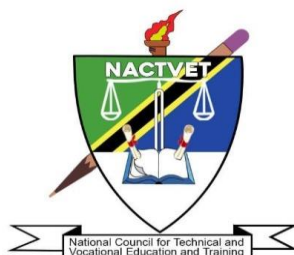


THE NATIONAL COUNCIL FOR TECHNICAL AND VOCATIONAL EDUCATION AND TRAINING

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Guidelines for Establishing Institutional Policies and Procedures on Quality Control and Quality Assurance

FOREWORD

The National Council for Technical and Vocational Education and Training (NACTVET) is a statutory body established by the National Council for Technical and Vocational Education and Training Act, Cap. 129 to oversee and coordinate the provision of technical education and training in Tanzania. Amongst the functions of NACTVET is to assist technical institutions in the overall development of the quality of education they provide. In order to assist technical institutions in the provision of quality of education and training, NACTVET has therefore, to establish policies, regulations and procedures for setting and maintaining standards and quality of technical education and training.

All institutions under auspices of NACTVET are required to have quality control and quality assurance systems in place to ensure that the respective institutions have conducive environments for the provision of education and training to the required standard. This requires availability of clear institutional policies and procedures on quality control and quality assurance. The key purpose is to guarantee quality of outputs from technical institutions and win confidence of stakeholders in respect of technical education provided. Quality control involves operational techniques and activities that are aimed of both monitoring process(es) and eliminating causes of unsatisfactory performance in all stages of the quality loop. The ultimate goal is to achieve desired effectiveness.

This document provides a guiding framework to technical institutions in formulating institutional policies and procedures on quality control and quality assurance. It also provides guidelines for carrying out internal audits of respective quality control systems and reporting findings and conclusions. In doing so, the document clarifies the objectives of institutional policy on quality assurance and provides the major components of the required policy as well as key assessment criteria.

Dr. A.B. Rutayuga
EXECUTIVE SECRETARY

EXECUTIVE SUMMARY

- ES1:** All institutions under the auspices of NACTVET are required to have quality control systems in place to ensure that respective institution meets the accreditation requirements. This requires availability of clear institutional policies and procedures on quality control and quality assurance. The key purpose is to guarantee quality of outputs from technical institutions and win confidence of stakeholders in the technical education provided. Quality control involves operational techniques and activities that are aimed both at monitoring process(es) and at eliminating causes of unsatisfactory performance in all stages of the quality loop. The ultimated goal is to achieve economic or desired effectiveness.
- ES2:** This document provides a guiding framework to training institutions in formulating institutional policies and procedures on quality control and quality assurance. It also provides guidelines for carying out internal audits of respective quality control systems and reporting findings and conclusions. In doing so the document clarifies the objectives of institutional policy on quality assurance and provides the major components of the required policy with key assessment criteria.
- ES3:** Modalities for monitoring of the implementation of the institutional policies are also presented in the document covering the focus, length of review cycle, constitution of a quality control and quality assurance committee, its work process and outcomes, as well as the review of the NACTVET monitoring process.
- ES4:** The intention of NACTVET is to focus on the guidelines of preparing policies and procedures so as to ensure sustainability of institutions' own quality assurance processes rather than on the detail of those processes and their related procedures.

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LIST OF ABBREVIATIONS AND ACRONYMS

<u>Abbreviation</u>	<u>Description</u>
NACTVET	National Council for Technical and Vocational Education and Training
QCAC	Quality Control and Assurance Committee
NAQS	NACTVET Academic Quality Standard
NAS	NACTVET Accreditation Standard
NTA	National Technical Award
QA	Quality Assurance
QC	Quality Control
QEI	Quality Effectiveness Index
QMP	Quality Management Plan
QMS	Quality Management System

1.0 INTRODUCTION

The National Council for Technical and Vocational Education and Training (NACTVET) was established by an Act of Parliament, “The National Council for Technical and Vocational Education and Training Act, Cap. 129, as a regulatory body to register, accredit technical institutions and coordinate technical education in the country [1]. In line with its Mission, NACTVET aims at working with institutions and other stakeholders to provide public assurance of the quality and standards of the technical education in Tanzania.

The ultimate goal is to assure stakeholders that any learner who has been deemed successful after participating in a learning programme at a training institution and hence eligible for a particular National Technical Award (NTA) is able to display the prescribed learning outcomes of the respective qualification. NACTVET will mainly achieve that assurance through the process of accrediting institutions. During accreditation, NACTVET evaluates curricula/learning programmes and confirms the appropriateness and adequacy of teaching and learning resources and support infrastructure at respective institutions, as well as the availability of quality management systems to ensure quality delivery of targeted programmes and valid assessment of learners in demonstration of achievement of competencies as specified for the respective Qualification Standard.

For that purpose, all institutions under the auspices of NACTVET are required to have quality control systems in place to ensure that respective institution meets the accreditation requirements. NACTVET requires that there be evidence that the quality control systems function as intended. In this requirement, NACTVET modalities allow considerable liberty in how an institution will make its case and what kinds of evidence it will bring forth to support the case that it has fulfilled or is maintaining the requirements of accreditation. In either case, an internal self-evaluation or an internal audit of the institution is carried out.

This document provides a guiding framework to training institutions in formulating institutional policies and procedures on quality control and quality assurance. It also provides guidelines for carrying out internal audits of respective quality control systems and reporting findings and conclusions.

2.0 GUIDELINES FOR INSTITUTIONAL QUALITY CONTROL

2.1 Purpose of Quality Control and its Basis

The key purpose of quality control is to guarantee quality of outputs from technical institutions and win confidence of stakeholders in the technical education provided. Quality control involves operational techniques and activities that are aimed both at monitoring process(es) and at eliminating causes of unsatisfactory performance in all stages of the quality loop. The ultimated goal is to achieve economic or desired effectiveness. Every quality control aspect should be aimed at fulfilling the relevant NACTVET standards [2]. Specifically, the NACTVET Academic Quality Standards

and NACTVET Accreditation Standards shall provide the basis for quality control. Based on the provisions in these standards the degree of effectiveness of a particular parameter checked for can be quantitatively determined. Quantification of the degree of effectiveness is achieved using a quality effectiveness index (QEI). This is a ratio of the current achievement situation and the ideal or preferred situation and is expressed as,

$$QEI = \frac{R_C}{R_I} ,$$

where,

QEI	-	Quality Effectiveness Index
R_C	-	Rating of Current Situation
R_I	-	Rating of Ideal or Preferred Situation

Calculating QEI permits a basis for comparison across institution systems as to the level of quality that is considered ideal or favorable for that particular system. The given ratio expresses a bi-directional assessment of quality, and indicates a diminution of quality as the ratio is decreased from 1.0, and an achievement of expectations as the ratio is increased above 1.0. In other words, if an institution system has a quality effectiveness ratio of 0.5, it is only approximately 50% of the way towards the level of quality it perceived as desirable. On the other hand, if an institution system has a quality effectiveness ratio of 1.25, it indicates that its has surpassed those same expectations by approximately 25%.

2.2 Major Factors for Consideration

In any quality control system and particularly that involve self-evaluation or internal audits, there are some basic factors that have to be considered for the same to be successful. These include the needs of clarity in the description of the quality control system, transparency in the procedures, sensitivity of the procedures to weaknesses in the quality control system, proper sampling of audit probes, clear conclusions and recommendations from internal audits. The guidelines for consideration of the major factors are provided in the subsequent sub-sections.

2.2.1 Clarity

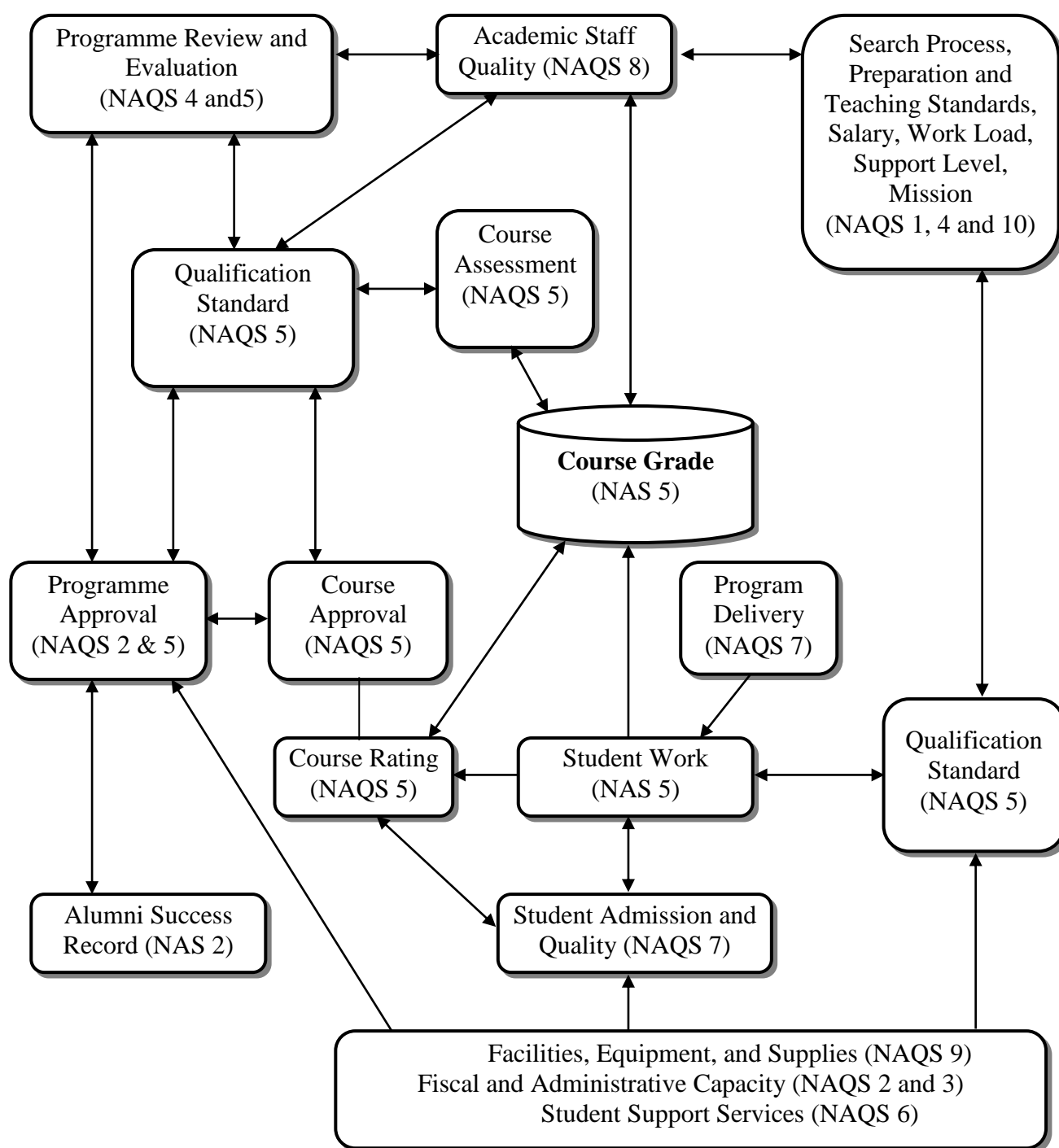
One long-standing principle of any internal audit as part of institutional quality control system, is that the matter being audited, e.g. a teaching technique, a curriculum, a screening process, e.t.c. must be well defined so that the audience and the auditors themselves know what is being evaluated. Quality control systems for all programmes in an institution should therefore be clear, well defined and address all the NACTVET Academic Quality Standards. For clarity, the quality control systems should be represented with a schematic diagram as well as in narrative form. Fig. 1 provides a generic schematic diagram of a typical quality control system in a higher learning institution. It is important to note that the schematic diagram is only an example or prototype. As such, a quality

control system of particular institution may differ from that prototype. However, any such differences will have to be specified in the Internal Audit Report.

2.2.2 Transparency

If the members of staff at an institution are going to have confidence in the internal audit and its conclusions, they must be aware of the procedures that were used to arrive at the conclusions. It helps if they are asked to approve the plan for conducting the internal audit in advance in some formal way so that they will have accepted the procedures as reasonable.

In any case, the internal audit procedures should be clear and well known to the members of staff at the institution.



KEY: NAS - NACTVET Accreditation Standard
NAQS - NACTVET Academic Quality Standard

The procedures for entering the quality control system to begin the internal audit must be clear and sensitive to potential weaknesses in the system. Normally, the member of staff may enter the system in several ways. One such possibilities is as follows:

- (i) A course grade in a randomly selected course in a programme is identified by an unbiased method (e.g. randomly selection etc.).
- (ii) Following the schematic diagram of the system (as in Fig. 1), each element in the system that is linked to that grade is probed to see if the quality control system worked as it was designed to work in that instance. The audit probe would determine, for example; whether the particular academic member of staff who gave the grade was appointed, reviewed, and assigned properly; whether the student was admitted and enrolled properly; whether the work on which the grade was given was evaluated properly; whether the enrolment to the course was done properly; whether the course was evaluated and reviewed properly; whether the course was properly funded; whether the course was given in an appropriate facility; whether the program in which the course was required was properly evaluated; and so forth.

This entails that all links to the course grade that are implicated in the system are examined to see whether the system functioned properly in this particular instance.

- (iii) The Internal Audit probe can begin at any point in the system. One example might be by starting with a particular member of staff, the probe can begin there and move through the system from that point. The questions of the system are the same and for this case will take the following form: Was his/her appointment assignment proper? Was his/her tenure or promotion decision conducted properly? Were his/her students selected properly? Does he/she evaluate student learning properly? Was his/her course properly approved and evaluated? Was his/her course properly funded? Was the course given in an appropriately equipped classroom? And so forth. Again each element in the system that bears on quality of particular selected case is examined.

The entry point has no particular significance and merely provides a manageable way to begin the audit probe and constrain the amount of information that must be considered.

2.2.4 Sampling

The number of internal audit probes that would be necessary depends, as in all sampling, on the degree of variability that is revealed. The number should be of a magnitude that would convince the academic member of staff and others that a reasonably accurate reading of the system had been taken. Sampling just one or two students, for example, or one or two

courses, may not provide sufficient confidence to the interpretations gleaned from the audit.

When the member of staff determines how many elements should be sampled, a rationale for the number should be provided so that the reader can be assured that the audit findings are truly representative of the system.

2.2.5 Reporting

In the report of the internal audit, the findings from the audit are distinct and derived from the conclusions made by the members of staff about the quality control system. The purpose of the internal audit is for the members of staff to make some judgments about how well its quality control system is working. The conclusions advanced by the staff, for example, could include any one (or more) of the following:

- (i) Our quality control system is working just as it was designed.
- (ii) Our quality control system is working well, overall, except we have learned that we cannot put a great deal of faith in the course grades our students receive because they are not predictors of the subsequent performance in student teaching.
- (iii) Our quality control system has several significant breakdowns e.g. violations of the appointment policies in the hiring of adjunct academic members of staff, inconsistencies in content and practices within various sections of the same course, and inconsistencies in the way clearances into student teaching are administered.

For all cases where the system is not found to be coherent, it seems reasonable that these judgments would give direction to members of staff for strengthening their quality control system. However, to avoid misinterpretation and queries seeking evidence leading to particular conclusions or recommendations, the basis and evidence leading to the conclusion must be presented.

Questions like “What makes you conclude that the system is working well, or that breakdowns exist?” should not be go unanswered by the evidence that is collected during the Internal Audit. So, it makes sense to see judgments as flowing from evidence and for this reason it is important to keep the reporting of the evidence separate from the reporting of the judgments or conclusions about the quality control system.

3.0 GUIDELINES FOR INSTITUTIONAL POLICY ON QUALITY ASSURANCE

3.1 Purpose of the Guidelines

The aim of these proposed guidelines is to assist technical institutions in establishing or improving their policies and processes and to support NACTVET when assessing the policies and processes in place.

3.2 Focus of the Institutional QA Policy

An institutional policy should reflect the institution's mission and values. All institutions should have a QA policy in place. A quality assessment policy should focus on units (academic and other) and/or on programmes (or groups of programmes). The policy should include provisions to cover all the functions and units of the institution (research, administration, community service, etc.).

3.3 Objective of Institutional QA Policy

The objectives of institutional policy on quality assurance should be, at a minimum to improve the quality of programmes offered and ensure that the stated learning outcomes could be realized. The policy should ultimately *answer how well is the unit or the programme achieving what it set out to accomplish and whether the same is doing what it should be doing.*

3.4 Components of an Institutional QA Policy

In addition to reflecting institutional mission and values, the institutional QA policy should be comprehensive and apply to all programmes and units. It should also at least provide the following:

- (a) Establish a coordinating or administrative unit responsible for the overall management of the QC & QA process. This unit should be located at a higher echelon of the institution's administrative structure, and be accountable to the institution's leaders.
- (b) Define the assessment criteria (refer to section 3.5 Key Assessment Criteria).
- (c) Require a self-study component, usually involving academic staff and students participating in the programme or unit. The self-study should be student-centred as it would aim, in most cases to assess the quality of learning. The self-study should be structured according to the defined assessment procedures criteria. When and where appropriate, the results of accreditation may be included and/or substituted for this component, or a portion thereof.
- (d) Entail an external review component. At least two experts that are external to the institution are recommended to carry out the review. As

appropriate, the results of accreditation may be included and/or substituted for this component, or a portion thereof.

- (e) Incorporate the participation of academic staff not directly involved in the reviewed programme (or discipline or unit).
- (f) Enable the participation of the wider network of stakeholders, such as employers, graduates, professional associations, the local community, etc.
- (g) Include appropriate mechanisms that are at a minimum providing the procedures and areas of responsibility, to ensure a proper follow up to the assessment.
- (h) Establish the assessment cycle, which should not exceed five years. Newly established programmes or units should be assessed once fully implemented, this will be at the end of one- to five-year mark.
- (i) Include provisions to review the policy periodically.
- (j) The policy should be submitted to NACTVET as the body responsible for quality assurance for reference.

3.5 Key Assessment Criteria

The assessment procedures and criteria should be student-centred, and should reflect institutional mission and values. The assessment criteria should be comprehensive enough (i.e. to include all programmes and units) and should at least provide the following:

- (a) Assess intended and delivered curriculum;
- (b) Review teaching learning processes;
- (c) Clarify the expected outcomes for students;
- (d) Examine the degree to which those outcomes are realized;
- (e) Evaluate the appropriateness of support provided to students;
- (f) Appraise the research carried out by the academic unit or by academic staff involved in the reviewed programme;
- (g) Value the contribution of the unit or programme to other aspects of the institutional mission (for example community service); and
- (h) Value the contribution of the unit or programme to the larger community or society in general.

4.0 MONITORING THE IMPLEMENTATION OF INSTITUTIONAL QC AND QA POLICY BY NACTVET

4.1 Objective

The monitoring of quality assessment procedures and practices is especially important given that the cornerstone of QC & QA is self-assessment by the institutions. The specific objective of the NACTVET monitoring function is therefore to ascertain that the procedures used by institutions to assess the quality of existing programmes, and other functions as appropriate, are performing adequately as quality control mechanisms. Specifically, the monitoring process should answer *how well is the institution achieving what it set out to accomplish in its QC & QA policy and whether it is doing what it should be doing in the area of quality assurance.*

Procedurally, the monitoring process is a formative one, whereby institutional policies and practices are reviewed with a view to providing assistance and advice to institutions.

4.2 Focus of the Monitoring

NACTVET has the mandate to oversee tertiary technical education and training in its entirety. Hence, the Council shall monitor/review all institutions falling under this category. In doing so, NACTVET will focus on three elements, namely:

- (a) The institutional quality assessment policy;
- (b) Quality assessment practices; and
- (c) Follow-up mechanisms.

The process will pay particular attention to each institution's mission and values.

4.3 Length of Review Cycle

Monitoring of quality assessment procedures and practices shall be performed once at each institution in a five-year cycle. It shall consist of one review per year conducted for the first three years, and two reviews per year may be conducted in each of the remaining two years of the cycle. This increase in frequency may be necessitated by the need of NACTVET to gather information for the purpose of renewing accreditation of institutions. The NACTVET Quality Control and Quality Assurance Committee, in consultation with the institutions, may change this order. For institutions to be granted accreditation for the first time, the first review is recommended to start the year preceding an institution's accreditation. For those requiring reaffirmation of accreditation, the review is recommended to start the year preceding an institution's reaffirmation of accreditation.

4.4 Establishing a Baseline

Given that it will take five years to complete the first cycle of the monitoring process, the first step in the overall monitoring process will focus on establishing a baseline defining institutional activities and priorities in the area of quality assurance. One year after accreditation, each institution will be asked to provide a statement

describing how compatible their current activities in the area of quality assurance are with the NACTVET quality assurance policy in general, and with the Guidelines for Institutional Quality Assurance Policies in particular. In addition, the statement should identify future priorities in the area of quality assurance. The statement will be submitted by the end of the year of reporting.

4.5 Quality Control and Quality Assurance Committee

The Quality Control and Quality Assurance Committee is part of the Quality management Structure of NACTVET. It carries out the monitoring function on behalf of Council. It is essentially established as a peer review committee. The members and Terms of Reference of the Committee are listed in Appendix 1.

4.6 Process and Outcomes

It is proposed that the monitoring process should take place over a 10 to 12-month period in which two or three institutions could be reviewed simultaneously. Specifically, the quality assurance monitoring process includes the following steps:

Step 1: Initial meeting

The first step of the process will be a meeting to clarify the expectations and the process, as well as to establish the time frame for each step.

Step 2: Self-study

The self-study focuses on the quality assessment and improvement processes in place at the institution under review. It is both descriptive and analytical and includes clear statements as to how well the quality assessment and quality improvement processes are performing, and whether these processes are adequate for the task.

The self-study provides answers to the two key questions guiding the monitoring process included in the objectives. The institution has a three to four months period after the initial meeting to produce the self-study and forward it to NACTVET [3].

Step 3: Analysis of all pertinent documentation

Over the course of the following six to twelve weeks, the Committee and staff will analyze the documentation and request any additional information deemed necessary. The basis of the Committee's report is the documentation forwarded by the institution. This information shall include but not limited to the following:

- (i) The institutional quality assessment policy. The Monitoring Committee uses the policy components and assessment criteria in the NACTVET Quality Assurance Policy as the backdrop to review each institutional policy;
- (ii) The institutional self-study;

- (iii) The list of all programme or unit assessments conducted in the preceeding five years if applicable. The institution may indicate which units or programmes in that list reflect particularly well the institution's mission and values;
- (iv) The schedule of forthcoming assessments. From the list of assessments carried out by the institution, the Committee selects a number of assessments, preferably from three to five, for further review by the Committee. The programme or unit assessments are chosen to reflect as accurately as possible the institution's mission and values; and
- (v) Any other documents the Institution may feel beneficial for their assessment.

Step 4: On-site visit

The on-site visit completes the monitoring of institutional policy and practices. The Committee meets with individuals identified during Step 2 and those identified during consultations with the institution in preparation for the visit. The objective of the on-site visit is to validate the statements offered in the self-study, as well as to verify elements contained in the assessments reviewed by the Committee.

Step 5: Reporting

The Committee prepares a report on its findings and formulates recommendations, first and foremost, to the institution. The report is forwarded to the institution to validate factual information within eight to twelve weeks following the on-site visit. The institution can submit any correction to the report within 30 days of receipt. The report is then submitted to NACTVET, accompanied by the comments and advice given by the institution. Once approved by the Council, the report is made available by request to the public, listed as a NACTVET publication, and mentioned in the annual report filed by NACTVET.

Step 6: Institutional response

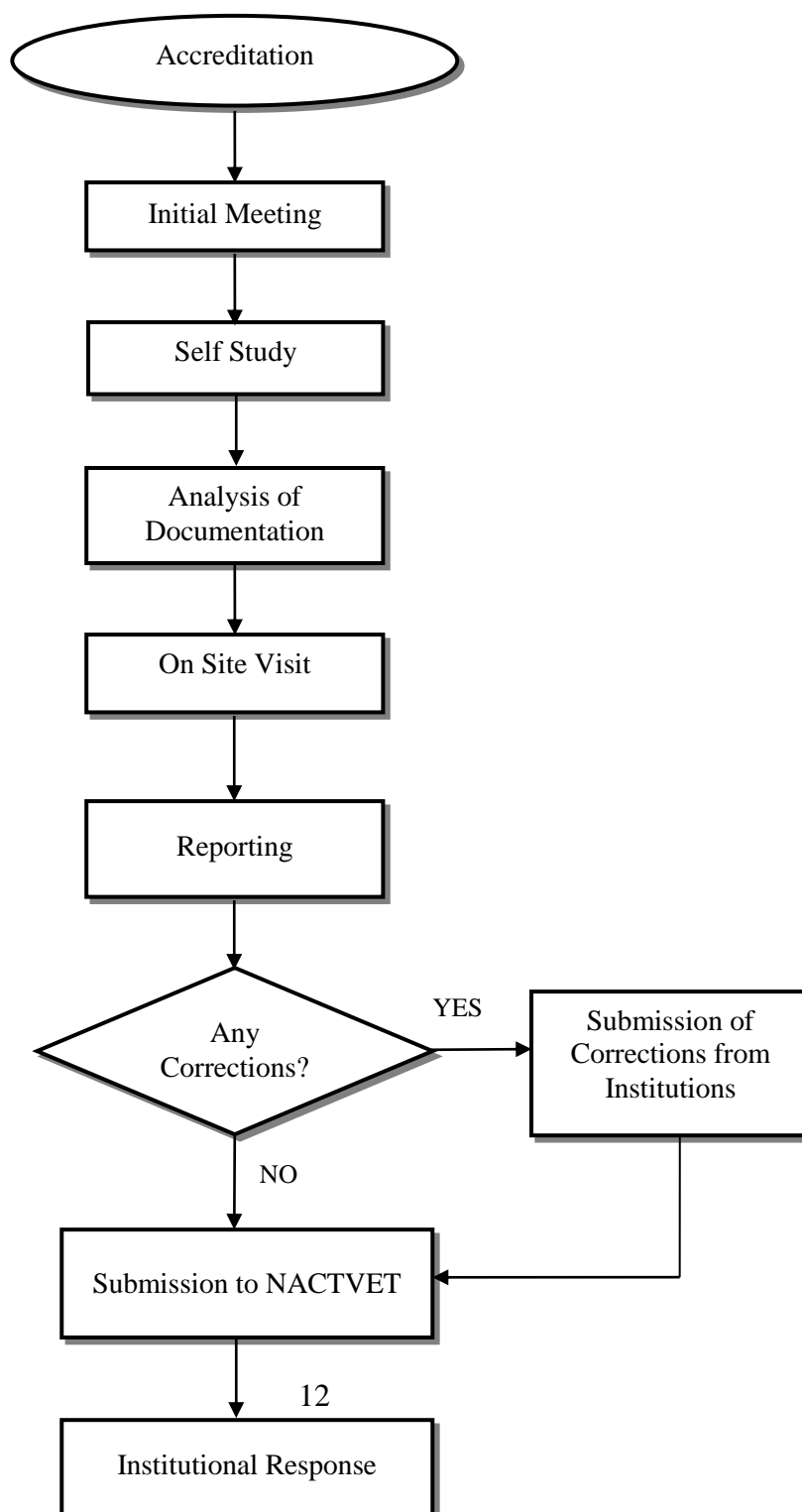
The institution then develops a plan of action to respond to the report, to be filed with NACTVET no later than one year following the publication of the monitoring report. The Committee and the Council may comment and respond to the plan of action. A brief description of the institution's plan of action, and of the response by the Committee or Council (NACTVET), when applicable, are included in the next NACTVET annual report.

The summary of the monitoring cycle is as depicted on Fig. 2.

4.7 Review of the NACTVET Monitoring Process

At the end of the first five-year cycle, a 12-month interval will be imposed to review and analyze the process. Institutions will be consulted in this review. Among the questions to be answered at that time are:

- (a) Has the process met the anticipated objectives and outcomes?
- (b) What are its strengths and weaknesses?
- (c) How can it be improved?
- (d) Is there value in pursuing it into a second cycle?



5.0 EXPECTED INSTITUTIONAL OUTPUTS

The intention of NACTVET is to focus on the guidelines of preparing policies and procedures so as to ensure sustainability of institutions' own quality assurance processes rather than on the detail of those processes and their related procedures. The proposed form of the policies and procedures is short precepts accompanied by guidance notes and commentary.

For that purpose, the production of a single handbook, with separate sections covering discrete areas appearing progressively, rather than a series of unrelated codes is recommended. Consultations and thorough detailed discussions of draft texts with active practitioners, drawn from relevant sectors, who have relevant expertise, followed by a more general invitation to comment is also proposed as a general way of proceeding in formulating the policies and procedures.

GLOSSARY OF TERMS USED IN THE DOCUMENT

The following, arranged in alphabetical order, are the definitions of the terms used in this document, unless the context required otherwise:

G1. Assessment

Systematic analysis of the effectiveness of teaching and learning that is carried out according to established standards.

G2. The Council

The National Council for Technical and Vocational Education and Training (NACTVET) established under section 3 of the National Council for Technical and Vocational Education and Training Act No. 9 of 1997

G3. Course

Means a course as approved by the Council and leading to award of the Council. It is essentially synonymous to a learning programme.

G4 Curriculum

Curriculum is a teaching and learning experiences taking place in learning institution and includes the aims and objectives of learning, what is taught, provided in terms of learning outcomes for realization of target qualification requirements, teaching and learning strategies for realization of outcomes, and form of assessment and evaluation.

G5. Indicators

Critical information about selected areas of performance, usually expressed as an index or ratio, monitored at regular intervals, and compared to one or more standards. Indicators describe various aspects of the operation of a program, service, or institution.

G6. Learning Outcomes

The knowledge, skills, and values acquired through a pursuit of an educational activity.

G7. NACTVET Academic Quality Standards

These are standards formulated to guide the operation of the technical education and training institutions. Specifically, they are designed to be enabling in identifying areas of activity where academic quality must be addressed by a technical institution seeking accreditation systematically. The

standards centre on outcomes and accomplishments, requiring that an institution assess its resources, processes, and practices. In short, the Standards focus on assessing institutional effectiveness in meeting institutional purposes.

G8. NACTVET Norms

These include NACTVET Standards as described in G15 below, and all other relevant procedures for realizing such Standards as stipulated in the various NACTVET Documents.

G9. Qualification

A planned combination of broad learning outcomes which has a defined purpose or purposes, and which is intended to provide qualifying students with applied competence and a basis for further learning. In other words, qualification means the formal recognition of the achievement of the required number and range of credits and such other requirements at specific levels of the National Technical Awards as determined by the Council.

G10. Qualification Standards

Statements of the purpose of qualification and corresponding principal learning outcomes from technical institution and their associated assessment criteria as registered/specified by NACTVET.

G11. Quality Control and Quality Assurance Committee

A committee of NACTVET with responsibility to implement, monitor and maintain policies and procedures that govern the institutional evaluation process under the direction of the Council.

G12. Technical Education

Education and training undertaken by students to equip them to play roles requiring higher levels of skill, knowledge and understanding and in which they take responsibility for their area of specialization.

G13. Technical Institution

An institution registered by the Council and accredited to deliver courses leading to the awards of the Council.

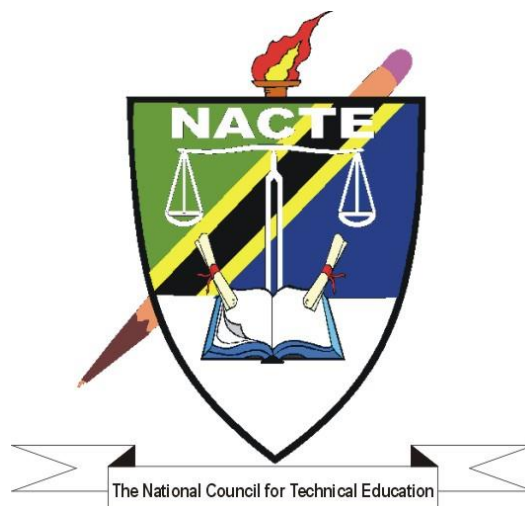
G14. Training Programme or Learning Programme

A sequential learning activities, associated with curriculum implementation.

REFERENCES

- [1] The United Republic of Tanzania, *National Council for Technical and Vocational Education and Training Act., 1997 (No. 9 of 1997)*, Government Notice No. 235, 6th June 1997.
- [2] The National Council for Technical and Vocational Education and Training (NACTVET), *NACTVET Academic Quality Standards*, Dar es Salaam, August 2004.
- [3] The National Council for Technical and Vocational Education and Training (NACTVET), *Framework for Institutional Quality Assurance Evaluation*, Dar es Salaam, August 2004.

**THE NATIONAL COUNCIL FOR TECHNICAL AND
VOCATIONAL EDUCATION AND TRAINING (NACTVET)**



Appendix 1

**TERMS OF REFERENCE OF THE *NACTVET*
QUALITY CONTROL AND QUALITY
ASSURANCE COMMITTEE**

APPENDIX 1: TERMS OF REFERENCE OF THE NACTVET QUALITY CONTROL AND QUALITY ASSURANCE COMMITTEE

A1. Purpose

To advise and assist NACTVET, in ensuring continuous improvement in the quality of academic programmes and of teaching at post-secondary non-university institutions by monitoring institutional quality control and quality assurance activities, as described in various NACTVET policy and procedure documents to include:

- ❑ NACTVET Academic Quality Standards;
- ❑ Guidelines for Preparation of Quality Management Plan;
- ❑ Guidelines for Establishing Institutional Policies and Procedures on QC and QA;
- ❑ Framework for Institutional Quality Evaluation;
- ❑ Procedures for Quality Assessment, Evaluation and Audit of Course Delivery;
- ❑ Performance Indicators for Assessment of Institutions; and
- ❑ Benchmarks for Comparing Performance across Courses and across Institutions.

A2. Function

The NACTVET Quality Control and Quality Assurance Committee (NACTVET-QCAC) shall do the following:

- (i) Monitor the outcomes of institutional quality assessment policies and procedures, within the parameters established by NACTVET. These parameters are described with details on the process in the NACTVET Quality Assurance Policy;
- (ii) Suggest relevant research/publications to NACTVET and assist in their preparation, as they relate to quality assurance;
- (iii) Implement, monitor and maintain policies and procedures that govern the institutional evaluation process;
- (iv) Propose revisions of policies and procedures that govern the institutional evaluation process;
- (v) Coordinate all aspects of external validation processes for all institutions;
- (vi) Support ongoing development, provision and sharing of materials, guidelines, templates and instruments etc. for the institutional evaluation processes; and
- (vii) Examine issues or carry out such undertakings, as NACTVET may deem necessary and appropriate to quality control and quality assurance.

A3. Objective of the Monitoring Function

The specific objective of the monitoring function is to ascertain that the procedures used by institutions to assess the quality of existing programmes, and other functions as appropriate, are performing adequately as quality control and quality improvement mechanisms.

The purpose of the Committee in carrying out the monitoring process is to provide answers to the following two questions:

- (i) How well is the institution achieving what it set out to accomplish in its quality assurance policy?
- (ii) Is it doing what it should be doing in the area of quality assurance?

The process is intended to be formative; institutional policies and practices will be reviewed with a view to provide assistance and advice to institutions.

A4. Membership

The Committee will be composed of seven members including the Chairperson.

- (a) Executive Secretary of NACTVET – Chairperson;
- (b) Deputy Secretary of Registration and Accreditation - Secretary;
- (c) Deputy Secretary of Examinations and Awards;
- (d) Deputy Secretary of Information, Research and Development;
- (e) One member representing Technical Education and Training Institutions;
- (f) One member representing employers;
- (g) One member representing relevant professional bodies;
- (h) One member representing the Ministry responsible for Science and Technology.

A5. Tenure

Members are appointed for a three-year mandate. *(Note: to ensure continuity, three members of the initial membership may be appointed for a four-year mandate.)*

A6. Chairperson

In the situation where the Chairperson of the Committee is absent, one of members from NACTVET appointed to the Committee shall be the acting Chairperson. NACTVET Council shall make appointments of all committee members who are not NACTVET employees.

The Chairperson of the Committee chairs meetings.

A7. Reporting Structure

The Committee shall reports to NACTVET Council at regular intervals. It shall have

reports for all ordinary NACTVET Council meetings, and in any case, at least 4 reports per year.

Monitoring reports are distributed to the NACTVET Executive Committee in advance of NACTVET Council meetings to allow time for comment and advice.

A8. Staffing for the Committee

The Deputy Secretary of the Registration and Accreditation Division with staff as assigned from the division is responsible for monitoring institutional quality assurance policies and procedures. The monitoring reports with recommendations shall be submitted to Council (NACTVET). The Committee may engage outside consultants, as need arise, to assist in the monitoring functions.