



NCHE

SELF-ASSESSMENT REPORT

Submitted to: ENQA (HAQAA3)
Initiative

14th OCTOBER, 2024

**Promoting Quality,
Accessible, Relevant and
Inclusive Higher Education**

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Special thanks are due to Dr Simeon Gwayi for successfully leading the drafting team providing unwavering support throughout the process. The drafting team comprised the following NCHE staff:

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Together, we have created a valuable resource that will contribute significantly to the continuous improvement of quality assurance systems in higher education in Malawi. This initiative reflects our shared commitment to fostering transparency, accountability, and excellence within the higher education sub-sector.

Once again, thank you all for your hard work, dedication, and passion in making this initiative a success. We look forward to further collaboration as we continue to advance the shared goals of the HAQAA3 Initiative.

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Chapter 1. Introduction

The National Council for Higher Education (NCHE) was established by an Act of Parliament No. 15 of 2011 but commenced its operations in 2014. By April 2024, NCHE celebrated its 10th anniversary, marking a decade of numerous structural and operational improvements, alongside enhanced stakeholder engagement. The NCHE has signed an agreement with the European Association for Quality Assurance in Higher Education (ENQA) as a representative of the HAQAA3 initiative to undergo an external review in December 2024. The NCHE joins other African quality assurance agencies who are benefiting from a project referred to as “the Harmonisation of African Higher Education Quality Assurance and Accreditation (HAQAA) 3 Initiative”. Through its participation, the NCHE will accrue numerous benefits which include:

1. **Alignment with international standards:** By undergoing this review, the NCHE will assess the extent of its alignment with the African Standards and Guidelines for Quality Assurance (ASG-QA). The process will ensure that the NCHE's policies, standards, regulations, and practices are comparable with continental and globally recognized standards.
2. **Continuous improvement:** An external review by the HAQAA3 initiative will objectively assess the NCHE's current quality assurance systems, identifying strengths and areas for improvement, thereby fostering continuous improvement on the NCHE's internal quality assurance systems and its engagement with key stakeholders.
3. **Fostering trust and credibility:** An external review by the HAQAA3 initiative will increase the credibility of the NCHE to its local and external partners and stakeholders such as higher education institutions (HEIs), students, employers, and the public. This will in turn foster trust by stakeholders with regard to the capacity of NCHE to effectively regulate the quality of education provided by higher education institutions.
4. **Capacity building:** The review process will facilitate capacity building and enhance human capital development within the NCHE. Consequently, it will strengthen expertise in quality assurance and promote the adoption of best practices within the NCHE such as conducting an effective self-assessment for its continuous improvement.
5. **Strengthening regional and international visibility:** The HAQAA3 review will enhance the NCHE's visibility and reputation regionally and internationally. This improved profile will

facilitate the mobilisation of support and the establishment of partnerships and collaborations with other quality assurance bodies and key stakeholders across Africa and beyond.

6. **Promotion of harmonisation in African higher education:** The NCHE's participation in the HAQAA3 initiative will contribute to the broader goal of harmonising quality assurance systems across Africa, promoting mutual recognition of qualifications, and improving student and staff mobility across African higher education systems.
7. **Improvement of accountability and transparency:** The external review will enhance transparency in the NCHE's operations and improve accountability to key stakeholders and the general public by ensuring that its processes are well-documented, regularly reviewed, and open to scrutiny.

These benefits will position the NCHE as a reputable Quality Assurance Agency (QAA) in Malawi and beyond thereby contributing to the growth and international competitiveness of higher education.

Chapter 2. Development of the Self-Assessment Report (SAR)

The NCHE followed a systematic approach to develop and produce the Self-Assessment Report (SAR) in preparation for the HAQAA3 external review.

The process began with the development of a blueprint serving as a roadmap for the external review by HAQAA3. This roadmap was presented to executive management and staff to raise internal awareness, facilitate orientation, and promote knowledge co-creation. Subsequently, a main task team was created responsible for overseeing the entire SAR development process, coordinating inputs from relevant stakeholders, sub- task teams and ensuring compliance with the HAQAA3-SAR guidelines. This process took into consideration feedback from both internal and external stakeholders. Internally, the NCHE organised a series of meetings aimed at ensuring that every employee is aware of the external review by HAQAA and ensuring that each department participates in the development and review of the SAR. Externally, stakeholders from higher education institutions (HEIs) and other national regulatory /professional bodies reviewed the draft SAR and provided input and validation (refer to the [minutes of the higher education stakeholder](#) engagement). Feedback and data from these groups informed a reflective view of the NCHE's performance, policies, standards, legislative/legal instruments, regulations as subsidiary law, guidelines, and practices. In addition, a Self-Assessment Report (SAR) team was constituted, alongside other sub-task teams responsible for unique

contribution to the drafting of the report. This team includes personnel from various departments, units, and sections to ensure diverse representation across the NCHE's functions.

The SAR drafting team conducted a thorough data collection process, gathering evidence related to the NCHE's performance against ASG-QA standards. This included internal reports, policy documents, institutional reviews, and feedback from HEIs and other stakeholders such as the Ministry of Education, HEIs, and Council members. Regulatory bodies were also shared the SAR for their input. However, they are yet to provide input. Based on the data collected, the team demonstrated how each section aligns with the ASG-QA. Once the draft was completed, the NCHE organised a validation process that involved consultations with internal and external stakeholders to verify the accuracy and completeness of the report ([NCHE SAR HEIs Stakeholders' Minutes Oct 2024](#)). The SAR was revised based on feedback received during this phase. After final revisions, the SAR was submitted to ENQA for review as review coordinator on behalf of the HAQAA3 initiative. The feedback from ENQA will be incorporated into the final SAR.

This collaborative and transparent approach ensures that the SAR accurately reflects the NCHE's efforts and readiness for the HAQAA3 external review. Below is a summary of the steps to be undertaken:

1. Developing a blueprint as a roadmap to external review by HAQAA3.
2. Presenting the roadmap to the executive management and staff.
3. Formulation of SAR team and sub-task teams.
4. Budget for external review: While the direct costs are covered by the HAQAA3 Initiative, the NCHE planned for sufficient resources for in-country meetings to undergo the review.
5. Orientation of sub-task teams on their roles and responsibilities (sharing the plan).
6. Training by the ENQA team on the SAR development and the Site Visit. All members of the sub-task teams participated in order to broaden their understanding of the review process.
7. Sub-task team meetings to identify stakeholders, for budgeting, and working on the allocated task.
8. Data gathering:
 - A. Analysis of the NCHE alignment with ASG-QA standards.
 - B. Interview and consultation with relevant internal stakeholders.

9. Addressing gaps by all sub-task teams in the NCHE's QA systems as required by HAQAA3 review guidelines.
10. Sub-task teams providing continuous feedback to the SAR drafting team.
11. SAR validation by both internal and external stakeholders to verify the accuracy and completeness of the report.
12. SAR revision based on feedback received during internal and external stakeholders' validation.
13. The SAR submission to ENQA for review. The next steps will include:
 - a. Incorporate feedback from ENQA into the final SAR, and
 - b. Submission of the SAR and supporting documents to ENQA.

Once feedback is shared by the HAQAA3 review panel sometime in 2025, NCHE looks forward to making further improvements based on the feedback by developing an improvement plan, ensuring a comprehensive monitoring plan is in place for purposes of continuous improvement and enhancing the alignment with the ASG-QA.

Chapter 3. Higher Education and QA of Higher Education in the Context of the NCHE

3.1 Higher Education System in Malawi

The higher education system in Malawi comprises both public and private institutions, including universities, colleges, and technical colleges. These institutions offer a variety of undergraduate, postgraduate, diploma, and certificate programmes across different disciplines. The primary objective of the higher education system is to produce skilled professionals, promote research, and contribute to national development. The National Council for Higher Education has jurisdiction over universities and colleges and not over technical colleges.

3.1.1 Public Higher Education Institutions

Malawi has 19 Public HEIs of which six are public universities that were established by an Act of Parliament and operate under respective governing Acts or legislative provisions (see a [list of registered and accredited HEIs in Malawi](#)). Out of these, 13 are colleges owned by different Government Ministries and Departments. The public universities include: University of Malawi (UNIMA), Mzuzu University (MZUNI), Lilongwe University of Agriculture and Natural Resources (LUANAR), Malawi University of Science and Technology (MUST), Kamuzu University of Health

Sciences (KUHeS), and the Malawi University of Business and Applied Sciences (MUBAS). These institutions are Government-funded and offer programmes across diverse disciplines such as science, education, agriculture, engineering, and the humanities.

3.1.2 Private Higher Education Institutions

Malawi has thirty three (33) private higher education institutions (HEIs) of which two (2) are tuition providers and one is provisionally registered ((see a [list of registered and accredited HEIs in Malawi](#)).

3.1.3 Technical and Vocational Education

In addition to the 52 HEIs, Malawi has 20 technical colleges and vocational training institutions whose aim is to provide practical skills to students in fields such as bricklaying, carpentry, metalwork etc. The quality assurance of vocational education is under the Technical Education, Vocational, and Entrepreneurship Training Authority ([TEVETA](#)).

3.2 Evaluation of higher education in Malawi

In Malawi, the National Council for Higher Education (NCHE) evaluates institutions and academic programmes to ensure continuous improvement in quality assurance. Public HEIs are only required to be accredited by the NCHE, as they are established through an Act of Parliament. In contrast, private HEIs must undergo both registration and accreditation by the NCHE. The process starts with provisional registration, with further details on registration and accreditation outlined in Chapter 5 of the SAR.

The process of registration and accreditation is sequential, beginning with the provisional registration of the institution and its programs, followed by final registration, and culminating in the accreditation of the institution and academic programs. To initiate the process with the NCHE, the HEI institution firstly applies for provisional registration. This status is valid for one year, as outlined in Section 20 (6) of the [NCHE Act](#) No. 15 of 2011. During this period, the institution can mobilize resources, develop its infrastructure, create curricula, and establish governance and management systems, including necessary policies, rules, and regulations. While holding provisional registration, the institution is allowed to advertise its programs; however, it cannot recruit students until it achieves final registration status, as specified in Section 20 (4) of the [NCHE Act](#). Once final or full registration is obtained, the institution is now allowed to recruit students. Within two years of operation, a registered institution or programme is expected to undergo an accreditation process. Following

accreditation, the NCHE conducts follow-up visits to ensure compliance with minimum standards and to support continuous improvement. Follow-up visits for each accredited HEI and academic programme are supposed to be carried out at least once in a complete cycle. However, due to limited resources the follow-up visits have usually targeted HEIs with less mature internal quality assurance systems. In addition, follow-up visits have been centred around quality issues that the Council identifies from time to time. Table 3.1 provides a summary of registered and accredited HEIs in Malawi as of October, 2024.

Table 3.1: Summary of registration and accreditation status of HEIs in Malawi

Sn.	Category	Number of Provisionally registered HEIs	Number of Registered HEIs	Tuition providers	Number of Accredited HEIs	TOTAL
1.	Public HEIs	N/A	11	0	8	19
2.	Private HEIs	1	7	2	23	33
3.	Total	1	18	2	31	52

Note: As earlier indicated, NCHE does not register public higher education institutions but are considered duly registered being government entities.

Chapter 4. History, Profile and Activities of the Agency

4.1 History and Profile of the NCHE

The NCHE was established by the [NCHE Act](#) No. 15 of 2011, with the mandate to regulate the quality of HEIs in Malawi. The NCHE's core responsibilities include ensuring the quality and relevance of higher education in Malawi which is in tandem with the national strategic vision such as the [National Education Sector Investment Plan 2020-2030](#) (NESIP 2020-2030) which is a strategic roadmap developed to guide the education sector from 2020 to 2030. The NESIP focuses on access and equity, quality and relevance, and governance and management. The NESIP is also aligned to the [Malawi National Education Policy 2016](#), [Malawi Vision 2063](#), Sustainable Development Goal IV, and the African Union (AU) agenda 2063. By improving higher education standards, the NCHE contributes to the realisation of Malawi 2063 agenda through the development of a skilled, competitive and knowledgeable workforce that will be instrumental in driving Malawi into a middle-income, and industrialised nation. The first Council of the NCHE was constituted in 2012. In 2014, the Secretariat was then established with an initial staff complement of 16 personnel. Over the years, the NCHE has grown in both capacity and scope. By 2021, the staff establishment had expanded to 23 members.

Following a functional review in 2021, the staffing structure was further revised, and the establishment was expanded to 54 positions. However, as of to date only 33 of these positions have been filled on the current [NCHE organogram](#).

4.1.1 The NCHE Governing Principles

MANDATE

To regulate higher education in Malawi.

VISION:

To be a higher education regulator which supports systematic growth and excellence of HEIs in Malawi.

MISSION:

To promote quality, accessible, relevant and inclusive higher education and training in Malawi through the use of best practices in higher education regulation.

CORE VALUES:

- Integrity
- Transparency and Accountability
- Efficiency
- Service-centred
- Collaboration
- Professionalism

4.2 The NCHE Activities

The NCHE's activities include registration, accreditation, quality audits (follow ups), and spot checks. Following establishment of the secretariat in 2014, the NCHE commenced its accreditation assessments in 2016, marking the start of its first accreditation phase. Since then, it has conducted a series of registration and accreditation evaluations.

The NCHE is responsible for registering private higher education institutions (HEIs) and accrediting both public and private HEIs. According to Section 20 of its Act, the NCHE oversees the registration of private institutions, granting them the authority to operate once they meet the minimum standards established by the Council. This means that operating unregistered HEI is illegal in Malawi. The registration process begins with provisional registration as earlier observed above. Final registration

is granted only after an inspection confirms that the institution meets the NCHE's minimum standards (for further details, refer to Chapter 5 of the SAR which provides details of the NCHE quality assurance activities). Section 28 of the [NCHE Act](#) mandates the accreditation of HEIs, which signifies that an institution or its programmes fulfil the required standards set by the NCHE. This process involves a comprehensive evaluation of the institution's physical, human, financial, and educational resources to ensure compliance with both national and international standards. Accreditation guarantees that qualifications awarded by these institutions are recognized as equivalent to those from other accredited institutions in Malawi and abroad (for more information, see Chapter 5 of the SAR). The NCHE furthermore, conducts ad hoc and regular programme and institutional quality audits to ensure compliance with the quality assurance policies, standards and procedures. It also monitors and evaluates the implementation of internal quality mechanisms in HEIs. Additionally, the NCHE manages the recognition, verification, and equation of qualifications. This process ensures that qualifications meet legal standards and may involve rigorous evaluation. Applicants must submit relevant documents, including certificates, transcripts, and theses; any forged documents will lead to disqualification. Processing fees vary for local and international applicants, and the timeline for results is typically 21 working days (for more specifics, refer to Chapter 5 of the SAR).

Furthermore, the NCHE coordinates the harmonisation of student selection into public universities, a process that began in 2014. Previously, each university managed its selection, leading to inefficiencies and financial burdens for applicants. Through the NCHE's coordinated process, candidates submit a single application with a consolidated fee covering all six public universities. While the NCHE does not directly select students, it facilitates the selection process by overseeing the coordination between universities and ensuring a transparent and fair system. This streamlined approach has improved efficiency and reduced duplication of efforts thereby ensuring equal opportunities for all students and contributing to the development of higher education in Malawi.

Chapter 5. Higher Education Quality Assurance Activities of the Agency

As highlighted in 4.2, external quality assurance activities undertaken by the NCHE are registration, accreditation, including post accreditation activities such as quality audits and spot checks. According to section 20 of the [NCHE Act](#), the NCHE is responsible for registering private HEIs, and section 28 of the NCHE Act mandates the NCHE to accredit both private and public HEIs. In addition, the

NCHE does validate certificates and undertakes harmonisation of student selection into Public Universities.

5.1 Registration of private higher education institution and programmes

Operating unregistered private higher education institutions (HEIs) in Malawi is illegal; therefore, all private HEIs must be registered with the NCHE. Registration is the process of granting an HEI the authority to operate. For a programme, registration means that the institution is permitted to offer that specific programme. To qualify for registration, an HEI must meet the minimum standards set by the NCHE. Registration is guided by Section 19 of the [NCHE Act](#) which reads: *No person other than a public higher education institution or organ of state shall provide higher education unless that person is registered or provisionally registered as a private higher education institution in terms of this Act.*

An application for the provisional registration of a private higher education institution (HEI) is submitted to the NCHE Council through the Chief Executive Officer (CEO) using the prescribed form. This application includes the required fee and supporting documentation as outlined in the [Checklist for Provisional Registration](#). The NCHE evaluates and verifies the suitability of an application in terms of the minimum standards for higher education. According to section 20 (3) of the Act, provisional registration authorises an institution to:

- A. set up a governing body for the proposed institution;
- B. commence or continue to develop physical facilities and mobilise financial and human resources;
- C. commence or continue to assemble academic resources; and publicise the programmes of instruction expected to be offered at the institution.

Provisional registration is valid for a one-year cycle from the date it is issued or as the Council may determine (section 20 (6)). An institution is not allowed to admit students while it holds a provisional certificate (section 20 (4)).

After one year of provisional registration, the institution is supposed to apply for final registration. Upon inspecting the institution, final registration is granted to a provisionally registered private higher education institution. Below are the steps for final registration.

- a. Communicating intention to get final registration:**
- i HEI intends to register with the NCHE formally, writes the CEO.
 - ii HEI collects and completes the NCHE application form (Form 2) for final registration.
 - iii HEI submits the completed application form with all relevant documents as listed in the registration checklist.
 - iv The Secretariat acknowledges receipt of the application within 5 working days.
- b. Paying for registration assessment**
- i The Secretariat identifies reviewers based on their expertise from the database, develops a budget, and generates an invoice.
 - ii The Secretariat shares the invoice with HEI.
 - iii HEI pays the invoice and shares with the secretariat proof of payment
- c. Preparation for registration assessment:**
- i The Secretariat schedules the assessment visit in consultation with the HEI.
 - ii The Secretariat communicates assessment dates to HEI and advises HEI to
 1. conduct a self-assessment and submit the report to the Secretariat.
 2. generate evidence to support the assessment.
 3. prepare a PowerPoint presentation on the institution's readiness for areas to be assessed.
 - iii. Secretariat orients reviewers either face to face or virtually on the conduct of the assessment on the following:
 1. Registration as a process
 2. Using the NCHE Registration assessment tools
 - [Institutional face to face](#);
 - [Institutional ODeL](#)
 - [Programme assessment face to face](#)
 - [Programme ODeL](#)
 3. Report Template
 4. Programme of activities at the institution
 5. Election of the Review team leader/Chairperson. The Team leader/ Chairperson ought to be an academician.

d. Conducting registration assessment:

- i. Reviewers and Secretariat arrive at the institution.
- ii. The Secretariat Task leader and Review Team leader pay courtesy call to the executive management of the institution.
- iii. An entry meeting is held where HEI makes a PowerPoint presentation on the institution's readiness about the areas to be assessed.
- iv. Campus tour for Reviewers and Secretariat's inspection of the institution's infrastructure and other facilities.
- v. The Review Team conducts document review, interviews with students, academic staff, support staff, and management as well as detailed inspection of facilities.
- vi. The review Team identifies areas of strength, areas for improvement and recommendations of the assessed HEI or programme.
- vii. The Review Team scores the items on the NCHE registration assessment tool based on the evidence gathered and in reference to the NCHE minimum standards.
- viii. An exit meeting is held with management on the final day of the assessment where the Review Team through the Team Leader shares their major findings of the assessment.
- ix. The review team drafts the assessment report and submits the draft report to the Secretariat through the Team Leader within seven (7) days of the assessment.
- x. The Secretariat submits the draft registration report to the institution for factual error checking.
- xi. The institution provides feedback on factual errors to NCHE within fourteen (14) days of receipt.
- xii. The Secretariat submits the report with feedback from the institution to the Review team.
- xiii. The Review Team considers the comments from HEI, finalise the report and submit it back to the Secretariat.
- xiv. Secretariat reviews and formats the draft report to conform to the NCHE standards.

e. The Submission to the Chief Executive Officer (CEO):

- i. The Director of Registration and Accreditation Services (DRAS) reviews the draft report.
- ii. The DRAS submits the final report to the CEO for inclusion in the Quality Assurance and Accreditation Committee (QAAC) board pack.

f. Consideration by QAAC:

The QAAC considers the report and makes a recommendation to the Council on its decision concerning the application for registration.

g. Consideration by Council:

Council considers the recommendation from the QAAC and makes its resolution.

h. Communicating Council resolutions:

- i. The Secretariat communicates the Council resolution to the HEI within 10 working days after the Council resolution.
- ii. The Secretariat publishes in print media Council resolutions within fourteen (14) days after the resolutions are made.
- iii. According to the [NCHE Act](#), institutions that have met minimum requirements for registration are supposed to be recommended for final approval of registration and granting of a Charter by the Minister of Education. However, since the NCHE was established in 2014, this has not been done. NCHE has just completed development of the [HEI Charter Template](#). From December 2024, NCHE will finalise the registration process by recommending to the Minister of Education for the award of a new Charter of the Institution or the amendment of an existing one.

5.1.1 Aims and objectives of registration assessment

5.1.1.1 Aim of assessment for institution and programme registration

a) Aim of an objective assessment for programme registration

The aim of assessment evaluates the readiness of an institution to offer academic programmes. The readiness is evaluated against quality standards using tools that are tailor made for registration.

b) Specific objectives of the assessment for programme registration

The specific objectives of the assessment are to evaluate:

- a. the financial resources and sustainability of the programme;
- b. the availability and suitability of the infrastructure (buildings, learning spaces, and other physical facilities) to support the programme;
- c. student support services;
- d. proposed programmes in terms of relevance and quality of design;

- e. the adequacy of an institution's academic and support staff complement for the delivery of the proposed programmes and curriculum;
- f. the appropriateness of students' entry requirements for the proposed programmes;
- g. the capacity of the institution's library facilities and resources to support the proposed programmes;
- h. the suitability of other physical infrastructures (including the availability and suitability of classroom and laboratory space);
- i. the institution's quality assurance systems.

5.1.1.2 Methods of data collection for the assessment exercise

- a) Review of curriculum documents and other relevant documentary evidence in the form of policy documents, publications, etc.;
- b) Inspection of facilities and premises;
- c) Interviews with staff, students, and other stakeholders

5.1.2 Step-by-Step Registration Process

Part 1: Provisional Registration

- i Submission of application by the HEI for provisional registration
- ii Initial Review of the Application for Provisional Registration by the NCHE secretariat to check the completeness of the application dossier
- iii On-site evaluation by the NCHE Secretariat
- iv Consideration by Quality Assurance Committee (QAAC) and Council
- v Award of Provisional Certification/Registration

Part 2: Final Registration

- i Application for Final Registration
- ii Desk review of the submitted documents
- iii Desk review report and feedback to HEIs
- iv Identifying the peer reviewer
- v Invoicing the institutions and feedback letter
- vi Communicating the date for the review
- vii Sending invitation letters to reviewers
- viii Orientation of the reviewers

- ix On-site visit -Institutional and programme review
 - Entry meeting
 - Review of the programme/institution
 - Peer review of scores
 - Writing a draft report
 - Exit meeting
- x Sending the report to HEIs for factual error check
- xi Consideration of the assessment report by the QAAC
- xii Decision by Council on Final Registration
- xiii Approval of final registration and grant of Charter by the Minister.

5.1.3 Outcome of registration assessment

The assessment gathers both quantitative and qualitative data. The data collected helps to determine the strengths and areas of improvement. The data is also used to quantify registering or not registering the institution or programme. Grading and interpretation of the assessment scores for each standard in the assessment tool are indicated below:

- Acceptable = 2
- Acceptable with conditions =1
- Unacceptable = 0

5.1.4 Criteria for registration of institution or Programme

The criteria used to aid decision making regarding registration of an institution or programme is summarised in Table 5.1.

Table 5.1: Criteria for registration of institution or programme

Outcome of assessment	Decision
a) Minimum score of 50% and above in each area or standard b) Items with (*) should attain a score of 2 in each of the assessed areas.	Registration of an institution

Items with (*) are critical areas and HEI needs to score the maximum of score, graded only 2.

Note: If an institution is not registered, it is at liberty to reapply for another assessment after addressing the areas that led to the initial unsuccessful outcome.

However, there has been calls from stakeholders especially from private HEIs for NCHE to remove or review the requirement for registration of institutions and programmes on its regulatory framework as one way on enhancing the alignment with international best practices.

5.2 Accreditation of Higher Education Programmes and Institutions

Accreditation is the process of recognizing that a higher education institution or its programmes meet the [minimum standards set by the NCHE](#). These standards encompass physical, human, and financial resources, as well as management and operational procedures, teaching and learning practices, research, and community service, in accordance with Section 28 of the [NCHE Act](#). To achieve accreditation, both the institution and its programmes must comply with the minimum standards specified in section 28 of the [NCHE Act](#).

The NCHE has an [Accreditation Evaluation Framework](#) that operationalizes the accreditation provisions outlined in the [NCHE Act](#). The accreditation of institutions takes into account the following factors:

1. Physical, human, financial, teaching, and learning resources;
2. Management and operational procedures; and
3. An acceptable standard of academic life focusing on teaching, research, community service, and expert service.

Whereas the programme accreditation considers the following:

1. The academic qualifications of all members of staff employed by a higher education institution during the period of assessment, including those expected to be employed by the higher education institution;
2. The total number of students enrolled in each Programme of instruction offered at a higher education institution and the standards attained by those that have graduated during the period of assessment;
3. Information and communication technology infrastructure and the provision for training;
4. The size and quality of the library and other teaching and learning resources;
5. The financial resources available for the exclusive use of a higher education institution, certified by its auditors;
6. The physical facilities including land available for the exclusive use of a higher education institution;

7. The student-staff ratio of a higher education institution; and
8. The currency, relevance, and frequency of review of the curriculum for each programme for comparability nationally and internationally.

Consequently, NCHE has developed the following accreditation assessment tools:

- [Institutional face to face](#)
- [Institutional ODeL](#)
- [Programme face to face](#)
- [Programme ODeL](#)

5.2.1 Aim of and objective accreditation assessment

5.2.1.1 Purpose of institution and programme accreditation

a) Purpose of institution accreditation

The purpose of HEI accreditation is multifaceted and focuses on ensuring and enhancing the quality of education provided by the institution. By assessing institutions against predefined standards, accreditation helps to uphold the integrity and credibility of higher education systems. Besides that, accreditation also advances the following:

1. **Quality Assurance:** To verify that the institution meets established standards of quality in areas such as curriculum, faculty, infrastructure, governance, and student support services.
2. **Continuous Improvement:** To promote a culture of ongoing assessment and improvement within the institution, encouraging periodic evaluations and refinements to educational programs, policies, and processes.
3. **Accountability:** To hold institutions accountable to students, parents, employers, and government agencies by ensuring they deliver on their educational promises and maintain high standards of excellence.
4. **Public Confidence:** To build public trust in the institution by providing transparency and proof that it adheres to nationally or internationally recognized educational standards.

b) Specific objectives on the accreditation assessment of the institution

The specific objectives of accreditation are to evaluate the:

- a) governance and management of an institution;
- b) the financial resources and sustainability of the institution;

- c) the availability and functionality of the infrastructure (buildings, space and other physical facilities);
- d) the provision of the library and other learning resources;
- e) the provision of water and sanitation facilities;
- f) the provision of student support services;
- g) the suitability and functionality of other physical infrastructures (including the availability and suitability of classroom and laboratory space);
- h) the quality assurance systems
- i) the financial resources and sustainability of the institution;
- j) the availability and suitability of the infrastructure (Buildings, space and other physical facilities);
- k) the overall situation of the library and other Learning resources;
- l) the availability of water and sanitation facilities;
- m) student support services;
- n) the suitability of other physical infrastructures (including the availability and suitability of classroom and laboratory space);
- o) the institution's quality assurance systems.

5.2.1.2 Methods of data collection for the assessment exercise

- a) Review of documents and other relevant documentary evidence in the form of policy documents, reports, minutes, guidelines, procedures, publications, etc.;
- b) Inspection of facilities and premises;
- c) Interviews with staff, students, and other stakeholders.

a) Purpose of an objective assessment for programme accreditation

The purpose of assessment for higher education academic programmes in the context of accreditation is to ensure the quality and standards of the programmes being offered. This assessment process involves evaluating various aspects such as program design and content, teaching methods, student outcomes, infrastructure, and institutional governance.

Specifically, the objectives of assessment for programme accreditation include:

1. **Quality Assurance:** To verify that academic programs meet established standards and provide high-quality education that aligns with institutional goals, national policies, and global benchmarks.
2. **Continuous Improvement:** To provide data and insights that help institutions identify areas of strength and areas that require enhancement. This allows institutions to make informed decisions for program improvement and innovation.
3. **Accountability:** To ensure that academic programs are accountable to stakeholders, including students, employers, the public, and regulatory bodies, by demonstrating that they meet specific educational outcomes.
4. **Compliance with Standards:** To confirm that the program complies with accreditation requirements set by NCHE in Malawi, which often include curriculum relevance, faculty qualifications, infrastructure, student support services, and more.
5. **Stakeholder Confidence:** To build trust and confidence among students, employers, and other stakeholders in the institution's ability to deliver relevant, quality and recognized academic qualifications.
6. **Recognition and Mobility:** Accreditation ensures that degrees and certifications from an institution are recognized both nationally and internationally, supporting student mobility and employability across borders.

Specific objectives of the assessment for accreditation of the programme

The specific objectives of the assessment are to evaluate:

- a) the financial resources and sustainability of the programme;
- b) the availability and suitability of the infrastructure (buildings, learning spaces, and other physical facilities) to support the programme;
- c) student support services;
- d) proposed programmes in terms of relevance and quality of design;
- e) the adequacy of an institution's academic and support staff complement for the delivery of the proposed programmes and curriculum;
- f) the appropriateness of students' entry requirements for the proposed programmes;
- g) the capacity of the institution's library facilities and resources to support the proposed programmes;

- h) the suitability of other physical infrastructures (including the availability and suitability of classroom and laboratory space); and
- i) the institution's quality assurance systems.

5.2.1.2 Methods of data collection for the assessment exercise

- a) Review of curriculum documents and other relevant documentary evidence in the form of policy documents, publications, etc.;
- b) Inspection of facilities and premises;
- c) Interviews with staff, students, and other stakeholders

5.2.3 Step-by-Step Accreditation Process

1. Application for Accreditation
2. Identifying the peer reviewers
3. Invoicing the institutions and feedback letter
4. Communicating the date for the review
5. Sending invitation letters to reviewers
6. Orientation of the reviewers
7. Site visit for institutional and programme review:
 - i Entry meeting
 - ii Review of programme/Institution:
 - document review,
 - observation. and
 - interview/focus group discussions).
 - iii. Peer review of scores
 - iv. Writing a draft report
 - v. Exit meeting
8. Sending the report to HEIs for factual error check
9. Consideration of the assessment report by the QAAC
10. Decision by Council on accreditation

5.2.3.1 Appointment of reviewers

Institutional and programme assessments leading to accreditation are carried out by experts in the field, herein referred to as reviewers. The composition of the review team is determined by the expertise required to competently assess the institution and programmes submitted for accreditation. These include a subject expert, librarian, administrator, student support expert, and quality assurance expert among others. Each reviewer is required to possess at least a Master's degree and at least five (5) years of work experience in their relevant fields. The Accreditation and Registration Department facilitates the process of identifying the desirable reviewers.

The review team appoints a Chairperson among themselves where necessary with support from the Secretariat. The Chairperson is supported by the Vice Chairperson in recording notes during the institution's assessment. In addition, the Chairperson, with support from the Secretariat, is responsible for the consolidation of the report. In their report, the reviewers provide recommendations on whether an institution or program should be accredited, accredited with conditions, or not accredited at all. The review team occasionally includes foreign experts to enhance the credibility of the accreditation process and the assessment outcomes. Since the post Covid-19 period, and the challenges of foreign currency in Malawi, NCHE has not been able to include foreign expert reviewers due to challenges of local banks to make payments in foreign currency. Once improvements in foreign currency on the local market is registered, NCHE will revert to including foreign local experts in the review panels for external quality assurance.

5.2.3.2 Training of the reviewers

In 2016, the NCHE initiated its first accreditation exercise, which involved training a pool of reviewers. This training was designed to equip reviewers with the essential knowledge and skills required for conducting accreditation assessments in HEIs. Over the years, the NCHE has continued to enhance its reviewer training programs to meet evolving educational needs and accreditation standards.

In 2023 and 2024, the NCHE conducted two additional rounds of reviewer training. The 2023 session included general training for all reviewers, with a particular focus on Open, Distance, and e-learning (ODEL) programs, reflecting the growing importance of flexible and technology-driven learning models. This training was developed following the creation of accreditation assessment tools specifically for ODeL programs, aimed at addressing the unique challenges associated with their

accreditation. This training was conducted to ensure that reviewers were knowledgeable in evaluating both face-to-face and online education frameworks.

The 2024 training session was more comprehensive, covering the entire accreditation process in detail, from initial assessments to final evaluations. It also introduced the basics of curriculum development, recognizing the critical role that well-structured curricula play in the quality of higher education. This holistic approach was intended to further strengthen the reviewers' expertise, enabling them to conduct more thorough and informed accreditation assessments.

Additionally, before each accreditation assessment begins, reviewers undergo an orientation process. This orientation serves to familiarise them with the specific review procedures and clarify their roles and responsibilities ensuring consistency and rigour in the accreditation process.

5.2.4 Outcome of Accreditation Assessment

The assessment gathers both quantitative and qualitative data. The data collected helps to determine the strengths and areas of improvement. The data is also used to quantitatively determine whether to accredit or not accredit the institution or programme. Grading and interpretation of the assessment scores for each item in the accreditation evaluation form or tool are indicated below:

- 0= Poor/Unavailable, 1 = Insufficient, 2 = Satisfactory, 3 = Good, 4 = Excellent
- All items with a star (*) are mandatory and required at the accreditation stage. For a programme to be accredited it must score a minimum of 3 on each of these areas.

5.2.5 Criteria for accreditation of institution or programme

Table 5.2 presents the criteria for accreditation of an institution or program.

Table 5.2: Criteria for accreditation of institution or programme

Aggregate Value	Outcome	Description
1 – 1.99	NOT SATISFACTORY	Not accredited/Withdraw of Accreditation
2 - 2.99	SATISFACTORY	Accredited with conditions (<i>provided all starred items have a minimum score of 3</i>).
3 - 4	EXCELLENT	Accredited (<i>provided all starred items have a minimum score of 3</i>).

5.2.6 Validity of the period of accreditation

The validity period of accreditation is one academic cycle. An academic cycle is a period required to complete a programme of study (The [NCHE Act](#), Section 2). The Institutional academic cycle means a period of seven years from the last accreditation assessment as defined in the [Accreditation Regulations](#) and [Accreditation Evaluation Framework](#). The Council shall conduct an assessment for re-accreditation of an institution and/or programmes before the end of the academic cycle if there is evidence of serious inadequacies.

5.2.5 The Effect of Accreditation

According to Section 29 of the [NCHE Act](#), qualifications awarded for programmes by an accredited HEI shall be recognized as comparable and of equivalent merit to similar qualifications awarded by other accredited institutions in Malawi and internationally.

5.3 Quality Audits, Spot Checks and Inquiry

5.3.1 Quality Audits

The NCHE conducts formal peer review quality audits to enhance the quality of education provided by HEIs through regular programme and institutional quality checks. The purpose is to ensure that (HEIs) operate under minimum standards for higher education. To ensure a systematic and consistent approach to the process, the NCHE developed an audit tool that has six critical areas including governance and management, student admission, staffing, finance, assessment procedures, and delivery of academic programmes.

5.3.1.1 Specific procedure for carrying quality audit

1. Communication to HEI of an intention to conduct an audit
2. Engagement of peer reviewers
3. Orientation of reviewers
4. Conduct of quality audit in an institution
 - i Courtesy call to the leadership upon arrival at the institution
 - ii Entry meeting
 - iii Tour of the institution's premises
 - iv Documents review

- v Interviews with stakeholders (students, staff, and management)
 - vi Exit meeting
5. Consolidation of the drafted audit report
 6. Submission of a draft report by the audit panel
 7. Submission of the report to an institution for factual error check
 8. The institution submits the draft report with its comments
 9. The review panel attends to comments from an institution
 10. The review panel submits the report back to the NCHE
 11. The NCHE submits the report to the QAAC for consideration
 12. The QAAC considers the report and makes recommendations to the Council
 13. The Council considers recommendations and makes its resolutions
 14. The NCHE communicates the resolutions to the institution

5.3.1.2 Audit projected reform areas

Informed by the need to align with international standards and practices, the NCHE is considering the following reforms in its audit processes:

- i The NCHE will conduct national reviews to bring harmonisation of standards and comparability among similar programmes offered by different HEIs
- ii HEIs will be encouraged to generate and submit a SAR in preparation for an audit
- iii The audit process will be more focused on all the 13 minimum standards for higher education considering that they are all critical for the attainment of quality.
- iv Audits will be redefined as reviews, as the term "audit" often implies a focus on fault-finding rather than the collaborative nature of a peer review.
- v The NCHE will consider establishing a robust and comprehensive audit process, and the preparatory period should typically range from one year to eighteen months.

5.3.2 Spot checks

A spot-check visit is an unannounced visit to HEI by the NCHE to check compliance with minimum standards. The visit is generally unannounced in order to find HEIs in their natural settings. As a matter of courtesy, however, the NCHE informs the institutions a week or a few days before the visit. The impromptu visit is carried out at any HEI that has been granted an accreditation status to ensure

quality is maintained at all times. If a serious quality breach occurs, the Council decides within twenty-eight days (28) of receiving the spot check report whether to conduct a reassessment or not. Based on the reassessment results, the Council may revoke the accreditation.

5.3.3 Inquiry

The NCHE constitutes a committee to conduct an inquiry upon receipt of a complaint from the general public including media, students, employees, and parents, or observation of suspicious undertakings by a higher education institution. The complaint is assessed and a decision is made on whether or not the matters raised fall within the NCHE's mandate. Once the complaint is deemed valid, an inquiry team is formed, consisting of the following members:

- i One senior academic member of staff from a public HEI;
- ii One senior academic member of staff from a private HEI;
- iii Two persons with at least five years' experience in higher education management; one from a public and another from the private institution;
- iv One member from a professional body, where necessary; and
- v At least one NCHE officer to support the Inquiry Team.

If the inquiry findings indicate a serious breach of quality, the Council will decide within twenty-eight days of receiving the inquiry report whether to subject the HEI to a reassessment for accreditation. The Council may revoke accreditation depending on the results of the reassessment.

5.4. Qualifications Recognition, Verification and Equation

5.4.1 Process for qualifications recognition and verification

Any person may send an application to have their qualification(s) evaluated by the NCHE. Applications are made on the approved application form and must be completed fully, correctly, and legibly.

5.4.2 Timelines for Applications

There is an ordinary and urgent application

- i Applications are ordinarily processed within 21 working days.
- ii Urgent applications may be processed within 10 working days.

5.4.3 Verification Results

A Verification report/letter is only issued to the applicant. A certified copy of the verification report/letter may be issued to another party if specifically requested and paid for by the applicant. Verification results will be made available according to the applicant's instruction, by email, mail or personal collection.

5.4.4 The process includes verifying whether the qualification is:

- i Registered on the HEQF in the country of origin;
- ii Offered by a registered and accredited institution; and
- iii Lawfully obtained

5.5 Harmonisation of Public Universities Selection

One of the mandates of the NCHE is to ensure a streamlined and consistent student selection process in public higher education institutions. This responsibility holds particular importance as it directly impacts the future of aspiring students and the overall education system in Malawi. Since 2014, the NCHE has been coordinating the harmonisation of student selection in all the six public universities. This has enabled the process to be more efficient and transparent, bringing a sense of order and fairness to it.

Previously, each university conducted its selection process, which resulted in several issues; one of which being multiple selection of some students for public universities, depriving other deserving students a fair chance for selection. Moreover, applicants were burdened with the need to pay for separate applications to each university. However, with the NCHE coordinating the application process, significant improvements have been made. Now, candidates only need to submit a single application and pay one application fee. By centralising the application process, the NCHE has brought much-needed efficiency and transparency to university admissions. Important to note is that the NCHE does not directly select students for public universities. The selection process is carried out by the respective universities through their Selection Committees, guided by their institutional Acts. The NCHE just coordinates the Public Universities Selection (PUS) process by bringing together the Technical Working Group (TWG), which comprises representatives from each of the public universities. The TWG develops a calendar of events that outlines the timeline for various stages of the selection process, including data submission, application call, selection, and result release. The NCHE ensures the coordination of these processes by organising meetings and overseeing the implementation of any changes in government selection policy.

Chapter 6. SWOT Analysis

In this chapter, a SWOT analysis of the NCHE is presented and represents a self-reflection of organisational functions and operations including a contextual analysis for purposes of planning and improvement by identifying risks, and enhancing overall quality of services. The analysis of the strengths, weaknesses, opportunities and threats of the NCHE is presented in Table 6.1.

Table 6.1: Analysis of the strengths, weaknesses, opportunities and threats of the NCHE.

STRATEGY PILLAR	INTERNAL FACTORS		EXTERNAL FACTORS	
	Strengths	Weaknesses	Opportunities	Threats
Governance and Management	1. NCHE has a qualified and sufficient human resource 2. The Council has defined governance structures. 3. There are strong internal controls, supervision, and monitoring mechanisms. 4. Acquisition of own office space and land. 5. Strong Government support.	1. The absence of regional/district structures to cater to district and regional matters. 2. Inadequate infrastructure and operating equipment make it difficult to meet the growing demand for Council services. 3. Inadequate financial resources at the Secretariat in the face of growing demands for the Council services.	1. The NCHE Act and government policies guarantee the Council's legitimacy, authority, and sustainability. 2. Visible government reforms including the promotion of and emphasis on higher education. 3. Government prioritisation of higher education.	1. Perceived political interference on operational and governance matters of the Council. 2. Inadequate government funding to meet institutional needs. 3. Delayed harmonisation of the sub-sector laws with the NCHE statute may compromise its mandate.

Business Processes and Operations	1. The presence of an enabling environment for policies such as quality assurance and accreditation standards, regulations, and reforms. 2. The Council has its assets/tools for trade like motor vehicles and equipment. 3. The Council has installed and operationalised systems and technology. 4. Increased buy-in and acceptance of the NCHE activities by stakeholders.	1. Harmonised regulatory frameworks for higher education institutions. 2. Over-reliance on paperwork for its operations instead of digitization. 3. Harmonised and uncoordinated programs and curricula by HEIs. 4. Fragmentation of the legal framework of public Universities since each of them has its own Parliamentary Act without much reference to the NCHE Act. 5. Nonexistence of career progression in some cadres	1. Increased demand for higher education locally and internationally. 2. Emergence of technological advancements and platforms. 3. Increasing number of higher education institutions. 4. Wide areas of collaborations in HE, locally and internationally.	1. Slow adaptability towards technological advances. 2. Non-compliance to quality standards by some higher education institutions
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Stakeholder Engagement and Relations	1. There are constant and wide consultations with different stakeholders. 2. Strong and vibrant local and international networks and collaborations. 3. Visibility through website and online presence, including public awareness.	1. Limited awareness of the role and functions of the NCHE by other stakeholders such as students/parents. 2. Limited engagement platforms through the NCHE website, e.g. news updates, and queries for feedback.	1. The growing goodwill and trust from stakeholders. 2. Increased networking and collaboration with other stakeholders that include regulatory bodies (e.g. AQVN and SAQAN).	1. Perceived biases towards public higher education institutions at the expense of private institutions. 2. Negative perceptions from some stakeholders who see the NCHE as a policing unit rather than a partner. 3. Informational gap by some stakeholders on the role and functions of the NCHE.
Financial Management and Sustainability	1. The Council is assured of continued subvention from the government being a state-owned organisation. 2. The NCHE also generates its income through fees (service	1. Lack of alternative innovative funding models, e.g. HE levy, research consultancy, corporate partnership, and regional and global networking.	1. Existence of development partners for funding projects. 2. Ongoing Government reforms are supporting institutional innovation for sustainable funding.	1. Fragile funding environment in the face of economic turndown 2. Shifts in priority areas by Government and donors.

	fees for quality assurance services).		3. Increasing numbers of HEIs for funding activities. 4. Opportunities for collaborative research with external partners to generate income. 5. External linkages and partnerships can provide opportunities to improve the NCHE functions.	
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Chapter 7. Internal Quality Assurance Procedures

The NCHE is governed by the [NCHE Act](#), which outlines the criteria for registration and accreditation of higher education institutions. This legislation forms the legal framework for maintaining and enforcing quality standards across all higher education institutions in Malawi. Guided by this Act, the NCHE has developed [Minimum Standards](#) that were benchmarked against continental and international Quality Assurance Agencies (QAA) guidelines and standards. These standards ensure that institutions align with globally recognized best practices in higher education.

In addition, the NCHE has developed specific guidelines for internal use and for guiding HEIs in compliance with these standards. The guidelines cover various quality assurance processes. The NCHE also established Frameworks such as the Accreditation Evaluation Framework, which provides a detailed guide for the Secretariat on how to conduct accreditation assessments. This framework includes selection criteria for reviewers, ensuring that only qualified and experienced professionals are involved in the evaluation process. Furthermore, the NCHE developed [Standard Operating Procedures](#) (SOPs) to guide all internal processes related to quality assurance. These SOPs ensure consistency, transparency, and accountability in the way the NCHE carries out its mandate, from registration to accreditation and periodic reviews of HEIs.

Moreover, the Quality Assurance Division of the NCHE comprises two fully operational departments: The Registration and Accreditation Department and the Standards and Quality Audits Department. Each of these departments is led by highly qualified directors who hold PhDs from reputable universities and bring extensive academic and professional experience to the agency. On one hand, the Registration and Accreditation Department is responsible for overseeing the registration and accreditation of higher education institutions, ensuring that they meet the minimum standards. This department is essential for maintaining the integrity and quality of higher education by conducting thorough assessments and evaluations before granting accreditation status. On the other hand, the Standards and Quality Audits Department is tasked with the development of standards, guidelines, and Standard Operating Procedures (SOPs) that guide both internal and external quality assurance processes. However, there is a need for the NCHE to review Minimum Standards for higher education in Malawi to include emerging issues.

Chapter 8: Alignment of the NCHE with the African Standards and Guidelines Part B and Part C

8.1: NCHE Compliance with ASG-QA Part B

Standard 1. Objectives of External Quality Assurance and Consideration for Internal Quality Assurance

External quality assurance shall ensure that the higher education institution has clearly articulated vision and mission statements, and it shall help the institution ensure the effectiveness of its internal QA mechanisms, providing an additional instrument for assessing institutional quality

The minimum standard 1.1 for higher education in Malawi requires that all HEIs should have a vision, mission, core values and objectives statements. The vision and mission must be shaped by the national strategic priorities or policies and other national contextual factors. During the assessment for registration and accreditation of institutions and programmes, the NCHE verifies if the institution complies with these indicators. For instance, during the accreditation assessment, each indicator is rated 0 to 4 with 0 representing poor or unavailable and 4 excellent.

The NCHE also conducts capacity building initiatives for HEIs to ensure their IQA systems are established and strengthened. To this effect, the NCHE has developed Guidelines for the establishment and strengthening of IQA units in HEIs. The NCHE also conducts workshops as part of capacity building. For more details refer to [Training Reports](#).

Accreditation evaluations, grounded in the established [Minimum Standards](#), rigorously assess the availability, implementation, and effectiveness of these standards within HEIs. The NCHE's accreditation processes ensure that each institution's quality assurance policies and procedures are aligned with these minimum standards, fostering a consistent and coherent approach to quality management in the higher education sub-sector.

In addition to assessments, the NCHE conducts quality audits, and spot checks which provide detailed feedback through [audit reports](#). By engaging institutions in these processes, the NCHE helps build the necessary capacity for HEIs to sustain and improve their quality assurance systems.

The NCHE's evaluations are not merely regulatory exercises but also serve as a mechanism to drive continuous improvement within HEIs. Following assessments, HEIs are given

recommendations, which are used to develop [improvement plans](#) using an [Improvement Plan Template](#). The NCHE reviews these plans during subsequent audits and support visits, ensuring that institutions remain accountable for their quality enhancement initiatives.

The [Minimum Standards](#) that guide the NCHE's evaluations were developed through benchmarking with the African Standards and Guidelines for Quality Assurance (ASG-QA) and other international QAAs. However, these standards have been contextualised to reflect the specific needs of the Malawian higher education system, as well as the particularities of the fields being evaluated. This ensures that the NCHE's quality assurance framework is both globally informed and locally relevant. For example, to further contextualise minimum standards, the NCHE has developed the standards and guidelines for ODeL, and guidelines for implementing bridging programmes in HEIs. However, it must be noted that the minimum standards for higher education are due for review to further align with regional, continental and global best practices. Meanwhile, the NCHE continues to gather information from stakeholders which will inform the review of the minimum standards.

The NCHE also ensures that the peer reviewers appointed for institutional evaluations are experts in their respective fields. These experts are thoroughly oriented and guided to respect the specificities of the disciplines they assess while upholding the autonomy of HEIs and the academic freedom of faculty and staff. This collaborative and respectful approach fosters an environment where quality improvement is encouraged without compromising the integrity and independence of academic institutions. For example, during orientation for assessments, reviewers are advised to respect the autonomy, innovativeness and uniqueness of the processes and practices within the HEIs as long as they are consistent with the minimum standards for higher education. Further, there was an issue with a HEI where students wanted the NCHE to intervene, and the NCHE guided that the matter be handled using the governance structures within the HEI and referred the students to the institution ([see sample letter respecting institutional autonomy](#)). The description of how the NCHE aligns with standard 1 is summarised in Table 8.1.

Table 8.1: Summary description of how the NCHE aligns with Standard 1

ASG-QA –STANDARD 1	DESCRIPTION OF HOW NCHE IS ALIGNED TO ASG-QA -STANDARD 1	EVIDENCE /DATA OR INFORMATION SOURCE
External quality assurance shall ensure that the higher education institution has clearly articulated vision and mission statements, and it shall help the institution ensure the effectiveness of its internal QA mechanisms, providing an additional instrument for assessing institutional quality.	a) The NCHE requires that HEIs have a clearly defined, articulated, and publicly available vision, mission and objectives as per the NCHE minimum standards (Minimum standard 1.1). b) NCHE conducts capacity building workshops, pre-assessments and support visits to capacitate HEIs on understanding and implementation of the NCHE minimum standards c) Conduct support visits, audits and NCHE has developed and shared guidelines for establishment and strengthening IQA units to support institutions in strengthening their IQA system. d) NCHE minimum standards were developed by benchmarking with ASQ-QA and other QAA agencies	● NCHE minimum standard ● Accreditation Assessment Tool ● Guidelines for establishing and strengthening internal quality assurance units

	but they have been contextualised e) The experts appointed as peer reviewers are oriented and guided properly.	
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Standard 2. Designing External Quality Assurance Mechanisms Fit-for-Purpose

Standards, guidelines and processes for external quality assurance shall be designed to be fit for purpose, defined to achieve the intended aims and objectives of EQA, and to strengthen IQA systems at institutions.

The purpose of accreditation, as outlined by the National Council for Higher Education (NCHE) Act no.15 of 2011, is to support higher education institutions (HEIs) in their continuous improvement processes, ensuring that both institutions and their academic programmes maintain high standards of quality. Section 29 of the [NCHE Act](#) stipulates that accredited programmes are comparable and of equivalent merit to similar qualifications awarded by other accredited HEIs in Malawi and internationally. This alignment helps guarantee that Malawian qualifications are recognized both nationally and globally. In addition, accreditation is also a manifestation that the HEIs are accountable for the quality of education they are offering. During the accreditation of HEI and programmes, review panels have an opportunity to check if the approved curricula are implemented appropriately by collecting evidence through interviews with stakeholders such as staff, students including examining external examiner reports.

NCHE will enhance research and development to further inform comparability of graduates across similar programmes as well as developing a framework for minimum body of knowledge for similar programmes in the Country. This way, comparability in terms of quality of programmes and graduates will be more comparable.

To ensure its external quality assurance (EQA) mechanisms meet their intended goals and objectives, the NCHE employs a variety of monitoring and evaluation techniques. These include accreditation assessments, [quality audits](#), spot checks, and [client satisfaction surveys](#).

The NCHE's [minimum standards](#) are carefully benchmarked against those of established quality assurance agencies in the region, including Kenya, Nigeria, Uganda, South Africa, and [New England Association of Schools and Colleges \(NEASC\)](#) including the [African Standards and Guidelines for Quality Assurance \(ASG-QA\)](#). This benchmarking ensures that the frameworks, standards, and methodologies adopted by the NCHE reflect best practices and maintain relevance nationally, regionally and internationally.

The assessment tools and approaches used by the NCHE were developed through consultations with key stakeholders, including HEIs, ensuring that the standards are not only fair but also contextually relevant. For example, in the 2023/24 calendar year, the NCHE developed the standards and guidelines for ODeL institutions and programmes, guidelines for the establishing and strengthening of IQA units in HEIs, and guidelines for implementation of Bridging programmes in consultation with HEIs. The NCHE also developed Stakeholder involvement is central to the NCHE's processes, driving ongoing engagement in the development and refinement of its policies and guidelines. The NCHE acknowledges that, although these tools, standards, and guidelines are developed collaboratively, the responsibility for implementation and enforcement rests with the NCHE. HEIs play a crucial role in shaping their quality frameworks with these standards, while the NCHE is committed to continually improving its tools and processes.

Feedback from stakeholder meetings, including [Vice-Chancellor and Registrar engagements](#), as well as insights from [training workshops](#) and accreditation assessments, has prompted planned revisions of assessment tools and minimum standards. Currently, the NCHE has reviewed and continues to review the newly [approved assessment tools](#) based on feedback from key stakeholders. The next plans are to review the minimum standards for higher education institutions.

The NCHE has established clear standards and guidelines for various higher education delivery modalities in Malawi, including face-to-face, Open Distance and e-Learning (ODeL), online, hybrid, and dual-mode programmes. Specific [standards and guidelines for Open, Distance, and e-Learning \(ODeL\)](#) and [assessment tools for ODeL](#) ensure that the unique needs of these modalities are met, enhancing accessibility and quality.

Overall, the NCHE is committed to continuous improvement in collaboration with HEIs and other key stakeholders towards ensuring that the quality of higher education in Malawi remains

competitive both regionally and internationally. The description of how the NCHE aligns with Standard 2 is summarised in Table 8.2.

Table 8.2: Summary description of how the NCHE aligns with Standard 2

ASG-QA –STANDARD 2	DESCRIPTION OF HOW NCHE IS ALIGNED TO ASG-QA -STANDARD 2	EVIDENCE /DATA OR INFORMATION SOURCE
Standards, guidelines, and processes for external quality assurance shall be designed to be fit for purpose, defined to achieve the intended aims and objectives of EQA, and to strengthen IQA systems at institutions.	a) The NCHE has clear standards and guidelines defined based on the type of courses offered in higher education, considering the modalities of HEI provision such as face-to-face, online, hybrid, dual mode, etc. The NCHE has general minimum standards, and standard and guidelines for ODeL, the same is the case with assessment tools. b) The purpose of the NCHE’s accreditation is a means of ensuring that HEIs are accountable to stakeholders by demonstrating achievement of acceptable quality standards and drive continuous improvement based on the accreditation assessment outcomes. c) NCHE verifies that its EQA mechanisms meet the intended goals and objectives through conducting audits and spot checks, and client satisfaction surveys. The NCHE ensures that tools and processes are reliable and in line with good quality	● Stakeholder (VCs and registrars) engagement report ● Minimum Standards ● The NCHE client satisfaction survey. ● ODeL Standards and Guidelines ● ODeL Assessment Tools, and ● Face-to-Face Assessment Tools.

	assurance practises by benchmarking against standards from mature quality assurance agencies in the region and beyond. The assessment tools and approaches were developed in consultation with all key stakeholders such as HEIs so that the standard is fair and relevant to our context. The NCHE is satisfied with its collaboration with stakeholders which is why it is still involving the stakeholders in the development of its policies, standards and guidelines. d) The NCHE has clear standards and guidelines defined based on the type of courses offered in higher education, considering the modalities of HEI provision such as face-to-face, online, hybrid, dual mode, etc. The NCHE has general minimum standards, and standard and guidelines for ODeL, the same is the case with assessment tools.	
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Standard 3. Implementation Processes of External Quality Assurance

The standards, processes, and procedures for EQA shall be predefined, reliable, published, and consistently implemented for purposes of accountability.

The National Council for Higher Education (NCHE) ensures the reliability of quality assurance tools and processes by benchmarking against regional and global frameworks, such as those from South Africa, Nigeria, Kenya, Uganda, England, and the United States of America. This

commitment to global standards is reflected in the [Minimum Standards](#), each broken down into indicators to ensure consistency and accountability. Once developed, these tools are disseminated to HEIs and published on the NCHE's website. The NCHE is also developing scoring rubrics for accreditation tools. The institution and programme accreditation processes follow well-defined steps outlined in the [NCHE Accreditation Evaluation Framework](#) and described in section 5.2.3 of Chapter 5. The process starts with submission of an application by the HEI, self-assessment exercise, onsite visit, approval of the assessment report by the Council, and finally development of improvement plans by the HEIs. The NCHE provides the [Self-Assessment Report \(SAR\) Template](#) and [Improvement Plan Template](#) used by the HEIs in order to assist them in the process of self-evaluation, preparation for accreditation and for continuous improvement in line with the ASG-QA. The SAR template helps institutions document their institution profile, strengths, and areas needing improvement, while the Improvement Plan guides them in addressing any observations made during the assessment.

The Self-Assessment Report (SAR) must be submitted well in advance to the NCHE before the accreditation assessment commences. Once the NCHE approves the SAR, assessment dates are set, and the NCHE formally communicates the assessment programme to the institution through a letter from the CEO. The SAR is shared with reviewers during the site visit for them to verify a number of quality issues in the SAR. However, it is worth noting that gaps exist in the usage of the HEI's SARs by expert reviewers who do not dedicate much time to use and verify issues in the SAR. Moving forward, we will work on emphasizing and further enhancing capacity building for review panels to dedicate appropriate time to using the institutional SARs during registration and accreditation assessments.

The site visits comprise an entry meeting, assessment of curriculum and supporting documents, infrastructure inspections, independent interviews with academic staff, support staff and students, and an exit meeting. The NCHE ensures that interview questions are context-specific and tailored to the field under review. Reviewers work collaboratively to develop questions targeted at the different stakeholders to ensure a comprehensive evaluation of the institution's performance. After the site visit assessment, the assessors produce a report which NCHE sends to the HEI for factual error checks before submitting it to the Council for approval (See example of a [factual error checked report](#), comments from HEI are in red). Beginning this year, a [post assessment evaluation](#)

[tool](#) is administered to get feedback from the HEI on the overall accreditation process and how best it can be improved.

The Department of Standards and Audits at the NCHE monitors the implementation of improvement plans, ensuring institutions enhance their educational quality. Additionally, this department conducts quality audits and spot checks to verify HEI compliance (See example of a [quality audit report](#) . In addition, the assessment process is governed by clear and detailed guidelines, as outlined in the [Accreditation Evaluation Framework](#), [Reviewers' Guidelines](#) for the Assessment of HEIs and the Code of Conduct for reviewers. By adhering to these rigorous processes and benchmarks, the NCHE demonstrates its compliance with ASG-QA standards and its commitment to enhancing the quality and reliability of assessment of the quality of higher education in Malawi. This systematic approach fosters a culture of continuous improvement and accountability within Malawian HEIs, ensuring that they meet both national, regional and international expectations for quality education. The description of how the NCHE aligns with Standard 3 is summarised in Table 8.3.

Table 8.3: Summary description of how the NCHE aligns with Standard 3

ASG-QA –STANDARD 3	DESCRIPTION OF HOW NCHE IS ALIGNED TO ASG-QA -STANDARD 3	EVIDENCE /DATA OR INFORMATION SOURCE
The standards, processes, and procedures for EQA shall be predefined, reliable, published, and consistently implemented for purposes of accountability.	a) The NCHE ensures that minimum standards and relevant tools and processes are reliable, and in line with good quality assurance practices by benchmarking against standards from mature quality assurance agencies in the region and beyond. b) The steps in accreditation evaluation including self-assessment are clearly defined by the NCHE Accreditation Evaluation Framework. The HEIs are informed through a formal letter from	• Minimum Standards • Accreditation Evaluation Framework • Samples of Self-Assessment Report. • Samples of Improvement Plan. • Reviewers Guidelines

	the NCHE and orally at the entry meeting during site visits. c) NCHE has a Self-Assessment Report (SAR) template and improvement plan template. Improvement plan template is used by institutions to document how they will work and improve on the observations made during the assessment. d) The assessment guidelines are stated in reviewers' guidelines for assessment of HEIs and code of conduct.	
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Standard 4. Independence of Evaluation

EQA shall be carried out by panels of external experts drawn from a wide range of expertise and experience.

The NCHE is committed to ensuring the quality and integrity of higher education through adherence to the African Standards and Guidelines for Quality Assurance ([ASG-QA](#)). Below are specific measures it has undertaken to comply with the established standards:

Criteria for Appointment of Reviewers

According to the [NCHE accreditation evaluation framework](#), the composition of the review team is determined by the expertise required to competently assess the institution and programmes submitted for accreditation. These include subject expert, librarian, administrator, student support expert and quality assurance expert, among others. The NCHE engages professional reviewers for programmes which are professional in nature. Every reviewer is required to hold at least a Master's degree and have a minimum of five years of relevant work experience in higher education. The Department of Registration and Accreditation facilitates the identification of suitable reviewers.

The review team appoints a Chairperson among themselves with support from the Secretariat where necessary. The Chairperson is assisted by the administrator or Vice-Chairperson in taking institutional assessment notes. In addition, the Chairperson is responsible for consolidation of the reports with support from the Secretariat. International experts were involved in the early phase (2016 - 2018) of the assessments. However, currently they are not being involved due to economic challenges such as scarcity of foreign exchange. The NCHE does not include students in the review teams.

Reviewer Orientation and Training

The NCHE is committed to maintaining high standards in the review process by conducting orientations for all reviewers before every onsite assessment, ensuring they are well-prepared to meet established quality assurance standards. The NCHE recently conducted [ODEL Reviewer Training](#) (2023) and [Quality Assurance Training](#) (2024) which have equipped reviewers with the latest knowledge and skills for effective evaluations. Through these efforts, the NCHE has trained over 100 academicians and administrators, many of whom actively serve as reviewers.

Conflict of Interest Management and Ethical Practices

To ensure the objectivity and independence of our review processes, the NCHE follows stringent procedures to eliminate potential conflicts of interest. All selected reviewers are thoroughly vetted to confirm they are free from conflicts of interest. Before commencing any assessment, reviewers are oriented on the [Code of Conduct](#) and are required to sign a contract outlining their ethical responsibilities, including conflict of interest. This contract is designed to uphold the integrity of the review process. Additionally, all assessment scores are peer-reviewed and interviews with HEIs are conducted jointly by reviewers, in collaboration with the NCHE secretariat staff. This collaborative approach ensures that judgements are impartial and grounded in ethical practice consistent with the accreditation [evaluation framework](#), reviewers' [guidelines](#) and [contracts](#), and reviewers' [code of conduct](#).

HEI Vetting of Reviewers During the On-site Visit

During on-site visits, NCHE ensures transparency and fairness by involving HEIs in vetting reviewers in case of a conflict of interest. Should any potential conflict of interest be identified, the conflicted reviewer(s) are notified, heard and immediately recused where appropriate. Vetting reviewers ensures that the assessment remains unbiased and that HEIs have confidence in the

integrity of the external quality assurance process. As part of continuous improvement beginning the third quarter of 2024, the NCHE has started sharing a list of review panels to HEIs for approval prior to onsite assessment to verify with the institution if any of the reviewer has a possible conflict of interest (See example of the correspondence on reviewers verification for [conflict of interest](#)). In addition, the reviewers are required to sign a contract which also includes a clause on conflict of interest. The description of how the NCHE aligns with Standard 4 is summarised in Table 8.4.

Standard 5. Decision and Reporting of External Quality Assurance Outcomes

Reports and decisions made as a result of external quality assurance shall be clear, based on published standards, processes and procedures, and made accessible, for purposes of accountability.

The NCHE conducts accreditation and quality audits based on set minimum standards for higher education. The tools used to collect data for accreditation and quality audits reports are aligned with the minimum standards. The tools have indicators which are used to evaluate the compliance with the minimum standards. The overall process of accreditation and quality audits is clearly understood by the HEIs. Minimum standards, assessment tools, guidelines, frameworks are shared with HEIs and are also published on the NCHE's website. Apart from sharing these documents, the NCHE also conducts the capacity building for HEIs to make them aware of the standards, processes and procedures of accreditation. Accreditation and quality audit reports are generated from the data collected during the site visits and the reports are prepared on standardised template and go through approval processes. The reports contain recommendations which are considered by the Council in making its resolutions. When the resolutions are made, the decisions are communicated to the HEIs through letters and publication on the NCHE website and media. The following sections describe how accreditation and quality audit reports are prepared and decisions are made and communicated to the HEIs and stakeholders.

Accreditation process: The institution and programme accreditation processes are communicated to HEIs through sharing and/or publicising the [accreditation evaluation framework](#) or email communication/official letters, stakeholder meetings such as [meeting with vice-chancellors and registrars](#), and [pre-assessment](#) visits. In addition, the following supporting documents are shared with HEIs: [Minimum Standards](#), [Assessment tools](#), and [SAR template](#) and notification for pre-

assessment support visits and onsite assessment dates. The best practice requires that the list of review teams be sent to HEIs for approval before the site visit hence the NCHE has started following this approach since 30th August, 2024.

Quality Audits and Spot Checks: The HEIs are informed in advance regarding the procedures and processes of the quality audits (see example of a [letter to a HEI prior to the quality audits exercise](#)). Communication on the processes is further elaborated during the entry and exit meetings by the Chair of the Panel.

Accreditation Report Writing Process: The report writing process is led by the Chairperson of the review team, with support from the NCHE secretariat. Once completed, the report is sent to Higher Education Institutions (HEIs) for factual error checking, ensuring accuracy and coherence. These measures promote objective and fair decision-making by the Council and align with ASG-QA principles, emphasising transparency and reliability in quality assurance (see [Sample reports](#), [Sample factual error checked report](#), [Accreditation Evaluation Framework](#)).

Reviewer Code of Ethics and Conflict of Interest Management: The NCHE enforces a t may compromise their integrity. These measures ensure impartiality and ethical conduct in the quality assurance process, aligning with ASG-QA's expectations for ethical assessments.

Factual Error Check: After completing the assessment report, the reviewer sends it to the institution for factual error checking. The institution can review the report and provide feedback. The reviewers then consider the institution's comments and make adjustments as needed. If discrepancies arise between the reviewer's findings and the institution's response, a verification visit is organised to clarify observations. This evidence-based, iterative process aligns with ASG-QA requirements for collaborative and transparent engagement, ensuring informed decisions based on accurate and verified data. (see [Sample reports](#), [Sample factual error checked report](#), [Accreditation framework](#)).

Final Review and Decision-Making Process: Once the review process is complete, the report is submitted to the NCHE's executive management for consideration in line with the [Accreditation Evaluation Framework](#). It then proceeds to the Quality Assurance and Accreditation Committee (QAAC), a sub-committee of the Council, which reviews the report and makes recommendations to the Council. The final decision is made by the NCHE Council, based on QAAC's

recommendations. [Council resolutions](#) and [assessment reports](#) are communicated to HEIs before public release. This structured, multi-tiered approach aligns with ASG-QA’s focus on rigorous internal review and governance, promoting accountability and integrity. QAAC and Council minutes are available in print and will be shared during the onsite external review by ENQA.

Publication of Assessment Outcomes: The outcomes of both programme and institutional assessments as well as quality audits/spot check outcomes are made public through [press releases](#) in newspapers and other media outlets. Accredited institutions are also published in the [government gazette](#). This practice ensures transparency and public accountability, as required by ASG-QA, making the accreditation process visible and accessible to stakeholders, including students, employers, and the general public.

Client Satisfaction Survey: The NCHE administers a [client satisfaction survey](#), which serves as a key tool for gathering feedback on the effectiveness and quality delivery of our services. The survey provides the NCHE with valuable insights into areas of improvement and ensures that its services are meeting the expectations of stakeholders, particularly higher education institutions (HEIs) and students. The description of how the NCHE aligns with standard 5 is summarised in Table 8.5.

Table 8.5: Summary description of how the NCHE aligns with Standard 5

ASG-QA –STANDARD 5	DESCRIPTION OF HOW NCHE IS ALIGNED TO ASG-QA -STANDARD 5	EVIDENCE /DATA OR INFORMATION SOURCE
Reports and decisions made as a result of external quality assurance shall be clear, based on published standards, processes and procedures, and made accessible, for purposes of accountability.	a) The report writing process is guided by the Chair of the Review Team, with support from the NCHE secretariat. Upon completion, the report is sent to the Higher Education Institutions (HEIs) for factual error checking. b) Reviewers are required to sign a contract that highlights potential conflicts of interest. This contract obligates reviewers to declare any	• Reviewers contract. • Reviewers code of conduct. • Sample accreditation evaluation reports.

	conflicts that may compromise the integrity of the review. c) After the reviewers complete the assessment report, it is sent to the institution for factual error check. The institution is allowed to review the report and provide feedback. Based on the evidence submitted, the reviewer revisits the institution's comments and adjusts where necessary. d) The evaluation report contains clear areas for improvements and recommendations. e) Once the review process is concluded, the report is submitted to the Quality Assurance and Accreditation Committee (QAAC), a sub-committee of the Council, which carefully reviews the report and makes recommendations. The final decision is made by the NCHE Council based on the recommendations of QAAC. f) The outcomes of both programme and institutional assessments are made public through newspapers and other media outlets. Accredited institutions are also published in the government gazette.	● Sample factual error check report. ● Accreditation Evaluation Framework. ● Reviewers Contract. ● Reviewers Code of Conduct. ● NCHE Press Release ● Gazetted HEIs.
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Standard 6. Periodic Review of Institutions and Programme

External quality assurance of institutions and programmes shall be undertaken on a cyclical basis.

The NCHE has a defined cyclical accreditation evaluation for programmes and institutions. Below are the details.

Cyclical Evaluation of Programmes and Institutions: The NCHE ensures that institutions and their academic programmes are evaluated on a cyclical basis by maintaining an up-to-date database of accredited institutions. The validity period of accreditation is one academic cycle in accordance with the [NCHE Act 2011](#), [Accreditation of higher education institutions regulations](#) (2023), and [Accreditation Evaluation framework](#). After the expiry of five years, the higher education institutions apply for renewal of programme accreditation. The Institutional academic cycle is seven years from the last accreditation assessment. The NCHE writes HEIs after the expiry of accreditation to remind them to renew accreditation. The NCHE conducts quality audits of accredited institutions and/or programmes periodically to check compliance with minimum standards. The evaluation cycles, including the timeline for when each institution or programme accreditation will expire are clearly defined and made available to the HEIs. This transparency aligns with ASG-QA requirements for publicly accessible evaluation cycles.

Use of Evaluation Results: Following the assessment, the NCHE generates detailed assessment or evaluation reports that highlight areas for improvement. These reports are used by HEIs to develop and implement [improvement plans](#). The results are not only used to assess compliance but also as a foundation for continuous quality improvement across HEIs. By following these practices, the NCHE-demonstrates alignment with ASG-QA, ensuring that all stakeholders are aware of the evaluation processes and that institutions continuously improve through evidence-based evaluations. The description of how the NCHE aligns with standard 6 is summarised in Table 8.6.

Table 8.6: Summary description of how the NCHE aligns with standard 6

ASG-QA –STANDARD 6	DESCRIPTION OF HOW NCHE IS ALIGNED TO ASG-QA - STANDARD 6	EVIDENCE /DATA OR INFORMATION SOURCE
External quality assurance of institutions and programmes shall be undertaken on a cyclical basis.	a) The validity period of accreditation is 5 years for programmes and 7 years for institutions. b) HEIs are informed of the validity period of the accreditation status and documents that define the validity period are shared with HEIs. c) Following the assessment, NCHE generates detailed assessment reports that highlight areas for improvement. These reports are used by HEIs to develop and implement improvement plans. d) After the expiration of accreditation, NCHE reminds the institutions to renew accreditation.	● Accreditation Evaluation Framework ● Higher Education Quality Assurance Framework (HEQAF). ● Sample improvement plan

Standard 7. Complaints and Appeals

The procedure for lodging complaints and appeals shall be clearly defined and communicated to the institution concerned.

Currently, the NCHE does not have written guidelines for handling appeals. NCHE has so far developed the complaints and appeal guidelines and upon approval by the Council, they will be disseminated widely to all HEIs. Meanwhile, HEIs are still provided with opportunities to voice their concerns or seek clarification if they are dissatisfied with decisions made by the Council. As the Council resolutions are shared with HEIs, an opportunity is provided for them to contact NCHE secretariat in case they require more information or clarification regarding the Council decisions. NCHE has been handling such complaints in a professional and confidential manner, ensuring the integrity of the process. In the link below is an example of communication regarding NCHE's engagement with one of the private higher education institutions in Malawi in the process of addressing their complaints and concerns (see [Exploits University Letter to NCHE](#)).

The NCHE aims to draft formal guidelines that would also ensure that both parties are fully aware of the process, timelines, and criteria for appeal thereby contributing to improved accountability and transparency within the higher education regulatory framework. This proposal was strongly supported by stakeholders in HEIs. The description of how the NCHE aligns with standard 7 is summarised in Table 8.7.

Table 8.7: Summary description of how the NCHE aligns with standard 7

ASG-QA –STANDARD 7	DESCRIPTION OF HOW NCHE IS ALIGNED TO ASG-QA -STANDARD 7	EVIDENCE /DATA OR INFORMATION SOURCE
The procedure for lodging complaints and appeals shall be clearly defined and communicated to the institution concerned.	a) Currently, NCHE does not have written guidelines for appeals. However, HEIs are still given opportunities to lodge their complaints if they are not comfortable with Council's decision.	• Council feedback letters • Letter of engagement meetings with aggrieved HEIs

	b) The institutions are given a platform for discussion and Council reviews and provide feedback on the issue to HEIs .	
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8.2: The NCHE Compliance with ASG-QA Part C

Standard 1: Legal Status

The QAA shall be an autonomous legal entity with clearly defined mandate, scope and powers. It will be recognised as a quality assurance agency at a national/regional level.

The National Council for Higher Education (NCHE) of Malawi was established under the [NCHE Act](#) No. 15 of 2011, which mandates it to regulate and oversee the higher education sector in the country. The Act mandates and empowers the Council to carry out the following functions:

- (a) to promote and coordinate education provided by higher education institutions;
- (b) to register and de-register higher education institutions;
- (c) to determine a framework for funding public higher education institutions;
- (d) to harmonize selection of students to all public universities;
- (e) to regulate, determine and maintain standards of teaching, examinations, academic qualifications, academic facilities;
- (f) to develop a national qualifications framework which is compatible with regional and international standards;
- (g) to determine minimum criteria and procedures for registration and de-registration of HEIs.
- (h) to accredit both public and private higher education institutions;
- (i) to design and recommend an institutional quality assurance system for high education;
- (j) to recommend to the Minister institutional quality assurance standards for the establishment, standardization and accreditation of higher education institutions.
- (k) to provide guidance for terms and conditions of awarding grants and scholarships to students of public HEIs;
- (l) to ensure that HEIs have high calibre members of staff;

- (m) to assess, evaluate and recognize qualifications attained at foreign higher education institutions;
- (n) to represent interests of the Malawian higher education regionally and internationally;
- (o) to monitor the implementation of international agreements concerning higher education;
- (p) to promote international cooperation and facilitate exchanges in higher education;
- (q) to advise the Minister on all matters of higher education.

The NCHE's functions in the Act are designed to ensure that higher education institutions maintain high standards in terms of quality, relevance, and accessibility.

The NCHE is legally recognized at the national level through the NCHE Act No. 15 of 2011. This Act provides a clear framework for the establishment, registration, accreditation, and quality assurance of HEIs in Malawi. To date, NCHE has registered 52 higher education institutions, with 33 accredited HEIs published in the [Government gazette](#) including gazetted members of Council. These HEIs are subject to continuous monitoring and quality evaluation to ensure compliance with national and regional standards. Regionally, the NCHE is recognised by the Southern Africa Quality Assurance Network (SAQAN) and African Qualification Verification Network (AQVN) such that the NCHE is a paid up member (Evidence of subscription will be presented in print). The description of how the NCHE aligns with standard 1 is summarised in Table 8.8.

Table 8.8: Summary description of how the NCHE aligns with standard 1

ASG-QA - STANDARD 1	DESCRIPTION OF HOW NCHE IS ALIGNED TO ASG-QA STANDARD 1	EVIDENCE /DATA OR INFORMATION SOURCE
The QAA shall be an autonomous legal entity with clearly defined mandate, scope and powers. It will be recognised as a quality assurance	a. NCHE is a quality assurance agency created by NCHE ACT of Parliament No.15 of 2011 b. NCHE is recognized at national level by all relevant stakeholders. Currently Malawi has 52 registered HEIs of which 33 are accredited by the NCHE. On a regional level, the NCHE is recognised by SAQAN.	● The NCHE Act No. 15 of 2011 ● Assessment Reports ● Press Releases ● Gazette board

agency at a national/regional level.		• Gazetted accreditation
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Standard 2. Vision and Mission Statement

The QAA shall have a written vision and mission statement or set of objectives taking cognisance of the higher education context

The NCHE has a clear and well-defined mandate which is to regulate higher education in Malawi as presented in Section 4.1.1 of the SAR. The vision of the NCHE which is to be a higher education regulator which supports the systematic growth, and excellence of HEIs in Malawi is aligned with the mandate of the NCHE. This vision provides a coherent guiding framework for all NCHE's activities, ensuring that higher education institutions (HEIs) adhere to national and international standards of quality. The achievement of this vision is guided by the mission: to promote quality, accessible, relevant and inclusive higher education and training in Malawi through use of best practices in higher education regulation.

The NCHE's vision and mission are operationalised through a robust and well-structured approach, supported by practical management plans and effective governance systems. In fulfilment of these, the NCHE conducts registration and accreditation assessments of HEIs and academic programmes as well as quality audits. In addition, the NCHE coordinates the selection of students into public HEIs as one way of promoting equitable access to higher education in Malawi. Furthermore, in 2020, the NCHE also embarked on research on higher education space which among other things focuses on topical issues such as access and equity to higher education. The papers were presented at a national conference in June, 2018 and June, 2021. The research is intended to inform the Ministry of Education's policy direction on higher education. These activities are reinforced by the [strategic plan](#), which outlines specific goals and objectives that align with its quality assurance mandate. The strategic plan is reviewed and implemented through detailed annual work plans and budgets and reported to the Government through [annual reports](#) (see Attachment 1: NCHE

Approved 2024-2025 Budget; Attachment 2: NCHE Annual Work Plan 2024- 2025). This proactive planning ensures the alignment of NCHE’s operations with its vision and national quality assurance goals. The description of how the NCHE aligns with standard 2 is summarised in Table 8.9.

Table 8.9: Summary description of how the NCHE aligns with standard 2

ASG-QA - STANDARD 2	DESCRIPTION OF HOW NCHE IS ALIGNED TO ASG-QA STANDARD 2	EVIDENCE /DATA OR INFORMATION SOURCE
The QAA shall have a written vision and mission statement or set of objectives taking cognisance of the higher education context	a) NCHE has a clear and well-defined vision that aligns closely with its core mandate. This vision serves as a guiding framework for the Council's efforts to oversee, regulate, and promote quality in higher education across the nation. b) NCHE's vision and mission are supported by a well-structured approach, practical management plans, and effective governance. c) NCHE has established a framework for achieving its quality assurance mandate, which is clearly articulated in the strategic plan. The strategic goals are implemented through a detailed annual work plan and budgets, and annual reports are generated to track achievements and identify areas for improvement. d) NCHE has a legally constituted board that provides custodianship and oversight of vision and mission.	● NCHE’s strategic plan ● Annual reports ● Attachment 2: NCHE Annual Work Plan 2024-2025

Standard 3. Governance and management

The QAA shall have clearly defined structures that ensure sound and ethical governance and management, including good practices of quality assurance that support its mission and legal mandate.

Leadership and Governance: NCHE's governance structure consists of the governing board (Council) led by the chairperson, executive management led by the Chief Executive Officer (CEO) and other employees.

In accordance with section 4 of the [NCHE Act](#), members of the Council are appointed by the minister. The Council consists of six independent members appointed by the minister responsible for education on account of high professional standing, special knowledge, skills and expertise in matters of higher education provided that such persons shall not be employees in the public service. The Council also includes ex-official members from various government and private departments or agencies. Section 5 of the NCHE Act specifies a 3-year tenure and reappointment terms for Council members, while Section 12 of the same Act governs Council meetings, ensuring compliance with best practices for governance and decision-making, including quorum requirements and procedures. The Council operates through committees (NCHE Act section 13) such as the Quality Assurance and Accreditation Committee (QAAC), Finance, Appointments and Administration Committee (FAAC), and the Audit Risk Management Committee (ARMC). These committees provide technical guidance to the Council on matters of quality assurance, finance and administration, and audit and risk issues. The powers and responsibilities of the Council, outlined in Section 16 of the NCHE Act, align with ASG-QA standards on policy formulation and oversight functions, demonstrating the NCHE's commitment to effective governance.

The NCHE Secretariat is led by the CEO who is a seasoned academician and administrator in higher education. The CEO is responsible for the day to day management of the agency as well as administrative control of all other employees and is accountable to the Council. The CEO also serves as secretary to the Council. The office of the CEO is supported by four directors who head the following departments: Department of Registration and Accreditation, Department of Standards and Quality Audits, Department of Finance and Administration, and the Department of Planning, Research and Development. The Council management's full profile is publicly

accessible on the NCHE [Website](#), showcasing transparency in its operations. The profile of NCHE executive management is summarised in Table 8.10.

Table 8.10: Profile of NCHE Executive Management.

SN	Name	Sex	Position	Highest Academic/Professional Qualification
1	Dr. Ambumulire Phiri	F	Chief Executive Officer	PhD in Education, University of Missouri-St. Louis, U.S.A, 2014
2	Dr. Simeon Gwayi	M	Director of Registration and Accreditation Services	PhD in Education (Curriculum and Instruction), Virginia Polytechnic Institute and State University, Virginia, USA, 2009
3	Dr. Japhet Bakuwa	M	Director of Standards and Quality Audits	PhD in Science and Technology Studies, Stellenbosch University, RSA, 2015
4	Mrs. Martha Mkandawire	F	Director of Finance and Administration	MBA, University of Malawi, Malawi, 2008. ACCA, UK, 2001
5	Mr. John Raymond Sadalaki	M	Director of Planning, Research and Development	MSc in Development and Project Planning, University of Bradford, England, 1999

The CEO and directors have considerable experience in their areas of responsibility at the NCHE. During their tenure of office, they have had a number of opportunities to participate in professional development programmes and activities including benchmarking visits within the region in order to strengthen their capacity to serve in their current posts. The NCHE is an equal opportunity employer and all recruitments are guided by the institution’s [Recruitment Policy](#). For full list of the NCHE staff profile, see Attachment 7_NCCE Staff Return by Department.

Policies, Procedures, and Accountability: NCHE adheres to rigorous financial management and accountability standards, guided by the [Public Finance Management Act of 2022](#) and the [NCHE Financial Policies and Procedures Manual](#). These documents ensure transparency and

accountability in financial decision-making, aligning with ASG-QA's requirements for financial integrity and sound management practices.

The NCHE has a clear communication system in place to disseminate information and maintain public accountability as outlined in the [NCHE Communication Strategy](#) and Stakeholder Matrix. The NCHE regularly issues press releases, gazettes, and updates via its website and social media platforms. Stakeholder meetings, such as those with Vice-Chancellors (VCs) and Chairpersons of Councils, as well as Technical Working Groups for Public Universities, further demonstrate NCHE's commitment to be transparent in its operations. This comprehensive communication strategy complies with ASG-QA's standards for public accountability and transparency (see links to social media platforms which include: <https://facebook.com/nchemw>, <https://facebook.com/nchemw>, https://www.instagram.com/nche_mw/, <https://www.youtube.com/@NCHEMW>).

Stakeholder Engagement and Responsiveness: NCHE engages stakeholders regularly and as needed, with interactions initiated by either NCHE or the stakeholders. These engagements address key policy and operational issues, supported by documented meeting minutes, reports, and action plans. The NCHE-triggered engagements include the development of ODeL Standards and Guidelines, ODeL Assessment Tools, Guidelines for Implementation of Bridging Programmes, and Guidelines for the Establishment and Strengthening of Internal Quality Assurance (IQA) Units, Public University Selection Stakeholders' Review through a consultative process with Higher Education Institutions. The NCHE also has had engagement meetings with Vice Chancellors and University Registrars aimed at getting feedback on the NCHE's operations and informing them of new developments. This active stakeholder engagement aligns with ASG-QA's requirement for stakeholder involvement in decision-making and policy development.

Integrity and Operational Excellence: NCHE promotes integrity and responsiveness in its operations, advocating for honesty and non-discrimination. The institution has established robust processes for deterring, detecting, and addressing staff misconduct through policies such as the Staff Terms and Conditions of Service (TACOS), Grievance Handling Policy, Training Policy, and Gender Policy. These policies align with ASG-QA standards for ethical conduct, equity, and integrity.

The NCHE implements these policies through institutional committees such as Staff Development and Training Committee, HIV/AIDS Committee, Communications Committee, Disciplinary Committee, and Internal Procurement and Disposal of Assets Committee, Institutional Integrity Committee (IIC) among others. Besides these committees, the NCHE develops and monitors the Risk Register. The identification and monitoring of these risks helps the NCHE to guard against potential risks that can affect its integrity. In addition, the IIC helps to guide the NCHE on matters that have potential of violating its integrity (Ref: [TORs of the committees](#); [Risk register](#)).

The TACOS have disciplinary procedures and spelt out misconduct. In case of the TACOS' breach, members of staff undergo disciplinary hearing which is implemented by the Disciplinary Committee. Furthermore, within the NCHE's establishment there is an Internal Audit section that also helps to strengthen internal controls which help to deter and detect would be misconducts by staff. In addition, the NCHE undergoes external audits (see sample [external audit report](#)).

The NCHE has the [Grievance Handling Policy](#) which clearly outlines steps and procedures in terms of reporting and handling grievances by both internal and external stakeholders. The policy is being implemented by the Human Resources and Administration division.

Lastly, the NCHE has a [Fraud and Corruption Prevention](#) policy which stipulates the investigation procedures for reporting and investigating fraud and corruption related cases. The Policy is being implemented by the IIC.

However, the NCHE recognises that some committees are not fully functional and do not meet regularly due to competing priorities and limited monitoring mechanisms. To strengthen the functionality of these committees, the NCHE will link the functionality of these committees to the Performance Management System (PMS) and the Monitoring and Evaluation System. This will be under the responsibility of the Human Resource and Administration division, and Planning, Monitoring and Evaluation division respectively.

Service Charter and Client Accountability: NCHE has a [Service Charter](#) that prescribes fees, service timelines, and expectations for the provision of services, ensuring that clients are aware of their rights and the quality of service they can expect. This charter aligns with ASG-QA guidelines on accountability to students and other stakeholders, ensuring fair and transparent service delivery.

However, the NCHE recognises that the absence of a functional Management Information System (MIS) negatively impacts on monitoring of the service charter. Consequently, the NCHE plans to develop a Quality Assurance Management Information System (QAMIS) that will strengthen management of data relating to quality assurance services. The description of how the NCHE aligns with standard 3 is summarised in Table 8.11

Table 8.11: Summary description of how the NCHE aligns with standard 3

ASG-QA -STANDARD 3	DESCRIPTION OF HOW NCHE IS ALIGNED 3	EVIDENCE /DATA or Information source
The QAA shall have clearly defined structures that ensure sound and ethical governance and management, including good practices of quality assurance that support its mission and legal mandate.	a) NCHE leadership comprises individuals with extensive experience in higher education as well as quality assurance. The full profile of the NCHE management is available on (www.nche.ac.mw/about/management) b) The NCHE is governed by a Council; whose governance structure is well-defined in the NCHE Act No. 15 of 2011(www.nche.ac.mw/downloads/NCHE_ACT.pdf). c) The NCHE has a clear communication system disseminating information for public accountability such as Press Release, Gazettes, Stakeholder works, Social Media, VC and Chair of Councils meeting, Technical working groups for Public Universities comprises VCs, UR. The NCHE has a clear and effective communication system for disseminating its activities and ensuring public accountability. This can include regular reports, and updates on the NCHE social media page and website.	● Accounting Procedures Manual. ● The NCHE Act ● Grievance Handling Policy ● Gender policy. ● Service Charter ● Gazettes of Subscription Fees ● Staff Terms Conditions of Service (will be presented in hard copy)

	d) The NCHE engage in regular consultations with stakeholders and take follow-up actions on key policy and operational issues. This is demonstrated through documented meeting minutes, reports and action plans. e) The NCHE has a service charter which prescribes fees/prices and timelines for provision of services.	
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Standard 4. Independence of the NCHE

The QAA shall be independent and autonomous in its operations, outcomes, judgements and decisions.

Organisational Independence: The National Council for Higher Education (NCHE) of Malawi was established under the [NCHE Act](#) No 15 of 2011, with mandates to regulate and oversee the higher education sector in the country. The NCHE operates with an autonomous decision-making framework that adheres to the ASG-QA. The NCHE Act states that,

the NCHE is a body corporate with perpetual succession and common seal capable of suing and being sued under its corporate name, capable of holding, purchasing, disposing property and capable of doing and performing all such acts and things as bodies corporate may, by law, do and perform (Section 3 of the [NCHE Act](#)).

Operational Independence: The NCHE ensures that its decision-making processes are transparent and free from external interference. The authority for decisions on accreditation, quality assurance, and institutional audits is vested in the Council (Section 15 of the NCHE Act). This governing body is responsible for setting strategic directions and making high-level decisions regarding the accreditation of institutions and programmes, ensuring no external or third-party influence impacts these critical functions. Decisions made by the Council, such as those concerning accreditation, remain solely within its purview, without the need for external approval

or third-party validation (Section 15 of the NCHE Act), thereby upholding the principles of autonomy as stipulated in ASG-QA.

However, certain risks could undermine the independence of NCHE, including the appointment of Council members and government financing of its operations. Given these risks, the NCHE recognises several measures to safeguard its independence: Council member appointments are conducted within the framework of the [NCHE Act](#), with compliance ensured by the Office of the Solicitor General in case of deviations. Additional safeguards include a code of conduct (*to be provided in print during site visit*) for Council members, defined terms of reference for the Council and its committees, and orientation for Council members on the NCHE's mandates and core functions. In addition, the NCHE offers accreditation services on a cost recovery basis ensuring sustainability. Furthermore, the NCHE partners with like-minded entities in implementing collaborative projects to beef up its resources.

In addition, the NCHE follows a stringent recruitment policy that emphasises meritocracy and impartiality in the selection of staff and external reviewers. Reviewers, who assess the quality of institutions and programmes, are appointed based on their expertise and experience in higher education. The recruitment process is independent, ensuring that individuals who serve as reviewers are free from any political, institutional, or financial bias. This aligns with ASG-QA guidelines, which require external quality assurance bodies to operate independently in appointing evaluators and reviewers.

The NCHE also complies with ASG-QA by maintaining a transparent and accountable review process. External reviewers are appointed independently, and they conduct accreditation reviews based on established criteria and performance indicators. The outcomes of these assessments are reported and presented to the Council, ensuring that the evaluation process is free from any third-party interference. This further reinforces the NCHE's alignment with the ASG-QA's standards for maintaining transparency and accountability in the evaluation of HEIs.

Furthermore, the NCHE has a [conflict of interest policy](#) in place to safeguard its independence. This policy ensures that all staff members, Council members, and external reviewers disclose any potential conflicts of interest in a timely and transparent manner. This mechanism is critical in

maintaining the objectivity of the decision-making process and preventing undue influence from internal or external parties.

Independence of formal outcomes: The Council’s decisions on matters of quality assurance are final and communicated to stakeholders concerned as resolved without referring to another entity. Where the Council foresees legal implications to its decisions, the office of the Attorney General is consulted for legal advice (see sample [feedback letter to a HEI](#)). More importantly, the NCHE has its own in-house Legal Counsel. The description of how the NCHE aligns with standard 4 is summarised in Table 8.12.

Table 8.12: Summary description of how the NCHE aligns with standard 4

ASG-QA - STANDARD 4	DESCRIPTION OF HOW NCHE IS ALIGNED TO ASG-QA STANDARD 4	EVIDENCE /DATA OR INFORMATION SOURCE
The QAA shall be independent and autonomous in its operations, outcomes, judgements and decisions.	a) The NCHE ensures that its decision-making processes are transparent and free from external interference. Decisions regarding accreditation of institutions and academic programmes including any resolutions from quality audit reports rest with the Council. These decisions are guided by evidence-based evaluations by independent peer experts. b) The NCHE follows a stringent recruitment policy that emphasizes meritocracy and impartiality in the selection of staff and external reviewers c) External reviewers are appointed independently without influence of HEIs, and they conduct accreditation reviews based on established criteria and performance indicators.	• The NCHE Act • Press Release • Recruitment policy

Standard 5. Policies, Processes and Activities

The QAA shall undertake its quality assurance activities in accordance with the standards and guidelines articulated in Part B of the ASG-QA.

External Quality Assurance Standards and Processes

NCHE has established clear policies and processes that ensure transparency in its regulatory functions. The NCHE has regulations, standards, and guidelines that govern the various aspects of its operations such as accreditation and quality audits. Table 13 summaries the standard/guidelines.

Table 13: Standards and Guidelines and alignment with ASG-QA

SN	Standard	Activity	Description of the standard/Guidelines	Description of how NCHE guidelines/standards align with ASG-QA Part B
1.	Minimum Standards	• Institutional and programme accreditation • Institution and programme registration • Quality audits	In assessing institutions for registration and accreditation, and quality audits, the NCHE uses the Minimum Standards as a benchmark to evaluate the level of compliance. The MS has 13 standards which focus on the following: - i Guiding principles - ii Governance - iii Policies and procedures - iv Finance and material resources - v Physical facilities	• ASG-QA Standard 1 requires a HEI to have a clearly articulated vision and mission statement and ensure the effectiveness of IQA. The minimum standards 1.1 for higher education in Malawi also requires HEIs to have a vision, mission and objectives. • The NCHE minimum standard 2.5 and 3.9 help HEIs to strengthen their quality assurance systems as required by the ASG-QA standard 2.

			vi Water and sanitation vii Academic programme (programme delivery and design) viii Student admission and recruitment ix Staff complement x Student support xi Assessments xii Quality enhancement xiii Degree specifications	• All the accreditation and quality audit reports and decisions are based on the extent to which HEIs meet the minimum standards as required by standard 5 of ASG-QA. • Minimum standard 8.2.10 requires that institutions review and approve their curricula every academic cycle as required by ASG-QA standard 6.
2.	Library Standards	• Institutional and programme accreditation • Institution and programme registration • Quality audits	The Library standards guide the NCHE in assessing the quality of the library and its services. The Standards focus on 18 areas which among others include: - i Library infrastructure - ii Administrative structure - iii Library staffing levels - iv Library resources (accessibility,	These guidelines help the HEIs to strengthen the IQA systems as stipulated by the ASG-QA standard 2.

			organization, services) v Library health safety and security	
3.	ODEL Standards and Guidelines	• Institutional and programme accreditation • Institution and programme registration • Quality audits	The ODeL Standards and Guidelines are used to assess ODeL institutions and programmes for registration and accreditation, and quality audits. The assessment focuses on the following 5 standards: - i Equitable access in ODeL - ii Digitalization of education curriculum - iii Quality and relevance of ODeL - iv Investment and support in ODeL - v Governance and management of ODeL	These guidelines help the HEIs to strengthen the IQA systems as stipulated by the ASG-QA standard 2.

4.	NCHE Accreditation and Evaluation Framework	Used in accreditation of institutions and programmes, and quality audits.	The framework provides the detailed steps involved in the institution and programme accreditation processes.	● As required by standard 3 of ASG-QA, the framework has outlined all steps and procedures involved in the accreditation of institution and programme processes. ● As stated in section 3 of the framework, accreditation assessments for institution and programmes are done by an independent team of peer reviewers as required by standard 4 of the ASG-QA
5.	Guidelines for the establishing and strengthening IQA Units in the Malawi's HEIs	Establishing and strengthening IQA units in HEIs For	They provide minimum benchmarks for establishing and strengthening IQA units in HEIs which help the HEIs meet the expectations of EQA.	These guidelines help the HEIs to strengthen the IQA systems as stipulated by the ASG-QA standard 2.

The standards used by NCHE in its quality assurance activities were developed in consultation with HEIs. Experts from HEIs formed a task team, which created a draft of the standards in collaboration with NCHE. This draft was validated by HEI representatives and subsequently

approved by the Council. Following approval, NCHE disseminated the standards and began implementing them. For registration, accreditation assessments, and quality audits, NCHE follows a step-by-step process define in the [Higher Education Quality Assurance Framework \(HEQAF\)](#) as outlined below:

A. Institution and Programme Registration

Part 1: Provisional Registration

- i Submission of application by the HEI to NCHE using a [provisional registration form](#).
- ii Initial Review of the Application for Provisional Registration by NCHE secretariat using a [provision registration checklist](#) to check the completeness of the application dossier.
- iii Onsite evaluation by the NCHE secretariat.
- iv Consideration by the Quality Assurance and Accreditation Committee (QAAC) and the Council.
- v Award of Provisional Certification/Registration.

Part 2: Final Registration

- i Application for Final Registration by HEI.
- ii Desk review of the submitted documents.
- iii Desk review report and feedback to the HEI.
- iv Identifying the peer reviewers.
- v Invoicing the institutions and feedback letters.
- vi Communicating the date for the review.
- vii Sending invitation letters to reviewers.
- viii Orientation of the reviewers.
- ix Onsite visit -Institutional and programme review:
 - Entry meeting.
 - Review of the programme/institution.
 - Peer review of scores.
 - Writing a draft report.
 - Exit meeting.
- x Sending the report to HEIs for factual error check
- xi Reviewers consider comments from the HEI in the report

- xii Consideration of the assessment report by QAAC
- xiii Decision by Council on Final Registration
- xiv Approval of final registration and grant of Charter by the Minister of Education.

B. Institution and Programme Accreditation

- i Application for Accreditation
- ii Identifying the peer reviewers
- iii Invoicing the institutions and feedback letter
- iv Receiving the SAR from the HEI.
- v Communicating the date for the review
- vi Sending invitation letters to reviewers
- vii Orientation of the reviewers
- viii On-site Visit-Institutional and programme review
 - ✓ Entry meeting
 - ✓ Review of programme/Institution
 - ❖ document review
 - ❖ observation
 - ❖ interview/focus group discussions.
 - ✓ Peer review of scores
 - ✓ Writing a draft report
 - ✓ Exit meeting
- ix Sending the report to HEIs for factual error check
- x Reviewers consider comments from the HEI in the report
- xi Consideration of the assessment report by QAAC
- xii Decision by Council on Accreditation

C. Quality Audits

- i Communication by the NCHE to HEI of an intention to conduct an audit.
- ii Engagement of peer reviewers.
- iii Orientation for reviewers.
- iv Conduct an audit in an institution:
 - Courtesy call to the leadership upon arrival at the institution,

- Entry meeting,
 - Tour of the institution's premises,
 - Documents review,
 - Interviews with stakeholders (students, staff, and management),
 - Exit meeting.
- v Consolidation of the drafted audit report.
 - vi Submission of a draft report by the reviewers.
 - vii Submission of the report to an institution for factual error check.
 - viii Reviewers consider comments from an institution and submit the report back to the NCHE.
 - ix Submission of the report to QAAC for consideration.
 - x QAAC considers the report and makes recommendations to the Council
 - xi The Council considers recommendations and makes its resolutions
 - xii NCHE communicates the resolutions to an institution

Validation of the institution's self-assessment against the NCHE's standards and processes

The HEI prepares the SAR using the NCHE's accreditation tool and minimum standards. The SAR template is the same as the one used for the accreditation assessment report. This is to ensure that the institution's SAR preparation mirrors the accreditation evaluation by the NCHE. During the onsite visit, the peer reviewers are given the HEI's SAR to refer to and check the institution's level of compliance with NCHE's minimum standards. Additionally, the peer reviewers generate their data through document review, interviews/focus group discussions, and observations during the assessment. This is the case because most of the SARs from HEIs are not objective enough to provide reliable data. Moving forward, NCHE aims to enhance HEI capacity in preparing the Self-Assessment Report (SAR) to ensure objectivity, allowing peer reviewers to validate the data during onsite visits.

When appointing external peer reviewers, the NCHE ensures that the composition of the review team includes experts who will competently assess the institution and programmes submitted for registration or accreditation as demonstrated by their qualifications and experience. The NCHE also utilises reviewers from both public and private HEIs. The team includes subject experts, professional bodies for professional programmes, librarians, administrators, student support

experts, and ODeL experts where necessary. Every reviewer is expected to possess at least a Master's degree and have at least five (5) years of work experience in their relevant field. The NCHE has not yet started using students as members of the review panel.

During the site visit, peer reviewers interview students, academic and non-academic staff members, and administrators of the HEI (Ref: Attendance registers for interviews of [academic staff](#) and [students](#)). After finalising the onsite assessment visit, the team of reviewers conducts an exit meeting with the HEI before leaving the site (Ref: [Exit meeting attendance register](#)). During the exit meeting, the team makes an oral presentation on key findings on strengths and areas of improvement. After the draft report is finalised by the reviewers, it is sent to the HEI for factual error check (Ref: [Sample factual error check report](#)). Once the report has been discussed and approved by the Council, the detailed report is sent to the HEI to use it to prepare an improvement plan based on the areas for improvement identified during the assessment. After the HEI has prepared the improvement plan (see an example of [improvement plan](#)), it is shared with the NCHE which uses it for follow-ups to check progress in the implementation of the improvement plan. The description of how the NCHE aligns with standard 5 is summarised in Table 8.14.

Table 8.14: Summary description of how the NCHE aligns with standard 5

ASG-QA -STANDARD 5	DESCRIPTION OF HOW NCHE IS ALIGNED TO ASG-QA STANDARD 5	EVIDENCE /DATA OR INFORMATION SOURCE
The QAA shall undertake its quality assurance activities in accordance with the standards and guidelines articulated in Part B of the ASG-QA.	a) The NCHE has established clear policies and processes that ensure transparency in its regulatory functions. The NCHE has regulations, standards, and guidelines that govern the various aspects of the NCHE's operations. b) Regulations, standards, and guidelines provide a framework that helps higher education institutions (HEIs) with a clear understanding of the NCHE's approaches	● Minimum standards ● Standards and Guidelines for ODeL ● Accreditation Evaluation framework ● Attendance list for interviews

	and requirements, particularly in the areas of registration and accreditation of both institutions and their programmes.	during the onsite accreditation assessment • Factual error Checking • Final reports • Auditors reports
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Standard 6. Internal Quality Assurance Policies, Criteria and Processes

The QAA shall have in place policies and processes for its own internal quality assurance related to defining, assuring and enhancing the quality and integrity of its activities.

The [Higher Education Quality Assurance Framework \(HEQAF\)](#) and the [Accreditation Evaluation Framework](#) constitute IQA guidelines and processes for the NCHE. The HEQAF is a guiding document for the NCHE officers which outlines processes and procedures for the NCHE's quality assurance activities such as registration and accreditation of institutions and programmes, quality audits, and spot checks. It also outlines the expectations of EQA to the HEIs. The Accreditation Evaluation Framework outlines detailed step by step of the institution and programme accreditation process. In addition to the two frameworks, the NCHE has regulations governing registration and accreditation of institutions and programmes, inquiry, and collaboration (see a [list of regulations](#)). Furthermore, the NCHE has developed Standard Operating Procedures (SOPs) for registration, accreditation, [quality audits](#), spot checks and [inquiries](#) among others. These internal policies and guidelines ensure that NCHE's IQA processes are streamlined while at the same time enhancing the quality and integrity of the NCHE's EQA activities

The objectivity, fairness, and conclusions of the judgements in the assessment processes are based on the predetermined minimum standards and assessment tools including quality audits tool which are used by appointed reviewers. The review panel is appointed based on their qualification and experience in matters of higher education as articulated in the [Accreditation and Evaluation](#)

[Framework](#) (see example of [accreditation evaluation](#) and [audit](#) reports). The drafted reports (summary reports) by the review panels are subjected to factual error checks by HEIs (see example of [Factual error checked reports](#)). The summary reports are subjected further to scrutiny by the QAAC before the final decisions are made by the Council (see sample [Feedback letter to HEIs on Council resolutions](#)).

The NCHE uses [Minimum Standards](#) which are not prescriptive and do not interfere with the institution's autonomy. These standards largely mirror the ASG-QA and were extensively benchmarked against other international standards and HEIs. The NCHE is accountable to its stakeholders and the general public, hence, the resolutions of the Council are published on its website and widely circulated by media outlets in the country. Stakeholders provide feedback for continuous improvement of the NCHE through designated email (info@ncche.ac.mw), the suggestion box at the office as well as regular stakeholders' engagement meetings. The description of how the NCHE aligns with standard 6 is summarised in Table 8.15.

Table 8.15: Summary description of how NCHE aligns with ASG-QA standard 6

ASG-QA - STANDARD 6	DESCRIPTION OF HOW NCHE IS ALIGNED TO ASG-QA STANDARD 6	EVIDENCE /DATA OR INFORMATION SOURCE
The QAA shall have in place policies and processes for its own internal quality assurance related to defining, assuring and enhancing the quality and integrity of its activities.	a) The NCHE has the following frameworks that constitute its IQA guidelines that regulate the internal processes: The Higher Education Quality Assurance Framework (HEQAF); the Accreditation Evaluation Framework; regulations; and SOPs. b) The NCHE has a process for monitoring performance against set objectives and goals. Regular reporting on performance and quality assurance activities ensures that the council is accountable for the integrity and effectiveness of its operations.	• Minimum Standards • HEQAF • Sample Accreditation Evaluation reports

Standard 7. Financial and Human Resources

The QAA shall have adequate and appropriate human, financial and material resources to carry out its quality assurance mandate effectively and efficiently.

NCHE has its office block, housing 33 staff members and is equipped with ICT infrastructure that supports effective operations. However, though sufficient, they are not entirely adequate as most of the members of staff are sharing offices.

NCHE has qualified and diverse staff members with clearly stipulated roles to carry out their quality assurance activities. Additionally, NCHE considers gender and inclusivity in its recruitment. However, as per the functional review report, NCHE requires 54 staff members but it has only managed to recruit 33 members of staff, representing 61% of the requirement. Moreover, the Quality Assurance departments require 14 staff members and only 7 (50%) are on the ground ([Details of staff members and their qualification and gender](#)). This is due to funding constraints. Moving forward, NCHE plans to recruit additional staff members in a phased approach.

To ensure sustainability of QA activities, the NCHE has implemented cost recovery strategies where the HEIs are required to cover their cost of assessment. However, some QA activities, particularly QA Audits are not adequately implemented as planned due to financial shortfalls. In future, NCHE plans to recover the cost of these Audits from the HEIs themselves (See Attachment 1: NCHE Approved 2024-2025 Budget). The NCHE aims to continuously improve its practices and processes through benchmarking with other regional quality assurance agencies. For instance, in 2024, the NCHE visited QAAs in South Africa, Kenya, and Egypt for purposes of drawing best practices in quality assurance.

Regarding informing the general public about its resolutions and outcomes, NCHE consistently uses widely circulated newspapers and its website to keep the public informed of its resolutions and outcomes (see [list of press releases](#)).

The NCHE is trying to achieve its vision, mission, and objectives as per the [Strategic Plan](#) by mobilising resources, recruiting qualified staff and prioritising strategic activities. NCHE has

facilities but it is not adequate and recruits qualified human resources cognizant of gender and persons with disabilities despite gaps in the required staff establishment. Furthermore, NCHE professionally, effectively, and efficiently executes its external QA mandate, continuously improves its practices and development, and transparently informs the public about its activities and outcomes, ensuring accountability and transparency to its stakeholders. However, some QA activities are not implemented as planned due to resource constraints. The description of how the NCHE aligns with standard 7 is summarised in Table 8.16.

Table 8.16: Summary description of how the NCHE aligns with ASG-QA standard 7

ASG-QA - STANDARD 7	DESCRIPTION OF HOW NCHE IS ALIGNED TO ASG-QA STANDARD 7	EVIDENCE /DATA or Information source
The QAA shall have adequate and appropriate human, financial and material resources to carry out its quality assurance mandate effectively and efficiently.	a) NCHE has qualified and diverse staff members with clearly stipulated roles to carry out their quality assurance activities. b) The NCHE has financial resources with which it is able to support its quality assurance activities. c) Currently, the NCHE owns an office block, housing 33 staff members and is equipped with ICT infrastructure that supports effective operations.	● Attachment 1: NCHE Approved 2024-2025 Budget; ● Strategic plan ● Details of staff according to qualification, gender

Standard 8. Benchmarking, Networking and Collaboration

The QAA shall promote and participate in international initiatives, workshops and conferences on quality assurance to exchange and share experiences and best practices.

Currently, the NCHE does not have a formal internationalisation policy. However, the NCHE participates in and undertakes activities that promote internationalisation. The NCHE participates

at the regional and continental level through membership in Southern Africa Quality Assurance Network (SAQAN), and African Qualification Verification Network (AQVN), (evidence of annual subscription will be presented in hard copy). NCHE is also a board member for SAQAN and had membership in the planning committee of the 6th SAQAN conference that took place in Livingstone, Zambia.

The NCHE in Malawi demonstrates alignment with the Africa Standards and Guidelines for Quality Assurance (ASG-QA) by actively collaborating with relevant professional bodies such as the Medical Council of Malawi, Malawi Accountants Board (MAB) and Malawi Institute of Legal Education among others. The NCHE has MoUs with regulatory and professional bodies such as the Technical, Entrepreneurial, Vocational Education and Training Authority ([TEVETA](#)) and [Malawi Accountants Board \(MAB\)](#). The MoU with these bodies is aimed at ensuring improved coordination in accreditation of vocational institutions and programmes as well as accounting programmes, respectively.

The NCHE provides accurate, reliable, and accessible information regarding standards for registration and accreditation including sharing the up-to-date versions of the tools used to assess both face to face and ODeL institutions and programmes. The NCHE keeps an updated and accurate record of higher education institutions whose accreditation status is valid or expired. This information is shared with education providers as a reminder to begin the process of renewal of accreditation. This information is also shared with the public and foreign higher education providers upon request and is also made available on the NCHE's [Website](#). This way, the NCHE ensures that it contributes to regional, continental, and international efforts to improve accessibility of up-to-date, accurate information about recognized HEIs in Malawi.

The NCHE contributes to the development and implementation of regional and continental conventions. For instance, the NCHE contributes to the development and implementation of the ADDIS Convention on Recognition of Qualifications by supporting the Ministry of Education in the development and validation of the [Malawi Qualifications Framework \(MAQF\)](#). The NCHE coordinates admission of regional and international students in the Higher education system through providing an online platform for submission of applications and verifying foreign qualifications. In addition, the NCHE is developing Recognition of Prior Learning (RPL)

guidelines to support validation of competencies, promote equitable access to education and employability beyond borders.

In regards to the Continental Education Strategy, the NCHE has contributed to its implementation by developing a model [Gender Policy](#) in order to eliminate gender barriers in Higher Education. NCHE has also facilitated the admission of special needs students into higher education in Malawi through coordinating applications, assessments and admission of these students into HEIs through harmonised public university selection.

The NCHE participates in bilateral and multilateral agreements to facilitate the recognition and equivalence of qualifications in line with international standards. The NCHE has a unit that does certificate verifications. It participates in international initiatives, workshops and conferences on quality assurance to exchange and share experiences and best practices. The NCHE recently visited a number of regional and continental quality assurance agencies for purposes of benchmarking best practices in quality assurance. For instance, the NCHE visited South Africa (Council for Higher Education; South African Qualifications Authority; Quality Councils for Trades and Occupation and Department of higher Education), Kenya (Commission for University Education) and Egypt (National Authority for Quality Assurance of Education) for a learning visit (See Attachment 3: NAQAAE Learning Visit Report).

NCHE recognises that its networking and collaboration has been limited to regional and continental levels. Going forward, NCHE will upscale its efforts to ensure participation and contribution to internationalisation by enhancing networking and collaboration for improved contribution to the development and implementation of regional, continental and international conventions on recognition of qualifications, and serve as a regional information hub. Additionally, NCHE will engage HEIs to provide information on their internationalisation efforts as they share annual reports. The description of how the NCHE aligns with standard 8 is summarised in Table 8.17.

Table 8.17: Summary description of how the NCHE aligns with standard 8

ASG-QA -STANDARD 8	DESCRIPTION OF HOW NCHE IS ALIGNED TO THE ASG-QA STANDARD 8	EVIDENCE /DATA OR INFORMATION SOURCE
The QAA shall promote and participate in international initiatives, workshops and conferences on quality assurance to exchange and share experiences and best practices	a) The NCHE participates in and undertakes activities that promote internationalisation. The NCHE participates at the regional and continental level through membership in SAQAN, and AQVN. b) The NCHE collaborates with relevant local professional bodies such as MAB and Malawi Council of Legal Education (MCLE). It has active MOUs with bodies such as MAB, TEVETA and MCLE.	• Evidence of membership to SAQAN and AQVN will be provided in print copy • Attachment 4_CHE & SAQA Learning Visit Report.

Standard 9. Periodic Review of QAAs

The QAA shall undergo periodic internal and external reviews in order to demonstrate its compliance with the ASG-QA.

In order to ensure periodic internal and external reviews of the NCHE as a Quality Assurance Agency, the NCHE remains responsive to its higher education sub-sector needs and continues to strengthen effectiveness and efficiency of its support services through the following mechanisms:

- a) *External Reviews:* NCHE has an external auditor who is engaged on a three-year contract to review the annual financial performance of the Council as per its approved work plan and budgets. NCHE also carries out client satisfaction surveys on an annual basis in order to receive feedback on how it carries out its services.
- b) *Internal Reviews:* NCHE has an internal auditor who assesses and evaluates the activities and operations of NCHE in line with its mandate and functions. It also has a Monitoring & Evaluation section that collects data on the perceived effectiveness of the quality assurance process from stakeholders. The NCHE also conducts an annual employee

satisfaction survey (See Attachment 6: Employee Satisfaction Survey REPORT NCHE May 2023), annual performance of the Council against clearly defined key performance indicators outlined in the [strategic plan](#). Furthermore, the NCHE has a performance management system that helps to identify performance on specific work targets, guide identification of training and capacity building opportunities for its staff. For the first time, the NCHE is also conducting a self-assessment in preparation for an external review under the HAQAA3 initiative.

Annually, the NCHE produces an [annual report](#), which is intended to demonstrate transparency and accountability to public resources. Through the annual report, NCHE highlights progress on key projects, challenges and new developments. The description of how the NCHE aligns with standard 9 is summarised in Table 8.18.

Table 8.18: Summary description of how the NCHE aligns with standard 9

ASG-QA - STANDARD 9	DESCRIPTION OF HOW NCHE IS ALIGNED TO ASG-QA STANDARD 9	EVIDENCE /DATA OR INFORMATION SOURCE
The QAA shall undergo periodic internal and external reviews in order to demonstrate its compliance with the ASG-QA.	a) The NCHE is audited externally on an annual basis by a government approved external auditor. b) Internally, the NCHE has an internal auditor who assesses and evaluates the activities and operations of NCHE to its mandate and functions. The NCHE also has M&E section that collects data on the perceived effectiveness of the quality assurance process from stakeholders. c) The NCHE will be reviewed under the HAQAA3 initiative to ensure continuous improvement and alignment with the ASG-QA.	• External audit reports will be available in hard copy

Chapter 9. International Activities

The National Council for Higher Education (NCHE) actively participates in various international activities, reflecting its commitment to strengthening higher education quality and standards through global learning and collaboration. Currently, the NCHE's CEO serves as a board member of the SAQAN, while the Director of Registration and Accreditation Services was a member of the organising committee for the 2024 SAQAN conference, which will be held in Zambia.

In 2024, NCHE officers participated in international learning visits to three African countries to enhance their knowledge and expertise. In May, 2024 a delegation of three NCHE officers, led by the CEO, visited South Africa's National Council on Higher Education (CHE), Quality Council for Trades and Occupations (QCTO), the South African Qualifications Authority (SAQA), the Department of Higher Education and Training, and UMALUSI (see Attachment 4_CHE & SAQA Learning Visit Report). These visits were focused on exploring quality assurance mechanisms and regulatory frameworks in the South African higher education landscape.

In August 2024, a team of four officers from the NCHE also visited the CHE in South Africa. Another group of three officers are scheduled to visit SAQA as part of the NCHE's ongoing efforts to deepen partnerships and share best practices in October, 2024. The NCHE has extended its international engagement to East Africa. A delegation of three officers, led by the CEO, visited the National University Commission (NUC) in Kenya, aiming to learn from Kenya's robust higher education quality assurance system.

From September 9th to 13th 2024, a team of five officers, once again led by the CEO, went on a learning visit to Egypt's National Authority for Quality Assurance and Accreditation of Education (NAQAAE) to learn on digitization of the accreditation process. This visit underscores NCHE's continuous efforts to build partnerships and adopt innovative approaches to quality assurance across diverse educational landscapes.

Chapter 10: Engagement with stakeholders

The National Council for Higher Education (NCHE) actively engages stakeholders in quality assurance matters, adopting a collaborative approach to ensure that the standards, tools, guidelines, and frameworks used are comprehensive and representative. All resources are developed through consultations with HEIs, including validation stages to ensure relevance and practicality.

For example, in 2023, NCHE developed Open and Distance Learning (ODEL) Standards, Guidelines, and Assessment Tools, crafted by a team of HEI experts and validated to align with institutional needs. In 2024, NCHE began developing Recognition of Prior Learning (RPL) guidelines, with a draft prepared by HEI experts. This collaborative, expert-driven approach ensures that NCHE's guidelines and tools are relevant and responsive to the evolving needs of Malawi's higher education sector.

This year, the NCHE successfully conducted [engagement meetings](#) with Vice-Chancellors and Registrars of the HEIs. The meetings provided a platform for receiving feedback on NCHE's operations and an opportunity for NCHE to share new developments with HEIs.

Chapter 11: Areas for Future Development

This chapter outlines key areas for NCHE's future development, focusing on enhancing efficiency and quality in higher education. Significant initiatives include the digitalization of assessment processes, the transition to online training for reviewers, and the development of a standardised body of knowledge across fields of study (subject benchmarks). These efforts aim to improve transparency, accessibility, and consistency in our operations and educational standards.

a) Digitalisation of Assessments

The NCHE is in the process of digitalising its assessment processes, which includes streamlining processes from application submission to report generation. This digital transformation aims to improve efficiency, accuracy, and transparency in managing assessments. To support this initiative, the NCHE has secured funding through the USAID funded project, Transforming Higher Education Systems (THES) being implemented by Michigan State University (MSU), which will be instrumental in helping the NCHE to achieve this dream. With the THES funding (see

Attachment 8_THES Project Budget), the NCHE plans to engage a consultant to develop a customised system tailored to its specific needs. The consultant will design and implement a digital platform that covers all stages of the assessment process, ensuring that it aligns with best practices and international standards.

As part of its preparatory work, the NCHE conducted a learning visit to Egypt's National Authority for Quality Assurance and Accreditation of Education (NAQAAE). The visit provided valuable insights into how NAQAAE has successfully implemented a fully digitalized assessment system. The NCHE learned about their processes, challenges, and the technologies they utilise, which will inform its digitalization journey (See Attachment 3_NAQAAE Learning Visit Report).

b) Online Reviewers Training

The NCHE is transitioning the reviewers' training to an entirely online format, aiming to provide a more accessible and flexible learning experience. To facilitate this, NCHE has developed a comprehensive 8-week online training program for reviewers, structured around four key modules that equip them with the necessary skills and knowledge for effective assessment and report writing. Looking ahead, the objective is to certify all reviewers through this program, ensuring that only certified reviewers are utilised for future assessments, thereby enhancing the quality and consistency of reviews across all areas.

Additionally, NCHE is developing a robust Learning Management System (LMS) to host and manage the training. The LMS will streamline the delivery of training modules and facilitate the monitoring, assessment, and certification of reviewers. This system will serve as a central hub for all training-related activities, providing an intuitive and user-friendly platform for both reviewers and administrators.

c) Development of Minimum Body of Knowledge

In addition to the minimum standards and guidelines already in place, NCHE aims to develop a minimum body of knowledge for all fields of study currently offered in Malawi. The primary objective is to standardise the essential knowledge and core skills across similar programs offered by different institutions, ensuring consistency in the quality and content of education nationwide.

To avoid stifling creativity and innovation within HEIs, each institution will have the flexibility to include a percentage of unique content that reflects its vision and specialised focus or approach. This balance allows institutions to maintain their individuality while adhering to a core framework of standardised learning outcomes. Furthermore, the minimum body of knowledge for each field will be developed collaboratively by subject-matter experts from various HEIs offering those programmes, ensuring that the framework is comprehensive, up-to-date, and reflective of current demands and trends within each discipline.

NCHE has already secured funding for the pilot phase of this initiative through the SAVE project, which will support the initial stages of development in two selected fields. For more details on the funding, please refer to the SAVE project documentation (See Attachment 5: SAVE Project Midterm Review 2024).

Glossary of Terms

Accreditation: A process for verifying or approving a higher education institution or academic programmes by the National Council for Higher Education which is valid for a specified time frame.

External Quality Assurance: Systematic monitoring and evaluation of the operations of a quality assurance agency of higher education, and the processes that support them, to make sure that the minimum standards are met.

Internal Quality Assurance: the monitoring of processes and procedures implemented by higher education institution to ensure that they fulfil their purposes and meet the minimum standards as set by the external quality assurance agency.

Higher education institution: an organisation that delivers higher education.

Higher education: education beyond the secondary level; especially education provided by a college or university.

Management: a group of persons appointed and given the responsibility to manage the affairs of an institution.

Minimum Standards: a reference point against which different aspects of the institution and programme are compared or evaluated for quality;

Private higher education institution: university or College which is established or maintained out of funds other than public funds.

Public higher education institution: university or college established and maintained or assisted out of public funds.

Reviewer: An individual contracted by the National Council for Higher Education who has experience in higher education or quality assurance and is used to assess higher education institutions or academic programmes.

Self-assessment report (SAR): An analytical report submitted by the NCHE or higher education institution assessing its own performance in preparation for an external review.

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