results.

Involvement of external experts

Due to the lack of sufficient experts and experiences within the university, external experts were engaged from the start of the accreditation processes. The external experts were hired to support the institutional quality manager and the faculties and to inform all stakeholders on specific requirements set by NVAO. These experts came from the Netherlands as there were no experts in this area at the national level.

In all faculties external experts were involved during their accreditation processes. These experts were assigned tasks including training of staff members in the writing of self-study reports, drafting and reviewing self-study reports, informing internal actors on the latest NVAO developments, leading discussions and providing feedback on steps taken during the accreditation process, training of participants in (trial) site visits, and participation as members of review panels in trial site visits.

Interviewees at faculty level have commented that they are satisfied with the contribution of external experts. According to them the timely engagement of external experts largely contributed to making the accreditation goal achievable. The majority of the interviewees asserted that without these experts, the accreditation goal could not have been accomplished. They furthermore indicated that involvement of external experts will always be needed to stay up to date with 'hands on' accreditation developments, while the expertise of internal collaborators in this process has to be improved.

7.1.4 Summing up

As a small university with 2400 students, UoC provides a wide range of educational programs, mostly to meet specific national demands in certain professional fields. UoC can be characterized as a small, resource-poor, loosely coupled university, aiming to educate highly qualified future leaders to contribute to the further sustainable socio-economic development of Curaçao in particular, and to compete internationally as well. Expanding its educational provision with new faculties and programs is one way this university has tried to respond to foreseen national social developments. The embarked accreditation processes can be considered as a major tool used to become nationally and internationally competitive.

During the past decade it was the first time that UoC had gone through accreditation processes. These processes have made significant progress over the past few years. Of the 24 programs that have undergone external evaluation by the NVAO, by the end of 2012 94% have achieved the accredited status, even though of them 13% received probationary accreditation. Thus, UoC has demonstrated that it has met its own internal goal of improving the quality of its programs, that it has met the national demand for highly qualified graduates, and that it has secured its competitive position at national, regional and international levels.

Although the *organizational structure* and by extension the *decision-making structures* are established by LUoC, providing the rector with the ultimate responsibility for the quality delivered by the university, in the daily activities related to the accreditation process the deans as *managers at faculty level* and not *the institutional leaders*, are the ones taken the important decisions. Therefore the implementation of decisions at institutional level highly depends on their timely and acknowledged involvement in the decision-making process and consequently their acceptance of the decisions that have been taken. However, *the quality structure*, coupled with the decision making process still need to be well outlined and implemented to provide a more stable organizational environment in order to enable accreditation processes.

During the research period it became evident that there are great contrasts within the university. Despite the availability of *institutional quality policy plans* no unified *internal quality system* exists, and quite a diversified quality management approach among the faculties could be detected. The *institutional leaders* had no perceivable added value during the accreditation processes, whilst the role of most deans was determinative. At all levels things happened in a different way, despite set institutional rules and procedures. Analysis of documents has created the impression that with regard to the process of accreditation certain procedures need to be followed. Nevertheless, the implementation of these procedures differed widely among the faculties, highly dependent on the *management approach at faculty level*.

Gradually more quality awareness has emerged within the university, yet a *quality culture* still needs to be developed. The main focus was to reach the accreditation goal (compliance), instead of embedment of a consistent quality improvement approach. Obtaining the accredited status was the key directing all quality improvement

activities (to be) implemented. The university has developed policy plans on quality assurance and improvement, yet their implementation according to the PDCA-cycle, followed by the embedment of the set rules and procedures during the daily activities was still not the case by the end of 2012.

Despite the achieved accreditation goal, *the availability of resources* has played an important role in shaping the organizational behaviour and performances of the internal stakeholders. This study has revealed that more financial resources are urgently needed, coupled with additional capable human resources and up to date *facilities*. The *quantity and quality of available personnel* were insufficient resulting in overloaded staff members and *extensive use of external experts.* The allocation of the *limited financial funds* was a constant struggle and the available facilities did not completely meet the demands of the faculties. The limited qualified human resources to assist in the quality improvement processes at all organizational levels have also contributed to a major delay in the accreditation timeframe. Expeditious improvement of the quality at all levels also strongly depends on the availability of resources; a great challenge for the university if its objective is to maintain the achieved accredited status.

The *high commitment of the faculty staff and the institutional quality manager* can be considered as the key influential enabling factors for the achieved accreditation results. Furthermore, the close *collaboration and cooperation* between faculties and support departments, resulting in good teamwork has also largely contributed to the achieved accreditation results. However, improvement in this matter is needed to enhance the timely involvement of non-academic staff in projected changes by the faculties' educational provision.

Another conclusion that can be drawn from this case description is that the engaged management and leadership style and the quality culture are indeed tightly connected, as literature prescribed. The development of a quality culture has been shown to be highly dependent on the management approach at institutional, faculty or department level.

To summarize, the following encouraging factors *(enablera)* pushing UoC's accreditation processes could be identified: the commitment and spirit of the institutional quality manager; the strong commitment and enormous input of the involved staff; shared focus to reach the accreditation goal and timely involvement of external experts. Therefore, it can be concluded that 'human resources' have played a vital role in the achievement of the pursued accreditation objective. Hindering factors *(barriera)* identified were the lack of a quality culture, the non-existence of a well outlined quality structure and the unavailability of financial and human resources.

7.2 University of Aruba

The University of Aruba (UA), established in 1988, aims to educate Arubans to contribute to the sustainable socio-economic development of this young, autonomous Dutch-Caribbean country. In this section the dependent and independent variables identified in the research model describes the UA's accreditation processes based on information gathered through direct observation by the researcher during the period 2010 to 2012, analysis of institutional and faculty's documents and nine in-depth interviews, mostly conducted in November 2012. The interviewees were the rector, all deans, the business director, the institutional quality coordinator and two quality coordinators at faculty level.

In this case description one of the dependent variables, namely the achieved accreditation results cannot be presented because at the end of the research period none of the programs have yet completed an accreditation process. Despite the non-accredited status of the UA programs all independent variables and their indicators could be described, since at the time of this study UA had been involved in accreditation processes for several years.

7.2.1 Institutional background information

The University of Aruba is a national university, legally embedded in the "Landsverordening Universiteit van Aruba" (LUA) (Arubaanse overheid, 2011). The justification for the establishment of UA was the obtained political autonomous status of Aruba in the Dutch Kingdom in 1986 and the associated decision of the Aruban government to no longer make use of the services of 'UNA' in Curaçao (University of Aruba, 2009). In order to support the embarked process of development of this country the new political powers deemed it necessary to have their own national university, starting with a Faculty of Law since many new legal regulations were needed to ground this new country. As is the case with UoC, UA is also considered to be an important instrument for national capacity building, with the same three core tasks: education, research and community service.

According to the strategic plan UA aims to develop into a national knowledge and development centre for Aruba, i.e., "to be a contributing partner able to give constructive support to the development of Aruba, towards more internationalization, globalization and multi-culturalism"[29] (University of Aruba, 2004, p.1). In particular, UA intends to become a high quality university able to give substantial support to the further political and economic development of the country, also to become accessible for more Aruban students, and by doing so become an instrument to fight the brain drain phenomenon.

---

[29] During 2012 the university was in the process of developing a new strategic plan, but at the end of the research period it was not yet published and could therefore not be incorporated in this dissertation.

Furthermore, UA aims for "the improvement of the quality of the existing programs, among other things by strengthening the relevance of the programs to local demands for training of the labour force" and to become "a clear response to growing local demand for higher education"(University of Aruba, 2004, p.4). Those objectives can be interpreted as the answer to the local need to educate future leaders to contribute to the further sustainable socio-economic development as was shared in chapter 6.

One of the seven strategic objectives mentioned for the policy period is quality improvement, with the articulated goal "the major initiatives in this field will result in a strong contextualized and relevant curriculum with an international orientation, aimed at a high quality professional and personal development of the student" (University of Aruba, 2004, p.5). UA aims to reach this goal through 'international accreditation'. Implementation of an institutional quality system and international quality standards, and external evaluations of the efficiency and quality of the programs will be the tools used by UA to create the necessary conditions for accreditation of the UA programs and to receive constant feedback to continue improving academic quality to maintain the accredited status.

In academic year 2012-2013 UA had about 550 students, the great majority coming from Aruba, attending programs offered by one of the four faculties, with diverged orientation at bachelor and master levels, as shown in table 7-6. The offered programs are a mix of programs oriented to the Dutch higher education system (two faculties), programs with no specific orientation and indicated as 'Bologna oriented' [30] (one faculty) and those reflecting the US higher education profile (one faculty).

Table 7-6 Overview of UA programs

	Dutch oriented		Bologna oriented	America oriented	Total
	Professionally oriented (HBO)	Academic (WO)			
Bachelor	2	1	2	1	6
Master	0	1	0	1	2
Total	2	2	2	2	8

Interviewees commented that due to the wide variety of orientation of programs within the UA and the great differences between the four faculties, it is not yet possible for this university to have a uniform educational model. Therefore, faculties have great freedom to organize their programs according to their best beliefs and conceptual framework. Nevertheless, despite the differences, there are still some commonalities in the educational approach of UA programs, constituting the following educational profile: student-centeredness, active and cooperative student-learning, effective use of technology, contextualization of the programs to guarantee relevance for Aruban community.

---

[30] These two programs will be accredited according to the description in the Dublin Descriptors with no specific orientation. At UA they are labeled as 'Bologna oriented'.

Since its establishment UA has collaborated with a wide range of higher education institutions, regionally and internationally. Strengthening the regional and international cooperation with universities and other educational and research centres is also one of the strategic goals of UA (University of Aruba, 2004). This will help overcome the limitations faced due to the small scale of the university and of the island.

Even though UA and UoC have signed a cooperation agreement in 2005, during the past years barely any cooperative initiatives have been started between these two universities. The two universities' Faculty's of Law share some professors coming in from universities in the Netherlands and the UoC's institutional quality manager also supports UA during its accreditation processes.

7.2.2 The dependent variables

Although the UA's quality improvement actions started in the nineties, by the end of 2012 no program has been accredited yet. Consequently, no information on the achieved accreditation results can be provided. In this section the steps undertaken during the embarked accreditation processes are discussed, preceded by an explanation of the driving forces initiating the start.

Starting up the accreditation period

At the end of the nineties UA had already experienced activities geared towards the external evaluation of the quality of its programs, following what also happened in those days in the Netherlands (University of Aruba, 2006). In 1997 the law programs were evaluated by the association of universities in the Netherlands, VSNU, and in 1998 the finance and accounting programs by the Dutch association for professional higher education, HBO-Raad. Based on those evaluation reports quality improvement actions were implemented. At that moment in time the focus was the improvement of the quality of the programs to guarantee graduates entry into the Aruban labour market or further study at international institutions.

UA can be considered as the initiator of the accreditation processes in the studied Dutch-Caribbean universities. At the beginning of this century the UA rector firmly advocated the importance of accreditation for UA programs, since this was considered as a main vehicle to move forward and to provide opportunities for internationalization. In 2003 UA's request to NVAO to accredit its programs was rejected since NVAO initially opined that Dutch-Caribbean universities were not part of their scope of work. It was in 2005 that this issue was settled when the Dutch minister of education mandated NVAO to assess the programs offered at higher education institutions located in the Dutch Caribbean. So, at UA the need for accreditation was primarily not externally, but internally driven.

The start of accreditation processes at UA was a strategic decision of the former rector as stated in the latest strategic plan of this university (University of Aruba, 2004). Observation confirms no resistance for the embarked accreditation processes in UA,

even though there were differences regarding the accreditation organization to be used; in particular for the faculties that are not Dutch oriented NVAO was not the preferred one. The American type of programs fits neither into the higher education system in the Netherlands nor the NVAO's accreditation framework. It took until October 2012 before an agreement was reached between UA and NVAO to evaluate the quality of these programs in 2014, based on the Dublin descriptors that do not make a distinction between professional and academic orientation. However, by the end of the research period it was not clear for UA how this agreement could be aligned with the NVAO frameworks, which do make that distinction and need to be followed in the self-study reports.

Although the accreditation demand for UA was laid down in 2005, it took until 2009 before the accreditation process of the programs officially started. The factual reasons for this delay could not be verified. Quality improvement actions did take place during those years but were not explicitly directed toward accreditation. Interviewees identified several factors that in their opinion spurred the need for accreditation: to prove that the quality of the programs is according to international norms and standards and that the programs meet the local demands; to improve the image of the university in Aruba and receive recognition; to facilitate benchmarking and comparison with external programs; to enhance possibilities for regional and international cooperation and to guarantee seamless transfer to further study abroad of the graduates.

The importance of accreditation to guarantee further study, especially in the Netherlands, was emphasized, since there the question is constantly asked if the UA programs are accredited. However, some interviewees complained about the NVAO: "Accreditation is not about the content of the programs, but they judge the processes. It is a pity, because we know we offer good programs; our graduates have always scored well in the Netherlands, but now our programs are judged by whether they are accredited or not", one of them stated. The fact that NVAO has changed its standards due to several problems with higher education institutions in the Netherlands was also a topic brought forward by the interviewees to further indicate their doubts with regards to this accreditation organization. "NVAO is bureaucratic, everything needs to be documented, sometimes this is overdone, yet unfortunately we need to meet their standards in order to attain the accredited status, needed from an international perspective", was formulated by one interviewee to illustrate his uncomfortable feeling with NVAO. Another interviewee emphasized that the main focus should be on quality improvement and not on accreditation. "Accreditation is no guarantee for quality; it is just a part that can lead to quality improvement. Reaching a certain level of quality will lead to accreditation and not the other way around", as he described his vision. These examples illustrate the diversified accreditation vision within UA's community. Even though this process has been initiated for all programs, at different levels in the university questions are raised concerning the content and process of accreditation as well as with regards to the accreditation organization.

More and more parents and potential students are also asking if the UA programs are already accredited. They want to be sure that the graduate diploma is internationally recognized and that seamless transfer to further study abroad after graduation is guaranteed. As several interviewees remarked, the non-accredited status of UA programs has induced many fundamental discussions about the quality of the university during the past years. Thereby, the attainment of accreditation is urgently needed to counteract these tendencies. Nevertheless, since accreditation is not yet demanded by any Aruban law, no pressure to do so is felt. But the government supports this initiative and getting UA programs accredited will be highly appreciated by politicians, but also by the community at large. Accreditation will also make benchmarking with other universities possible, seen from an international perspective.

Outline of the accreditation processes

Figure 7-3 portrays the several steps already taken and foreseen to be made during the accreditation processes of the UA programs. These steps are quite uniform across the programs. In 2009 the accreditation process started with baseline assessments of the then existing programs by Hobéon en QANU, evaluation agencies in the Netherlands (Hobéon, 2009a, 2009b, 2010; QANU, 2010). Also the infrastructural facilities, human resources and the quality improvement approaches were examined. Based on the results a curriculum committee was established in order to help the faculties translate the reports into concrete action plans. This committee consisted of educational experts from Aruba and Curaçao, chaired by a staff member of the Center for Quality Assurance (CQA) of UA. The institutional manager of UoC was a member of this committee.

As a first step towards developing the action plans, the committee members made an extensive accreditation scan of each program, based on an instrument developed by UoC shaped by the NVAO accreditation framework. The results of these scans together with the reports of the baseline assessments were finally incorporated into action plans at faculty level and one at institutional level, coordinated by CQA (University of Aruba, 2011a, 2011b, 2011c, 2011d). These action plans contain an extensive overview of all the quality improvement actions necessary in order to achieve positive accreditation results. The implementation of these plans was the responsibility of the faculties, except for those parts regarding the support departments of which the business director was in charge. In 2012 the improvement period was ongoing.
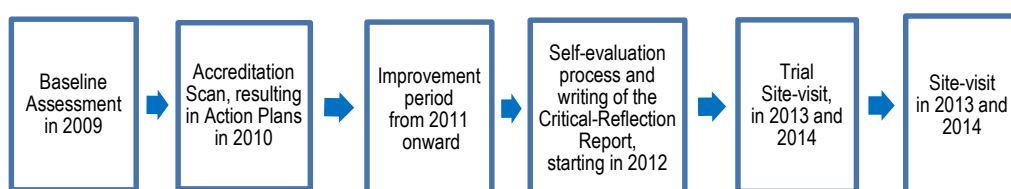
Figure 7-3 Prospective steps during the accreditation processes of UA

Most of the faculties intend to write their own critical reflection report, in close cooperation with engaged external experts. As planned, the academic staff, students and representatives from the professional work field will also be involved during this process. Finally, CQA needs to approve the critical reflection report before submission to NVAO via the rector. According to the timeframe trial site visits will be held just before the official one. External peers will be hired to conduct this type of site visits, aiming to make the participants acquainted with an accreditation setting and to train them. By the end of the research period no trial site visit has yet taken place.

Since it is the first time that the UA programs are going through an accreditation process, this will happen according to the preferred sequence in terms of NVAO process: first program accreditation, with no institutional audit yet. In the quality policy plan the accreditation timeframe was set for five to six years, to start in 2005 and be completed in 2011 (University of Aruba, 2006). In fact, these processes actually started in 2009 and it is expected that the site visits of all programs will have been completed by the end of 2014. Interviewees pointed out several reasons for this delay, e.g. small scale causing overload of the staff so no time for accreditation was available, unstable institutional leadership during 2009 – 2011, the major improvements needed at the support departments and lack of internal expertise in this field.

Based on the already existing culture of benchmarking quality through site visits since the end of the nineties, within UA the conviction exists that accreditation is feasible. However, faculties realized that accreditation requires a lot of documents to be in place and procedures implemented; NVAO quality requirements are different from what has become the practice in UA and demands a more intensive and structured approach.

7.2.3 The independent variables

Based on information collected from direct observation during 2010 to 2012, analysis of a variety of institutional and faculty documents and nine in-depth interviews the influence of the five identified independent variables on the accreditation process of the University of Aruba are discussed in this section, according to the 17 indicators.

7.2.3.1 The organizational structure

The organizational chart

The organizational chart of University of Aruba, portrayed in figure 7-4, is regulated by LUA (Arubaanse overheid, 2011). The governance at top level of the university consists of three bodies: Board of Trustees, Executive Board and the rector.

The Board of Trustees has the final responsibility of UA. The members are appointed by national decree to monitor all the university concerns. Annually this board reports to the minister of education on all academic, financial and operational affairs.

The Executive Board consists of the president-curator (chairman), his deputy and the rector. This board is authorized, subject to conditions and guidelines set by the Board of Trustees, to take decisions and also advise. The rector, in principle selected from the

academic staff, is appointed by national decree and reports to the president-curator. The daily management of the university is the responsibility of the rector, based on the conditions and guidelines approved by the Executive Board. The president-curator is accountable for finance and legal aspects, while the rector for all academic affairs (education and science), including accreditation. According to LUA the rector is mainly responsible for the quality delivered by the university. Due to this split in the daily management a convenient division of tasks is created; for any financial or legal issue the rector needs to get approval of the president-curator, while the latter needs to come to the rector with regards to anything about academic operation. Interviewees considered this as an inefficient organization structure. They voiced the need to have clear, unambiguous roles for the daily institutional leadership and the supervisory authority. Now the president-curator as part of the daily management also chairs the Board of Trustees, thus creating a great responsibility dilemma and dual hierarchy.
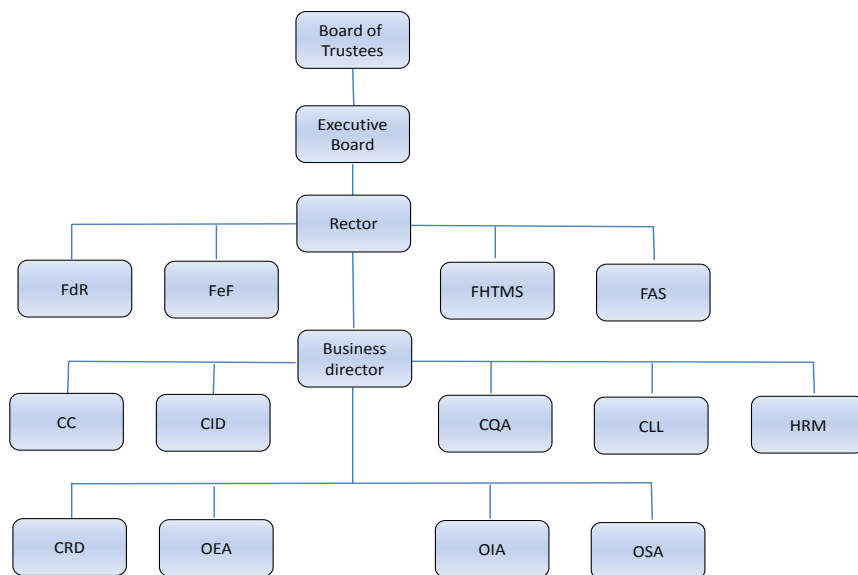
Figure 7-4 Organizational chart of UA

Faculty regulations regulate the operational procedures and management structure at faculty level[31]. Each faculty is managed by a dean, who is elected by the faculty council and reports to the rector. The dean is responsible for the implementation of

---

[31] The four faculties of UA are: Faculty of Law (FdR), Faculty of Finance and Accountancy (FEF), Faculty of Hospitality, Tourism and Management Studies (FHTMS and Faculty of Arts and Social Sciences (FAS. The support departments are Computer Center (CC), Center for Information and Documentation (CID), Center for Lifelong Learning (CLL), Center for Quality Assurance (CQA), Center for Research Development (CRD), Human Resource Management (HRM), Office for Educational Affairs (OEA), Office for Student Affairs (OSA) and Office for International Affairs (OIA).

institutional policies at faculty level, including the quality policy plan and the accreditation processes of the faculty's programs.

The business director is in charge of all operational activities within UA and reports to the rector. Although this position is not yet legally regulated in LUA in 2011 it was introduced in order to facilitate, control and direct the support services within the university. The managers of support departments are accountable to the business director.

Decision-making structure

As described in LUA, UA has a hierarchical, centralized structure and almost all interviewees also experienced this as such. Although many of them indicated that with the current rector a more democratic and transparent approach is encouraged.

The advisory council is an important organizational body in UA's decision-making structure, consisting of the rector (chairman), all deans and the business director. During its weekly meetings the rector discusses all organizational issues and developments, including quality improvement plans and accreditation, and strives to gain approval and secure support for decisions to be taken. However, even though this structure enabled sustainable, university-wide decisions, several interviewees indicated that full agendas of these meetings and elaborate discussions on certain topics delay efficient decision making.

The faculty council has the final responsibility of the education programs and research at faculty level. This council is chaired by the dean and consists of the academic and non-academic staff and representatives of students. The quality of the offered programs is in the hands of the faculty council since they determine, amongst other things, the content of the programs and also rules and regulations with regards to testing and exams. According to LUA all decisions made by the faculty councils regarding educational issues, e.g. changes in curriculum of programs and exams regulations, still need to be reinforced by the advisory council (Arubaanse overheid, 2011). Further guidelines for tasks, responsibilities and operating procedures for the functioning of a faculty council are described in the faculty regulations. Interviewees noted that quality has become a structural point of discussion during most meetings of faculty's councils.

The Center for Quality Assurance (CQA), established in 2009 is responsible for designing, implementing and embedding of a quality assurance framework for the UA and executing the institutional quality policy plan (University of Aruba, 2006; Center for Quality Assurance UA, 2011). In UA's quality policy plan the following tasks are defined for CQA: organizing of internal and external quality assurance, advising of the rector, faculties and support departments regarding all quality issues, supporting individual teachers in executing the quality cycle of measuring, assessing and improving the educational quality and performing internal surveys. CQA coordinates the accreditation processes and by doing so is expected to arrange and allocate additional funds, recruit external experts, provide the necessary training, monitor the time frame, issue an information bulletin, inform the institutional management of the

progress and challenges and encourage them to take timely decisions, chair the interfaculty quality team (IFQM) and deal with NVAO. The intention is that in the long run this centre will also assist external interested parties with support and advice in the quality field.

Table 7-7 contains an overview of the formal meetings within UA that contribute to quality assurance and improvement and are relevant for the accreditation processes.

Table 7-7 Formal meetings at UA

Meetings	Frequency	Stakeholders	Topics addressed
Board of Trustees	Monthly	Representatives of the public and business sectors	Internal and external developments relevant for the functioning of the university.
Executive Board	Weekly	President-curator, his deputy and the rector	All university's issues relevant for good management and also important national developments which can have an impact on the university's functioning.
Advisory Council	Weekly	Rector, deans and the business director	All plans and proposals regarding quality improvement and accreditation related issues are discussed before the rector takes the final decision.
Faculty Council	Biweekly	Dean, academic and non-academic staff and students	All development at faculty level, approval of new documents regarding the content and structure of the programs and testing and examination.
IFQM	Monthly	CQA and quality coordinators at faculty level	All developments in the field of quality improvement and accreditation, sharing of information between the faculties and focusing where possible on institutional alignment.
Support departments	Monthly	Business director and department heads	Sharing information and discussion on institutional issues. The implications of university-wide decisions for the support departments, including the improvements needed to be implemented in order to meet accreditation standards and to facilitate the accreditation processes at faculty level.

Many interviewees commented that UA's organizational structure causes conflicts: the roles are not well defined and there is conflict of interest in that the decision makers are the executors and the controllers as well. The power is concentrated in one person, the president-curator, because of his positions as chairman of the Board of Trustees and also of the Executive Board with supreme administrative and financial authority. Even though decisions have been taken somewhere else, the president-curator still needs to approve all decisions and sign for payment. Furthermore, due to the small scale of the university and also of the island, people can go directly to him to change decisions.

The Aruban government's accounting department has already indicated that the governance structure has to be legally changed since there is no separation of responsibilities. A new proposal for a modified UA's organizational structure is being developed, which is expected to eliminate the conflict of interest. Until the end of the research period no conflicts, related to the accreditation process, were experienced as a result of the dual role of the president-curator. The Board of Trustees too is mainly interested in the ultimate goal, to achieve accreditation.

7.2.3.2 Leadership and Management

Role of institutional leaders

The large majority of the interviewees identified the former rector, the initiator of the accreditation journey, as having a quite commanding approach of leadership; a rigid, top–down leadership style was applied, the consequences of which were still felt within the university during the observation period. These interviewees contrasted the former rector with the current one, who was appointed since January 2012 and is considered to be more democratic. However, interviewees specified that during the period of the previous rector many ambitions of the university have been realized, making the strategic initiative to reach international accreditation more feasible. For instance, she is credited with the initiation of the agreement between the three ministers of education concerning the use of NVAO as the accreditation organization in the Dutch Caribbean, the establishment of CQA in the initial phase of the accreditation process, the conducted baseline assessments, her persuasion of the government to allocate preferred financial funds in Fondo di Desaroyo Arubano (FDA=Aruban development fund) for UA's accreditation processes and the engagement of several external experts to provide additional support.

Interviewees also explained that between the two rectors' period two temporary management teams were appointed resulting in quite unstable years within the UA, also impacting the progress of accreditation processes in a negative way; the delay in the accreditation processes and the postponements of the dates for site visits were also caused by this turbulent period the UA went through. The appointment of the new rector in 2012 finally brought stability again in the institution.

The current rector considers accreditation important since all stakeholders expect it to be reached. However he argued that quality improvement has to be an internally driven approach, where people constantly evaluate their performance and try to do it better each time. The rector is aware that a lot of improvements need to take place at all institutional levels, such as creating better management conditions, delegating roles and responsibilities to the correct organizational level and improved communication channels, though not all can be changed and modified at the same time; the university must be able to adjust to these changes, he further commented. Other interviewees characterized the rector as open, socially-oriented, transparent and sharing as much information as possible, which is expected by many interviewees to contribute to the ongoing accreditation processes. Nevertheless, some interviewees commented that to push accreditation through, sometimes tough, timely decisions have to be taken. Not everyone seemed convinced that the rector would be able to do that.

Interviewees agree that sufficient priority is given to accreditation at institutional level and indicate that the rector is committed to achieving positive results. They indicate that the rector plays an important role while monitoring, encouraging and facilitating all those involved and ensuring the necessary resources are available to enable the embarked accreditation processes.

As described in the previous indicator, decisions of the rector are preceded by discussions in the advisory council. The rector is in charge of academic affairs while the business director is responsible for financial and operational affairs and reports to the rector. This joint leadership approach also reduces the span of control of the rector, which the interviewees expect will facilitate the accreditation processes.

At institutional level CQA plays a prominent role in coordinating the accreditation processes, supporting and guiding all faculties during their accreditation attempts and in turn is supported by external experts, to be detailed later on.

Management at faculty level

The importance of accreditation is acknowledged by all deans, arguing, however, from different perspectives. The interviewees hold different opinions regarding the role of the deans during the accreditation processes; this also reflects how the deans are experienced within the university. Some interviewees believe that deans must take leadership and play a pro-active role during the accreditation process to speed up activities. According to them not all deans are sufficiently involved in this process and this does not enable the implementation of the quality improvement actions. They fear that this type of leadership approach could become a great barrier to achieving accreditation during the coming period. In the faculties concerned, the steering role during this process is mostly in the hands of the quality coordinator at faculty level.

Interviewed deans, on the other hand, indicated that challenging management conditions, such as lack of time, lack of staff, stress in the team due to a high teaching load, insufficient resources, and no adequate administrative support hamper their timely and dedicated involvement in the accreditation processes. Also lack of experience and knowledge about accreditation prevent them from taking a leading role in such processes. Some of them indicated that compared with universities in the Netherlands, their facilities and conditions are very limited. In general, the interviewed deans recognized their limitations and realized that additional support is urgently needed in order to successfully complete the accreditation processes.

Interviewees brought forward that although the organization has a hierarchical structure deans have great freedom in how they manage their faculty. Some of their decisions need approval of the faculty council or the advisory council, but they still have room for management. Therefore, some interviewees even consider UA to have a flat organizational structure. Nevertheless, large differences between the management approaches among the deans could be observed during the research period. Some deans followed a more participatory approach, leading the faculty based on shared responsibilities; other deans were not actively involved, taking a more laid-back position while complaining about the lack of facilities instead of being pro-actively involved. Still others wanted to become more highly involved but felt that their lack of management experience hindered the realization of this intention. So, at UA no uniform management approach of deans could be identified.

7.2.3.3 Quality Culture

Care for quality

Interviewees agreed that UA needs to build a quality culture. Quality awareness is increasing, but a quality culture is not yet developed. Accreditation efforts encourage this development, but there is still a long way to go, they further commented. However, they acknowledge the quality improvements realized the past few years and are convinced that this will continue to be the case, thereby gradually paying more attention to quality delivery and eventually creating a quality culture within the university. Some interviewees posited that staff members are aware that they should deliver quality and this is also done in most cases. People work to the best of their ability in order to achieve quality delivery. However, the interviewees complained that this is merely done in order to reach accreditation; this has become the focal point of most quality improvements attempts, instead of the development of a more permanent quality culture. All interviewees argue that UA needs to focus more on developing a quality culture rather than just heading for accreditation. Several interviewees complained also that there is no uniform interpretation of quality within the university. And as long as that is not the case, they expect it to jeopardize the progress of the accreditation process.

One new dimension at UA due to the accreditation process is the documentation of all events and decisions. Interviewees experienced that previously things were done well, but now due to accreditation purposes everything needs to be documented and formalized, creating a different culture. This culture is also influenced by the fact that things need to happen at a faster pace. Decisions taken during meetings have to be implemented quite immediately, so that the identified improvements and changes can take place according to the accreditation standards, to be proven in the critical reflection reports. This demands a more pro-active approach of stakeholders at faculty and institutional level, which is gradually taking place and as such changing the organizational culture and creating more and more quality awareness. However, "we cannot speak yet of an embedded quality culture within the university", many interviewees stated. Constant quality awareness still needs to be internalized and become part of the daily routine at the university. As a consequence the attainment of the accreditation status is delayed.

At institutional and faculty level different cultures coexist: between the faculties and sometimes even within one faculty the culture differs between the programs; oftentimes causing clashes among the staff members, which does not contribute to facilitating the accreditation process. This is also shaped by the diverse background of the academic staff. As previously stated, there are Dutch-oriented faculties with mostly Dutch staff members while others are USA-oriented with mostly local or regional staff members. These background differences can create perspective dissimilarities. Interviewees identified these discrepancies also as potential barriers towards the development of a university-wide quality culture, which in turn cause conflicts impeding and/or delaying the development of a university's culture which focuses on quality rather than only on accreditation.

By the majority of interviewees it is expected that the more democratic leadership style at institutional level will contribute to the development of a quality culture since gradually people are becoming more open to feedback and willing to discuss criticism in a more trusting atmosphere. The development of a consultation structure to openly discuss and analyse evaluation results is gradually growing as well, therefore contributing to the development of a quality culture, as affirmed by many interviewees. The implementation of the IFQM is another example of this developmental process. But this will take time, they emphasized.

Shared responsibility, ownership, cooperation and collaboration among stakeholders

According to the majority of the interviewees UA is a young university that recently had undergone many unpleasant incidents, affecting the university's culture and the way people deal with each other. Interviewees mentioned a lack of shared university's sentiment and therefore in their view time is needed to create and encourage a shared sense of belonging, which would also stimulate the development of a quality culture.

At present UA does not show a high level of collaboration across the faculties. Within most faculties collaboration is perfunctory, notwithstanding some personal problems among colleagues. The recent increase in academic staff also brought some challenges to creating a professional culture of sharing and cooperating with each other. New members of this staff bring in different point of views, while the 'old' ones still are loaded with historical pains, thereby affecting collaboration and cooperation across and within faculties. However, all interviewees are convinced that UA is going through a learning process and therefore expect UA to grow within the coming period towards a more collaborative university.

Commitment of internal stakeholders

All interviewees emphasized the great involvement and commitment of all stakeholders to quality and to obtain the accreditation status. There is great personal commitment of the academic staff; they care for the university and want it to be successful. Regardless of the circumstances they do their utmost to do their teaching job as well as possible in order to deliver quality, although lack of information and communication impede this attempt. Interviewees indicated this committed attitude as one of the potential encouraging factors during the accreditation processes.

Norms, values, traditions, customs and people behaviour

As was observed and reiterated by the majority of the interviewees, during the past decade several internal occurrences affected interpersonal relations. It will take time to create a more trusting behaviour among the staff, they further explained. Staff members seem to be afraid of repercussions, since this was a common threat in the past. However, interviewees did experience increasing collective changes in personal approaches, mainly because of the different leadership style of the current rector. Thereby the expectation is that gradually this will create a more trusting way of interacting with each other, which will contribute to enhancing the professional culture in the university.

Interviewees are of the opinion that the content of the programs are of high quality, but the organizational efficiency level is too low. People are constantly re-inventing the wheel due to lack of standardized procedures and agreements in many fields. "The same questions are constantly asked and each time people search for a different answer", one interviewee remarked. Furthermore, another complaint of some interviewees was that each faculty wants to do its own thing; not easily accepting that things are done for them. As observed, this is caused by the lack of communication and cooperation between faculties and support departments and the absence of rules and regulations regarding several issues.

Also the differences in orientation and approach between the faculties do not contribute to building a more unified university, with shared traditions, norms and values. Dissimilarities could be observed and recorded between e.g. old and new faculties, Dutch and US-oriented faculties, old and new staff members, old and new management style at institutional level and the budget allocation.

One interviewee indicated that at the faculty there is fear for accreditation. Due to lack of information and also many uncertainties and ambiguities staff members are not stimulated and encouraged by accreditation and therefore want to postpone it as much as possible.

Communication channels and interaction among internal stakeholders

According to the interviewees UA has a formal (meetings) and informal (corridor) communication culture. Almost all interviewees indicated that UA has to focus on creating a more shared communication culture, mainly to prevent personal stories in the corridors, since within the university there is insufficient formal communication. Also concerning accreditation there is still a lack of information and communication at quite all organizational levels. This hampers the progress of the accreditation processes and therefore things are happening at quite a slow pace. Interviewees specified that not all involved know what accreditation entails. According to them this is crucial for the progress of the accreditation processes; if people do not know what is really expected from them, it will be quite difficult for them to fulfil these demands. So, more communication and information need to be shared.

At institutional level mainly formal communication takes place, such as the weekly meetings of the advisory council to share information and to approve important documents and the monthly IFQM meetings. At faculty level the communication channels differ. For some faculties emails and the meetings of the faculty councils are the most frequently used channels to interact with each other; other staff members meet each other frequently in the corridors to discuss relevant issues in a more informal way.

The most frequently used communication channel is email. However, if emails are not read in time, this communication channel does not succeed, as one interviewee remarked. Interviewees indicated that a culture of consultation is slowly arising within the university, but there is not much interaction yet across the faculties and between faculties and support departments. The interaction between the faculties and support

departments has been identified as a major communication barrier. During the meetings the researcher attended it was noticeable that the collaboration and consultation between these two entities were missing. Lack of information and historical events contributed to this less harmonious sphere. The interviewees acknowledge this shortcoming as a possible constraint for the accreditation processes. However, they expect this ambiance to change since "we need each other to reach the accreditation goal".

Since August 2012 UA has a university bulletin containing a wide diversity of information, including those in the field of quality improvement and accreditation. CQA is in charge of this newsletter in order to spread all relevant information to all internal and external stakeholders.

7.2.3.4 Available resources

Human resources

The total permanent staff of UA consists of 68 FTE, of which about 45% is academic staff. UA also works with more than 100 part time teaching staff. In general, the interviewees stated that the quality and quantity of human resources within the university is insufficient. However, in 2011 and 2012 several improvement activities were implemented directed to reach the HR-approach expected for the university to fulfil its tasks in this matter as required by NVAO. UA is developing an HR-policy plan, while the HR-department is undergoing a restructuring process. Additional HR-rules and procedures will also be adopted, so the university can become more proficient, efficient and transparent in this field. Interviewees declared that the absence of an HR-policy has caused an opaque HR-management approach. An external expert has been hired to write the HR-policy plan and other HR-documents so their implementation can start on time during the ongoing accreditation processes.

As part of the staff development program aiming to further improve the professional level of the academic staff several quality improvement activities have been implemented, such as the implementation of teacher qualification, based on the BKO-model used at Utrecht University, guidance and counselling of new academic staff members by CQA, the organization of monthly lunch seminars on various educational topics and the establishment of a PhD school. Furthermore, in the short term, performance and assessment interviews will be implemented, based on the results of a pilot conducted in one faculty. All these instruments also serve to meet accreditation requirements.

At UA a great part of the academic staff consists of part timers, mainly involved in providing classes based on their specific expertise. No specific training was offered to the part timers as yet, which is considered as a weakness since most classes are taught by them. Though, CQA has the intention of guiding and assisting this group too in the near future. Interviewees also stated that this group is less committed, since this is not their prime job.

CQA staff and the quality coordinators at faculty level, together in the IFQM-team, are those mainly involved in the accreditation processes. They can be considered as the steering officers at institutional and faculty level during these processes. Still, a large majority of academic staff participates in discussions on quality issues during the team meetings and faculty councils. As previously mentioned, all interviewees pointed out that lack of human resources hampers the progress of the accreditation processes. Faculties are understaffed, people are overloaded and there is no (free) time to spend on accreditation. Accreditation requires additional work, but no extra time is granted. So expansion of the (academic) staff is needed together with the engagement of external experts in order to meet the accreditation standards. However, as will be explained in the next indicator, most interviewees argued that the unavailability of sufficient financial resources is a barrier for the realization of these human resource demands.

Financial resources

The university's annual budget is 9million Aruban guilders, equivalent to about €4 million. The main financial sources of UA are government funding and to a significantly lesser extent, tuition fees. In addition, the national government as part of its financial policy has earmarked funds for higher education in the Aruban development fund FDA, which allocates development funds coming from the Netherlands. Portions of these funds can be used for accreditation of UA programs, which makes the planned time frame more feasible. In this manner the financial limitations due to the small scale of the island and the UA are partly addressed. CQA coordinates the requests for FDA funds directed for investment in accreditation activities. Nevertheless, not all accreditation work can be financed by FDA; UA needs to pay for some accreditation events from its annual budget. Up to the end of the research period this has not yet seemed to be a problem.

The opinions of the interviewees were also quite diversified with regards to this indicator. Some explained that the funds would be sufficient if they were used in an efficient and effective way, while others complained of insufficient funds. This last group considered lack of financial funds as one of the major barriers during the embarked accreditation processes. According to them accreditation means investments and more financial resources are needed to realize this endeavour. However, all interviewees emphasize the fact that additional funds are needed to employ external experts to support and facilitate the accreditation processes since the actual academic staff is already overloaded and university-wide there is lack of experience in the accreditation processes. Interviewees expressed their hope that despite the financial crisis the country is confronting, the government will increase UA's annual budget since great importance is granted to higher education in the national politics. However, UA is aware that not much additional financial funds can be allocated by the national government. So, carrying out work that will bring extra money has become quite a necessity, yet the great challenge is the availability of staff to do this, since they are already overloaded. The interviewees argued that extra finance alone will not solve all problems, because additional human resources are also urgently needed.

Facilities

All facilities are organized at institutional level. The facilities are spread over two buildings: one where the faculties are situated and the other one for the support departments and some offices for academic staff. Due to lack of space classes are also taught in the second building.

Many grievances could still be felt during some interviews regarding the centralized organization of the facilities; faculties do not consider it as beneficial for them. For instance, at faculty level no administrative support is present; all is done at central level, e.g. the secretarial support is done by the Office for Educational Affairs (OEA) and not by a faculty.

Interviewees also complain that there are too many support departments and for them it is not completely clear what their tasks are. According to them most support departments do not function well and there is a lack of communication, information and understanding between faculties and these departments. Their contribution is also insufficient and does not always meet the faculty's needs. Interviewees consider the quantity and quality of the support departments as major barriers during the accreditation processes. They further complained that the quantity and quality of the non-academic staff members is insufficient and these staff members also need to become more supportive and service-directed. Lack of communication and a culture of 'we vs. them' could be observed between the support departments and the faculties. Also the physical distance between faculties and facilities does not contribute to creating mutual understanding and communication.

With regards to the involvement of the support departments in the accreditation processes, it could be observed that for most of them the implications of these processes were not well known. More information needs to be spread and their involvement also needs to be enhanced, so their contribution to the accreditation processes can become more supportive.

Most interviewees indicated facilities as one of the greatest barriers during the accreditation process and thus affecting the outcomes; UA is too tightly housed, there are neither enough offices, nor enough classrooms. "With the growth of the student population, we have outgrown our premises", is how one interviewee described it. New housing possibilities are explored, but the interviewees noted that this will be a long term project. IT-facilities were also neither sufficient nor up to date according to several interviewees, and some found the library facilities rather embarrassing for a university. The fast growth of the university was indicated as the prime reason for these limitations. In contrast, other interviewees had no complaints about the facilities.

7.2.3.5 Internal quality assurance policy

Document of Internal quality assurance policy

Quality improvement is one of the strategic objectives indicated in UA's strategic plan (University of Aruba, 2004). In the meantime several of the seven strategic initiatives formulated in order to reach this objective were initiated, such as the structural

meetings with representatives of relevant professional fields to ensure the relevance of the programs for the Aruban community, the start of a teaching certificate program to promote the quality of teaching within UA and the start of the process to reach internationally recognized accreditation. These will ensure the obtained quality level of the programs and stimulate the process of continuous quality improvements.

In 2006 an institutional quality policy plan was developed, which contains guidelines for the internal and external quality assurance systems (University of Aruba, 2006). At faculty level there are no specific quality plans documented. In the institutional plan quality assurance is strongly linked with accountability, which implies that UA's actions need to be transparent, reliable, effective and efficient in order to fulfil internal and external accountability responsibilities. These concepts constitute the foundation for the UA quality policy plan, which aims to achieve three goals: to continuously identify the level of quality provided; to continuously improve and optimize the quality and to be accountable for the delivery of quality to stakeholders. This quality policy plan is still the main source for quality activities within this university. However, according to most interviewees it no longer reflects the actual situation in this field in the university since many changes and developments took place during the past years.

To move away from the previously existing stage of unsystematic, undocumented approach of quality improvement in 2009 the CQA was established. CQA serves to promote, support and facilitate the quality improvement processes at all organizational levels and is in charge of embedding quality assurance in order to ensure continuous attention to quality in a structural and systematic manner (Center for Quality Assurance, 2011). As could be observed, during the past years a wide variety of activities have been initiated by CQA to prepare the programs for accreditation, such as the drafting of self-evaluation reports needed for the baseline assessments, arranging of the baseline assessments, the establishment of IFQM, the implementation of a teaching certificate program, the organization of training to improve the quality of teaching, creating institution-wide modules and test evaluations taken by students at the end of each semester, conducting satisfaction surveys by students and employees and engagement of external experts to support CQA and the faculties.

As is noted in the policy paper of CQA, UA considers attaining accreditation for its programs as a proof of the provided quality level (Center for Quality Assurance, 2011). As the CQA's paper further explained, besides focusing on the quality of the three core tasks, the organizational and infrastructural quality have to be regularly improved in order to create the required conditions to perform these tasks. The seven basic principles formulated in the report "Standards and guidelines for Quality Assurance in the European Higher Education Area" are the guidelines for the implementation of the internal and external quality assurance cycles, together with UNESCO's guidelines for quality provision in cross-border higher education and the NVAO's accreditation framework"(ENQA, 2005; NVAO, 2003, 2011; UNESCO/OECD, 2005;). In addition, great commitment of all internal stakeholders is crucial for quality improvement: Board of Trustees, staff members at all levels, students, but also the Aruban

government. According to this paper, besides NVAO as accreditation organization, UA will approach American accreditation organizations to evaluate the programs offered by the faculties of Hospitality and Tourism (FHTMS) and Social Sciences (FAS). However, as mentioned before, in the meantime NVAO agreed to evaluate all UA programs regardless of their orientation and structure.

Internal quality assurance system

As portrayed in figure 7-5, UA maintains an internal and an external quality assurance cycle that are linked to each other, in a continuous, cyclic approach. This reflects also the steps undertaken during UA's accreditation processes (figure 7-3).

UA aims to implement quality assurance methods in a structural manner based on an integrated, systematic approach of activities to guarantee the quality of educational, research and supportive processes within the university. Three dimensions are identified in UA's quality assurance approach: input (entrance level of students and the quality of the application process of academic staff), process (satisfaction rate of these stakeholders and the quality of the programs) and output (study result and placement of graduates on the labour market). These dimensions are linked to the three processes identified as part of the cyclic quality assurance approach: measuring and recording, then assessing and evaluating and finally controlling and improving to get back to measuring and recording so closing the cycle. This approach is somewhat different from the usually implemented PDCA-cycle. At UA the P- and D-cycles are not seen as specific parts of the internal quality improvement cycle, which starts with measuring and not with planning. Several interviewees pointed out that a PDCA-cycle has not yet been implemented, neither at institutional or faculty level, but the intention is to do this on short notice.
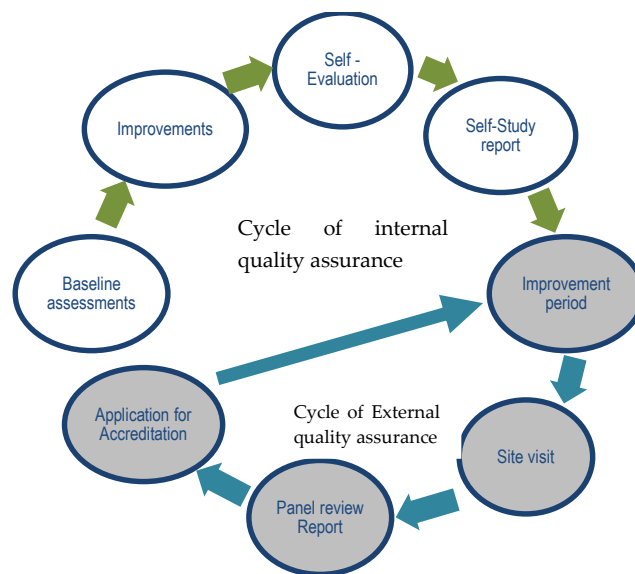
Figure 7-5 Cycle of Quality assurance of UA
Source: Center for Quality Assurance Policy Paper (2011)

Quality improvement will be directed to enhance the functioning of the university by implementing the necessary changes and modifications, but also to comply with the accountability responsibility, since these two are interrelated as was stated previously. Quality measurement instruments indicated to be used are: observation, participation, interview, surveys and document analysis. According to the institutional quality policy plan the dimensions of the quality approach (input, process and output) have to be linked to quality aspects, such as entrance policy, quality of teaching, educational material, educational process, assessment and examinations, and study results, in order to create a framework for the internal evaluation of the quality of education, with specified criteria to be met (University of Aruba, 2006). This framework will also be regularly evaluated and modified in order to meet internal and external educational and technological developments.

While observing the progress of the embarked accreditation processes the different steps of the well-outlined framework for internal quality assurance are gradually implemented. It starts with the baseline assessments in 2009 and 2010 and is followed by implementation of quality improvement activities across the faculties visited based on the assessment reports. By the end of 2012 most faculties were going through their quality improvement process and the first site visit is planned to take place in November 2013.

Already implemented elements of the internal quality assurance system at institutional level that could be identified are: the appointment of a quality coordinator at each faculty, the establishment of IFQM in order to share information and experiences and to reach alignment between the faculties, a staff development program to enhance the quality of teaching, and evaluation surveys of students and employees to provide insight into the satisfaction level of these stakeholders. At faculty level an important role has been granted to faculty councils to ensure quality delivery. However, between the faculties there are great discrepancies in how quality assurance is organized. Again, interviewees complained that everything is focused on achievement of the accreditation status instead of structural embedment of quality assurance.

Quality structure

Table 7-8 summarizes the responsibilities of the internal stakeholders. CQA is the main stakeholder in the quality structure at UA and is accountable to the business director. This quality unit consists of three staff members: one manager, one expert in didactical approach and one staff member in charge of statistical issues.

To align and coordinate all quality improvement actions since August 2012 an interfaculty quality team (IFQM) has been established which meets monthly. Some interviewees are members of the IFQM and indicated that gradually the position of this team is recognized within the institution and the benefits of having such a team have become noticeable, e.g. quality has become part of the agenda of all meetings of faculty councils and a higher level of understanding and comprehension is incrementally created across the faculties.

The quality coordinators at faculty level are in charge of the quality improvement process and can be considered as the steering officers in the accreditation processes. In principle they were appointed to have an advisory and control role, but at most faculties they have the steering role instead of the dean.

Most faculties have a quality team, consisting of the quality coordinator and representatives of all programs, sometimes also the dean or vice dean. In this team quality improvement and accreditation issues are discussed.

Table 7-8 Responsibilities of internal stakeholders at UA

Internal Stakeholder	Tasks and responsibilities
Board of Trustees	Supervises the performances of the Executive Board, based on information received concerning the quality improvement efforts and accreditation within the university.
Rector	Has the ultimate responsibility for the quality of teaching and research of UA; promotes and encourages the accreditation processes by addressing quality issues in a timely and efficient manner.
Business Director	Is responsible for the quality of all financial and operational activities.
Advisory Council	Discusses all internal developments; approves proposals for changes of educational issues coming from the faculty councils; advises the rector on quality issues.
Dean	Is responsible for the quality of teaching and the accreditation process at faculty level; chairs the faculty council to make sound, solid and broadly supported decisions with regards to quality improvement.
Faculty Council	Is responsible for the quality of the programs.
CQA	Initiates, coordinates, supports and guides all accreditation processes; facilitates the rector and business director with all necessary quantitative and qualitative data; provides advice; is in charge of the organization of the (trial) site visits; responsible for students´ and employees surveys; coordinates requests for additional financial funds at FDA.
IFQM	Shares information and experiences; discusses university-wide quality issues; promotes alignment on organizational quality issues and aims to reach agreements; makes proposals for quality improvement actions to be finally taken by the rector.
Quality Coordinator at faculty level	Acts as steering officer during accreditation processes; discusses results of evaluation surveys with relevant stakeholders; is responsible for involvement of external stakeholders at faculty level.
Quality Team faculty level	Consists of the quality coordinator at faculty level and one representative of each faculty program; discusses the developments in the accreditation process and shares specific information on the quality of programs; formulates suggestions for improvement actions.
Academic staff	Discusses all relevant faculty's issues and implications of the accreditation processes and planned quality improvement actions; is part of the faculty council.
Department Heads	Discusses implications of the accreditation processes for the support departments and quality improvement actions to be taken.
Student	Participates in students' surveys and faculty council; provides suggestions for improvement.

Involvement of stakeholders

At UA several stakeholders are involved during the ongoing accreditation processes: academic staff (permanent staff and part timers), students, representatives of the professional field related to the educational programs and alumni. As could be observed, their involvement is gradually increasing within the UA. More formal meetings are initiated and/or formalized in order to share information and take collective decisions at institutional as well as at faculty level. Table 7-9 provides an

overview of the involvement of the different stakeholders during the accreditation processes, although differences could be perceived between the faculties.

Table 7-9 Involvement of stakeholders at UA

Stakeholder	Type of involvement
Permanent academic staff	Involves in faculty councils and discussions on curriculum development and improvement.
Part time lecturers	Involve through formal and informal contacts with permanent teaching staff members.
Students	Involve in the student advisory board, faculty council, course and test evaluations, and STO.
Professional field representative	Participates in field advisory boards, which meetings usually take place twice a year by the faculty in order to receive input for the end qualifications and the curriculum and to inform the academic staff in a more structured manner on contemporary national and international developments in their professional field.
Alumni	Barely any involvement, except for those participating in field advisory boards. Interviewees at faculty level indicated that there are indeed plans to involve this group on a more regular basis, but lack of time did not make this possible yet.

With regards to the academic staff, interviewees indicated that there still is room for improvement concerning their timely involvement in the accreditation processes. However, a trend of increased involvement of the permanent academic staff could be noticed since they have increasingly become more aware of their contribution to quality improvement. Interviewees pointed out that being of a small scale influences the accreditation efforts. Most academic staff members are overloaded and consequently are not sufficiently involved in the accreditation processes. They identified this as another cause of the delays in the progress of these processes. External experts are therefore undoubtedly needed to support this effort, they affirmed.

As the interviewees further commented, students, as part of the external community yet also acting as internal stakeholders, are also more and more demanding quality and have become quite critical if that is not the case. One interviewee indicated that the implementation of the module evaluation and test evaluation at the end of each semester for each module is a result of the demand for higher quality. The evaluations also contribute to the commitment of the academic staff to deliver quality. Following up the results of the evaluations among students, CQA organized meetings with all deans and department heads to discuss the items that did not score well. An action plan was devised and implemented.

UA has strong ties with the ministry of education. There is frequent consultation with the minister in order to discuss common concerns and future developments. Interviewees acknowledge that the minister expects UA to play an important role in the further development of the country and consequently considers the UA graduates of great value in order to reach this goal. Accreditation will contribute to enhancing the local image of UA and thus the appreciation of its quality of graduates.

Involvement of external experts

As frequently mentioned in the previous indicators, the external experts are considered indispensable in UA. According to all interviewees this is extremely necessary, since within the UA there is a lack of experience in the accreditation field. The interviewees indicated that involvement of experts will also alleviate the work that needs to be done by the various stakeholders. Furthermore, the many documents that need to be in place related to the quantitative and qualitative shortage of human resources were motives for this approach. According to most interviewees, UA cannot go successfully through an accreditation process without the support of external experts.

CQA plays a prominent role in recruiting and selecting external experts. Some of these experts are hired to provide general support to CQA and other institutional departments, while others have an explicit task to sustain one or more particular faculty. Support for curriculum development at program level and development of institutional policy plans are examples of support given by external experts to guarantee that all elements required for accreditation will be in place on time. Also the aforementioned baseline assessment, the accreditation scan and the development of action plans were done by external experts in close cooperation with CQA and the faculties. By the end of the research period the interviewees were satisfied with the received professional support by the engaged external experts.

During the research period the researcher was also hired as an external expert, making direct observation possible as a source of data collection for this case description. The remaining experts are coming from universities located in the Netherlands and the University of Puerto Rico.

7.2.4 Summing up

Looking back at this case description, one conclusion that can be drawn is that the situation at University of Aruba is quite diverse: different levels and orientation of programs offered, combined with 'old' and 'young' faculties make the educational profile fairly complicated. In addition, many historical events still play a significant role within the university, causing fragmentation, division and lack of trust and openness. These also affect the progress of its first accreditation cycle, expected to be completed in 2014.

UA can be categorized as a small, hierarchical, centralized, developmental, resource-poor university. Although the *organizational structure* can be labelled as a dual hierarchy with the president of the Board of Trustees involved in the daily management of the university, no influence of this structure on the progress of the accreditation processes could be detected.

One observation is worth noting explicitly. There were acknowledged differences between the previous and the current institutional leaders and thus the impact of the academic leadership at all organizational levels. Still, both leaders show high level of commitment to enable the accreditation processes to reach the accredited status for the UA programs. In any case, the democratic and transparent *leadership style of the current*

institutional leader is expected to encourage a harmonious sphere in the university, contributing to more collaboration and cooperation across the different institutional units and thus projecting a positive influence on the progress of the accreditation processes.

At *faculty level a diverse management style* could be perceived. Nonetheless, a perceptible influence of this difference during the accreditation processes could not be detected. CQA plays a central role in the accreditation processes, together with the quality coordinators at faculty level, which enables the progress of these processes. In addition, UA works with several *external experts* due to *insufficient quantitative and qualitative human resources.*

UA has an *institutional quality policy document* and a *centralized internal quality assurance system* that is gradually spreading. Most *stakeholders* demonstrated a high level of involvement and commitment, yet complaining about the heavy work load. Still, *a quality culture* needs to be further encouraged and the *quality structure* has to be more solidly embedded. Additional funds for the time being seem to fulfil the financial requirements, but these are not part of the regulatory budget so a secured *financial position* is not in place. Also *expansion of the facilities* is urgently required in order to meet the accreditation demands. It is still to be seen whether structural embedding of all the accreditation requirements will actually occur on time and how in the long run quality will be continuously ensured and controlled.

To summarize, so far the following encouraging factors *(enabler$_P$)* could be identified facilitating UA's accreditation processes: the role of the rector, the committed attitude of the academic staff, the timely support and high engagement of CQA and the involvement of external experts. Barriers *(barrier$_P$)* that can hinder the progress and outcomes of the accreditation processes are overloaded staff members, lack of expertise with these kinds of processes, the dissimilarities across the faculties, the quality of the support departments and the conflicts between faculties and support departments. Therefore, also in the case of the University of Aruba the preliminary conclusion is that 'human resources' will be the enabling factor to reach the accreditation goal.

7.3 University of St. Martin

The University of St. Martin (USM) is a small, private higher education institution located on the Dutch side of the island of St. Maarten. The University of St. Maarten Foundation was established in 1989 with the aim to provide local citizens with study possibilities in order to bring the St. Maarten's community to a higher educational level (University of St. Maarten, 2003).

The USM case description is based on document analysis and three in-depth interviews conducted in December 2012. The interviewees were the president of USM, the academic dean and one staff member supporting the accreditation efforts; all interviewees are members of the project team directing the accreditation process of the Teacher Education Program (TEP). They provided elaborate information for this case description.

By the end of the research period USM had just started its first accreditation process. Because of this early stage of the accreditation process not all five variables, nor most of the 17 indicators, can be systematically described.

7.3.1 Institutional background information

The University of St. Martin emerged from the former Mullet Bay Institute for Hospitality training programs as a private institution for higher learning that would benefit the Dutch and French sides of St. Maarten as well as the neighbouring Caribbean islands. According to its statutes the purpose of USM is to organize and further regulate the higher education on St. Maarten (University of St. Martin, 2003). Furthermore, this university aims to organize and develop itself according to (inter)nationally accepted academic standards.

The USM business plan states that the university aims "to become an Institute of Higher Learning, with an internationally recognized quality of education on a solid organizational and financial foundation" (University of St. Martin, 2011b, p.59). On the one hand the university has the aspiration to continue fulfilling an important role in training of professionals that St. Maarten needs by allowing students to study at USM as long as possible. On the other hand, USM wants to provide more possibilities to associate graduates to continue their studies seamlessly at the bachelor level within USM or at international accredited universities within the Kingdom of the Netherlands, the region or the world at large (University of St. Martin, 2012c).

In 2011 USM initiated a thorough reorganization process to transform the university into a "sustainable organization, which is economically driven" (University of St. Martin, 2012c, p.6). The aim was to solve the administrative, financial and personnel challenges USM was confronted with at that moment in time in order to guarantee its further existence. Mainly the financial position of the university was precarious, and USM was heading to bankruptcy, even possible closure if the situation was not tackled immediately. As stated in the SOAB report "USM has insufficient preconditions in place to realize all of its objectives" (Stichting Overheidsaccountants Bureau, 2011, p.9). Thereby, it was time for a profound turnaround.

USM conducted research in 2011 to collect solid information to realize the organizational turnaround and to give input for a new business plan[32]. One of the research results indicated that USM should be accredited or at least make sure that many universities accept their associate graduates (University of St. Martin, 2012c).

---

[32] To give input to the new business plan USM held interviews and meetings/forum discussions with different stakeholders: staff, students, government and ministry of education, study finance, alumni, students, secondary schools, business sector, hospitality sector and unions. This approach, like a 360 degree reflection, has led to a comprehensive picture of USM from different angles of what is needed when it comes to tertiary education in St. Maarten. The results were also clear indicators whether USM is on the right track when looking at the offered programs. In addition, SOAB and PWC conducted financial audits to shed light on the financial position and vulnerabilities of the institution (SOAB, 2011; PWC, 2012).

USM aims to realize this demand by offering quality programs while collaborating with accredited universities, but also by going through accreditation processes by itself. It is expected that with offering accredited programs a financial purpose will be served too.

According to its business plan, it has become imperative for USM to expand quantitatively in the number of students enrolled, but also in the number of programs offered (University of St. Martin, 2011b). In fact, the reasons for low enrolment during the past years are actually the lack of alliances with accredited universities and a limited range of programs. It is in this context that the start of two new bachelors programs in 2012 jointly with UoC has to be considered. By doing so USM also aims to enhance its consistent input to the sustainable socio-economic development of the island.

The new strategic approach is directed to offer programs in a more efficient, sustainable way based on an optimal balance between cost overhead and income (University of St. Martin, 2011b). USM also intends to increase its income by an effective exploitation of the premises and establish stronger connections between the university and business stakeholders, while becoming the preferred training supplier for the government. The university is convinced that the embarked reorganization process will generate sufficient financial means to make USM sustainable in the long term. Providing high quality programs is considered to be an instrument of eminent importance to achieve the set strategic goals.

In academic year 2012 – 2013 USM consists of two divisions: Business and Education, offering besides a wide variety of continued education programs and GED[33], six associate and three bachelors programs. USM has about 200 students, of which an average of 85% participate in programs at higher education level.

USM has always been organized according to the American higher education system and caters primarily for the local labour market. The focus is on associate programs in order to meet the necessities of the islands' labour market and also the need of local students for short higher education programs. Since there is great demand in the business sector, most students can be found in the business programs at associate as well as at bachelor levels.

USM is located on an island of about 35.000 inhabitants. So, the problem of scale plays an important role in the provision of educational programs. Most associate graduates who want to pursue a higher educational level continue their further study abroad, in particular in the USA. According to the interviewees, this also can be considered as an indirect way to guarantee the quality of USM programs, since these universities

---

[33] USM also offers many other courses that are not at higher education level, such as languages and business courses and General Equivalent Diploma (GED), considered as the same level of high school/Havo, directed to school leavers, school drop outs, incarcerated youth and the general public. About 30% of the GED graduates enroll in further study at higher education level in USM.

evaluate the associate programs of USM in order for their students to have a seamless transition.

The interviewees commented that another important characteristic of USM is that the majority of the students (average of 60%) are already employed whilst they are studying, which explains why all the classes are offered in the evening hours. Especially the students of business programs are already working and follow these programs with job promotion in mind. The majority of the students will remain on the island after graduating. USM directly contributes to the enhancement of the educational level of the islands' citizens and also the service level of the business sector; thus, meeting one of its core objectives.

During its years of existence USM has collaborated with several regional and American universities. In its business plan USM states that in order to assure higher enrolment of students, the university will (re-)connect to more accredited universities (University of St. Martin, 2011b). Moreover, USM in 2012 has initiated the establishment of a strong collaborative relationship between UoC, UA, IPA and USM, to be named UniCarib. USM is convinced that if these small higher education institutions pull their strengths together more possibilities will be created and the limited funds can be more efficiently used. Also the exchange of knowledge and expertise of the universities will bring great advantages, tackling in that sense the problem of scale they all are confronted with.

7.3.2 The dependent variables

It was not until 2011 that an accreditation process coupled with the NVAO requirements was initiated in USM. So far, this accreditation process has not been completed. Therefore, in this section attention can only be paid to the strategic approach of this university towards accreditation, the outlined plans and the steps already taken.

Strategic approach towards accreditation

There are many reasons why the national government finds it important to have a national higher education institution in St. Maarten despite the small scale of the island (Stichting Overheidsaccountants Bureau, 2011; University of St. Martin, 2003, 2011b, 2012a, 2012c). USM provides possibilities to study at higher education level for those who cannot leave the island and also enabled more talents to stay on the island, thus addressing the brain drain concern. More students at USM will also benefit the island government since a less expensive study finance budget will be needed to send students to study abroad. USM is expected to deliver graduates who are able to contribute to further sustainable socio-economic development of the island. The embarked reorganization process is meant to change the many challenges USM is confronted with into feasible solutions in order to meet the need for quality national higher education (University of St. Martin, 2011b).

The SOAB report states that the national government acknowledges the fact that a quality tertiary education is necessary to develop a community that is self-supported

(Stichting Overheidsaccountants Bureau, 2011). According to this report several governmental departments requested that USM offer more academic programs for two reasons. One is to reduce the amount of study grants for pursuing tertiary education internationally (the costs for international study grants are twice USM's budget) and the second is to guarantee highly qualified graduates who can sustain the further development of the island. The quantitative research conducted by USM also demonstrated that with USM's current degree programs about 30% of the total vacancies for jobs that need tertiary education in St. Maarten are covered (University of St. Martin, 2011b).

The educational profile described above clarifies the late start of accreditation processes in USM. Document analyses and interviews reveal that no need to embark in such a process was felt since on the one hand its programs were evaluated through their collaborative partners in order to accept their associate graduates and on the other hand in the past neither the local market nor the government pressured USM to do so. Lately this has been changed and specific demands of these two last groups concerning the quality of the programs offered at USM were registered. Also financial constraints did not allow USM to start accreditation processes for the business programs at an earlier stage. Consequently, it is only in recent years that accreditation efforts have become part of the institutional objectives.

The first step toward a possible accreditation status was made in 2008 when USM attempted to get accredited through the Southern Association of Colleges and Schools in USA (SACS, 2012)[34]. This effort to attain institutional accreditation was done during the period 2008 – 2010. An accreditation officer, first an international one recruited from the USA, then a local one temporarily facilitated by the government, was appointed to direct and control this process. Some of the measures implemented during that period of time to improve the institutional quality were expansion of the management team with an academic dean, a financial manager and a librarian, renovation and expansion of the infrastructural facilities, review of the mission statement, development of a strategic planning document, outlining of an HR policy and development of recruitment and admission plans. However, during this process it became obvious that USM could not meet the accreditation requirements of this American accreditation organization. The problem of scale and serious financial constraints were the prime reasons to make a halt to this process (Stichting Overheidsaccountants Bureau, 2011; University of St. Martin, 2011b, 2012c).

According to the self-assessment made by the accreditation officer at that moment in time to verify where USM stood as to the core requirements and comprehensive accreditation standards of SACS, USM was 34% ready for an accreditation. However, SOAB reported this as a little too optimistic since many quality improvement measures still had to be taken, such as improvement of administrative capacity, alignment

---

[34] SACS is recognized by the federal department of education and by accreditation umbrella body CHEA as the regional accreditation body of degree-granting higher education institutions in the southern states of USA.

between institutional objectives and departmental and program's goals, implementation of research based planning, development of program catalogues, implementation of a quality improvement plan and improved adequacy of the library (Stichting Overheidsaccountants Bureau, 2011). SOAB also mentioned in its report that in order to continue with the pursuit of accreditation the university will need additional financial resources to meet all accreditation standards. In addition, further analysis of collected documents in this matter shows that USM decided that such a large-scale operation was not really necessary, since its American collaborative partners are accredited universities that do accept their graduates. If the USM programs did not meet the requested quality standards, these universities would not have done so as it could have brought their own accreditation in jeopardy (University of St. Martin, 2011a, 2012b).

Notwithstanding the decision to stop pursuing SACS accreditation, USM still re-iterates the importance of accreditation. Interviewees confirmed the significant importance of achieving an accredited status for USM programs. They acknowledge the added value linked to offering accredited programs in order to comply with worldwide developments in the field of higher education. As mentioned in its business plan, alliances with international recognized universities will be facilitated if the university has an accredited status (University of St. Martin, 2011b). Expansion of collaborating partners is also an additional benefit. Hence, having an accredited status proves that high international quality standards are met, which is important nationally, but also in international collaborative relationships.

As indicated in its business plan and affirmed by the interviewees, for the national community accreditation is a guarantee of the delivery of highly qualified graduates necessary for the further sustainable development of the island (University of St. Martin, 2011b). Moreover, the status of USM will be improved since stakeholders will grant USM a respectful position and recognize its value if an accredited status is obtained. Accreditation is also considered as a tool to fight brain drain; more students will be kept on the island. Lastly, accreditation is also a marketing tool; an accredited program will recruit more students and an increase in the number of enrolled students is necessary to secure more financial means, the interviewees further emphasized.

For students accreditation is beneficial to their future position; graduating with an accredited diploma offers more possibility for further study and graduates can also be employed elsewhere, outside the island of St. Maarten. All these reasons contributed to creating a higher awareness of quality assurance and accreditation within the university and the willingness to continue the pursuit of an accreditation status.

Based on document analysis and the conducted interviews, table 7-10 provides an overview of the strategic approach of USM towards accreditation of its programs (Stichting Overheidsaccountants Bureau, 2011; University of St. Martin, 2011b; 2012c). Obviously, a different strategy is implemented, depending on the type of program. Associate and bachelors programs will be offered by or in close cooperation with other regional and international accredited universities in order to guarantee the quality

level of USM programs. As foreseen, on short term only TEP will go through a self-regulated accreditation process.

Table 7-10 Strategic approach USM towards accreditation

Program	Strategic accreditation approach
Associate programs	No accreditation but sufficient recognition via alliances with internationally recognized universities: being connected to accredited universities is a guarantee that the quality assurance of the USM programs is in place and of the right quality level. If students wish to pursue a bachelor's program after their associate degree, USM will arrange a seamless transition to its affiliated universities.
Bachelor and master programs	Offered under the umbrella of international accredited universities and the students will acquire the degrees from these respective universities. These universities will also make demands on USM and force an implementation of a solid quality assurance system.
Teacher Education Program	A self-regulated accreditation process for TEP is necessary, since this program in its present format cannot be linked to any other university.

By the end of 2012 USM was in the starting blocks of its first accreditation process according to the second accreditation framework of NVAO, aiming to reach an accredited status for the Teacher Education Program in 2014. At that moment in time it was not yet clear when the accreditation processes of the other bachelor programs, which started in September 2012 as a joint venture with the UoC, will be initiated. No timeline for that accreditation effort has been set yet.

Accreditation process of TEP

For many years USM has offered a teacher training program in close cooperation with the University of Virgin Islands (UVI). However, with the introduction of the Foundation Based Education as a new system for primary education in the countries of the former Netherlands Antilles, it became imperative to modify this program in order to meet the demands of this new education system. As a consequence, in 2007 the new Teacher Education Program (TEP) in its present form was born.

In 2012 the accreditation process by NVAO for TEP was initiated. The TEP accreditation process demands improvement of several organizational factors, which as was expected will lead to quality improvement of the full university. Interviewees emphasized that the TEP accreditation process is fully supported by the national government. After all, accreditation ensures that the quality of the program meets the required standards, which is considered as evidence that the investments are well spent. This will also secure the financial funding from the government. Furthermore, working towards accreditation will lead to improvement of the quality of education in St. Maarten because highly qualified graduate academic staff will be delivered to the elementary education. As a result the level of education to be offered at elementary schools will be assured and stabilized. Currently there are too many teaching personnel temporarily coming in from the Netherlands, which causes instability in the education field.

Interviewees commented further that the fact that TEP is going through an accreditation process has also to do with the prospect that in the near future USM will

have to prepare teachers for the islands of Saba and St. Eustatius as well. This is a wish that the Netherlands has already expressed during meetings with the Dutch Ministry of Education. Thus, to attain an accredited status for TEP from the NVAO has become of great importance for USM.

From documents analysis various reasons could be identified to justify the late start of the accreditation process of TEP. To begin with, as previously mentioned, the intention was to obtain an institutional accreditation by SACS. This institutional accreditation would have also included an evaluation of the quality of TEP. By doing so, the quality of TEP would have been guaranteed. As stated earlier, this accreditation process was cancelled in 2010. Changes in the management of the program also led to some postponement in the start of an accreditation process at program level. And the serious financial constraints can be considered as another cause for this delay.

In the meantime some preliminary steps have been taken directed towards the actual start of an accreditation process for TEP. On request of the funding agency USONA[35] in 2009 the Netherlands Antilles Centre for School Improvement (NACSI) conducted a midterm evaluation of the organization, implementation and content of TEP to verify if the financial funds provided by USONA for the implementation of a new training program for elementary teachers were well invested (University of St. Martin, 2010c). This evaluation report was quite critical. Many recommendations were made to improve the quality of the program. At that moment the quality improvement process of TEP started when several measures based on NACSI's report were taken, such as the review of the program catalogue, the intensification of the contacts with the ministry of education to receive input from the professional field and the completion of the construction of new facilities.

Thereafter, in 2011 the government requested an independent evaluation of the quality of TEP in order to determine how its funds were invested and if this investment is worthwhile considering the quality of the offered program and to confirm that the quality was competitive with the national needs and international standards (University of St. Martin, 2012a). This desk audit was conducted by NQA, based on a self-evaluation report, additional documents provided that give an overview of the program, assessment documentation, e.g. portfolio's from fourth year students, and interviews with the first cohort alumni of 2011 (NQA, 2011). The NQA report concluded that "The committee is satisfied that the intended learning outcomes are realized in the final portfolios. The portfolios meet the bachelor level for the professional teacher in cycles 1 and 2 of Foundation Based Education" (NQA, 2011, p.5). The desk audit report resulted in the green light for the start of TEP's accreditation process since it has confirmed that the quality of this program meets the accreditation standards of NVAO. Although some recommendations were made for further improvement of the quality of TEP, the results of this desk audit are considered

---

[35] USONA is a funding agency distributing financial resources granted by the Dutch government to finance particular projects in the former Netherlands Antilles. USONA also has a monitoring and controlling role with regards to the use of these funds.

as an important contributor to the next steps during the accreditation process, which are illustrated in figure 7-6. For USM accreditation of TEP has become more feasible and realistic.
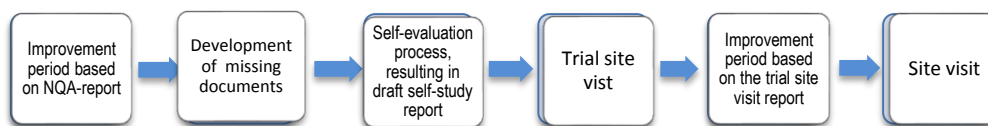
Figure 7-6 Prospective accreditation process of TEP

A project team has been installed and in close cooperation with an external expert the accreditation process outlined in figure 7-6 will be guided, monitored and controlled (University of St. Martin, 2012a). Interviewees pointed out that during 2013 improvement actions will be implemented to prepare for the trial site visit to be held in the last part of that year. Thereafter, the last necessary improvement actions will be realized to finalize the preparations for the site visit by NVAO, originally planned to take place in June 2014, yet in the meantime postponed to December 2014.

Worthwhile mentioning is the fact that USM has received funds from the national government to develop four minor courses (certificate programs) as part of the TEP, which are also offered to current elementary school teachers (University of St. Martin, 2012b). These minors will also be part of the program to be accredited by NVAO. By doing so in an indirect way the quality of various parts of elementary education will be improved as well, thus realizing one of USM's prime goals: to contribute to the further sustainable development of the country St. Maarten.

7.3.3 The independent variables

As explained earlier, the higher education programs offered at the University of St. Martin have not yet passed through an accreditation process by NVAO. Consequently, in this study elaboration on the influence of the five independent variables on this process is not feasible. Nevertheless, based on analysis of a variety of institutional documents and three in-depth interviews in this section the situation with regard to the five variables and the 17 indicators by the end of 2012 is described as much as possible.

7.3.3.1 The organizational structure

The organizational chart

As part of the reorganization process, the old university organization model will be renewed into the new organizational chart, portrayed in figure 7-7. Despite the portrayed hierarchical structure as much as possible responsibilities will be delegated low in the organization, as one interviewee indicated. The emphasis will be placed on

functions that are strictly necessary to upgrade USM in a (financially) responsible manner.

The Board of Directors operates at a strategic level and determines the institutional strategic approach and policies; they are also responsible for securing sufficient financial funds. The members are representatives of professional fields on the island and one representative of the island government. According to the statutes this board has great influence on the governance of USM (University of St. Martin, 2003). However, according to one interviewee in practice great freedom is granted to the president to enable efficient approach of the daily operations, taking into account the initiated reorganization process.

In USM's business and social plans it is noted that the president is in charge of the general management of USM in close relation with the Board of Directors (University of St. Martin, 2011b, 2012c). The president is responsible for the realization of USM's new style and has to work towards innovation and development of the university, including achievement of the accredited status (University of St. Martin, 2012c). The president meets almost weekly with the board to discuss relevant strategic issues, including the progress of the accreditation process.
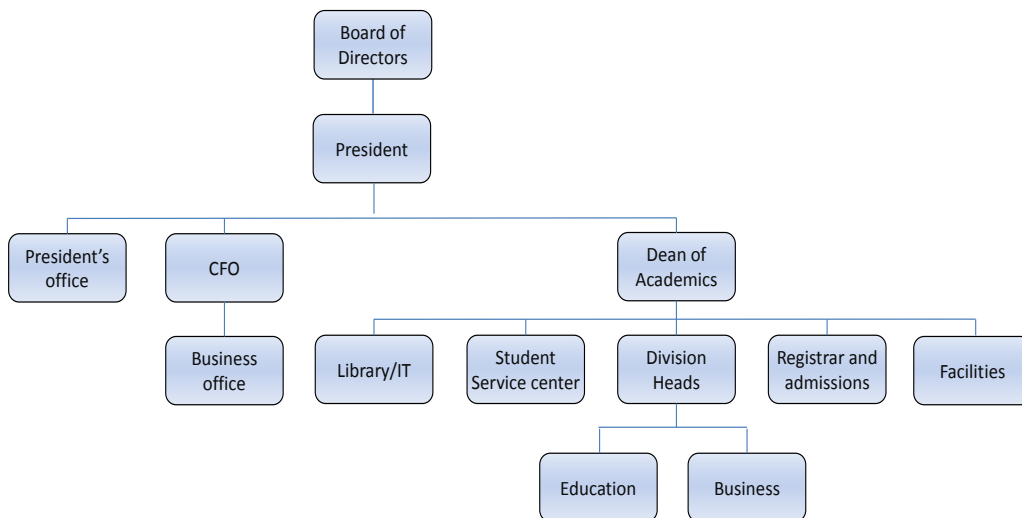
Figure 7-7 Organizational chart of USM

The 'Dean of Academics' has the overall management of the operational processes to contribute to innovation, development and marketing of the institution. The role of the dean is, according to the American system, to safeguard the academic process in terms of learning outcomes, policies and procedures. He also represents the academic staff in all matters and takes care of all the student's needs. So, the dean is the linking pin for both the academic staff and students. He can be considered as a 'watch dog' to guarantee that the academic staff and division heads do what they are supposed to do to meet the quality standards. The division head is in charge of the academic process in each division and reports to the dean.

Decision-making structure

According to SOAB the board has a bottom up approach to the organization; in close collaboration with the president policies are developed and formalized (Stichting Overheidsaccountants Bureau, 2011). In addition, SOAB has noted that there is lack of formal reporting regulations and requirements, which can have an adverse impact on the effectiveness of the management and control system.

The president holds biweekly meetings with the management team (CFO, dean, registrar) to discuss and develop proposals at institutional and departmental levels. Based on these meetings policy proposals are developed and presented to the board. These meetings are also used to share all relevant information to improve efficiency within USM.

The dean periodically has meetings, of a more or less informative nature, with division heads and the head of the support departments. Proposals of any department are discussed during such meetings. Accreditation is an important topic addressed during these meetings.

Division heads in cooperation with the dean and relevant faculty members set the program objectives and curriculum of all education programs. The division heads report at the end of each semester to the dean about the progress of their education programs. For instance the division head of Education reports on the progress of TEP's accreditation process.

There is an academic committee that, besides other tasks, is responsible for controlling the quality of the academic programs and overseeing continuous improvement and development of these programs and the academic staff. This committee, consisting of two board members, the dean and the president has monthly meetings. Periodically they review the assurance of standards of quality in admission, programs, teaching staff, academic administration and the granting of degrees. The academic committee also reviews proposals affecting the academic programs brought forward by the dean and president of the university (University of St. Martin, n.d.).

By the end of 2012 a project team was installed to manage TEP's accreditation process. This team consists of the president, the dean, the division head Education (=TEP's program manager), one TEP teaching staff member, two institutional staff members and an external consultant. This team meets monthly, mostly via Skype since not all members are residents of St. Maarten. The project team has developed an implementation plan and an overview of all missing documents concerning TEP's accreditation attempt. During 2013 members of this team will be in charge of developing the missing documents, guided and supported by the external consultant. It is important to note that this external consultant is the institutional quality manager of UoC.

7.3.3.2 Leadership and Management

Role of institutional leaders

According to the interviewees the president is expected to play a determinant role during the accreditation process, while chairing the project team, yet the TEP program manager will be the steering officer.

"Management will give full cooperation to get this thing done"; "We are going to do everything in our power to make it work, that's how we also contribute to do the desk research; we did all we had to do". These are some quotations of one of the interviewees to illustrate the importance given to TEP's accreditation process at institutional level.

Management at faculty level

The TEP program manager is also the division head of Education and is a member of the accreditation project team. She is in charge of the implementation of all improvement actions at program level in order to meet the quality standards of NVAO (University of St. Martin, 2012a).

Since the accreditation process was only in its starting blocks by the end of the research period, concrete information on how institutional leader and the division head perform during this process could not be collected.

7.3.3.3 Quality Culture

Care for quality

Interviewees indicated that USM is in a developmental process. Although there is awareness on the importance of quality, a quality culture still needs to be developed. According to them, the fact that the majority of the staff is part time hinders the continuous focus on quality. USM still has to increase its attention to this group. However, the interviewees brought forward their conviction that all involved are aware of the importance to deliver quality and are committed to meeting the various organizational goals, the accreditation one in particular.

Shared responsibility, ownership, cooperation and collaboration among stakeholders

Since the accreditation process has not really started yet, detailed information on this indicator could not be collected; the document analysis and interviews did not provide any relevant information on this indicator.

Commitment of internal stakeholders

The staff members to be involved in TEP's accreditation process have demonstrated great interest in the predecessor of this process, namely the NQA's desk audit. According to the interviewees, no change in this attitude is expected to take place. They are convinced that the internal stakeholders are committed and willing to contribute positively to the progress of the upcoming accreditation process.

Norms, values, traditions, customs and people behaviour

The Code of Ethics is the guiding thread in the way the members of USM's community handle and communicate with each other (University of St. Martin, 2010a). The defined core values are elaborated in this document, providing the university staff members with additional information on how they are expected to act. During the interviews no particular norms, values and traditions could be identified.

Communication channels and interaction among internal stakeholders

During 2012 the president initiated the distribution of a "President Note" containing information on relevant internal developments. The circulation of this brief information bulletin among all staff is to ensure shared understanding of the activities, goals and objectives of USM. Furthermore, during the wide range of meetings being held within the university information is shared among the participants to improve efficiency at USM. In USM email is also a wide spread communication channel among the internal stakeholders. These communication channels are expected to facilitate the flow of information among the stakeholders during TEP's accreditation process.

7.3.3.4 Available resources

Human resources

At USM 60% of its personnel formation consist of permanent staff, of which only the division heads and the dean are part of the academic staff (Stichting Overheidsaccountants Bureau, 2011; University of St. Martin, 2011b). The remaining 40% are part time academic and non-academic staff. The great majority of the academic staff is not permanently employed at the institution, but are part time lecturers that during daytime work in the field of the corresponding programs. The interviewees do not consider this fact as a limitation, since USM has no financial means to have full time academic staff members. The interviewees emphasized that a broad scope of permanent academic staff is too expensive for such a small university. Advantageous for the use of part time lecturers is also the extensive working experiences that they include in their lectures.

According to the social plan, USM has too many employees in relation to its size. As part of the reorganization process the non-academic staff will be cut by 30% to obtain a more sustainable organization (University of St. Martin, 2012c). The conducted research brought forward that all the embedded functions, such as registrar, marketing, dean and admission are excessive for an institution of the size of USM. They usually fit into a higher education institution with a significantly higher amount of students compared to USM to satisfy sound financial sustainability. That is why with the new organizational structure some of the operational functions are merged. In the new organization as envisioned, the remaining non-academic staff will be working cross functionally, based on broader job descriptions. However, interviewees brought forward that no effect on the TEP's accreditation process is foreseen due to this personnel reorganization.

In 2012 an external consultant was appointed to USM to develop an HR-plan and outline an HR-cycle in order to enhance the quality of the human resources at USM. The interviewees pointed out that they are convinced that improvement of the quality of the human resources will result in a higher job satisfaction rate and subsequently have a positive impact on the accreditation process.

To guarantee the quality of the academic staff the minimum requirement for any faculty member is a master's degree. Only in exceptional cases the bachelor level with many years of work experience is accepted. There is no training and education plan yet available to work consistently on the quality of the academic staff. Interviewees indicated that during the past years the shortage in financial means had a negative impact on the realization of the training needs of the faculty members and the appointment of more skilled personnel, which is also a requirement for accreditation (University of St. Martin, 2012c). Working on this shortcoming is necessary since it affects the initiated accreditation process.

Financial resources

The annual budget of USM is about $2 million, equivalent to €1.5 million, including the financial funds for the Teacher Education Program provided by the national government. The main income revenues are tuition fees, governmental funding, rental of building facilities and donations. In past years USM coped with a precarious financial situation (Stichting Overheidsaccountants Bureau, 2011; University of St. Maarten, 2011b, 2012c). Due to the low and stagnant enrolment of students and the low tuition fees the generated incomes were not sufficient to sustain the university's operations.

USM is an expensive higher education institution since notwithstanding its small size it still has to have sufficient resources and a minimum of overhead in place to be able to operate properly to guarantee that the quality of the programs can meet international standards. The financial resources that were available did limit the internal operations. The fragile financial situation was one of the main reasons to start the profound reorganization process.

There is a general subsidy ordinance, but no particular subsidy agreement has ever been signed between the government and USM containing standards on quantity and quality of the education products to be delivered. On a yearly basis USM receives government subsidy of about $340.000, although this amount varied during the years. According to SOAB through the years this has been done without applying the rules mentioned in the subsidy ordinance (Stichting Overheidsaccountants Bureau, 2011). It was never clear which products and services were being financed by the government and what was required from USM.

In order to secure the continuance of the TEP program since it fulfils a great need in St. Maarten, in 2012 it was agreed that between the Ministry of Education and USM a Service Level Agreement (SLA) will be signed. The SLA serves to guarantee sufficient government funding geared specifically to TEP to ensure high quality teachers' education and balanced budget investments (University of St. Martin, 2011b). With the

introduction of the SLA it is expected that the bottleneck of the actual governmental funding will be alleviated and that as of 2013 onwards the government will indeed cover all costs related to TEP.

Government support (subsidy and tuition fees via study finance to the students) forms an average of 27% of the total income of USM, which is less than the income from tuition fees that covers 62% of the university's income. The remaining sources of income are not sufficient to fill the rest of the budget. This is a point of concern since financial strength of the organization is also an accreditation requirement.

Based on the conducted research USM realizes once more that the institution needs to aim to become self-supported since the government can only grant limited financial means. According to the interviewees one of the key factors to create a financially healthy university is impressive increase of the student numbers. They indicated that offering of associates and bachelors programs that are accredited by international universities will contribute to reaching this goal. Another measure to generate more income is the rental of its facilities in the morning hours, since its educational classes mainly take place in the evening hours. A separate foundation has been established, USM Endowment Foundation, which is in charge of this project and as the interviewees noted, the benefits of this approach has already become visible with an increase of the monthly income.

The scale of the island plays an important role in the realization of the goal to increase financial revenues. For example, increase of student enrolment will enlarge the university's income, but there is not a large number of students that meet the prerequisites to enter USM. And, to offer a wider range of programs for students to stay on the island and visit USM is not feasible with the islands' population number. This is also not possible without an increase in the cost of human resources, academic and non-academic staff. So, the interviewees brought forward that one great challenge for their university is how to offer financially sound quality programs for a low number of students.

According to USM's business plan and also its social plan, one of the main causes of the financial shortcomings was TEP, which was started in the fall semester 2007 (University of St, Maarten, 2011b, 2012c). This program ran with great losses due to insufficient enrolment, which had a negative effect on the financial balance of the whole institution.

To financially support TEP's accreditation process in 2012 USM received a grant of €60.000 from the Dutch Ministry of Education. Two additional staff members and one external consultant were hired to support the accreditation process and the recommended improvements in preparation for an NVAO site visit. These additional financial means will make it possible that this process can pass through without any financial constraints. USM has also asked the national government for additional funds to be used to finance TEP's accreditation process. At the end of the research period the government has not yet agreed to this request.

Facilities

The support departments at USM are organized at institutional level to facilitate and support all activities associated with the academic process (figure 7-7). Each division can use these facilities for successful implementation of its programs. With its reorganization process USM aims to upgrade all facilities with emphasis on library and ICT, which is also expected to contribute to TEP accreditation process (University of St. Martin, 2012c).

The facilities seem to be sufficient to support TEP's accreditation process. No complaints on this matter have been obtained during the interviews, nor in the studied documents. SOAB confirmed in its report "USM has a new and expanded physical location with appropriate classrooms for its education programs" (Stichting Overheidsaccountants Bureau, 2011, p.9). Also the NQA report states that "The alumni are satisfied with the resources and facilities at SMU" (NQA, 2011, p.4).

7.3.3.5 Internal quality assurance policy

Document of Internal quality assurance policy

During the former accreditation process geared towards compliance with SACS requirements, USM established the following vision on the quality of its education programs (Stichting Overheidsaccountants Bureau, 2011):

> "The University of St. Martin will become an accredited institution recognized for providing quality of education and training and for the impact of its research, teaching and service to the country St. Maarten and the region. The university will identify educational and training needs in the country St. Maarten and fill those needs with quality programs. The excellence of our programs will be recognized locally and internationally. The university will earn recognition from all stakeholders: students, alumni, faculty, staff, families of students, government officials, non-governmental organizations and business as an institution to be nurtured and of which to be proud" (p. 25).

However, this vision has never been translated into a quality policy plan, followed by an internal quality assurance system that can result in a continuous quality improvement approach as required for accreditation. Until the end of the research period USM has mostly ensured the quality of its programs by aligning the curriculum of its programs to the curricula of accredited programs from collaborating universities, such as the University of the Virgin Islands (UVI) for its former teacher training program, the UoC for the business programs and the ICUC[36] for the hospitality and tourism program. In addition, the quality of the education programs and student results are monitored by the division heads and the dean, which in turn are monitored

---

[36] However, it is known that ICUC has never gone through any accreditation process for its programs. In fact, this university maintains the same strategic approach as USM: collaborative agreement with accredited universities.

by the academic committee. Changes in programs are only allowed after approval of this committee. Interview results demonstrate that USM is aware that there is still room for improvement of this internal quality assurance approach.

Internal quality assurance system

USM has no planning and control system in place. There is no formal structure where policies and organization objectives are established and systematically translated into year plans, department plans and program plans with their related budget and risk analysis. Document analysis reveals that there is no continuous comparison between the organizational goals and the achieved results, nor any structure for monitoring progress of improvement plans. With the implementation of the actions indicated in its new business plan USM aims to operationalize its organizational objectives into concrete actions, based on a philosophy of continuous quality improvement (University of St. Martin, 2011b).

As part of its reorganization process, USM has set different goals for the upcoming period. One important objective in the context of this study is the desire to improve its quality assurance system. Document analysis shows that within USM there is a lack of procedures, manuals, norms, guidelines and internal control measures to steer and sustain an internal system of quality assurance. Such a system has not been outlined on paper yet. However, the interviews have revealed that USM has some procedures in place to guarantee the quality of the programs offered. The interviewees brought forward that the instruments for quality assurance already used at the university are: an admission policy indicating that it is mandatory for all students to take a placement test to guarantee the entrance level of the students, course evaluations, review of all syllabi by the division head, the use of only qualified academic staff and periodic faculty meetings, at least once a semester.

According to the NQA report every course and teacher of the TEP are indeed evaluated by the students and the results are discussed in division head meetings (NQA, 2011). In case of low scores, the results are shared and discussed by the division head with the particular teacher. If possible, alternatives are put in place to improve the results, such as mandated training to improve the teacher's didactical approach. Otherwise, teachers who do not meet the norm are not hired anymore. "That's how the PDCA-cycle is done", one interviewee declared.

Due to the small scale of the university the informal circuit contributes significantly to ensure quality. Students, division heads, dean and teachers can find each other quite easily and complaints or suggestions are well taken care of, as the NQA report further stated (NQA, 2011).

USM is also in the process of implementing new evaluation instruments for strengthening and improving the quality of its programs (University of St. Martin, 2012b). These instruments involve a standardized form used for student's evaluation, self-evaluation by the teachers themselves and an outside evaluation of the teacher's competences by a qualified entity. These sources of data provide information for the summative evaluation of the programs and teachers. Moreover, the data analysis

results are expected to present formative direction to faculty improvement efforts, e.g. to translate these results into concrete staff development plans. Furthermore, the results will be compared over time and across courses. The division heads will be in charge of this process. Additional funds have been requested from USONA to make the implementation of these quality improvement instruments possible. By the end of the research period these instruments were in the process of being developed.

In addition, as stated in its business plan, advisory committees from the education and business communities will be established to receive their constant input concerning the quality of the graduates and the needs of the labour market. This all indicates that USM is intended to implement an internal quality assurance system, based on multiple sources of data collection.

Furthermore, an external consultant has been hired to work on the administrative organization of USM to shed light on what is missing. This will lead to an overview and descriptions of all processes and how they have to be improved.

The interviewees concluded that going through the accreditation process of TEP will shed light on the specific requirements of NVAO regarding an internal system for quality assurance. This will provide input for the development of a university wide internal quality assurance system, to be implemented also by all programs.

Quality structure

Besides the project team that has been installed at the end of 2012, there is no formal quality structure outlined at USM yet to move along TEP's accreditation process. Nevertheless, in table 7-11 an overview is presented of the responsibilities of all involved in TEP's accreditation process.

Table 7-11 Responsibilities of internal stakeholders at USM

Internal Stakeholder	Tasks and responsibilities
Board of Directors	Determines the institutional strategic approach and policies; is responsible to secure sufficient financial funds; operates based on information received during the monthly meetings with the president.
President	Is responsible for overall management at USM; contributes to the quality of the teaching and research of the institution; chairs the project team of TEP accreditation process.
Dean of Academics	Coordinates operational activities; discusses results of evaluation and performance indicators with the division heads; participates in the accreditation project team.
Division head	Is responsible for the quality of the programs and improvement actions to be taken; acts as steering officer during accreditation process; participates in the project team.
Program manager	Sets the program objectives and curriculum; directs the improvement actions to be taken; informs all involved at program level.
Project Team	Coordinates TEP's accreditation process, supported by an external expert.; discusses all issues regarding the quality of TEP and the necessary improvements to be taken; develops missing documents,
Academic Committee	Is responsible to control the quality of the academic programs and oversee continuous improvement and development of these programs, including the academic staff; periodically reviews assurance of standards of quality in admission, academic administration and the granting of degrees; reviews proposals affecting the academic programs brought forward by the dean of academics and president.
Academic staff	Discusses the evaluation results and the suggestions coming from the course evaluations; implements the necessary improvement actions; provides feedback to the program manager; is responsible for the quality of the course he/she teaches.
Additional staff members	Develops missing documents in the field of human resource management and quality assurance policy and system; participates in the project team.
Department heads	Facilitates all involved with all information needed and advises them on relevant topics, including quality issues; supports accreditation process in their respective field of work.
Student	Participates in course evaluations; provides suggestions for improvement.

Involvement of stakeholders

From the interviews and the reviewed documents it becomes clear that USM is aware of the importance of intensifying its contact with internal and external stakeholders. Internally there is an academic committee who is in charge of the quality of the offered programs. Students are involved via the course evaluations and the academic staff is involved by the regular meetings with the division head and the dean. With its new organizational structure USM also aims to improve the cooperation between its support departments, the dean of academics and the division heads.

Externally USM aims to strengthen its relationship with the Department of Education as representative of the island government. Also community based businesses will form advice committees to supply the university with information on the needs of the labour market, but also on the performance of its graduates. This will also result in an improved quality perception outside the university. One interviewee considers the governments' willingness to assist TEP accreditation process as one important potential encouraging factor; close collaboration with the government is thereby essential. "TEP is their responsibility and we need to work together to get where we want to be", the interviewee commented.

Concerning TEP in particular, as stated in one of the analysed documents, USM will consistently seek to involve the stakeholders in the further development and implementation of the TEP by conferencing with them and asking for feedback on various matters of common interest and concern (University of St. Martin, 2010c). One interviewee posited that these meetings will become structural during the accreditation process of TEP. One of the ways in which this will be done is to establish a principal's forum, to be convened periodically, at least once a semester, to discuss needs, experiences and critical issues coming from both parties. By the end of 2012 these intentions have not yet been realized.

Involvement of external experts

As indicated in its plan of approach during the accreditation process of TEP an external accreditation expert will play a prominent role (University of St. Martin, 2012b). This expert is a member of the project team and will guide and facilitate the accreditation process.

Also the use of NQA as an external evaluation organization during the preliminary steps towards accreditation is worthwhile mentioning under this indicator. After all, great importance has been awarded to the NQA report, in particular the fact that the quality level of TEP has been assessed in accordance with NVAO quality standards.

USM has also appointed several additional staff members to contribute to TEP's accreditation processes. These staff members are hired on a temporary basis and are in charge of developing missing documents, such as the human resource policy and an institutional quality assurance policy. Regional and Dutch experts are involved where necessary.

7.3.4 Summing up

Having a national institution for higher education in St. Maarten seems to be necessary to guarantee continued tertiary education development, to provide higher education for those who cannot leave the island and to fight the brain-drain phenomenon. Another benefit for the national government of the establishment of USM is the forecasted decrease of the study finance budget intended for students to go to study abroad, since more students will stay at home to study. Eventually graduates who can contribute to further sustainable socio-economic development of the new born country will be delivered.

With its reorganization process USM has embarked on a road toward a brighter future in order to fulfil the university's slogan "A key to a brighter future". Analysis of the USM case description reveals that accreditation will become an important issue during the coming years in order to reach this institutional goal, but also to meet the government's mandates.

USM uses a diverse strategy regarding the accreditation of its programs. It seems unnecessary for all programs to go through an accreditation process; the focus is on becoming partners with accredited universities to secure the quality of the offered

programs. USM's strategic approach towards accreditation is well thought out since financial constraints and limited students' enrolment could become barriers during self-regulated accreditation processes. However, it can be anticipated that if no accreditation status is obtained during the years to come the transition of USM graduates to continue further study abroad will be hampered since more and more foreign universities only accept students coming from an accredited university. Also at national level, the legitimacy of USM will be at stake with non-accredited status. One way or another obtaining an accredited status has become imperative for USM.

Due to the quite early stage of the initiated TEP accreditation process at the end of 2012, within the context of this study several indicators could not be described, therefore their impact on this accreditation process could hardly be determined.

A new *organizational structure* is in the process of being implemented and it is expected that this will facilitate the *decision-making structure* since the hierarchical lines will become shorter.

The *institutional leaders* seem to be committed; they are all part of the project team in charge of TEP accreditation process and contributed to securing additional financial funds to guarantee the progress of this process.

A *quality culture* still needs to be developed, but an increased awareness regarding the quality to be offered could be perceived. The *internal stakeholders* seem to be aware of the importance of accreditation in order to meet national and international quality demands.

Financial resources seem to be sufficient, because of additional funding from the Dutch Ministry of Education. The *facilities* were labelled as adequate. However, the *human resources* are considered as potential obstructing factors during TEP's accreditation processes if no passable human resource policy is implemented and the team of permanent academic staff is not expanded. Nevertheless, managing the problem of scale is still a major challenge to be faced.

USM has no institutional *quality policy p*lan, nor an outlined *internal quality assurance system*. Several quality assurance instruments are used, yet a systematic and structural approach towards continuous quality improvement is not in place. During the accreditation process of TEP several *external experts* are hired, due to the absence of internal and national experts in this field. It is expected that without the support of these experts a successful accreditation process is hardly feasible.

To conclude, because of the early stage of USM's first accreditation process potential internal influential factors could not be clearly identified yet. Nevertheless, at the end of the research period we could project that the compressed decision-making structure, the establishment of a project team and the input of external experts are expected to have a positive effect *(enabler$_p$)* on the embarked accreditation process, while the lack of a quality culture, the absence of an internal quality assurance system and the unsound human resource approach could negatively influence *(barrier$_p$)* the progress of this process.

8   The Dutch universities

To contrast with the studied accreditation processes in the three Dutch-Caribbean universities, an investigation of these processes in two Dutch universities was completed. Utrecht University (UU) and HZ University for Applied Sciences (HZ) were selected as contrasting cases due to their similarities and differences with the Dutch-Caribbean universities, based on the theoretical replication method.

Accreditation mandates in the Netherlands are regulated by the national Higher Education Act, WHW. Both UU and HZ need to meet the quality standards stated in WHW in order to get their programs accredited. Worthwhile noting is that the NVAO framework was developed especially for higher education institutions in the Netherlands, so these universities could be expected to experience fewer barriers in adjusting to the requirements and procedures, in contrast to the universities located in the Dutch Caribbean.

As was the case with the description of the Dutch-Caribbean universities, the two Dutch case descriptions are also structured according to the research model. First some information is presented of the internal organizational context in order to elaborate on specific elements that may influence the design, progress and outcomes of the accreditation processes. Then, the dependent variables are described, followed by an elaboration of the five independent variables according to the 17 indicators. At the end each case description contains a within-case analysis to serve as input for the within-group and across group analyses in chapter 9.

8.1 Utrecht University

The Utrecht University (UU) is the largest university in this study and also in the Netherlands. This academic university was established in 1636 and is centrally located in Utrecht, one of the biggest cities of the Netherlands. According to different international ranking standards, UU can be considered as a globally leading university[37].

In 2008 all programs offered by Utrecht University have completed successfully their first accreditation process and received the accredited status by NVAO. As of 2010 their focus is to retain the achieved accreditation results by meeting the terms of the second NVAO framework.

In this section the main elements of the accreditation processes of Utrecht University during the past decade are described, based on an analysis of several institutional and faculty's documents and eight in-depth interviews conducted in August 2012. The interviewees were staff members involved in the accreditation processes at institutional level and in two faculties: Faculty of Social Sciences and the Department of Law of the Faculty of Governance, Economics and Law. The choice for these two faculties lays in the similarity with existing faculties in the studied Dutch-Caribbean universities, thus facilitating the comparison in chapter 9.

8.1.1 Institutional background information

As stated in its strategic plan 2012 – 2016 Utrecht University aims to be a large and multifaceted international knowledge centre of academic and scientific excellence that offers education and research of international quality standards (Universiteit Utrecht, 2011b). The university aims to provide young people with an academic education; to train new generations of researchers and academics that possess the right combination of knowledge and professional skills; to conduct pioneering research and to contribute to finding fitting solutions for societal challenges. Furthermore, in its strategic plan UU declares that it intends to strengthen the quality of education and research and enhance the 'earning capacity'. Moreover, the university aims to strengthen its international position and reputation.

Based on developments within and outside the university at both national and international level, a general profile was developed that will serve as a guideline for the university's development in the years to come (Universiteit Utrecht, 2011b). In the context of this study, it is important to note that one of the elements of the institutional profile for the coming years is that the university aims to apply quality as the guiding principle for all decisions.

---

[37] In 2012 Shanghai Ranking of World Universities ranked UU at the first place in the Netherlands, a shared 12th place in Europe and a shared 53th place in the world. Times Higher Education Ranking ranked UU as 2nd in The Netherlands, 18th in Europe and 68th in the world and the Higher Education Evaluation & Accreditation Council (HEEFCE) ranked this university 9th in Europe and 46th in the world.

To meet the general agreement between the State Secretary for Education, Culture and Science and the Dutch universities (VSNU, 2011), UU has set the following performance agreements related to quality assurance and accreditation: to retain third place in the top six of general research universities with the highest number of undergraduate programs rated good/excellent by NVAO and to retain their NVAO accreditation at institutional and program levels (Universiteit Utrecht, 2011b). According to its strategic plan working consistently on quality improvement will allow the university to achieve these goals.

Utrecht University can be considered as a pioneer in several national developments in the field of higher education (Vermeulen, 2002a, 2002b). Its educational developments are oftentimes followed by other national universities. For instance, aspects of the university's teaching model have been adopted by other Dutch universities, such as the teacher's qualifications BKO and SKO, the concept of University College Utrecht and the Academic Teacher Training Institute for Primary Education.

In academic year 2012 – 2013 UU consisted of seven faculties that offered 214 educational programs: 52 undergraduate programs and 162 graduate programs[38]. In that academic year there were about 30.500 students coming from 101 countries and more or less 95.000 alumni. Utrecht University considers itself as a research university that is contented to also offer high quality education (Universiteit Utrecht, 2011b). Research within the university is leading the organization of education. This point of view symbolizes the university's focus on integrating research and education.

UU has implemented an institution-wide educational model, developed in 2002 at the start of the implementation of the bachelor-master structure in the Netherlands (Universiteit Utrecht, 2006, 2007, 2011c; Van der Zande, 2008; Vermeulen, 2002a, 2002b). The aim of the educational model is to encourage students to succeed and to ensure that students get the maximum out of their study. Elements of this model are: a clear distinction between the bachelor and master phases, differentiation, flexibility and freedom of choice at undergraduate level, small groups, active learning, and the employment of high quality academic staff.

Moreover, the educational vision of UU is directed to encourage great innovations and stimulate further introduction of innovative projects within the university. UU's educational model provides enough space for innovation, but at the same time directs these initiatives in order to continuously improve the educational quality. Although this educational model has not yet been fully implemented by all faculties, its success was confirmed by the institutional audit conducted by NVAO in spring 2012 (Universiteit Utrecht, 2011d; NVAO, 2012).

---

[38] Source for all mentioned quantitative data is www.uu.nl, accessed October – December 2012.

8.1.2 The dependent variables

By the end of the research period Utrecht University was going through the second accreditation period, including successful execution of the institutional audit. In this section first the steps taken during the accreditation processes are explained and subsequently the achieved accreditation results.

The accreditation processes

Utrecht University has many years of experience with external evaluation and accreditation processes. A culture of external quality review already existed in UU preceding the start of the first accreditation cycle. As explained in chapter 6, during the nineties the association of academic university VSNU was in charge of site visits and informing the universities of the results, including their strong and weak points.

The start of the accreditation processes in Utrecht University was mandated by the Dutch government as laid out in the Higher Education Act (WHW) enforced in the Netherlands (Ministerie van OC&W, 2010). Since 2003 UU followed the Dutch accreditation system with NVAO as the accrediting body to meet the pre-set quality standards indicated in the first NVAO framework in order for each program to attain the accredited status.

As is mentioned in various UU documents the start of the internal process of quality improvement dates back to the nineties, when the university was confronted with several critical inspection reports and negative student evaluations (Universiteit Utrecht, 2011d; Van der Zande, 2008; Fennema et al., 2010). The first step in UU's systematic and structural quality improvement process was the university-wide conference *"Wat is goed Onderwijs"*[39] (Universiteit Utrecht, 2011d). Thereafter many quality improvement actions followed. In 2002 the introduction of the bachelor-master structure was also used as an opportunity to realize more quality improvement activities; one of them is the development of UU's education model, which since then has been continuously improved. (Universiteit Utrecht, 2011c).

Utrecht University applies a diversified approach towards accreditation. The dean of each faculty determines the steps to be taken to prepare for the site visit: how the self-evaluation process is organized, including the writing of the self-study report and the involvement and specific training of the participants (yes/no trial site visit). So, in case of UU no uniform picture of the steps undertaken during accreditation processes can be displayed.

Basically, in most cases the previous self-study report forms the basis for the new one; this is updated and modifications are included. The self-study reports need to be reviewed by Department of Education and Research (O&O) prior to sending it to the Executive Board for final approval.

---

[39] The good experiences of this conference led to the incorporation of an annual education conference in the year schedule of the university, which was still the case in 2012.

What is so far common in the processes toward accreditation is the role granted to O&O. During the first accreditation cycle the department O&O was in charge of the final approval of the self-study reports, while as of 2011 this is done by the Executive Board before submission to the NVAO according to the regular application process, although the advice of O&O in this regard is determinative.

The first accreditation cycle based on program accreditation was completed in 2008 with the large majority of the programs immediately receiving an accredited status. The launch of the second accreditation cycle in 2011 was marked by an informative meeting by QANU for all involved. UU has chosen to participate in an institutional audit, followed by limited program assessment. This decision was preceded by an internal institutional audit to determine if UU was indeed ready for an external institutional audit according to the NVAO's framework. Two main reasons supported this choice. First, UU was committed to the embedment of a good university-wide quality assurance system and the willingness to show it to others. Secondly, it was believed that successfully passing through an institutional audit will reduce the workload during the program assessments.

The institutional accreditation framework required more uniformity, standardization and a more uniform approach within the university. The institutional self-study report was written by department O&O following a developmental process with extensive discussions via plenary sessions and meetings with all those involved; this interactive approach created support. As one interview remarked "We learned a lot from each other".

According to the interviewees, an accreditation process has to be considered as a continuous process; it starts right after the last site visit with working on the improvements specified in the review reports. The progress of these improvements is controlled at faculty level. From the interviews the differences in approach between the Faculty of Social Sciences and the Department of Law became clear. For instance, at the Faculty of Social Sciences about one and a half year in advance of the site visits a joint meeting was held for all program directors to launch the start of the second round of the accreditation process. Then, for one program the self-study report was drafted, which served as an example for the others. "One forerunner, then the rest", one interviewee of this faculty asserted. Each program director or master coordinator is in charge of the writing of the self-study report and receives support of the faculty's policy staff members depending on the need. The final draft is submitted to the department O&O for last advice. At the Department of Law the accreditation processes started two years prior to the site visit with the development of the domain-specific framework, together with all other Dutch faculties of Law. In the beginning QANU provided an information session, followed by a meeting with the 14 program directors. The head of Educational Policy at departmental level made the framework and also wrote most parts of the self-study report, especially the faculty's information part. Program directors wrote the part on the content of the programs.

Eventually the interviewees at faculty level did not experience that due to the institutional audit the work became less intensive during the second cycle of program

assessments, win contrast to what was promised by the external developers of this new NVAO framework. They further commented that the documents needed were the same and equal tension was felt during the accreditation processes. Additionally, as mandated by changes in WHW according to the second NVAO framework, testing and examination became very important, requiring extra work.

Moreover, interviewees pointed out that review panels still need to get used to the new process, which according to them was clearly perceivable during the site visits. However, interviewees specified that review panels play a determinative role concerning the accreditation outcomes. In almost all cases their advice is followed by NVAO.

The department O&O plays a key role during the accreditation processes, controlling, coordinating and monitoring the planning and implementation of such processes, whereas each faculty is in charge of the self-evaluation process to result in a self-study report at program level. As mentioned earlier, the self-evaluation processes differ between the faculties. The department O&O can play a role throughout the preparatory work during the accreditation processes and if a trial site visit is organized at program level the department O&O can be invited to be part of the panel to ask critical questions. Several interviewees emphasized that during this second accreditation process the department O&O had provided better guidance due to the gained experience; the department was more able to provide the necessary support, illustrating the importance of experience and expertise for enhancing the progress of accreditation processes.

We can conclude that at UU a decentralized approach toward accreditation is applied. Since the role of the institutional department O&O is significant, because of its controlling and coordinating responsibility we can label the UU accreditation approach as centralized controlled, yet decentralized implemented.

The accreditation outcomes

After the successful completion of the first accreditation cycle in order to become more effective and efficient some very small teacher training programs were stopped. Maintaining these study programs was too expensive in labour and money.

By the end of 2012 most UU programs were going through their second accreditation cycle, aiming to retain the obtained accredited status. Some programs already succeeded in this endeavour for the second time. After accreditation, panel reports with recommendations are discussed between the rector and dean. Utrecht University also monitors and analyses the achieved accreditation results for indications of trends and benchmarking.

Even though most accreditation processes had a successful end, interviewees highlighted several improvements to be addressed so the progress of such processes could be enabled. In this regard some interviewees commented that more knowhow and expertise on accreditation processes need to be built at program level, there is too much dependency on the faculty level. Furthermore, the involvement of program

directors and also the quality staff members have to be increased. Modifications of faculty's quality assurance plan have to make this possible.

Another comment of interviewees was that the quality cycles (figure 8-2, section 8.1.3.5) are not always completed. Many improvement actions are not evidence based: aims need to be formulated in advance, so at the end evaluation can take place (PDCA). There are also too many (in)formal meetings which resulted in high workload, especially during the self-evaluation process.

In addition, the interviewees were critical of the NVAO. They complained about the general description of the NVAO-framework, providing very limited concrete instructions. They also experienced the role of NVAO as too much from a distance. Moreover, NVAO demanded a lot of paper work, had quite a formal approach and finally the review report did not add any additional information, yet was merely a 'copy-paste' document from the institutional or program self-study report. Furthermore, they noted that NVAO has become more and more critical; the demands became more severe.

The institutional audit has led to more insight in what still needs to be improved. The panel of the institutional audit emphasized the university´s broadly-supported culture of organizational quality, its teaching model, educational innovations and the fact that all layers of the organization make up a tightly knit community that places great value on education, to be elaborated during the descriptions of the indicators below.

8.1.3 The independent variables

This section describes the accreditation processes in Utrecht University according to the research model and the 17 indicators. This information was collected by document analysis, hard copy or retrieved from the website of the university during the period of August to December 2012 and eight in-depth interviews conducted in August 2012.

8.1.3.1 Organizational structure

Organizational chart

The organizational structure is laid down in the institutional administrative regulations and presented in figure 8-1 (Universiteit Utrecht, 2011a). The governance and administration of this university is organized along two lines: the institutional level and the level of faculties and support departments. The Supervisory Board is the university's statutory supervisory body; the Executive Board is the university's highest administrative body and is responsible for governing the whole university. This board exercises the tasks, roles and responsibilities assigned by WHW to the organization's management; quality assurance is one of them (Ministerie OC&W, 2010). The three members are appointed by the Supervisory Board after hearing from the university council. The Executive Board has to inform the Supervisory Board on all major developments and events taking place at the university, including the progress of accreditation processes.

In addition to the mandates according to WHW, tasks, roles and responsibilities are defined in the administrative regulations (BBR) and in the model for faculty regulations (Universiteit Utrecht, 2011a). In these documents the requirements for a sound management and decision-making structure are laid down. BBR regulates the administration, management and organization of the university as a whole. In each faculty regulation, which is uniform for the faculties through the instructed model, the structure of the faculty organization is included. These regulations only regulate the formal authorities and responsibilities and not the many forms of consultation that take place within the university and faculties.

At faculty level the faculty board, consisting of the dean, the vice dean of undergraduate programs, vice dean of graduate programs and the director of operations, has the final responsibility for all operations of the faculty. Together the members of the faculty board manage the faculty and are responsible for the functioning of the faculty according to the UU's administrative regulations.

Each undergraduate program has a program director and graduate programs have a master coordinator. They are in charge of the accreditation process for their respective programs and are formally expected to act as the steering officers of such process, with the support of the head of the Educational Office at faculty level.
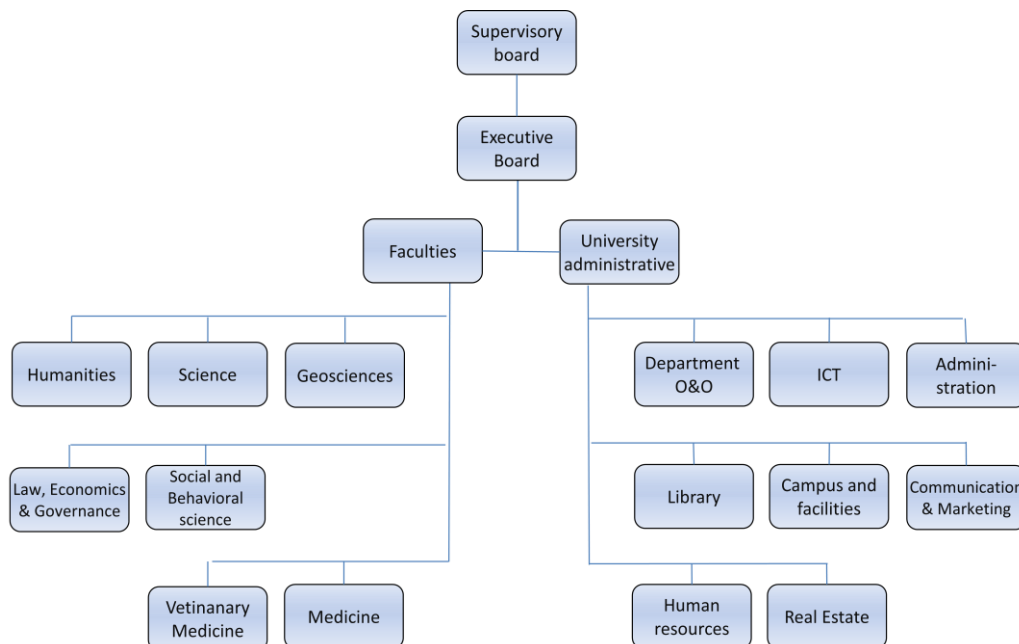
Figure 8-1 Organizational chart of UU

According to some interviewees UU can be considered a Matrix organization meaning that in some cases staff members have two superiors to whom they have to report. Depending on the type of work they are doing or the issue they are addressing, they need to report to a particular superior. However, one of them always has the final responsibility for the employee. For instance, at the Faculty of Social Sciences the staff member responsible for quality issues formally reports to the head of the Education Office, but with regards to accreditation follows the instructions of the vice dean in charge of this particular issue.

The department O&O has a monitoring and controlling role to guarantee that the operations at faculty and departmental level fit within the approved UU's rules, regulations, procedures and guidelines. But it is at faculty or department level where most activities regarding quality improvement and accreditation take place.

Decision-making structure

As is the case for all universities operating in the Netherlands, the formal decision-making structure of UU is regulated by a national law, *Wet Universitaire Bestuursstructuur* (WUB). This law regulates the formal organizational consultative meetings where topics need to be discussed and decisions taken. A variety of meetings are held to guarantee promptly involvement of the stakeholders, also controlling, monitoring and supervising of the implementation of the university's system for quality assurance at the different organizational levels. Table 8-1 presents an overview of the formal meetings installed in UU due to this legal regulation.

Table 8-1 Formal meetings at UU

Meetings	Frequency	Stakeholders	Topics addressed
Supervisory Board	Monthly	Members of Supervisory Board	All relevant issues at that moment in time.
Executive Board	Weekly	Members of Executive Board	Institutional policies; topics needing specific attention; accreditation results.
Institutional Meeting	Quarterly	Supervisory Board, Executive Board	The progress of all academic matters.
Overall Management Meeting	Monthly	Rector and deans	Draft institutional regulations, quality issues.
Bilateral management meeting	Twice a year	Rector and each dean	Quality agreements, quality improvement and the progress and results of the accreditation process at faculty level
University council (U-Raad)	Twice a year	Elected advisory body representing all university's staff and students.	Topical issues which it has statutory authority to advice upon; draft institutional regulations; site visits and accreditation results.
Faculty council	Varies between the faculties	Staff and students with the dean	All faculty-related matters, such as the faculty regulations and the examination and education regulations as part of the quality improvement process at faculty level.

The interviewees experienced the organizational structure as one that is in principle centrally synchronized, yet provides sufficient opportunities to faculties for specific modifications and implementation; thus, a decentralized structure allowing great differences among the faculties, with great autonomy. In practice, frameworks and guidelines are formulated and approved at institutional level, but faculties have great freedom on how they translate and implement them at faculty level. Therefore a great difference exists between the faculties with regards to the implementation of the centralized formulated rules, procedures and guidelines. As one of the interviewees formulated, "Central framework with enough room for decentralized implementation, while taking into consideration the legal requirements".

There are also various consultative and advisory bodies operating within UU to emphasize the importance granted to the commitment and participation of staff and students in its daily operations (Universiteit Utrecht, 2011a, 2011d). Employees and students participate in the policy-making process and advise the various administrative bodies in each organizational layer. Two consultative bodies need to be mentioned. One is the University Council which advises on general matters and discusses any relevant topics put forward by either party. During the accreditation processes the university council is informed of the decisions, the policies to be implemented and the strategies to be followed; they have an advisory role in this matter. The other is the faculty council, which is authorized to consult with the dean about all faculty-related matters and has the right of consent in a number of important decisions of the dean. The tasks, responsibilities and operating procedures of the faculty council are described in the faculty regulations, which are adopted per faculty and thus may vary per faculty. The faculty regulations are based on the WHW, which contains specific guidelines for the functioning of faculty councils (Ministerie van OC&W, 2010).

The university's support departments also have employees' consultative bodies, consisting of elected representatives of staff members. They have a right to prior consultation, a right to consent and a right to propose legislation concerning a wide variety of issues, such as the work and employment conditions and the manner in which the general personnel policy is organized and applied in the departments. These consultative bodies have no formal role during accreditation processes, yet they are kept informed and involved.

In addition to the formal structure of decision making, there are many internally regulated meetings in order to promptly involve all relevant stakeholders, as explained in table 8-2 (Universiteit Utrecht, 2011d). This extended form of consultation is also to ensure that all parties are well informed about the functioning of the internal quality assurance system. Some interviewees asserted that although there is a formal decision-making structure, many decisions take place during the internally regulated type of meetings to guarantee broad acceptance at all levels. They experience that UU is jointly run by the Executive Board in close consultation with the deans.

Table 8-2 Internally regulated meetings at UU

Meeting	Frequency	Topics addressed
Rector and program directors	Periodic	Issues at program level
Rector and directors of education offices	Four times a year	Educational policies related to institutional guidelines
Rector and vice deans	Six times a year	Topics relevant for a smooth progress of educational and quality processes
Network meetings staff members in charge of quality assurance	Periodic	Quality and accreditation issues

Most interviewees do not consider UU as an authoritarian organization; sufficient autonomy is granted to deans, as long as they operate within the institutional frameworks. They further explained that a lot of consultation takes place to build consensus; the standardized and uniform guidelines enhance the possibilities for tuning, adaptation and exchange needed. Most interviewees applaud the meeting structure with internally regulated meetings as it serves as a good information channel to ensure that all stakeholders are promptly informed on relevant developments. These meetings also increase the sense of sharing within the university.

8.1.3.2 Leadership and management style

Role of institutional leaders

Utrecht University operates based on a planning and control cycle (Universiteit Utrecht, 2011b). A strategic plan forms the basis for policy development: every 4 years a new strategic plan is outlined, which contains the objectives and ambitions for the upcoming period. Each year, the strategic plan is translated into administrative agendas at university and faculty levels. These agendas basically serve as working programs, specifying the concrete projects and activities to be carried out by the university, the faculties and the support departments in order to achieve the targets indicated in the strategic plan. This allows for greater freedom when elaborating on the university's targets, which can be adjusted depending on the development phase of each faculty or support department. Costs associated with the implementation of the administrative agendas are annually incorporated into the university budget.

The planning and control cycle of the Executive Board is the guiding thread for the daily operations within the university (Universiteit Utrecht, 2011a, 2011d). With regard to quality assurance and accreditation at institutional level decisions are formally taken by the Executive Board, yet these are preceded by wide internal discussions with relevant stakeholders, as indicated in tables 8-1 and 8-2. This Board can intervene if necessary to modify and direct quality assurance and improvement activities since they have the final responsibility.

Interviewees commented that there is great commitment from members of the Executive Board towards the accreditation processes. The many internally regulated meetings provide them with appropriate information in order to be well-informed and to allow them to take balanced decisions in this matter. They further emphasized that

this leadership style creates a feeling of doing things together, contributing positively to the progress of accreditation processes.

Various interviewees pointed out that a passionate and inspiring rector with an enthusiastic leadership style is important for the accreditation processes, to encourage participation and commitment by the other involved stakeholders and eventually help them to realize the necessary improvement activities needed to reach accreditation, as was the case with the recent rectors. Thanks to their high level of commitment and involvement many university-wide decisions could be taken positively affecting the accreditation processes. For instance, the introduction of an education model, institutional year schedule, and time slot for classes made it possible to improve the quality of education. These decisions were taken during the leadership period of an encouraging rector, as indicated by some interviewees.

Furthermore, interviewees brought forward that for their institutional leaders comparison with other higher education institutions, nationally and internationally, is important. These leaders are interested in benchmarking. One interviewee noted that these leaders more and more want to take evidence-based decisions. The education card generated from national and internal quantitative data serves as a useful instrument for achieving these objectives (see section 8.1.3.5).

Management at faculty level

In agreement with WHW, the managing structure is uniform in all faculties. The faculty board is responsible for general management and financial matters, while the content is managed at departmental or program level (Ministerie van OC&W, 2010).

The dean has full responsibility for the quality of the programs offered at faculty level (Universiteit Utrecht, 2011a). The dean has to ensure that the system for quality assurance and improvement at faculty level functions properly. Moreover, the dean has to make sure that the quality of teaching and the examinations is embedded in this faculty's system. All consultation meetings and sources for exchange of information have to be in place in order to make the realization of the delegated responsibilities possible. In case of any oversights and failures the dean is in charge of making actions happen, so improvement of the situation is feasible. Directors of the undergraduate and graduate programs exercise their tasks and responsibilities according to WHW.

Discrepancies between the levels of involvement of deans in the accreditation processes at faculty level could be identified. As stated earlier, the organization provides guidelines but does not indicate exactly how things should happen as long as the pre-set guidelines are followed. For instance, at the Faculty of Social Sciences, it was the vice dean who was in charge of the accreditation processes. He initiates, stimulates, and controls these processes and has to read and approve all self-study reports. Also with regards to the site visits the vice dean plays a key role. The program directors have no problem with this approach; they even welcome it. In other faculties the vice dean plays a less leading role during the accreditation processes; it can be the head of the Educational Office who takes this prominent position, as is the case in the Department of Law. She wrote the self-study reports and had to ensure the timely

availability of documents and data. This illustrates the previously mentioned diversity in the faculty's approach during accreditation processes. But all the interviewees at faculty level ascertained that the faculty boards, including the deans, are committed to reaching the accreditation goal; it is the way they direct the process that could differentiate.

The conviction of the university is that leadership and management play an eminent role for the development of a quality culture, characterized by a balance between accountability and improvement and where people feel that they are owners of the quality instead of victims of a bureaucratic demand of the Executive Board (Fennema et al., 2010). During the annual meetings on quality issues between the rector and the dean the focus is on the quality improvement and the progress and results of the accreditation processes at faculty level. Deans are requested to write a reflection on the quality activities and inform on their plans. This report is the input for these meetings. The department O&O plays a supportive role in this regard. They prepare these meetings, are also present, and make the minutes. Afterwards they are entrusted with the monitoring and control role.

8.1.3.3 Quality Culture

Care for quality

According to the institutional self-study report the quality culture is developed and encouraged based on three pillars (Universiteit Utrecht, 2011d). First, there is monitoring and critical reflection. The objective within the university is constantly to know what works well and what could be improved. At all levels administrators, managers, academics, and students are willing to take a critical look at themselves and the organization and draw conclusions. This process is stimulated by the internal quality assurance system and sharing of knowledge in informal settings via numerous meetings and gatherings to reflect on the university's performances, focusing on good practices and necessary improvements. Secondly, quality culture is stimulated thanks to the granted room for innovation. Innovative ideas are encouraged and facilitated. Leadership is the last pillar to promote a UU's quality culture. To support effective leadership the university invests in training of the managers. Courses have been developed for academic leadership, educational leadership and trainings for deans, vice- deans and departmental managers. Interviewees put forward that the enthusiasm and leadership style at the various organizational levels contributed to creating a quality culture. Managers inspire their colleagues, but also show them their responsibilities. Furthermore, they indicated that investments in education and in human resources contributed to developing a quality culture. The development of a quality culture costs many years of investment, but it has paid off, one interviewee underpinned.

The NVAO report confirmed the existence of a quality culture in Utrecht University (NVAO, 2012). The review panel asserted that there is an awareness within the university to do things right and to learn from each other; employees are willing to improve (NVAO, 2012, p.3):

> The panel noted that the Utrecht University across the board has a culture where the quality of education is high on the agenda. And the instruments to do this are available, such as the widespread informal meetings at all levels within the university.

The panel concluded that the university has a widely supported vision of the quality of education, which allows sufficient room for differences of emphasis between faculties or programs. This panel confirmed the differences between the faculties. Furthermore, the panel considered this differentiated approach of great importance since the programs vary widely in size and culture; it is the faculty's culture that is determinant. The structural and sustained attention to the quality of the academic staff is considered by the panel as a systematic guarantee for the quality of education and a key pillar of the quality culture within the institution.

During the interviews this point of view was acknowledged by most interviewees. A majority of the interviewees indicated that within the university the focus is on delivery of quality. They commented that colleagues are committed to performing their tasks and responsibilities in such a way that a high quality standard is achieved. According to these interviewees a quality culture does exist, while other interviewees pointed out that quality awareness has developed a lot during the past decade but there is still room for improvement in this matter. For instance these interviewees indicated that within their faculty, evaluation of modules does not always take place on a standard schedule, while the regular work field meetings are not happening as planned although their importance is acknowledged. However, also according to them there is indeed an open culture within the university. Colleagues are willing to be vulnerable and to learn from the mistakes of others. Networking and sharing of information are considered by the interviewees as great elements of the university's quality culture.

Shared responsibility, ownership, cooperation and collaboration among stakeholders

The existing open culture within the university illustrates the willingness among colleagues to cooperate and collaborate with each other. Interviewees indicated however that there is still room for improvement in this matter. The university has to grow toward a culture where people take broader responsibility than only what is expected from them.

Commitment of internal stakeholders

During the interviews it was emphasized that all internal stakeholders are committed to deliver quality. During the site visits there is an ambiance of showing how well the university is performing, in particular the program to be assessed by the NVAO. Interviewees brought forward that staff members are enthusiastic to tell the review panel how good the quality of the offered program is. The many wide-spread meetings on quality issues have according to the interviewees contributed to enhancing the commitment of the internal stakeholders during the accreditation processes.

Norms, values, traditions, customs and people behaviour

Interviewees indicated that the professional orientation of the staff is directed to deliver quality contributing to the experienced open atmosphere. People are willing to share lessons and knowledge with each other, which contributes to the progress and outcomes of the accreditation processes. Most interviewees specified that within the university there is a culture of quality awareness, sharing knowledge, and discussions of the good and bad examples. There is also a great level of transparency. All reports are available on the intranet-site and information can be shared.

Communication channels and interaction among internal stakeholders

All interviewees acknowledged the wide sharing of information within UU and considered this as an essential part of the quality culture. In many cases the informal communication channels such as the regular talks between deans and their program directors precede the formal ones, and contribute to promptly sharing of information and well-timed discussions on actual issues. Bottlenecks are therefore promptly discussed. As mentioned earlier, there are many consultative meetings and consultation bodies within this university. All stakeholders are one way or another involved and informed about the relevant quality issues through these communication channels.

According to the strategic plan, UU will work to communicate its efforts more effectively through various channels, including the website (Universiteit Utrecht, 2011b). Furthermore, email is a frequently used instrument to inform all relevant stakeholders on policy development and implementation. Other sources of communication are intranet and newsletters. By using all these means, employees are expected to be up to date with regards to university issues.

8.1.3.4 Available resources

At this university the generic services are organized at university level under the responsibility of the general manager and the specific services to students and staff are organized into faculties under the responsibility of the director of operations. Thus, there are support services at university and faculty level, each falling hierarchically under its management structure (Universiteit Utrecht, 2011a). The basic services in ICT, (financial) administration, real estate and facilities domains are concentrated. According to the strategic plan the university will assess whether concentration should also be implemented in other domains in order to enhance efficiency and provide innovative and optimal support (Universiteit Utrecht, 2011b).

Human resources

In August 2012, the total staff of UU consisted of 5.300 fte (7500 staff members), of which 55% (2900 fte) was academic staff members. Of the total staff 60% (3200 fte) was permanent staff members.

The UU is well-known for its professional career development policy for its academic staff. Indeed, use of high-quality academic staff is one important element of the

institutional education model (Universiteit Utrecht, 2011b; Van der Zande, 2008). Teaching qualifications are keys to academic careers and university-wide instruments have been introduced in order to stimulate and facilitate educational innovation and the professionalization of the academic staff. This is based on the university's conviction that high quality education is strongly dependent on the quality of the academics. Investment in teachers' qualifications was therefore considered to be of great importance, leading to the introduction of teachers' certifications in 1997, followed by the establishment of the Centre of Excellence in University Teaching in 2002 (Van der Zande, 2008). UU was the first university in the Netherlands to introduce an internal system of teaching qualification: Basic (BKO) and Senior Teaching (SKO) Qualifications. The framework is determined at institutional level, yet the faculties are responsible for the implementation. UU is the national trendsetter in this matter. Gradually this qualification system has been more or less copied by the remaining universities and has gained great civil effect. Nowadays it is part of the general agreement with the ministry of education applicable for all academic staff across the country (VSNU, 2011).

Holding the BKO certificate is a 'condition sine qua non' to acquire a permanent position at UU. Since academic year 2012 – 2013 it has become mandatory to renew BKO every five years. Each teacher has to prove that he/she has done enough to maintain his/her BKO, otherwise he/she will be re-assessed (Universiteit Utrecht, 2011d).

At the Centre of Excellence in University Teaching (CEUT= platform for respectful peers) various other instruments are used to improve the qualification of UU's the academic staff, such as a management course for program directors, a course of honours teaching and the appointment of professors with a special Chair in education.

Performance and assessment interviews are part of the university's policy. According to the institutional self-study report this structured system of assessment and personal development helps to ensure that mutual expectations are clearly recorded and contribute to organizational transparency (Universiteit Utrecht, 2011d). UU acknowledges that this system is not yet taking place annually with all employees and also that during these sessions more attention has to be paid to educational issues.

(Vice) Deans, program directors, quality staff members at faculty level and the department O&O were the staff members mostly involved in the progress of the accreditation processes with well delineated tasks and responsibilities, sometimes varying between the faculties. Although some interviewees indicated that more manpower is always welcome provided that there is a clear division of tasks and responsibilities, they did not consider lack of human resources as a potential hindering factor during accreditation processes. Interviewees at faculty level acknowledged that going through an accreditation process demands more time investment by the involved stakeholders. Working overtime and during weekends in this period was not exceptional for them.

Financial resources

In 2012 the budget of UU was about €749 million, of which 36% is funded by the national government; the remainder is generated from additional funds and contract activities of third parties, tuition fees, and examination costs from the students. The interviewees consider Utrecht University's financial position as stable, provided that the universities are not subjected to unexpected government cutbacks and all scheduled internal cutbacks can be implemented as planned. None of the interviewees consider financial resources as an obstruction during the accreditation processes.

Interviewees affirmed that the university is well aware of the importance of providing enough financial means in order to facilitate the accreditation processes. The financial resources needed are reserved for this goal, based on long term prognoses done by the financial controller of the department O&O. If funding were to be fully or partially terminated in connection with performance agreements or a major cutback in government grants occurred, the university still expects to realize its objectives and performance targets, albeit at a somewhat slower pace (Universiteit Utrecht, 2011b). According to one interviewee, in this regard size does matter. Since UU is a large university the bills can be paid. However, the interviewees concluded on this indicator that to maintain the achieved accredited status is an expensive exercise.

Facilities

The infrastructural facilities of UU are spread over buildings located in three campuses: city centre, international campus and Uithof. The university has organized its support activities in 'domains' that bundle centralized and decentralized capacity and emphasizes professionalism, quality, effectiveness, and efficiency (Universiteit Utrecht, 2011d). Each domain has a manager at both institutional and faculty level that work closely together to realize the supportive tasks. At institutional level the framework to be carried out at faculty level is determined. For each domain, there is a domain consultation structure, consisting of the domain manager at institutional level and the heads of domain at faculty level, which creates unity in the domain and ensures the quality of the particular domain processes.

According to the interviewees, the support departments are aware of their supportive role to the institutional administrators as well as to the staff and students. Recently some support departments, e.g. ICT, have been centralized to improve efficiency of the university and also to improve the ICT-facilities provided. Furthermore, UU has established an efficacious and cost-effective university-wide purchasing and tendering centre.

The facilities were labelled as good by the interviewees. No challenges are encountered with facilities during the accreditation processes at institutional and faculty levels. The university is large enough that its facilities are adequate to meet every need and requirement of the programs it offers.

8.1.3.5 Internal quality assurance policy

Document of Internal quality assurance policy

According to the institutional self-study report, the university's policy on quality assurance aims for continuous improvement of the quality of education (Universiteit Utrecht, 2011d). The internal quality assurance approach is part of the aforementioned planning and control cycle and is coupled with the external process of quality assurance. An important principle of UU's internal quality assurance policy is the conviction that quality assurance is better served if it is "Close to the workplace, where the work is being done", as one of the interviewees formulated. Quality assurance activities have to take place in an environment close to teaching and learning and thus reflecting the nature, extent, and culture of a faculty or department. Consequently, based on this philosophy, general guidelines for the internal quality assurance policy are approved at institutional level to instruct the detailed quality assurance policy at faculty levels. Accordingly, each faculty has its own system of internal quality assurance that fits with the institutional guidelines (Universiteit Utrecht, 2005, 2008, 2010, 2011d, 2012b). For instance, at institutional level guidelines are formulated on what should be done during an accreditation process, but not how it should be done. One of the interviewees operating at institutional level formulated "We tell them what they should do, what the final results have to be, but we don't tell them how they should do it".

The education model of this university is the basic principle guiding the quality policy in order to guarantee high quality delivery (Universiteit Utrecht, 2011c). This model provides guidelines to the faculties to be incorporated as part of their quality assurance policy.

Interviewees indicated that all faculties have to send their quality assurance plan to the department O&O to determine if they indeed fit within the UU framework. However, as stated in the institutional self-study report monitoring of the improvement actions needs to receive more attention during the quality cycles (PDCA) (Universiteit Utrecht, 2011d). The university is aware that there is little systematic research on the impact and efficiency of the improvement measures taken, as was confirmed by most interviewees.

Interviewees further pointed out that the institutional quality assurance policy is based on a clear definition of roles and tasks. This contributes to the monitoring process of the implementation of the quality assurance policy of which department O&O is in charge. Moreover, interviewees affirmed that two other instruments are used to guarantee high quality deliverance: a system of internal certification for all new programs to ensure the quality of these programs at their start and, where necessary, an internal audit for programs to monitor the results of the implementation of agreed improvement actions based on e.g. less satisfied site visit results.

In addition, the role granted to examination boards, as prescribed by WHW, serves to guarantee high level of quality deliverance as well (Ministerie van OC&W, 2010). Examination boards are responsible for controlling and supervising the achieved level of the students during and at the end of the programs in order to ensure the attainment

of the aimed bachelor or master level. Interviewees operating at faculty level are satisfied with the guidelines formulated in this regard to direct their quality assurance policy.

Internal quality assurance system

The UU's system of internal quality assurance has evolved from a university-wide quality assurance project in 2007, which aimed to develop a system that guarantees an adequate balance between quality assurance and quality improvement (Fennema et al., 2010). The earlier mentioned institutional philosophy that quality works best if it is consistent with the nature and culture of each specific program forms the basis of the quality assurance system (Universiteit Utrecht, 2011b). The Executive Board describes principles for 'what', but not for 'how' quality has to be ensured. All interviewees affirmed that this quality approach fits best with the wide variety of programs offered by the university.

This system of internal quality assurance consists of quality cycles that operate at different levels and are interconnected to each other: university-faculty-program (Universiteit Utrecht, 2011b). Deming's PDCA-cycle is the fundament of this quality approach, as illustrated in figure 8-2.
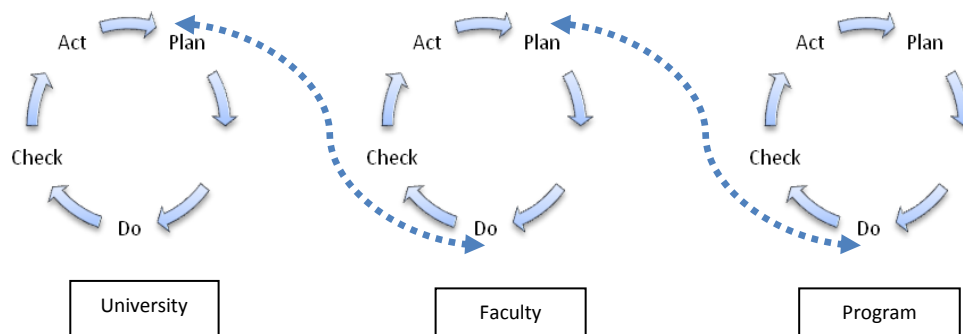
Figure 8-2 The internal quality assurance system of UU
Source: Self-Study Report Institutional Audit Utrecht University, December 2011

At institutional level a number of principles and minimum conditions for the internal quality assurance system were formulated, eventually resulting in the so called 'chassis' (Universiteit Utrecht, 2001c, 2011d). All faculties must have a system of internal quality assurance that fits into this chassis, of which the guiding principles are: clearly and noticeably structured responsibilities; internal quality assurance in line with external quality assurance; a cyclic character (PDCA) of evaluation of the programs; periodic and structured evaluations at course and curriculum levels; periodic involvement of students, academic staff, alumni, and the professional field in the quality assurance system and results of quality assurance are public. The education chassis provides a uniform course size, institutional timeslot model, institutional year schedule, and fixed registration period in order to guarantee the quality of education offered at program level.

Interviewees indicated that the institutional quality assurance chassis allows great differentiation between the quality assurance systems at faculty level. It aims for a tailor-made approach: tools to be used differ among faculties and can be customized to meet the nature and culture of each faculty, affirming the institutional vision on how quality assurance and improvement are expected to be realized. Even within a faculty there can be differentiation depending on the nature and extent of each program. Each faculty must have its own quality assurance plan, containing and explaining the roles, tasks and responsibilities in this matter.

For many decades this university is systematically collecting and analysing data among different target groups to improve the quality of the education. In the meantime, there are extensive databases available to staff and students. Many purposes are served with this approach: information needed for the self-study reports, verification of the strategic goals, measurement of the effects of various projects, monitoring of the trends, benchmarking and the development of new policy. UU is aiming to make policy decisions more evidence based. Therefore, the department O&O is working on a data-warehouse, where databanks will be coupled. Quantitative data and evaluation results to be used are generated at program, institutional, and national levels.

At institutional level a diversity of quality instruments are used to monitor and control quality assurance and improvements at faculty levels. One of them is the aforementioned education card. This education card contains all aggregated management information of the programs and is useful for the Executive Board, deans and program directors to monitor the evaluation results. To complete this education card results of surveys done at national level are also used, such as the national student survey and WO-monitor. These results are public, which facilitates the collection of quantitative data and benchmarking with other governmentally funded universities.

Also results of surveys by students, alumni and staff members and in-, through- and output study results are information channels for the Executive Board. Once a year, there is a meeting between the rector and each dean to specifically address quality issues. This is based on a report of the dean in which he/she reflects on the improvements made the past year, elaborates on his/her future plans and discusses possible bottlenecks. The education card is also a valuable input for these meetings.

On a regular basis deans discuss quality issues with their program directors. Each dean is allowed to organize these meetings according to what they think is best. During the annual meetings on quality issues at institutional and faculty levels targets are defined to guarantee continuous quality improvement. The results of the evaluations at program levels are also input for a new strategic plan and in this way the quality cycles are completed, illustrating how the institutional, faculty's and programs' quality cycles flow into each other (figure 8-2).

The academic staff is managed by the program director, who consults with the vice dean of education, who in turn confers with the dean. The dean reports to the Executive Board. This illustrates again the interconnection of the quality cycles.

However, as could be noticed and affirmed by some interviewees the cyclic approach is said to be in place, yet many things still happen ad hoc.

Institutional and faculty results of the quality assurance evaluations are compared to the strategic agenda to verify if the set goals are met and if progress has been made over the years. In addition, this information is contrasted with national figures to see how the institution performs in comparison with similar ones.

In the institutional self-study report UU states that although all faculty plans on paper meet the agreed institutional minimum conditions, not all parts are yet well implemented (Universiteit Utrecht, 2011d). For instance, the involvement of alumni and the professional field is still a challenge for some programs. Furthermore, more attention also needs to be paid to the curriculum evaluation and the dissemination of the evaluation results. The monitoring and controlling of the implementation of the institutional guidelines can also be strengthened. However, several interviewees brought forward that the internal system of quality assurance is not based on control, but on confidence. "If we agree to do something, we trust that it is done", one interviewee observed.

Quality structure

The description of the previous indicators reveals UU's quality structure: a centralized-decentralized structure. At institutional level guidelines are approved, giving the Executive Board the final responsibility, while the responsibilities for quality assurance and accreditation lay at faculty level. The implementation strategy varies between the faculties, but must fit with the agreed institutional guidelines. Furthermore, as previously described, there is a mix of formal and informal lines with regards to quality assurance. According to the institutional self-study report this approach guarantees supervision at institutional level, while at the same time this may hinder the monitoring due to the involvement of so many stakeholders (Universiteit Utrecht, 2011d).

The involvement of the various stakeholders in the quality assurance process is presented in table 8-3. To a great extent this reflects the formal responsibilities with regards to quality assurance laid down in the national legal Acts WHW and WUB. Stakeholders are addressed according to the formal structure that guides the process of quality. This prevents discussion on who is responsible for what, interviewees mentioned. For instance, if signs come in that a program is not performing well the program director will be addressed by the dean not by Executive Board.

At institutional level the Department O&O is in charge of supervising, controlling, and monitoring the accreditation processes taking place within the university. Faculties have also staff members appointed that are entrusted with the implementation of the quality assurance plan. Each program has also its own quality staff member. However, one quality staff member could have more than one program to support. For instance, at the Faculty of Social Sciences seven undergraduate programs are offered and there are four quality staff members at program level, besides the two quality staff members operating at faculty level. Every two weeks all these members meet with the vice dean

to discuss recent quality issues. And the week in between there is a meeting between the vice dean and the two quality members at faculty level confer (Universiteit Utrecht, 2008). This quality structure may vary per faculty depending on the nature, culture and extent of the programs.

Table 8-3 Responsibilities of internal stakeholders at UU

Internal Stakeholder	Responsibilities
Supervisory Board	Supervises the design of the system of internal quality and the functioning of the entire institution. Input to fulfil this task is the half-yearly report of the Executive Board.
Executive Board	Has the ultimate responsibility for the quality of the teaching and research of the institution, using several quality instruments; reports twice a year to the Supervisory Board on the process of internal quality assurance; reports also to the university council on the achieved results. If deemed necessary, proposals to modify the quality system are presented by the Executive Board to these two parties.
Dept. O&O	Supports the Executive Board with information and advice; makes the framework within which the faculties need to operate; monitors and controls if the faculty's quality plans are in line with the approved institutional guidelines; guides the accreditation process at the faculties; provides feedback on self-study reports; is liaison to NVAO; develops and distributes the education card.
Dean	Is responsible for the quality of the teaching and research at faculty level and thus the development and implementation of a quality assurance system; reports to the faculty board and is accountable to the Executive Board; drafts report on the progress of quality assurance activities and agreements made.
Vice dean education	Leads the accreditation processes and provides final approval of self-study reports before submitting to the department O&O.
Program Director/ Master Coordinator	Is responsible for the quality of the program and is expected to be the steering officer during accreditation processes, although this is not always the case.
Education Staff member at faculty level	Supports the program directors and master coordinators with the implementation of quality assurance activities and the use of the attached quality instruments.
Quality coordinator at faculty level	Coordinates quality assurance and improvement activities at faculty level; supports and advises the program director and the vice dean.
Quality staff member at program level	Is in charge of quality assurance and improvement activities; supports and advises the program director and the vice dean.
Program committee	Consists of academic staff and students; discusses the evaluation results and the suggestions coming from the quality circle; formulates improvement actions for the program director.
Academic staff	Is responsible for the quality of the course he/she teaches; is part of the program committee; discusses the evaluation results with the dean.
Head of support departments	Facilitates the Executive Board with all information needed and advises them on relevant topics, including quality issues; supports accreditation process in their respective field of work.
Student	Involves in the quality of education through various student participation or advisory bodies and also takes part in institutional and national students' surveys.
Examination board	Ensures the quality of testing and examinations, according to the assessment and examinations rules and regulations and WHW.

Involvement of stakeholders

According to the university's chassis directing its quality assurance system the stakeholders to be involved are academics, students, representatives of the professional fields and alumni (Universiteit Utrecht, 2011d; Fennema et al., 2010). The NVAO review panel approved the involvement of the internal stakeholders as they are on a regular basis queried in the evaluation processes (NVAO, 2012).

As previously explicated, formal consultative bodies have been established at all administrative levels as the university values the participation and commitment from students and staff for its successful operations (Universiteit Utrecht, 2011b). Utrecht University gives students and academics a voice and actively involves them through various studies and panel discussions in the quality cycles. For instance, UU's strategic plan 2012-2016 was prepared in close collaboration with the entire university's community: students, employees, external stakeholders and other interested parties took part in meetings to discuss the university's targets and lines of action, thus contributing to the development of Utrecht University's desired strategic course.

With regards to the input/contribution of the professional field in the accreditation process this differs between the faculties or even at program level, as allowed by the institutional chassis. For instance, at the Faculty of Social Sciences there is a social advisory council at faculty level and the programs have their own professional consultative body (Universiteit Utrecht, 2008). This is also the case at the Department of Law (Universiteit Utrecht, 2010). Yet, according to the institutional self-study report UU is less satisfied with the involvement of the professional field in the evaluation of the programs (Universiteit Utrecht, 2011d). Also some interviewees at faculty level pointed out that the influence of these groups on the quality of the education programs is too limited; improvement actions are needed on this particular quality issue.

Alumni of UU participate in the alumni's survey at national level. The results are incorporated in the UU's education card and discussed during the meetings of the Executive Board and the deans (Universiteit Utrecht, 2011d).

Involvement of external experts

As confirmed by all interviewees, during the accreditation processes, old and new, no external experts were used. UU considers that there is enough expertise within the university to address all quality issues and to guide, lead and direct the accreditation processes at institutional and program levels. One interviewee emphasized that execution of the different tasks linked to an accreditation process by internal stakeholders leads to more involvement and increases ownership.

8.1.4 Summing up

Utrecht University is the largest university participating in this study. The university has many years of experience with external quality assurance and during the years has built a well-thought institutional system of quality assurance and improvement. This was confirmed by NVAO since this university in 2012 successfully completed the

institutional audit. *The internal of quality assurance policy* and its related *internal quality system*, based on centralized guidelines and decentralized, differentiated implementation seemed to work well, fits the organizational necessities, meets the NVAO requirements and contributed to the many success stories. UU has a well delineated *decision-making structure* and *quality structure* in place, with clear descriptions of roles, tasks and responsibilities.

The successful accreditation results were mainly due to the developed *quality culture* throughout the past decades, based on an open culture where sharing of experiences, knowledge and good practices are embedded in the organization. *Leaders and managers* at all levels are committed and the *stakeholders* are involved when necessary, although improvements in this last matter are required. No *external experts* were involved due to the many years of experience and developed internal expertise in the past decades.

Another important encouraging factor during the accreditation processes is the *availability of all resources*. The *quality and quantity of the human resources* are sufficient, while the necessary *financial funds* are earmarked to guarantee no obstruction of the accreditation processes. All *required facilities* are also in place. Worthwhile mentioning is the focus on the quality of the academic staff, providing several encouraging instruments to enhance the quality of the teachers' performances.

To conclude, Utrecht University applied the independent variables in such a way that they all encouraged *(enabler$_a$)* the progress of its accreditation processes, although there is still some room for improvement. No hindering factors *(barrier$_a$)* during the accreditation processes could be identified.

8.2 HZ University for Applied Sciences

HZ University for Applied Sciences (HZ) is a professionally-oriented university located at the remote south-west part of the Netherlands[40]. In 1987 HZ emerged from a merger of various small higher education institutions in this region

The programs offered at HZ successfully completed their first accreditation cycle in 2011, obtaining the accredited status by the NVAO. As of 2012 the aim is on maintaining this status while going through the second accreditation processes. Below the main elements of both accreditation cycles during the past decade are described based on an analysis of several institutional and departmental documents and five in-depth interviews conducted in August 2012. The interviewees were the former and current Head of the Department of Education and Quality, another staff member of this department who is heavily involved in accreditation processes at academy level, one academy director and the board secretary. Based on their position, these interviewees could provide relevant information of the accreditation processes from various perspectives.

---

[40] In 2011 the former Hogeschool Zeeland changed its name to "*HZ University for Applied Sciences*" in order to meet the new direction of the university, with a new focus on regional as well as national and international students.

8.2.1 Institutional background information

As stated in its statutes HZ aims to provide high quality professional associate, bachelor and master level programs, primarily to meet the needs of the public and private sector in the south-west region of the Netherlands (HZ University of Applied Sciences, 2011c). In addition, HZ intends to be a higher education institution that transfers knowledge to sustainable society development and contributes to the further development of professions in related fields of work. Another aim is to deliver graduates who are responsible, valuable and knowledgeable professionals with an innovative and entrepreneurial attitude, able to contribute to the socio-economic development of the region and equipped to function in a globalizing working environment. One more strategic goal of HZ is to develop into a regional knowledge centre in relevant fields. Academies (= name used for HZ's main subunits or faculties) plan to become knowledge centres that are regionally and/or (inter) nationally anchored, focusing on contemporary topics and as such contributing to making HZ a knowledge centre.

As indicated in several documents, HZ identifies itself as a "*Persoonlijke Hogeschool*", to illustrate the personal approach to its students (Hogeschool Zeeland, 2009b; HZ University of Applied Sciences, 2012a, 2012d). By doing so, HZ strives to meet its vision to become an independent knowledge institute with an entrepreneurial, efficient and customer-oriented approach towards its educational and research activities that are regionally embedded and internationally oriented.

HZ aims to obtain a distinguished and competitive position as a regional and national knowledge institute, as posted in its strategic plan and affirmed by the interviewees. According to its strategic plan, HZ has three core values: commitment, quality and integrity and respect (Hogeschool Zeeland, 2008, 2009b). During the past years quality has become a major issue within HZ: quality of education and research, but also quality in the approach towards students, colleagues and stakeholders[41]. According to most interviewees the focus on quality delivery is reflected in all HZ activities; continuous development and improvement are main valuable directions. Employees are expected to be committed to their daily tasks, to act in a responsible manner and to be accountable for their performances, in which internal and external collaboration plays an important role. They are expected to adjust to the changing environment in creative ways in order to achieve adequate innovation and renewal. Quality at HZ also means that employees continuously strive to reach the agreed results according to the set timeline. This has to be manifested in high academic success and student

---

[41] This focus on quality has improved the national ranking position of HZ. In 2012 HZ scored as the best university for applied sciences in the Netherlands in Elsevier, a ranking magazine for all Dutch higher education institutions; in Keuzegids, the other main Dutch ranking magazine, HZ in 2012 scored at the second place. Also according to the national students' survey HZ-students were greatly satisfied with their university and thus granting HZ with a satisfaction score higher than the national average (HZ University of Applied Sciences, 2012a).

satisfaction. Mutual respect and integrity are necessary to create an educational environment needed to improve quality.

In academic year 2012 – 2013, HZ consisted of seven academies, offering 27 professionally-oriented full-time programs: one at associate, 24 at bachelor and two at master level[42], spread among a student population of about 4200, mostly coming from the south-west region of the Netherlands. HZ has two types of academies: four core academies offering a wide range of programs, mostly accessible to regional students so as to meet the needs of the regional labour market and three profile academies that offer unique, mostly English-taught programs with national and international orientation (HZ University of Applied Sciences, 2012a).

After evaluating the latest educational innovation attempts some modifications were made in HZ's educational vision in order to better meet its strategic goals. The focus has become to strive continuously to find a balance between unity and diversity within the institution. HZ efforts are directed to deliver high quality education providing enough space and freedom to shape the unique character and profile of the offered programs. Some features of HZ's educational concept are: good access to the academic staff, intensive interaction between students and this staff facilitated by its small scale and reflected in the way education is organized and presented, intensive coaching of students in small-scale professionally-oriented education, demand driven, flexibility, focus on the individual and the use of the major-minor model to provide students with opportunities to make personal choices that match their ambition and talents (Hogeschool Zeeland, 2009c). Through the minors as part of the program the students have the possibility for differentiation and profiling.

This university believes that its small scale encourages involvement and commitment with sufficient possibilities for everyone to develop their particular talents. All interviewees considered this belief as one of the main strengths of this university, although HZ is growing both in terms of student numbers and number of programs. The increased investment in quality assurance and improvement is seen as the main reason for this boost.

HZ wants to continue its expansion, including more programs at master's level, in order to become more attractive to national and international students. The aim is to expand the student population within four years to about 5200, with students primarily coming from outside the region. Initiating the profile academies is expected to contribute to reaching these strategic goals[43]. The institutional goal is controlled and differentiated growth, based on quality delivery. Interviewees commented that by becoming a more attractive and well-known higher education institution, with a national high ranking position, based on concentrated attention on continuous quality improvement its expansion goal will become more feasible.

---

[42] Besides these full time programs, HZ also offers 10 more part time programs.

[43] HZ received preferential license from the ministry of education (OCW) for certain sectors, like maintenance, water engineering, energy transition and tourism. Water engineering (delta) and tourism have become niches of the university.

8.2.2 The dependent variables

By the end of the research period HZ University was going through the second accreditation period, after completing successfully the first one. In this section first the steps taken during the accreditation processes are explained and subsequently the achieved accreditation results.

The accreditation processes

As explained in chapter 6, the history of external quality assessment in the Netherlands started long before the enforcement of accreditation by law in 2003. During those years at HZ, the management was responsible for the producing the self-study reports whilst teaching staff were barely involved in the self-evaluation process.

To comply with the mandatory accreditation demand articulated in WHW from 2003 onwards external quality assurance at HZ takes place within a 6 year cycle according to the procedures and quality standards of NVAO. The accreditation framework became the major determinant for the internal quality assurance actions geared towards external quality recognition by NVAO as the accreditation body. According to interviewees accreditation contributes to the quality that HZ wants to achieve. They brought forward that although accreditation was primarily mandated by external reasons, the internal aim to deliver high quality education is also served.

In 2004 the start of the new way of external quality assurance in the Netherlands based on the NVAO framework was launched at HZ with a general information session for all management and staff members to be involved, presided by the head of the department of Education & Quality (O&K). Figure 8-3 illustrates the steps that were generally taken as part of the first accreditation cycle at program level.

Figure 8-3 Steps undertaken during accreditation processes at HZ

The start-up meeting was with the program coordinator, the program team and the department O&K. Oftentimes the academy director is only informed of the start of the accreditation process for a particular program in its academy. The timeline is then set, including all deadlines.

Self-evaluation processes consist of different activities, e.g. collecting of all necessary data, modification of documents, if deemed necessary and the writing of the self-study report. The interviewees explained that the writing process of the self-study report is generally done by the department O&K. This approach is considered as more efficient. The institutional staff member is more experienced and knows better how to organize the information in this report, while the program team provides the specific content

information. This is done based on shared responsibility. The philosophy behind this approach is that by doing so institutional staff members will build more experience than someone at program level who only does this once; no enduring experiences are built in that case. Due to the small scale mostly everybody at program level is involved, since during the site visit all team members are part of the interviewed teaching group. Many sessions are held to discuss the report until approved by the program coordinator. Only occasionally the self-study report has been written by a member of the program team. In this case when the draft is finished it is submitted to the department O&K to determine whether it meets the NVAO standards. In general, only in case of problems the academy director will be involved. Otherwise, he receives the final draft of the self-study report to provide feedback. After final approval of the report by the department O&K, the Executive Board submits it to NQA in case of an existing program or to NVAO if the program is new.

The trial site visit takes place about four weeks before the site visit with all groups, i.e. students, teachers, management and field work representatives. This happens in 'inside and outside' circles model, so the different groups can learn from each other. The trial site visit is organized by the department O&K with administrative support of the academy office. The panel consists of one member of the department O&K who has experience with accreditation and a program director who has just gone through an accreditation process. Occasionally an external expert is involved. At the end no review report is written, yet feedback is orally given by them. Feedback is also given by those in the outside circle to the ones in the inside circle.

During the trial site visit the focus is on the importance of accreditation and to inform and train all participants well on what they can expect during the site visit. The main goal is to gain experience on what a site visit is all about and to experience the team work. With the inside-outside circle approach everybody can hear what the other group presents. Interviewees indicated that this has a great learning effect. Trial site visits are the only training given to the participants. Additional sessions are held only if a particular group did not perform well after the trial site visit. Finally the site visit takes place, which is coordinated by the department O&K.

HZ completed the first accreditation cycle of its programs in 2011. During the first accreditation cycle almost all accreditation attempts were immediately completed with positive outcomes, except for one program that had to perform some additional improvements in order to finally receive the accreditation status.

As part of the second accreditation processes HZ has chosen for an institutional audit, followed by a limited program assessment. According to the interviewees this choice is based on various reasons. One of them is the ambition of the university to be one of the best. Furthermore, it was expected that less intensive investment will be necessary for program assessment, because of the positive result of the institutional audit. Interviewees experienced the first round of the accreditation processes as quite demanding at program level because of the small teams. These processes were experienced as complicated, challenging and time consuming; additional work had to be done, which took time from education as the core business. Interviewees expect an

institutional assessment to lessen this burden. Also the fact that mostly all other higher education institutions did choose for institutional audit influenced this choice of HZ. One interviewee indicated that if HZ does not follow this trend, it could affect the enrolment of new students; "They could make the wrong conclusion, since institutional assessment is to prove that a higher education institution is 'in control'; not doing so could be therefore wrongly interpreted". In November 2012 HZ went through an institutional audit by NVAO with positive result.

In the meantime several programs achieved positive assessment for the second time, consequently maintaining their accredited. HZ aims to maintain this trend. During the second accreditation processes some improvement could be observed in the judgments; there are more 'good' scores given by the review panels, thereby meeting the set institutional strategic goal and indicating improvement of the quality delivered.

The same steps undertaken at program level during the first accreditation cycle (figure 8-3) will be part of the second one as well. Also in this process the department O&K will be the steering unit and will write most of the critical reflection reports.

Concerning the institutional audit in 2011 this process started with an informative meeting presided by the department O&K to provide background information and to shed light on the implications. Soon it became clear that this process should be an institutional effort. As one of the interviewees formulated "Institutional accreditation is a test for everybody, so all have to be involved and support it; the site visit will evaluate if the quality approach is done by all involved, not only at institutional level". Many conferences were organized and extensive discussions took place to get more people involved, including students. The board secretary played a prominent role. Interviewees indicated that there was a lot of enthusiasm, commitment and involvement in this process. A steering committee was installed, consisting of the academy directors, the department O&K, the board secretary and the members of the Executive Board to monitor and control the development of the institutional self-study report and ensure the involvement of all relevant stakeholders, facilitated by NQA.

After a first draft of the self-study report a trial site visit was held with an external panel. All the necessary adjustments were made based on the panel's feedback and eventually the institutional accreditation was granted. As previously indicated, in the case of program assessment the trial site visit regularly takes place just a few weeks before the site visit, but in case of the institutional audit this happened more in advance, providing HZ with an improvement period to work on the trial site visit results, since this type of external evaluation was new for the university.

The accreditation outcomes

During the past decade HZ has gained some experience with accreditation processes, mostly with positive results. According to the interviewees, accreditation helps to focus the attention on quality on a regular basis. One of the major impacts of the embarked accreditation processes was increased quality awareness and the realization that there is always room for improvement (internal factor). As several interviewees indicated the

improvements took place fairly gradually and there are less improvements still to be done. Accreditation has also raised the understanding that positive evaluation is imperative to keep the right to exist permanently (external factor). According to the majority of interviewees, going through an accreditation process became an objective of the whole university; a shared responsibility. As one interviewee commented "It became common concern to reach accreditation, not only of a particular program. It is in our own interest to get accredited".

Since one of the strategic goals of HZ is to be continually accreditation worthy, most interviewees acknowledged that it should not matter anymore when a review panel comes by, everything should be in place at any time. However, this is still a challenge, they further posited; after site visits people tend to relax and between two site visits too little happens.

According to interviewees, the accreditation process at HZ itself could be improved. Managing of these processes has to become more focused. They further indicated that the new accreditation framework is better for the teachers and work field representatives. The program evaluation is about the content in contrast with the former framework that was about the quality system, justifying the evidence of everything that had to be done and not the content. "Now they can talk about the content', one interviewee posted.

Nevertheless, as a consequence of accreditation efforts and to become more effective and efficient with the available resources some existing programs have ceased or will cease to exist; a number of undergraduate programs have been stopped and some others merged into broader ones to give space for the start of new ones to meet the needs of the local youth and also in order to reach the strategic goal to become more nationally and internationally oriented.

Most interviewees brought forward that one critical influential factor for the accreditation outcome is the review panel. If the program team and the panel connect positively and the site visit day runs smoothly, the chance to achieve an affirmative quality assessment and therefore achievement of an accredited status is almost 100%, but vice versa is also the case; no proper match between the program staff and the panel increase the chance for negative result increases. "The panel is the key; they can make or break the accreditation", as one interviewee commented.

With regards to possible hindering factors for accreditation processes, interviewees indicated the small scale of the program teams. The aim to increase the number of programs in order to also increase the number of regional, national and international students will demand much more from the small program teams, whilst going through an accreditation process already asks for major effort of these undersized teams. Institutional accreditation seems to be the solution, due to limited tasks expected for the program accreditation. This expectation could not be verified during the research period, since at the end of 2012 only a small group of program accreditation in HZ had taken place for the second time according to the new accreditation framework.

8.2.3 The independent variables

In this section the five independent variables are discussed, based on information collected through document analysis and five in-depth interviews. This case description is done according to the 17 indicators.

8.2.3.1 The organizational structure

Organizational chart

The organizational chart of HZ is portrayed in figure 8-4. The tasks, roles and responsibilities are defined in the administrative regulations (Hogeschool Zeeland, 2010a). The Board of Trustees operates in accordance with WHW. At least twice a year there is a meeting between this board and the Executive Board, which is the highest managerial body according to the WHW (Ministerie van OC&W, 2010). The two members of the Executive Board are appointed by the Board of Trustees. They operate based on a collegial governance model with biennial rotation of the presidency. The quality management system is one of the decisions of the Executive Board that requires approval of the Board of Trustees (HZ University of Applied Sciences, 2012a).

The board secretary is greatly involved in accreditation processes within the university. He was a member of the steering committee in charge of the site visit regarding the institutional audit. He also has regular meetings with the head of department O&K in order to monitor the progress of the various accreditation processes at program level. In case any obstacles are encountered, he can intervene on behalf of the Executive Board, since he prepares and participates in the weekly meetings of the Executive Board and needs to report on the progress of accreditation processes. The board secretary also organizes many meetings to create support and acceptance of new visions on particular issues, including accreditation. He has informal and formal contacts with students and various internal stakeholders.

The Bureau Monitoring & Control is responsible for monitoring and controlling the implementation of the planning and control cycle, defines key indicators and performance indicators, monitors and reports on the performance of the HZ-institution, risk management and control, performs audits on the risk areas, completes statistical analyses and formulates recommendations (Hogeschool Zeeland, 2010a). Remarkably, no information on the involvement of this bureau in the accreditation processes was available in the studied documents, neither was it mentioned during the interviews. Consequently, in this case description additional information of this bureau cannot be reported.

The academy director is in charge of the management at academy level (strategic level), supported by the program coordinator of each program, in charge of the daily operations at program level. The academy director has the final responsibility with regards to accreditation, yet it is the program coordinators who are involved in the daily preparations towards accreditation.
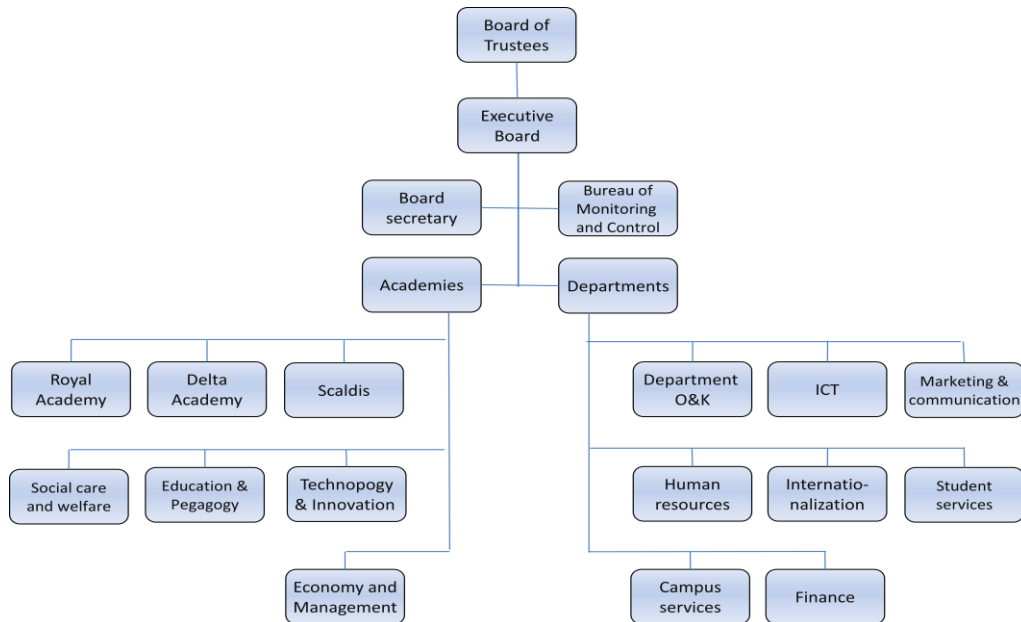
Figure 8-4 Organizational chart of HZ

The department O&K plays a determinant role during accreditation processes. The involved staff members can be considered as the steering officers in this regard. This department provides support to educational development and quality assurance. The extent of the support depends on the needs of each specific program. During the site visits this department plays a central role, acting as host, providing support in case of emergencies and specific questions of the panel and conducting briefing and debriefing of the participating groups (Hogeschool Zeeland 2010a, 2010b).

Decision making structure

HZ has a centralized management approach. Most policy plans are developed at institutional level, e.g. the quality policy plan, HR-plan, ICT-plan and assessments and examination rules and regulations. According to the interviewees by doing so, HZ becomes a unified body for the internal as well as external world. Accordingly, there are not many discrepancies between the academies, although they can add specific academy parts if the need is felt at that level as long as these match the institutional framework. Consequently, line managers do have a variety of responsibilities to guarantee the implementation of the university-wide policy plans. From central level there can be interference if something does not go as agreed or in case of challenges, e.g. providing of extra support during accreditation processes.

An important instrument in the decision-making structure at HZ is the 'Bestuur & Management Overleg' (BMO), during which the academy director or department head formally reports to the Executive Board on the performances agreed on, including critical success factors and issues related to quality improvement and accreditation. Table 8-4 contains an overview of all formal meetings within HZ.

Table 8-4 Formal meetings at HZ

Meetings	Frequency	Stakeholders	Topics addressed
BMO-meeting	Quarterly	Executive Board and each academy director or department head.	To discuss results of all kinds of evaluations/ surveys, results of internal audits, attainment of the agreed performance indicators, financial issues and the site visit report and the attached improvement plans, their content and progress.
Personal Meeting (PO)	Monthly	Bilateral meeting Executive Board and an academy director or department head.	To discuss more general issues and the implementation of any specific issue in any academy or department, supported by department O&K. The BMO-meetings have a more formal tint whilst the PO-meetings are more directed to inform and help.
HZO (HZ-meeting)	Monthly	All managers presided by the Executive Board.	To share information, for alignment on organizational issues and to reach agreements. This consultation leads to proposed decision to be finally taken by the Executive Board.
Meeting head of departments	Monthly	Department heads	To spread information and discuss institutional issues.
Meeting of Academy Directors	Monthly	Academy directors	To spread information and discuss institutional issues.
Organizational meetings held outside HZ	If needed	Managers and staff members, many times also including students.	In case of major institutional projects, such as the development of the new strategic plan and the institutional self-study report external meetings are held to discuss the steps to be taken and the outlines of respective reports.
University Council (Hogeschool Raad**)**	Monthly	Executive Board, employees and students	This council is consulted on numerous issues as indicated in WHW, e.g. annual report, tuition fees, and exam regulations. The university council is informed about the accreditation processes and if needed, they can provide advice on this issue.

According to the interviewees the roles and responsibilities are well set and everybody is well informed. They further emphasized that although the formal consultative and advisory bodies are in place, due to small scale many things are dealt with in an informal way; there is a lot of informal consultation to discuss all decisions to be taken; there is great involvement and participation at all levels within the university. Many discussions in several groups and many consultations are done to prepare policy development, before a decision is taken by the Executive Board, including issues to be addressed during accreditation processes. Personal contacts facilitate a good information flow. Though, interviewees observed that the adequate balance between the formal and informal way of approaching things still needs to be found.

8.2.3.2 Leadership and management style

Role of institutional leaders

HZ works with a planning and control cycle in order to control and monitor its policies and the realization of its vision and strategic goals. This cycle starts with the strategic plan, containing strategic goals and strategic initiatives, translated into a wide variety

of activities. Thereafter, these are articulated in governance and management agreements to be implemented at all managerial levels. The planning and control cycle is also used by the Executive Board to guarantee continuous quality improvement and to maintain the accredited status.

The BMO-meetings are part of the planning and control cycle, helping the Executive board members to keep an eye on the performances related to continuous quality improvement and the progress of accreditation processes. During BMO-meetings the line managers report periodically to the Executive Board on the key performance indicators agreed upon, such as an average satisfaction rate, ranking position, study results and achieved scores on the accreditation standards. Also the reports of previous accreditation efforts are discussed in these meetings and used as an instrument to follow the implementation of improvement suggestions made. In PO-meetings the current status of accreditation is discussed. By doing so, the Executive Board is constantly well informed about quality assurance and accreditation within the university. The BMO-report, based on a standardized format, is also handed to the financial controller, board secretary, HR-department and department O&K to be studied and analysed in order to advise the Executive Board based on possible implications in the relevant field of work.

As shown in table 8-4, with regard to quality assurance and accreditation at institutional level decisions are formally taken by the Executive Board, yet these are preceded by wide internal discussions with relevant stakeholders. Interviewees stated that to encourage the quality culture more and more a bottom up institutional leadership approach is implemented, directed to enhanced involvement and participation. Moreover, interviewees specified that effective and efficient support of quality improvement processes, including accreditation, is at HZ based on a transparent policy and performance management. They asserted that the Executive Board is greatly committed to support and facilitate the accreditation processes. According to this board each program needs to be ready for accreditation at all time. The centralized policy plan is an instrument used to facilitate the achievement of this goal.

Interviewees also indicated that the Executive Board is well informed due to personal contacts. The members also participated in the steering committee to prepare for the institutional audit process. According to some interviewees, since the reputation of HZ was at stake with the result of that process, it was important to have short lines. The Board of Trustees, the regional environment and politicians were all eager to know how well HZ was performing in comparison with other similar universities. The achieved positive result has largely contributed to improve the image of this university; thereby reaching the strategic goal set by its institutional administrators and satisfying all internal and external stakeholders.

Management at faculty level

The management of each academy rests with an academy director, who is responsible for the implementation of a well-functioning internal system of quality assurance at

academy level based on the institutional policy plans to enable the external evaluation process (Hogeschool Zeeland, 2010a, 2010b). The academy director has to direct and control the implementation of the quality instruments and quality improvement actions in order to reach the strategic goal of offering high quality programs (Hogeschool Zeeland, 2009b). Accordingly, the responsibility to achieve and maintain the accredited status for the academy programs is in the hands of the academy director. However, as was earlier explained and affirmed by the interviewees, academy directors do not hold the role of the steering officer during accreditation processes. This role is mostly executed by program coordinators together with the department O&K, mostly initiated by this department.

Academy directors are responsible for the standardized BMO-reports to be discussed during the BMO-meetings. It is important for academy directors to meet the centrally set targets within the financial possibilities, but they have the freedom in the way to reach these goals. Interviewees remarked that HZ is a learning organization in this field; the implemented planning and control system has been regularly improved.

Interviewees also indicated that there are great differences between the management styles and the levels of involvement of academy directors. In case the academy director is greatly involved in the management of the programs, in-depth discussions on educational issues and innovation approaches are held which act as a stimulator during quality improvement processes. If many improvements still need to be done then the managerial style of the academy director cannot be considered as an enabling factor during accreditation processes at academy level. Nevertheless, the interviewees ascertained that all academy directors are committed to reach the accreditation goal. They are directly involved in the process in different manners or to different degrees. According to the interviewees, an important support factor in this regard is that at HZ the management conditions are in place. There is a clear delineation of tasks, responsibilities and accountabilities, sufficient budget is available and there are HR training possibilities and facilities to facilitate the functioning of these managers.

8.2.3.3 Quality Culture

Care for quality

Quality is one of the core values of HZ and therefore considered at all organizational levels as of great importance for the functioning of this university (Hogeschool Zeeland, 2010b). Quality of education and quality in dealing with all stakeholders are both in a structural manner encouraged within the university. All interviewees are convinced that the provision of quality is high on everyone's agendas. The main characteristics of the existing quality culture at HZ are: well-motivated teams, many informal consultations, increased bottom up approach but with centralized plans, good overview of the evaluation results (InfoNet), incessant willingness of teachers to help students and the high approachability of teachers due to the small scale. According to some of the interviewees what can be improved is the eagerness to help each other across the programs; program teams should be able to knock more easily on each other's doors to ask for help.

Staff members at all levels are committed to delivering quality and contributing to continuously improve the acquired quality level. The teaching staff is responsible for the quality of education and the level of learning outcomes. They aim to improve the education and formulate measures along with the program management that facilitate their working conditions and thereby promoting quality delivery (Hogeschool Zeeland, 2010b). The involvement of students in that process is considered to be indispensable, not only to complete questionnaires, but also in qualitative assessments that are part of the course to explain the strong and weak parts of the whole program and/or specific courses indicating what needs to be improved. Interviewees commented that by pooling the contributions of teachers and students together a quality culture is created that focuses on maintaining and improving the quality of education. Nevertheless, there are some differentiations among the care for quality at program level. Interviewees indicated that in some program teams there is a 'we culture', and together they all go for it. Even in these teams however, the existing quality culture can still be improved. For instance, not everywhere the formalities are in place and minutes are available for all meetings; things still happen implicitly. Within the university the staff acknowledges that this is a problem for accreditation.

Interviewees commented further that more emphasis on quality culture is needed, since in the new NVAO framework this variable is emphasized. Previously it was important to score well, but now working together in order to achieve continuous quality improvement based on a more critical self-reflection is necessary, they further observed. One interviewee argues that everybody is committed to students and work. However, he is not sure that intrinsic quality awareness is there. Not everyone is equally dedicated to quality efforts, but the question is if this could be expected from everybody, he further stated. Undoubtedly this should be the case of those in important positions, with responsibility to engage everybody in that process. But he questioned if the same thing should be expected from everybody.

Shared responsibility, ownership, cooperation and collaboration among stakeholders

As stated in its strategic plan, within HZ a professional culture consisting of involvement, responsibility, ownership and professional identity of the employees is the leading thread. (Hogeschool Zeeland, 2009b). "We act based on honesty, trust and clear agreements", one interviewee expressed. Furthermore, most interviewees emphasized that the small scale does play a determinative role. Small scale has its pro's and con's; a small team is a pro, yet at the same time being small is vulnerable for any small happening; if there is any kind of tension it can affect the accreditation process, e.g. if in a small team one or two members do not realize the importance of accreditation and do not contribute as they should, then the whole accreditation process is affected and could be jeopardized. One interviewee indicated that the strength of HZ is that there is no 'island' approach, but rather much mutual cooperation and collaboration, informal consultations and broad based alignment.

Commitment of internal stakeholders

As stated in the previous indicators, all interviewees affirmed that the internal stakeholders are committed to deliver quality; everybody knows the importance of quality and work towards it. Teams are motivated to provide quality in everything they do. Accordingly, various interviewees considered commitment of teams as an encouraging factor and is a determinant factor for the accreditation result.

The ambitions, involvement of the stakeholders, in particular of the teachers, and their willingness to work to achieve the goal are positive contributors to accreditation. If the team feels responsible for the results it will facilitate the accreditation process. Interviewees stated that in the institutional management approach an informal structure is also allowed and people are really motivated, which stimulates the quality culture, even though not all things are yet outlined on paper.

Norms, values, traditions, customs and people behaviour

Based on the SWOT analysis done in 2009 HZ concluded that its staff consists of motivated and committed employees with an open, collegial communication relationship, performing based on personal integrity and social responsibility (Hogeschool Zeeland, 2009b). Cooperation is done with respect and consideration for each other and recognizing everyone's contributions and responsibilities. HZ considers that within its professional culture involvement, responsibility, ownership and professional identity of the employees are basic fundamentals.

Communication channels and interaction among internal stakeholders

In HZ formal as well as informal communication takes place. In table 8-4 the formal meetings and consultation bodies were presented, during which relevant issues regarding quality improvement and accreditation are discussed. These formalized communication structures have increased during the last years due to accreditation demands. However, as interviewees stated, there is still room for improvement, e.g. not all documentation is systematically organized yet.

In addition, interviewees expressed that due to the small scale of this university, staff members meet each other quite frequently in corridors and know how to find each other quite easily to talk in an informal manner and to address relevant issues of concerns and agree to do things. So, within HZ there exists an informal consultation culture as well.

The university's intranet provides all kinds of information to keep the staff well informed and InfoNet provides all the statistical information needed in decision making. Email correspondence is also an important communication channel.

8.2.3.4 Available resources

At HZ most services to students and staff facilities are organized at institutional level, as portrayed in figure 8-3. Policy plans concerning the support departments are centrally outlined and at academy level the academy director is responsible for

managing according to them. The small scale and the mostly unified management enable such a centralized approach.

Human resources

In December 2011 HZ had a total staff of 312 FTE, of which 62% was teaching staff (198 FTE over 264 teaching personnel). Almost all education and research activities are done by permanent staff members who are considered to be well informed on the latest development in their education area; guest lecturers may be sporadically hired to bring up to date practical information into the classes.

HZ tries to encourage its professional culture by offering the employees an inspiring and attractive work environment, since the conviction is that satisfied employees are vital and crucial to the realization of the strategic objectives, of which accreditation is one. HZ has an institutional HR-policy plan. Continual improvement of the quality of the staff by facilitating and encouraging their ongoing development is stated as one of HZ strategic goals (Hogeschool Zeeland, 2009a; HZ University of Applied Sciences, 2012a). As a consequence, the past years increased investments were made in the development of the employees in order to further improve their professional level. This was also done in order to meet the WHW directive that in 2014 80% of the teaching staff must have at least a master's level. In addition, it is mandatory for teaching staff in permanent service to have a pedagogical-didactical certificate in order to contribute to the quality of their teaching and therefore also to the quality of the programs, which can facilitate positive accreditation results.

Performance and assessment interviews are part of the university's HR-cycle. The results obtained during the students' course evaluations are discussed in these meetings and used as input for further training directions. Interviewees stated however that improvement in the full implementation of this personnel evaluation system is needed. The PDCA cycle is stimulated by the academy directors, visualized in the IMAR circle (HR interpretation of a PDCA-cycle in the INK-model): Inspire, Mobilize, Appreciate and Reflect. The IMAR circle emphasizes that quality is influenced by the human factor; the involvement and contentment of the staff members have an impact on their willingness to contribute to continuous quality improvement. At HZ the IMAR approach is encouraged throughout the university.

The program coordinator, some staff members of department O&K (about 1.5 fte), the quality coordinator at academy level and since 2012 the members of the institutional steering committee are those mainly involved in the accreditation processes. The department O&K do not receive additional time or manpower for assisting programs during their accreditation processes; they have to do it within their regular hours. Interviewees of this department brought forward that occasionally they have to work long days to reach the deadlines, but in general the workload is still manageable. At academy level if there are complaints about the additional workload extra time and money are allocated for hiring more manpower. Interviewees pointed out that if extra assistance is needed, the Executive Board is always willing to facilitate this.

Furthermore, interviewees brought forward that according to the new HR policy no permanent staff members are employed anymore; only temporary appointments are assigned. This can possibly become a barrier during accreditation processes. Since the teams are small (five to seven team members) if during such a process a lot of changes in the team constellation take place the stability and even the commitment will be affected which could possibly influence the progress of these processes.

Financial resources

The annual budget is about €43 million. The income revenues of HZ are funds from the Dutch government (63%), provincial subsidies, tuition fees, gifts and legacies (11%) and any other income received from profit-making activities (10%) (HZ University of Applied Sciences, 2012a). The annual budget is made by the Executive Board, in close cooperation with the academic directors and department heads, based on the agreed performance indicators. In this manner a transparent picture of the management is created based on figures in the budget and the long-term prognoses to be finally approved by the Board of Trustees.

Interviewees consider the financial position of HZ as stable. No financial problems are expected and with the prospect of expansion of the student population, HZ anticipates that it will generate more income in order to continue investing in the quality of the products and services offered to all internal and external stakeholders. None of the interviewees considers the amount of financial resources as a possible constraint during the accreditation processes. At the institutional level sufficient financial means are reserved to be invested in the accreditation process. Although accreditation still costs a lot of money, small scale is not a financial issue; "If money is needed for an accreditation process, it will be there", were the words of one interviewee.

Facilities

As portrayed in figure 8-4, there are eight support departments organized at institutional level to facilitate and support activities of the educational and research process of the academies. They assist the academies by means of advice, support, guidance and information. These departments also advise and assist the Executive Board in the formulation of university-wide policy frameworks and monitoring of the results at institutional level in respective field of work.

According to the strategic plan, to be able to continue to provide high quality, it is necessary to have an adequate infrastructure and sufficient supportive staff (Hogeschool Zeeland, 2009b). Thereby, adequate attention is paid to being effective and efficient and to having the necessary facilities in place to sustain each accreditation process. In line with the expected growth in the number of students HZ intends to expand and strengthen its facilities. The aim is to create a campus where a committed and enterprising community learn, work and live together, including a new virtual campus, which is complementary to and partially substitutes for the physical campus. This development is also important in order to attract students from outside the south-west region.

The facilities were labelled as good by the interviewees. No challenges are encountered with facilities during the accreditation processes at institutional and academy levels.

8.2.3.5 Internal quality assurance policy

Document on internal quality assurance policy

HZ has an institutional quality policy plan, which provides the direction of its internal and external quality assurance approach (Hogeschool Zeeland, 2010b). Important features of quality management at HZ are the encouragement of a quality culture, providing information and transparency in the improvement actions done in order to illustrate the educational and research quality and the accomplishment of the accreditation standards. The objective of the quality management approach is to ensure that HZ grants diplomas only to students who meet the requirements of the particular education level (associate, bachelor or master) and by doing so meet one of the most important requirements of the NVAO accreditation.

Interviewees remarked that because of the small scale of the institution there is a university-wide approach on most policies; the quality policy is one of them, but also the broad-based educational concept, the examination policy and the education and examinations regulations, all geared towards quality assurance. They further emphasized that the internal quality assurance approach is directed by accreditation; all activities to ensure and improve quality aim at compliance with the NVAO standards. Thereby, they consider internal and external quality assurance to be at the top of the priority list of this university. They further affirmed the importance of accreditation for the continuous quality improvement process, which has a positive effect on education, since more attention is paid to quality.

At academy level no specific quality plans are described; academies must comply with the institutional quality policy plan, but can add more specific parts to it based on their own needs and demands (HZ University of Applied Sciences, 2012d). Thus, some small differentiations on how quality is dealt with at academy levels can be found, e.g. one academy has a quality steering group, while others do not use this instrument. Also the way the evaluation results are dealt with can differ among academies or even among programs within an academy.

Internal quality assurance system

The internal quality assurance system of HZ is laid out in its quality policy plan (Hogeschool Zeeland, 2010b). The INK management model[44] and the accreditation framework of NVAO form the backbone of the quality management system, at the same time illustrating the link between the internal and external component of this system at HZ. The objective of the INK-model is to implement a quality system that is directed towards continuous improvement and innovation and involvement of all stakeholders. The achieved results based on quantitative and qualitative data analysis

---

[44] The INK model is a quality management model used in the Netherlands, following on the framework of the European Foundation for Quality Management (EFQM) model.

lead to the necessary improvements, modifications and innovations of the measured organizational field. The INK-model illustrates the groups to be involved in the quality assurance system, namely administrators, managers, directors, employees, clients, community, suppliers and funding agencies.

Besides holding the accreditation status, HZ wants to have an internal quality assurance system in place that will contribute to reaching their goal of keeping a top ranking position in the Netherlands for universities for applied sciences. And with regards to accreditation HZ aims to score 'good' in at least 70% of the quality standards (Hogeschool Zeeland, 2009b).

As stated in the quality policy plan, two important aspects are part of the internal quality assurance system: the groups and their achieved results followed by the improvements and innovations to be realized based on these achieved results (Hogeschool Zeeland, 2010b). The strategic plan of HZ contains the performance indicators the managers at different levels need to comply with (Hogeschool Zeeland, 2009b). The evaluation objects in the policy period are consistent with the requirements of the programs set internally by the various institutional policy plans (e.g. personal approach, flexibility, customer focused) and externally by the NVAO (e.g. achieved results, quality of testing and examinations, professional orientation). In consultation with the Executive Board and within the agreed framework, the priorities and the period to reach the agreed results per stakeholder at all organizational levels (academy, department) are determined and monitored. Data as evidence of the achieved results are collected by the clients and partners (students, alumni and work field), employees, community and funding agencies. Each manager reports periodically and the results are discussed in the BMO-meetings, following which new and/or modified performance indicators are defined. This is how the planning and control cycle is realized, where the PDCA-cycle plays the key role.

HZ uses a wide variety of quality improvement instruments and several quality mechanisms were introduced targeting continuous quality improvement (Hogeschool Zeeland, 2010b; HZ University of Applied Sciences, 2012a). This was done to ensure the attainment of the desired quality level so the programs are accreditation worthy at all times and the acquired quality level is constantly monitored in the quarterly BMO-reports, while involving all relevant internal and external stakeholders on a continuous basis. Several quality assurance instruments, mostly unified, are used to inform the various managers of the progress made and the results attained to be included in the BMO-report. Most instruments are used university-wide, yet to guarantee participation and involvement and to ensure wide implementation academy directors and the department O&K were involved during their developmental process. By doing so, a quality culture within the university is encouraged.

There are also meetings with all relevant stakeholders to collect information of the acquired quality level. For instance, the PO-meetings, meetings with external internship and thesis supervisors and network meetings with the professional field representatives.

A diversity of quantitative data collection surveys is used based on standardized formats, such as employees' satisfaction surveys, course evaluation forms, internship evaluation, HBO-monitor and national students' surveys (Hogeschool Zeeland, 2010b). Only in very small groups a qualitative data gathering approach is used. However, in all cases the demands of NVAO are taken into consideration. The responsibility for conducting evaluations, analysing results, reporting and drafting and implementing improvement actions lies at academy and program levels. The department O&K provides technical and organizational support in this regard.

The HZ internal quality assurance system reflects the importance HZ grants to students' participation. Therefore, HZ aims to offer an inspiring, attractive and well-organized learning environment, so 'operational excellence' is achieved (Hogeschool Zeeland, 2009b). HZ measures students' satisfaction through course evaluations, but its students also participate in national students' satisfaction surveys. In addition, students are involved in program committees at program level, student meetings at academy level and student councils at both institutional and academic levels.

At academy level different ways are used to organize students' evaluations. Some programs leave it up to the students when and where to give their responses, others organize general sessions for students to fill in the forms, followed by a dialog with the program coordinator based on the students' results. All evaluation results are discussed in the program committees, but also in the teaching staff meeting. Course evaluation results are incorporated in the next 'synopsis' (course outline) and also actions for the next course are included. By doing so, transparency is created with regards to the PDCA-cycle at course level. The academy director can use this evaluation information in the personnel performance assessment sessions. As required, this information is also used in the self-study reports (HZ University for Applied sciences, 2012d).

Interviewees observed that during the past decade going through accreditation processes has led to several structural quality improvement activities and more focus on quality of the programs. During the past years several new quality improvement instruments have been implemented. Besides the introduction of 'synopsis' in 2011, a system of internal audit has also been implemented in that same year in order to continuously assess and monitor the quality of the documentation needed for accreditation, some standards of the accreditation framework, the focal points of the academies and the quality culture. The department O&K is in charge of the whole internal audit process and product. The results are dealt with during the BMO-meetings. According to some interviewees due to small scale and high intensity, possibilities are explored to do the internal audit in a digital way yet still receive answers on related questions. Furthermore, to meet the modified focus of the second NVAO framework, increased attention is given to testing and examinations as an important guarantee for high level of quality deliverance (HZ University for Applied Sciences, 2011a). Therefore in 2012 an examination board has been installed at institutional level, consisting of the chairmen of these boards at academy level to ensure widespread quality deliverance among all programs.

Other new instruments are the survey of graduates to determine whether their needs and expectations were met and the establishment of an institutional Quality Advisory Council, consisting of independent outsiders that report to the Executive Board deliverance (HZ University for Applied Sciences, 2012a). This council monitors how quality is dealt with and advises on further steps to improve quality in the light of the objectives of the strategic plan. Besides these, HZ intends to reach uniform evaluation of courses, internships and graduation in order to provide a uniform internal and external 'face'. According to the interviews, in the coming years still more quality instruments will be introduced to collect more information on quality deliverance to be used as evidence for a complete picture of customer satisfaction.

To have an overall overview of all evaluations to be conducted during a planning and strategic period HZ uses an evaluation calendar, containing an outline of the study subjects of each evaluation, the evaluation method, the frequency and the focus group. This guarantees that all evaluations are conducted as agreed upon and the results can be discussed during the BMO-meetings as part of the planning and control cycle (Hogeschool Zeeland, 2010b).

To ensure transparency, HZ used the principles of the Balanced Score card as a model to guarantee insights in the context of accountability, improvement and change management and as control and management model (Hogeschool Zeeland, 2010b). The Balanced Score card provides up to date information on the progress of the strategic initiatives, mentioned in the strategic plan. This approach is also part of the planning and control cycle.

Quality structure

While describing the previous indicators many aspects of the mostly centralized quality structure of HZ have been presented. One of the reasons for centralization is the small scale of the university. Interviewees also indicated that the great willingness and involvement noticeable at all levels in continuous quality improvement contribute to make such a structure feasible. They further stated that the unity in diversity principle is quite applicable for this university; despite the centralized quality approach; at academy and department levels enough space is granted for specific interpretation, translation and implementation of the institutional quality policy plan, guidelines and instruments. However, the reviewed documents do not reflect this view of the interviewees. A merely centralized quality approach is described to be followed at the different organizational levels.

The involvement of the various internal stakeholders in the quality assurance process is presented in table 8-5. This is to a great extent based on the formal responsibilities with regards to quality assurance laid down in the national legal act WHW (Hogeschool Zeeland, 2012b; Ministerie van OC&W, 2010).

Table 8-5 Responsibilities of internal stakeholders at HZ

Internal Stakeholder	Tasks and responsibilities
Board of Trustees	Supervises the performances of the Executive Board, based on information received during their half-yearly meetings and institutional policy plans.
Executive Board	Has the ultimate responsibility for the quality of the teaching and research of the institution. The BMO-meetings are the most important instrument used in this matter.
Dept. Education and Quality (O&K)	Facilitates the Executive Board with all necessary quantitative and qualitative data and provides advice; supports and guides all accreditation processes; in most cases, writes the self-study reports at program level but also the institutional one; organizes the site visits; is responsible for the organization and effectuation of internal audits;
Academy Director	Makes academy plans and prioritizes; discusses results of evaluation and performance indicators with the Executive Board; monitors the planning and control cycle at academy level to guarantee quality and the necessary budget; drafts the BMO-reports.
Program Coordinator	Is responsible for the quality of the program; acts as steering officer during accreditation process.
Quality Coordinator at Academy level	Is responsible for evaluation surveys and the dissemination of the results among relevant stakeholders; presents the evaluation results to program teams and academy management; is responsible for improvement actions and the documentation of them; participates in regular meetings with O&K and meetings with other quality coordinators.
Quality Circle at academy or program level	Consists of teaching staff, program coordinator and quality coordinator; discusses the evaluation results; investigates reasons for positive and negative results so lessons can be learned; formulates suggestions for improvement actions and follow-up studies.
Program Committee	Consists of teaching staff and students; discusses the evaluation results and the suggestions coming from the quality circle; formulates improvement actions for the academy director.
Teaching staff	Discusses the evaluation results and the suggestions coming from the program committee; assesses the feasibility and time schedule; implements the necessary improvement actions; provides feedback to the program committee; is responsible for the quality of the course he/she teaches.
Departments head	Facilitates the Executive Board with all information needed and advises them on relevant topics, including quality issues; supports accreditation processes in their respective field of work.
Student	Participates in students' surveys and program committee, and if needed in other qualitative evaluation meetings; provides suggestions for improvement.
Examination board	Operates at institutional and academy level; ensures the quality of testing and examinations, according to the assessment and examinations rules and regulations.

Interviewees considered the embedded quality structure as a great encouraging factor for accreditation processes. The department O&K is in charge of the coordination and control of all quality assurance activities. Also the board secretary plays a prominent role in this regard. The appointment of quality coordinators at academy and program levels and the establishments of quality circles within some academies further illustrate the quality structure at HZ. All academies have a quality coordinator to deal with the daily activities related to quality assurances. Quality coordinator is not a full time job. Each quality coordinator invests 1 to 1.5 days a week besides his/her teaching task. Depending on the size of the academy, more of the quality coordinator's time is invested in quality issues and accreditation. The quality structure at academy level

may vary depending on the size and extent of the programs, e.g. some have a quality circle, and others don't.

The quarterly meetings between the department O&K and the quality coordinators provide an inspirational context for those involved, as was brought forward by the interviewees. Participants learned a lot from each other and topics discussed are at managerial and operational levels.

Involvement of stakeholders

As illustrated in tables 8-4 and 8-5, HZ has an extended form of consultation with a wide range of meetings to guarantee timely involvement of the stakeholders, the correct implementation of the planning and control cycle and the institutional quality policy plan, including the related quality instruments.

One of the strategic goals of HZ is to involve all employees and students as much as possible in the activities within the university in particular to improve the educational quality (Hogeschool Zeeland, 2009b). According to the quality policy plan and as presented in table 8-5 these two groups are involved in different ways. The interviewees stated that students, considered by HZ as internal stakeholders, are very enthusiastic during the site visits. No training of them is really needed; they talk freely with the panel, which has a positive effect on the panel.

As interviewees indicated, HZ operates in a dynamic, social context. An ongoing dialogue with external stakeholders is necessary to achieve optimum results from this mutual cooperation. Therefore, HZ is actively deliberating with its stakeholders in education as well as research. Work field and alumni are involved in the development of specific minors, based on their knowledge and experiences of the contemporary professional field (Hogeschool Zeeland, 2009a). Their input is regularly requested with regards to professional orientation and the professional profile of the offered programs. At academy level there are advisory councils, which provide the academy with state of the art information, advise the academy director on the link between the programs and regional and (inter)national training needs and research questions, the applications acquired and developed knowledge in regional and (inter) national practice. The participation of alumni in these councils ensures a structural relationship with them. At program level, there are professional advisory boards to ensure a proper match between the program profile and the professional profile.

As stated in the HZ strategic plan, in the coming years HZ aims to visualize and have more information on the results of the cooperation with the professional field and improve measurement of their satisfaction level (Hogeschool Zeeland, 2009b). With the establishment of advisory councils at both institutional and academy levels HZ aims to receive this additional information and intensify the involvement of the external professionals at the strategic level.

Involvement of external experts

During the accreditation processes at HZ only a few external experts were involved. Most work was done and guided by the department O&K. Interviewees brought forward that sometimes at the beginning of an accreditation process one external expert, e.g. from NQA, provided some general information sessions for all those involved. NQA also assisted with the writing of the institutional self-study report during 2012. During trial site visits external experts are also part of the panels. Sometimes at program level an external expert can be hired to do a small task, e.g. investigating the experiences of the working field with students. However, the great majority of the work during the accreditation processes is done by internal experts at institutional, academy and/or program level, guided and supported by the department O&K.

8.2.4 Summing up

HZ is a well-known regional university of applied sciences in the south-west region of the Netherlands, aiming to expand its wings to national and international partners. During the past decades HZ has built quite some experiences and expertise with external quality assurance. This is reflected in the achieved accreditation results. The first accreditation cycle has been successfully completed in 2011 and the start of the second accreditation cycle so far has received only positive outcomes, including a positive institutional audit.

The small scale of this university has a positive effect during accreditation processes; meeting each other in the corridors happens easier creating an informal consultation climate and an open culture facilitating commitment and endurance. Nonetheless, small scale implies also vulnerability and even instability; minor occurrences may jeopardize or hinder progress of agreed activities. While developing and implementing institutional policies due account needs to be taken of this characteristic.

 A high level of involvement and *commitment of the institutional leaders and academy directors* combined with the unified and *centralized system of internal quality assurance* facilitated by the small scale, are factors that have a positive effect on the achieved accreditation results. Although mainly centralized, the *internal quality assurance approach* allows academy directors to specify their quality management approach according to their needs and particularities. Overall, the department O&K plays a prominent role in the accreditation processes and acts as the steering body.

HZ works with a planning and control system, of which the BMO-meetings are the most important controlling and monitoring instrument. During these meetings the progress of the quality improvement agreements, based on performance indicators and the accreditation results are widely discussed.

Within HZ a *quality culture* exists at the different organizational levels, yet more attention has to be paid to solidify this quality culture to ensure continuous attention on quality improvements. *Internal stakeholders* have a shared responsibility regarding the quality delivered and are committed to work continuously on quality improvement

to maintain the achieved accredited status, which can be considered as an enabling factor during the accreditation processes.

The implementation of various quality instruments during the last years, while plans are ready to implement several more in the years to come, contributes to meeting HZ's strategic goal that all programs must be always accreditation worthy.

Even though all the *necessary resources* are in place, increased attention for staff development is still high on the university's agenda. This is also needed to comply with the performance agreements made with the ministry of education. HZ has sufficient *financial means* and all required *facilities* are in place.

To conclude, the independent variables at HZ are managed in such a way that most of them actually have encouraged *(enablera)* the progress of the accreditation processes. Their impact on the dependent variables was mostly positive. However, there is still room for improvement in areas such as the deeper embedment of the quality culture and the further development of the academic staff. No hindering factors *(barriera)* during the accreditation processes could be identified.

9 Comparative analysis

The five case studies were presented in the previous two chapters, preceded by a description of their national context. In this chapter the research model will assist in unravelling the actual influence of the independent variables on the dependent ones whilst comparing the universities, within-group and across-group.

First, the comparative analysis is explained in order to define the margins and limitations of the various comparisons to be realized. Then, a summary is provided of the accreditation processes of each case informing on the dependent variables so these significant background data are at hand for the comparisons. Subsequently, the two within-group analyses followed by the across-group analysis are completed. Next, the focus is concentrated on two additional variables that became manifest during the comparisons. Finally, a schematic overview is presented of the causal relationship among the identified influential factors related to their potential effect on the accreditation processes of the studied universities, based on the results of the comparative analyses, providing input for answering the main research question in the last chapter.

9.1 Explaining the comparative analyses

Examining selected literature on comparative case study analysis reveals several important guidelines to adhere to while doing this type of research (Baxter, 2008; Dul and Hak, 2008; Flyvbjerg, 2004; Hancock and Algozzine, 2006; Stake, 2006; Yin, 2009). Case studies generate vast amounts of information from different sources. In order to categorize, examine, analyse and interpret the large amounts of collected data accumulated, many tools can be used to assist the ongoing examination, analysis and interpretation of these data so as to reach (tentative) conclusions.

During the research period (2009-2012) multiple sources of evidence were used as a basis for collecting data for understanding the topic being investigated. Data were gathered by means of document analyses, observations and in-depth interviews in order to study the accreditation processes in each university. Triangulation was performed to ensure the construct validity of the generated information.

We adhered to several strategies to support the accumulation, structuring, analysis and interpretation of the collected information. First, the data obtained from the pilot case study done at UoC early in the research period served to adjust the research questions and to determine the feasibility of this PhD research. Although during the advanced data collection process more questions evolved and an overwhelming amount of additional information was accumulated, the fundamental research questions were kept at the forefront of the research process. At the end of the research period however, it became clear that the research question could not be answered for all Dutch-Caribbean universities. In reality, the primary assumption that all participating universities would have completed at least their first accreditation cycle had to be rejected. Section 9.3 will elaborate on this issue.

Secondly, the research model was the guide for data collection. Irrelevant data were eliminated as much as possible and only potential meaningful information was grouped. Thirdly, in all five cases we tried to collect the same type of information. However, this could not always be realized since during the research period there were great differences among the universities regarding the progress and stage of their various accreditation processes. A fourth strategy involved the coding of the interviews; all interviews were worked out in the same way by the researcher. By doing so, potential misinterpretations of the content by an assistant were in advance eradicated and only relevant information was sorted according to the indicators. At last, all case studies have been described according to the independent variables and as much as possible their indicators, even though in some cases barely any information could be collected on certain indicators.

In order to identify and report meaningful findings in this chapter, the information provided in chapters 6 to 8 was analysed, synthesized and compared. Based on a repetitive, ongoing review of the accumulated data recurrent patterns and categories were identified, but also dissimilarities and particularities. This approach is in line with Yin's (2009) statement that multiple cases strengthen the results by replicating the pattern-matching, thus increasing confidence in the strength of the theory.

The unit of analysis was primarily the indicators not the variables, because the indicators were the main unit for data collection. By doing so, some of the results could be generalized (external validity), as will be explained in the next chapter. During the analysis of data the interrelatedness among the variables became even more apparent. It was hardly possible to analyse the variables as 'stand-alone' since it was actually difficult to separate the impact of each variable individually on the accreditation processes without being confronted with the role that at least one other variable plays while assessing the first one. The results of this analysis are presented in sections 9.3 to 9.5, showing evidence of a strong connection among the independent variables.

In the largest part of this chapter the collected data are analysed and interpreted to verify if the independent variables indeed contribute in a positive manner to the progress and outcomes of the studied accreditation processes. The focus is to determine if the variables certainly are enablers *(enablera)* of these processes. If the predicted causal relationships fail to exist, then the existence of other possible determinant factors is explored. In case one variable did not behave as predicted, the underlying motives for this deviant behaviour are exposed.

After describing the case studies we questioned the comparability of the five cases since there are so many differences. We reflected on these discrepancies and finally decided to do the comparative analysis based on 'compare to' instead of 'compare with', meaning that we will be predominantly looking for 'pattern-matching'. Since for example the USM barely started its accreditation process to comply with NVAO standards, this university could not be compared 'with' any other. We still analysed this university however, mostly as a contrasting one and to identify its particularities, compared 'to' the others.

In this research a qualitative approach was useful since little is known about factors potentially affecting the progress and outcomes of accreditation processes in small universities. Figure 5-4 presented in chapter 5 illustrated the three types of comparative analyses expected to be completed. However, as will be further detailed in section 9.3, based on the information gathered, some slight changes had to be made in the three comparisons to be conducted, resulting in the final comparative design shown in figure 9-1.
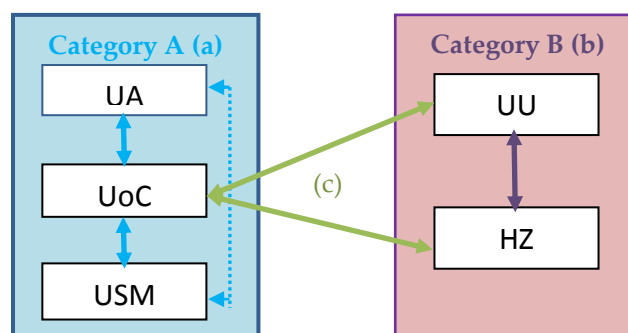
Figure 9-1 Final overview of the comparative analyses

The three types of comparisons that finally were completed and will be detailed in the subsequent sections are:

a. A comparison among the category A case-studies. This comparison has great limitations due to the different stages of progress of the accreditation processes in the three Dutch-Caribbean universities. UoC is as much as possible compared to UA and USM, whilst only a few comparisons could be made between UA and USM, thus explaining the dotted arrow in category A in figure 9-1.

b. A comparison among the category B case-studies. Since the focus in this study is on the Dutch-Caribbean universities, UoC in particular, the comparison between the two Dutch universities is less extensive.

c. A comparison among the two categories. By the end of the research period UA and USM did not complete any accreditation process, so a comparison between them and the Dutch-cases was not feasible. Consequently, mainly UoC will be compared to the category B cases. Where possible UA was also involved in this comparison.

The research model depicted in figure 5-2 was taken as a starting point to describe the cause of events (influential factors), which took place during the studied accreditation processes. Each within-group comparison starts with the identification of overall similarities and differences between the categorized universities. Then, the comparison is done according to the indicators described in the case descriptions. Each of these comparisons is concluded with an indication of the kind of effect the indicator (*enabler$_a$* or *barrier$_a$*) had on the progress of the accreditation processes. During the across-group comparison, the results of the within-group analyses are compared, which will reveal the absolute *enabler$_a$* and *barrier$_a$* in this study.

Before going into the detailed comparisons, in the next section the steps undertaken during the accreditation processes are summarized so as to have this information at hand to facilitate the analyses in the subsequent sections.

9.2 Overview of the accreditation processes

The UoC, UA and USM are three small Dutch-Caribbean universities aiming to attain and maintain an accredited status in order to prove the quality of their graduates and eventually enhance their competitive position nationally, regionally and internationally. It was believed that going through accreditation processes would help the universities to improve the quality of their programs. Additionally, the management of each university was convinced that by means of implementing quality improvement actions an accredited status will be obtained, which will strengthen its (inter)national position.

The timeframe of the accreditation processes, portrayed in figure 9-2, reflects that UA and USM started quite late with their accreditation efforts, which also clarifies why they could not yet have completed any accreditation cycle by the end of the research period (end of 2012). At the beginning of the research a similar planning was made by

all three Dutch-Caribbean universities, yet the scheduled planning was frequently modified. Figure 9-2 also shows that the Dutch universities are far more advanced in their accreditation processes and are currently going through their second accreditation cycle.

Even though the focus of this study is on the internal organizational factors affecting the progress and eventually the outcomes of accreditation processes, according to the generated evidence, contextual factors contributed to constraining the implementation of these processes in the Dutch-Caribbean universities. The absence of a Higher Education Act which forces these universities to comply with accreditation demands in a set timeframe is a good illustration of this. While based on the observations and interviews, at all universities a strong aspiration to be accredited could be detected, no pressure was felt to keep the initially assigned time schedule, due to the nonexistence of any legal regulations behind this desire. Incessant postponement requests by deans were without any problem accepted by the institutional leaders because no (negative) legal consequences are attached to not holding an accredited status. By the end of the research period it was evident that with regards to the Dutch-Caribbean universities none of the original accreditation plans were done on time. Continuation of such an attitude could jeopardize the maintenance of the achieved accredited status. After all, once an accredited status is acquired, changes in the accreditation schedules and deadlines cannot be made anymore, since accreditation by NVAO is coupled to a six years period. So, if a program wants to maintain its accredited status it has to comply with the accreditation requirements in a timely manner during the next accreditation cycles. Further elaboration on this topic is beyond the scope of this study.

	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012
UoC	1st accreditation cycle according to 1st NVAO framework completed for 89% of offered programs									
UA	Accreditation process not started						1st accreditation cycle in progress according to 2nd NVAO framework			
USM	Accreditation process not started					Accreditation attempt via SACS, not completed.		1st accreditation cycle of only TEP in progress according to 2nd NVAO framework		
UU	1st accreditation cycle according to 1st NVAO framework completed							2nd accreditation cycle in progress		
HZ	1st accreditation cycle according to 1st NVAO framework completed									2nd accreditation cycle in progress

Figure 9-2 Timeline studied accreditation processes

A summary of the main steps undertaken during the accreditation processes at institutional level is delineated in figure 9-3. In fact, most of the steps were similar and correspond to what was stated in chapter 4 concerning external evaluation processes. A striking difference is the planned timing of the trial site visits in the Dutch-Caribbean universities. In principle, in these universities trial site visits serve two purposes: feedback on the draft self-study report and timely involvement and training of the participants. The results of the trial site visit may lead to modifications of the draft self-study report and changes in the constellation of the participating groups. Thus, trial site visits provide these universities with opportunities to make additional quality improvements before they submit their final self-study report. As illustrated in figure 9-3, this approach seems not to be needed in case of the Dutch universities. The justification of this divergent approach lies in the fact that the Dutch-Caribbean universities had barely any experience with external evaluation processes and none at all with accreditation processes, while the Dutch universities have long been involved in them. More aspects of a comparative outline between the (group of) cases illustrated in this figure will be explained in the subsequent sections. With regards to UA and USM it remains to be seen if the planned schedule of steps will take place as intended.

UoC	UA	USM	UU	HZ
Accreditation Scan (2003)	Baseline Assesments (2009)	Desk top analysis (2011)	First Accreditation Cycle completed (2003- 2010)	First Accreditation cycle completed (2003-2011)
Improvement period	Improvement period	Improvement period	Improvement period	Improvement period
Self-evaluation process programs	Self-evaluation process	Self-evalution process	Start 2nd Accreditation Cycle	Start 2nd Accreditation cycle
Draft Self-Study rport	Draft Critical -Reflection report	Draft Critical -reflection report	Instituonal Audit	Insitutional Audit
Trial Site visit	Trial site visit	Trial Site visit	Self-evaluation process of programs	Self-evaluation process programs
Improvement period	Improvement period	Improvement period	Critical-reflection report programs	Ctirical reflection report programs
Final Self- Study Report	Final Critical Reflection report	Final Critical Reflection report	Trial Site visit	Trial site visit
Site- Visit	Site visit	Site visit	Site visit	Site visit
Accreditation outcome	Accreditation outcome	Accreditation outcome	Accreditation Outcome	Accreditation outcome

Figure 9-3   *Summary of steps (planned to be) taken during the accreditation processes of the five universities*

9.3 Within-group analysis of the Dutch-Caribbean cases

In this multiple case study analysis of the Dutch-Caribbean cases our objective is to identify the actual internal influential factors affecting accreditation processes in UoC, UA and USM. In addition, the possibilities will be explored to build an explanation that fits the approach of each individual case, even though the cases vary in detail. The extensive observations, 22 in-depth interviews and the analysis of a wide variety of documents resulted in a wealth of information of the three Dutch-Caribbean universities, described in chapter 7 and to be compared as much as possible below.

In this within group-A analysis the comparison is mainly between UoC and the other two universities (figure 9-1(a)). UA and USM have not yet completed any accreditation process, so a comparison among the majority of their variables was virtually impossible. Consequently, as will become obvious in section 9.3.2 a comparison among each indicator could also not always be made. Therefore, this within-group A analysis could not be done completely as originally intended.

9.3.1 General similarities and differences

Considering the Dutch-Caribbean case descriptions outlined in chapter 7 and the research model (figure 5-2) containing the factors assumed to have an influence on shaping and implementing of accreditation processes, an introspective and repetitive review has been performed revealing several similarities and also some general differences in the accreditation approach of these universities (Gering, 2007; Stake, 2006; Yin, 2009).

The Dutch-Caribbean universities had many motives to encourage themselves to go through accreditation processes; many were common reasons, yet also some differences could be pointed out. For instance, accreditation was considered as a national instrument to fight the brain drain phenomenon; they all also aimed to strengthen their (inter)national position by getting accredited. The vulnerability of these institutions, if the accredited status for their programs is not acquired, has also become apparent during the research period. Evidently, their chances to survive will then become quite limited, even within their own country, much less for international participation (see chapter 6). This finding is not unusual. As stated by several authors, national requirements (localization) and international trends (globalization) together blended into glocalization are affecting higher education institutions and their accreditation processes (Marginson and van der Wende, 2007; Martin and Stella, 2007; Patel and Lynch, 2013). However, as was mentioned earlier, in this study these effects are not further studied while analysing the case studies (see chapters 3, 4 and 5).

These three universities are going through accreditation processes for the first time. They are novices in this regard and they faced lack of experiences with external quality evaluation processes. As explained in chapter 7, the progress of their accreditation processes was affected by this novelty.

During the past decade 85% of the educational programs offered at UoC have gone through an accreditation process of which 96% with positive results. At UA and USM this process is still in progress aiming to complete their first accreditation cycle in 2014.

Another resemblance of the Dutch-Caribbean cases is that their programs need to comply with an accreditation framework that was not designed to fit their contextual reality. Actually, the NVAO was predominantly established to operate in the Netherlands and Flanders. Consequently, during the development of its procedures and quality standards the higher education field in the Netherlands was involved and not that of the Dutch Caribbean. In 2005 NVAO received the mandate to also assess the nationally funded higher education institutions located in the Dutch Caribbean, but NVAO has firmly determined that this should be done exactly according to the already developed accreditation framework, allowing no negotiation or arbitration by the Dutch-Caribbean universities. The only additional gesture accepted was that a local work field expert could be part of the review panels. This panel member could bring in particular national contextual characteristics that should be taken into due account while judging certain quality standards, such as personnel and facilities.

As has been illustrated by recent studies, change processes and hence accreditation processes, are expected to be organized as a learning process, not as an event, in order to reach sustainable successful results (see chapter 4). Observations during these processes at UoC and UA revealed the opposite. The focus was primarily on getting accredited and not on continuous quality assurance improvement as part of an internal quality approach. Remarks like "Just tell me what I should do for accreditation and I'll do it", "Why should I do it, if it is not required for accreditation" and "Is this a prerequisite for accreditation?" illustrate the interpretation internal stakeholders gave to the nature of an accreditation process. In case of UoC, after the accreditation processes were completed, as could be observed, most faculties went into a relaxing mode, sometimes even going back to the situation before the start of the accreditation process, not showing many learning points generated from this whole endeavour; barely any PDCA-cycle could be detected. This attitude was indeed forecasted in the literature (Martin and Stella, 2007). People tend to sit and wait for the next accreditation cycle to start running again in order to meet the quality standards, instead of getting involved in continuous quality improvement processes.

9.3.2 Comparing the independent variables

This section presents the results of the comparison of the variables in the three Dutch-Caribbean universities to enable the identification of their impact during the progress and outcomes of the accreditation processes. However, as was indicated earlier, no comparison of each indicator is possible. Therefore, this comparison will be more general in nature and specified per indicator only where possible. Furthermore, in this part of the comparative analysis the independent variables are as much as possible analysed as 'stand-alone' variables; the analysis of their interdependence is done in section 9.3.4.

The organizational structure

An organizational structure indicates how the roles, power and responsibilities are delegated, controlled and coordinated within an organization (Mintzberg, 1980; Currie and Procter, 2005). The organizational structure also delineates how the lines of authority are distributed. According to Mintzberg (1980, 1981, 2001) and Weick (1976) higher education institutions are generally structured as a professional bureaucracy, managed by persons with professional expertise and high educational credentials. Professional autonomy is granted at the operating core, because of their professionalism and expertise. Baldridge (2001) however, contrasted this point of view indicating that higher education institutions operate as organized anarchies, supporting the garbage can model theory of Cohen et al (1972).

In this study the impact of the organizational structure on the accreditation process has been assessed by two indicators: organizational chart and the decision-making structure, as presented in figure 9-4.
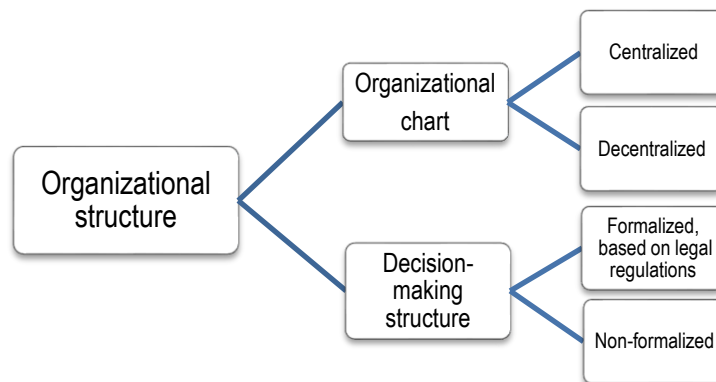
Figure 9-4 Operationalizing Organizational structure

Comparing UoC, UA and USM with regard to this variable their organizational charts show some similarities. In principle all these universities are led by a one-headed management, directly supported by an operational manager[45]. According to their legal regulations they are centralized organizations. Though analysis reveals that the UoC in fact has a decentralized organizational structure with the Council of Deans claiming great involvement in the decision making; in most cases the Council of Deans, supported by their academic staff even has a determinant voice in decisions concerning institutional (quality) issues, illustrating the power of the operating core in this institution. In addition, in practice deans have wide possibilities for taking their own decisions at faculty level, despite the legal regulations articulated in the LUoC, which pronounce that the rector should have the final word. For instance, during the research period decisions taken by the rector that were not supported by the deans and their academic staff have led to organizational disturbances in several faculties and even changes in the institutional managerial decisions. So, formally UoC is centralized but in

---

[45] At UoC this is the general manager; at UA the business director; at USM the academic dean.

its daily practice a decentralized approach could be detected. As will be elaborated later, this practically decentralized decision-making structure has led to great differences among many indicators across the faculties. UoC can thus be typified as an internally diversified university with characteristics of an organized anarchy.

In contrast, UA is centralized and all decisions are taken by the president-curator or the rector, after consulting with the advisory council. On paper, USM is also centralized, with the president as the main decision taker. Nevertheless, we can conclude that there are gradations in the degree of centralization and formalization in these universities, as illustrated in table 9-1.

Table 9-1 Comparing the organizational structure in Dutch-Caribbean cases

	Centralized	Formalized
UoC	++	++
UA	+++	++++
USM	++++	++++

Legend: ++++ = highly centralized/strongly formalized; +++ = quite centralized/fairly formalized;

++ = more or less decentralized/some formalization; + = decentralized/non formalized.

In all three Dutch-Caribbean universities the organizational chart did not seem to have any direct impact on the accreditation processes. It had no characteristics of being an enabler[a], neither a barrier[a]. However, differences could be noticed between what is stated on paper and what really happens during the university's daily operations. The decision-making structure at UoC for instance was mostly informal, granting the deans large authority to decide on the organization of their accreditation processes, regardless of institutional rules and procedures. Having large leeway for their own management styles made the (relatively low degree of) formality an enabler, positively influencing the progress of accreditation processes at faculty level. At the same time, some deans' ad hoc decisions that this large leeway allowed, caused extended delays to the accreditation processes. In sum, the degree of formality, in combination with the existing degree of centralisation, did not have a uniformly positive or uniformly negative effect in UoC, so the organizational structure variable cannot be categorized either as an actual enabler or as a barrier in UoC. At UA a centralized and formalized decision-making structure was in place. This seems also to be the case at USM.

Leadership and management style

As was concluded at the end of the theoretical part of this study (chapter 4), the quality of leaders and managers is a critical factor for the determination of an organization's success level in general, and organizational change processes in particular (Baldridge, 2001; Boddy, 2008; Bridges, 2009). In case of accreditation processes this implies that effective institutional leadership, supported by focused faculty's management is crucial. Leadership and management style highly depends on the quality vision and the extent of commitment and involvement of the institutional leader, but also of the line managers. In this study two indicators, role of the institutional leader and the

management at faculty level, measured the impact of leadership and management on accreditation processes, as further operationalized in figure 9-5.
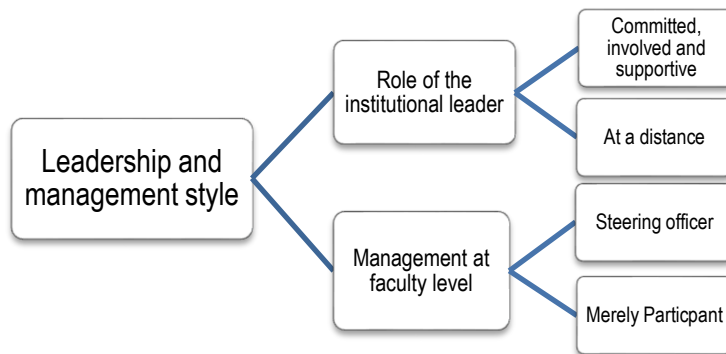
Figure 9-5 Operationalizing Leadership and management style

The analysis of this variable at UoC, UA and USM shows that all institutional leaders and departmental managers (deans) were interested in attaining the accreditation goal. Being responsible for the accreditation outcomes encouraged them to take proper measures where possible to facilitate the accreditation processes. During the research period their focus was, however, mainly concentrated on reaching the accredited status instead of embedding a structural approach of continuous quality improvement and creating a quality culture. The managers were basically merely interested in the accreditation outcome, not in the path that had to be followed in order to achieve that goal. For this reason, at the UoC and UA for instance, at the end of the research period no broad based internal quality assurance system could be detected, as will be elaborated later on.

Worthwhile noting is also the fact that during the research period each of these universities had several institutional leaders; each with his or her own leadership style. Nevertheless, all of them had the ambition to attain the accredited status for the university's programs as one prime objective, whilst acting from a distance. At the UoC across the several institutional leaders the pattern was to delegate in an indirect manner (not written on paper) large responsibilities to the institutional quality manager to direct the accreditation processes at her own pace and based on her insights and perspectives; the institutional leaders were committed, but participated on a low profile. In contrast to the former institutional leader at UA, the last one showed basically this same managerial approach.

No managerial pattern matching could be derived at faculty level. Although all deans also aimed to obtain an accredited status for their programs, their managerial approach towards the accreditation goal largely varied. Certainly, a wide scale regarding their level of involvement could be measured. At the UoC 60% of the deans can be labelled as steering officers, whilst at the UA as far as could be detected, this was 25%. The other deans at UoC and UA allowed the institutional quality manager to lead his/her accreditation processes, they were merely participants. At UoC, in case the dean was

highly involved, a positive accreditation result was immediately obtained (100%). Conversely, in case the deans were less involved probationary accreditation was obtained in the majority of the accreditation efforts (64%). However, the management style of the 'successful' deans greatly differs. In some cases the dean involved his or her staff members, while in other cases the dean acted merely on an individual basis, providing little involvement of the remaining staff. Yet, in both cases successful accreditation results were achieved.

Hence, no overall conclusion can be drawn regarding the impact of this variable on the progress and outcomes of the accreditation processes in UoC and UA. All institutional leaders contributed from a distance; for sure they cannot be actually labelled as $barrier_a$, but neither as $enabler_a$. Obviously, it was largely thanks to the commitment of the deans, the institutional quality manager and other staff involved that the pursuit for accreditation of UoC's programs ensued in positive results. This conclusion confirms the theory about the importance of management's role for the success of organizational change processes in this comparative group (Baer et al., 2008; Bryman, 2007; Hooiberg and Choi, 2001). The institutional leaders did not play the key leading role during the accreditation processes, but the deans that did so, strongly supported and facilitated by the institutional quality manager. All deans succeeded in obtaining positive accreditation results, still illustrating that someone holding a managerial position had the determinant influence. So, we can conclude that most faculty's managers were $enabler_a$ during their accreditation processes. Also the commitment and involvement of other colleagues, e.g. the institutional quality manager in her leading role, contributed positively to achieving the positive accreditation outcomes at UoC.

A particular point of attention is the high rate of changes in leaders and managers at the several organizational managerial levels. Continuation of this managerial instability could become a hindering factor ($barrier_p$) during the next period of accreditation since no consistency in leadership and managerial approach on quality improvement could be guaranteed and experiences were lost with the departure of managers. However, since it was the institutional quality manager who could be considered as the general coordinating officer in most accreditation processes, the negative impact of a similar pattern could be neutralized.

With regard to USM no conclusion could be drawn for this variable since in December 2012 the TEP accreditation process has just started. According to the project description, the president has to take the role of project leader.

Quality culture

Different studies explored in chapters 2 to 4 have emphasized the importance of organizational culture for successful organizational change processes (Fralinger and Olson, 2007; Kezar and Eckel, 2002; Lomas, 1999, 2004; Soverall and Khan, 2009; Strydom et al., 2004). As was defined in chapter 5 the existence of a quality culture within an organization refers to the commitment of all involved to be responsible to produce products and services at their part of the job that meet pre-set quality standards, thereby creating a quality culture at all organizational levels. Developing a

quality culture seems to be crucial while managing accreditation processes. This variable is graphically operationalized in figure 9-6.

Figure 9-6 Operationalizing Quality Culture

Concerning the analysis of the Dutch-Caribbean cases related to this variable we can state that in general, in accordance with what has been mentioned in the literature review, no general quality culture could be detected; quite some differences existed regarding the evolving stage of a quality culture in the different faculties and several organizational cultures co-exist within UoC and UA. We consider it therefore difficult to draw one line of analytic statements on this variable. Below we provide, where possible, some overall analytic statements, but several distinctive institutional annotations as well.

In the beginning in all three Dutch-Caribbean universities the emergence of accreditation efforts was an external mandate, yet quite fast these efforts were supported at institutional leadership level. At UoC, it took some time (years) however, to gain the trust of a sizeable part of the academic staff to participate in the accreditation processes for this was considered as another effort to meet Dutch requirements whilst according to them the national environment for many years seemed to be satisfied with the quality of the graduates. This restraining attitude, showing also how quality was measured previously, caused some years of delay in the progress of the accreditation processes. In particular academic staff was not used to that someone else came to judge the quality delivered.

As was indicated in the previous section, a 'compliance' culture emerged gradually, but according to the actual quality policy the aim is to transform this into an embedded quality culture in the coming years. Care for quality started to increase, although it was mainly directed to meet NVAO requirements; it still needs to become more strongly integrated in the daily operations. So, all quality improvement activities still have to become more focused on a consistent quality approach, irrespective of the attainment of the accredited status.

At UoC and UA, analysis of the collected data demonstrates that quality awareness still needs to grow deeper in order to eventually result in a perceptible quality culture. This shortage of quality awareness was also acknowledged by the involved stakeholders. Quality issues were not considered to be part of daily performances, but as something to be done in addition to, not as part of what usually needs to be done. To encourage the development of a quality culture, it first has to become evident for all involved what quality means, regardless of the NVAO's requirements. The awareness regarding the importance of quality assurance also still needs to be engrained. People are now linking quality to accreditation instead of considering quality as an element of their daily activities in order to produce products and services to meet the clients' expectations that are continuously changing. Quality is not static but dynamic and this perspective is not yet sensed within the universities.

Also lack of several organizational aspects to support the development of a quality culture, such as the absence of a harmonious sphere of influence, can be marked as causes for the non-perceptible quality culture. At UoC in particular, the frequent change of the institutional leader was mentioned as a hindering factor for the development of a quality culture since each leader brought his or her leadership style and expectations towards the universities' employees' attitudes. In some cases, the leading approach even led to internal disruptions instead of creating a harmonious ambiance.

The role of the deans was also crucial in this regard. So far, in UoC most deans did not really succeed in creating a quality culture within their faculty. They were merely heading towards accreditation and not working towards continuous quality improvement. Additionally, there was barely a sense of shared responsibility. Analysing the case descriptions shows that in faculties where a quality team was established to monitor the accreditation process, more shared responsibility and ownership could be detected. In cases where the dean has a kind of solo performance, he/she also claimed full responsibility and barely any room was left for others to be really involved. Certainly, what did succeed was that all faces were looking in the same direction: getting accredited. Gradually all stakeholders became more committed to attain the accredited status and everything needed was done to reach this objective, notwithstanding the constraints experienced. Staff members became increasingly willing to do their utmost to meet the accreditation standards. Creating a sense of shared responsibility and ownership on the long run will contribute to a more cooperative and collaborative attitude among all stakeholders, facilitating the development of a quality culture and eventually the accreditation outcomes as well.

The relationship between the faculties and supportive departments was not good at UoC neither at UA; the complaints were mutual. In case of UoC, both parties however, worked together during the preparation and execution of (trial) site visits in order to reach the common goal of accreditation. Finally, the accreditation efforts resulted in a more bonded relationship between the organizational units.

National cultural elements such as fear, modesty and humility were identified as constraints in the process to develop and cultivate a quality culture. Dutch-Caribbean

people are not used to showing how good they are and are less open to accept rejections because of the (personal) impact due to the small scale of the communities (Marcha and Verweel, 2003). Accreditation however, requires a more self-exposure approach, which according to literature reviewed, will take some time to be realized. Thus, these national cultural aspects also explain the slow progress towards the development of a quality culture in Dutch-Caribbean universities.

Another element of the Dutch-Caribbean culture that could be detected during the accreditation processes is the informal way of communicating. The use of informal communication channels is one of the main elements in the way people interact with each other and get things done, thus affecting the progress of the accreditation processes. For instance, teachers were not used to making their course outline and sharing this information with others. All these formal activities had to be implemented, which took more time than expected, thereby affecting the progress of the accreditation process. Gradually during the research period more formal communication channels, such as structural team meetings, the introduction of student panels and distribution of a newsletter on quality issues, were used with the aim to better inform the internal stakeholders and enhance their involvement.

All in all, the analysis of the UoC and UA cases demonstrates that over time steps towards the development of a quality culture could be perceived. In any case however, the development of a quality culture will obviously take some more years. The accreditation objective created a higher level of awareness of quality delivery, but embedding a continuous quality approach is a step yet to be realized in these universities. Table 9-2 shows detailed judgment of the indicators as part of a quality culture by the end of the research period. Since the accreditation process in USM barely started this variable could not be analysed.

Table 9-2 Detailed judgment of quality culture indicators in UoC and UA

	Care for quality	Shared responsibility	Commitment	Norms, values, traditions, etc.	Communication and interaction
UoC	++	+	+++	++	+
UA	++	++	+++	++	+

Legend: ++++ = the indicator is highly present; +++ = the indicator is largely present;
++ = the indicator is progressing, but not substantial; + = the indicator is barely present.

While doing the comparative analyses, we looked in very much detail to the value of the several indicators of quality culture since a detailed analysis seemed necessary to get a thorough picture of the impact of these indicators (Dutch-Caribbean universities, table 9-2, Dutch universities, table 9-5 and across-group, table 9-9) However, the differences between on the one side + and ++ and at the other side +++ and ++++ are small. Therefore, to identify the actual impact of these indicators on the progress and outcomes of accreditation processes such detailed judgment is not necessary, so we recode to a more robust, simpler scale: + and ++ are both considered as 'low', and +++ and ++++ as 'high' (Dutch-Caribbean universities, table 9-3, Dutch universities, table 9-6 and across-group, table 9-10).

To conclude, we can state that the absence of an embedded and perceptible quality culture caused some years of delay in the scheduled accreditation processes since several internal and national cultural traditions and norms needed to be dealt with before some accreditation requirements could be addressed. As presented in table 9-2 only the indicator 'Commitment of stakeholders' is substantially present *(enablera)*. Hence, most indicators actually did not encourage the progress of the accreditation processes, yet acted mostly as barriers *(barriera)*. In section 9.3.4 the effect of other variables on the development of a quality culture will be exemplified, since this interdependency is mostly relevant to explain the positive achieved accreditation results regardless of the negative impact of most of the indicators in this variable.

Available resources

Different studies identified the availability of resources as a potential contributor to the progress and outcomes of accreditation processes. The availability of resources plays an important role in shaping organizational behaviour geared towards certain change performances and enhance the possibility to achieve the organizational goals (Boddy, 2008; Bridges, 2004; Kraatz and Zajac, 2001).

With reference to the literature studied UoC, UA and USM can be categorized as small, resource-poor higher education institutions. Reflecting on figure 9-7, they have insufficient human and financial resources and the facilities at UA were not adequate according to the accreditation requirements. These universities faced fixed or even diminishing financial and human resources, whilst they are expected to meet more and higher (inter)national demands; literally more has to be done with less.
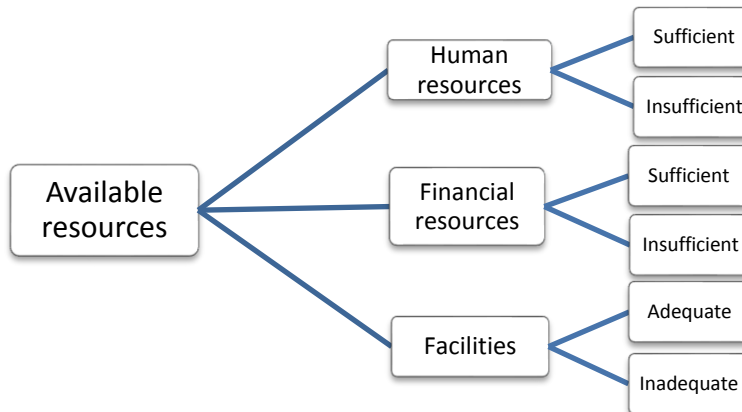
Figure 9-7 Operationalizing Available Resources

All three universities received additional funding to finance their accreditation processes. These funds were used to develop and implement quality instruments, to cover the costs for involving external experts and to pay the accreditation costs of the evaluation agencies and NVAO. Clearly, in the beginning lack of financial resources affected the progress of the accreditation processes. The regular annual budget could not serve the accreditation goal as well. At the UoC however, additional funds were

only granted for a limited period of time, the first two years of accreditation processes (2009 and 2010), while at UA funds are available to benefit the financial resources during the whole first accreditation cycle. USM did also receive additional funds to finance the whole accreditation process of the Teachers Educational Program; by the end of the research period there was no evidence that this will also be the case for the other two bachelor programs. Remarkable is the fact that all additional funds came from the Netherlands; at UoC and UA mostly via cooperative financial funds and at USM directly from the Dutch Ministry of Education. The national governments did not provide any additional funds to the universities, whereas they expected the programs to get accredited as soon as possible.

Even though the universities received additional funds, still there were incessant complaints at managerial and operational levels concerning lack of financial resources. Governments were accused of insufficient interest in their national universities, while they are the ones who consider these institutions as important for national capacity building. The collected data show a high degree of dissatisfaction concerning this indicator, which affected the motivation level of many internal stakeholders. Scarce financial means also hampered effective management; earmarked money was not always used for its agreed destination, but to cover regular financial limitations, causing even more employees' dissatisfaction.

At UoC lack of the required financial resources also had repercussions on the availability of other resources. Quality improvement activities were constantly held against the availability of funds compared to other daily routines. The fact that to meet NVAO's quality standards certain changes and improvements were mandated has facilitated the allocation of the limited funds primarily to related quality improvement activities. Investment in better library services, upgrading of infrastructural facilities, construction of new faculty buildings and implementation of more advanced ICT facilities were the main beneficiaries of the received additional funding. But for instance, expansion and training of personnel had to be restricted due to insufficient funds.

In all three Dutch-Caribbean universities a large amount of money was invested in the involvement of external experts to support the progress of the accreditation processes. External experts were hired to counteract the lack of internal expertise and the lack of human resources in general. The quantity and quality of human resources were in all three cases not sufficient in order to successfully go through the accreditation processes. Therefore, the participation of external experts became imperative if successful accreditation results had to be obtained, as will be elaborated while analysing the next variable.

Further analysis demonstrates that undoubtedly additional financial and human resources were needed in order to reach the accreditation goal. At UoC improved infrastructural and ICT facilities did not really affected the progress of the accreditation processes, while so far, at UA this indicator hindered this process *(barrier$_a$)*. In UoC and UA the lack of financial funds and the insufficient quality and quantity of the human resources actually hampered the progress of accreditation processes *(barrier$_a$)*. In

addition, since the financial resources were only granted once, no guarantee is provided for maintenance of the achieved accredited status at UoC. In this case, no permanent accredited status can be forecasted without future guarantee of sufficient financial and human resources.

Internal quality assurance policy

Although the previous four independent variables have been described as stand-alone variables, they can all be addressed as part of the internal quality assurance policy (Douma, 2009; Harvey and Newton, 2004; Redmond et al., 2008). This policy takes the organizational structure as a starting point and is expected to take due account of the leadership and management capabilities, the (non-)existence of a quality culture and the availability of resources. As shown in figure 9-8, there are five indicators coupled to this variable.
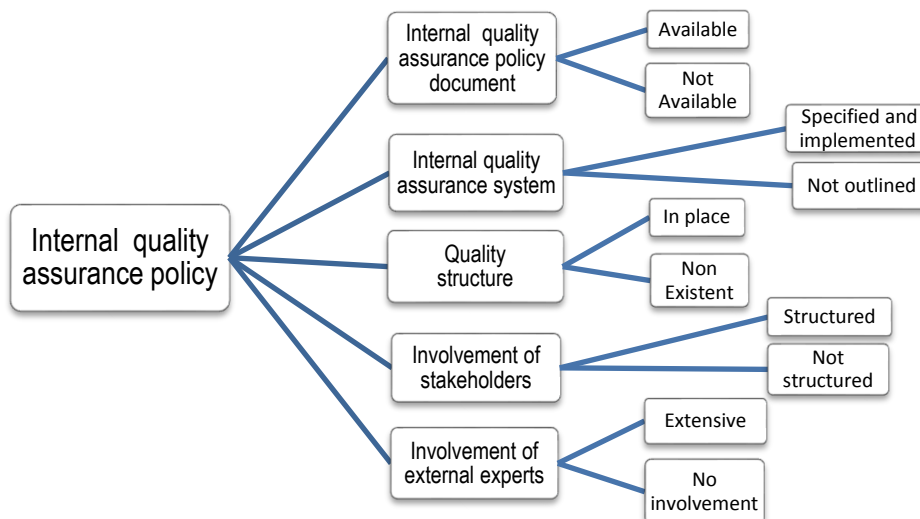
Figure 9-8 Operationalizing Internal Quality Assurance Policy

Concerning the Dutch-Caribbean universities, at UoC and UA an institutional internal quality assurance policy document has been developed, containing the guidelines, rules and procedures for implementing a systematic quality approach at the different organizational levels; at USM this document was not yet available. Analysis reveals however, that the availability of an institutional internal quality assurance policy document at UoC and UA does not automatically mean that the written word is also carried out in practice. At UoC for instance, most of the guidelines incorporated in this policy plan, such as the total quality management approach and the implementation of the PDCA-cycle, have not yet been realized. At UA steps are taken so as to implement the proposed centralized internal quality assurance policy.

With regard to the internal quality assurance system different approaches could be identified between UoC and UA; at USM no quality assurance system was yet delineated. UoC has a fairly decentralized approach providing the faculties only with

guidelines in its internal quality assurance policy document based on the 'unity in diversity' principle, whereas at UA such a system is greatly centralized. All faculties of UoC have developed their own quality assurance system, although great similarities could be detected in the 'who, what and how' of these systems since they all aim to meet the NVAO's quality standards in this matter. Except for the institutional students' and guest lecturers satisfaction survey, at UoC all other evaluations took place at faculty level, whilst at UA these were done at central level.

None of the three Dutch-Caribbean universities had a quality structure in place at the start of their accreditation processes. Gradually at UoC and UA some elements to build a quality structure were joined, for instance the establishment of the institutional quality assurance department, the appointment of quality officers at faculty level and the formation of an institutional quality team. These measures seem to have a more permanent nature and can therefore indeed be seen as structural in the universities. However, at the end of the research period still neither at UoC nor at UA a well outlined quality structure was effected, neither on paper nor in practice.

In UoC involvement of students and representatives of relevant professional fields in the evaluation of the quality delivered are part of the faculty's quality system. The enthusiasm to maintain this involvement has however greatly diminished after the accredited status was granted. The involvement of the academic staff via team meetings gradually were more structurally held. Department heads and other non-academic staff were only involved in case they had to support the faculties. No structural involvement of them in discussion on quality issues could be perceived. The role of alumni, although indicated as part of one of NVAO's quality standards, has until the end of the research period never received focused attention. Nevertheless, this has not yet led to any negative influence on the accreditation outcomes.

The establishment of all required meetings to discuss quality issues from different perspectives, whilst the quantity of the available human resources did not increase, has put great workload on the staff members, academic and non-academic, thus contributing to a slower progress of the accreditation process. Even though there were countless complaints by staff members, the academic staff in particular, regarding their increased work load due to the accreditation efforts, most of them were still highly committed and involved so as to reach the accreditation goal. In contrast to what was stated in the literature, receiving the accredited status gradually became a matter of pride for most academic staff members and, unexpectedly, not a threat for the achievement of the accreditation goal, because of its importance for survival at national and international levels.

As was mentioned previously while analysing the available resources, a large number of external experts were hired by UoC and UA during their accreditation processes and USM also planned to do so. Extensive participation of these experts contributed to bring knowledge and experience of accreditation processes from the Netherlands and assisted to direct the course of these processes. Further analysis shows that the involvement of external experts indeed facilitated the accreditation processes, yet too little has been learned from them, especially at faculty level. Due to the lack of an

embedded quality culture and internal expertise external experts most of the time came in, in some cases even frequently, did their job and moved on. After their departure the organization was not strengthened and their expertise could barely be imitated, meaning amongst other things that in the future other ways to strengthen an internal quality culture will have to be found.

Based on the analysis of this variable in the Dutch-Caribbean cases it can be concluded that most indicators did not score well; they were either not implemented or were in the process of being implemented. However, apart from some delay in the progress of the accreditation schedule, no other perceptible negative effect on the overall accreditation processes could be measured. The involvement of stakeholders and also from external experts however acted as *enabler$_a$*.

9.3.3 Overview of the influential independent factors

Table 9-3 provides an overview of the research findings presented in the previous section and compares the scores of the 17 indicators. As can be noticed there is a great resemblance among the scores, in particular between UoC and UA. Despite the fact that UA has not yet completed its first accreditation cycle, many similarities with the UoC case could already be detected, showing that the approach towards accreditation is quite the same. The first analytic annotation to be made concerning these similarities is that UoC and UA have to be accredited by the same accreditation organization, expecting compliance with the same quality standards. A similar accreditation approach could therefore be expected. Secondly, UA was assisted by the institutional manager of UoC and therefore it could be anticipated that her same 'success' formula is contemplated at UA. Thirdly, both universities make use of mostly the same external experts, also explaining why so many aspects were dealt with in a similar way. Finally, both universities are going through their first cycle of accreditation processes, which can also be a reason for a similar accreditation approach; the same steps had to be taken.

The score granted to the indicators in table 9-3 reflects in principle the values portrayed in figures 9-4 to 9-8. However, during the comparative analysis of this group of universities gradations in the extent of presence and/or existence of a particular indicator during the accreditation processes appeared, necessitating the value 'in progress' for certain indicators in table 9-3. Moreover, in UoC in particular with regards to several indicators a diversified picture was encountered, in contrast with the uniform, institution-wide values of each indicator portrayed in figures 9-4 to figure 9-8. That explains the term 'diversified' used in table 9-3 (=no uniform approach could be detected). For instance, for some faculties the high level of commitment and involvement of the dean contributed largely positively to the progress of the accreditation processes at faculty level, while other deans were less involved. However, positive accreditation outcomes were achieved in most accreditation attempts. This research finding illustrates that the impact of certain potential barriers can be neutralized by the force of certain actual enablers, indicating the interdependency among the variables, to be explained in section 9.3.4.

Table 9-3 Overview of the value of the indicators in the Dutch-Caribbean universities by the end of 2012

Variable	Indicator	UoC	UA	USM
Organizational structure	Organizational chart	Centralized	Centralized	Centralized
	Decision-making structure	Not formalized	Formalized	Info not available
Leadership and management style	Role of institutional leaders	At a distance	At a distance	Info not available
	Management at faculty level	Diversified	Diversified	Info not available
Quality Culture	Care for quality	Diversified	Diversified	In progress
	Shared responsibility, ownership, cooperation and collaboration	Low	Low	Info not collected
	Commitment of internal stakeholders	High	High	Info not collected
	Norms, values, traditions, customs, people behaviour	Not present	Not present	Info not collected
	Communication channels and interaction among internal stakeholders	Sketchy	Sketchy	Info not collected
Available Resources	Human resources	Insufficient	Insufficient	Insufficient
	Financial resources	Insufficient	Sufficient	Sufficient
	Facilities	Adequate	Inadequate	Adequate
Internal Quality Assurance Policy	Document on Internal Quality Assurance Policy	Available	Available	Not available
	Internal Quality Assurance System	Not outlined	In progress	Not outlined
	Quality structure	In progress	In progress	Non existent
	Involvement of stakeholders	Not structured, but high	Not structured, but high	Not structured
	Involvement of external experts	Extensive	Extensive	Extensive

To conclude: At both UoC and UA, and also expected to be true for USM, internal and external quality assurance were closely linked; all that had to be done, was related to the accreditation requirements. Even though some transformation of the institutions could be identified, the main focus was compliance with the NVAO standards. Due to the accreditation processes, certainly some improvements were implemented, but the main aim was to achieve the accredited status for the offered programs. It is therefore not surprising that the desired result was achieved at UoC. It seems like as long as compliance with the NVAO's standards was the main focus, high involvement of the main stakeholders could be guaranteed, confirming what Westerheijden (2013) remarked, 'what gets measured, gets done'. If this will also be the case with UA and USM programs still remains to be seen although no different result is expected since the same influential factors could so far be detected, especially in UA. However, the encouragement of the development and embedment of a quality culture, the insufficient available human and financial resources and the implementation of an internal quality assurance policy need to receive proper attention if the universities aim to maintain their accredited status. In case of UoC for example, on a short notice during

the second accreditation cycle consistency needs to be proven in the quality approach during the period after the accredited status was first granted; an embedded quality culture is highly needed to meet this requirement.

9.3.4 Interdependence among the independent variables

Even though the focus in this study was on the influence of the separate independent variables as a definitive model of their interrelationships fit for testing in a comparative case study was not found in the literature, the interdependency among them was apparent. Two conspicuous interdependencies are treated in this section.

As has been widely acknowledged in the literature, management effectiveness and organizational culture are interdependent variables, together influencing the organization's performance outcomes in terms of organizational and also national goals. Understanding organizational culture will contribute to managers' minimizing the occurrence and consequences of cultural conflict, thus increasing the effectiveness of the managers' decision-making processes and change strategies. Effective communication, individual commitment and timely involvement in decision-making processes of internal stakeholders are thought to be key elements leading to successful organizational performances and outcomes. At UoC in particular, the interdependence between leadership and quality culture surfaced. The frequent change of the institutional leader was mentioned in that case as a hindering factor for the development of a quality culture. Instability and inconsistency of institutional leadership approaches have not contributed to decisive progress of the accreditation processes. However, the potential negative impact of this indicator was neutralized by the high level of commitment and involvement of most deans and the institutional quality manager.

In addition, a compensatory interdependence was found between the available resources and the leadership and management style. Irrespective of the lack of the required financial means and human resources accreditation requirements had to be met. Partly, this was done through ad hoc additional financial resources, with which it was possible to increase human resources temporarily through extensive involvement of external experts. Such ad hoc tactics were part of the leadership and management style, enabled through making managers at all levels responsible for effective and efficient utilization of the limited resources and encouraging their staff to perform at maximum quality level.

9.3.5 Concluding remarks

As explained earlier, since UoC is the only university in the Dutch-Caribbean group which has completed accreditation processes, mainly this university will be compared to the Dutch cases in the across-group comparison in section 9.5. In order to facilitate this comparison in this section some overall concluding remarks are presented regarding the analytic comparison done in this group of universities, UoC in particular.

According to our research model the five identified independent variables will most likely exert influence (positive or negative) on the progress and outcomes of the accreditation processes. In addition to a list of enablers and barriers, the analysis shows that a third group has manifested: those indicators that barely had any influence on the progress and outcomes of the accreditation processes. These indicators can be considered as having a 'neutral' effect on these processes.

In section 5.3.3 it was explained which characteristics should be in place for indicators to be called potential enablers (enabler$_P$). Reflecting on that operationalization, the case description in section 7.1 and the comparative, within-group analysis in the previous parts of this section, in table 9-4 we present the actual influence of each indicator on the progress and outcomes of the accreditation processes and highlights the enabling factors that finally positively influenced these processes in the UoC. Table 9-4 does not reflect a 'one-on-one' configuration of table 9-3 since table 9-4 incorporates the actual impact of the indicators on the accreditation processes, illustrating the complexity of accreditation processes. For instance, with regards to 'the role of the institutional leader' its operationalization in section 5.3.3 indicates that for these leaders to become potential enablers they must be committed, involved and supportive. The analysis (table 9-3) shows that these leaders operated from a distance. Even though they were committed to reach the accreditation goal, they were not involved yet delegated a great responsibility to the institutional quality manager for leading the accreditation processes. Moreover, the top leaders were changed often, which is a dynamic factor not considered in the usual, static definitions. As mentioned in section 9.3.4, the potential negative impact of this indicator was neutralized by the high level of commitment and involvement of most deans and the institutional quality manager. As a result, the institutional leaders at UoC had little influence on the progress of its accreditation processes. Therefore, in table 9-4 this indicator is labelled as 'neutral'. So, top leaders remaining 'at a distance' did not mean that they actually became barriers. Another example is the indicator 'management at faculty level'. Even though no uniform conclusion could be drawn with regards to this indicator since the degrees and styles of involvement of these line managers were diverse (table 9-3), we could still label this indicator as an actual enabler because the majority acted as steering officers (section 5.3.3) during the accreditation processes. And in case they were 'merely participant' they granted the institutional quality manager with the steering role, in this way still encouraging the progress of the accreditation processes. In a third example, at UoC there was no outlined institutional 'internal quality assurance system', but each faculty had its own system more or less based on central guidelines and procedures but above all following the NVAO standards in this matter. The absence of a well-outlined institutional quality system finally did not have a negative effect on the progress of the accreditation processes since at faculty level this system was well in place. Therefore it is labelled as 'neutral'. Illustrative is also the example of the 'quality structure': we concluded that this was not in place. However, gradually more elements pertaining to such a structure could be detected, so its initial absence did not have a negative impact on the progress of the accreditation processes, and is thus considered to have a 'neutral' effect. A final example is the 'involvement of stakeholders', which was not

structured according to any centralized instructions or regulations, but still the level of involvement during the accreditation processes was high, therefore converting this indicator into an actual enabler. Following this same analytic approach all indicators in table 9-4 were labelled as actual enabler (enablera), actual barrier (barriera) or as neutral.

Table 9-4 Actual effect of the identified influential factors in the UoC case

Variable	Indicator	Enabler	Barrier	Neutral
Organizational structure	Organizational chart			√
	Decision-making structure			√
Leadership and management style	Role of institutional leaders			√
	Management at faculty level	√		
Quality Culture	Care for quality		√	
	Shared responsibility, ownership, cooperation and collaboration		√	
	Commitment of internal stakeholders	√		
	Norms, values, traditions, customs, people behaviour		√	
	Communication channels and interaction among internal stakeholders		√	
Available Resources	Human resources		√	
	Financial resources		√	
	Facilities			√
Internal Quality Assurance policy	Document Internal Quality Assurance Policy			√
	Internal Quality Assurance System			√
	Quality structure			√
	Involvement of stakeholders	√		
	Involvement of external experts	√		

Putting this all together we can conclude that concerning the indicators only 24% acted as actual enablers; 35% were actual barriers and 41% were neutral. So, most of the original identified potential influential indicators (76%) were not the reasons for the observed accreditation outcomes. Further study seems to be necessary in order to investigate the real reasons for the obtained positive accreditation results.

In addition, no clear fully enabling variable could be identified; none of the identified potential influential variables had an overall encouraging impact on the accreditation processes of UoC. The organizational structure barely had any influence, whilst the majority of the indicators of the quality culture and the available resources had a negative impact on the progress of the accreditation processes. With regards to the internal quality assurance policy an overall conclusion cannot be draw since some of its indicators barely had any effect, while two of the five operated as actual enablers. An important note needs to be added regarding the leadership and management style. Analysis shows that the determinant role of the institutional quality manager, delegated by the institutional leader together with the positive contribution of most deans largely contributed to the successful outcomes. This presence of dedicated human resources (which in other respects remained at an inadequate level) neutralized

the potential negative effect of the frequent change of the rectors and their in general reserved attitude. All in all, the analysis confirms that the role of those in leading and managing position at the different organizational levels is decisive for the success rate of the accreditation processes.

According to the collected data the main driving force was the willingness, commitment and involvement of the participants; sometimes in management position or as part of the academic or non-academic staff, yet willing to pull the accreditation processes to a successful end. Regardless of some delay, the final goal could be reached and by the end of 2012 96% of the accreditation requests were positively assessed. Certainly, it was *the human factor* that did the job, not any mechanism or supportive instrument.

Evidence shows that UoC has not yet become a learning organization. By the end of the research period institutionalization of the achieved effects barely took place and the implementation of PDCA-cycles still needs to be incorporated in a fertile ground. The same is applicable for the development, implementation and institutionalization of a quality culture. Effective change leadership and management are crucial to encourage organizational transformation processes to ensure not only successful accreditation outcomes, but the integration of them in the daily universities' operations as well. So, maintenance of the achieved accredited status at UoC is highly dependent on the variable 'Leadership and Management style', as will be illustrated in figure 9-9 (section 9.7). This study shows that a proactive and targeted managerial approach, while in a timely manner neutralizing the potential resistance efforts are valuable preconditions for the maintenance of the achieved accredited status in UoC.

With regards to UA the following indicators could so far be identified as actually enabling the progress of its accreditation processes: management at faculty level, document on internal quality assurance policy, internal quality assurance system, involvement of stakeholders, involvement of external experts, and commitment of stakeholders. This list shows that till the end of the research period the variable 'Internal quality assurance policy' had a strong enabling effect in UA. Again the human factor seems to play an important role during the progress of accreditation processes in this university. The barriers that could be identified so far were: the lack of continuous care for quality, the gradually implemented quality structure, the insufficient shared responsibility, ownership, cooperation and collaboration, the limited human resources and the insufficient facilities. It remains to be seen if these indicators will affect the progress of the UA accreditation processes in such a way that the achieved results will be negatively impacted.

9.4 Within-group analysis of the Dutch cases

In this study the comparative analysis of the Dutch cases (figure 9-1(b)) was done according to a repetitive, detailed review of the collected data generated from 14 in-depth interviews and the analysis of a wide range of documents. In chapter 8 the two Dutch universities were described. Below we first address some general similarities

and differences during their accreditation approach, followed by the comparison of the independent variables in order to reveal the critical success factors. At the end an overview of the influential factors affecting the progress and outcomes of their accreditation processes is presented.

9.4.1 General similarities and differences

For several decades external evaluation of the quality of higher education programs has been introduced in the Netherlands. First, it was done by the respective associations of the higher education institutions, VSNU and HBO-Raad. In 2002 the Dutch accreditation system was enacted, aiming to achieve both improvement and accountability goals. By the end of 2012 the two Dutch universities have completed their first accreditation cycle done by the NVAO (UU in 2008 and HZ in 2011). They were going through the second one (see figure 9-2) so as to comply with the Dutch Higher Education Act. By then, for the first time, UU and HZ had completed an institutional audit with positive results, as part of their second accreditation cycle.

By attaining an accredited status for their programs, these universities aim to achieve a national high ranking position and consider accreditation as an important tool to facilitate this endeavour. Whilst HZ is working to become more attractive at international level, thereby enhancing its external competitive position, at UU the objective is to secure its international acquired high ranking position and become a large and multifaceted international knowledge centre.

The accreditation results of the two Dutch cases were so far mostly positive. Analysis reveals that the many years of experience with external quality evaluation processes in the Netherlands contributed largely to the positive accreditation outcomes. A culture of external quality evaluation existed in the Netherlands prior to the introduction of the accreditation system. So, with time the internal quality awareness has increased within the higher education institutions, thereby enabling the achievement of the external quality mandates. The link between internal and external quality assurance was indeed well secured.

At both universities, as a consequence of accreditation results indicating that effectiveness and efficiency should be increased, some existing programs have been stopped or merged. At HZ however, new programs have been started as well, in order to attract more (inter)national students. Expansion of the offered programs while not increasing the staff members has however led to a higher workload, which was predicted as a potential future barrier on the progress of accreditation processes. Future research will have to specify whether this prediction has become reality.

The first accreditation framework was vastly criticized by both universities. They complained that to a large extent this framework contains mainly general criteria granting the review panels with too much room for their own interpretation and judgment. The norms were not clearly specified. Therefore, panels could assess according to their own normative perspectives leading to differentiated results depending on the panel in charge of the quality assessment of any particular program.

According to NVAO, however, the final judgment is made by its board using unambiguous and equal measures for all programs, neutralizing every possible differentiated panel assessment.

The choice for an institutional audit was, amongst other reasons, driven by the fact that both universities were following the national trend in this matter. By doing so, they also believed that the workload while doing the program assessment later on would become less. At the end, UU and HZ were convinced that going through an institutional audit fortified the cooperation among internal stakeholders. The interactive accreditation approach requested high engagement of the stakeholders and this was broadly supported. Further analysis reflected that the expected reduced load for the program assessments was not always realized, causing disappointments mainly at faculty and program levels.

Based on the analysis of these cases we can state that even though the first and until now also the second accreditation cycle were mostly successful, several improvements can still be implemented in order to consistently facilitate the process towards accreditation at the different institutional levels, e.g. the continuous completion of the quality cycle at HZ and the reliable execution of curriculum evaluation at UU. As will be further detailed below, several mechanisms have been introduced to keep the focus of the staff members as much as possible concentrated on quality delivery in order to improve quality in a more structural manner, and hence to let the programs be continually accreditation worthy, not just waiting for NVAO to come along.

9.4.2 Comparing the independent variables

This section presents the results of the comparative analysis of the independent variables in the two Dutch cases. With reference to the explanation of the variables in figures 9-4 to 9-8 these case universities were also compared mainly at the level of the 17 indicators. The interdependence among the variables is addressed in section 9.4.4.

The organizational structure

The organizational structure of higher education institutions in the Netherlands is regulated by WHW. At both UU and HZ this is operationalized in their administrative regulations. The Executive Board has the final responsibility of the accreditation processes. The fact that UU is a large university accounts for the layers that are included in the organizational structure, e.g. one faculty can consist of several departments, headed by department managers who are accountable to the dean. At faculty level there is a faculty board, mostly consisting of the dean, the vice-dean undergraduate programs, vice-dean graduate programs and the director of operations.

At UU great responsibilities were given to the faculties. The department O&O is entrusted with the controlling and monitoring task to verify if the differentiated approach at faculty level fits the institutional rules and regulations. This department also has a supportive role to the faculties. This university can be considered as one providing rules, procedures and guidelines at central level, yet leaving the faculties

with sufficient freedom for implementation. At HZ in contrast, a more centralized approach to accreditation could be detected, which is initiated, coordinated and monitored by the department O&K with great involvement of the board secretary. Before and during site visits this department plays a prominent and determinant role. Most work is done by this department, but with great involvement of the ones responsible at academy level, such as the program directors and the quality officers.

At UU, and at HZ as well, the rules and responsibilities are well set and it seems like everybody knows what is expected from them. In both universities several formal meetings are held to discuss quality issues in order to meet the WHW regulations. In addition, there are also many internally regulated meetings to guarantee acceptance at all levels. Moreover, the controlling management approaches were not considered as authoritarian due to the many opportunities provided for consultation and discussion in both universities. At HZ, despite the centralized accreditation approach, analysis exposes a high level of satisfaction among the internal stakeholders. In addition, its small scale was actually seen as a great advantage, since staff members could meet each other easily in the corridors to discuss and agree on relevant issues. The stakeholders were proud to be part of such a unified small university.

Both universities also have a regulated accountability structure. On a regular basis, during formal meetings deans/academic directors report to the Executive Board on key performance indicators agreed upon, in which quality improvement activities and accreditation outcomes are included. Progress of accreditation processes and the implementation of quality activities based on previous accreditation results are issues that are addressed during such meetings and agreements are made to secure the continuation of the initiated quality improvement processes.

In sum, the organizational structure of UU and HZ did not have any relevant impact on the progress of their accreditation processes. In both cases, the hierarchical lines and decision-making structure were clearly delineated on paper and in practice also evidently supported.

Leadership and management style

Analysis of the collected information on this variable in the two Dutch cases indicates that in both universities the institutional leaders had great interest in getting accredited. Their leadership style was reflected in a high level of commitment and involvement. They facilitated these processes by establishing institutional rules and procedures while involving all relevant stakeholders, monitoring the progress of quality improvement activities during formal meetings based on an embedded planning and control cycle and supporting the availability of the necessary resources. For these leaders several reasons emphasized the importance of attaining and maintaining the accredited status: to meet the governmental mandates, to benchmark with other national and international universities, to guarantee the quality of the offered programs and moreover to enhance and secure their local, regional, national and international position. At all levels measures were implemented to encourage the accreditation processes.

From 2010 onward the focus was concentrated on maintaining the achieved accredited status. The many internally regulated meetings provided the institutional leaders with information in order to be well-informed and to allow them to take balanced decisions, creating a shared responsibility culture, positively influencing the progress and later on the outcomes of the accreditation processes. At HZ an increasingly bottom-up leadership approach could be noticed, characterized by wide internal discussions with relevant stakeholders preceding institutional management decisions, and with time encouraging the development of a quality culture. Also the participation of the members of the Executive Board in the institutional steering committee to prepare for the institutional audit illustrates their high level of commitment in accreditation processes.

Due to the small scale of HZ the involvement of the Executive Board during accreditation processes was more directly felt by the internal stakeholders than in the case of UU. The managerial lines were shorter and meeting the members of the Executive Board informally took place on a more regular basis. In both universities however, as has happened a few times, the board could intervene in case it was necessary to modify and direct quality assurance and improvement activities since they have the final responsibility.

The responsibility to achieve and maintain the accredited status for the programs lies at both Dutch universities in the hands of the dean/academy director. Another matching pattern that came to surface was that while analysing the participation of these line managers at UU and HZ great differences could be detected among their level of involvement during the accreditation processes, even though according to the internal policy regulations they had to function as steering officers. In general, at HZ the involvement of the academy director was more at a distance, while at UU this differed between the faculties, therefore creating a differentiated management approach. In some cases in UU, the vice dean was in charge of the accreditation process whilst at other faculties the head of the educational department took this role. The fact that at institutional level guidelines were provided without prescribed directives on their implementation, actually contributed largely to a quite differentiated management approach of the (vice) deans.

At both universities the management conditions at faculty/academy level were in place. There was a clear delineation of tasks, responsibilities and accountabilities, sufficient budget was available and there were training possibilities and facilities to enable the functioning of these managers.

Concluding analysis of this variable reinforces the importance of the commitment and involvement of institutional leaders during accreditation processes. Inspiring, enthusiastic and highly involved institutional leaders can indeed be considered of eminent importance for enabling the progress of accreditation process since this largely contributes to encouraging the participation and commitment of other involved stakeholders. Doing so leads to more positive accreditation results. The role of the deans/academy directors seemed to have a less determinant impact, because there were other structures in place to encourage these processes at faculty level, such as at

HZ the prominent role of the department O&K and at UU the driving force coming from vice deans or heads of educational units at faculty level. We can furthermore conclude that leadership and management play a determinant role in creating a quality culture *(enablerₐ)*, where in general the internal stakeholders willingly contribute to carrying out continuous quality improvement actions, inspired by the accreditation mandate.

Quality Culture

Analysis of this variable for the Dutch cases discloses that during the past decade quality awareness has largely increased, mainly due to the many years of experience gained through external evaluation processes. In general, at all organizational levels the stakeholders were committed to deliver quality products and services. A quality culture exists in these universities, even though differences could be measured in the degree of the embedment of this variable within the different units in the universities. There is still room for improvement because not all scheduled quality activities happen accordingly.

In accordance with the literature reviewed, the importance of those holding a leading or managing position in order to develop and cultivate a quality culture was confirmed to play a determinant role in the Dutch cases. At UU and HZ enthusiastic and committed leaders and managers with encouraging approaches at all organizational levels enabled the gradual development of a quality culture through the years. At UU the quality culture has been developed and cultivated due to several more factors. The habit of monitoring and critically reflecting on implemented quality activities, which is facilitated by the internal quality assurance system (formal meetings) and the many informal settings of sharing knowledge and experiences were contributors of the gradual development of a quality culture, along with the encouragement of innovative ideas and investment in training of human resources, including managers.

Besides the determinant role of the institutional leaders and line managers, at HZ during the years the development of a quality culture was encouraged by well-motivated teams, many wide spread informal consultations, an increasingly bottom up leadership style based on centralized plans, timely conversion of evaluation results into quality improvement actions, great willingness of the academic staff to help students and each other, and their high approachability due to small scale. Staff and students work together to create a quality culture focusing on maintaining and improving quality of education. Still, a more open culture needs to be further developed.

The fact that both universities received a positive assessment of their institutional audit is another proof of the existence of a quality culture, because this issue plays an essential role by this type of evaluation. Actually, as part of the institutional audit the extent of the embedment of quality culture within a university is assessed by NVAO. As was confirmed by the NVAO at UU the degree of the existing quality culture differs between the faculties and programs. Nevertheless, an open culture of sharing and learning with and from each other was evidently present while analysing this university. This open culture also illustrates the willingness among colleagues to

cooperate and collaborate with each other, although it also appeared in the case study that there is room for improvement. Further analysis shows that though the staff members were committed to deliver quality, this university still needs to grow toward a culture where people take broader responsibility than only what is expected from them. At HZ the same pattern could be detected. Delivering quality is the focus at all levels with motivated and greatly involved and committed teams, yet not at all levels the aspects of the internal quality assurance system are well implemented, illustrating that improvement is still needed in order to have a structured and systematic quality approach.

As mentioned earlier, the numerous formal and internally regulated meetings and gatherings across the different internal stakeholders also contributed to creating a quality culture within both universities. In case of HZ in particular, its small scale enables an informal consultation culture, encouraging mutual cooperation and collaboration, informal consultations and broad based alignment. Small teams however are highly vulnerable, which can jeopardize an accreditation process.

Besides the networks of formal meetings and informal consultations, the more commonly used communication sources at these universities are emails, intranet and newsletters, aiming to support wide sharing of information and great transparency. Additionally, in many cases the informal gatherings precede the formal ones, thus facilitating management of resistance in a timely manner and broadly supported decision making, hence contributing to more transparency.

To wrap up, the analysis of the Dutch cases confirms that through the years the development of a quality culture could be perceived. Concerning the five indicators as part of this variable some slight differences could be identified in their degree of influence, as illustrated in table 9-5.

Table 9-5 Indicators of quality culture in the Dutch cases

	Care for quality	Shared responsibility	Commitment	Norms, values, traditions, etc.	Communication and interaction
UU	++++	+++	++++	++	+++
HZ	+++	++++	++++	++	++++

Legend: ++++ = the indicator is highly present; +++ = the indicator is largely present; ++ = the indicator is progressing, but not substantial; + = the indicator is barely present.

In line with what was stated in section 9.3.2 (below table 9-2) in order to identify the actual impact of these indicators on the progress and outcomes of accreditation processes in both Dutch universities, in table 9-6 we recode the values of table 9-5 into a simpler scale: low- high; present-not present; regulated-sketchy.

We can conclude that the existing degree of quality culture within both Dutch universities actually largely contributed to enabling the accreditation processes and facilitated the attainment of positive accreditation outcomes *(enablera)*.

Available Resources

According to the studied literature both Dutch case universities can be categorized as resource-rich universities. Accordingly, for none of them the availability of resources was experienced as a shortage during the accreditation processes. The UU as a large university could in many ways benefit most from the availability of the wide scale of resources. The quantity and quality of the available resources shaped the behaviour and performance of the internal stakeholders and consequently their potentials and capabilities to enable the progress of accreditation processes. At HZ the availability of resources was not an arduous issue during the accreditation processes.

UU is a national trendsetter and well known for its professional career development policy related to teaching qualification certifications for the academic staff. High quality teaching staff which is strongly related to the institutional educational model is one prime instrument used to meet the university's strategic objectives. Attaining and maintaining teachers' qualifications have become mandated by the university. By doing so, the quality of the academic staff was enhanced and secured. At HZ as well, by means of the university's wide continuous improvement of the quality of the teaching staff the quality of the programs was enhanced and hence facilitated positive accreditation results.

At both universities the faculty/academy staff experienced an increase in their workload due to the additional activities related to the accreditation processes though this was not considered to have negative effects on these processes. In case of HZ, if additional support and extra manpower were needed it was easily granted by the Executive Board; at UU this was generally not needed. At HZ however, the institutional decision not to hire permanent teaching staff anymore is considered as a threat to upcoming accreditation processes due to the small scale of the teams; too many changes of team members in such small teams can have repercussions on the stability and even commitment of the team members, which can have a negative impact on the progress of these processes in the years to come.

The financial resources were in place at both Dutch universities and their financial position was stable. On the one hand the Dutch government made additional funds available to achieve the accreditation governments' objective. On the other hand these universities strictly reserved the necessary financial means to enable the realization of their accreditation efforts. In case of UU the size of this university contributes extra to facilitating the necessary financial payments in accreditation processes. However, despite their stable financial position, both universities complained about the high costs related to accreditation processes.

The facilities can be labelled as adequate and sufficient. At UU, due to its size and the widespread buildings, support services are organized at university and at faculty levels. Managers of these services bundle their capacities in order to encourage professionalism, quality, effectiveness and efficiency and work closely together to realize their supportive tasks. This university has initiated processes to centralize some support departments in order to become more efficacious and efficient, e.g. the ICT

facilities. Support departments at HZ are organized at institutional level. Ample attention is paid to be effective and efficient and to have the necessary facilities in place to sustain each accreditation process.

Concluding the analysis of this variable, we can state that the human and financial resources together with the facilities were sufficient and adequate and hence all three indicators can be marked as actual enablers of the accreditation processes *(enablera)*.

Internal Quality Assurance Policy

At both UU and HZ an institutional internal quality assurance policy plan formed the fundament of the systematic quality approach. At these universities the internal quality assurance approach is based on a planning and control cycle and is strongly connected with the external evaluation process. The department O&O at UU and the department O&K at HZ are in charge of coordinating, controlling and monitoring quality assurance activities and ensuring that institutional guidelines and procedures are followed.

At UU institutional guidelines are formulated that can be further specified and implemented at faculty level, based on the conviction that quality assurance is better served if it takes place close to the workplace. Accordingly, each faculty has its own internal quality assurance system, which has to fit with the institutional guidelines. In addition, there are some university's tools to guarantee high quality deliverance, such as a system of internal certification of all new programs and an internal audit system for programs with less contented accreditation results. At HZ analysis reveals that its small scale encourages a university-wide approach on most policies, including all those related to quality assurance. In contrast to UU, academies do not have their specific quality plan, but use the institutional one while more elements can be added based on their specific needs. Still some small differences were encountered across the academies concerning the quality approach. In any case, the internal quality assurance approach is directed by accreditation; mostly all activities to ensure and improve quality aim at compliance with the NVAO standards.

The use of Deming's PDCA-cycle is the starting point of the internal quality assurance system in the Dutch cases. The UU's system of internal quality assurance aims to guarantee an adequate balance between quality assurance and quality improvement and consists of quality cycles that operate at different levels (institutional, faculty, program), which are interconnected with each other (figure 8-2). However, analysis of the collected data indicates that the structural embedment of these cycles still needs to be realized, including strengthening of the monitoring and controlling of the implementation of the institutional guidelines. But, in contrast, evidence demonstrates that the quality culture existing in UU is not based on control, but on confidence and the conviction that agreements made are accordingly completed. Therefore, monitoring and controlling activities were less relevant.

At HZ, in addition to the PDCA-cycle, the Balanced score card, the INK-model and the NVAO accreditation framework constitute the backbone of the internal quality management system, linking the internal and external component of this system. The

aim is continuous improvement, innovation and involvement of all stakeholders. Despite the existing quality culture, not all quality improvement activities are done as agreed, indicating that also at this university there is room for improvement.

Both UU and HZ use a variety of quality instruments to collect information on quality deliverance and to also reach evidence-based decision making. At UU a 'chassis' was developed encompassing guidelines, principles and minimum conditions for the internal quality assurance system. Among other things, uniformed course size, year schedule and timeslot are regulated in this chassis. The systems of internal quality assurance at faculty levels can differentiate yet have to fit into this chassis. Indeed, great differentiation between the quality assurance systems at faculty level could be detected. A tailor-made approach was encouraged: tools to be used differ among faculties and could be customized to meet the nature and culture of each faculty. Furthermore, even within a faculty there can be differentiation depending on the nature and extent of each program. The education card, containing all quantitative data on students' performances, is another institutional instrument to monitor quality assurance and improvements at faculty levels.

Also at HZ a wide variety of instruments are used to guarantee continuous quality improvement. Three instruments are worthwhile mentioning: 1) an evaluation calendar, containing an overview of all evaluations to be conducted during a planning and strategic period with an outline of the study subjects of each evaluation, the evaluation method, the frequency and the focus group; 2) the synopsis of each course, including an overview of all improvement actions done based on previous evaluation results and 3) a system of internal audit, recently introduced. The expectation is that at this university in the coming years more quality instruments will be introduced to collect more information on quality delivery in order to have data-based evidence for creating a complete picture of customer satisfaction.

In the Netherlands there are several national surveys, in which UU and HZ participate, facilitating quantitative data collection and national benchmarking. This information also serves to substantiate evidence-based policy decisions and thus meets this aim of both universities. Furthermore, as part of the Dutch higher education policy concerning the use of performance indicators, both universities have set performance agreements that are also discussed during the formal meetings as part of the PDCA-cycle. Deans at UU and academy directors at HZ are accountable to meet these agreements. The reporting on these agreements is incorporated in the institutional planning and control cycle. In addition, accreditation results and recommendations included in the review report are also monitored during the formal meetings at both universities. Improvement actions based on the accreditation results need to be implemented to enable a continuous quality improvement approach in order to be constantly accreditation worthy.

Both universities have a quality structure in place with clear definitions of roles, tasks and responsibilities. UU's quality structure can be categorized as a combined centralized-decentralized approach: at institutional level guidelines are approved, giving the Executive Board the final responsibility. However, the responsibilities for

quality assurance and accreditation lay at faculty level and as earlier mentioned the implementation may differ between the faculties, as long as it fits with the agreed guidelines. At UU there is an extended form of consultation within and across the different organizational levels to ensure that all parties are well-informed and involved in a timely manner as part of the internal quality assurance system. Formal and internally regulated meetings take place periodically to guarantee timely involvement of the stakeholders and the controlling, monitoring and supervising of the implementation of the university's system for quality assurance at the different organizational levels. UU is facing the challenge to guarantee the continuous involvement of all stakeholders. On paper this is well outlined, but in practice this is not done as such yet. For instance, the involvement of alumni and the professional field does not happen in a structured and systematic manner.

HZ has a centralized quality structure, prescribed by the institutional policy plan and enabled by its small scale. Just like UU at HZ also many formal meetings, e.g. the BMO-meetings, are in place to monitor and control the implementation of quality improvement actions to guarantee the continuous quality improvement. However, at academy level additional specific quality requirements can be added.

As can be derived from the information provided in this section, involvement of stakeholders has great value for both universities. Academics, students, alumni and the professional field are involved in many ways, although at UU a structured and systematic involvement of the two last groups is still to be achieved.

Concerning the involvement of external experts, at UU this was not the case. This university considers that it has enough 'in house' expertise to address all quality issues and to manage the accreditation processes at institutional and program level. This approach also fits its conviction that quality improvements activities need to be done at the level where the work is done, thus encouraging commitment and ownership. At HZ external experts were sporadically involved, in many cases to do a small job in order to alleviate the high workload of the teaching staff during accreditation processes.

To conclude, although at the Dutch case universities an internal quality assurance system and a quality structure were in place including a wide range of quality instruments, following on the institutional quality assurance plan and also national trends, there is still room for improvement. Not all quality instruments are yet widely and systematically used and not all stakeholders are regularly involved in quality assurance activities. However, in both universities this variable can be labelled as an actual enabling factor during their accreditation processes *(enabler$_a$)*.

9.4.3 Overview of the influential independent factors

Table 9-6 summarizes the comparison between the Dutch cases with an overview of the actual influence of the 17 indicators during the progress of the accreditation processes and hence affecting their outcomes. As can be observed the scores are not much different; there are many similarities concerning the actual influence of each

indicator, illustrating the great resemblance between these universities. Clearly, a group of indicators had a positive impact on the progress and outcomes of their accreditation processes. Analysing the scores shows that since both universities need to be accredited by the NVAO a similar accreditation approach could be expected. Moreover, these universities have gradually gained more experience and expertise through their history of external quality assurance evaluation. The accumulated experiences and acquired expertise set a pattern for the decisions taken during such processes and also their quality approaches.

Of great relevancy for this study is the fact that table 9-6 presents an overview of the influence of the independent variables on the accreditation processes *at the end of the research period*. It does not provide information on the developments that took place from the start of the accreditation processes in 2003 till the end of the research in 2012. As was the case with the Dutch-Caribbean universities, recording and measuring of these developments were not part of this study.

Following the analysis of the Dutch-Caribbean universities, section 9.3.3 in particular, the score granted to the indicators of the Dutch universities in table 9-6 reflects the values portrayed in figures 9-4 to 9-8.

Table 9-6 Type of influence of the variables in the Dutch cases by the end of 2012

Variable	Indicator	UU	HZ
Organizational structure	Organizational chart	Centralized	Centralized
	Decision-making structure	Formalized	Formalized
Leadership and Management style	Role of institutional leaders	Committed, involved and supportive	Committed, involved and supportive
	Management at faculty level	Diversified	Merely Participant
Quality Culture	Care for quality	Highly existent	Highly existent
	Shared responsibility	High	High
	Commitment of internal stakeholders	High	High
	Norms, values and traditions	Low	Low
	Communication channels and interaction	Regulated	In progress to becoming more formalized
Available Resources	Human resources	Sufficient	Sufficient
	Financial resources	Sufficient	Sufficient
	Facilities	Adequate	Adequate
Internal Quality Assurance Policy	Document on Internal Quality Assurance Policy	Available	Available
	Internal Quality Assurance System	Specified and implemented	Specified and implemented
	Quality structure	In place	In place
	Involvement of stakeholders	Structured	Structured
	Use of external experts	No involvement	Sporadically

To conclude: As demonstrated in table 9-6 in the two studied Dutch universities most of the indicators had a positive impact during accreditation processes, so they became actual enablers (enabler$_a$). Many years of experience of such processes contributed to facilitate the positive impact of the identified independent variables on the dependent variables. Also in these cases the accreditation requirements contributed to transforming their internal context so the accredited status could be achieved and preserved. In these cases as well it seems like compliance with the NVAO's standards was the prime focus in order to guarantee positive accreditation outcomes, yet still some institutional transformation could be identified.

9.4.4 Interdependence among the independent variables

As was the case with the Dutch-Caribbean universities, the interdependence among the independent variables also came to surface while analysing the Dutch universities. This within-group analysis once more emphasized the strong connection between the different variables.

Two variables can be considered to be of eminent importance during the accreditation processes in the Dutch cases: 'leadership and management style' and 'quality culture'. Both variables have a strong relationship with the other variables, except the organizational structure due to its more legally regulated status.

The interdependency between 'leadership and management style' and 'quality culture' was obvious in this analysis. In accordance with the literature reviewed, the importance of those holding a leading or managing position in order to develop and cultivate a quality culture was confirmed to play a determinant role in the Dutch cases. Committed, involved and supportive institutional leaders in both universities largely contributed to the involvement and commitment of the internal stakeholders and increased care for quality. Informal consultation meetings, personal contacts and timely involvement and participation of all stakeholders facilitated the information flow and built consensus for decisions to be taken at institutional level. As was perceived, as a consequence an increased sense of sharing among the both universities' populations was developed. So, we can conclude that in both cases commitment and high involvement of those leading and steering accreditation processes had an encouraging impact on the rest of the staff, largely contributing to their level of commitment and active participation. This leadership and management attitude stimulates the gradual development of a quality culture, illustrating again the prime importance of leadership and management during accreditation processes.

Moreover, beneficial was the fact that during the years many internal stakeholders acquire experiences with these processes thus facilitating their progress, so directives from the institutional level could be more easily comprehended, accepted and addressed. The many informal meetings with their emphasis on quality improvement and sharing of knowledge, experiences and information, preceding the formal ones can be considered as main contributors of the gradual development of a quality culture.

At faculty level a more diversified picture of the involvement of deans could be detected at UU, while at HZ most of the academy directors acted merely as participant. However, the centralized guidelines and procedures in both universities contributed to paving the path that had to be followed in order to encourage the accreditation processes and attain positive accreditation results. Also in this regard, the years of experience with this type of processes can be considered as an additional facilitator to achieve and maintain the accreditation goal.

The interrelationship between the sufficiently available resources, the embedded quality culture and the well-outlined internal quality assurance policy is also worth mentioning. In both cases the quantity and quality of the available resources shaped the behaviour and performance of the internal stakeholders (quality culture) and consequently their willingness to support and facilitate the progress of accreditation processes, by this means contributing to the achieved accreditation results. In the Netherlands at national level quantitative data are available to support evidence-based decision making at the different organizational levels. In addition, within the universities the use of quality instruments, such as an internal audit, as part of their internal quality assurance system brings to surface those aspects that need further improvement and the resources needed, e.g. investment in training of human resources, in order to enhance the quality culture and by doing so work persistently on being accreditation-ready at all times. The availability of resources was thus a firm contributor to the development of a quality culture and the focus on continuous quality improvement according to the internal quality assurance policy.

9.4.5 Concluding remarks

Both UU and HZ consider quality assurance and hence accreditation as a continuous process of which no finish line will ever be reached; intermediate evaluation of the quality delivered is done by NVAO every six years. Despite the great difference in size between these two universities, many similarities could be identified during their accreditation processes, such as the great involvement of the institutional leaders, the ongoing embedment of a quality culture, the availability of sufficient and adequate resources and the increasingly continuous quality improvement approaches.

Following the explanation of the analytical approach provided in section 9.3.5, table 9-7 presents the actual influence of each indicator on the accreditation processes. An essential reminder here is that table 9-7 is not a 'one-on-one' reflection of table 9-6 since table 9-7 incorporates the actual impact of the indicators on the accreditation processes. For instance, even though there were no involvement of external experts at UU and at HZ this only took place sporadically no negative effect of this indicator could be measured. This 'lack' of external experts was neutralized by the advanced internal expertise in these universities due to their many years of experience with external evaluation processes. Another example is the neutral effect of the organizational chart. These were centralized in both universities, following regulations in the national higher education act. At the same time this act regulates the accreditation requirements as well. We could therefore conclude that organizational chart and accreditation

demands are aligned to each other and consequently neither a positive nor a negative effect of this indicator could be detected in the Dutch cases.

Table 9-7 Actual effect of the identified influential factors in the Dutch cases

Variable	Indicator	Enabler		Barrier		Neutral	
		UU	HZ	UU	HZ	UU	HZ
Organizational structure	Organizational chart					√	√
	Decision-making structure	√	√				
Leadership and Management style	Role of institutional leader	√	√				
	Management at faculty level	√					√
Quality Culture	Care for quality	√	√				
	Shared responsibility, ownership, cooperation and collaboration	√	√				
	Commitment of internal stakeholders	√	√				
	Norms, values, traditions, customs, people's behaviour					√	√
	Communication channels and interaction among internal stakeholders	√	√				
Available Resources	Human resources	√	√				
	Financial resources	√	√				
	Facilities					√	√
Internal Quality assurance policy	Document on Internal Quality Assurance Policy	√	√				
	Internal Quality Assurance System	√	√				
	Quality structure	√	√				
	Involvement of stakeholders	√	√				
	Involvement of external experts					√	√

Most noteworthy in table 9-7 is the fact that no barrier could be really identified during the accreditation processes in the Dutch cases. About 70% of the indicators can be identified as actual enablers of accreditation processes in the Dutch universities (*enabler*$_a$). The remaining indicators cannot be considered to be of significant influence during such processes. An explanation for this analytic result is that due to the many years of experience of Dutch universities with external evaluation processes they developed expertise to cope with the barriers, resulting in neutralizing most of their negative impact in a promptly manner.

9.5 Across-group analysis

In the two previous sections meaningful findings regarding the two within-group analyses were reported, shedding light on those factors that actually had an impact on the course of accreditation processes within each group and finally on the achieved outcomes. In each group the actual enabling indicators during the accreditation processes in the studied entities were identified, while the actual barriers and the neutral factors also became evident.

In this section our prime focus will be on finding the overall influential factors that have played an eminent role during the accreditation processes of both groups of

universities. This across group analysis discusses the differences and similarities based on the findings of the two previous comparative analyses. The research model illustrated in figure 5-2 will also be the basis for this analysis. The analysis will be done according to figure 9-1 indicating that only the UoC will be compared to the two Dutch cases, UU and HZ.

9.5.1 Analysis of the general patterns

Every studied university needs to comply with the NVAO's quality standards, regardless of their external or internal context. Starting in the mid-eighties the universities located in the Netherlands are mandated by law to focus on the quality of their programs. In contrast, it was at the beginning of this millennium that the Dutch-Caribbean universities started their external quality review processes. International (mainly European, in particular Dutch) trends were the pushing factor, though inspired but not endorsed by national mandates. So, in the beginning in both groups of universities the accreditation aim was not internally driven.

Only the Dutch universities were involved in the development of the NVAO standards. The Dutch-Caribbean universities needed to meet these quality standards even though they did not fit their national and internal contexts. Nevertheless, the obtained accreditation outcomes at UoC demonstrate that involvement in the developmental process does not play any determinative role during the accreditation processes. Positive accreditation outcomes seem to depend on other factors, to be explicated in the remaining parts of this section.

For all studied universities attaining and maintaining the achieved accredited status of their programs is of high importance. Due to the differences between the two groups regarding the amount of years of experience with external evaluation processes, the Dutch universities were much more advanced in their accreditation experiences. They successfully completed their first accreditation cycle, followed by a positive result of the institutional audit. In the meantime, several programs already reached the goal to maintain the achieved accredited status.

By the end of the research period, UoC had not yet started the second accreditation cycle. However, the decision was already taken that, in contrast to the Dutch universities, no institutional audit will be done. It was actually already obvious that based on its internal context, compliance with the standards related to an institutional audit in the coming years would be far beyond reach.

As was the case at the Dutch universities, also at the UoC the accreditation framework was vastly criticized. The fact that the review panels exert great influence on the accreditation result based on their particular interpretation of the quality standards has been internally discussed widely in UoC. However, no complaints concerning this matter were forwarded to the NVAO. To what extent differences in cultural characteristics, as was described in chapter 6, may be related to cause this passive behaviour was not examined.

It is interesting to notice that while comparing the successive stages of the accreditation processes as portrayed in figure 9-3, these stages are quite the same for all studied universities. Compared to table 4-4 these universities have passed through the phases as expected for every accreditation process. Literature analysis reveals that self-evaluation resulting in a self-study report, followed by a (trial) site visit resulting in a review report and subsequently by an accreditation request is the universal process toward accreditation. These steps were followed in all three universities. At the UoC however, trial site visits took place much earlier than in the Dutch cases, providing the university with feedback to improve before submitting the final self-study report. In the Dutch cases this is done after submitting their self-study report just a few weeks before the site visit. The lack of experience with this type of external evaluation processes contrasted with the more advanced stage of accreditation period in the Netherlands clarifies this difference. UoC needed more time and exercise to reach the same goal.

All compared universities had mainly positive results of their accreditation processes. In only a few cases the accredited status was not granted directly, yet these programs were granted a recovery period. At UoC three programs obtained probationary accreditation for three years and one had to implement major improvements to subsequently submit the program for re-assessment by the NVAO. So, despite the lack of experience with accreditation processes, UoC still managed to obtain a positive assessment of the quality of 83% of its programs in their first attempt. While addressing the comparison of the identified enablers in section 9.5.2 the factors contributing to this remarkable positive result will be discussed.

Compared to UU, UoC and HZ can be considered as small universities. However, comparing UoC with HZ reveals many differences. Some can be categorized as external contextual differences, while others are internal dissimilarities, to be explained in the next section. Yet, a general conclusion that can be made at this point is that since the Dutch-Caribbean island Curaçao does not couple the attainment of an accreditation mark to any legal consequences, UoC has more liberty to address the progress of its accreditation processes according to its own perspectives, while taking into due account the NVAO's standards; this is not the case for the Dutch universities.

Regardless of the positive accreditation outcomes, it can be concluded that for all the universities during the coming years several improvements still need to be implemented in order to consistently empower the process towards retaining the achieved accredited status. The comparison of the independent variables in the subsequent section will highlight some of these necessary improvements.

9.5.2 Comparing the impact of the independent variables

The purpose of this section is to finally identify the overall enabling factors affecting accreditation processes in the studied universities. In section 9.5.3 an overview of these factors is presented. We re-affirm that this comparison will only be done among UoC, UU and HZ.

Organizational structure

The formal organizational structure of UoC, UU and HZ is dictated by their legal regulations (LUoC, WHW). In these universities several features of a professional bureaucracy could be identified, as is expected of most higher education institutions. The power in the structure relies in practice on the professional skills and knowledge in the operating core; the highly qualified teaching forces have considerable control of their own work and the members of the academic staff work largely independently, while taking into consideration the characteristics of any particular program. The power of expertise emphasizing the authority of the professionals was, as in many professional bureaucracies, certainly noticeable. In many cases, conflict between the institutional leader and the operating core has led to modification of the original decision taken at central level, illustrating the forces related to the operating core.

As could be expected, since UU is such a large university, more layers are encountered in its organizational structure compared to HZ and UoC. In all cases the supportive structure is very large in order to support the highly trained professionals. Furthermore, in all universities quite the same supportive departments were in place, showing the resemblance in the course of work and the associated support.

Striking was the fact that UoC, as a small university barely reflected any resemblance of a unified institution; a more loosely coupled structure could be identified. Even though UoC could be identified as organized according to the lines of a professional bureaucracy, elements of an organized anarchy were apparent. And, while the Dutch cases were sizeably larger, still more unification and harmonization could be perceived. HZ in particular, also considered to be a small university, was to a great extent led by decision-making approaches from central down to lower organizational levels, yet with an increasingly bottom-up approach, reflecting the gradually enhanced influence of the operating core.

Besides the Supervisory Board, the universities have a one (UoC), two (HZ) or three (UU) members institutional leading team and the faculties/ academies are managed by a dean, faculty board or academy director. In UoC, UU and HZ there are centrally set rules and regulations, although the degree of autonomy granted to the line managers differs. At UU the faculties have a great deal of autonomy; at HZ a more centralized approach is implemented, although also some room is granted to the academies to add specific aspects to the centralized approaches, based on their explicit focus and requirements. At UU the centralized rules and regulations commissioned by the Executive Board had to be endorsed, and were monitored and controlled by the department O&O at central level. The centrally enacted rules and regulations, however, were general enough to permit varying implementation at lower levels. In case of UoC limited centrally driven rules and regulations were available and as a consequence the deans could to a great extent fill in their accreditation approaches according to their specific goals, perspectives and determinations. So, in practice the deans enjoyed quite some autonomy, while according to LUoC the rector should be the highest authority. Besides the lack of centralized rules and regulations, the developmental stage of this university can also clarify this decision making structure.

Historically UoC was established with only two faculties, gradually extended to five. However, there was and still is barely any central management approach, hence providing the deans with large possibilities to manage their faculties according to their own beliefs and interpretations. Following on tables 9-2 and 9-5, table 9-8 presents the degree of centralization reflected in UoC, contrasting with the Dutch cases.

Table 9-8 Across-group comparison of the organizational structure

	Centralized	Formalized
UoC	++	++
UU	+++	+++
HZ	++++	++++

Any particular impact of this variable on the accreditation processes could not be identified. Since in the cases the organizational chart was legally mandated, formally the universities cannot change it. In both universities can be labelled as an actual enabler of the accreditation processes. In UoC the decision-making structure was little formalized it no impact on the progress of its accreditation processes.

Leadership and management style

In both within-group analyses the importance of this variable was emphasized. The conclusion was that the applied leadership and management style during the accreditation processes had a determinant influence on their success rate. The institutional management structure between the two groups differs however. According to the Dutch Higher Education Act the universities are headed by an Executive Board, consisting of at least two members. In contrast, the Dutch-Caribbean university, UoC (also UA and USM) has a one-headed institutional leadership.

In all studied universities the institutional leaders had the attainment and preservation of the accredited status of the programs as a prime objective; all were committed to achieve this university's goal. However, at UU and HZ a higher level of involvement and support could be detected, while at UoC the institutional leaders operated more at a distance, granting the institutional quality manager and deans with great responsibilities.

At UU and HZ establishing institutional rules and procedures while involving all relevant stakeholders is an example of how the institutional leaders were more involved in the set up and progress of accreditation processes in contrast to UoC. At HZ for instance, the Executive Board was directly involved in the preparation of the institutional audit, being part of the steering committee. Also at UU the involvement of the institutional leader could be seen in the many regular meetings held with stakeholders so as to be promptly informed. In any case, in all three universities at institutional level a high level of commitment enabling the accreditation processes could be identified, indicating the importance of this indicator for their progress and outcomes.

Another difference between the two groups regarding this variable is the fact that in both Dutch universities a planning and control cycle was implemented in order to

continuously monitor the implementation of agreed quality improvement actions at institutional level. At UoC no such structure was in place; there existed no formal meetings where the deans report to the rector on their quality improvement activities at faculty level. LUoC, in contrast to WHW, contains no legal regulations in this matter, possibly explaining why no such meetings are implemented in UoC.

In addition, at UU and HZ many internally regulated meetings informed the Executive Board on relevant quality issues so they were notified in a timely manner. At UoC the institutional quality manager reported weekly to the institutional leaders. Furthermore, during the meetings of the Council of Deans quality issues were discussed. However, monitoring of the implementation of settled agreements barely happened. Being small did not result in more frequent interactions at the different organizational levels. Analysis shows that an explanation for this behaviour is precisely the small scale. Due to the scarce availability of human resources in order to prevent overload it was not possible to hold many (formal) meetings.

Across the three universities the involvement of the manager at faculty level in accreditation processes differs; no managerial pattern matching could be derived. Regardless of the size of the faculty management, still in all cases the level of involvement of those managers differentiated between the faculties; in some cases they acted like the steering officers, while in other cases they were merely participants.

The department O&K at UU, the department O&O at HZ and as of 2011 the DQA at UoC are entities at institutional level involved in the accreditation processes at faculty level. At UoC and HZ this department had a steering role, while at UU this was not the case; department O&K was not directing, but in charge of monitoring and controlling of related institutional directives. At HZ the role of the department O&K was of eminent importance during the successive stages of the accreditation processes in contrast to the department O&O at UU. At UoC, the former institutional quality manager, who has become the manager of DQA, was the steering officer at all times.

In contrast to the Dutch universities, in UoC the management conditions at faculty level were not in place. The tasks, responsibilities and accountabilities of the stakeholders were not clearly delineated, the available budget and human resources were insufficient and there was no policy regarding training to facilitate the functioning of these managers.

Final analysis shows that in both Dutch universities the institutional leaders were actual enablers of the accreditation processes, while at UoC they had no impact on these processes. With regards to the managers at faculty level in UoC and UU the played a determinant role positively affecting the accreditation processes, while at HZ they had no direct impact.

Quality Culture

The development of a quality culture takes some time (years). The period of experience with external evaluation processes highly differs between the two groups. So the major differences detected in the degree of embedment of a quality culture between the two

groups could be anticipated. The existence of a quality culture was by far more present in the Dutch universities than in UoC. In fact, the Dutch universities have several decades of experiences with external quality assurance systems, and consequently with time the quality awareness had gradually increased among the internal stakeholders. Step by step a quality culture has been developed. In contrast, in the Dutch-Caribbean cases these types of processes were only recently initiated. Thus, time proved to be the biggest advantage for the Dutch universities concerning the development of a quality culture.

Although the accreditation goal led to enhanced quality awareness at the different organizational levels within UoC, a continuous quality improvement approach is an endeavour still to be met in this university. During the accreditation processes a mere compliance culture emerged, which could be considered as a pre-phase toward an embedded quality culture in the coming years. Since accreditation is not a onetime exercise, the development of a quality culture is necessary to maintain the achieved accredited status.

Further analysis of this variable in the UoC case reflected that the impact of other variables, leadership and management style in particular, overruled and to a great extent even wiped out any possible negative impact of the absence of an embedded quality culture. In any case, one indicator that struck our attention in this variable is the high level of commitment of UoC stakeholders. In particular, some (managerial) staff members at institutional and faculty levels were vastly committed to reach the accreditation goal. Their influence directed the accreditation processes, hence overcoming the impediment of other hindering factors, including the lack of influence of the other indicators in this variable. Also in the Dutch cases the great impact of the indicators institutional leadership and management at faculty level could be perceived, enabling the development of a quality culture.

Regardless of the perceived quality culture according to our analysis, in the Dutch universities too there is room for improvement concerning this variable. Though at both Dutch universities commitment to deliver quality could to a great extent be measured in the different university's units, further development of an open culture, sharing and learning and also increased willingness to cooperate and collaborate across the staff members are indicators of quality culture that still need to become more evidently manifest in UU and HZ.

Comparing UoC with HZ, since both can be labelled as small universities, concerning this variable the same pattern could not be identified. The impact small scale had at HZ could not be measured at UoC, demonstrating that the development of a quality culture cannot only be encouraged by small scale. Other factors, as is brought forward in this chapter, are more influential than the scale of a university.

Based on these results we can conclude that in the Dutch universities the literature emphasizing the great importance of organizational (quality) culture to enable organizational change (accreditation) processes has been validated. However, the case

of UoC does not support those theories. Even though one indicator in this variable, the commitment of internal stakeholders, can be considered as an enabling factor.

To conclude, table 9-9 presents an overview of the several indicators related to quality culture across the comparative groups.

Table 9-9 Comparing the indicators of quality culture

	Care for quality	Shared responsibility	Commitment	Norms, values, traditions, etc.	Communication and interaction
UoC	++	+	+++	++	+
UU	++++	+++	+++	++	+++
HZ	+++	++++	+++	++	++++

Legend: ++++ = the indicator is highly present; +++ = the indicator is largely present;

++ = the indicator is progressing, but not substantial; + = the indicator is barely present.

For further study it is interesting to measure if, with time, the quality culture within UoC will become visible, including the progress of all five indicators. Also the development of a quality culture in the UA and USM cases is an interesting topic to be further examined.

Available resources

One of the main striking differences between the two groups of universities is the availability of resources. While this variable was hardly an issue in the Dutch universities, it has been a constant struggle within the Dutch-Caribbean universities, UoC in particular. The quality and quantity of the human resources, the financial funds and the facilities were not available as demanded to encourage the accreditation processes. Scarce and restricted resources, in particular financial means, have led to limited possibilities regarding e.g. the expansion of personnel, timely upgrading and expanding of infrastructural provisions. These universities were facing resource challenges while increasing demands were made for their performances, including the attainment of an accredited status.

Another contrast between the two groups of universities regarding this variable is the fact that the Dutch government granted additional resources to his national universities to enable their accreditation processes. The Dutch-Caribbean governments never did so; UoC did not receive any extra national funds for its accreditation processes. It was actually the Dutch government that in the beginning facilitated these universities with some additional funds and not the national government. Oddly enough, it was precisely the national governments that demanded accreditation.

Managers are in charge of efficient and effective internal allocation of the available resources. A comparison of the cases demonstrates that in the Dutch cases based on the institutional policy the necessary financial resources were reserved for financial implications of accreditation processes. Finance was not an issue. In contrast, at UoC restricted financial funds were consistently hindering the progress of the accreditation processes. Several improvement actions could not take place on time or even not at all

due to lack of financial resources. Furthermore, to what extent efficiency was applied in the use of the financial resources is a question still to be answered.

At all studied universities the accreditation processes resulted in increased workload. Whilst in UoC this was to a large extent experienced as a hindering factor during the accreditation processes, at the Dutch universities this was not qualified as such. Therefore, at UoC many external experts were attracted to alleviate the workload of the personnel and also to facilitate and guide the implementation of quality improvement activities since this expertise was not present. UoC paid high bills for these interventions.

In none of the cases facilities played a major role during the accreditation processes. The available facilities did not have any particular effect on the progress of the accreditation processes and thus no influence on the achieved outcomes.

To conclude, the insufficient financial and human resources at UoC obstructed the timely and effective implementation of certain quality improvement activities, causing, among other things, a delay in the progress of the accreditation processes. Thus, for UoC this variable was actually a barrier for the progress of the accreditation progress; this was not the case in the Dutch universities.

Internal quality assurance policy

An institutional quality policy document was available in all three compared universities. In UoC however, contrary to the Dutch cases, the ingredients of this document were not implemented accordingly. For instance, in UoC no organizational unit worked according to a PDCA-cycle approach. In order to get accredited, on paper the start was given to the implementation of a continuous quality improvement approach, but no consistent completion of PDCA-cycles could be perceived. The focus was on reaching the accreditation goal. In case of UU and HZ a planning and control cycle was outlined and implemented accordingly. Formal meetings between the institutional leaders and managers at faculty/academy level took place in a structured manner to monitor the implementation of the agreed quality improvement actions. In addition, the many years of experience contributed to a more advanced stage of implementing a planning and control cycles in the Dutch cases.

This difference also demonstrates the diversified approaches regarding the implementation of a quality assurance system in the universities. UoC adopted a 'unity in diversity' principle, but even so the institutional guidelines were not followed in all faculties. Each dean could deviate from these guidelines without being confronted with and reminded of the institutional ones. Deans developed their own particular quality assurance system at faculty level. At HZ this was not the case; all the academies operated in line with the institutional quality system, whilst at UU differentiation could take place at faculty level as long as the institutional guidelines were taken into due consideration. In both Dutch cases this was controlled and monitored by the institutional department in charge of quality assurance, respectively department O&K and department O&O.

Another discrepancy between the two groups of universities concerning this variable is the implemented quality structure. At UoC no quality structure was delineated on paper. However, by the end of the research period gradually some steady implementation of elements of a quality structure could be detected. In the case of the Dutch universities the quality structure was well outlined. In all three cases an institutional department in charge of quality assurance existed, yet the role, responsibilities and tasks granted to this department vary between the Dutch universities and UoC. This can be clarified by the fact that in UoC DQA was suddenly established in 2011, while in the Dutch cases these departments have a longer history. The manager of DQA was in charge of coordinating the accreditation processes, but no authorities were granted to this department to intervene in case of deviation of institutional guidelines at faculty level. At UU and HZ however, the similar kind of departments could intervene, commissioned by the institutional leaders.

In all three universities all the required stakeholders according to the NVAO framework were involved in the accreditation processes in a timely manner. However, in all these universities structural involvement of alumni and the professional field is yet to be done. At UoC most faculties tended to loosen up the involvement of stakeholders after the accredited status was granted, therefore demonstrating a failure in the continuous implementation of their internal quality assurance system. At UU and HZ this was much better regulated, even though at these universities there is also room for improvement concerning this indicator.

Since at UoC insufficient internal expertise on accreditation processes was available, excessive involvement of external experts could be measured; at UU this was not the case at all, while at HZ this happened sporadically. This vast involvement of external experts at UoC on the one hand illustrates the lack of capable human resources to do the job. Additionally, this approach had put great demands on the limited available financial resources. So, even though this approach was effective, its level of efficiency for sustainability of the achieved accredited status can be widely discussed.

We can conclude that the across-group analysis of this variable reflected major differences between UoC, UU and HZ. Apart from the availability of an institutional quality assurance policy, the remaining indicators were not in place in UoC or were in some state of development, in contrast to the Dutch universities. This also explains the previously described difference in the degree of existence of a quality culture, hence illustrating the link between these two variables.

9.5.3 Identifying overall actual enablers

The two types of comparative analyses done in this chapter shed light on the overall enablers in this study. In the previous parts of this section the matching patterns across the cases were discussed. With reference to sections 9.3.3 and 9.4.3 and the overview of actual enabling indicators in table 9-4 and table 9-7, table 9-10 is created to illustrate those indicators that in all three cases actually acted as enablers, positively encouraging the progress of their accreditation processes. Table 9-10 summarizes the overall results

of the across-group analysis, showing the role each indicator played during the studied accreditation processes. Following the operationalization of actual enablers presented in section 5.3.3, only two overall enablers could be identified: 'commitment of internal stakeholders' and 'involvement of stakeholders'. In addition, there are two indicators that in all cases did not have a negative effect even though not all elements of an enabler were present: 'organizational chart' and 'facilities'. These indicators proved not to be relevant for the progress of the accreditation processes and consequently their achieved results. So, they could be disregarded in future similar type of studies.

As was concluded in section 9.3 and reflected also in table 9-10, during the accreditation processes, in contrast to the Dutch universities, UoC had to deal with several barriers (35% of the indicators) obstructing the progress of these processes. We made plausible that these negative indicators caused significant delays in the progress of the accreditation processes. Nevertheless, at the end of the research period the accreditation goal was obtained for the large majority of UoC's programs. Further research is needed to identify how exactly the actual enablers (only 24% of its indicators) neutralized the force of the potential barriers, and whether there are other potential influential factors. In any case, this study already demonstrates that the actual enablers, i.e. management at faculty level fortified by the high commitment and involvement of internal stakeholders and the extensive involvement of external experts, were by far more dominant than the force of the encountered hindering factors. The Dutch cases actually had the advantage of many more enabling indicators, largely facilitated by the many years of experience with external evaluation processes in the Netherlands. Except for the organizational structure, the remaining variables mainly contributed positively to encouraging the accreditation processes. No actual barriers could be identified in this group of universities.

In sum, in all three cases the organizational structure proved to have barely any influence during accreditation processes directed to achieve an accredited status by the NVAO. Furthermore, all three comparative analyses in this study have demonstrated that commitment of leaders and managers is the determinant indicator, underpinning the enabling effect of the variable 'leadership and management style' during accreditation processes, eventually resulting in positive outcomes. Inspiring, enthusiastic, supportive, highly committed and involved leaders and managers are needed to facilitate the progress and outcome of the accreditation processes. In addition, 'quality culture' had a significant influence in the Dutch cases, which can be strongly linked with their many years of experience with external quality evaluation processes; at UoC no quality culture was perceived. The lack of human and financial resources hampered the progress of accreditation processes in UoC, whereas at UU and HZ they actually acted as enabling indicators. The variable 'internal quality assurance policy' had a diverse effect on the progress and outcomes of the accreditation processes; in the Dutch cases it was an enabler, while for UoC most of its indicators acted as barriers.

Table 9-10 Overview of the actual influence of the variables across the cases

Variable	Indicators	Enabler			Barrier			Neutral		
		UoC	UU	HZ	UoC	UU	HZ	UoC	UU	HZ
Organizational structure	Organizational chart							√	√	√
	Decision-making structure		√	√				√		
Leadership and Management	Role of institutional leaders		√	√				√		
	Management at faculty level	√	√							√
Quality Culture	Care for quality		√	√	√					
	Shared responsibility, ownership, cooperation and collaboration		√	√	√					
	Commitment of internal stakeholders	√	√	√						
	Norms, values, traditions, customs, people behaviour				√				√	√
	Communication channels and interaction among internal stakeholders		√	√	√					
Available Resources	Human resources		√	√	√					
	Financial resources		√	√	√					
	Facilities							√	√	√
Internal Quality assurance policy	Document on Internal Quality Assurance Policy		√	√				√		
	Internal Quality Assurance System		√	√				√		
	Quality structure		√	√				√		
	Involvement of stakeholders	√	√	√						
	Involvement of external experts	√							√	√

9.6 Manifested influential factors

During the comparisons two variables which were not included in the research model as potential influential variables became manifest. They appeared to be more important than some of the identified variables in the research model. These two additional variables also seem to have an impact, either positive or negative, on accreditation processes in the studied universities.

The internal factor that proved to be influential on the progress of accreditation processes is the learning experiences with external quality evaluation processes in UU and HZ. As has been described, the effect of several studied indicators was controlled by this variable and accordingly mainly encouraged the progress of the accreditation process. In the Dutch cases the elapsed time positively contributed to a more fluent progress of the accreditation processes. In the Dutch-Caribbean cases, UoC in particular, the short period of time of experiencing accreditation processes also affected the course of this dependent variable. Lack of experience due to the fact that

accreditation processes have been recently introduced clearly impacted the progress of these processes, mainly causing major delays.

An important question in this matter is: Is the positive result of any accreditation process encouraged by the amount of years the accreditation unit has experienced external quality evaluation processes? This study provides an affirmative answer for the Dutch cases, contrasting with the Dutch-Caribbean cases. But, does this count for other universities with a long history of accreditation as well? A worthwhile topic to be further studied.

Another additional variable that seems to have an impact on the accreditation results of UoC, UU and HZ programs is the review panel. All these universities experienced that the review panel has considerable impact not on the progress of the accreditation process, but on its outcome. Analysis of the experiences of these universities with review panels demonstrated that the course of a site visit is highly dependent on the members of the review panel. If they match with the representatives of the program under study and a friendly atmosphere is created during the site visit, then an enhanced chance exists to achieve a positive accreditation result. Otherwise, the chance is by far bigger that the program will be measured as not meeting the quality standards. The fact that a local work field expert was added to the review panels of UoC's site visits was indeed to guarantee that the particular national and internal contexts receive due consideration, since these contexts largely differ from those of higher education institutions in the Netherlands.

In chapter 4 the role of the review panel has been explained (Douma, 2009; Van Kemenade, 2009; Martin and Stella, 2007). Review panels, mostly consisting of peers, verify if the program being evaluated indeed meets the pre-set standards and criteria, based on the accreditation framework. During this study the consequences of any particular review panel for the accreditation outcome was not measured. It is thereby not possible to formulate concluding analytic statements on this issue. According to literature and also in our point of view, however, evaluating the quality of a program cannot be done without subjective judgment. So, it can be expected that the review panel plays an important role during site visits. More in-depth investigation on the interpretation of stakeholders of a particular program concerning the role of the review panel and its influence on the accreditation results is one more recommendable topic to be further investigated.

9.7 Final overview interdependence among the variables

In figure 9-9 by means of a causal map a schematic overview of the variables is presented that have an impact on accreditation processes and finally influence the accreditation outcomes. This overview also illustrates the interdependence among the identified influential factors. External international contexts affect national higher education policy, which in many cases can be considered as the prime source for mandating accreditation of higher education institutions and/or their programs. The five identified independent variables relate to each other, yet not all have the same

kind of impact on accreditation processes. In the end, the accreditation outcomes can entail granting or rejecting the accredited status or providing a probationary period with a second chance to reach accreditation. Since the impact of the available resources and the internal quality assurance policy is less prominent during accreditation processes their effect is presented in figure 9-9 with a dotted line. The influence of quality culture was more perceptible, yet not direct, so the line is dash dotted. Leadership and management style has a direct influence on the progress and consequently on the outcomes of the accreditation processes, therefore illustrated by a straight line.

Figure 9-9 Schematic overview of causal relationships affecting accreditation processes and outcomes

9.8 Conclusion

In this chapter the impact of the independent variables on the dependent variables has been examined. A detailed comparative analysis of the variables within and across the two groups of universities was described. Sections 9.3, 9.4 and 9.5 consecutively addressed these analyses, elaborating on each indicator.

Based on the research model and the patterns exposed by the comparative analyses the actual influence of each indicator on accreditation processes was assessed. The mechanisms underlying the functioning of the indicators were unravelled and finally the actual enabling factors during accreditation processes were identified.

We assumed that each identified independent variable would have significant influence on the progress and outcomes of the studied accreditation processes. Knowing and understanding these variables will provide valuable insights to identify

the actual enabling factors during these processes and improve their progress and final results. The research findings however, contradict this preliminary, simple assumption of indispensability of each independent variable. The comparative analyses uncovered the impact of each variable on the progress and outcomes of accreditation processes. Finally we could conclude that a compensatory relationship among the independent variables is more realistic than an additive one. Actually, the great interrelatedness among the independent variables was verified. When discussing the five cases, it certainly became clear that a strict distinction between the variables was not realistic. In practice, the five variables are highly connected to each other. This analytic result was one of the major challenges in the beginning of the research period and finally proved to be true. None of the independent variables can really operate independently.

The variable 'Leadership and Management style' appeared to be of eminent importance during accreditation processes. The driving force of institutional leaders and managers at faculty level while acting as steering officers, will enable the development of a quality culture, manage in an effective and efficient way the available resources and also implement successfully the internal quality assurance policy so as to meet the accreditation directives, and ultimately successfully achieve and maintain the accredited status. Furthermore, it was interesting to notice that during the course of the studied accreditation processes the organizational structure had barely any influence. Apart from the identified potential influential variables, according to the comparative analyses, one additional variable seems to be influential during accreditation processes and another variable on the accreditation outcomes. The amount of years any particular university has experienced external evaluation contributes to create quality awareness and with time develops a quality culture. The existence of a quality culture has demonstrated to be effective on accreditation processes. In addition, the review panel and its relationship to the program being assessed seems to affect the accreditation result. Positive interrelationship between these two parties seems to enhance the possibilities to achieve an accredited status. However, in-depth studies are needed to verify if indeed these two additional variables have the impact that this study suggests.

Reflecting on, first our theoretical framework exposed in chapters 2, 3 and 4, secondly the research model described in chapter 5, thirdly its application on the case descriptions in chapter 6, 7 and 8 and finally the three comparative analyses in this chapter, we conclude that a complicated and complex picture emerges to illustrate how accreditation processes are affected, eventually leading to certain outcomes. To reach the highly coveted aim to attain and retain an accredited status implies going through successive stages of quality improvement, which in their turn are greatly dependent on the impact of several variables and the interrelatedness between them, the leadership and management style in particular.

Finally, can we conclude that for universities located in the global south of this world, it could be more difficult to tie down global mandates to local possibilities, resulting in diverse impact of factors enabling accreditation processes? An answer to this question and the other research questions will be provided in the final concluding chapter.

10 Reflection and Conclusions

Now that the accreditation processes in the five studied universities have been unravelled and the actual internal influential factors affecting their progress and outcomes substantiated, we consolidate the findings from this study. The main objective of this study is to identify the internal influential factors and the extent of their effect during accreditation processes in three small Dutch-Caribbean universities, namely the University of Curaçao (UoC), University of Aruba (UA) and University of St. Martin (USM), with the focus on UoC. Two Dutch universities, Utrecht University (UU) and HZ University for Applied Sciences (HZ) are used as contrasting cases. In this chapter, accordingly, the focus is on answering the research questions formulated at the outset of this study. In order to do so we combine information gathered from the exploratory research phase, the literature review, the five case descriptions and the comparative analyses. By answering the research questions we achieve our research objectives and develop a final framework of internal organizational factors that most likely might have an impact on accreditation processes of small universities in particular.

This chapter starts with a short synopsis of the research objective, the research goals, and the research method in order to provide a concise overview of the research setting. Next, the focus is on answering the research questions that, together with the first section, also serve as a summary of the content of this dissertation. Subsequently the final framework containing the internal influential factors during accreditation processes are developed. Then, some final conclusions are formulated. This chapter ends with some recommendations for future research.

10.1 The research setting

The research objective of this study, postulated in chapter 1 and summarized in table 10-1, is divided into two sets of goals: scientific-theoretical goals and practical-oriented goals. One main research goal is to expand the current body of knowledge on accreditation processes in general and in particular in small universities in less developed global areas. From a practical perspective, the obtained knowledge, understanding and insights will contribute to the improvement of the future organization of accreditation processes in Dutch-Caribbean universities and those universities similar to them. This could make accreditation more attainable.

Table 10-1 Overview of research objective and goals

Research Objective	Goals	
Identify internal influential factors during accreditation processes, those of Dutch-Caribbean national universities in particular. Based on the generated overview of these factors and the obtained in-depth insights more informed decisions can be taken and by doing so enhance the chance for higher education institutions to attain and retain the accreditation goal.	**Scientific-theoretical goals**	Expand the current body of knowledge on accreditation processes in general.
		Acquire a more comprehensive understanding of the variables (positive and negative) that influence the progress stages and finally the outcome of accreditation processes.
	Practical-oriented goals	Based on the obtained comprehensive understanding of accreditation processes in general, acquire a better understanding of these processes in UoC, UA and USM so as to provide systematic insight in the way these universities have organized and are still organizing these processes while they aim to attain and retain the accredited status for their programs.
		Improve the future organization of accreditation processes, in particular those of small universities located in less developed global areas, and hence make accreditation more attainable.

In order to achieve the research objective the following main research question was formulated in chapter 1:

> **What are the internal influential factors that impact accreditation processes in nationally funded universities in the Dutch Caribbean and how do they affect the final result of such processes?**

In order to answer this research question, we investigated the accreditation processes implemented during the period 2002–2012 in five universities, consisting of two groups: one group of three universities located in the Dutch Caribbean (group A), which were the target universities, UoC in particular and one group of two universities located in the Netherlands (group B) to contrast with the first group. However, at the end of the research period in December 2012 only three of these five universities completed their first accreditation cycle: one university in group A (UoC, 23 programs accredited) and both universities in group B (UU, HZ (both had all of their programs accredited). The other two group A universities (UA, USM) were still heading towards the accreditation goal. Consequently, the multiple case study analysis described in chapter 5 could not be completely done as intended. The within-group analysis with the Dutch-Caribbean universities (section 9.3) was mostly limited to comparing and contrasting UoC and UA. With regards to the across-group analysis we could not use

USM at all and only to a very limited extent we could include UA in this analysis (section 9.5). Accordingly, we did not succeed in our aim to identify influential factors during accreditation processes in each of the Dutch-Caribbean universities, as will be further explained in section 10.3.

At an early stage of this study we decided to contrast the three Dutch-Caribbean universities with two universities located in the Netherlands. As explained in chapter 5, several reasons led to this multiple case study approach across two groups of universities. For instance, we expected that using Dutch cases could contribute to enlightening the steps to be taken in the Dutch-Caribbean cases, since the cases in the Netherlands had longer experience with external quality assurance processes, in contrast to those in the Dutch Caribbean, while all five universities had to comply with the same accreditation standards of the NVAO. We were hoping to find out possible 'tricks and tips' used by the larger, resource-rich Dutch universities that could also be applied to the smaller Dutch-Caribbean ones in order to improve their chances to attain and maintain an accredited status. Analysing the Dutch cases would also provide input to detect the factors that hamper the progress of the Dutch-Caribbean cases. We also wanted to detect to what extent smaller universities differ from larger ones, and if there are differences in approach which can be explained because of the size dissimilarity. Does size matter while addressing the accreditation goal, was a side line question that we wanted to answer.

As detailed in chapter 5, this study originated as a *holistic* (one unit of analysis: accreditation processes analysed at institutional level), *multiple case* (five cases) *replication* (replication within two groups of cases) design. The research strategy to conduct this study was a *comparative, multiple case study analysis* since it best fits with the research objective. Using case studies as the research methodology allowed a thorough study of a particular phenomenon (accreditation processes) in a well-defined context (universities) in real life situation (national context). In essence, the use of case studies contributed to obtaining a complete picture of the phenomenon under study.

This study consists of an *exploratory phase* (pilot case study and ten exploratory interviews), an *explanatory part* (five case studies) and two kinds of *comparative analysis* (within-group and across-group). Data were triangulated from multiple sources to improve the validity of the results. In order to triangulate the information gathered three sources of data collection were used: *observation* (participatory and direct observation in two universities), *document analysis* (analysis of a wide variety of institutional and departmental documents) and *interviews* (35 semi-structured in-depth interviews with staff members at different organizational levels). Due to the complexity of the topic under study, the use of two types of comparative analysis was appropriate to reach the research objective. Based on the collected data the accreditation processes of most of the sample universities could be studied in detail.

To guide the empirical study a research model was conceptualized (figure 5-2), consisting of the national context as the input factor serving only for contextual background information, *five independent variables* that may affect the progress and finally the outcomes of accreditation processes, which are the *two dependent variables*.

We did not investigate the influence of the input factor on the five independent variables. The research model was a useful template for the case descriptions to describe the accreditation processes in the five cases and to do the within-group and across-group analyses. It is worth noting that even though we were aware of the impact of the international context on the functioning of universities as part of a globalized world, we did not include the impact of globalization, internationalization and nationalization in this study. We only focused on internal organizational factors influencing accreditation processes. By doing this we were able to thoroughly examine the identified internal influential factors. Some information on the national context of each university was presented in chapter 6 to highlight its direct contextual background and enhance the understanding of the choices made, before describing the five cases in chapters 7 and 8.

Table 10-2 presents four strategies used to guarantee the quality of the empirical study. Different tactics were applied throughout different phases of the study to establish its construct validity, internal validity, external validity and reliability.

Table 10-2 Strategies to guarantee the quality of the study

Strategy	Tactics	Phase of research in which tactic was applied
Construct validity	• Multiple sources of evidence: observation, document analysis, interviews • Triangulation of data • At least one key informant reviewed each case descriptions	Data collection Data analysis Case studies
Internal validity	• Conceptualizing research model to guide the empirical study • Use of several indicators of each variable • Analysis of causal relationship between variables • Research findings compared to literature	Research design Data collection and analysis Comparative analysis Comparative analysis
External validity	• Literal replication method to select multiple cases • Constructing a framework with possible enabling factors	Research design Conclusion
Reliability	• Interview protocol • Recording interviews • Extensive description of each interview	Data collection Data collection Data collection

10.2 Answering the sub-questions

The focus of this section is on providing an answer to the four sub-questions formulated in chapter 1. This is done in a sequential approach, gradually working towards the answering of the main research question. Each chapter provided (partly) an answer to at least one of the sub-questions, which contributed to the investigation of the main research question.

10.2.1 General needs and requirements for accreditation

The first sub-question focuses on what the existing empirical studies show about general needs and requirements for accreditation. Previously, after providing information on some relevant organizational theories (chapter 2) and organizational change processes in higher education institutions (chapter 3) the focus was on accreditation processes (chapter 4). Accreditation processes are generally considered as the driving force behind a wide variety of change processes in higher education

institutions aiming to attain and maintain the accredited status. The generated theoretical information provided profound knowledge and insights needed to understand the general needs and requirements related to the worldwide phenomenon of accreditation in higher education.

Quality assurance in higher education is by no means only a Dutch or a Dutch-Caribbean concern. All over the world there is an increasing interest in quality standards, impacting the national policy on higher education, the emerged transnational opportunities in higher education, the rapid growth of higher education and its cost to the public and the private purse. Accordingly, any country that wants to be part of this globalized competitive world, currently grounded in principles of a knowledge based-economy, has to prove that it takes the quality of programs offered at higher education level seriously and is willing to take measures for assuring and validating that quality. Literature analyses reveal that several measures are needed in order to create a constructive and valuable assessment process to prove the quality level of higher education programs. Accreditation is one such measure used to ensure that the achieved quality level indeed meets the internationally set quality standards.

Literature on accreditation processes and the results of the exploratory research phase led to the definition of ten general needs and requirements that are part of most accreditation models. However, the context in which the model is implemented determines its specific characteristics. To start with, accreditation processes generally consist of some main steps (1), as portrayed in figure 10-1. The self-evaluation process results in a self-study report which is th**e** main information source for the external peer review, generally consisting of documents analysis and a site visit (yellow block reflected in figure 5-2). Finally, the peer review report will be submitted to the accreditation organization, which will take the ultimate decision regarding granting of the accredited status for a defined period (green block reflected in figure 5-2). As indicated in the literature, accreditation is indeed an organizational transformation process with input factors, throughput activities and output results.
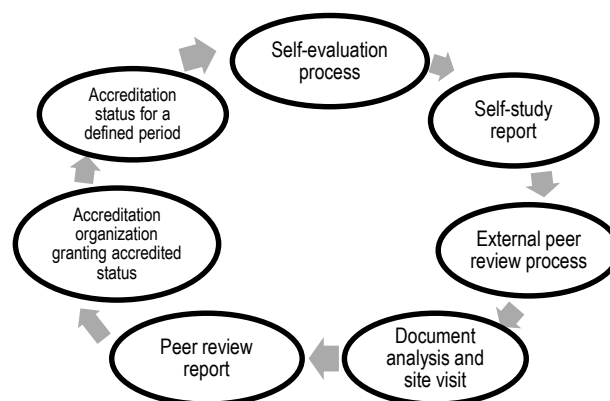
Figure 10-1 Cyclic scheme of accreditation processes

Figure 10-1 illustrates that accreditation is a continuous cycle (2), which when looked at in detail encompasses several more general requirements of accreditation. The accreditation process consists of an internal and an external part (3). The internal part typically entails one or more organizational change processes, consisting of different phases (diagnose, initiate, implement, institutionalize, figure 2-1). These change processes are directed to quality assurance and quality improvement, which are included in the internal quality assurance process in order to meet the accreditation requirements. This internal quality assurance process is also related to a cyclic approach of planning, implementing, evaluating and modification (PDCA-cycle, figure 4-1) (4). During this process change driving and restraining forces emerge facilitating or hindering its progress and finally its results. The external part of the accreditation cycle is in the hands of external peers and the accreditation organization. The accreditation outcomes are greatly affected by the internal quality improvement process which is part of the self-evaluation process and is to be included in the self-study report (figure 4-2). This link between internal and external quality assurance is generally considered as another requirement to obtain the accredited status (5). In addition, in most cases the self-study report needs to be drafted according to the accreditation framework of the accreditation organization involved(6). This framework contains the quality standards the institution and/or program to be assessed needs to comply with (7). Another general requirement is that the results can either be positive, negative or probationary (figure 4-3) (8). The attained accredited status is coupled to a particular life span (9), which depends on the rules and regulations of any particular accreditation organization (10). Therefore, to obtain and maintain an accredited status the object to be assessed needs to pass through the accreditation process depicted in figure 10-1, and its underlying assumptions described above.

10.2.2 Potential influential factors

The second sub-question aims to identify potential influential factors that might have an impact on accreditation processes and consequently on the achieved results. In order to complete the accreditation process successfully, it seems to be very important to strengthen the potential enabling factors *(enablers_p)* while neutralizing the influence of potential barriers *(barriers_p)*.

Reflecting on the theoretical framework explicated in chapters 2 to 4 a research model was conceptualized to guide the empirical study (figure 5-2). The research model reflects five internal organizational variables (independent variables), identified as potentially having an impact (positive or negative) on the progress and outcomes of accreditation processes (dependent variables). In section 5.3.3 each variable is operationalized by several indicators in order to measure its impact on the progress and eventually on the achieved results of accreditation processes in all five case studies. On the basis of high or positive values of most of the indicators of an independent variable we expect a variable to have a positive influence on the progress and outcomes of accreditation processes. Studying these variables contributed to

acquiring more knowledge and comprehensive understanding of their influence on the progress stages and finally the outcomes of accreditation processes.

According to the research model *the organizational structure* is the first independent variable potentially encouraging or hindering the progress and outcomes of accreditation processes. The organizational chart and the decision-making structure act as indicators for this variable. The Higher Education Act of the country where the higher education institution is located contains the national legal rules and regulations on higher education, which usually dictate the main elements of the organizational chart of local higher education institutions. The roles, responsibilities and authorities are reflected in the organizational chart, which also explains how people and processes are controlled, coordinated and managed. As indicated by many authors, higher education institutions are often structured according to the operating lines of professional bureaucracies. The organizational structure and the decision-making structure rely on the professional knowledge, skills and expertise of the operating core, i.e. the academic staff. However, the operationalization of this structure in daily working practice can differ depending, among others things, on the leadership and management style at the different organizational levels within the higher education institution, the second independent variable.

An extensive body of theories exists on *leadership and management style*, of which many indicate leadership as a vertical line of a leader with followers. The leader is at the top of the organization, has the ultimate responsibility for achieving the organizational goals, sets the strategic direction, and creates the vision in order to do so. The daily operations are in the hands of the followers. With the emergence of the increased importance of team-work approach in the 20th century this leader-centric approach was contrasted with new management theories such as distributed (shared) leadership and new managerialism. Collegial decision-making processes as part of team work efforts increasingly direct organizational change processes, including accreditation processes. A great impact of this shared leadership approach is the emergence of new managerialism in higher education. Accountability responsibilities, cost-effectiveness, efficiency, 'value for money', and improved quality control mechanisms became part of the governmental directives to higher education institutions, influencing leadership and management at all organizational levels. In line with these developments two indicators were identified as measuring this variable: role of institutional leaders and management at faculty level. Leaders at the institutional level seem to have a determinant role in encouraging accreditation processes. Even when they are not involved in the day-by-day operations, their commitment, high involvement and inspiring attitude combined with collegial decision-making approaches contribute to encourage the organizational change processes needed during the accreditation process. Managers at faculty level are mostly expected to act as steering officers during accreditation processes, potentially enabling their progress and outcomes. According to the literature review, the applied leadership and management style is influenced by the existing organizational culture, the third independent variable.

The *organizational culture* encompasses shared values, assumptions, beliefs, ideologies and working patterns created by the history and experiences of the people within an organization. Cultural conflict across and within subunits of organizations can have a hindering effect on organizational change processes. It is important for leaders and managers to acknowledge the coexistence of different subcultures and understand the cultural characteristics within an organization. Differences exist between organizational cultures within organizations. The organizational transformation process is influenced by the existing organizational culture(s). Literature analyses reveal that culturally sensitive (management) strategies may enhance the progress of organizational change processes. Several authors emphasize the connection between the contingency theory and change management theory, indicating that the leadership and management style used to transform an organization needs to take into account cultural aspects emerged from within the organization. In addition, the achieved results provide feedback to all involved stakeholders and as such may have an impact on the organizational culture(s) as well. In this study the emphasis was not on organizational culture in general, but on *quality culture* in particular, which may have a positive or negative impact on the progress and outcomes of accreditation processes. Quality culture refers to how people think and act concerning quality assurance and quality improvement processes within organizations; the traditions, customs and people's behaviour related to quality delivery. Also within higher education institutions several quality cultures may coexist, all potentially affecting the progress and outcomes of accreditation processes. Indicators of quality culture are care for quality, shared responsibility, ownership, cooperation and collaboration among stakeholders, commitment of internal stakeholders, norms, values, traditions, customs, people's behaviour and professional orientation, communication channels, and interaction among stakeholders. These forces together can contribute or hamper the progress and outcomes of accreditation processes. How quality issues are managed and addressed is relevant for developing a quality culture instead of a compliance culture just to meet the accreditation requirements. A tight bond therefore exists between leadership, management and quality culture, which can be facilitated by the available resources, our fourth independent variable.

In this study the variable *the available resources* is measured by three indicators: human, financial and facility resources. We differentiated between resource-rich (Dutch cases) and resource-poor universities (Dutch-Caribbean cases). Insufficient resources according to the accreditation requirements can obstruct the implementation of certain quality improvement activities and therefore might hamper the progress and outcomes of accreditation processes. For instance, insufficiency of financial resources limits the possibilities to invest in the quantity and quality of the human resources and the adequacy of the facilities, such as library services and ICT facilities. These shortcomings may have a negative impact on the progress and outcomes of accreditation processes. Leaders and managers at all organizational levels are considered responsible for effective utilization of the available resources, and at the same time encouraging the quality culture so that the involved stakeholders can perform at the required quality level. One mechanism used to enable this effective

management approach is the internal quality assurance policy, our last independent variable.

The *internal quality assurance policy* is determined by the strategies, goals, objectives, principles and operational guidelines for obtaining the expected quality level for the products and services of higher education institutions. In this study this variable is measured by five indicators: the internal quality assurance policy document, the internal quality assurance system, the quality structure, the involvement of stakeholders and the involvement of external experts. The internal quality assurance policy serves two purposes: accountability to internal and external stakeholders and improvement of the quality of the delivered products and services. In the quality policy document the policies, rules, regulations, procedures, and guidelines to reach both objectives are described. The organizational structure is considered as an important factor to take into account while addressing quality issues since for instance the organizational chart includes the division of roles, responsibilities and authorities. Furthermore, in the internal quality policy plan the leadership and management approaches needed to reach the quality goals is delineated, mechanisms and instruments to encourage the development of a quality culture are prescribed, and managerial and operational guidelines for dealing with the available resources are laid out. The internal quality assurance system prescribes the quality assurance and quality improvement tools and mechanisms to be implemented, takes the set leadership and management lines into consideration and encourages the development of a quality culture, while keeping the focus on the achievement of the accreditation status. By doing so, the internal quality improvement activities are related to the quality standards of the external review agency. It is in this context that the link between internal and external quality assurance is vastly emphasized. In addition, delineation of the quality structure shows the roles, responsibilities and authorities regarding quality assurance and quality improvement processes, relevant for heading towards the accreditation goal. Several stakeholders are involved during these processes, mostly supported by external experts, especially when there is a lack of 'in-house' experience and expertise regarding external evaluation processes in the higher education institution. The strong interconnectedness among the five independent variables is hereby illustrated.

Answering the first two sub-questions concludes the theoretical part of this study. The following two sub-questions reflect conclusions drawn from the empirical study, using the conceptualized research model. The acquired theoretical information contributed in many ways to the design, execution, analysis and interpretation of the empirical study. Understanding organizational change theories and organizational change processes provided the necessary background information together with knowledge and insights in the steps to be undertaken during organizational change processes, particularly accreditation processes. It became clear that these processes, as is also the case in many organizational change processes, could be affected by internal and external factors. However, in this study we only address the impact of internal organizational factors.

One conclusion that can be drawn from the acquired theoretical knowledge and insights is that effective organizations are supposed to be organized in such a way that the force of the enabling factors facilitating the successful progress of organizational change processes should be stronger than the hindering factors of such processes. As stated by contingency theorists the enablers and barriers are interconnected, so while changing one of them the others are also pushed or pulled in a certain direction, thus affecting the progress and finally the outcomes of the change processes. This is also the case with accreditation processes during which the possibilities provided by the organizational structure, the applied leadership and management style, the existing quality culture, the quantity and quality of the available resources and the main elements of the internal quality assurance policy ought to be taken into consideration. It is with this theoretical framework in mind that we developed the research model, which acted as the basic instrument for the empirical part of this study.

10.2.3 The organization of the accreditation processes in the universities

The third sub-question focuses on providing a description of how the three target Dutch-Caribbean universities (UoC, UA, USM) have organized their accreditation processes and contrasting them with two Dutch universities (UU, HZ). The case descriptions were presented according to 17 indicators (chapters 7 and 8), preceded by relevant contextual information of each university (chapter 6). We investigated to what extent the five identified internal organizational factors turned out to be an enabler or barrier during the embarked accreditation processes. Turning potential stumbling blocks into stepping stones during accreditation processes is a challenge to be addressed by each university. In case of the Dutch-Caribbean universities the troubles to overcome were more complicated due to the universities' vulnerable and highly dependent position. As a result, compliance with internationally set standards and criteria on quality assurance and improvement in order to attain and maintain the accreditation status is a challenge as will be elaborated on below.

As described in chapter 6, the higher education context of the two groups of universities was different, which could also explain some differences in how they organize their accreditation processes. However, as mentioned earlier an analysis of this type of influence was not part of the independent variables thought to affect the accreditation processes directly. Nevertheless, describing some basic elements of the national context of each studied university provided the necessary background information to better comprehend the choices which affected the progress and outcomes of the accreditation processes. For instance, the link between obtaining an accredited status for the programs of Dutch-Caribbean universities and the national effort to counteract the complicated brain drain phenomenon is not as relevant for the Dutch universities. In the Netherlands however, graduates of the northern, eastern and southern provinces often move to the big cities in the west of the country, illustrating a kind of brain drain at national level, but not of the magnitude as in the Dutch Caribbean nor with the consequences attached to it. In addition, from a governmental perspective, all three Dutch-Caribbean universities are considered as a key instrument

for national capacity building, aiming to deliver highly qualified graduates who will contribute to achieve the national goals. The start-up of accreditation processes is therefore seen as an essential vehicle to endorse mechanisms for quality assurance at tertiary education level and to fight the brain drain phenomenon. Obtaining the accredited status will in the long run support the national objectives, which will strengthen the university's national and international competitive position as well.

The quality of the programs offered by the five studied universities ought to be assessed by the NVAO, operating as the accrediting body in the Kingdom of the Netherlands. Therefore all five universities have to comply with the same accreditation requirements and quality standards required by the NVAO. This study indeed shows that the accreditation processes in these universities were organized along the same lines, even though some differences could be detected in particular aspects. In all cases the main steps completed during their accreditation processes were according to figure 10-1: a cycle starting with self-evaluation followed by external peer review and finally (hopefully) leading to the attainment of the accredited status. One additional component encountered in all five universities but not included in the NVAO requirements was the trial site visit. In the Dutch-Caribbean cases the trial site visits took/are planned to take place about six months before the site visit, while in both Dutch cases the trial site visits took place just two or three weeks before the site visit (see figure 9-3). Analysis of the universities' documents and the conducted interviews reveal one explanation for this difference in approach: the longer period of experience with external quality review in the Dutch history, which provided the Dutch universities with more knowledge, expertise and experience with these processes, so a trial site visit fulfilled a different function there: it was a 'dress rehearsal' in a play already known and with sufficient certainty about having fulfilled all standards. For the Dutch-Caribbean universities the trial site visits serve(d) as a moment of intermediate evaluation during the accreditation processes, providing them with feedback about the open question of whether they had achieved the standards. The results were used to start the ensuing quick improvement period, before submitting their final self-study report to the review panel. Based on the time used to complete the accreditation processes in the Dutch-Caribbean universities, we can conclude that UoC and UA needed more time than the Dutch universities to pass through the same steps. With regards to USM no conclusion could be drawn yet, because it was just starting its first accreditation processes. However, since its contingency factors show great resemblance with those of UoC and UA the same assumption can be made with regards to the future organization of USM's accreditation processes.

As explained in section 9.5, reflecting on the theoretical framework also provides an explanation for the slight differences in approach during the accreditation processes of the universities in the study. Contingency theorists explain that there is no best way to organize an organization since this is dependent on the organizational context. This theoretical perspective illustrates that even though there are some main organizational elements applicable to all organizations, it is these elements that create the differences between them. For instance, each organization has particular years of existence (age),

its actual size, three kinds of resources (personnel, finance, facilities), its legal structure and the existing organizational culture(s). These elements differ however among organizations. The organizational (change) processes are influenced by these differences. Applying the contingency theory to the five universities we could ascertain that indeed there exist many differences between them regarding their contingency factors, which might also explain the slight but important differences in the organization of their accreditation processes. Even though the organization of these processes was quite similar, the factors steering the accreditation processes in a certain direction were not the same in all cases. Moreover, the different contingency factors between the two groups of universities also influenced the progress of their accreditation processes. For instance, some internal influential factors, such as the legal embodiment of the organizational structure, the existing quality culture and the greater availability of resources, supported by the longer period of experience with these type of processes by the leaders and managers contributed to a smoother progress of the accreditation processes in the Dutch universities than those in the Dutch-Caribbean universities.

The Dutch universities possess more elements of learning organizations then the Dutch Caribbean universities. All five universities experience great external pressure to change in order to survive and prosper in this rapidly changing globalized world. They are expected to be agile and flexible, constantly adapting to the changes in their external environment, which also affects their internal organizational characteristics. The fact that the Dutch-Caribbean universities need a longer period in order to meet the accreditation requirements shows that their lack of experience with such processes indeed affected the progress of these processes. It is to be seen during the second accreditation cycle whether they have become learning organizations and whether learning from past experiences allowed them to go through accreditation processes at a much faster pace. However, contingency factors such as size and location are still expected to play an influential role during the accreditation processes of these universities. The bond between open-system theory, the contingency theory and the theory on learning organizations postulated in chapters 2 and 3, is hence confirmed by the analysis of the organization of the accreditation processes in the studied universities.

Looking back at the case descriptions some more differences in the way accreditation processes were organized in the selected cases were discovered. For instance, there is no Higher Education Act in the Dutch-Caribbean countries. Therefore accreditation requirements are not legally controlled and there are no legal consequences for achieving or not achieving accredited status. Managers at faculty levels could frequently postpone the site visits. Lack of experience with accreditation processes also contributed to the constant postponement of the site visits in UoC and UA. As developing countries, Curacao and Aruba have limited financial and human resources and have to depend on external experts to be involved in the accreditation process. Unlike in the Dutch cases, institutional leaders at the UoC generally have short term office. Consequently, the deans in fact enjoyed extensive freedom to organize their

accreditation processes according to their best beliefs and capabilities. It was the institutional quality manager in both universities who at the central organizational level direct(ed) the accreditation processes while the involvement of the institutional leaders was barely noticeable.

Another difference noted at UoC was the lack of a clear set of institutional guidelines for the accreditation processes. Besides the institutional quality policy and the overall steps needed to be taken, there were barely any other specific guidelines available concerning the approach to accreditation processes, as long as the NVAO standards could be maintained. At UU and HZ several direct guidelines were given in this matter.

For all cases accreditation is considered as an external quality assurance instrument to prove that the internationally set quality standards for higher education have been reached. As stated above, the same steps were followed during the accreditation process in order to meet the NVAO standards. In addition, attaining the accredited status is also used as a proof for accountability for the financial investors, i.e. the national government ('value for money' quality approach). Going through accreditation processes required transformation. The programs needed to be transformed (changed) in such a way that the necessary improvements to meet the quality standards could be carried out ('transformation' quality approach). A continuous process of quality improvement embedded in the PDCA-cycle was noticeably applied in the Dutch cases. However, in the Dutch-Caribbean universities mostly a compliance culture could be detected instead of perceiving continuous quality improvement regardless of oncoming NVAO site visits. At UoC in particular the focus was on reaching accreditation rather than on embedding a structural system of internal quality assurance. In fact, after accreditation was granted the involved internal stakeholders tended to sit back until the next accreditation cycle. Meeting the NVAO standards at the moment of the site visit seemed to be the guiding thread and not the university's aim to consciously and consistently implement strategies to continuously improve the quality of the programs delivered. In UU and HZ the accountability and responsibility towards the Dutch government were strong due to the existing Higher Education Act. Through the years gradually a quality culture was developed contributing to a more structured continuous quality improvement approach. It is expected that in a couple of years the same development will take place in the Dutch-Caribbean cases if they indeed become learning organizations.

In conclusion we can state that all five universities went through the same steps to reach accreditation. However, some differences could be detected in the organization of their accreditation processes. These differences were primarily caused by the long history of external quality assurance processes, coupled with generated experience in the Dutch universities. Despite these differences the accredited status was achieved by practically all programs at UoC, UU and HZ. The analysis of the cases reveals that the progress and outcomes of the accreditation processes in each university was in one way or another affected by the five independent variables, although differences, such as the impact of the quality culture, have been disclosed. We can conclude that the

influences differed within the two groups of universities and across these groups, even though the steps undertaken were mainly the same.

10.2.4 Actual influential factors affecting the accreditation efforts

The last sub-question focuses on the identification of the actual internal influential factors during the accreditation processes in the studied universities and their impact on the achieved results. Furthermore, the lessons that can be learned for the benefit of the three target universities with regards to their future attempts to attain and maintain accreditation will also be compiled. Answering this sub-question brings us back to the main research question, to be addressed in the next section.

With reference to tables 9-4, 9-7 and 9-10, table 10-3 summarizes the actual influential factors during accreditation processes in UoC, UU and HZ, since the across-group analysis took place with these three universities. Although UA was well advanced in its accreditation processes, it is not included because its first accreditation cycle was not yet completed by the end of the research period. Therefore, we were not able to verify which indicator really contributed to the progress and outcomes of the accreditation processes in this university, which is essential in order to answer this sub-question. With regards to USM insufficient information could be generated on the impact of the several indicators on the progress of accreditation processes due to the very early stage of their first accreditation attempt. So, crisscrossing this limited data with the other variables was an impossible endeavour.

Table 10-3 Actual influential factors in UoC, UU and HZ

Variable	Indicators	UoC	UU	HZ
Organizational structure	Organizational chart	0	0	0
	Decision-making structure	0	+	+
Leadership and Management style	Role of institutional leaders	0	+	+
	Management at faculty level	+	+	0
Quality Culture	Care for quality	-	+	+
	Shared responsibility, ownership, cooperation and collaboration	-	+	+
	Commitment of internal stakeholders	+	+	+
	Norms, values, traditions, customs, people behaviour	-	0	0
	Communication channels and interaction among internal stakeholders	-	+	+
Available Resources	Human resources	-	+	+
	Financial resources	-	+	+
	Facilities	0	0	0
Internal Quality assurance policy	Document Internal Quality Assurance Policy	0	+	+
	Internal Quality Assurance System	0	+	+
	Quality structure	0	+	+
	Involvement of stakeholders	+	+	+
	Involvement of external experts	+	0	0

Legend: + = actual enabler (*enabler*$_a$); - = actual barrier (*barrier*$_a$); 0 = neutral.

Based on the research model we anticipated that all five independent variables and their 17 indicators would have some influence on the progress and outcomes of the accreditation processes. The empirical findings do not support this assumption. Even though at variable level we could indicate that each variable in one way or another indeed had an impact on accreditation processes and consequently on the achieved results, at the indicators level in all three cases some actual enablers, some actual barriers but also several neutral factors were identified. As presented in table 10-3, following the comparative analyses in chapter 9 and the answers provided to the first three sub-questions, we can conclude that some of the indicators relating to the five independent variables indeed had an enabling effect on the progress of accreditation processes and positively influenced the achieved outcomes. In the Dutch cases a large majority of the indicators performed as $enabler_a$ (UU: 13 of the 17 (76%); HZ: 12 of the 17 (70%), while in UoC only about a quarter did (4 of the 17, 24%). In this study we did not profoundly investigate the reasons that led to such a high rate of enabling factors in the Dutch cases. However, we assume that being learning organizations having many years of experience with external evaluation processes contributed to this high rate of enabling factors. With time this could also be expected to take place at UoC (later on also at UA and USM), provided that the involved stakeholders learn from their current experiences and that the university starts acting as a learning organization, while taking the contingency factors into due account. Further study on this topic is recommended.

With regards to the indicators that had a negative effect on the progress of the accreditation processes, table 10-3 shows that in the Dutch universities no actual barriers *(barrier$_a$)* could be identified. In contrast, in UoC the number of barriers (6 of 17, 35%) exceeded the actual enablers (24%). We did not investigate why the Dutch cases had no barriers, but we can deduce that the forces of the actual enabling factors did compensate for potential barriers. Moreover, it is striking to notice that the great majority of the *barrier$_a$* in UoC were *enabler$_a$* in the Dutch cases. This observation reflects that indeed in the Dutch cases over time the potential barriers (*barrier$_p$*) could be eliminated and even transformed into actual enablers (*enabler$_a$*). Once more this observation emphasized that being a learning organization coupled with longer experience with external evaluation can play a determinative role in the progress of accreditation processes, thus attaining and maintaining the accredited status on a timelier basis.

Another conclusion that can be draw is that in the Dutch cases, in contrast to UoC, contextual differences (longer period of external quality review and higher education act) as well as internal organizational dissimilarities (being a learning organization, involvement and commitment of leaders and managers, operating based on a well-defined internal quality assurance policy, existence of a quality culture and availability of resources) all exerted a positive influence on the progress and outcomes of their accreditation processes. These general encouraging factors were not applicable to UoC.

Furthermore, we could deduce from the overview in table 10-3 that none of the five variables fully acted as an *enabler$_a$* during the accreditation processes and thus

facilitating their outcomes. At least one of the indicators in each variable performed as a *barrier$_a$* or did not have any influence. In fact, with regards to UoC, we can even state that two of the identified variables did not contribute at all in a positive way, not even at indicators level: 'Organizational Structure' and 'Available Resources'.

We can further conclude that just two indicators performed as *enabler$_a$* during accreditation processes in all three universities: the involvement of stakeholders and the commitment of internal stakeholders (rows emphasized in table 10-3). The role of stakeholders, particularly internal stakeholders, stands out as an actual enabling contributor in all cases.

Table 10-3 also shows that two indicators did not have any influence on the accreditation processes, i.e. 'organizational chart' and 'facilities'. However, this conclusion does not mean that the neutral factors are useless for research. For instance, the organizational charts provided good insight into the lines of authority and responsibilities at the different organizational levels in the universities and therefore contributed to shedding light on other indicators, such as the authorities and responsibilities granted to institutional leaders and managers at faculty level and consequently their expected involvement during the accreditation processes. This is mostly relevant for the development and implementation of a quality structure. The decision-making structure and also the quality structure are expected to be in line with the possibilities granted by the organizational chart. So, the relevancy of the organizational chart as an indicator is explained by its contribution to comprehending the other indicators, illustrating the interdependence among the variables as presented in sections 9.3.4, 9.4.4 and 9.7. Similar rationales could be devised for keeping facilities in future studies: the fact that this potential enabler or barrier did not become actual in these cases does not imply that it never would be influential. It could be conceivable, for instance, that in cases with facilities below even a basic threshold, this indicator would turn into an actual barrier.

In this study it was interesting to investigate whether leaders and managers at the different institutional levels indeed are as powerful as some theorists argue. After all, universities are professional bureaucracies, where the expertise and thus also the 'managerial power' lies in the hands of the operating core. To balance this significant force, it is generally expected that those in leadership and managing positions are higher educated than those who are part of the operating core, as such legitimizing their higher influential power. For instance, rectors and deans are expected to be professors and as such legitimizing their leadership and managerial force directing the academic staff at lower organizational levels in higher education institutions. However, the theory of new managerialism, proclaiming shared responsibility and collegial decision-making counterbalance this assumption, arguing that team work and sharing accountability and responsibility ought to be part of distributed leadership instead of a leader-centric approach. Based on the literature review we could conclude that leaders and managers certainly can act as an encouraging factor during accreditation processes, provided that they are involved and committed, encouraging the development of a high level of commitment included in a quality culture at all

levels, while making optimal use of the available resources. The Dutch cases confirmed the reviewed theories in this regard. Both institutional leaders were highly involved and committed and by formal and internally regulated meetings encouraged involvement and commitment of the academic staff. We could thus verify that distributed leadership based on a collegial decision-making culture and allowed professional autonomy, empowered by directives of new managerialism contributed to the success stories of both universities.

10.3 Answering the main research question

The actual enablers (enablers$_a$) and actual barriers (barriers$_a$) that had an impact on the progress and outcomes of accreditation processes in the Dutch-Caribbean universities could be identified through answering the four sub-questions. Before answering the main research question, we must once more emphasize one specific limitation of this study. In contrast to what was expected at the beginning of the research period, among the Dutch-Caribbean universities only the UoC completed the first accreditation processes for most of its programs by December 2012 when we finalized our fieldwork. Therefore, we cannot answer the main research question for all three Dutch-Caribbean universities. In fact, we can only identify the actual influential factors affecting the progress and outcomes of accreditation processes in UoC. Nevertheless, we could occasionally draw some preliminary conclusions for UA and USM as well.

In short, while we look back at the analyses in chapter 9, tables 9.3 and 9.4 in particular, reinforced by table 10-3 provides an answer to the main research question for UoC. Most of the *enabler$_a$* of the progress and outcomes of the accreditation processes in UoC were the indicators related to the *'human factor'*[46]. It was the high level of involvement, commitment and behaviour of the people involved that largely enabled the progress and outcomes of the accreditation processes at UoC. If we take all the indicators involving the human factor into account in our analyses, and if these factors perform as *enabler$_a$* positively influencing the progress of the accreditation processes, the chance to obtain accreditation status is strongly reinforced. This was also the case in the Dutch universities. As illustrated in table 10-3, in the Dutch cases the fact that most 'human factor indicators' performed as *enabler$_a$* also largely positively affected the progress and finally the outcomes of their accreditation processes. So, the empirical study strongly suggests that the human factor is the most important factor during accreditation processes. Given the large degree of similarity in many respect between UoC and the other two Dutch-Caribbean universities, a first lesson for the target universities would be: not only UoC, but also UA and USM, in their aim to attain and retain the accredited status for their programs ought to invest in the human component participating in these processes.

---

[46] These indicators are: role of institutional leaders, management at faculty level, involvement of stakeholders, involvement of external experts, commitment of internal stakeholders and human resources, which counts for one third of the total indicators.

Another observation to substantiate this lesson is that even though a large group of indicators performed as actual barriers (*barriersₐ*) during its accreditation processes (35%), still 83% of the accreditation attempts of the UoC programs were positive. Probationary accreditation was granted to 13% and only 4% received negative assessment by NVAO. Although this was not a quantitative study, the percentages indicate that despite the many barriers in most cases accredited status could still be attained and this result is probably not much different from the overall proportions of accredited, probationary and negative decisions by the NVAO in the Netherlands. These findings demonstrate that the group of *enablersₐ*, even if it was the smallest group, neutralize the potential negative influence for the larger group of *barriersₐ*. In other words, the force of the *enablersₐ* produced by the human factor, together was enough to enable the progress of the accreditation processes finally achieving the aspired accreditation status for the large majority of UoC programs, regardless of the encountered *barriersₐ*.

We can also conclude that both indicators of the variable 'Organizational Structure' barely had any influence on the accreditation, demonstrating that the progress of accreditation processes at UoC was not reliant on this variable. Therefore, we can deduce that formalized structures (organizational chart, decision-making structure and quality structure) did not have an impact on the progress of its accreditation processes. In Dutch cases however these indicators acted as *enablersₐ*. Consequently, another lesson is: formalization does not automatically imply that accreditation processes will be better served. Maybe other contingency factors, like the longer period of experience with this type of processes and/or a more informal communication culture, could be alternative contributions instead of formalization in universities like UoC. A topic that needs further study, especially considering the highly centralized and formalized structures of UA and USM (table 9-1).

With regards to 'Leadership and Management style' a split value could be detected concerning its two indicators in UoC. The absence of firm leadership at institutional level seems to have been neutralized by the high involvement of managers at faculty level and other human resources, internal and external. The main lesson in this matter is already mentioned: commitment and involvement of the human resources proved to be of paramount importance to enable the progress and outcomes of accreditation processes. Nevertheless, it is worthwhile remarking that considering the Dutch cases, the commitment, involvement and support of the institutional leader can largely contribute to a steadier, continual and smooth progress of accreditation processes encouraging timely achievement and conservation of the accredited status. Following this observation, certainly the role of the institutional leaders at UoC, UA and USM needs to be reconsidered in order to achieve and maintain the highly coveted accreditation goal; another lesson to be learned.

Furthermore, the variables 'Quality Culture' and 'Available Resources' were mainly hindering factors during accreditation processes, since most of their indicators performed as *barriersₐ*. In order to enhance the success rate of positive accreditation outcomes development of a quality culture is strongly recommended, based on the

positive impact of this variable during accreditation processes in the Dutch cases. But also in this matter we should take into consideration the longer period of experience with external evaluation processes in the Netherlands. This could be an indicator that in the future also in the Dutch-Caribbean universities a more embedded quality culture could develop. However, once again we must emphasize the potential influence of other contingency factors, such as scale, available financial resources and/or accessible communication lines, to facilitate this development, reinforced by the human factor. Moreover, innovative, effective and efficient use of resources still needs to be maximized, in order to facilitate continuous improvement actions and preservation of the achieved accredited status in UoC. This indicator too should be taken into consideration also in UA and USM.

This conclusion also brings us to the last potential influential factor 'Internal Quality Assurance policy', which reinforces our focus on the interdependence among the identified independent variables. After all, a policy aims to bring together ends and means (resources and processes) in a coherent manner. For UoC, even though most of the indicators of this variable had barely any influence on the progress of its accreditation processes, the strong commitment and high involvement of the internal stakeholders, reinforced by the timely and extensive involvement of external experts contributed to the achieved positive accreditation outcomes, illustrating once more the crucial importance of the human factor during accreditation attempts. So again, we strongly recommend UA and USM to pay enhance attention to the involvement of the human factor during their accreditation processes in order to facilitate the achievement of positive accreditation outcomes.

All through our analysis, particularly explained in sections 9.3.4, 9.4.4 and 9.7, the interdependence among the identified independent variables was noticeable. The strong bond between leadership and management style and the development of a quality culture has been illustrated in several situations, as was also the case with the management of the available resources. In most cases we could observe compensatory interdependence within and across the variables, meaning that the absence of one indicator was neutralized by the presence of another, thereby overcoming the potential negative impact of the absentee indicator. For instance, at UoC the distant attitude of the institutional leader was on the one hand compensated by the high involvement of most of the managers at faculty level, but also by the commitment and involvement of other internal stakeholders; the lack of sufficient human resources was compensated by the extensive involvement of external experts. As lesson we firmly advise the Dutch-Caribbean universities is to take the perceived interdependence among the potential influential variables into due account while organizing and managing their accreditation processes, in order to timely counteract potential barriers and by doing so enhance the chance to attain and maintain accredited status for their programs.

It was remarkable that at the end of the research period elements of a learning organization could not be detected at UoC. With reference to figure 2-1 and figure 4-1, the main phases during organizational change processes, i.e. accreditation processes, were not completed. Instead of institutionalizing the achieved results by integrating

the quality improvement actions in the daily practice and planning how to embed a continuous cycle of quality improvement, the most important enabling factor 'people' tend to sit back and wait till the next accreditation period. The many experiences gained through the accreditation processes were not used to learn and disseminate the acquired knowledge and insights. The move to become a learning organization was not perceived, while in the Dutch cases this largely contributed to the positive accreditation results. It will be interesting to investigate how the second accreditation period will be managed, controlled and enabled and what will be the achieved results, considering these laid back attitudes. Nonetheless, another lesson for all three Dutch-Caribbean universities is to evolve into learning organization in order to potentially facilitate future accreditation attempts.

It is interesting to reflect on the reasons why—if some years ago all the three Dutch-Caribbean universities had the same plan to complete their first accreditation cycle—it was only UoC that achieved this goal until now. Based on the generated data and the analyses we can only speculate that in one way or another UoC was more able to neutralize the $barriers_p$ in a timely manner and/or even convert them into $enablers_a$. Maybe it is in this regard that the interdependence among the variables played a decisive role. For instance, the lack of involvement of the institutional leader ($barrier_p$) could have been neutralized by the high level of commitment and involvement of the managers at faculty level ($enabler_a$), or the insufficient quantity and quality of human resources ($barrier_p$) could have been counteracted by the high involvement of external experts ($enabler_a$). This is also an interesting research topic for future study.

We can also state some preliminary conclusions with regards to UA and USM, even though both universities did not complete their first accreditation cycle by the end of 2012. Analysis of these two cases shows that some barriers hindered the progress of their accreditation processes. At UA for instance, we suspect that continuous postponement of the (trial) site visits was due to the less structured approach towards the accreditation goal. Indicators such as the lack of involvement of the institutional leaders, the differentiated approach among the managers at faculty level (most operated from a distance), scarce care for quality, the non-existence of a quality structure, the insufficient shared responsibility, ownership, cooperation and collaboration, the limited human resources and the insufficient facilities hindered the progress of the accreditation process in a timely manner (table 9-3), acting as potential barriers ($barriers_p$). Also lack of expertise in this field of work together with the unavailability of required policies, structures and systems to support the focus on quality of the internal stakeholders as demanded by NVAO, may have led to slow progress and even postponement in the agreed planning. At the end of the research period the potential enabling factors ($enablers_p$) for UA were the commitment of the internal stakeholders and the high rate of involvement of external experts, while the quantitative and qualitative availability of human resources performed merely as a barrier. All again to a large extent emphasizes the importance of the human factor during accreditation processes.

With regards to USM we can indicate that the initial different approach of this university towards accreditation did not encourage the start of accreditation processes (section 7.4.2). USM's philosophy was mainly concentrated on piggybacking with other accredited universities. It is therefore not remarkable that it took some years before this university initiated its self-regulated accreditation processes. We hardly could measure the influence of the independent variables on the dependent ones at the end of our research period. So, any further conclusion with regards to the progress and outcomes of accreditation processes at USM would be premature at this moment.

In conclusion, we can state that some of the findings that contributed to answering the main research question were not in line with the assumptions at the beginning of the study. It is these findings that guide us to reconstruct the research model as will be explained in the next section.

10.4 The final framework of this study

Now that we have identified the actual influential factors affecting the accreditation processes, we will develop a final framework of potential influential factors that most likely will have an impact on the progress and outcomes of such processes. The framework is built by combining the findings from the literature review (chapters 2-4), the case descriptions (chapters 6-8), the comparative analyses (chapter 9) and the answer to the research questions (sections 10.2-10.3). In this way we hopefully expand the current body of knowledge on the research domain with additional knowledge and understanding of accreditation processes in small universities, especially those located in the less developed part of this world. This framework can be applied as a heuristic, practical instrument for the design, implementation and monitoring of such processes in universities, including UoC, UA and USM, as such ensuring the external validity of this study.

10.4.1 Reflecting on the research model

The empirical findings support the view of contingency theorists that there is no one best way to organize an organization, since organizing depends on many contingent factors. Applying the research model to the cases studied however, highlighted some general, applicable, potential influential factors during accreditation processes. Despite the fact that the external environment of the two groups of studied universities was completely different (less developed Caribbean vs. industrialized Western-Europe) the large majority of the identified internal organizational factors exerted in one way or another influence on the progress and eventually on the outcomes of the accreditation processes. Of the 17 indicators 15 had an enabling or hindering effect on the progress of the accreditation processes in one of more of the studied universities; only two overall neutral indicators (organizational chart, facilities) were identified in the most extensively compared cases of UoC, UU and HZ (see table 9-10 and table 10-3).

The research model used during the empirical study proved to be useful for describing the accreditation processes in the five studied universities and guiding of the

comparative analyses. However, it is only partially supported by the empirical findings of this study. The analyses actually show that none of the variables proved to act fully as an encouraging factor during accreditation processes. It was at indicators' level that the enabler$_a$ could be identified. Even in the Dutch cases, in which an average of 73% of the indicators performed as enabler$_a$, still none of the variables were shown to completely exert a positive effect on accreditation processes. In each variable there was at least one neutral indicator, exerting barely any influence on these processes (table 10-3). However, in order to still provide a research model that can be used to enable accreditation processes we regrouped and reorganized the indicators in such a way that the research findings can be empirically restructured. In addition, as will be explained below, we also considered the incorporation of two indicators which during our comparative analyses manifested themselves as having a potential impact on accreditation processes (see section 9.6).

An important change driving force that clearly manifested itself during the case studies was the experience with external evaluation review processes. The literature review indeed pointed out this factor as one important element during change processes (see table 2-2). Initially this indicator was suppressed in the research model. However, our research findings reveal that the Dutch universities have become learning organizations, learning from their experiences and acquiring knowledge and insights to be used in the next accreditation periods. Accordingly, due to many years of experience with external evaluation processes these universities have developed a quality culture and internal expertise so the involvement of external experts was not necessary. Consequently, in the Dutch cases the indicator, 'involvement of experts' could be replaced by 'internal expertise' as a valuable indicator. In contrast, the Dutch-Caribbean universities, besides the fact that they had practically no experience with external quality evaluation, no elements of learning organizations could be detected. So, no quality culture and barely any internal expertise was available, therefore they were highly reliant on the input of external experts. Therefore, we conclude that the indicators 'involvement of external experts' and 'internal expertise' may be interchangeable, depending on the contingency factor 'experience with external evaluation processes' and most importantly on the transfer of the institution into a learning organization, another contingency factor. In fact, having developed a quality culture and, by doing so, possessing increased internal expertise is an indicator of the learning capacity of the institution (Dutch cases), while continued use of external experts indicates a lack of this capacity (UoC case). Actually, this concluding interpretation based on the research findings underlines theories posited by several authors regarding learning organizations and the best way of addressing organizational change processes (Kondakci and van den Broek, 2008; Senge et al., 2001; Strydom et al, 2004).

The impact of the review panel during site visits is the second manifested indicator, which was not explicitly included in the research model. Empirical evidence seems to suggest that the attitude of the review panel toward the object to be assessed affects the achieved accreditation results. This attitude is facilitated by the NVAO accreditation

framework, which provides extensive room for personal interpretations of the quality offered by the panel members. The quality standards are not nailed shut, so subjective judgment is possible. It seems like it is not primarily the substantive expertise of the panel members that has an impact on the accreditation results, but their willing attitude to support the evaluated object. Of course their substantive knowledge and expertise help in this matter. Therefore, we opted to make this indicator more visible in the research model as part of the external context.

Another reflection on the research model and related to the research findings shows that even though in this study the variables and indicators were as much as possible assessed on an individual basis, the link between them could hardly be disregarded. Large degrees interdependence within and among the identified potential influential factors could be identified. This observation emphasizes that while aiming to achieve and maintain the accreditation status those in the decision-making position have to consider that pulling one indicator almost inevitably implies that at least some of the others are also pushed in a certain direction (contingency theory). Depending on the impact of each indicator and the interrelationship among them, each of the identified potential influential factors can become enablers$_a$ or barriers$_a$ during accreditation processes, affecting their progress and finally the achieved results.

10.4.2 Constructing the final framework

Looking back on the research model and the empirical findings, we construct a final framework to be applicable to the design, implementation and monitoring of accreditation processes. Taken all together, figure 10-2 displays a useful framework that can be used as a descriptive and prescriptive instrument with also an analytical function for the design, implementation and monitoring of accreditation processes. Ultimately, use of this framework is expected to enhance the success rate of attaining and maintaining the accredited status. In addition, this model can also serve as a basis for future research on the same topic of study. We reiterate with this framework that looking at the accreditation cycle as an input, process and output process is the best way to approach it. To reach the accredited status (output), the institution and/or program to be assessed needs to pass through an accreditation process (process), which is influenced by several influential factors (input).

When we look at the potential internal influential factors as *'stand-alone'* independent variables, which may have an impact on the choices made and the steps to be taken during accreditation processes, eventually affecting the achieved outcomes, we can see figure 10-2 in principle as a heuristic model. After excluding and regrouping some indicators, the four potential internal influential independent variables (figure 10-2) are operationalized into 13 indicators (figure 10-3). Actually, compared to figure 5-3, eventually the numbers of variables and the amount of indicators have been reduced. However, our research findings also illustrate that the potential influential factors operate in a dynamic, complex, interdependent way. In fact, the research findings validate the strong bond within and across the variables and also at indicators level.

The progress of the accreditation processes is reliant on the force of the enablers[a] to neutralize the impact of the barriers[a], as will be explicated below.
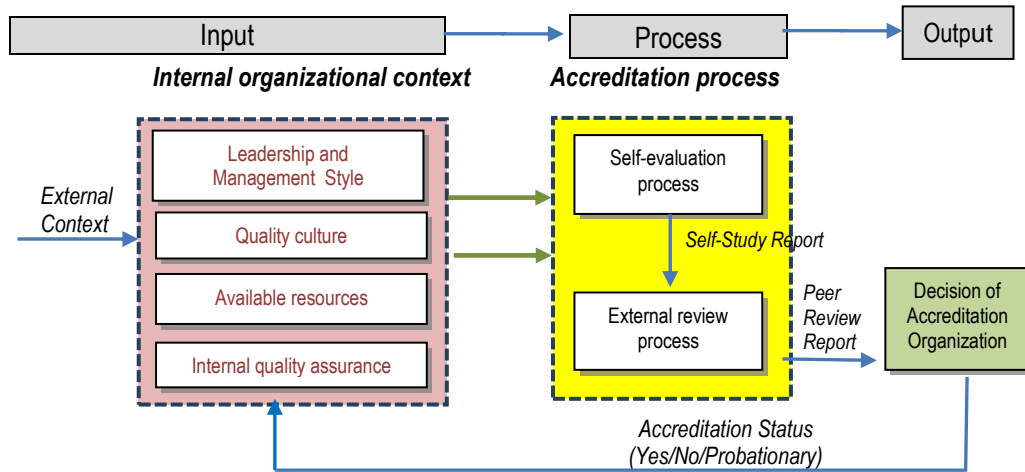
Figure 10-2 Heuristic framework for designing, implementing and monitoring accreditation processes

First, as illustrated in figure 10-3, the final framework represents a comprehensive overview of potential internal influential variables that is empirically grounded. Although we built on the existing insights, we deliberately constructed a conceptual model on the evidence from this comparative cases study. Doing so, the framework contains potential influential variables during accreditation processes, each to be measured by at least two indicators that have been derived from the empirical setting. This increases the relevance of this study and this developed framework for the empirical world, since it can be used as a model for future research.
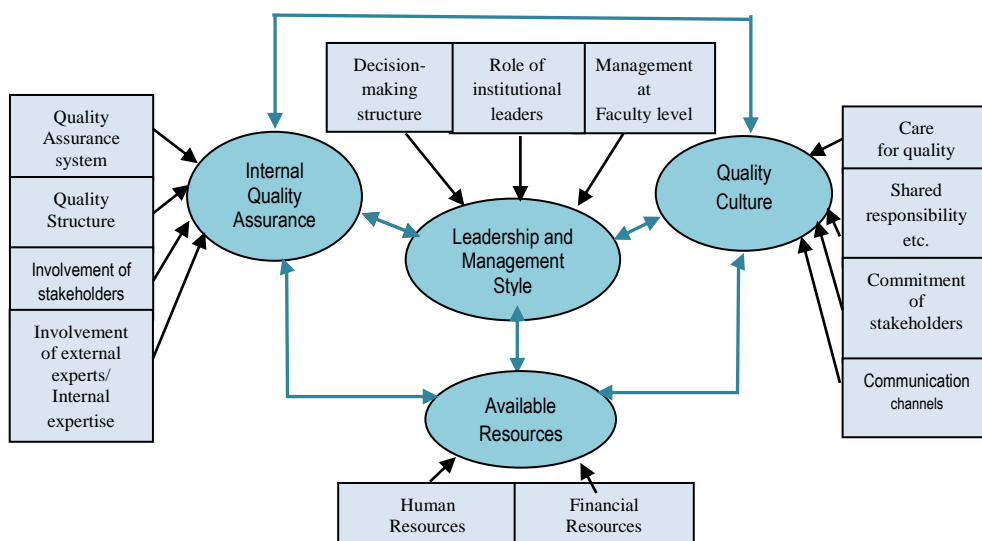
Figure 10-3 Overview of potential influential variables and indicators

Second, with this framework the current body of knowledge on potential internal influential factors affecting the progress and outcomes of accreditation processes is expanded since we could not find any similar model in the existing literature. We have operationalized the variables into indicators so as to facilitate the design, implementation and monitoring of the progress of the accreditation processes to enhance the success rate. Compared to figure 5-3, based on our empirical findings we included indicators that proved to be relevant factors potentially influencing the different steps to be undertaken during accreditation processes. For instance, we included the indicators 'involvement of experts' and 'internal expertise' as interchangeable ones, considering the major impact both had on the progress of the studied accreditation processes in the two groups of universities. We also excluded one previously identified potential influential variable, i.e. organizational structure, since there was no evidence that it had any valuable impact on the progress of these processes.

However, we must firmly emphasize that the implementation of the framework during the accreditation process depends on the internal organizational context and possible influence of the external context (contingency factors). For instance, an embedded quality culture does not automatically imply that the leaders and managers are committed, highly involved and supportive. And, providing more financial resources does not automatically imply that the human resources will be expanded and/or there will be increased care for quality. It is no 'one-on-one' additive model: one cup extra of financial resources does not always lead to two additional cups of human resources, nor does one cup extra of financial resources always result in a spoonful of progress towards accredited status. Sometimes the result is more, sometimes less. The actual impact of each variable, even of each indicator, is on the one hand dependent on external and internal contingency factors, but on the other hand also on the degree of interdependency from one variable on the others and from one indicators on others.

As has been often put forward, the identified potential influential factors have proven to be strongly interconnected, illustrating another characteristic of this framework to be taken into account while designing, implementing and monitoring accreditation processes. For instance, the available resources influence the leadership and management style used at the different institutional levels. The decision makers have to deal with the existing financial resources and make decisions about the involvement of external experts and the investment in the human resources, all of which can affect the development of a quality culture. The internal quality assurance policy sets the guidelines and directives for the quality structure, which in turn influences the span of control of the decision makers and sets out the lines of responsibilities, authorities and the division of tasks. As stated previously, pulling on an indicator sets various other indicators in motion too. In any case, this framework can be used as guidance for decision makers in higher education institutions to determine on which variables and/or indicators their focus should be.

In addition, with regards to the design of accreditation processes, this framework can form the basis for the starting up of the accreditation process in universities,

particularly small universities in less developed global areas, illustrating its descriptive and heuristic functions. It can be used to conduct a baseline study at the beginning of any accreditation process to identify those indicators that could have a negative impact on the progress of this process if not addressed adequately and promptly *(barrier$_p$)*. Dealing with these potential barriers in a prompt and suitable manner can turn their effect in a positive direction. On the other hand, those indicators primarily identified as potential enablers *(enabler$_p$)* could be strengthened to facilitate the achievement of the aspired accredited status. This exemplifies its analytical function. But, let us state it once more, it should be used as an eye-opener and icebreaker, not as a solid, definitive and all-inclusive prescription.

10.5 Theoretical and practical implications of this study

Now that the research question has been answered and the final framework encompassing the potential influential factors during accreditation processes is developed, a number of conclusions can be drawn regarding the theoretical and practical contributions of this study to the current body of knowledge in the research domain. By doing so we will hopefully contribute to filling the existing gap in empirical works on this research topic. The research findings allow us to provide useful insights in the way accreditation processes are organized and the factors that may enable or hinder the progress of these processes and their outcomes. These insights can be utilized to improve future accreditation attempts.

The first theoretical insight reinforced by this study is that the identified five internal influential variables are interdependent. This study proved that even though the influence of each variable was primarily independently assessed, the effect of the other variables on the investigated one could barely be ignored. As affirmed by contingency theorists, during accreditation processes all variables need to be considered together. If one changes, the others in many cases are also modified. For instance, a particular decision-making structure as part of the institutional leadership approach (leadership and management style) will direct the level of involvement of the stakeholders and the elements of the quality structure (internal quality assurance), the development of shared responsibility and ownership of these stakeholders (quality culture) and how the resources are divided (available resources). The availability of resources will in turn affect the role of the institutional leaders. It is not only a cyclic approach, but also a crisscrossing relationship between the several identified influential variables we encountered. A dynamic and complex interaction exists between the identified potential influential variables.

A second theoretical insight of this study is that leadership and management are indeed to be considered as important change driving forces, which, if not dealt with properly, can become restraining factors during the phases toward attaining the accredited status. The findings ratify this assumption showing that the role of institutional leaders and the management style at faculty level do indeed to a great extent affect the progress of accreditation processes. The case descriptions and the across-group analysis confirm that executive board members and deans are important

potential influential factors during accreditation processes. In the case of UoC where the impact of the rectors was not present there was the driving force of the institutional quality manager instead and of the deans to push and pull these processes. Therefore the variable 'Leadership and management style' can be considered as a valuable potential factor for realizing effective and efficient performances so as to achieve the accreditation objective of universities.

Our third theoretical insight is the mutual feedback loop between quality culture and outcomes of accreditation processes, to be explained in two ways. First, the existence of an effective quality culture within a university promotes appropriate behaviour, motivates the internal stakeholders and governs information distribution and processing. These internal quality elements encourage a care for quality behaviour, stimulate more shared responsibility and ownership and guide the proper use of communication channels and interaction among stakeholders. These elements are all indicators of the variable 'Quality Culture' and can operate as enabling factors during accreditation processes. Secondly, experiences with accreditation processes create more internal expertise and stimulate the development of a quality culture, also enhancing the chances to attain the accredited status. This is illustrated by the fact that there were main differences between the two groups of studied universities with regards to this variable. The Dutch cases show, among other things, that due to their longer period of experience with external quality evaluation processes most of the indicators as part of 'Quality Culture' performed as actual enabling factors during the accreditation processes, thus contributing to the positive accreditation results. In contrast, in the Dutch-Caribbean cases experience with accreditation processes is limited and most of the indicators of 'Quality Culture' acted as actual hindering factors. Of the five indicators, only the commitment of stakeholders actually encouraged the progress of the accreditation processes yet the aspired accredited status was obtained. Was this due to the existence of a compliance culture instead of a quality culture in UoC? This study did not investigate this assertion. Future research may address this topic more profoundly. Nevertheless, now that UoC has experienced its first accreditation cycle and obtained mostly positive results it is possible that there will be a gradual development of a quality culture, which will make the future accreditation attempts easier. A longitudinal study can provide evidence for this assumption.

Another theoretical insight this study brought forward is the prime role the human factor plays in all accreditation processes. This study made clear that it was the human factor that made the difference with regards to enabling accreditation processes. Leaders, managers, stakeholders, all human resources, contributed in a positive manner to ensuring the attainment and preservation of the accredited status. We can conclude that focusing on the human factor during accreditation processes will most probably largely contribute to achieving positive results.

Following the results of this study, we can also conclude that if the proper approach is implemented during accreditation processes each potential barrier can become an actual enabler. Providing the right mechanisms can diminish the impact of potential barriers. In fact, all the indicators can actually act as enabling factors, encouraging a

smooth progress of accreditation processes and positive accreditation results. This is possible provided that the leadership and management approach at the different institutional levels are encouraging a quality culture, implementing a useful internal quality assurance approach and dividing the available resources in a proper way, while other contingency factors are taken into due account. In such cases, universities, those small ones located in less developed areas in particular, have the tools at hand to better tie down global quality demands to their local quality potentials and standards, so to achieve the highly coveted accredited status.

In addition, our empirical findings reveal that size of the university does not really matter to certain aspects. More important are the years of experience with external review processes and the ability to be a learning organization. Regardless of the excessive difference in size between UoC and UU, both universities obtained an accredited status for their programs. Conversely, the research findings indicate that due to the many years of experience of the Dutch universities with external peer review and accreditation processes and their transfer of becoming learning organizations an advanced awareness of the institutional leaders of the importance of their leading role was present, a quality culture was developed, a quality structure was in place, an internal quality assurance system was implemented, and the quality of the involved human resources was suitable. All these indicators contributed to smoother accreditation processes and the achievement of the accredited status. It was not their size that made the difference. However, the question remains whether small universities could ever reach the same standards regarding for instance human resources as the larger ones. Being small implicitly means certain limitations in possibilities and availability of internal human resources. Thus, in addition to become a learning organization, size does also matter, influencing among other things the dependency on external experts and therefore affecting the accreditation approach.

One of the worldwide trends in higher education is the imbalance between the diminished financial budgets provided by the national governments and the increased importance granted to higher education institutions considered as firm contributors to national capacity building. This development can also be related to the new managerialism practices of nowadays towards the management of higher education institution. Accountability responsibilities together with cost-effective demands are penetrating the higher education sector, placing emphasis on quality delivery. The role of institutional leaders combined with the managers at faculty level seems to become more and more important in order to deal effectively and efficiently with the (limited) available resources, which in turn shape the organizational behaviour (organizational/ quality culture).

These are the theoretical insights that this study adds to the current body of knowledge in the research domain. We expanded the existing body of knowledge with an overview of potential influential factors during accreditation processes, leading to a more comprehensive, elaborated and up-to-date body of knowledge. Furthermore, a more comprehensive understanding of the variables (positive and negative) that may influence the progress stages and finally the outcome of accreditation processes was

obtained. With these theoretical insights the future organization of accreditation processes, in particular those of small universities located in less developed global areas has the potential to be improved, and hence make a successful result more easily feasible. In this way we accomplish all our scientific-theoretical goals.

With regards to the practical contribution of this study, we can state that based on the case descriptions we provided systematic insight in the way UoC organized its accreditation processes and how UA is doing during its first accreditation period. We could not provide the same information for USM since it was at an early stage of its first accreditation attempt. We indeed acquired better understanding of the accreditation processes in UoC and to some extent also of UA, but not of USM. So the first practical–oriented goals could only be partially reached.

The main practical contribution of this study can be found in the presented overview of potential influential factors during accreditation processes and the application of the concluding framework as a descriptive, prescriptive and analytical tool which universities can use for designing, organizing, implementing and monitoring their accreditation processes. With this tool we expect that the Dutch-Caribbean universities will be better able to connect global quality standards to local possibilities and limitations.

Reflecting on figure 10-3 we can make the following practical suggestions to be implemented by the Dutch-Caribbean universities: focus on the human factor; in case the institutional leaders are not highly involved, provide the managers at faculty level with enough tools to create a quality culture; learn from past experience and implement a system for continuous quality improvement instead of acting just in compliance with accreditation mandates; in case of lack of internal expertise involve external experts in a timely manner yet try to embed their knowledge and expertise in the continuous quality improvement approach; make sure that the financial means are sufficient and earmark what is needed for accreditation processes. All in all, we strongly suggest the use of the presented concluding framework at the beginning of the accreditation process to develop directives and guiding principles to design, implement and monitor these processes in a timely manner. This framework will contribute to identifying the potential influential factors on time. By doing so, the potential enablers could be strengthened while the potential barriers are addressed in a timely manner so to turn them into actual enabling factors as well.

With these practical suggestions we also contribute to providing an answer to the main research question and we generated viable information for future organization and managing of accreditation processes. So, to some extent we achieved both practical-oriented goals. No similar empirical studies could be found on the accreditation processes in small universities located in less developed global areas. Therefore applying figures 10-2 and 10-3 and their underlying principles in the daily practice related to accreditation processes in such universities can be a useful strategy.

Finally, as a 'bon yu di Kòrsou' (model citizen) with this study in our mind we also aimed to formulate practical contributions to the further development of the studied

Dutch-Caribbean countries, the higher education sector of the country Curaçao in particular. One aspect that deserves urgent attention is the enactment of a national Higher Education Act, based on an up to date higher education policy. This is necessary in order to link the external quality policy to internal organizational factors. Legal external mandates related to accreditation outcomes will affect the willingness, involvement and commitment of internal stakeholders at all organizational levels (human factor) to act in a decisive, firm and positive manner influencing the progress of the accreditation processes and eventually their outcomes. Furthermore, in case the national governments provide sufficient financial resources to the national funded universities to be accredited it will to a large extent contribute to facilitating other indicators, such as the quantity and quality of human resources (once more the human factor) and the adequacy of infrastructural facilities.

10.6 Recommendations for future research

The findings of this study added valuable and thoughtful insights to the current body of knowledge regarding the design, implementation and monitoring of accreditation processes and the potential influential factors during such processes, especially those that can have an enabling effect on the steps to be undertaken. With these inductive research findings we fill some voids identified in the current body of knowledge regarding potential factors actually affecting the progress and eventually the outcomes of the accreditation process in general and in small universities in particular. We are aware however, that each study has its limitations and leaves room for additional research and/or leads to new research questions that require further investigation. In this section we address some of the limitations of this study and provide suggestions for future research.

One of the limitations of this study relates to the impact of external factors on the progress of accreditation processes. At the beginning of the research process the impact of external factors on trends in the higher education sector was also addressed. Globalization, localization and glocalization were discussed with the aim to set the external context in which higher education institutions operate. Finally, we framed the investigation done in this study and concentrated only on internal organizational variables, so we could go more in-depth with our enquiry. Even though we have tried to bear in mind the main characteristics of the national context presented in one of the chapters, the identified internal organizational variables were the main study subjects. In any case, accreditation is an instrument used worldwide for external quality assurance to ensure that higher education institutions and/or programs comply with internationally set quality standards. More and more this instrument is implemented by the national government as a quality control mechanism. Therefore it is advisable to investigate the effect of the external environment on the effectiveness and efficiency of accreditation processes. Further study on the globalized effects on the organization, implementation and management of accreditation processes and also the impact of national trends on these processes seems worthwhile.

Another limitation relates to our initial assumption that the first accreditation cycle at UA and USM will also be completed during the research period. Even though we tried as much as possible to describe all 17 indicators of these two universities during their case descriptions and conducted a within-group analysis among all three Dutch-Caribbean universities, due to the stage of their accreditation processes we could not provide the necessary information to include them in the across-group analytic comparison. We therefore suggest further investigation of the accreditation processes at UA and USM during and after their first accreditation cycle so that relevant information can be obtained facilitating the identification of the potential influential factors during these processes and finally providing a full-fledged answer to our main research question. The concluding framework can be used to guide that study.

In addition, two indicators manifested themselves during our empirical study: experiences with external quality evaluation processes and the attitude of the review panel towards the object to be assessed. We expect that because of the gained experiences during its first accreditation cycle, while going through its second accreditation cycle UoC (and later on also UA and USM) will become learning organizations and be less reliant on the involvement of external experts, gradually reaching the point that sufficient internal expertise is available. But will this indeed be the case? And, has a quality culture been developed? Clearly, these are other important research areas that have to be explored in the near future. In line with this we also recommend a longitudinal study of the five cases so we can gain insights in the dynamic character and the interaction among the different variables and also their respective indicators.

With regards to the impact of the review panel on the accreditation outcome, more in-depth research is needed to verify or counteract this assumption. During the empirical study and data collection little information on this issue was collected. It is thus useful to find out if review panels indeed have such a great impact on the accreditation results. Moreover, studying this issue will pay attention to external factors influencing accreditation outcomes and add to the insights generated in this study concerning the effect of internal organizational factors.

Finally, the proof of the pudding is in the eating. The best way to assess the value of the framework we finally developed at the end of this study is by applying it in practice to design, organize, manage and control accreditation processes in small universities, those located in the Dutch Caribbean in particular. Combining the research findings and the knowledge, understanding and insights obtained, with the findings from the proposed future studies, eventually a consistent, coherent, comprehensive and up-to-date framework with an overview of all potential influential factors will be developed. This framework can be applied to accreditation processes in order to facilitate the progress of these processes and enhance the chance to achieve positive accreditation results. With that framework at hand, the Dutch-Caribbean universities in particular will be provided with a valuable and customized instrument to guide and assist them in their accreditation processes, so they will be better enabled for '*tying down global to local*'.

Nederlandstalige samenvatting

Accreditatie is een wereldwijd erkende kwaliteitsstandaard, die in het hoger onderwijs gebruikt wordt om aan te tonen dat de accreditatie-eenheid heeft voldaan aan internationaal vastgestelde kwaliteitseisen. Accreditatieprocessen zijn echter complexe fenomenen waarbinnen een veelheid van factoren een rol spelen waarover nog relatief weinig wetenschappelijke kennis beschikbaar is, met name over de factoren die de voortgang van deze processen in kleine universiteiten beïnvloeden. Met deze studie wordt beoogd om een hiaat in deze wetenschappelijke kennis op te vullen door het identificeren van interne factoren die van invloed kunnen zijn op de voortgang en de uiteindelijke resultaten van accreditatieprocessen in drie kleine Caribisch-Nederlandse universiteiten: University of Curaçao (UoC), University of Aruba (UA) en de University of St. Martin (USM). Daarnaast zijn in deze studie twee Nederlandse hoger-onderwijsinstellingen als contrasterende organisaties onderzocht: Utrecht Universiteit (UU) en HZ University for Applied Science (HZ). In het verlengde hiervan is getracht een bijdrage te leveren aan het vergroten van het inzicht in de complexiteit van de mechanismen die bij accreditatieprocessen een rol spelen en de determinanten die deze processen doen slagen of falen (*stimulerende* en *belemmerende* factoren). De centrale onderzoeksvraag van deze studie luidt als volgt:

> *Welke zijn de beïnvloedende factoren tijdens accreditatieprocessen in nationaal gesubsidieerde Caribisch-Nederlandse universiteiten en welk effect hebben deze factoren uiteindelijk op de resultaten van deze processen?*

De theoretische basis van deze studie is gebaseerd op drie theoretische benaderingen. Volgens de *'open systeem' benadering* zijn organisaties constant in interactie met hun directe omgeving. Voortbouwend op de 'open systeem' benadering stelt de *contingentietheorie* dat organisaties hun structuur voortdurend aanpassen aan de veranderende omgevingsfactoren teneinde hogere prestaties te kunnen bereiken. Volgens aanhangers van de contingentietheorie is het dan ook van groot belang om deze omgevingsfactoren te identificeren en bestaat er geen 'beste' manier van organiseren, leidinggeven of besluitvorming binnen organisaties. Naast deze open systeembenadering en de contingentietheorie is dit onderzoek verder gestoeld op de theorie van de lerende organisatie die stelt dat een lerende organisatie nieuwe kennis verwerft dan wel ontwikkelt, deze binnen de hele organisatie verspreidt, daarvan leert en haar vervolgens toepast.

Uit de literatuuranalyse blijkt dat er tijdens veranderingsprocessen diverse elementen zijn waarmee rekening dient te worden gehouden, o.a. historische ontwikkelingen, de omgeving, de te bereiken doelen en gewenste resultaten, de te volgen strategie, de betrokkenen en de communicatielijnen. Daarnaast heeft literatuuronderzoek uitgewezen dat veranderingsprocessen het beste kunnen worden uitgevoerd volgens een model van diagnose, initiatie, implementatie en consolidatie. Praktijkonderzoeken hebben echter aangetoond dat bij veranderingsprocessen doorgaans geen sprake is van

een lineair proces. Om de beoogde resultaten te kunnen bereiken streven organisaties ernaar om via gepaste veranderingsstrategieën de invloed van de belemmerende factoren te bestrijden en tegelijkertijd de kracht van de stimulerende factoren te versterken.

Externe druk en wereldwijde competitieve omgevingen dwingen universiteiten om actief lerende organisaties te worden, zodat zij in staat zijn om enerzijds een bijdrage te leveren aan wetenschapsontwikkelingen op mondiaal niveau en anderzijds om afgestudeerden af te leveren die de verdere duurzame nationale sociaal-economische ontwikkelingen kunnen ondersteunen en stimuleren. Moderne nationale eisen met betrekking tot het hoger onderwijs sluiten nauw aan op deze mondiale en internationale ontwikkelingen. Zo hanteren nationale overheden steeds meer instrumenten om bevoegdheden van hogeronderwijsinstellingen in te kaderen en verantwoording af te dwingen over de gebruikte middelen. De eisen vanuit overheden met betrekking tot de bereikte resultaten van deze instellingen worden steeds meer gerelateerd aan kwaliteitsverbetering, productiviteit, effectiviteit en efficiëntie. Deze benadering staat bekend onder de term 'New Public Management' of 'New Managerialism'. Onderwijsinstellingen zien zich dan ook gedwongen om anders te functioneren en meer open en adaptief te worden in relatie tot deze nieuwe, snel veranderende en competitieve omgeving.

Instellingen voor hoger onderwijs zitten dan ook in een lastige positie: omgaan met de uitdagingen die afkomstig zijn van de internationale krachten en tegelijkertijd voldoen aan nationale eisen. Deze instellingen dienen in staat te zijn om verbanden te leggen tussen de lokale mogelijkheden en de mondiale eisen: 'Tying down global to local'.

Om studenten adequaat te kunnen voorbereiden op het werken en leven in een sterk aan veranderingen onderhevige maatschappij wordt van hogeronderwijsinstellingen verwacht dat zij voortdurend aandacht besteden aan kwaliteitsverbetering teneinde een geaccrediteerde status voor alle opleidingen te bereiken dan wel te behouden. Accreditatie is een vaak gebruikt instrument voor externe kwaliteitszorg en wordt gezien als een bewijs dat desbetreffende instelling of programma voor het hoger onderwijs voldoet aan internationale kwaliteitsnormen. Accreditatieprocessen worden volgens ons onderzoeksperspectief daarbij beschouwd als veranderingsprocessen. In veel gevallen immers, dient de accreditatie-eenheid veranderingen dan wel verbeteringen aan te brengen in haar organisatieprocessen zodat zij aan de accreditatie-eisen kan voldoen. Hierbij is het o.a. van belang dat het systeem van interne kwaliteitszorg aansluit op de eisen van het externe evaluatieorgaan.

In deze studie zijn vijf onafhankelijke factoren geïdentificeerd, die met behulp van 17 indicatoren grondig onderzocht zijn om te bepalen in hoeverre deze invloed hebben uitgeoefend op de bestudeerde accreditatieprocessen:

- Organisatiestructuur, met twee indicatoren: organogram en besluitvormings-structuur;
- Leiderschap en managementstijl, met twee indicatoren: de rol van de institutionele leider(s) en management op faculteitsniveau;

- Kwaliteitscultuur, met vijf indicatoren: 'zorg voor kwaliteit', 'gedeelde verantwoordelijkheid, ownership en samenwerking', 'commitment van interne stakeholders', 'normen, waarden, tradities, gewoonten, gedrag van mensen', 'communicatiekanalen en interactie tussen interne stakeholders';
- Beschikbare middelen, met drie indicatoren: personeel, financiële middelen en faciliteiten;
- Interne kwaliteitszorg, met vijf indicatoren: intern kwaliteitszorgbeleid, intern kwaliteitszorgsysteem, kwaliteitsstructuur, betrokkenheid van stakeholders en betrokkenheid van externe deskundigen.

Dit onderzoek kent twee afhankelijke variabelen, te weten het zelfevaluatieproces en het externe evaluatieproces. In het merendeel van de gevallen maakt een zelfevaluatieproces een wezenlijk onderdeel uit van het accreditatieproces dat haar beslag vindt in een zelfevaluatierapport. Dit rapport is de belangrijkste informatiebron voor de visitatie, dat resulteert in een extern evaluatierapport samengesteld door het betrokken externe panel. Uiteindelijk vormt dit de basis voor het te behalen resultaat: positieve, negatieve of voorwaardelijke accreditatie.

Deze studie betreft een kwalitatief onderzoek, uitgaande van een vergelijkende case studie met zowel een verkennend als een verklarend karakter. Deze onderzoeksmethode past het beste bij het onderzoeksdoel en vormt de basis voor het empirische deel van dit onderzoek. Een case studie maakt het immers mogelijk om een complex fenomeen (accreditatieprocessen) grondig te onderzoeken binnen een duidelijk beschreven, reële omgeving (universiteiten). Tevens wordt door het uitvoeren van een case studie diepgaande kennis en inzicht verkregen van een accreditatieproces. De onderzoeksstrategie in deze studie is die van een meervoudige kwalitatieve case-studiebenadering. Onderzocht is in hoeverre de vijf geïdentificeerde onafhankelijke factoren van invloed zijn op de voortgang van accreditatieprocessen en de uiteindelijke accreditatieresultaten van de vijf onderzochte universiteiten. De universiteiten als geheel vormen het onderzoeksobject. Uiteindelijk zijn twee typen vergelijkingen gemaakt: een vergelijking van de variabelen binnen elke groep en een vergelijking tussen de twee groepen universiteiten. Teneinde de validiteit van het onderzoeksproces te garanderen, de geldigheid van de onderzoeksresultaten te versterken en het ontwikkelen van nieuwe inzichten te bekrachtigen (triangulatie) zijn drie methoden van dataverzameling gebruikt: observatie, documentenanalyse en semi-gestructureerd diepte-interviews. Het combineren van deze drie vormen van dataverzameling resulteerde in een uitgebreide set aan gegevens, afkomstig van een groot aantal respondenten (35). Daarnaast is een groot aantal documenten op instellings-, faculteits- dan wel afdelingsniveau bestudeerd. Tevens hebben binnen enkele instellingen participerende observaties plaatsgevonden. De analyse van de data heeft informatie opgeleverd over de gemaakte keuzes en de verrichte stappen gedurende het doorlopen van de accreditatieprocessen en de factoren die daarop van invloed waren.

Vergelijkende analyses

Nadat de aanpak en werkwijze gedurende de accreditatieprocessen van elke onderzochte universiteit zoveel mogelijk was beschreven, vonden de twee vergelijkende analyses plaats. De variabelen werden zoveel mogelijk zelfstandig vergeleken, hoewel de onderlinge dwarsverbanden steeds nadrukkelijk aanwezig waren.

Voorafgaande aan de casebeschrijvingen en de vergelijkende analyses is de nationale context van elke universiteit beschreven aan de hand van vijf kenmerken: geografische ligging, demografische gegevens, politieke context, economische situatie en enkele sociale kenmerken. Deze contextuele factoren zijn niet geanalyseerd, maar hebben een puur informatief karakter teneinde zicht te geven op relevante omgevingsaspecten van de vijf universiteiten.

Analyse binnen groep A (UoC, UA en USM). Deze analyse kon niet volledig worden gerealiseerd vanwege het verschil in de fases van de accreditatieprocessen tussen de drie universiteiten. Eind 2012 had de UoC de eerste accreditatieronde van het merendeel van haar opleidingen afgerond, waarvan 83% een positieve beoordeling bij de NVAO heeft gekregen, 13% voorwaardelijk en 3% negatief. UA is al jaren bezig met de voorbereidingen voor de eerste visitaties, maar nog geen enkel traject is afgerond. USM stond aan het einde van de onderzoeksperiode nog in de startblokken van haar eerste visitatieproces, enkele jaren na een mislukte poging om via een Amerikaans instituut geaccrediteerd te worden. Deze universiteit probeerde oorspronkelijk mee te liften met de accreditatie van samenwerkende partners in plaats van zelf accreditatieprocessen te doorlopen. Dat verklaart waarom zij zo laat met deze uitdaging is gestart. Vanwege deze gediversifeerde situatie van de Caribisch-Nederlandse universiteiten vond de vergelijkende analyse met name plaats tussen UoC en UA en in heel beperkte vorm met USM. Tussen USM en UA kon geen vergelijking plaatsvinden.

Alle drie universiteiten hebben een éénhoofdige leiding. Duidelijk bleek dat bij UoC, ondanks de wettelijke regelgeving, niet de institutionele leider maar het College van Decanen een determinerende rol speelde in de besluitvormingsprocessen. Daarnaast hadden decanen alle ruimte om volgens eigen inzicht invulling te geven aan hun accreditatietrajecten. De rectoren opereerden op afstand. Deze bevindingen onderstrepen dat de UoC als een 'professionele bureaucratie' is gestructureerd, alhoewel ook kenmerken van een georganiseerde anarchie duidelijk merkbaar waren.

Alle rectoren, decanen en afdelingshoofden in deze drie universiteiten waren gecommitteerd om het accreditatiedoel te bereiken, hoewel de focus puur gericht was op het verwerven van de geaccrediteerde status ("zeg me wat ik moet doen voor accreditatie en ik doe dat") in plaats van continu te streven naar kwaliteitsverbetering (PDCA-cyclus). Bij de UoC was op instellingsniveau ettelijke malen sprake van veranderende leiderschapstijl vanwege herhaalde wisseling van de institutionele leider. De verantwoordelijkheid voor accreditatie werd vrijwel volledig gedelegeerd naar de kwaliteitsmanager op instellingsniveau. De betrokkenheid van de decanen

varieerde, hetgeen van invloed was op de voortgang van de accreditatieprocessen. Duidelijk is gebleken dat in geval er sprake was van een hogere mate van betrokkenheid bij een decaan de voortgang van deze processen werd gestimuleerd en de behaalde resultaten positief waren.

In geen van de drie universiteiten was er sprake van een kwaliteitscultuur. Dit vertraagde ook de voortgang van de accreditatieprocessen. Desondanks kon bij de UoC en UA een groeiend kwaliteitsbewustzijn worden waargenomen. In het geval van de UoC was de rolopvatting van de decaan hierbij doorslaggevend. Decanen die, ondanks dat er geen kwaliteitscultuur bestond, toch in staat waren om hun team te enthousiasmeren, te betrekken en gerichte aansturing richting accreditatie te geven boekten de meest positieve resultaten. De beschikbare financiële en personele middelen waren ontoereikend. De faciliteiten waren bij UoC en USM voldoende, in tegenstelling tot bij UA. UoC en UA hadden een kwaliteitszorgbeleid op papier, maar de vertaling hiervan in een daadwerkelijk kwaliteitszorgsysteem was met name bij de UoC niet gerealiseerd; UA bevond zich in de beginfase hiervan. Geen van de universiteiten had een interne kwaliteitsstructuur, de stakeholders waren wel erg betrokken en vele externe deskundigen werden ingehuurd met uiteenlopende taken om de weg naar accreditatie te plaveien.

Samenvattend kan worden gesteld dat in het geval van de UoC geen enkele variabele in haar totaliteit als een stimulerende factor kan worden aangemerkt. Slechts vier stimulerende indicatoren (24%) konden worden geïdentificeerd: de inzet en betrokkenheid van decanen, de geëngageerde houding van de staf, de betrokkenheid van de stakeholders in het algemeen en de inzet van externe experts. Een groot deel van de indicatoren (35%) speelde een belemmerende rol: onvoldoende zorg voor kwaliteit, gebrek aan gedeelde verantwoordelijkheid, het ontbreken van gemeenschappelijke normen, waarden en gebrekkige samenwerking, ongestructureerde communicatielijnen en onvoldoende personele en financiële middelen. Een opvallend onderzoeksresultaat was dat naast de stimulerende en belemmerende indicatoren alle overige indicatoren (41%) in tegenstelling tot de verwachtingen geen invloed hebben uitgeoefend op de voortgang van de accreditatieprocessen.

Analyse binnen groep B (UU en HZ). Contrasterende cases in dit onderzoek waren de Utrecht University en HZ University for Applied Sciences, waarvan de opleidingen ook door de NVAO geaccrediteerd moeten worden. Vermeldenswaard is dat het accreditatieraamwerk en de daarbij behorende procedures speciaal ontwikkeld zijn voor de hogeronderwijsinstellingen in Nederland. Aldus kon worden verwacht dat deze instellingen minder belemmeringen zouden ondervinden om aan te sluiten op de eisen en procedures van de NVAO dan de Caribisch-Nederlandse universiteiten.

Zowel UU als HZ waren aan het einde van de onderzoeksperiode bezig met hun tweede accreditatieronde, waarbij zij reeds een positieve beoordeling van een instellingsaudit achter de rug hadden. Beide universiteiten streefden ernaar de verworven accreditatiestatus van hun opleidingen te behouden.

De Nederlandse universiteiten hebben een lange geschiedenis met externe kwaliteitsevaluatie en hebben aldus door de jaren heen ervaring en expertise op dit gebied opgebouwd. In deze universiteiten bleken de taken, bevoegdheden en verantwoordelijkheden duidelijk omschreven te zijn, waardoor de besluitvormings-structuur stabiel was. Naast formele overlegmomenten, maken beide universiteiten veelvuldig gebruik van informeel overleg ter voorbereiding van de formele beslissingsmomenten. De institutionele leiders waren intensief betrokken bij de accreditatieprocessen. Ondanks de centraal aansturende regels, procedures en voorschriften kregen met name bij UU de decanen voldoende ruimte om eigen invulling te geven aan hun accreditatieprocessen. Bij HZ waren het vanwege de kleinschaligheid uniformiteit in aanpak en centrale aansturing die de richting bepaalden.

Bij zowel UU als HZ heeft de jarenlange ervaring met externe kwaliteitsevalutie bijgedragen aan de ontwikkeling van een kwaliteitscultuur. Het doorlopen van een PDCA-cyclus van continue kwaliteitsverbetering was duidelijker herkenbaar, hoewel deze niet overal en altijd even systematisch en structureel werd doorlopen. Alle drie onderzochte categorieën van middelen waren in voldoende mate aanwezig en het beleid op het gebied van kwaliteitszorg werd ook in de praktijk in voldoende mate aangetroffen. In beide universiteiten was er sprake van een centraal aangestuurd systeem van interne kwaliteitszorg, een goed omlijnde kwaliteitsstructuur en hoge mate van betrokkenheid bij de interne stakeholders. Vanwege de door de jaren heen opgebouwde expertise werd bij UU helemaal geen gebruik gemaakt van externe deskundigen; bij HZ was dit marginaal.

Samenvattend konden over het algemeen twee variabelen geïdentificeerd worden als van eminent belang gedurende de accreditatieprocessen van de Nederlandse universiteiten: leiderschap en managementstijl, en kwaliteitscultuur. Commitment en betrokkenheid van degenen met een leidende en aansturende rol gedurende de accreditatieprocessen hadden een stimulerend effect op de rest van het personeel, hetgeen een essentiële bijdrage heeft geleverd aan een hoger niveau van betrokkenheid en actieve participatie. Deze leiderschap en managementstijl stimuleerde de geleidelijke ontwikkeling van een kwaliteitscultuur, hetgeen het grote belang van de leidinggevende tijdens accreditatieprocessen wederom illustreert. Uiteindelijk konden 70% van de indicatoren aangemerkt worden als daadwerkelijke stimulerende factoren, terwijl er geen enkele belemmerende factor kon worden geïdentificeerd. Alle overige indicatoren hebben geen invloed uitgeoefend op de voortgang van de accreditatieprocessen.

Analyse tussen groepen A en B. Deze analyse vond plaats tussen UoC, UU en HZ; UA en USM konden niet meegenomen worden in deze vergelijkende analyse aangezien zij nog geen enkele accreditatiepoging hadden afgerond, hetgeen van belang is voor het kunnen identificeren van de daadwerkelijke beïnvloedende factoren tijdens accreditatieprocessen. Deze analyse heeft uitgewezen dat er sprake is van grote discrepantie tussen de UoC en de twee Nederlandse universiteiten. De Nederlandse universiteiten hebben een lange geschiedenis met externe kwaliteitsevaluatie, met een

wettelijk verplichte accreditatie, terwijl de accreditatiepogingen in de Caribisch-Nederlandse universiteiten pas sinds begin dit millennium gestart werden, zonder enige juridische inbedding. In principe was accreditatie in geen van de drie universiteiten intern gedreven, maar een externe verplichting.

Gedurende de accreditatieprocessen werd de UoC met verschillende belemmerende factoren geconfronteerd, die een vertragend effect hebben gehad op de voortgang van deze processen. Desalniettemin werd voor het merendeel van haar programma's de accreditatiestatus verworven, mede dankzij de grote invloed van een beperkt aantal stimulerende factoren, waaronder de rolopvattingen van decanen, versterkt met de hoge mate van betrokkenheid en commitment bij de interne stakeholders en de veelvuldige inzet van externe deskundigen. De kracht van de stimulerende factoren bleek dominanter te zijn dan de invloed van de belemmerende factoren, waardoor uiteindelijk het felbegeerde accreditatiedoel toch kon worden bereikt. De Nederlandse instellingen hadden het voordeel van veel meer stimulerende factoren, grotendeels mogelijk gemaakt door de vele jaren ervaring met externe evaluatieprocessen. Met uitzondering van de organisatiestructuur, leverden alle overige variabelen een positieve bijdrage aan de voortgang van hun accreditatieprocessen. In deze groep van instellingen konden geen feitelijke barrières worden geïdentificeerd.

Alle vergelijkende analyses in deze studie hebben aangetoond dat de inzet van de leiders en managers een determinerende factor is. Het positief effect van de variabele 'leiderschap en managementstijl' tijdens accreditatieprocessen wordt hiermee benadrukt, uiteindelijk resulterend in positieve accreditatieresultaten. Inspirerende, enthousiaste, zeer toegewijde en betrokken leidinggevenden speelden een bepalende rol tijdens het verloop van de accreditatieprocessen. Bij de Nederlandse instellingen was dit ook duidelijk merkbaar aan de hoge mate van betrokkenheid van deze leiders, terwijl bij de UoC deze verantwoordelijkheid werd gedelegeerd naar de kwaliteitsmanager op instellingsniveau en de decanen, die een sterke aansturende rol hadden. De organisatiestructuur bleek in alle drie universiteiten nauwelijks invloed te hebben tijdens accreditatieprocessen.

De aanwezige kwaliteitscultuur was van significante invloed in de Nederlandse instellingen, die sterk ontwikkeld was mede door hun jarenlange ervaring met externe kwaliteitsbeoordelingsprocessen. Uit de vergelijking van de UoC en de HZ blijkt dat kleinschaligheid niet hetzelfde effect heeft op de ontwikkeling van een kwaliteitscultuur. Het opbouwen van een kwaliteitscultuur is dus niet alleen een kwestie van schaalgrootte; andere factoren hebben meer invloed dan de omvang van een universiteit. Kleinschaligheid had bij de UoC evenmin tot gevolg dat er meer en gestructureerd werd samengewerkt. Analyse heeft aangetoond dat kleinschaligheid juist een verklaring is voor het gebrek aan samenwerking: vanwege onvoldoende personeel was het voor vele docenten niet mogelijk om deel te nemen aan uiteenlopende (in)formele bijeenkomsten. Hoewel het accreditatiedoel geleid heeft tot verbeterd kwaliteitsbewustzijn kon binnen de UoC nog geen benadering van continue kwaliteitsverbetering worden waargenomen. Tijdens de accreditatiepogingen werd een cultuur van 'compliance' aangetroffen, die wel zou kunnen worden beschouwd als

een pre-fase in de richting van een geïntegreerde kwaliteitscultuur in de komende jaren. Omdat accreditatie geen eenmalige oefening is, is de ontwikkeling van een kwaliteitscultuur noodzakelijk indien UoC de behaalde geaccrediteerde status wil behouden.

Het gebrek aan personele en financiële middelen bemoeilijkte de voortgang van accreditatieprocessen in de UoC, terwijl in de UU en de HZ de voldoende mate van aanwezigheid van deze indicatoren een stimulerend effect hadden. Het effect van de variabele interne kwaliteitszorgbeleid was verschillend in de drie instellingen: in de Nederlandse instellingen was het een stimulerende factor, terwijl de meeste indicatoren van deze variabele voor de UoC als barrières opereerden. Alle drie instellingen beschikten over een instellingsbreed kwaliteitsbeleid, waarvan alleen bij de UoC de vertaling in de dagelijkse praktijk ontbrak. Decanen konden in de UoC volledig afwijken van de centraal vastgestelde regels en procedures zonder dat zij daarop werden aangesproken, terwijl zulk 'deviant' gedrag bij de UU en de HZ niet mogelijk was. De UoC kende ook geen kwaliteitsstructuur, terwijl bij de Nederlandse instellingen dit wel het geval was. Betrokkenheid van de interne stakeholders was in alle drie instellingen duidelijk aanwezig. Er was sprake van een hoge mate van commitment en betrokkenheid, waardoor de voortgang van de accreditatietrajecten positief werd beïnvloed.

Aangezien bij de UoC onvoldoende interne deskundigheid over accreditatieprocessen beschikbaar was, werden externe deskundigen veelvuldig ingehuurd; bij de UU was dit helemaal niet het geval, terwijl bij de HZ dit sporadisch gebeurde. Deze enorme betrokkenheid van externe deskundigen bij de UoC illustreert aan de ene kant het gebrek aan geschikt personeel om de klus te klaren. Daarnaast heeft deze aanpak een groot aanslag op de beperkte beschikbare financiële middelen gedaan. Dus, ook al is deze aanpak effectief geweest, haar bijdrage aan het niveau van efficiëntie voor de duurzaamheid van de behaalde geaccrediteerde status is discutabel.

Naast de van tevoren geïdentificeerde potentiële variabelen, bleek uit de vergelijkende analyses dat twee additionele variabelen ook invloed hebben uitgeoefend op de voortgang van de accreditatieprocessen en uiteindelijk op de behaalde resultaten. De opgebouwde ervaring en expertise met externe kwaliteitsbeoordelingsprocessen bleek een positief effect te hebben op de voortgang van de accreditatieprocessen in de Nederlandse universiteiten. Daarentegen had in UoC de korte periode van ervaringen met dit type processen een vertragend effect op hun voortgang. Een andere factor die van invloed bleek te zijn op de behaalde resultaten was het evaluatiepanel. Een aangename sfeer tijdens de visitatie, gekenmerkt door een goed contact tussen het panel en de vertegenwoordigers van de accreditatie-eenheid bleek de kans op het behalen van een positief accreditatieresultaat te vergroten. Diepgaand onderzoek is echter nodig om te verifiëren of deze twee additionele variabelen inderdaad de impact hebben die deze studie suggereert.

Eindresultaten en conclusie

In deze studie werd verondersteld dat elke onafhankelijke variabele in potentie significante invloed op de voortgang en de resultaten van de bestudeerde accreditatieprocessen zou kunnen hebben. Kennis van en inzicht in de stimulerende variabelen zouden een waardevolle bijdrage leveren aan de voortgang van deze processen en uiteindelijk op de behaalde eindresultaten. De onderzoeksresultaten zijn echter in tegenspraak met deze oorspronkelijke, eenvoudige aanname van de relevantie van elke onafhankelijke variabele. De vergelijkende analyses belichtten de invloed van elke variabele op de voortgang en resultaten van de bestudeerde accreditatieprocessen, maar uiteindelijk bleek de invloed van de indicatoren niet in alle cases hetzelfde te zijn, zoals geïllustreerd in onderstaand tabel.

Variabele	Indicatoren	UoC	UU	HZ
Organisatiestructuur	Organogram	0	0	0
	Besluitvormingsstructuur	0	+	+
Leiderschap en Managementstijl	Rol van de institutionele leider	0	+	+
	Management op faculteitsniveau	+	+	0
Intern Kwaliteitsbeleid	Beleidsplan Interne Kwaliteitszorg	0	+	+
	Intern kwaliteitszorgsysteem	-	+	+
	Kwaliteitsstructuur	-	+	+
	Betrokkenheid van stakeholders	+	+	+
	Inzet van externe deskundigen	+	0	0
Kwaliteitscultuur	Zorg voor kwaliteit	-	+	+
	Gedeelde verantwoordelijkheid, ownership, samenwerking	-	+	+
	Commitment van interne stakeholders	+	+	+
	Normen, waarden, tradities, gewoonten, gedrag van mensen	0	0	0
	Communicatiekanalen en interactie tussen interne stakeholders	-	+	+
Beschikbare middelen	Personeel	-	+	+
	Financiële middelen	-	+	+
	Faciliteiten	0	0	0

Legenda: + = feitelijk stimulerende factor; - = feitelijk belemmerende factor; 0 = neutraal.

Uit de vergelijkende analyses is gebleken dat alhoewel op variabelenniveau feitelijk kon worden bewezen dat elke variabele op de één of andere manier een impact heeft gehad op voortgang en de resultaten van de accreditatieprocessen in elke universiteit, op indicatorenniveau werden in alle drie instellingen een aantal feitelijke stimulansen, sommige feitelijke barrières, maar ook verschillende neutrale factoren geïdentificeerd. Uiteindelijk werden de algemeen geldende beïnvloedende factoren geïdentificeerd, maar ook de verschillen werden geopenbaard. We kunnen derhalve concluderen dat het effect van de geïdentificeerde potentiële beïnvloedende factoren verschillend is tussen de twee groepen instellingen, ondanks dat de ondernomen stappen vrijwel identiek waren.

Een belangrijke conclusie is dat in de Nederlandse instellingen het merendeel van de indicatoren als feitelijke stimulansen kunnen worden aangemerkt (UU: 76%; HZ: 70%;

UoC slechts 24%). In deze studie hebben wij geen diepgaand onderzoek gedaan naar de redenen die tot dergelijke hoge mate van stimulerende factoren in de Nederlandse instellingen heeft geleid. We veronderstellen echter dat het functioneren als lerende organisaties samen met de vele jaren van ervaring met externe evaluatieprocessen hiertoe heeft bijgedragen. In het verlengde hiervan is te verwachten dat bij de UoC (later ook bij de UA en USM) na verloop van tijd dit ook het geval zal zijn, mits de betrokken partijen leren van hun huidige ervaringen en dat de universiteit als een lerende organisatie begint te functioneren, terwijl de contingentie factoren naar behoren in acht worden genomen. Verdere studie over dit onderwerp wordt aanbevolen.

We hebben niet onderzocht waarom bij de Nederlandse instellingen geen barrières werden ervaren, maar we kunnen veronderstellen dat de krachten van de werkelijke stimulerende factoren de mogelijke hindernissen hebben geneutraliseerd. Bovendien is het opvallend om te constateren dat de grote meerderheid van de feitelijke barrières in UoC in de Nederlandse universiteiten juist daadwerkelijke stimulerende factoren bleken te zijn. Deze observatie geeft inderdaad aan dat bij de Nederlandse universiteiten na verloop van tijd de mogelijke belemmeringen weggewerkt konden worden of zelfs omgezet in werkelijke stimulerende factoren. Eens te meer wordt met deze conclusie de doorslaggevende rol benadrukt die het zijn van een lerende organisatie in combinatie met een langere ervaring met externe evaluatie spelen op het verloop van de accreditatieprocessen, dus op het bereiken en handhaven van de geaccrediteerde status.

Bovenstaande tabel laat tevens zien dat alleen twee algemeen geldende beïnvloedende factoren kunnen worden geïdentificeerd: betrokkenheid van de stakeholders en commitment van de interne stakeholders. Verder werd aangetoond dat sterke leiderschap en management op de verschillende organisatieniveaus ook stevig hebben bijgedragen tot positieve accreditatieresultaten. Hiermee komt de determinerende invloed van de menselijke factor aan het licht; het is de mens die bepalend was voor het stimuleren van de voortgang van de accreditatieprocessen en uiteindelijk het behalen van de geaccrediteerde status.

Verder laat de tabel zien dat twee indicatoren geen enkele invloed op de accreditatie processen hebben uitgeoefend: 'organogram' en 'faciliteiten'. Deze conclusie is echter geen bewijs dat de neutrale factoren nutteloos zijn. De organogrammen boden bijvoorbeeld goed zicht op de verdeling van de bevoegdheden en verantwoordelijk-heden op de verschillende organisatieniveaus en hebben daarmee licht geworpen op andere indicatoren, zoals de bevoegdheden en verantwoordelijkheden toegekend aan de verschillende leidinggevenden in de instellingen en bijgevolg hun verwachte betrokkenheid bij de accreditatieprocessen. Dit is vooral van belang voor de ontwikkeling en implementatie van een kwaliteitsstructuur. De relevantie van het organogram als indicator kan aldus worden verklaard door haar bijdrage aan het begrijpen van de andere indicatoren, hetgeen de onderlinge afhankelijkheid tussen de variabelen illusteert.

Eén van de conclusies uit de opgedane theoretische kennis en verworven inzichten is dat effectieve organisaties op een zodanige wijze georganiseerd dienen te worden dat de kracht van de stimulerende factoren tijdens veranderingsprocessen, waaronder accreditatieprocessen, sterker moet zijn dan die van belemmerende factoren waardoor het succesvol verloop van die processen vergemakkelijkt wordt. Met deze studie werd de grote verwevenheid tussen de onafhankelijke variabelen aangetoond. Bij de analyse tussen de vijf instellingen werd overduidelijk dat de vijf variabelen sterk met elkaar verbonden waren. Dit analytisch resultaat was één van de grootste uitdagingen aan het begin van de onderzoekperiode en bleek uiteindelijk ook waar te zijn. Geen van de onafhankelijke variabelen kon echt onafhankelijk van de andere opereren: bij het veranderen van één van hen worden de anderen ook in een bepaalde richting geduwd—maar niet altijd in dezelfde richting. Deze conclusie sluit nauw aan op de contingentietheorie.

Met deze studie werd ook de binding tussen de open-systeem benadering, de contingentietheorie en de theorie rondom lerende organisatie bevestigd. De organisatiecontext bleek van invloed te zijn op de mogelijkheden en beperkingen tijdens de accreditatieprocessen. Dit theoretisch perspectief illustreert dat zelfs als er enkele belangrijke organisatorische elementen van toepassing zijn op alle organisaties, het juist deze elementen zijn die de verschillen tussen de cases creëren.

Reflecteren op het theoretisch kader doemt ook een verklaring op voor de verschillen in aanpak tijdens de accreditatieprocessen van de bestudeerde instellingen. Hoewel alle vijf instellingen vrijwel dezelfde stappen hebben ondernomen tijdens hun accreditatieprocessen, konden er verschillen in de organisatie van deze processen worden waargenomen tussen enerzijds de Caribische-Nederlandse universiteiten en anderzijds de Nederlandse instellingen. Deze verschillen werden met name veroorzaakt door de lange ervaring met dit type processen bij de Nederlandse instellingen. Hierdoor werd bij hen langzaamaan interne expertise opgebouwd en een kwaliteitscultuur ontwikkeld. Deze factoren bleken determinerende, stimulerende factoren te zijn tijdens hun accreditatieprocessen, waardoor het behoud van de verworven geaccrediteerde status haalbaar is gebleken. Er kan aldus worden geconcludeerd dat ondanks dat de inrichting van deze processen zeer vergelijkbaar was, de factoren die hen in een bepaalde richting aanstuurden in alle gevallen niet hetzelfde waren. Desalniettemin heeft ook UoC voor vrijwel al haar opleidingen positieve beoordelingen van de NVAO gekregen. Nader onderzoek moet uitwijzen welke factoren daadwerkelijk hebben bijgedragen tot deze resultaten, ondanks het verschil met de Nederlandse universiteiten. Deze studie heeft echter wel aangetoond dat, zoals de aanhangers van de contingentietheorie aangaven, er niet één beste manier is voor het organiseren van een organisatie, dit is sterk afhankelijk van de organisatorische context.

In deze studie was het interessant om te onderzoeken in hoeverre de leiders en managers op de verschillende organisatieniveaus inderdaad zo machtig zijn als sommige theoretici beweren. Universiteiten worden immers beschouwd als professionele bureaucratieën, waar de expertise en dus ook de 'bestuurlijke macht' in

de handen liggen van de uitvoerende staf. Om deze belangrijke macht te balanceren is de algemene verwachting dat degenen in leidinggevende en management posities hoger zijn opgeleid dan degenen die deel uitmaken van de operationele kern om hun invloedrijkere macht te kunnen legitimeren. De theorie van 'new managerialism', die gedeelde verantwoordelijkheid en collegiale besluitvorming verkondigd, biedt tegenwicht tegen deze veronderstelling, met het argument dat teamwerk en het delen van bevoegdheden en verantwoordelijkheden onderdeel moeten zijn van gedistribueerd leiderschap in plaats van gecentraliseerd leiderschap. Op basis van de literatuurstudie kon worden geconcludeerd dat leiders en managers inderdaad als een bemoedigende factor tijdens accreditatieprocessen kunnen fungeren, mits zij zelf geëngageerd en betrokken zijn, en de ontwikkeling van een hoge mate van betrokkenheid en een kwaliteitscultuur op alle niveaus bemoedigen, waarbij zij optimaal gebruik maken van de beschikbare middelen. De Nederlandse instellingen bevestigden deze theoretische assumptie. Beide institutionele leiders waren zeer betrokken en toegewijd en hebben de betrokkendheid van de staf via formele en intern gereguleerde vergaderingen aangemoedigd. We konden inderdaad verifiëren dat gedistribueerd leiderschap op basis van een collegiale besluitvormingscultuur en toegestane professionele autonomie, aangemoedigd door de richtlijnen van het nieuwe managerialisme hebben bijgedragen aan de succesverhalen van beide universiteiten.

De onderzoeksvraag kon alleen voor de UoC worden beantwoord. De onderzoeksbevindingen tonen aan dat de groep van feitelijk stimulerende factoren, ook al was het de kleinste groep, de mogelijke negatieve invloed van de grotere groep potentiële barrières heeft geneutraliseerd. Met andere woorden, de kracht van de feitelijke stimulansen, met name voortkomend uit de daadkracht van de gezamenlijke menselijke factor, was voldoende om de voortgang van de accreditatieprocessen positief te beïnvloeden zodat uiteindelijk de felbegeerde accreditatiestatus voor de grote meerderheid van de UoC programma's kon worden bereikt, ongeacht de aangetroffen barrières.

Tot slot waren de onderzoeksresultaten richtinggevend voor de conceptualisering van het uiteindelijke overzicht met beïnvloedende factoren die een bijdrage leveren om de voortgang van accreditatieprocessen te bespoedigen opdat het accreditatiedoel voor de Caribisch-Nederlandse universiteiten kan worden bereikt en behouden. Vier onafhankelijke variabelen (leiderschap en managementstijl, kwaliteitscultuur, beschikbare middelen en kwaliteitszorgbeleid), verdeeld over 13 indicatoren, vormen het raamwerk dat kan worden toegepast voor het organiseren, aansturen en monitoren van accreditatieprocessen, opdat de kans op positief accreditatieresultaten kan worden vergroot. Afhankelijk van de impact van elke indicator en de onderlinge relatie tussen hen, kan elk van de geïdentificeerde potentiële invloedrijke factor tijdens accreditatie-processen uitgroeien tot een feitelijke stimulans of barrière. Met dit raamwerk worden de Caribisch-Nederlandse universiteiten in het bijzonder voorzien van een waardevolle en aangepaste instrument om hun accreditatieprocessen te faciliteren en te begeleiden, zodat ze beter in staat worden gesteld de mondiale kwaliteitseisen vast te binden aan de lokale mogelijkheden: *Tying down global to local*.

References

Alderman, G., & Brown, R. (2005). Can quality assurance survive the market? Accreditation and audit at the crossroads. *Higher Education Quarterly, 59*(4), 313-328.

Ali, E. (2008). *Higher/Tertiary education in the Caribbean: evaluation, accreditation, qualifications and certifications systems.* CRES.

Allen, R.-M. (2007). *Di ki manera? A social history of Afro-Curacaoans, 1863-1917. PhD-Dissertation.* Utrecht: SWP publications.

Alvesson, M. (2003). Methodology for close up studies – struggling with closeness and clossure. *Higher education, 46*, 167-193.

Amidon, S. R. (2005). Writing the learning organization. A framework for teaching and research. *Business Communication Quarterly, 68*(4), 406-428.

Amigoe. (2007, September 1). Veel Curaçaos talent blijft weg; 'Braindrain' inmiddels 70 procent. *Amigoe.*

Antilliaanse overheid. (1954). *Statuut der Nederlandse Koninkrijk.*

Antilliaanse overheid. (2004). *Publicatieblad Nederlandse Antillen (P.B. 2004, no. 34), Landsverordening van de 27ste februari 2004 houdende wijziging van de Landsverordening Universiteit van de Nederlandse Antillen (P.B. 1985, no. 43).* Curaçao: Staten van de Nederlandse Antillen.

Antilliaanse Overheid. (2010). *Zorgovereenkomst 2010, Universiteit Nederlandse Antillen,.* Curaçao: Antilliaanse Overheid & UNA.

Arubaanse Overheid. (2009). *National Integrated Strategic Plan.* Aruba.

Arubaanse overheid. (2011). *Landsverordening tot wijziging van de Landsverordening Universiteit van Aruba (AB 1988 no. 100).* Aruba: Staten van Aruba.

Badrawi, N. (2011). Globalizing forces and regional, national goals. *Paper presented at INQAAHE Conference 2011.*

Baer, L., Duin, A., & Ramaly, J. (2008). Smart change. *Planning for Higher education, 36*(2), 5-16.

Baldridge, J. (2001). Organizational Characteristics of Colleges and Universities. In C. Reader, *Institutional Management & Change in Higher Education: management and decision-making in higher education institutions.* (pp. 151-170). Utrecht: Lemma.

Baxter, P., & Jack, S. (2008). Qualitative Case Study Methodology: study design and implementation for novice researchers. *The Qualitative Report, 13*(4), 544-559.

Becher, T. (2000). Making audit acceptable: a collegial approach to quality assurance. In J. Brennan (Ed.), *Institutional Management and Change in Higher Education: Quality Management in Higher Education Institutions* (pp. 137-155). LEMMA Publishers.

Beckles, H. M., Perry, A., & Whitely, P. (2002). *The Brain Train: quality higher education and Caribbean development.* Jamaica: University of the West-Indies.

Bell, D., & Cullen, P. (2006). The higher education policy implications of globalization: a quality assurance agency perspective. *Paper presented AISHE Conference "Creating and sustaining an effective learning environment.*

Berings, D. (n.d.). Kwaliteitscultuur in het hoger onderwijs. De bijdrage van organisatiecultuur aan de ontwikkeling van kwaliteitszorg. *Thema, 4*(10).

Berings, D., Beerten, Z., Hulpiau, V., & Verhesschen, P. (2011). Quality culture in higher education: from theory to practice. In EUA, *Building Bridges: making sense of quality assurance in European, national and institutional contexts* (pp. 38-49). Belgium: European University Association.

Billing, D. (2004). International comparisons and trends in external quality assurance of higher education: Commonality or diversity? *Higher Education, 47*, 113-137.

Birnbaum, R. (1989). The cybernetic institution: Toward an integration of governance theories. *Higher Education, 18*, 239 - 253.

Birnbaum, R. (2000). *Management fads in higher education: where they come from, what they do, why they fail.* San Fransisco: Jossy-Bass.

Boddy, D. (2008). *Management* (Fourth edition ed.). Pearson Education Limited.

Boeije, H. (2005). *Analyseren in kwalitatief onderzoek.* Boom Onderwijs.

Bogue, E. G. (1998). Quality Assurance in Higher Education: the evolution of systems and design ideals. *New direction for Institutional Research, 99*, 7-18.

Bologna Declaration. (1999). Joint declaration of the European Ministers of Education.

Bridges, W. (2009). *Managing transitions.* Philadelphia: Da Capo Press.

Brussee, W., Broers, G., & Blomen, W. (2005). *Handboek Accreditatie. Het stelsel van kwaliteitszorg in het Nederlands hoger onderwijs.* Den Haag: Elsevier Overheid.

Bryman, A. (2007). Effective leadership in higher education: a literature review. *Studies in Higher Education, 32*(6), 693-710.

Carmicheal, R., Palermo, J., Reeve, L., & Vallence, K. (2001). Student learning: 'the heart of quality' in education and training. *Assessment and Evaluation in Higher Education, 26*(5), 449-463.

Carnoy, M. (2005). Globalization, educational trends and the open society. *Education and open society: a critical look at new perspectives and demands.* Open Society Institute Education Conference.

Casile, M., & Davis-Blake, A. (2002). When Accreditation Standards Change: Factors Affecting Differential Responsiveness of Public and Private Organizations. *Academy of Management Journal, 45*(1), 180-195.

Center for Quality Assurance UA. (2011). *Policy paper.* UA.

Centraal Bureau Statistiek. (2011). *Statistical Orientation Curaçao 2010 - 2011.* Curaçao: CBS.

Central Bureau of Statistics Aruba. (2010). *Fifth Population and Housing Census Aruba.* Aruba: CBS.

Central Bureau of Statistics Curaçao. (2012). *First results Census 2011 Curaçao.* Curaçao: CBS.

Central Bureau of Statistics Curaçao. (2013). *Curaçao in figures: Statistical Orientation Curaçao 2013.* Curaçao: CBS.

Charles, C. B. (2007). The evolution of quality assurance in higher education. *Faculty Working Papers from the School of Education* (Paper 13). Fayetteville State University.

Cohen, M., March, J., & Olsen, J. (1972). A Garbage Can Model of Organizational Choice. *Administrative Science Quarterly*, 1-25.

Commissie Hoger Onderwijs. (2002). *Beleidsplan op hoofdlijnen inzake het Antilliaanse Hoger Onderwijs.* Curaçao: Departement van Onderwijs.

Commissie Hoger Onderwijs. (2009). *Concept Landsverordening Hoger Onderwijs Nederlandse Antillen.* Willemstad, Curaçao: Ministerie van Onderwijs, Sport en Cultuur.

Commissie Toekomstbestendig Hoger Onderwijs stelsel. (2010). *Differentiëren in drievoud omwille van kwaliteit en verscheidenheid in het hoger onderwijs.*

Commissie Totaalbeeld UNA-problematiek. (2000). *Ban tuma kurashi.* Curaçao: Antilliaanse overheid.

Csizmadia, T. (2006). *Quality Management in Hungarian Higher education. Organisational responses to governmental policy.* Enschede: University of Twente.

Curaçaose overheid. (2007). *Landsverordening van de 28ste maart 2007 houdende vaststelling van de officiële talen.* Curaçao.

Currie, G., & Procter, S. (2005). The Antecedents of Middle Managers' Strategic contribution: the case of a professional bureaucracy. *Journal of Mangement Studies, 42*(7), 1325-1357.

Dahlgaard, J., Kristensen, K., & Kanji, G. (2000). Total Quality Management and Education. In J. Brennan (Ed.), *Institutional Management and Change in Higher Education, Quality Management in Higher Education Institution* (pp. 251-264). Lemma Publisher.

Daniel, J., Kanwar, A., & Uvalic-Trumbic, S. (2006). A Tectonic shift in Global Higher Education. *Change Magazine*.

390

Deem, R. (1998). 'New Managerialism' and Higher Education: the management of performances and cultures in universites in the United Kingdom. *International Studies in Sociology and Education, 8*(1), 47-70.

Deem, R. (2001). Globalisation, New Managerialism, Academic Capitalism in Universities: is the local dimension still important? *Comparative Education, 37*(1), 7-20.

Dent, E., & Goldberg, S. (1999). Challenging 'Resistance to change'. *Journal of Applied Behavioral Sience, 35*(1), 25-41.

Departement van Onderwijs . (2001). *Notulen Tripartiet Overleg Onderwijsministers in het Koninkrijk, Mei 2001.* St. Maarten: Antilliaanse Overheid.

Departement van Onderwijs. (1988). *Enseñansa pa un i tur. Education for one and all.* Curaçao.

Departement van Onderwijs. (1995). *Stappen naar een betere toekomst.* Curaçao.

Departement van Onderwijs. (1998). *Onderwijskwaliteit op de Nederlandse Antillen. Voortijdig schoolverlaten.* Curaçao.

Departement van Onderwijs. (1999). *Enseñansa Avansa den siglo 21. Beleidsvoorstelen voor de herstructurering van het Antilliaans voortgezet onderwijs.* Curaçao.

Dew, J., & Nearing, M. (2004). *Continuous quality improvement in higher education.* American Council on Education. Preager series on higher education.

Dill, D. (1999). Academic accountability and university adaptation: the architecture of an academic learning organization. *Higher Education, 38*(2), 127-154.

Dill, D. (2000). Through Deming's eyes: a cross-national analysis of quality assurance policies in higher education. In CHEPS, *Institutional management and change in Higher education. Quality Management in Higher Education Institutions* (pp. 309-328). Utrecht: LEMMA Publishers.

DiMaggio, P. J., & Powell, W. W. (1983). The Iron Cage Revisited: Institutional Isomorphism and Collective Rationality in Organizational Fields. *American Sociological Review, 48*(2), 147-160.

Directie Onderwijs Aruba. (2002). *Notitie inzake het hoger onderwijsbeleid op Aruba.* Aruba.

Dobbin, F., Simmons, B., & Garrett, G. (2007). The Global Diffusion of Public Policies: Social Construction, Coercion Competition, or Learning? *Annual Review of Sociology, 33*, 449-472.

Dodd, A. (2004). Accreditation as a catalyst for institutional effectiveness. *New directions for institutional research, 123*, 13-25.

Donaldson, L. (2001). *The Contingency Theory of Organizations.* SAGE Publications.

Donaldson, L. (2008). The conflict between contingency and institutional theories in organizational design. In R. B. (eds), *Designing organizations* (pp. 3-20). Springer Sciences + Business Media.

Douma, T. (2004). *Accreditatie een (zelf)diagnose.* Den Haag: SDU Uitgevers.

Douma, T. (2009). *Accreditatie, oud en nieuw. Kwaliteitszorg hoger onderwijs in Nederland en Vlaanderen.* Den Haag: SDU Uitgevers.

Duits, A. (2004). Vorming is een voorwaarde voor sociale mobiliteit. In UNA, *Vanuit de UNA gezien* (pp. 113-121). Curaçao: UNA.

Duits, A. (2005). The Universiteit van de Nederlandse Antillen: Bouwen aan garanties voor de toekomst. In UNA, *UNA Publicaties 2005* (pp. 12-15). Curaçao: University of the Netherlands Antilles.

Dul, J., & Hak, T. (2008). *Case Study Methodology in Business Research.* Elsevier Ltd.

Ebong-Harstrup, I. (2004). Key factors in the socio-economic development of small island states. In *UNA-publicaties 2005* (pp. 18-23). Curaçao: UNA.

Eisenhardt, K. M. (1989). Building theories from case study research. *Academy of Management Review, 14*(4), 532 - 550.

Emerencia, L. (2007). *Learning and creating together.* Utrecht: SWP publications.

Enders, J., & Fullon, O. (2002). Blurring boundaries and blistering institutions: an introduction. In *Higher education in a globalizing world* (pp. 1-14). Kluwer Academic Publishers.

ENQA. (2005). *Guidelines for external review of quality assurance agencies in the EHEA.*

ENQA. (2009). *Standards and Guidelines for Quality Assurance in European Higher Education Area - 3rd edition.*

Ernst & Young. (2000). *Onderzoek naar de effectiviteit en efficiëntie van de werkzaamheden van de Universiteit van de Nederlandse Antillen.* Willemstad, Curaçao.

European University Association. (2001). *Salamanca Convention 2001. The Bologna process and the European Higher Education Area.* Genève: EUA.

Fennema, M.-J., Salve, F., & Van der Zande, L. (2010). Maatwerk voor Kwaliteit. *Thema, 4.*

Flyvbjerg, B. (2004). Five misunderstandings about case-study research. *Qualitative Research Practice*, 420-434.

Fralinger, B., & Olson, V. (2007). Organizational culture at the university level: a study using the OCAI instrument. *Journal of College Teaching and Learning, 4*(11), 85-98.

Frederiks, M., Westerheijden, D., & Weusthof, P. (1994a). Effects of quality assessment in Dutch Higher education. *European Journal of Education, 29*(2), 181-199.

Frederiks, M., Westerheijden, D., & Weusthof, P. (1994b). Stakeholders in Quality: Improvement or Accountability in Quality Assessment in Five Higher Education Systems. In L. Goedegebuure, & F. Van Vught, *Comparative Policy Studies in Higher Education* (pp. 95-126). Utrecht: Lemma.

GEO Yearbook. (2003). *Overview Small island Development States.*

Gerring, J. (2007). *Case study research. Principles and practices.* Cambridge University Press.

Giesecke, J., & McNeil, B. (2004). Transitioning to the Learning Organization. *Library Trends, Organizational development and Leadership, 53*(1), 54-67.

Gift, S., Leo-Rhynie, E., & Moniquette, J. (2006). Quality assurance of transnational education in the English speaking Caribbean. *Quality in Higher Education, 12*(2), 125-133.

Glasner, A. (2006). Education for the 21st century: Re-engineering for quality enhancement. *The UWI Quality Education Forum, 12*, 69-79.

Goddard, J., & Puukka, J. (2008). The engagment of higher education institution in regional development: an overview of the opportunities and challenges. *Higher Education, 20*(2), 11-42.

Goede, M. (2008). Globalization of small islands: the case of Curaçao. *International Journal of Social Economics, 35*(5), 344-363.

Gordon, G. (2002). The roles of leadership and ownership in building an effective quality culture. *Quality in Higher Education, 8*(1), 97-106.

Gouws, A., & Waghid, Y. (2006). Higher education quality in South Africa: Accreditation in perspective. *South Africa Journal of Higher Education, 20*(6), 751-761.

Graumans, J. (2000). Doelmatige organisatie van instellingen voor hoger onderwijs. In G. t. Dam, *Onderwijskune Hoger Onderwijs, Handboek voor docenten* (pp. 353-371). Van Gorcum.

Green, D. (1994). *What is quality in Higher Education.* London: Society for research into Higher Education.

Gumport, P. (2000). Academic restructuring: Organizational change and institutional. *Higher Education, 39*, 67-91.

Hamdan, A. (2012). Autoethnography as a Genre of Qualitative Research: A Journey Inside Out. *International Journal of Qualitative Methods, 11*(5), 585-606.

Hancock, D., & Algozinne, B. (2011). *Doing Case Study Research: a practical guide for beginning researchers.* Columbia University: Teacher College Press.

Hanna, D., & Latchem, C. (2002). Beyond national borders: Transforming higher education institutions. *Journal of Studies in International Education, 6*(2), 115-133.

Harvey, L. (1999). Quality in Higher Education. *Swedish Quality Conference Gotenborg.* Birmingham: University of Central England.

Harvey, L. (2004). The power of accreditation: views of academics. *Journal of Higher Education Policy and Management, 26*(2), 207-223.

Harvey, L., & Green, D. (1993). Defining quality. *Assessment & Evaluation in Higher Education, 18*(1), 9-35.

Harvey, L., & Newton, J. (2004). Transforming Quality Evaluation. *Quality in Higher Education, 10*(2), 149-165.

Harvey, L., & Newton, J. (2007). Transforming quality evaluation: moving on. In D. Westerheijden, B. Stensaker, & M. J. Rosa, *Quality Assurance in Higher Education: Trends in Regulation, Translation and Transformation* (pp. 225-245). Dordrecht: Springer.

Harvey, L., & Stensaker, B. (2008). Quality culture: understandings, boundaries and linkages. *European Journal of Education, 43*(4), 427-442.

Hayward, F. (2008). Strategic planning for Higher Education in developing countries: challenges and lessons. *Planning for Higher Education, 36*(3), 5-21.

Hobéon Groep. (2009a). *Beoordeling en Adviesrapport Bacheloropleidingen BE en CE-Universiteit van Aruba.* Den Haag: Hobéon Certificering BV.

Hobéon Groep. (2009b). *Rapportage Baseline Assessment Universiteit van Aruba, Infrastructuur Algemeen.* Den Haag: Hobéon Certificering BV.

Hobéon Groep. (2010). *Rapportage Baseline Assessment Universiteit van Aruba, Personeel en Kwaliteitszorg.* Den Haag: Hobéon Certificering BV.

Hofstede, G. (1990). Measuring Organizational Cultures: a qualitative and quantitative study across twenty case. *Administrative Science Quarterly, 35*, 286-319.

Hogeschool Zeeland. (2008). *Integriteitcode.* Vlissingen: Hogeschool Zeeland.

Hogeschool Zeeland. (2009a). *De persoonlijke hogeschool. Strategische Instellingsplan 2009 - 2012.* Vlissingen: Hogeschool Zeeland.

Hogeschool Zeeland. (2009b). *HZ Instellingsplan 2009 - 2012. Brondocument.* Vlissingen: Hogeschool Zeeland.

Hogeschool Zeeland. (2009c). *Onderwijskompas.* Vlissingen: Hogeschool Zeeland.

Hogeschool Zeeland. (2010a). *Bestuurs- en beheersreglement.* Vlissingen: Hogeschool Zeeland.

Hogeschool Zeeland. (2010b). *Kwaliteitsmanagement onderwijs en onderzoek Hogeschool Zeeland 2010 -2012.* Vlissingen: Hogeschool Zeeland.

Hooiberg, R., & Choi, J. (2001). The impact of organizational characteristics on leadership effective models. *Administration & Society, 33*(4), 403-431.

Houston, D. (2007). Rethinking quality and improvement in higher education. *Quality assurance in education, 16*(1), 61-79.

Howe, G. (2000). *Higher education in the Caribbean: past, present and future directions.* Jamaica: The University of the West Indies Press.

Howe, G. (2003). *Contending with change: Reviewing Tertiary Education in the English-speaking Caribbean.* Jamaica: University of the West-Indies.

HZ University for Applied Sciences. (2011a). *Academic and Examinations regulations.* Vlissingen: Hogeschool Zeeland.

HZ University of Applied Sciences. (2011b). *Klokkenluiderreglement.* Vlissingen: Hogeschool Zeeland.

HZ University of Applied Sciences. (2011c). *Statuten Stichting HZ University of Applied Sciences.* Vlissingen: Hogeschool Zeeland.

HZ University of Applied Sciences. (2012a). *Jaarverslag 2011.* Vlissingen: Hogeschool Zeeland.

HZ University of Applied Sciences. (2012b). *Notitie Prestatieafspraken OCW.* Vlissingen: HZ University of Applied Sciences.

HZ University of Applied Sciences. (2012c). *Studentenstatuut HZ University of Applied Sciences (instellingsdeel).* Vlissingen: HZ University of Applied Sciences.

HZ University of Applied Sciences. (2012d). *Zelfevaluatierapport Bachelor of Engineering, Opleiding Algemene Operationele Technologie.* Vlissingen: Hogeschool Zeeland.

INQAAHE. (2007). *Guidelines of Good Practice in Quality Assurance.* INQAAHE.

Inspectie van het Onderwijs. (2009). *Accreditatie nieuwe stijl. Evaluatie van een nieuw accreditatiestelsel in Nederland en Vlaanderen.* Utrecht: Inspectie van het Onderwijs.

Inspectie van het Onderwijs. (2013). *Onderwijsverslag 2011-2012.* Utrecht, Nederland.

Isabella, S. (2011). One decade of accreditation experiences at the University of the Netherlands Antilles: results of a case study. In R. Severing, N. Faraclas, C. Weijer, E. Echteld, & (Eds), *Iguana's Newfound Voices* (pp. 103-112). Curaçao/Puerto Rico: FPI/UNA/UPR.

Island Territory of St. Maarten. (2009). *Project Proposal Social Economic Initiatieve, USM Regional.* St. Maarten.

Jakobi, A. (2007). The knowledge society and global dynamics in education politics. *European Educational Research Journal, 6*(1), 39-51.

Jeliazkova, M., & Westerheijden, D. (2002). Systemic adaptation to a changing environment: Towards a next generation of quality assurance models. *Higher Education, 44*(3-4), 433-448.

Keller, G. (2006). Higher education management: challenges and strategies. In *International Handbook for Higher Education* (pp. 220-242).

Kemenade, E. v. (2009). *Certificering, accreditatie en de professional. case study over hogescholen.* Erasmus University Rotterdam.

Kezar, A. (2001). *Understanding and facilitating change in higher education in the 21st century.* ERIC Clearinghouse on Higher Education.

Kezar, A., & Eckel, D. (2002). The Effect of Institutional Culture on Change Strategies in Higher Education: Universal principles or cultarally responsive concepts. *The Journal of Higher Education, 73*(4), 435-460.

Knight, F., & Martinez-Vergne, T. (2005). *Contemporary Caribbean cultures and societies in global context.* UWI Press.

Koen, M., & Bitzer, E. (2010). Academic leadership in higher education: a participative perspective form one institution. *Academic Leadership, 1*, 1-11.

Kondakci, Y., & Van den Broek, H. (2009). Institutional imperatives versus emergent dynamics: a case study on continuous change in higher education. *Higher Education, 58*, 439-464.

Kraatz, M., & Zajac, E. (2001). How Organizational Resources Affect Strategic Change and Performance in Turbulent Environments: Theory and Evidence. *Organization Science, 12*(5), 632-657.

Kristensen, B. (2010). Has external quality assurance actually improved quality in higher education over the course of 20 years of 'quality revolution'? *Quality in Higher Education, 16*(2), 153-157.

Kwikkers, P., Van Damme, D., & Douma, T. (2003). *Accreditatie in het hoger onderwijs. Achtergrond en praktijk in Nederland en Vlaanderen.* Den Haag: SDU Uitgevers.

Kwikkers, P., Westerheijden, D., Vercruyse, N., Schalkwijk, E., Peels, C., & Frederik, H. (2011). *Accreditatie en kwaliteitszorg. De accreditatie van hoger onderwijs in Nederland en Vlaanderen.* Den Haag: SDU Uitgevers.

Lawrence, P., & Lorsch, J. (1967). Differentiation and Integration in Complex Organizations. *Administrative Science Quarterly, 12*(1), 1-47.

Leo-Rhynie, E. (2006). A concern for quality, a need for accountability. *The UWI Quality Education Forum, 12*, 5-16.

Leo-Rhynie, E., & Hamilton, M. (2007). Creating a culture of quality; the role of the University of the West Indies in the Caribbean education. *Paper presented at the 'Conference on the Caribbean.* Washington D.C.

Lomas, L. (1999). The culture and quality of higher education institutions: examing the links. *Quality assurance in Education, 7*(1), 30 - 34.

Lomas, L. (2004). Embedding quality: the challenges for higher education. *Quality Assurance in Education, 12*(4), 157 - 165.

Luckett, K. (2003). Tensions between 'fitness of purpose' and 'fitness for purpose': the introduction of a national quality assurance system in South Africa. *15th International Conference on Assessing Quality in Higher Education.* Cape Town.

Luijten-Lub, A. (2007). *Choices in internationalisation. How higher education institutions respond to internationalisation, Europeanisation and globalisation.* CHEPS/University of Twente.

Manley, M. (1990). *The politics of change.* Heinemann Publisher (Caribbean) Limited.

Marcha, V., & Verweel, P. (2003). *Kultura di miedu.* Amsterdam: SWP publications.

Marginson, S., & Van Der Wende, M. (2007). *Globalization and higher education.* OECD, Directorate of Education.

Martin, M., & Stella, A. (2007). *External quality assurance in higher education: making choices.* UNESCO, Fundamentals of Planning, nr. 85.

Mathison, S. (1988). Why triangulate? *Educational researcher*, 13-17.

Maxwell, J. (2008). Designing a qualitative study. *Applied Research Design*, 214-253.

Meade, P. (2000). Utilizing the university as a learning organization to facilitate quality improvement. In CHEPS, *Instituional Management and Change in Higher Education: quality management in higher education institutions* (pp. 237-250). Utrecht: Lemma.

Middlehurst, R. (1997). Reinventing leadership: The leadership challenge. *Quality in Higher Education, 3*, 183-198.

Miller, E. (2002). Quality assurance in higher education in the Commonwealth Caribbean. *Paper presented at the seminar "Higher education and science and technology in Latin America and the Caribbean: Responding to expansion and diversification".* Brazil.

Ministerie van OC&W. (2010). Wet Hoger Onderwijs en Wetenschappen. Den Haag: Nederlandse Overheid.

Ministerie van OC&W. (2011a). *Hoofdlijnenakkoord OCW - HBO-Raad.*

Ministerie van OC&W. (2011b). *Kwaliteit in verscheidenheid. Strategische agenda Hoger Onderwijs, Onderzoek en Wetenschap.* Den Haag: Ministerie OCW.

Ministerie van Onderwijs, Cultuur, Jeugd- en Sportzaken Nederlandse Antillen. (2000). *Onderwijs voorwaarde voor nationaal herstel en nationale ontwikkeling.* Curaçao.

Minor, J. (2006). A case of complex governance. *Journal of the Professioriate, 1*(2), 22 - 37.

Mintzberg, H. (1979). An emerging strategy of direct research. *Administrative Science Quarterly, 24*, 582-590.

Mintzberg, H. (1980). Structure in 5's: A synthesis of the research on organizational design. *Management Science, 26*(3), 322-341.

Mintzberg, H. (1981). Organization design: fashion or fit? *Harvard Business Review*, 103-116.

Mintzberg, H. (2001). The Professional Bureaucracy. In CHEPS, *Insitutional Management and Change in Higher Education. Management decision-making in Higher Education Institutions* (pp. 171-194). Utrecht: Lemma.

Narain, G. (2000). *Rede bij de aanvaarding van de functie van Rector Magnificus van de UNA.* Curaçao: UNA.

Narain, G. (2004). Zo ooit een volk op weg. De rol van de UNA en mentale onafhankelijkheid. In UNA, *Rene Romer als inspirator. Actualiseringen van zijn gedachtegoed* (pp. 100-115). Curacao: University of the Netherlands Antilles.

Narain, G. (2005). Toespraak ter gelegenheid van het 25-jarig jubileum van de UNA. In UNA, *UNA Publicactions 2005* (pp. 8-11). Curaçao: UNA.

Negandhi, A., & Reimann, B. (1972). A Contingency Theory of Organization re-examined in the Context of a Developing Country. *The Academy of Management Journal, 15*(2), 137-146.

NQA. (2011). *Deskaudit Teacher Education Programme University of St. Maarten.* The Netherlands: NQA.

NVAO. (2003). *Beoordelingskaders Accreditatiestelsel hoger onderwijs.* Den Haag, Nederland: NVAO.

NVAO. (2011). *Assessment frameworks for the higher education accreditation system.* Den Haag, Nederland: NVAO.

NVAO. (2012). *Adviesrapport Universiteit Utrecht Instellingstoets Kwaliteitszorg.* Den Haag: NVAO.

OECD. (2013). *Education at a Glance 2013: OECD Indicators.* Paris: OECD.

Overheid Aruba. (1985). *Staatsregeling Aruba. Publicatieblad AB. 1985 no. 26.*

Overheid Curaçao. (2010). *Staatsregeling Curaçao. Afkondigingsblad Curaçao 2010, no.86.*

Overheid St. Maarten. (2010). *Staatsregeling St. Maarten Publicatieblad AB 2010, GT no. 1.*

Palmer, B. (2004). *Making change work: practical tools for overcoming human resistance to change.* ASQ Quality Press.

Parkins, L. (2007). *The English speaking Caribbean: regional and global context.* Jamaica: University of the West-Indies .

Parri, J. (2006). Quality in Higher Education. *Management, 2*(11), 107-111.

Pearce, C., & Sims, H. J. (2002). Vertical versus shared leadership as predictors of the effectiveness of change management teams: An examination of aversive, directive, transactional, transformational, and empowering leader behaviors. *Group Dynamics: Theory, Research, and Practice, 6*, 172-197.

Pertrides, L., McClelland, S., & Nodine, T. (2004). Using external accountability mandates to create internal change. *Planning for Higher Education, 33*(1), 44-50.

Pratasavitskaya, H., & Stensaker, B. (2010). Quality Management in Higher Education: towards a better understanding of an emerging field. *Quality in Higher Education, 16*(1), 37-50.

PWC. (2012). *Agreed upon procedures on the estimated costs for the implementation of the plans as indicated in the Social Plan.* St. Maarten: PWC.

Redmond, R., Curtis, E., Noone, T., & Keenan, P. (2008). Quality in higher education. The contribution of Edward Deming's principles. *International Journal of Educational Management, 22*(5), 432-441.

Robertson, R. (1994). Globalisation or Glocalisation. *Journal of International Communication, 1*(1), 33-52.

Römer, A. (1995). *Bida religioso den siglo XX; 75 aña Parokia di Santa Famila.* Curaçao.

SACS. (2012). *AdvancED Accreditation Policies and Procedures.* SACS.

Schargel, F. P. (1994). *Transforming education through Total Quality Management: A Practitioner's Guide.* Princeton: Eye on Education, Inc.

Schoonhoven, C. (1981). Problems with Contingency Theory: Testing Assumptions hidden within the language of Contingency "Theory". *Administrative Science Quarterly, 26*(3), 349-377.

Schwarz, S., & Westerheijden, D. (2004). Accreditation in the Framework of Evaluation Activities: A Comparative Study in the European Higher Education Area. In S. Schwartz, & D. Westerheijden (Eds.), *Accreditation and Evaluation in the European Higher Education* (pp. 1-41). Dordrecht: Kluwer Academic Publishers.

Senge, P., Cambron McCabe, N., Lucas, T., Smith, B., Dutton, J., & Kleiner, A. (2001). *Lerende scholen. Het Vijfde Discipline Handboek voor onderwijzers. ouders en iedereen die betrokken is bij scholing.* Academic Services.

Silver, H. (2003). Does a university have a culture? *Studies in Higher Education, 28*(2), 157-169.

Sorbonne Joint Declaration. (1998). JoJoint Declaration on harmonisation of the architecture of the European higher education system.

Soverall, W., & Khan, J. (2009). The Changing Face of Organizational culture and public sector performance. *The Journal of Public Sector Policy Analysis, 3*, 81-102.

Staatssecretaris van Onderwijs, Cultuur en Wetenschap. (2005, September 26). Brief aan de Voorzitter van de Tweede Kamer der Staten-Generaal. *HO/BS/05/35887*. Den Haag.

Stake, R. E. (2006). *Multiple case study analysis.* New York: The Guilford Press.

Stensaker, B. (2003). Trance, Transparency and Transformation: the impact of external quality monitoring on Higher Education. *Quality in Higher Education, 9*(2), 151-159.

Stichting Overheidsaccountants Bureau. (2011). *Findings financial and administrative audit of the University of St. Maarten.* St. Maarten: SOAB.

Strydom, J., Zulu, N., & Murray, L. (2004). Quality, Culture and Change. *Quality in Higher Education, 10*(3), 207-217.

Stuurgroep Herstructurering AVO Aruba (SHA). (1998). *Beleidsnota "Na caminda pa restructuracion di nos enseñansa secundario general".* Aruba.

Thompson, J. (1967). *Organizations in Action.* McGraw-Hill.

Tierney, W. (1988). Organizational Culture in Higher Education: Defining the Essentials. *The Journal of Higher Education, 59*(1), 2-21.

Torraco, R., & Hoover, R. (2005). Organization development and change in universities: Implications for research and practice. *Advances in Developing Human Resources, 7*(3), 422-437.

Tromp, E. (2007). The Caribbean marketplace; succeeding in a globalizing world. *TOG Partners Conference 2007.* Curaçao.

UNESCO & APQN. (2007). *UNESCO-APQN toolkit: Regulating the quality of cross-border education.* Thailand: UNESCO.

UNESCO. (2007). Regional and multi-state solutions for small states for quality assurance of higher education: a synthesis report. *Third Global Forum on International Quality Assurance, Accreditation and the recognition of Qualifications in Higher Education.* Tanzania: UNESCO.

UNESCO/OECD. (2005). *Guidelines for Quality provision in Cross-border Higher Education.* Paris: OECD.

Universiteit Utrecht. (2005). *Een eind op weg. De juridische bacheloropleiding onder de loep genomen.* Utrecht: Departement Rechtsgeleerdheid.

Universiteit Utrecht. (2006). *Maatwerk. Advies Universitaire Commissie Bachelor-Master.* Utrecht: Universitaire Commissie Bachelor-Master.

Universiteit Utrecht. (2007). *Rapportage Commissie Evaluatie Masteropleidingen 2007.* Utrecht: Departement Rechtsgeleerdheid.

Universiteit Utrecht. (2008). *Interne Kwaliteitszorg Sociale Wetenschappen.* Faculteit Sociale Wetenschappen: Universiteit Utrecht.

Universiteit Utrecht. (2010). *Zelfevaluatie bachelor- en masteropleidingen Rechtsgeleerdheid. Algemeen Rapport. Faculteit Recht, Economie, Bestuur en Organisatie. Departement Rechtsgeleerdheid.* Utrecht: Universiteit Utrecht.

Universiteit Utrecht. (2011a). *Bestuurs- en Beheersreglement.* Utrecht: Utrecht University.

Universiteit Utrecht. (2011b). *Curiosity driven, relevant to society. Strategisch Plan Universiteit Utrecht 2012 - 2016.* Utrecht: Universiteit Utrecht.

Universiteit Utrecht. (2011c). *Richtlijnen Onderwijs Universiteit Utrecht; Teaching Model 3.0.* Utrecht: Universiteit Utrecht.

Universiteit Utrecht. (2011d). *Zelfevaluatie Universiteit Utrecht in het kader van de NVAO instellingstoets kwaliteitszorg.* Utrecht: Universiteit Utrecht.

Universiteit Utrecht. (2012a). *An overall impression of 2011.* Utrecht: Universiteit Utrecht.

Universiteit Utrecht. (2012b). *Zelfevaluatierapport Bacheloropleiding Onderwijskunde.* Utrecht: Universiteit Utrecht.

Universiteit Utrecht. (n.d.). *Code of Conduct.* Utrecht: Universiteit Utrecht.

University of Aruba. (2004). *Strategic Plan University of Aruba 2004 - 2014. A vision on the long term development of the University of Aruba.* Aruba: UA.

University of Aruba. (2006). *Beleidsnota Kwaliteitszorg Universiteit van Aruba.* Aruba: University of Aruba.

University of Aruba. (2009). *Programmabeschrijvingen voor de Baseline Assessment Faculteit der Rechtsgeleerdheid.* Aruba: University of Aruba.

University of Aruba. (2011a). *Actieplan FAS, inclusief Accreditatiescan 2010.* Aruba: University of Aruba.

University of Aruba. (2011b). *Actieplan FdR, inclusief Accreditatiescan 2010.* Aruba: University of Aruba.

University of Aruba. (2011c). *Actieplan FEF, inclusief Accreditatiescan 2010.* Aruba: University of Aruba.

University of Aruba. (2011d). *Action Plan FHTMS, including Accreditation Scan 2010.* Aruba: University of Aruba.

University of St. Martin. (2003). *Statutes USM.* St. Maarten: USM.

University of St. Martin. (2010a). *Code of Ethics.* St. Maarten: USM.

University of St. Martin. (2010b). *Revised Project Plan for the New Teacher Training Program.* St. Maarten: USM.

University of St. Martin. (2010c). *USM Response on NACSI Midterm Evaluation 2009; Teacher Education Program for Foundation Based Education.* St. Maarten: USM.

University of St. Martin. (2011a). *Annual Report 2009.* St. Maarten: USM.

University of St. Martin. (2011b). *Business Plan. Toward a brighter future.* St. Maarten: USM.

University of St. Martin. (2012a). *Aanvraag samenwerkingsmiddelen Curaçao, Aruba en St. Maarten.* St. Maarten: USM.

University of St. Martin. (2012b). *Plan of approach BA of Education Program.* St. Maarten: USM.

University of St. Martin. (2012c). *Social Plan 2012.* St. Maarten: USM.

University of St. Martin. (n.d.). *The Academic Committee.* St. Maarten: USM.

University of the Netherlands Antilles. (2001). *Strategic Plan: Self Analysis, 2001 - 2005.* Curacao: UNA.

University of the Netherlands Antilles. (2003). *Rapport Nulmeting UNA-opleidingen.* Curaçao: UNA.

University of the Netherlands Antilles. (2004a). *Kwaliteit in onze universiteit: doel, taken en werkwijze van het Kwaliteitsteam van de UNA.* Curaçao: UNA.

University of the Netherlands Antilles. (2004b). *Rapport Nulmeting Ondersteunende Diensten UNA.* Curaçao: UNA.

University of the Netherlands Antilles. (2005a). *Delivering future leaders of the Caribbean. Strategic Plan 2005 – 2010.* Curaçao: UNA.

University of the Netherlands Antilles. (2005b). *Interne kwaliteitszorg UNA: een systeem voor interne kwaliteitszorg.* Curaçao: UNA.

University of the Netherlands Antilles. (2006b). *Beleidsnotitie inzet Gastdocenten. Werven en werken met gastdocenten.* Curaçao: UNA.

University of the Netherlands Antilles. (2006c). *Het kan altijd Beter! Beleidskader Kwaliteitszorg 2005 - 2010.* Curaçao: UNA.

University of the Netherlands Antilles. (2006d). *Kijk op Kwaliteit in het Hoger Onderwijs. Eindverslag Conferentie 2006.* Curaçao: UNA.

University of the Netherlands Antilles. (2008). *Handboek Zelfevaluatie, inclusief samenstellen ZER. Richtlijnen voor de inhoudelijke en procesmatige voorbereiding en uitvoering van de Zelfevaluatie bij de faculteiten.* Curaçao: UNA.

University of the Netherlands Antilles. (2009a). *Informatiedossier Bachelor Social Work, Faculteit Maatschappij en Gedragswetenschappen.* Curaçao: UNA.

University of the Netherlands Antilles. (2009b). *Informatiedossier Fiscaal Recht & Economie, Faculteit der Sociaal-Economische Wetenschappen.* Curaçao: UNA.

University of the Netherlands Antilles. (2009c). *Schrijfwijzer Zelfevaluatierapport voor HBO-opleidingen. Richtlijnen voor het samenstellen van een ZER, inclusief de bewijsdocumenten.* Curaçao: UNA.

University of the Netherlands Antilles. (2010a). *Zelfevaluatierapport Algemene Faculteit, Tweedegraads Lerarenopleidingen Papiamentu, Nederlands, Engels en Spaans, Deel 1 en Deel 2.* Curaçao: UNA.

University of the Netherlands Antilles. (2010b). *Zelfevaluatierapport Faculteit der Technische Wetenschappen, opleidingen Bouwkunde en Civiele Techniek.* Curaçao: UNA.

University of the Netherlands Antilles. (2010c). *Zelfevaluatierapport Faculteit der Technische Wetenschappen, opleidingen Elektrsche Systemen en Informatie en Communicatie Technologie.* Curaçao: UNA.

University of the Netherlands Antilles. (2010d). *Zelfevaluatierapport Faculteit der Technische Wetenschappen, opleiding Industriële Technologie.* Curaçao: UNA.

University of the Netherlands Antilles. (2011a). *Beleidsnotitie Taakbelasting Onderwijzend Personeel.* Curaçao: UNA.

University of the Netherlands Antilles. (2011b). *Consolideren en Verbeteren. Beleidsplan Kwaliteitszorg, 2011 - 2015.* Curaçao: UNA.

University of the Netherlands Antilles. (2011c). *Integraal Human Resource Beleid.UNA 2011-2015.* Curaçao: UNA.

University of the Netherlands Antilles. (2011d). *Visiedocument 2012 - 2017.* Curaçao: UNA.

University of the Netherlands Antilles. (2011e). *Zelfevaluatierapport Faculteit der Rechtgeleerdheid, Bachelor- en Masteropleiding Recht.* Curaçao: UNA.

University of the Netherlands Antilles. (2012a). *Concept Onderzoeksrapport Gastdocentenbeleid.*

University of the Netherlands Antilles. (2012b). *Time for the next level. Concept Positioneringsdocument Dept. of Quality Assurance.* Curaçao: UNA.

Uvalic-Trumbic, S. (2007). The international politics of quality assurance and accreditation: from legal instruments to communities of practice. *Higher edication in the world*, 59-78.

Van Ameijde, J., Nelson, P., Bilsberry, J., & van Meurs, N. (2009). Improving Leadership in Higher Education Institutions: a distributed perspective. *Higher Education, 58*(6), 763-779.

Van Bruggen, J., Scheele, J., & Westerheijden, D. (1998). To be continued.... Syntheses and trends. In J. P. Scheele, P. A. Maassen, & D. F. Westerheijden (Eds.), *To be Continued . . . : Follow-Up of Quality Assurance in Higher Education.* (pp. 83-95). Maarssen: Elsevier/De Tijdstroom.

Van Damme, D. (2000). Internationalization and quality asssurance: Towards worldwide accreditation. *European Journal for Education Law and Policy, 4*, 1-20.

Van Damme, D. (2001). Higher education in the age of globalization: the need for a new regulatory framework for recognition, quality assurance and accreditation. *Paper presented at UNESCO Expert Meeting 2001.* Paris.

Van Damme, D. (2001). Quality issues in the internationalisation of higher education. *Higher Education, 41*, 415-441.

Van Vught, F., & Westerheijden, D. (1994). Towards a general model of quality assessment in higher education. *Higher Education, 28*, 355-371.

Van Vught, F., Wende, M. van der., & Westerheijden, D. (2002). Globalization and internationalization: policy agendas compared. In *Higher education in a globalized world* (pp. 103-120).

Vermaak, H. (n.d.). *Veranderkunde in zeven vragen.* Utrecht: Twijnstra & Gudde.

Vermeulen, E., & Kammen van, K. (2002a). Iets nieuws onder de zon? Invoering van Bachelor-Master aan de Universiteit Utrecht. Deel 1: Het onderwijsconcept. *Thema, 2*, 4-12.

Vermeulen, E., & Kammen van, K. (2002b). Iets nieuws onder de zon? Invoering van Bachelor-Master aan de Universiteit Utrecht. Deel 2: Het invoeringsproces. *Thema, 4*, 4-12.

Viara, M. (2004). Globalization and higher education organizational change: a framework for analysis. *Higher Education, 48*, 483 - 510.

Vroeijenstijn, A. (1995). *Improvement and Accountability, Navigating between Scylla and Charybdis: Guide for External Quality Assessment in Higher Education.* London: Jessica Kingsley.

VSNU. (2001). *Naar een Keur voor Kwaliteit. Een voorstel voor de inrichting van accreditering in het Nederlands Hoger Onderwijs.*

VSNU. (2011). *General Agreement between Ministry of Education, Culture and Science and the Dutch universities.* VSNU.

Watson, D., & Maddison, E. (2005). *Managing Institutional Self-Study.* Maidenhead, Berks: Open University Press.

Weick, K. (1976). Educational organizations as loosely coupled systems. *Adninistrative Science Quarterly, 21*(1), 1-19.

Westerheijden, D. (2001). Ex oriente lux?: national and multiple accreditation in Europe after the fall of the wall and after Bologna. *Quality in Higher Education, 7*(1), 65-75.

Westerheijden, D. (2013). Achieving the Focus on Enhancement? In R. Land, & G. Gordon, *Enhancing Quality in Higher Education: International perspectives* (pp. 39-48). London: New York: Routledge.

Williams, P. (2002). Anyone for enhancement? *Higher Quality*, 1-2.

Wood, V. (2007). *Globalization and higher education: eight common perspectives from university leaders.* Institute of International Education Network.

Worldbank. (2002). *Constructing knowledge societies: new challenges for tertiary education.* Worldbank Report.

Wright, M. C., Assar, N., & Kain, E. (2004). Greedy institutions: the importance of institutional context for teaching in higher education. *Teaching Sociology, 32*, 144-159.

Yin, R. K. (1981). The case study crisis: some answers. *Administrative Science Quarterly, 26*, 58 - 65.

Yin, R. K. (2009). *Case study research. Design and methods. Fourth edition.* Sage Inc.

Yin, R. K. (2011). *Qualitative research from start to finish.* The Guilford Press.

Zajac, E., & Kraatz, M. (1993). A Diametric Forces Model of Strategic Change: Assessing the Antecedents and Consequences of Restructuring in the Higher Education Industry. *Strategic Management Journal, 14 (Summer)*, 83 - 102.

Zande, Leon Van der. (2008). Investeren in onderwijs loont. *Thema, 4*, 49-54.

Appendix 1 Results of the exploratory phase

The exploratory phase of this study consisted of two components: a pilot case study and 10 exploratory in-depth interviews. Below, further information and the findings of both components.

1. The pilot case study

At the start of the research period in 2009, a pilot case study was set up to provide directions for the remainder of the study and to explore the possibilities of realizing the intended study. In this way, an attempt was made to improve the efficiency and effectiveness of the main empirical study in order to conduct the research more successfully. Below, the pilot case study is explained, followed by a presentation of the case findings.

1.1 Case description

The pilot case study took place at the University of Curaçao (UoC). Selecting the UoC as the pilot case study was convenient and feasible, given that the researcher was employed at this university. In fact, during the research process the researcher was the institutional level quality manager and thus the main person in charge of the accreditation processes of all educational programs. Holding the position of institutional quality manager at UoC, the researcher was an active participant during the accreditation processes, the author of many institutional quality policy documents and developed several quality instruments, all needed and implemented during the course of these processes. She was able to examine all organization documents, initiate, attend and participate in the set up and planning of these processes, planning of meetings and coaching and training of involved stakeholders. Field notes, personal diaries, work documents and email correspondence of the researcher were used in order to generate information needed for this pilot case study. So, the pilot case study could easily be done and there were basically no limitations for access to data, based on the research method known as organizational self-ethnography. The results of the pilot case study provided input for the case description of UoC in chapter 7.

The pilot case study was conducted in an exploratory way. Due to the job position of the researcher she was a participant and observer during the research process (participatory observation). Initially data were collected in quite an informal way as part of the daily work of the researcher. The researcher made daily notes on the events, activities and happenings, starting after the research proposal was approved to June 2010 when the first draft description of the UoC-case was completed. In addition, the researcher analysed a wide range of the university's documents that guided the design and implementation of the embarked accreditation processes at institutional and faculty levels.

Based on the knowledge and understanding of the researcher on accreditation processes at that moment in time, this exploratory case study was focused on the following areas:

- The influence of the external context on the accreditation approach, mainly the impact of the national governmental policy on higher education and the legal embedment on the design and implementation of the accreditation processes;
- The influence of the accreditation body NVAO on the design and implementation of the accreditation processes;
- The translation of the accreditation goal into internal quality assurance policies and concrete quality improvement actions, taking into account the accreditation framework, the accreditation procedures and the availability of resources;
- The considerations underlying the choices made and the decisions taken at institutional and faculty levels prior to and during the accreditation processes;
- The development of an internal quality assurance policy, linked to the implementation of an internal quality assurance system;
- The steps involved in reaching the aim to attain the accredited status;
- The internal factors affecting the course of those steps during such processes;
- The involvement of relevant stakeholders during the process toward accreditation;
- The management strategies, instruments and techniques used to improve the ongoing accreditation processes.

The investigation of these aspects provided a clear, unambiguous and fairly objective picture of the factors that affect the accreditation processes. Questions that were answered are: Are the accreditation processes influenced by external factors and to what extent is this influence of great relevance to the internal accreditation approach? And, which internal organizational variables contribute to pushing through these processes and which are those that hinder these same processes?

Although data were collected also at faculty level, the focus was on the institution as the unit of analysis since the accreditation processes were` mainly directed at this operational level. During the period of data collection a site visit of two educational programs took place, together with the trial site visit of eleven other programs. This provided a great opportunity to collect relevant data on the different aspects mentioned above and to write an elaborated draft UoC-case.

1.2 Case findings

The data analysis resulted in the following case findings:

1. *Influence of external environment*: The national context has a significant effect on the accreditation processes due to the agreement signed in 2001, which stated that nationally funded higher education institutions located in countries within the Kingdom in the Netherlands have to be accredited by the Dutch accreditation organization. Furthermore, the upcoming pressure of local students to participate only in accredited programs to guarantee the possibility for further study abroad is

a development in the national context affecting the urge to go through accreditation processes at this university. UoC was hence mainly externally driven to embark on accreditation processes.

2. *Focus on the accreditation organization*: All quality improvement activities were directed to reach the pre-set quality standards formulated by the NVAO and this was also the case of the accreditation processes, which strictly followed guidelines and procedures as determined by the NVAO.

3. *Quality assurance policy*: The quality approach that was used can be related to the 'fitness for purpose' perspective. The university offers programs of which the quality provided had to meet the NVAO pre-set quality standards; so, an externally driven purpose. Although it was stated in the institutional quality assurance policy plan that a continuous quality improvement approach needs to be embedded, this was barely the case. As long as NVAO asks for it, it should be done, was the actual quality approach. The first institutional quality assurance policy plan was available, which was never translated into an implementation plan. The main elements of this policy plan were: quality starts at the top, total quality management, aiming for continuous quality improvement according to the PDCA-cycle, unity in diversity principle, customer satisfaction and pursuing excellence.

4. *Implemented steps towards accreditation*: The steps taken can be categorized as: first, accreditation scan/baseline study, followed by the development of action plans, based on the achieved results. Then, a period of quality improvement, followed by the formulation of the draft self-study report, which was the main input for the mandatory trial site visit. Next, quality improvement actions were implemented based on the trial site visit results, followed by a review of the self-study report. Finally the site visit took place (see section 7.1).

5. *Influence of internal factors*: It was noted that a variety of internal organizational factors have an impact on the accreditation processes, i.e. the management approach of the institutional manager and each particular dean, the (absence of) influential force of the various stakeholders, including the academic staff, the novelty of creating a quality culture, the limited resources and the guidelines formulated in the quality assurance policy.

6. *Involvement of stakeholders*: Several internal and external stakeholders were involved in the accreditation processes: managers at different organizational levels, the academic staff, the support departments, the students, the alumni, the professional field and the national government, which provided the necessary funds during the first two years of the accreditation processes.

7. *Management strategies*: The implementation of the accreditation processes was designed at institutional level and implemented at faculty level under guidance of the institutional quality manager. Depending on the faculty the dean played a vital role during the accreditation processes or acted as merely a participant, leaving the driving force in the hands of the institutional quality manager.

2. The exploratory interviews

In 2010 and 2011 ten exploratory interviews were conducted with staff members of NQA, QANU and NVAO, three of the evaluation agencies involved in the accreditation processes in the Kingdom of the Netherlands. The main reason for conducting these interviews was to collect additional information on the feasibility, significance and applicability of this study in an early research stage. Since the focus of this study is on the accreditation process taking place in three Dutch-Caribbean universities, UoC in particular, contrasting with two Dutch universities it was imperative to find out if this subject of study was viable to be conducted as a PhD research. Below the design and findings of these interviews are detailed.

2.1 Design and methodology

In the first part of the research period (2009-2011) UoC, UA and USM were in one way or another involved in the preparation towards accreditation. At UoC some (trial) site visits took place, at UA a few baseline assessments were done and at USM a desk top analysis took place to assess the quality of the Teachers Education Program. All these activities were guided by the NVAO framework. In these activities Dutch evaluation agencies were involved, since at these universities at that moment in time there was insufficient experience with accreditation processes. Therefore, those agencies needed to be involved in order to receive direct feedback on the achieved results judged from NVAO's perspective.

Three evaluation agencies were involved: QANU which in the Netherlands is an evaluation agency involved in accreditation processes of academic programs, NQA which is involved in mainly professionally oriented programs and NVAO as the accreditation organization. Staff members of these three evaluation agencies who were involved in the (trial) site visits and assessments of the Dutch-Caribbean universities and also had experience with small Dutch higher education institutions were selected to be interviewed based on their experiences in both parts of the Dutch Kingdom.

Ten exploratory interviews took place spread over July 2010 to August 2011. The interviewees were: 6 staff members of QANU; 2 of NQA and 2 of NVAO. The fact that QANU had so many interviewees is due to the fact that at that moment in time it was mainly the academic programs that were going through an accreditation process.

The areas addressed during these exploratory semi-structured interviews were:
- Experience with the most striking particularities with small universities in the Netherlands; small meaning less than 2500 students;
- Differences between assessing small versus large educational programs;
- Difficulties confronted while doing assessment activities in the Netherlands and in the Dutch-Caribbean and suggestions for solutions of these difficulties;
- Experience with assessing Dutch-Caribbean universities;
- The most striking positive and negative experiences during the preparation of the (trial) site visits or baseline assessments and also while conducting the site visits;

- Factors influencing the management of quality improvement processes, based on their experience and the applicability of these factors for the Dutch-Caribbean universities;
- Based on experience, suggestions for improvement of the accreditation processes in the Dutch-Caribbean universities;
- Differences encountered and foreseen challenges during the accreditation processes in the three Dutch-Caribbean universities;
- Differences encountered between management of the accreditation processes in the three Dutch-Caribbean universities and small and large Dutch universities;
- Applicability of the NVAO in small universities in general, and the Dutch-Caribbean universities in particular.

Since the interviews were semi-structured, the kind of background of the interviewee and his/her experiences in the Netherlands and in the Dutch Caribbean determined the course of the interview.

2.2 Findings and conclusion

The interviews provided extensive information on mainly their experience with the preparation of the accreditation processes at the Dutch-Caribbean universities. Analysing the ten interviews based on the information provided on the presented topics contributed in many ways to sharpening the research questions and narrowing down and operationalizing the variables to be further studied during the research. Below we present our findings regarding five overall themes selected as guiding principles:

1. *Experiences with small universities in the Netherlands, contrasting with those in the Dutch Caribbean*: With regard to this topic the interviewees remarked that they find it striking how much is done in the Dutch Caribbean with the limited available resources. Small programs in the Netherlands can still make use of resources of the whole university and piggy back on the institutional possibilities. Furthermore, in the Dutch-Caribbean universities there is quite an informal culture while dealing with each other and getting the work done. Also there is easy accessibility of students to the academic staff due to the small scale. The interviewees experienced this as an advantage contrasted to the more formal culture in the Netherlands. However, they brought forward that the accreditation framework expects more formalized structure and culture, so the Dutch-Caribbean universities need to take more formalization of their work relationships into consideration while preparing for the site visit. Another experience that was labelled as striking is the enormous passion and drive of the academic staff in the Dutch-Caribbean universities for their job. The interviewees commented that this attitude greatly contributes to the realization of the quality of the programs, regardless of the limited resources and differentiated circumstances of work. Furthermore, the roles, tasks and responsibilities are not well delineated in the Dutch-Caribbean universities, compared to the Dutch ones. In the Netherlands there are many rules,

regulations and procedures to be taken into account. Moreover, due to the lack of experience with external evaluation processes in the Dutch Caribbean no quality culture could be determined by the interviewees. Also the system of quality assurance was being developed and barely implemented. Therefore, the involvement of stakeholders was noticeably low, i.e. students, alumni and professional field.

2. *Difficulties confronted while doing assessment activities in the Dutch-Caribbean, contrasting with the Netherlands:* Specific difficulties were not mentioned; in both parts of the Kingdom of the Netherlands the guidelines and procedures of NVAO had to be followed as requested. However, differences were experienced during the process of preparation of the site visits. In the Dutch Caribbean much more correspondence took place, mainly due to the lack of experience. According to the interviewees the difference in culture was also obvious while doing their job. The differences in approaches and behaviour due to the informal culture compared with the more straight forward formal culture of the Dutch men were striking. However, according to the interviewees this did not hamper the progress of their work.

3. *Factors influencing the management of quality improvement processes as part of accreditation processes in the Dutch-Caribbean universities*: Factors mentioned in this regard were: lack of experience with quality improvement processes affecting the consistent work on quality improvement activities and the absence of quantitative data to support decision making; the great differences among the faculties; faculties operating as independent units and barely as part of the whole university could become a major challenge while doing institutional accreditation in the future; lack of clear definitions of tasks, roles and responsibilities of the academic and non-academic staff; deans having contrasting responsibilities; modest and cautious attitude of internal stakeholders, including managers; lack of directives, guidelines and control mechanisms at institutional level; unlikely communication patterns in which providing and receiving feedback is not common; nonexistence or inadequate functioning of required committees, such as faculty boards, students' panel and professional advisory boards.

4. *Suggestions for improvement of the accreditation processes in the Dutch-Caribbean universities;* Suggestions made were: formalizing the working relationship with external and internal stakeholders; appointment of more professors, especially related to the academic programs to guarantee the quality of the programs; encouragement of more PhD students to enhance the academic level of the programs; appointment of more permanent staff since teaching is to a large extent in the hands of guest lecturers with whom the universities have no enduring employment contract. This weakens the guarantee of consistency and quality of the offered programs, although guest lecturers provide positive relationships with the work field; improved cooperation and collaboration with other universities so work can be done jointly, but while maintaining the

identity of the programs since imitation of programs without contextualization is generally not approved by NVAO; development and implementation of the necessary quality documents and instruments; introducing clear definitions of roles, tasks and responsibilities of internal stakeholders; creating a more directive quality culture; not being modest in showing what is really happening; establishment of required committees.

5. *Applicability of the NVAO in small universities in general, and the Dutch-Caribbean universities in particular*: All interviewees agree that the NVAO framework is easily applicable in small programs. It is not impossible to reach any of the quality standards due to small scale. The interviewees emphasized that things can be organized in a different way, but the achievement of the quality standards is however not limited by the quantity of students, teachers or any other facility, Important in this regard is the cooperation and collaboration between all stakeholders and timely planning of activities to avoid overload of the involved participant which can easily happen due to a smaller amount of human resources. In addition, the NVAO framework offers sufficient possibility to contextualize the programs. Choices made need to be justified and consistently implemented. According to the interviewees, scale does not play any role in this regard. Furthermore, the financial implications for continuous quality improvement in order to retain the accredited status were pointed out as a challenge for the small Dutch-Caribbean universities given that the same quality standards must be obtained with limited available resources.

To conclude: the interviewees generally indicated that no major differences were experienced during their involvement in the accreditation processes in small universities in the two parts of the Kingdom of the Netherlands. They affirmed that a lot of work is done by all universities to achieve the accredited status, however the universities located in the Dutch-Caribbean were behind in their preparation due to lack of experience and limited resources, human and finance resources in particular. Also the different culture plays a significant role while preparing and conducting site visits. Still everybody has to comply with the same NVAO quality requirements. A lot of work still needs to be done to achieve and maintain accreditation in these universities. Essential in this regard are the management strategies of the accreditation processes at the different organizational levels.

Appendix 2 The case study protocol

This case study protocol contains information to guide the researcher while doing the data collection for each case (the field procedures), and reporting on the cases in order to increase the reliability of the study.

Introduction

The main research question to be addressed is:

Which are the enablers and barriers that impact the accreditation process in nationally funded universities in the Dutch Caribbean and how do they affect the final result of such processes?

Gaining knowledge and understanding of the encouraging and hindering factors during accreditation processes will significantly contribute to the theoretical insights that are required in order to know how to reinforce the enablers and debilitate the barriers. These insights will improve the success rate of accreditation processes, particularly in small universities located in the developed area of this world. Four research questions will be investigated in order to provide information needed to answer the main research question.

Information needed

First, general information on accreditation processes is needed to develop a research model. Based on the review of organizational change theories potential influential factors affecting these processes will be identified. Subsequently these factors will be linked to information concerning accreditation processes as an instrument for external quality evaluation. This information will lead to the identification of potential enablers and barriers during accreditation processes.

The information needed of each case to be able to investigate the kind of influence (positive or negative) the identified potential influential factors have during the progress of its accreditation processes and thereby affecting the outcomes is:

- Description of the national context
- Documented information on the five variables and their indicators
- Description of the impact of the indicators during the accreditation processes of each university
- Experience of the respondents with regard to each variable and indicator
- Experience of the respondents with enablers and barriers during the accreditation processes
- Description of the steps taken during the accreditation processes
- Description of the results of the accreditation processes

Research process

The empirical study is conducted according to a qualitative research method. The core of the study is a multiple case study analysis, within and across two groups of universities: three Dutch-Caribbean universities and two Dutch universities, all to be accredited by the NVAO. The research process is outlined below.

The pilot case study is done in the focus university, University of Curaçao, according to the organizational self-ethnography research strategy. The results of this pilot case together with some exploratory interviews with respondents of the evaluation agencies involved and literature review will lead to the conceptualization of a research model, consisting of dependent and independent variables during accreditation processes. This research model guides the empirical study.

```
┌──────────┐                    ┌──────────┐
│  Pilot   │ ──────────────────▶│ Document │ ──────────┐
│case study│              ┌────▶│ analysis │           │
└──────────┘              │     └──────────┘           │
     ↕                    │                            ▼
┌──────────┐   ┌──────────┐  ┌──────────────┐   ┌──────────┐   ┌──────────┐
│Literature│──▶│ Research │─▶│ Participatory│──▶│   Data   │──▶│Empirical │
│  review  │   │  model   │  │  and direct  │   │ analysis │   │ Results  │
└──────────┘   └──────────┘  │ observation  │   └──────────┘   └──────────┘
     ↕                       └──────────────┘                       │
┌──────────┐              │   ┌──────────────┐                      ▼
│Exploratory│─────────────┴──▶│    Semi-     │               ┌──────────┐
│interviews │                 │structured, in-│               │ Overview │
└──────────┘                  │    depth     │               │of enablers│
                              │  interviews  │               │   and    │
                              └──────────────┘               │ barriers │
                                                             └──────────┘
```
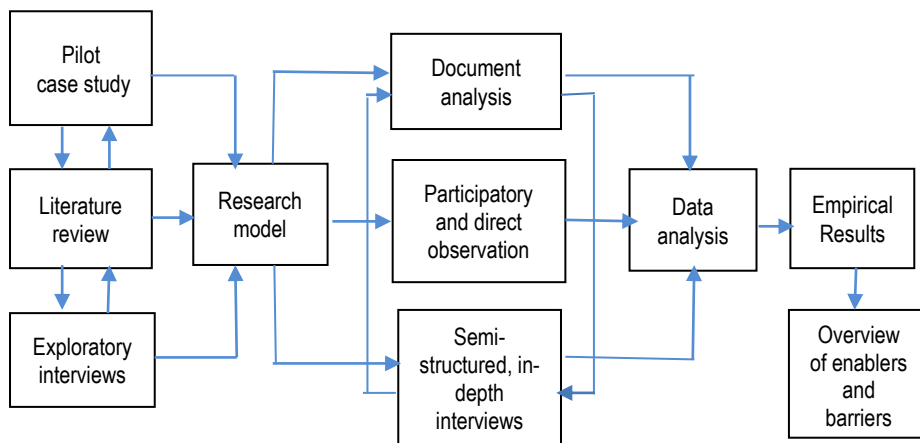
Field work procedures

The use of multiple sources of data in this study stems with the objective of ensuring the validity and enhancing the generalizability of the research findings. Triangulation is used as research strategy to confirm the validity of the research process. Triangulation through multiple data collection methods makes it possible to substantiate the findings more strongly and to empower the building of theories. The intent of using triangulation is to decrease, wipe out, or counterbalance the deficiency of a single strategy, thereby increasing the ability to interpret the findings and so to ensure the validity of the study.

Observation, documents analysis and in-depth interviews are the three sources of data collection in order to obtain the above mentioned information on each case. Combining these three sources will supply data acquisition from a variety of respondents and also provide more in-depth information from different perspectives, which contribute to enhancing the validity of the study.

- Observation: If the researcher is involved in the accreditation processes of a case, conduct participatory or direct observation to collect additional information, which is not found in documents, to be cross checked later on during the interviews.
- Documents analysis: Contact one key informant of each case to collect relevant documents at all organizational levels, which have to be analysed.
- Interviews: conduct semi-structured in-depth interviews with internal stakeholders from different perspective, based on guiding questions which are categorized according to the five independent variables (Appendix 3). To avoid respondent bias, interview multiple respondents in each case. Select the respondents based on their position and involvement in accreditation processes. All interviewees all invited via a formal letter, containing brief description of the study (Appendix 5).

To avoid investigator bias and add more objectivity to the research findings let multiple respondents of each case provide feedback on the draft case descriptions.

Outline of each case description

- Description of the national context, according to the five descriptive factors
- Description of the national higher education policy, containing also specific information regarding rules and regulations on accreditation
- Description of the five variables according to the 17 indicators
- Within-case analysis identifying the enablers and barriers during the embarked accreditation processes

Outline of the final report

- Introduction: brief information on the research topic, followed by the research objectives and the research questions (chapter 1)

Part I: Theoretical framework:
- Provide theoretical information on organizational change theories (chapter 2)
- Relate information of chapter 2 to higher education (chapter 3)
- Describe main characteristics of an accreditation process considered as organizational change processes (chapter 4) from international perspective
- Outline the research methodology, including conceptualization of the research model, operationalization of the dependent and independent variables and explanation of the research design (chapter 5)

Part II: Case descriptions:
- Description of the national context of each case (chapter 6), based on the descriptive factors and information regarding the higher education policy.
- Group A: descriptions of each Dutch-Caribbean case according to the five variables and 17 indicators of (chapter 7), ending each case with a within-case analysis.
- Group B: same as group A, but for each Dutch case (chapter 8).

Part III: Comparison and Conclusion
- Multiple comparative analysis: within-group and across group analyses (chapter 9).
- Answer of the four sub-questions and subsequently of the main research question, following by a reflection on the research model, construction of a final framework to be used for the design, implementation and monitoring of accreditation processes to enhance the achievement of successful outcomes, presentation of the theoretical and practical implications of the study and finally some suggestions for further research (chapter 10).

Appendix 3 Guiding questions semi-structured Interview

A. Interview information

University: …………………………………………………………………………….. ….

Faculty/ Department: ……………………………………………………………………..

Job Position: ………………………………………………………………………………..

Area of specialization: …………………………………………………………………….

Years of service at the university: ………………………………………………………….

Date of interview: ……………………………………………………………………………

Length of interview: …………………………………………………………………………

Particular issues to be remarked: ………………………………………………………..

B. General Information on accreditation process

1. How was the process of accreditation started in the university? And who were/are involved/did/do play any role in this process? If you were involved, please explain the role you played.

   ----

2. What was/is according to you the aim of going through an accreditation process of the institution in general and for your faculty/department in particular? Has the aim been reached? Please explain.

   ----

3. According to you, which are the elements of the national context that have an impact of the performances of the university? And, what are the **stimulating and/or constraining** factors as part of the national context in relation to the accreditation processes your institution went through/is going through?

C. Organizational structure

4. Please describe the organizational structure of the university? Hierarchical, flat…. Etc.?

   ----

5. Please describe the decision-making process during the accreditation process? And, did it have any impact on the progress of the accreditation process? The degree of formalization/ centralization.

----

6. Which are the stimulators and/or constraints coupled to the organizational structure in relation to the accreditation process?

D. Leadership and Management

7. Please describe the leadership and management style at institutional level with regard to the accreditation process? Please do the same for the line managers.

----

8. Were/Are the managers at different levels steering officers in quality management and implementation of the internal quality assurance policy and hence the accreditation process? And, what was the role of the managers at the different levels during the course of the accreditation process? What kind(s) of impact does/did this leadership and management style have on the progress of accreditation process in the university in general and in your department in particular?

----

9. Which were/are the set management conditions during the accreditation process? And were/are they encouraging factors for the progress of the accreditation process?

----

10. Which are the stimulating and/or constraining factors coupled to the leadership and management style at institutional level in relation to the accreditation process?

E. Quality Culture

11. What kind of traditions, norms and values exist within the university? And, did/do they have any influence of the progress of the accreditation process? Please explain.

----

12. Please describe the communication channels (formal and informal) and interaction among internal stakeholders within the university? And, did/do they have any influence of the progress of the accreditation process? Please explain.

----

13. Were/are the personnel at different institutional level committed to deliverance of quality of products and services and to continuous quality assurance?

----

14. Does the university have a quality culture? If Yes, which are the main characteristics? If No, why not and what is needed to create this quality culture?

15. What were/are the main stimulators or constraints related to the existing level of (quality) culture in the university in relation to the accreditation process the institution went through/is going through?

F. Available Resources

16. What are the most important resources that need to be available during an accreditation process? And, to what extent were these resources available during the past/ongoing accreditation process?

    ----

17. How were/are the available resources managed during the accreditation process?

    ----

18. Which are the stimulating and/or constraining factors due to the availability of resources at institutional level in relation to the accreditation process your institution went through/is going through?

G. Internal Quality Assurance Policy

19. What are the main elements of the internal quality assurance policy at institutional level? And, how is/was this policy related to the course of the accreditation process?

    ----

20. Who were consulted/ involved during the development of the internal quality assurance policies at institutional level? If your department were involved, please explain.

    ----

21. Is there a quality policy plan at faculty/departmental level? If yes, what are the main elements of that plan? And, what is the relationship of that plan with the one at institutional level? If no, why not? And are there plans to formulate one in the near future?

    ----

22. Please describe the quality structure of the institution. What kind of impact does/did it have on the accreditation process? Is there a responsible body in charge of accreditation process at institutional level? If yes, what is the relation of your job position with this body and how do/have you experienced this relationship during the accreditation process?

    ----

23. Please provide a description of the internal quality assurance system at institutional level. Is it based on the PDCA-cycle? What kind of impact does/did it have on the accreditation

process? Is there an internal quality assurance system at faculty/departmental level? And, what is its relationship with the one at institutional level?

24. Which stakeholders (academic and non-academic staff, students, representatives of the working field, alumni) were involved in the quality assurance policy and system at institutional level? How and when were/are they involved?

----

25. Were/Are there external quality assurance experts involved in the accreditation process? And peers? Please explain.

----

26. Which are the stimulators and/or constraints coupled to the internal quality assurance policy at institutional level in relation to the accreditation process the institution went through/is going through?

H.   Conclusion and closure

27. You have mentioned various encouraging and hindering factors during an accreditation process. Can you mention the main enablers and barriers during the past/current accreditation process of your university?

----

28. How would you describe the impact of the accreditation process on the process of continuous quality improvement within the university?

----

29. In what way do you think the past/current accreditation process can be improved? Please state your suggestions for improvement.

----

30. Please add any additional relevant information

Thank you for your participation and cooperation in this study.

Appendix 4 List of interviewees

The interviews took place during the period of July – December 2012

University	Interviewees' position
UoC (10)	Former Rector Magnificus
	Acting Rector Magnificus
	Dean General Faculty (AF)
	Dean Faculty of Law (FdR)
	Acting Dean Faculty of Social and Economic Sciences (FdSEW)
	Program Manager FdTW
	Program Coordinator AF
	Former Program Manager Faculty of Community and Behavioural Sciences (FMG); As of 2011 Quality Assurance Officer at DQA
	Manager Library & Research Services
	Manager Computer Centre and Acting Manager Facility Services
UA (9)	Rector
	Dean Faculty of Law
	Dean Faculty of Arts and Sciences
	Dean Faculty of Finance and Economic
	Dean Faculty of Hospital, Tourism and Management Studies
	Coordinator Centre for Quality Assurance
	Quality Officer FdR
	Quality Officer FAS
	Business Director
USM (3)	President
	Consultant, member of Project Team Accreditation TEP
	Academic Dean
UU (8)	Accreditation coordinator Department O&O
	Director Department O&O
	Staff Department O&O (statistic information)
	Staff Department O&O (testing and examination information)
	Staff Department O&O (financial information)
	HR Department (teaching certification)
	Vice dean in charge of Education of the Faculty of Social Sciences
	Educational Quality Officer of the Faculty of Law, Economy and Governance
HZ (5)	Former Head Department O&K
	Head Department O&K
	Staff Department O&K (accreditation processes)
	Board secretary
	Academy Director of Technology and Innovation Academy

Appendix 5 Letter to interviewee

To: Name Interviewee
Job Position
Name of University

Date

Topic: Interview for doctoral study on accreditation processes

Dear interviewee,

As you may know I am currently doing my doctoral study to identify the enablers and barriers during accreditation process in three Dutch-Caribbean universities: University of the Netherlands Antilles (UNA), University of Aruba (UA) and University of St. Martin (USM). I will contrast this information with two higher education institution in the Netherlands: University of Utrecht and Hogeschool Zeeland. The research objective is to provide systematic insight in the way these universities organized their accreditation processes while they aim to attain and retain an accredited status. This knowledge and understanding can contribute to improve the future organization of accreditation processes in these and similar universities and therefore make a successful result of their approach more attainable.

As you are part of the team in one of the above mentioned institutions and is/was involved in the accreditation process at institutional or departmental level, I would like to interview you to receive more in-depth information on your experience during that process. It will be a semi-structured interview, designed to collect relevant information on the enablers and barriers experienced during accreditation processes in the particular institution. Some guiding questions on the research variables were formulated in advance to structure the interview. Some further information on the topics to be addressed is attached to my letter. But during the interview there will be extensive opportunity to express yourself as open as possible in order to achieve in-depth insight into your experience with regard to stimulating and hindering factors during an accreditation process.

Your response during the interview will remain confidential and the results will only be used to examine the process of accreditation in your university and to compare it with that same process in the other participating higher education institutions. In the doctoral thesis your response will be processed completely anonymously, if you prefer.

I will contact you by e-mail to set a date and time for the interview. The interview will last about one hour. I would like to thank you in advance for your time and willingness to participate in this study. Please feel free to contact me by email if you would like to receive any further information prior to the interview.

With kind regards,
Drs. Sharine Isabella
PhD-Candidate at: CHEPS, University of Twente, Enschede, Netherlands

<div style="border:1px solid black; padding:4px;">

Topics to be addressed during interview

</div>

A. **General Information on accreditation process**
- Reasons for embarking on an accreditation process; institutional and faculty/department views
- Impact of the accreditation process on continuous quality improvement
- Your suggestions for improvement for the past/future accreditation process
- Elements of the national context that have an impact of the performances of the university

B. **Organizational structure**
- Characteristics of the organizational structure
- The decision making process during the accreditation process
- The stimulating and/or constraining factors coupled to the organizational structure in relation to the accreditation process

C. **Leadership and management**
- Leadership and management at institutional and faculty/department level
- The role of the managers at the different levels during the course of the accreditation process
- Management conditions during the accreditation process
- The stimulating and/or constraining factors coupled to leadership and management at institutional level in relation to the accreditation process

D. **Quality Culture**
- Traditions, norms and values within the university
- Communication channels (formal and informal) and interaction among internal stakeholders within the university
- Main characteristics of the quality culture
- The stimulating and/or constraining factors coupled to existing quality culture in the university in relation to the accreditation process

E. **Available Resources**
- Resources that need to be available during an accreditation process
- Management of the available resources during the accreditation process
- The stimulating and/or constraining factors due to the availability of resources at institutional level in relation to the accreditation process

F. **Internal Quality Assurance Policy**
- Main elements of internal quality assurance policy at institutional and faculty/department level
- Internal quality assurance policy and accreditation
- The quality structure of the institution
- The internal quality assurance system at institutional level and faculty/department level
- Involvement of internal and external stakeholders
- Stimulating and/or constraining factors coupled to the internal quality assurance policy at institutional level in relation to the accreditation process