HAQAA3 AGENCY REVIEWS

EXTERNAL REVIEW REPORT

FULL AGENCY REVIEW

NATIONAL COUNCIL FOR HIGHER EDUCATION NAMIBIA

JUNE, 2026

This document has been produced under a contract with the European Union (HAQAA3). The opinions expressed are those of the contractor only and do not represent the contracting authority's official position.

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LIST OF ABBREVIATIONS/ACRONYMS

AAU	Association of African Universities
AfriQAN	African Quality Assurance Network
ASG-QA	African Standards and Guidelines for Quality Assurance in Higher Education
ENQA	European Association for Quality Assurance in Higher Education
CEO	Chief Executive Officer
EQA	External Quality Assurance
ERR	External Review Report
EER	External Evaluation Report
HEI	Higher Education Institution
HAQAA	Harmonisation of African Higher Education Quality Assurance and Accreditation Initiative
HEMIS	Higher Education Management Information System
HPCNA	Health Professions Council of Namibia
INQAAHE	International Network for Quality Assurance Agencies in Higher Education
ICAN	Institute of Chartered Accountants of Namibia
ICT	Information and Communication Technology
IQA	Internal Quality Assurance
KPI	Key Performance Indicator
MOU	Memorandum of Understanding
NCHE	National Council for Higher Education
NQF	National Qualifications Framework
ODeL	Open, Distance and e-Learning
NQA	Namibia Qualifications Authority
QA	Quality Assurance
QAA	Quality Assurance Agency
SADC	Southern African Development Community
SAQAN	Southern African Quality Assurance Network
SAR	Self-Assessment report
SER	Self-Evaluation report

ToRs	Terms of Reference
TVET	Technical and Vocational Education and Training
ZIMCHE	Zimbabwe Council for Higher Education

CHAPTER 1. EXECUTIVE SUMMARY

This report presents the findings of the external evaluation of the National Council for Higher Education (NCHE) of Namibia, conducted under the third phase of the Harmonisation of African Higher Education Quality Assurance and Accreditation Initiative (HAQAA). The review was coordinated by the Association of African Universities (AAU) on behalf of HAQAA3, which supports quality assurance agencies (QAAs) across Africa through evaluations, advisory services, and follow-up engagements. The overarching aim is to strengthen QA systems in Africa in alignment with the African Standards and Guidelines for Quality Assurance in Higher Education (ASG-QA) and to promote effective, enhancement-led external quality assurance (EQA) practices.

The review was undertaken by an independent panel using a rigorous, evidence-based methodology that included document analysis, review of the Self-Assessment Report (SAR), stakeholder interviews, and a site visit conducted from 3rd to 5th March 2026. The panel engaged a broad range of stakeholders, including NCHE leadership, Higher Education Institutions (HEIs), quality assurance officers, students, employers, and other partners. This triangulated approach ensured a comprehensive and credible assessment of NCHE's compliance with ASG-QA standards and its overall effectiveness.

The findings indicate that NCHE operates a well-established and credible EQA system, with the majority of standards assessed as compliant. The agency has developed structured and transparent mechanisms for programme accreditation, institutional audits, and monitoring. These processes are supported by clear procedures, active stakeholder engagement, and data management systems such as the Higher Education Management Information System (HEMIS), and are broadly aligned with regional and international good practices.

Institutionally, NCHE is anchored in a strong legal and policy framework, with a clearly defined mandate under the Higher Education Act of 2003. Its strategic direction is well articulated, and governance structures are in place and functional. Nonetheless, the agency's effectiveness is constrained by several structural and operational challenges. These include limited institutional independence due to its positioning within a government ministry, reliance on public service systems for staffing, fragmented internal quality assurance (IQA) arrangements, and the absence of fully formalized procedures in some key operational areas.

The review further highlights critical resource challenges, particularly in human capacity. NCHE operates with limited staffing and faces difficulties in attracting highly qualified personnel, which affects efficiency and timely service delivery. Additionally, internal quality assurance systems are not fully integrated into a coherent framework, and there is no formalized approach to periodic internal and external reviews.

In conclusion, the panel observed that although NCHE is judged to be substantially compliant, as it meets most of the ASG-QA standards, notable improvements are still required in key areas; particularly in institutional independence, human resources development, complaints and appeals system, internal quality assurance for the agency's EQA system and financial sustainability; to achieve full compliance and enhance its long-term effectiveness and impact.

The review panel reached the following judgements (Table 1.1) regarding NCHE's compliance with the ASG-QA:

Table 1.1 Summary of Judgements

S/No.	Standard	Description	Judgement
PART B: EXTERNAL QUALITY ASSURANCE			
1.	Part B 1	Objectives of EQA and consideration for IQA	Compliant
2.	Part B 2	Designing EQA mechanisms fit-for-purpose	Compliant
3.	Part B 3	Implementation processes of EQA	Compliant
4.	Part B 4	Independence of evaluation	Compliant
5.	Part B 5	Decision and reporting of EQA Outcomes	Compliant
6.	Part B 6	Periodic review of institutions and programmes	Compliant
7.	Part B 7	Complaints and appeals	Partially Compliant
PART C: INTERNAL QUALITY ASSURANCE FOR QUALITY ASSURANCE AGENCIES			
8.	Part C 1	Legal status	Compliant
9.	Part C 2	Vision and mission statement	Compliant
10.	Part C 3	Governance and management	Compliant
11.	Part C 4	Independence of QAA	Partially Compliant
12.	Part C 5	Policies, processes and activities	Compliant

S/No.	Standard	Description	Judgement
13.	Part C 6	Internal Quality Assurance	Partially Compliant
14.	Part C 7	Financial and human resources	Partially Compliant
15.	Part C 8	Benchmarking, networking and collaboration	Compliant
16.	Part C 9	Periodic review of QAAs	Partially Compliant

CHAPTER 2: INTRODUCTION

AIMS AND PURPOSE OF THE EXERCISE

This report presents the findings of the external review of NCHE within the context of the HAQAA3 initiative. This follows an agreement that NCHE signed with the HAQAA3 initiative, to subject itself to an external review carried out by an independent panel of experts. The primary aim of the review was to evaluate whether and to what extent the agency complies with Part B and Part C of the ASG-QA.

For NCHE, the review was important for two main reasons. First, it allowed the agency to reflect on the robustness of its EQA system by evaluating it against internationally established standards. Second, the review provided an opportunity to identify areas for further development of NCHE EQA system. The results of this review, in this regard, are crucial for strengthening NCHE's EQA system and re-aligning it to regional and international best practices.

Structure of the Report

The report is structured into four parts. The first part, which is the introductory component, focuses on the role of NCHE as a higher education quality assurance agency and provides an overview of the Namibia higher education system. The second part provides the methodology that was used by the panel in the collection and analysis of data on which the report is based. In the third part, the report focuses on the findings of the evaluation panel, analysis of findings, conclusions, and recommendations. The findings and analysis are provided in the context of the agency's compliance with Part B and C of the ASG-QA. Lastly, the final part of the report provides a summary of the panel's findings, recommendations, and suggestions for improvement of NCHE EQA system.

Panel Composition

The external review panel consisted of four members drawn from four African countries, selected on grounds of their expertise in QA in higher education, governance, and student representation. These members were:

- Dr. Eunice Marete (Chairperson), Commission for University Education, Kenya.
- Dr. Orleans Mfune (Secretary), University of Zambia, Zambia
- Dr. Habtamu Teshome (Panel member), Education and Training Authority, Ethiopia.
- Mrs. Temitope Happiness Oriola (Panel Member), student, Department of Human Nutrition and Dietetics, University of Ibadan, Nigeria

This review panel composition ensured a balanced review, incorporating institutional, national, and regional perspectives while also including the student voice in the evaluation process. The review was coordinated by Adewale Olusegun Obadina, Project Officer for Quality Assurance and Accreditation, at the AAU and the process was observed by Mounerou Salou, Larissa Odzebe Gidisu and Isabella Tetteh Ahinakwa from AAU, and Luis Miranda, from the European Association for Quality Assurance in Higher Education (ENQA).

The National Council for Higher Education -Namibia

The National Council for Higher Education is the main external quality assurance agency responsible for regulating, coordinating, and promoting higher education in Namibia. Established under the Higher Education Act in 2003 and officially launched in 2005, NCHE plays a central role in ensuring the quality, relevance, and coherence of the national higher education system. Its creation reflects the government's commitment to building a well-coordinated and internationally aligned higher education sector.

NCHE's mandate encompasses several key functions, including promoting a coordinated higher education system, ensuring equitable access, safeguarding academic quality, and advising the government on the allocation of public funding in the higher education sector. To achieve these objectives, the Council performs a wide range of regulatory, advisory, and developmental roles. These include programme accreditation in collaboration with the Namibia Qualifications Authority (NQA), monitoring institutional quality assurance systems, conducting research, and providing policy advice on governance, funding, and system structure. The agency also been designated to administer regulations for private higher education institutions, thus serving both as a regulatory authority and a quality assurance body.

In terms of governance, NCHE is led by a Council appointed by the responsible Minister in line with the Public Enterprises Governance Act and the Higher Education Act. The Council is supported by two committees, namely the Funding Framework, Finance and Audit Committee and the Quality Assurance and Higher Education Management Information Systems Committee, which ensures accountability and strategic oversight. Operational responsibilities are executed by a Secretariat structured into three main units: Quality Assurance; Policy, Planning and Research; and Finance and Administration.

Beyond its core quality assurance role, NCHE undertakes activities that support system development and evidence-based decision-making in higher education. These include policy development, higher education research initiatives, and the management of the HEMIS, which facilitates data collection and analysis. The Council also conducts graduate surveys to assess employability outcomes, organizes public lectures on key higher education issues, and advises on efficient, transparent and equitable funding for public higher education. Additionally, it promotes access and affordability by analysing tuition fee structures relative to national income levels.

As part of its external quality assurance functions, NCHE implements processes such as provision of technical support during registration of private higher education institutions, institutional audits, and programme accreditation and re-accreditation. These processes are guided by national regulations and international standards and are supported by independent expert panels to ensure credibility and objectivity. The Council also engages in capacity-building initiatives, improvement monitoring, and follow-up mechanisms to strengthen institutional performance and quality culture.

Furthermore, NCHE fosters collaboration within the higher education sector through partnerships with professional bodies, regulatory agencies, and regional and international quality assurance networks. These partnerships facilitate knowledge sharing, harmonization of standards, and continuous improvement of quality assurance practices.

In general, NCHE is a comprehensive regulatory and quality assurance body that plays a pivotal role in Namibia's higher education system. Through its integrated functions spanning regulation, quality assurance, research, and policy advice, it contributes to enhancing accountability, improving educational quality, and strengthening the global competitiveness of higher education in Namibia.

Higher Education System in Namibia

Higher education in Namibia, as defined in the Higher Education Act, 2003, (No. 26 of 2003), includes all learning programs leading to qualifications above Grade 12 or its equivalent. It excludes vocational training offered by centres registered under the National Vocational Training Act,1994（Act No. 18 of 1994) and open learning provided by Namibia College of Open Learning, established under the Namibia College of Open Learning Act, 1997（Act No. 1 of 1997). This legal definition of higher education means that in terms of institutions of learning, the higher education system of Namibia consists of all colleges, universities and institutions that offer tertiary education, except for Technical and Vocational Education and Training (TVET) Colleges and the College of Open Learning (NAMCOL). However, it is important to note that NAMCOL has started offering higher education programmes and consequently, NCHE accredits such programmes and publishes them as part of the higher education annual statistics.

The establishment and regulation of higher education institutions are grounded in the Constitution of Namibia and implemented through key legislative frameworks. These include:

a) The Namibia Qualifications Authority Act, No. 29 of 1996, which establishes the Namibia Qualifications Authority and mandates it to manage the National Qualifications Framework (NQF), including accreditation, standards setting, and recognition of learning.
b) The Higher Education Act, 2003 (No. 26 of 2003), which defines higher education, establishes NCHE, and regulates both public and private institutions. Regulations for registering private institutions were enacted in 2009.
c) The Namibia Students Financial Assistance Fund Act, No. 26 of 2000（amended in 2014), which supports equitable access through student financial aid.
d) Professional body statutes, which set standards and qualifications requirements for regulated professions.

Together, these frameworks ensure coherence, accountability, and alignment with regional and international quality standards.

As of October 2025, Namibia had 20 higher education institutions: 3 public and 17 private. Public institutions include Namibia College of Open Learning, Namibia University of Science and Technology, and University of Namibia. Private institutions contribute to programme diversification, particularly in business, management, nursing, education, and related fields.

Period of the exercise

The review exercise started with the signing of the Terms of Reference (ToRs) between NCHE and AAU on behalf of HAQAA3 on 20th May 2025 and concluded with the final

External Review Report（ERR) sent to NCHE on 4th June 2026. The specific timelines and methodology of the review process are described in Chapter 3.

CHAPTER 3: METHODOLOGY

A multi-stage evidence-based evaluation process was adopted to conduct the review of the agency. In the first stage, the evaluation team carried out a comprehensive desk review of the ASG-QA, the Users' Guide and the procedures for conducting the review. This allowed the evaluation team to create a set of questions and indicators to guide the agency review process. This process was followed by a comprehensive review of NCHE SAR and accompanying documentation (submitted as evidence), which informed the identification of key issues for further investigation during the site visit. Further, the SAR formed the basis for identification of different stakeholders that were key to the evaluation process and therefore targeted for interviews. The SAR was received by the panel on 8th January 2026.

During the review of the SAR, the panel evaluated the evidence provided by NCHE against each of the standards in Parts B and C of the ASG-QA to determine their adequacy and gaps or issues that would form the basis of further investigation and discussion with both the agency and stakeholders. Through this process, a Mapping Grid (Annex 1) was developed, outlining the key issues for discussion during the site visit. Furthermore, the outcomes of this process provided a preliminary assessment of the agency's performance with respect to its compliance with the ASG-QA.

Following the review of the SAR, a meeting was held virtually with the agency on 10th February 2026. This was a precursor to the site visit and was intended to (a) allow the agency make a presentation to the panel on the Namibian higher education system , the legal status of the agency and its functions; and (b) provide the review panel with an opportunity to seek clarification from the agency on a number of issues presented in the SAR. This was essential in refining the mapping grid and enabling the panel to develop a deeper understanding of the Namibian higher education system, as well as the agency's role within the national quality assurance landscape.

The final stage in the review involved a three day site visit to the agency which was conducted from 3rd to 5th March 2026. The site visit schedule of meetings and activities is presented in Annex 2. During the visit, the review team carried out the following: (a) interviews with key staff of the agency and other stakeholders (b) physical examination of documents submitted as evidence by the agency (c) guided inspection of the agency's offices (d) debriefing meeting with the agency's Council and management.

Over a period of three days, the review panel conducted a series of interviews with a broad range of stakeholders within the Namibian higher education sector. The interviews provided an opportunity for the panel to corroborate evidence provided in the agency's SAR with stakeholder views. In addition, the interviews provided rich insights into how the Namibian higher education sector works and the place of both EQA and IQA in the sector. Table 3.1 provides a summary of categories of stakeholders that were interviewed during the site visit.

Table 3.1 Stakeholders Interviewed

S/No.	Category of Stakeholders	Type of Data provided
1.	NCHE Council	Agency's governance structure and policies
2.	NCHE Management	Agency's operational structure, procedures and processes
3.	NCHE's departmental staff	Departmental operations, EQA activities, human resources, finance and agency IQA
4.	Professional/regulatory bodies	Perspectives of professional bodies on EQA in higher education and agency operations Agency-professional bodies collaboration in accreditation, audits and policy development
5.	Employers/industry	Data on agency's impact, employer input/participation in training programme development, accreditation and audits
6.	Institutional Auditors/Programme Accreditation experts	Data on reviewer experience, recruitments, training, professionalism and ethics
7.	Officials from the Office of the Prime Minister	Data on agency's status within the ministry, Higher Education Policy, Funding of agency, human and technical resources /capacity
8.	Higher Education Institutions	HEI experiences and perspective on EQA; HEIs participation in EQA policy development and activities, IQA-EQA relations
9.	Students	Student participation in EQA activities; prescription of EQA and agency's work

Besides interviews, the panel reviewed documentation that was provided as evidence in support of the agency's compliance with ASG-QA. The documents reviewed included policy and legal documents, strategic plans, EQA frameworks, operational manuals, reports on agency's EQA activities and selected administrative documents relevant to the review. This documentation was compiled into a list of evidence that is presented in Annex 3.

The review team also conducted a guided inspection of the agency's premises located at Dr. Zedekia Josef Ngavirue Higher Education House, Cnr Hoogenhout & Hardy Streets, Erf 6445 & 6446, Windhoek, Namibia. The premises house the Secretariat of the agency. The inspection focused on (a) availability of work space for the agency's operations (e.g. offices and meeting rooms); (b) availability and state of office equipment and facilities （e.g. ICT facilities and furniture） and （c) transport fleet (i.e for field operations).

The data gathered through interviews, examination of physical documents and guided inspection （observation） of premises provided a rich set of data that was cross-referenced by the panel and that was used as a basis for analysis of the agency's compliance to the ASG-QA.

CHAPTER 4. FINDINGS, ANALYSIS AND JUDGEMENT

PART B: STANDARDS AND GUIDELINES FOR EXTERNAL QUALITY ASSURANCE

STANDARD 1. OBJECTIVES OF EXTERNAL QUALITY ASSURANCE AND CONSIDERATION FOR INTERNAL QUALITY ASSURANCE

STANDARD: *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.*

Findings

From the documentation reviewed, the panel observed that several EQA instruments used by the agency make it compulsory for HEIs to have clearly defined vision and mission statements. The instruments include the Quality Assurance System for Higher Education in Namibia (2009), the Minimum Standards for Higher Education Institutions (2025) and the Programme Accreditation and Institutional Audit Manuals. For example, the audit criteria, as set out in the Institutional Quality Assurance Audit Manual, requires that an HEI specifies its "institutional mission, vision and goals" (Criterion 1, Pg 11). Similarly, the Minimum Standards for Higher Education Institutions in Namibia requires that an HEI aligns its governance model and IQA to its vision and mission (Pg 21).

Further, during interviews with NCHE management and representatives of HEIs, the panel observed that the agency engages external evaluators (experts) to verify and evaluate the mission and vision statements of HEIs through programme accreditation and institutional audit processes. The agency requires HEIs' to submit key institutional documents; such as vision and mission statements, strategic plans, and quality-related policies, as part of the evaluation framework (Quality Assurance System for Higher Education in Namibia, 2009, Pg. 17 & 36). In addition, for both programme accreditation and institutional audits, HEIs are required to submit Institutional Self-Evaluation Reports (SERs) before external evaluations.

The SERs serve as evidence base that enable institutions to critically reflect on the alignment between their stated vision, mission, goals and IQA practices (University of Namibia, Hage Geingob Campus Portfolio, 2025, Pg.10-11; Namibian University of Science and Technology programme accreditation Self Evaluation Report, 2024, Pg. 13). In addition, documentation reviewed by the panel showed that the agency evaluates institutions in relation to their own mission, context, and strategic objectives rather than imposing uniform standards. For example, the accreditation criteria outlined in the Quality Assurance System for Higher Education in Namibia requires that accreditation should be undertaken in line with an HEI's vision, mission and strategic directions (Pg. 20). External reviewers (University of Namibia, Hage Geingob Campus Portfolio, 2025, Pg.10-11; Namibian University of Science and Technology programme accreditation Self Evaluation Report, 2024, Pg. 13) assess whether the institutional vision and mission and IQA systems are aligned with institutional strategies, regularly reviewed, and effectively communicated across institutional levels, ensuring that institutional quality policies are not only documented but also operationalized in practice.

Analysis

From the evaluated evidence, the panel established that the agency has well-defined mechanisms for ensuring that an HEI has a clearly articulated vision and mission statement. This is achieved through structured EQA mechanisms, particularly institutional registration, programme accreditation and institutional audit processes which are used to verify and evaluate an HEI's vision and mission statement. These processes, apart from simply ensuring that an HEI has a clearly articulated vision and mission statement, are also an important means of providing feedback to an HEI on the robustness of its IQA system.

Further, the evaluations underpinning these EQA processes are grounded in each institution's vision, mission and strategic objectives. By evaluating programs and institutions based on coherence with their stated vision and objectives, rather than conformity to a single model, the agency safeguards institutional autonomy while ensuring that the HEI's IQA mechanisms remain effective. Moreover, the requirement for SERs reinforces institutional ownership of quality by promoting critical reflection on internal processes and alignment with the stated vision and mission and thereby strengthening IQA.

Conclusion

Compliant

Commendation

The panel commends the agency for institutionalising SER-based reflective practice in the evaluation of an HEI's vision and mission statement.

STANDARD 2. DESIGNING EXTERNAL QUALITY ASSURANCE MECHANISM FIT-FOR-PURPOSE

STANDARD: *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.*

Findings

The documentation reviewed by the panel showed that the agency's EQA system is based on a set of regulatory and policy documents that define the scope, aims, and objectives of EQA. These include the Higher Education Act (Part III, section 6) which defines the object of NCHE, in relation to EQA, to promote quality assurance, accredit learning programmes and to monitor the quality assurance mechanisms of HEIs. These objectives are further reinforced by the Quality Assurance System for Higher Education in Namibia (2009) which defines NCHE EQA system as consisting of two sub-systems: programme accreditation and institutional audits. Further, it provides the procedures, processes, and criteria for programme accreditation and institutional audits. These frameworks inform the design of NCHE's EQA mechanisms.

For operational purposes, NCHE has developed the Minimum Standards for Higher Education Institutions (2025) which provides additional objectives of NCHE's EQA system as 'ensuring the integrity of qualifications and maintenance of academic standards in the country'. The standards are operationalised through accreditation and quality audit manuals, which provide detailed guidelines and procedures for implementation.

According to the documentation reviewed by the panel, programme accreditation evaluates the relevance, coherence, and viability of academic programmes, including curriculum design, delivery modes, staffing, assessment, and graduate outcomes. Institutional audits focus on governance, strategic planning, and the effectiveness of IQA systems, while monitoring mechanisms ensure continuity through structured follow-up processes that track institutional responses to recommendations (Quality Assurance System for Higher Education in Namibia, 2009; Pg 6 & 37; The Higher Education Act, 2003 (No. 26 of 2003), Pg. 5, 11, 17). In addition, registration of private HEIs is used as a means for granting legal recognition to privately owned HEIs.

From the findings, it was evident that NCHE EQA mechanisms are intended to be closely aligned with the institutional and national context, reflecting institutional diversity, sectoral needs, and national development priorities. For example, the Quality Assurance System for Higher Education in Namibia (2009; Pg 38) explicitly notes that the accreditation and audit criteria should be interpreted and implemented in the "context of an HEI's mission, type of higher education (university, polytechnic etc.), objectives, level of development and regional and national priorities".

Further, the panel observed that NCHE employs stakeholder consultations as tools for soliciting participation of various actors in the design and refinement of fit-for-purpose EQA processes. This is done through regular engagement of HEIs, students, professional bodies, regulatory agencies, and international partners (Interviews with NCHE management and Quality Assurance Department). Initiatives such as the 2023/24 Stakeholder Satisfaction Survey provide structured feedback on EQA standards, processes, panel composition, communication, and evaluation methodologies, enhancing the credibility and responsiveness of the system to stakeholder needs.

The panel also observed that the agency verifies the effectiveness of its EQA mechanisms to achieve their intended goals and objectives through the systematic use of data, stakeholder feedback, and follow up processes to check whether HEIs are implementing NCHE recommendations (Interviews with Quality Assurance Department staff). In addition, it was noted that the integration of HEMIS data enables verification of institutional claims and facilitates trend analysis, while established monitoring mechanisms ensure that recommendations are implemented and sustained over time.

Analysis

The panel observed that the agency has put in place a differentiated and coherent set of EQA mechanisms; namely programme accreditation, institutional audits, registration, and the monitoring of quality improvement; each designed to serve specific purposes within the higher education system. Collectively, these mechanisms provide a holistic approach to quality assurance that strengthens, rather than duplicates, institutional IQA systems and supports sustained quality enhancement.

The EQA mechanisms seem to have been designed with a fitness-for-purpose approach in mind as they are linked to institutional and national priorities, ensuring that EQA is both relevant and responsive to the national and higher education context. Clear references and evaluation guidelines are articulated through accreditation manual, minimum standards, and national QA frameworks, accommodating diverse institutional types and delivery modalities, including face-to-face, hybrid, and distance learning.

Further, the agency integrates national data from the HEMIS, including enrolment, graduation, and staffing statistics, to contextualize institutional submissions and support evidence-based evaluation and policy development. This data-driven approach enhances the relevance and effectiveness of EQA processes. At the system level, EQA promotes accountability, transparency, and comparability across institutions while ensuring alignment with national policy frameworks such as development plans and qualification systems. For HEIs, EQA fosters institutional reflection, strengthens IQA mechanisms, and drives continuous quality improvement through structured feedback, improvement plans, and progress reporting (Quality Assurance System for Higher Education in Namibia, 2009; Pg.13 &43, Interview with representatives from the heads of some reviewed HEIs).

The agency's consultative approach fosters stakeholder ownership and collaboration, which are essential for the design of an effective fitness-for-purpose quality assurance system. However, while stakeholder feedback is actively collected, its systematic analysis and use in demonstrating measurable improvements in EQA design and outcomes could be further strengthened. Similarly, although follow-up mechanisms are in place, there is limited explicit evidence linking EQA processes to measurable system-level improvements.

The agency's EQA mechanisms are well-conceived and aligned with their intended purposes. However, the absence of comprehensive Open Distance and e-Learning (ODeL)-specific guidelines represents a gap in ensuring full fitness for purpose in an evolving higher education landscape increasingly characterized by digital and blended learning modalities.

Conclusion

Compliant

Commendations

The panel commends the agency for:

1. Integrating HEMIS data into EQA processes to support evidence-based evaluation and development of fitness for purpose policies and standards.
2. Designing a differentiated and coherent set of external quality assurance mechanisms that strengthen institutional internal quality assurance systems and support continuous quality enhancement.

Suggestion for Improvement

The panel recommends that to enhance fitness for purpose EQA, the agency should also consider developing standards and guidelines that adequately address the unique characteristics and requirements of ODeL mode of delivery of programmes. The agency

should also consider the integration of data analytics for predictive and comparative quality assurance insights.

STANDARD 3. IMPLEMENTATION PROCESSES FOR EXTERNAL QUALITY ASSURANCE

STANDARD: *The standards, processes, and procedures for EQA shall be pre-defined, reliable, published, and consistently implemented for purposes of accountability.*

Findings

A set of documents from the agency having pre-defined standards and procedures for EQA were provided and reviewed by the panel. They include formal policy instruments such as the Minimum Standards for Higher Education Institutions (2025), the Quality Assurance System for Higher Education in Namibia and the accompanying accreditation and audit manuals (Quality Assurance System for Higher Education in Namibia, 2009, Pg.9 & 14; NCHE, 2025, Pg. 5-6). These provide the procedural and methodological foundation for conducting programme accreditation, institutional audits, and related evaluation processes. The documents also define the evaluation criteria, expectations, and reporting structures. In addition, the panel observed that the agency employs standardized tools and templates, including institutional SER formats, panel guidelines, assessment frameworks, checklists and reporting templates to ensure consistency and reliability in implementation of EQA.

The panel observed that these documents are published and accessible on the agency's official website (http://www.nche.org.na/publications/documents) as well as through formal communication to HEIs prior to evaluation cycles. Further, the panel noted through interviews with NCHE management and representatives of HEIs that the agency organises induction and orientation workshops for review panel members and institutional representatives to foster a shared understanding of objectives, methodologies, roles, and expected outcomes of the EQA processes.

The panel observed that to ensure consistency in evaluations, the external evaluation process is structured and anchored in institutional self-evaluation. HEIs are required to prepare an SER, aligned with the agency's criteria, reflecting on governance, academic programmes, resources, student support, research, and overall institutional effectiveness (Quality Assurance System for Higher Education in Namibia, 2009, Pg.9&40; Interviews with the Senior Management Team; selected Staff of the agency).

External reviews are conducted through a multi-phase process involving multidisciplinary panels composed of academic experts, industry representatives, and quality assurance professionals. These panels assess the SER alongside supporting evidence through document analysis, site visits, and structured interviews guided by standardised instruments. Following the site visit, panels provide oral feedback to institutional leadership, presenting preliminary findings, commendations, and recommendations. Institutions are subsequently given the opportunity to verify factual accuracy through draft reports before finalisation. Final evaluation reports, structured in accordance with the agency's criteria and aligned with the Quality Assurance System for

Higher Education, are submitted to the agency's Council for endorsement and then formally communicated to institutions, including commendations, recommendations, and, where applicable, conditions (Quality Assurance System for Higher Education in Namibia, 2009, pg.9 &40; Interviews with Representatives from the Senior Management Team; Staff of the agency; Heads of some HEIs who have undergone review).

Further, from interviews with the NCHE management and Quality Assurance Department, the panel learned that to ensure accountability and sustained quality enhancement, the agency has established a formal follow-up mechanism. Institutions are required to submit improvement plans within six months of receiving the final report, outlining specific actions and timelines for implementation, typically within a period not exceeding twenty-four months. Progress in implementation is monitored through desk-based reviews and, where necessary, follow-up visits to verify the implementation of recommended actions. This structured approach ensures that EQA processes extend beyond evaluation to support continuous improvement and institutional accountability.

Alignment with good quality assurance practices is maintained through the application of uniform criteria, standardised documentation, trained evaluators, and clearly defined decision-making procedures. Consistency is reinforced through ongoing training and capacity-building of panel members, while accountability is upheld through transparent reporting and oversight by the governing Council. Clear guidelines for drafting SERs, External Evaluation Reports (EERs), and follow-up actions are communicated to HEIs and evaluators through published manuals, workshops, and formal documentation (Quality Assurance System for Higher Education in Namibia, 2009, Pg.13 & 43; Interviews with Representatives from the Senior Management Team & Staff in Charge of External QA Activities).

Analysis

From the evaluated evidence, the panel established that the agency's EQA system is anchored in pre-defined standards, processes, and procedures that are codified through formal policy frameworks and operational manuals. The use of formalized policy documents, operational manuals, and templates ensures that evaluation processes are standardized, transparent, and replicable across different institutions and programs. This contributes significantly to the reliability, consistency, and credibility of the agency's EQA system.

The structured and standardised, multi-phase evaluation process; beginning with institutional self-evaluation and progressing through external review, reporting, decision-making, and follow-up, reflects a well-established QA cycle consistent with global QA practice. The emphasis on self-evaluation as the foundation of external review promotes institutional ownership, reflective practice, and internal quality enhancement. The inclusion of site visits, expert panels, and structured interviews further strengthens the validity of findings by enabling triangulation of evidence.

The panel also established that the agency ensures that its references, standards, processes, procedures, and guidelines are publicly accessible, and effectively communicated to stakeholders through formal documentation, published guidelines, and targeted capacity-building activities. Some documents are made available on the agency's website and shared with higher education institutions

The agency's clear guidelines for SER preparation, external evaluation reporting, and follow-up processes are in place and are communicated to both institutions and evaluators. This contributes to consistency in documentation, evaluation, and reporting practices. However, while procedures are well documented and implemented, there remains potential to further enhance the systematic monitoring of implementation consistency across different evaluation exercises and to consolidate procedural documentation for greater clarity and accessibility.

Conclusion

Compliant

Suggestions for Improvement

The agency should consider the following:

1. Developing a centralized digital QA management system to track evaluation processes, reports, and follow-up actions.
2. Conducting periodic meta-evaluations of EQA processes to assess reliability, validity, and stakeholder satisfaction.

STANDARD 4. INDEPENDENCE OF EVALUATION

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

Findings

From the documentation reviewed and interviews conducted with stakeholders, the panel observed that the agency's EQA system is anchored in a peer-review system that utilises panels of independent external experts to conduct programme accreditation and institutional audit exercises. For programme accreditation, review panels include academic experts in the relevant discipline from institutions other than the one under review, quality assurance specialists, industry representatives, professional body representatives for regulated programmes, and where applicable, students representatives. (Quality Assurance System for Higher Education in Namibia,2009, Pg.10; Program Accreditation Manual, n.d., Pg.10; Interviews with Staff in charge of External QA Activities; Heads of some Reviewed HEIs).

Similarly, institutional audit panels comprise academics, experts in higher education governance and finance, quality assurance specialists, NCHE representatives, and students, ensuring comprehensive coverage of institutional functions and stakeholder interests (Institutional Quality Assurance Audit Manual, n.d.,Pg.19; Interviews with Staff in charge of External QA Activities; Heads of some HEIs who have undergone review).

The panel observed that the agency's criteria for the selection of external experts is documented and includes academic qualifications, professional experience, relevance to the field under review, prior quality assurance experience, and demonstrable independence from the institution being evaluated. In terms of recruitment mechanisms, evidence reviewed indicated that the agency conducts public calls for experts**,** a documented example being a letter dated 6th September 2024, inviting qualified individuals to participate in quality assurance reviews. Experts are also identified through

open calls published on the agency's website, nominations from higher education institutions, and collaboration with regional and international quality assurance networks. These experts are maintained in an institutional database to support transparent and systematic panel appointments (Quality Assurance System for Higher Education in Namibia, 2009). The panel members are provided with formal Terms of Reference and are required to sign confidentiality agreements, reinforcing ethical conduct and safeguarding the integrity of the evaluation process (NCHE, Terms of Reference of Reviewers of Programme Accreditation & Confidentiality Agreement Programme Accreditation templates).

Based on interviews conducted with representatives of HEIs and external experts, the panel observed that transparency and independence of judgement of external experts are reinforced through procedural safeguards embedded within the evaluation process. Institutions are informed in advance of the proposed panel composition and are given the opportunity to raise justified objections where potential conflicts of interest may exist. A sample confirmation of no objection dated 1st July 2025 was provided, illustrating that institutions are consulted as part of the reviewer selection process.

Experts are likewise required to disclose any potential conflicts prior to their participation. The agency has also addressed challenges related to panel composition; such as limited availability of specialists; by expanding its reviewer database to include international experts and strengthening collaboration with regional and international partners. Post-evaluation feedback mechanisms, including stakeholder surveys, indicate that panel composition, professionalism and impartiality are generally well regarded. The feedback obtained is systematically utilized to refine reviewer selection criteria and related processes (Quality Assurance System for Higher Education in Namibia, 2009, Pg. 10& 43).

Analysis

The panel established that the agency's EQA relies on the use of diverse and independent external expert panels. The criteria for panel composition is defined and ensures that evaluations benefit from multidisciplinary perspectives, incorporating academic expertise, professional input, industry relevance, and learner representation. This diversity enhances the robustness, credibility, and contextual relevance of evaluation outcomes.

Further, the panel established that the selection process for experts relies on open calls, nominations, and database of experts, which helps to mitigate bias thus promoting inclusivity and transparency. The inclusion of international experts enhances impartiality, broadens perspectives, and facilitates benchmarking against regional and global standards, particularly in areas where specialized national expertise may be limited.

Training and induction of panel members play a critical role in ensuring consistency and alignment with EQA principles. By providing structured orientation, the agency ensures that evaluators apply standards uniformly while maintaining objectivity and professional judgment. Ethical safeguards such as confidentiality agreements and Terms of Reference further reinforce independence and accountability in the evaluation practices.

Transparency is also maintained through the disclosure of panel composition to institutions and the provision of opportunities to object to proposed members. This

mechanism enhances institutional trust and ensures that potential conflicts of interest are identified and addressed prior to evaluations. Additionally, the separation between governance and operational functions helps to safeguard against undue influence on evaluation outcomes.

Despite these strengths, certain contextual challenges persist, particularly related to the limited pool of qualified experts within the national context. However, the agency has taken proactive measures to mitigate these challenges by expanding its pool of experts through international recruitment and regional collaboration.

Conclusion

Compliant

Commendations

The panel commends the agency for the following:

1. Incorporating student representation in the evaluation process.
2. Including international experts to mitigate shortage of national experts, enhance independence and benchmarking.

Suggestions for Improvement

The agency should consider:

1. Strengthening capacity-building initiatives for emerging local experts in specialized disciplines.
2. Implementing a digital expert management system to track availability, expertise, and performance of panel members.

STANDARD 5: DECISION AND REPORTING OF EXTERNAL QUALITY ASSURANCE OUTCOMES

STANDARD: *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.*

Findings

The documentation on the agency's reporting and decision-making process reviewed by the panel showed that NCHE has established structured processes for producing evaluation reports and determining evaluation outcomes based on published EQA criteria or standards outlined in NCHE's EQA frameworks. Standardized reporting templates guide evaluation panels in systematically documenting evidence, analysis, and conclusions. Further, samples of evaluation reports reviewed by the panel show clearly defined sections such as the background and context, purpose and scope of the review, methodology, evaluation against established criteria, commendations, recommendations, and the overall judgement (Namibia University of Science & Technology, Programme Accreditation Self-Evaluation Report, 2024, University of Namibia, Hage Geingob Campus Portfolio, 2025). The reports follow guidelines, standards and criteria outlined

in the Quality Assurance System for Higher Education in Namibia, Accreditation and Audit Manuals and Minimum Standards for Higher Education institutions, all of which are published through the agency's website.

Further, the panel observed that final decisions on programme accreditation and institutional audits are made by the agency's Council, the legally mandated authority under the Higher Education Act, 2003 (No. 26 of 2003) based on the documented evidence and recommendations presented in the final evaluation reports. A review of samples of Minutes of the Council show that the decisions were guided by published standards and criteria outlined in the agency's EQA frameworks. Further, institutions are given the opportunity to verify the factual accuracy of draft reports prior to finalization, allowing for the correction of any inaccuracies and enhancing the credibility and trustworthiness of the process (interviews with representatives of HEIs; NCHE management). Transparency and accountability are further strengthened through the formal communication of final reports and Council decisions to institutions and their publication in accordance with established confidentiality and disclosure protocols. Further, a review of the agency's website showed that summaries of the institutional audit reports (for 9 HEIs) and accreditation decisions (in the form of list of accredited programmes) were published and accessed through; https://www.nche.org.na/quality-assurance/institutional-audit.

Analysis

The panel established that the agency's EQA reports and decisions are based on published standards and criteria that are accessible through its official website and thus accessible to stakeholders. The publication and dissemination of standards, procedures, and guidelines ensure that all stakeholders are informed of the expectations, processes, and criteria underpinning evaluations. This contributes to predictability and preparedness among HEIs and enhances the legitimacy of the EQA system.

The use of standardized reporting templates and clearly pre-defined EQA report structures enhances the clarity of reports and ensures that evaluation findings are presented in a coherent, and analytically sound manner. By requiring panels to document evidence, analysis, and conclusions in a systematic format, the agency promotes traceability and accountability in decision-making. This structured approach also facilitates comparability across different institutions and evaluation cycles.

Decision-making authority resting with the agency's Council provides an additional layer of oversight and consistency, ensuring that final decisions are made at an appropriate governance level and based on documented evidence and published criteria and standards. The reliance on published standards and panel recommendations helps to minimize subjectivity and maintain fairness across decisions.

The factual verification process represents an important safeguard for ensuring accuracy and institutional trust. By allowing HEIs to review and comment on draft reports, the agency reduces the risk of factual errors and enhances the credibility of final reports. This participatory element contributes to fairness while maintaining the independence of evaluators.

Despite these strengths, there remains scope to further enhance the analytical depth and consistency of panel reports to ensure that evidence is fully and explicitly linked to

conclusions and recommendations. Additionally, while the system is well documented and structured, further efforts could be made to systematically demonstrate how EQA reports contribute to long-term improvements in institutional quality culture.

Conclusion

Compliant

Suggestion for Improvement

The panel suggests that the agency should enhance the depth and analytical quality of its audit reports to provide evidence-based findings that support higher education institutions in improving their internal quality assurance systems.

STANDARD 6. PERIODIC REVIEW OF INSTITUTIONS AND PROGRAMMES

STANDARD: *External quality assurance of institutions and programmes shall be undertaken on a cyclic basis.*

Findings

The agency provided a set of documents as evidence that it undertakes EQA evaluations on a cyclic basis. These include the Accreditation Manual (n.d; Pg.3-20), the Institutional Audit Manual (n.d; Pg. 1- 26; Pg.42, NCHE, 2026) and the Quality Assurance System for Higher Education in Namibia (2009). In addition, during the site evaluation, the agency provided samples of institutional audit and re-accreditation reports. Some of the review reports are also publicly accessible through the agency's website.

The accreditation manual specifies the duration, scope, procedures, and expected outputs of the review processes. According to the documentation provided, new academic programmes are accredited for a six-year cycle after which they are reviewed for re-accreditation. There are, however, circumstances in which programmes accredited conditionally or subject to major changes are subjected to earlier reviews, usually within two years (Interviews with QA unit; NCHE QA System for Higher Education Pg.6; 24). While the accreditation review process is generally well understood by stakeholders, some representatives of HEIs indicated that there are occasional delays in receiving feedback on the accreditation process. According to NCHE management, such delays are largely attributable to operational challenges, including the coordination of multiple concurrent reviews across the sector and the heavy workload associated with managing a high volume of reviews against a lean institutional structure (Interviews with QA Department).

It is important to note, however, that there were discrepancies in accreditation cycles between NCHE and NQA. Whereas NCHE applies a six-year accreditation cycle, the NQA operates on a three-year cycle (NCHE–NQA Integrated Accreditation Manual, 2025, Pg. 10). This concern was also raised during interviews with representatives of

HEIs, some of whom indicated that the differing cycles are confusing and create challenges in aligning institutional quality assurance processes.

For institutional audits, the agency applies a five year review cycle intended to ensure regular external scrutiny of an HEI's governance, strategic direction and internal quality assurance mechanisms. The institutional audit commences with a formal notification (e.g letter of intent dated 23rd October 2019) and concludes with the issuance of an institutional audit report.

While the review cycle is clearly outlined in the audit manual, interviews with representatives of HEIs revealed that the audit timelines are not strictly adhered to and some HEIs were not aware of when they were to be audited. Documentation reviewed by the panel indicated that eleven HEIs have undergone institutional audits since the commencement of this process. The panel also noted that institutional audits were previously limited to private HEIs, until 2025 when the agency started auditing public HEIs.

Analysis

The panel established that the agency has policies and systems intended to support periodic review of institutions and academic programmes. These processes are clearly articulated in the relevant manuals and publicly accessible on the agency's website. Further, the HEIs are notified well in advance of scheduled reviews.

For academic programmes, the review cycle reflects the validity of the accreditation period, which is a standard six years period. Upon completion of this cycle, a re-accreditation review is undertaken, and a re-accreditation report prepared to inform the Council's decision regarding an academic programme. Based on the findings of the review, the Council may decide to (a) re-accredit a programme for a further full cycle; (b) re-accredit the programme subject to specified conditions and improvements and (c) phase out the academic programme. Information on the academic programme review cycle and process is readily available and stakeholders are aware of the process.

The agency uses institutional audits as a tool for assessing HEI's governance effectiveness, institutional capacity, and effectiveness of its IQA mechanisms. The outcome of an institutional audit is an audit report, detailing the audit findings, gaps, commendations, and recommendations for improvement. In addition, HEIs are required to develop improvement plans that serve as a basis for monitoring institutional responsiveness and implementation of recommendations.

However, the panel observed that institutional audits are not always conducted within the scheduled timelines. The panel learned that timelines are often affected by the institution's readiness (e.g where HEIs request for postponements) and operational challenges associated with arranging review panels, especially that the process also

involved auditors recruited from outside the country. The panel also noted concerns regarding the quality of some institutional audit reports. Although the agency has developed a guide on the audit report exists, one of the sample reports reviewed by the audit panel during the site visit lacked detailed information and analysis on the issues that were being assessed. limiting its effectiveness as a tool for evidence-based quality enhancement.

Conclusion:

Compliant

Commendation

The panel commends the agency for early reviews for programmes undergoing significant changes or accredited on condition. This reflects a proactive, risk sensitive quality assurance approach rather than a rigid compliance model.

Recommendation

The panel recommends that the agency should establish mechanisms of ensuring that EQA evaluations are undertaken within the published timelines.

Suggestions for Improvement:

To improve the review process, the panel suggests that:

1. The agency should harmonise its programme review cycle with that of the Namibia Qualifications Authority. Aligning these cycles will promote coherence in quality assurance processes, minimise institutional burden, and ensure more consistent monitoring and evaluation of academic programmes.
2. Apart from letters of notifications, the agency should draw a schedule of institutional audits on a periodic basis and be made publicly available on its website to allow HEIs prepare well in advance.
3. The agency should develop and implement a monitoring and tracking system that follows the progress of evaluations against established timelines and flags potential delays.

STANDARD 7. COMPLAINTS AND APPEALS

STANDARD: *The Procedure for Lodging Complaints and Appeals Shall be Clearly Defined and Communicated to the Institution Concerned*

Findings

The panel observed that the Higher Education Act, 2003（No. 26 of 2003) provides a legal basis for appealing against a decision of the agency in matters related to registration of private HEIs. In particular, Section 30 of the Act allows higher education institutions to appeal to the Minister if they are dissatisfied with decisions concerning institutional registration. This statutory provision ensures that institutions have access to an independent authority to review such registration related decisions, thereby safeguarding due process and strengthening confidence in the regulatory framework.

Further, the panel observed that although the Higher Education Act provides a legal basis for appeals on registration related matters, it does not lay out the procedure for lodging complaints or appeals. Instead, the process is partially laid out in the Customer Service Charter. According to the Charter, individuals or institutions not satisfied with the decision (s) of the agency can lodge their complaint in writing with the office of the Executive Director in the Ministry of Education, Innovation, Youth, Sport, Arts and Culture. If still unsatisfied, the matter can be escalated to external oversight bodies such as the Office of the Prime Minister or the Office of the Ombudsman. The Charter is publicly available on NCHE website.

Although these mechanisms ensure that stakeholders have access to impartial authorities for further review, the panel noted that appeals were limited to institutional registration.The regulatory framework does not currently provide a formal appeal pathway for programme accreditation and institutional audit outcomes. Further, it was observed that although the Customer Service Charter addresses the question of which offices to appeal to or to escalate a matter to, it is not comprehensive enough and does not cover matters of when and how to appeal or lodge a complaint. In addition, it does not provide guidance on hearing and decision-making processes concerning an appeal.

Analysis

The statutory appeal provision under the Higher Education Act (2003) provides a clear legal avenue for institutions to challenge registration decisions. This strengthens institutional confidence in regulatory decisions by ensuring that appeals can be reviewed by an independent authority. Furthermore, the Customer Service Charter serves as an operational framework that allows stakeholders to raise concerns regarding NCHE services, procedures, or conduct. The existence of escalation channels to the Ministry and independent oversight bodies further enhances accountability. These mechanisms provide additional layers of review where complaints cannot be resolved internally.

It is important to note, however, that the evidence on the ground also reveals a legislative limitation or gap, as the current law does not explicitly provide a formal appeals mechanism for programme accreditation and institutional audits. While NCHE argues that it mitigates this limitation through procedural safeguards and transparency, the absence of a formal complaints and appeals system in these two critical areas of EQA represents a major gap in the regulatory framework. Further, although the Customer Service Charter provides information on where complaints can be lodged, it does not provide guidance on the manner of lodging complaints or appeals, the decision-making process and feedback mechanisms.

Conclusion

Partially Compliant

Recommendations

The panel recommends that NCHE undertake the following:

1. Develop a formal comprehensive appeals system to include appeals against programme accreditation and institutional audit outcomes.
2. Develop a complaints and appeals procedure document that outlines the manner of lodging complaints, hearing, decision making and feedback mechanisms.

PART C: INTERNAL QUALITY ASSURANCE FOR QUALITY ASSURANCE AGENCIES

STANDARD 1. LEGAL STATUS

STANDARD: *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.*

Findings

The panel observed that the legal status of the National Council for Higher Education, Namibia is anchored in the provisions of the Higher Education Act, 2003 (No. 26 of 2003), specifically Part III, Section 4, which provides for the establishment of the National Council for Higher Education. The Act legally constitutes the Council as the statutory body responsible for the regulation, oversight, and quality assurance of higher education within the jurisdiction. This legislative framework clearly defines the mandate, authority, and governance structure of the Council, thereby affirming its legal recognition as the national body charged with safeguarding standards in higher education.

In addition to the statutory provisions establishing the Council, documentary evidence demonstrates the operationalization of this mandate through formal governance, management and departmental structures that drive the development and implementation of EQA policies and activities such as accreditation and quality audits.

Evidence further indicated that the outcomes of these quality assurance activities were formally submitted to the Council and approved through established governance procedures. The approvals were duly recorded in the Council minutes (e.g. Reference No. 9/1/3 dated 24th July 2025). The Council minutes provide verifiable evidence that the Council exercises oversight over quality assurance processes and validates the agency's regulatory decisions in accordance with its legal mandate. However, the panel observed that minutes presented were not signed.

The panel also noted that NCHE is well recognised nationally and regionally as a quality assurance agency. Interviews with various stakeholders, including HEIs, student representatives, and professional bodies showed high levels of acceptability and recognition of NCHE as the primary regulatory and quality assurance agency for the higher education sector. Further, the agency's membership to regional quality assurance networks such as Southern African Quality Assurance Network (SAQAN) demonstrates recognition of the agency at international level.

While the agency's legal standing is without question, the panel also noted that some of the functions of NCHE overlapped with the NQA. In fact, the HE Act requires that the agency accredits academic programmes concurrently with the NQA.

Analysis

The panel noted that the agency derives its legal status from the Higher Education Act which formally constitutes the Council as the statutory body mandated to regulate, oversee, and assure the quality of higher education within the jurisdiction. This legislative provision provides a clear legal basis for the agency's existence and functions, outlining its authority and responsibilities within the national higher education regulatory framework. In addition to the statutory provisions, the panel examined documentary evidence demonstrating the operational implementation of this legal mandate. This was evidenced through samples of reports of quality assurance activities undertaken by the agency, reflecting NCHE's adherence to established governance and accountability structures. The documentation further confirmed that the outcomes of these quality assurance activities were formally submitted to the Board for approval in accordance with the agency's governance procedures. This demonstrates that the agency's decisions and activities are subject to formal institutional governance and accountability mechanisms as stipulated in the enabling legislation.

Conclusion

Compliant

Suggestion for Improvement

The panel suggests that that the agency considers engaging the Ministry of Education, Innovation, Youth, Sports, Arts and Culture to clarify and formalise operational boundaries with the Namibia Qualifications Authority to enhance transparency and reduce duplication of functions.

STANDARD 2. VISION AND MISSION STATEMENT

STANDARD: *The QAA shall have written and published vision and mission statements or objectives taking the higher education context into account.*

Findings

Documentation reviewed during the external evaluation indicates that the agency has clearly articulated vision and mission statements, which guide its strategic direction and operational activities. The vision and mission are explicitly stated in key institutional documents, including the Integrated Strategic Business Plan (2022/2023–2026/2027, the Annual Plan for 2025/2026, and the National Graduate Survey Report, 2021.These documents demonstrate that the agency has defined its long-term aspirations and core purpose, which are aligned with its mandate of promoting quality assurance and strengthening higher education systems.

The Integrated Strategic Business Plan (2022/2023–2026/2027) provides the overarching framework within which the agency's vision and mission are operationalized. It outlines the strategic priorities, objectives, and key performance indicators that guide the agency's activities over the planning period. Similarly, the Annual Plan for 2025/2026 translates the strategic objectives into actionable programmes and activities, ensuring that the

agency's operational work is aligned with its stated mission and long-term vision. The National Graduate Survey Report also reflects the agency's commitment to and quality enhancement, which is consistent with the mission of strengthening quality and accountability within the higher education sector.

In addition to being embedded in official documentation, the agency's vision and mission statements are visibly displayed within the agency's premises. This practice contributes to institutional awareness and reinforces the agency's core values and strategic direction among staff and stakeholders. The visibility of these statements demonstrates the agency's commitment to communicating its purpose and guiding principles to both internal and external stakeholders.

Analysis

The Panel observed that the agency has clearly articulated its vision and mission, which provide direction for its institutional mandate and activities. These statements define the agency's long-term aspirations and core purpose in promoting quality assurance and strengthening the higher education system. The articulation of the vision and mission reflects a clear institutional commitment to guiding the agency's strategic orientation and operational focus.

The Panel further noted that the agency's vision and mission are integrated into its strategic planning processes. The strategic framework of the agency outlines priorities, objectives, and performance indicators that translate the institutional vision and mission into concrete strategic goals. This approach demonstrates that the agency's long-term aspirations are systematically operationalized through structured planning and measurable targets.

In addition, the Panel observed that the agency's strategic direction is aligned with its operational planning processes. Institutional activities and programmes are organized in a manner that supports the achievement of strategic objectives derived from the agency's mission and vision. This alignment ensures that the agency's day-to-day operations contribute to the realization of its broader institutional goals.

The Panel also noted that the agency promotes awareness of its vision and mission among staff and stakeholders by ensuring their visibility within the institutional environment. The communication of these guiding statements contributes to a shared understanding of the agency's purpose and reinforces the institutional values that underpin its work.

The Panel considered that the agency has established a clear institutional vision and mission that guides its strategic and operational activities.

Conclusion

Compliant

Suggestion for Improvement

The panel suggests that the agency consider establishing and institutionalising a formal mechanism for the systematic collection, analysis, and utilization of stakeholder feedback to inform the periodic review of its vision, mission, and strategic priorities.

STANDARD 3. GOVERNANCE AND MANAGEMENT

STANDARD: *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.*

Findings

The review of documentation and supporting evidence indicates that the agency has established governance and management structures to support the effective implementation of its mandate.

The Panel noted that the agency's governance framework is anchored in the Higher Education Act, 2003 (No. 26 of 2003), which provides the legal basis for the establishment and functioning of the National Council for Higher Education. The Act establishes the Council as the governing body responsible for providing strategic oversight and policy direction for the agency. During the site visit, the panel confirmed that the agency is indeed governed by an appointed Council comprising seven members, who provide strategic leadership and oversight of the agency's activities as documented in the Integrated Strategic Business plan, November 2022. However, during engagement with the Council Management, it was clarified that the Council is currently composed of six members, after one member joined Parliament. The Council is responsible for guiding policy direction, approving key institutional decisions, and ensuring accountability in the execution of the agency's mandate.

Further, in accordance with these legislative frameworks, the governance structure comprises the Council and two standing committees: the Quality Assurance and Higher Education Management Information System Committee**,** and the Funding Framework, Finance and Audit Committee**.** These committees support the council in the discharge of its responsibilities by facilitating detailed review and deliberation on specialized areas, including quality assurance, financial management, and institutional governance, before recommendations are submitted to the council for consideration and decision-making. This governance arrangement contributes to structured oversight, accountability, and informed decision-making in the implementation of the agency's mandate.

The Panel further observed that the agency has a Secretariat which acts as the administrative and technical arm of the agency. The agency's organisational structure is clearly documented in the Integrated Strategic Business Plan. The structure outlines the functional units, roles, and reporting lines within the agency and provides a framework for the coordination and implementation of its activities. The documented structure clarifies institutional responsibilities and supports the effective management of operations related to quality assurance and regulatory functions.

The agency's Secretariat is organised into three units responsible for quality assurance, policy, planning and research and finance and administration. Staff in these units are appointed under the Public Service Act, No. 13, 1995. In addition, the governance, management and operational arrangements of the agency are aligned with the provisions of the Public Enterprise Governance Act No. 1 of 2019 (which provides the manner of appointment of the Council) and the State Finance Act, 1991 (which governs the agency's financial management system) and the Public Procurement Act, 2015 (which guides the agency's procurement operations).

Apart from having governance and management structures, the panel also observed that the operations of the agency are governed by several policy frameworks that ensure ethical governance and support the achievement of the agency's mandate. These include strategic plans (e.g. Integrated Strategic Business Plan -2022 -2027), NCHE Code of Ethics, Public Service Code of Conduct, Integrity and Ethics Frameworks, and Affirmative Action Policy. However, the panel observed that the agency does not have a documented communication strategy.

Analysis

The panel established that the agency operates within a governance framework embedded in national legislation and supported by defined institutional structures. The agency is overseen by a governing Council responsible for providing strategic direction, policy guidance, and oversight of institutional activities. In support of the Board's work, a committee structure has been established to facilitate detailed deliberation on key operational and strategic areas. These committees contribute to the effectiveness of the governance framework by enabling focused review and analysis of specialized matters before decisions are considered at the Council level. Such arrangements support structured oversight and informed decision-making in the execution of the agency's mandate.

The Panel also noted that the agency has a defined organizational structure that outlines internal reporting lines and functional responsibilities. This structure provides a framework for the coordination of institutional activities and contributes to clarity in roles and responsibilities across the organization. The existence of a structured management framework supports the effective implementation of quality assurance and regulatory functions.

The Panel also established that the agency operates under well-defined national and internal policy frameworks that guide its operations and ensure transparency, accountability and ethical conduct in its execution of EQA. This contributes to the integrity of the agency's quality assurance processes. However, the Panel noted the absence of a documented communication strategy and a function within the agency to guide the agency's engagement with stakeholders and the public.

Conclusion

Compliant

Recommendation

The panel recommends that the agency develop and operationalizes an institutional communication strategy to enhance public visibility and accountability.

STANDARD 4. INDEPENDENCE OF QUALITY ASSURANCE AGENCY

STANDARD: *The QAA shall be independent in its operations, outcomes, judgements and decisions.*

Findings

The review of documentation and supporting information indicates that the agency operates within the broader administrative structure of the Ministry of Education, Innovation, Youth, Sports, Arts and Culture, where it functions as a Directorate. This arrangement places the agency within the framework of government administration, and its operations are therefore linked to the institutional and administrative structures of the Ministry. For this reason, it was observed that the agency does not maintain independent policies in a number of matters such as recruitment, procurement and finance. For example, recruitment process is governed by the Recruitment Policy Framework of the Public Service of Namibia, and staffing appointments are conducted through the national public service recruitment system. As a result, the agency relies on the broader government framework for staffing decisions rather than exercising full institutional autonomy in this area.

From an operational perspective, the Panel observed that the agency has limited internal institutional capacity to independently manage several core support functions. There was no evidence of dedicated in-house capacity for legal services, human resource management, and communications functions, which are important for supporting the effective and autonomous operation of a quality assurance agency.

With regard to organizational independence, the Panel noted that while the agency is formally established under the provisions of the Higher Education Act, 2003 (No. 26 of 2003), its designation as a government department limits this independence. Moreover, the panel found that for some of its functions, the agency operates under delegated powers. For example, although the agency is responsible for registration of private higher education institutions, the legislation framework assigns this role to the Registrar of Private Higher Education Institutions in the Ministry of Education. In turn, the Ministry has delegated this function to the agency.

In terms of the agency's autonomy in its judgement, outcomes, and decisions, the evidence evaluated shows two scenarios. In the first scenario, the agency has complete independence in its judgments and decisions concerning programme accreditation and institutional audits. This independence is protected by the Higher Education Act (2003) and reinforced by the Public Enterprise Governance Act No. 1 of 2019. The agency's

autonomy in these matters is so well-protected that decisions of the agency cannot be appealed against, over-turned or indeed changed by any other actor (interviews with NCHE Management and Representatives of HEIs). In the second scenario, the panel observed that the agency does not have complete autonomy in matters concerning institutional registration functions. Although the agency administers this process, it is a delegated function that can be taken away any time the Ministry deems it expedient. Thus, during interviews with various stakeholders, some representatives of private HEIs expressed concern about the extent to which the agency can exert complete independence in judgement and decisions concerning registration when the legal mandate for this process is vested elsewhere.

Analysis

The Panel established that although the agency is established by an Act of Parliament, with its own Council, it operates within a government administrative structure, which situates it within the broader framework of the Ministry responsible for education. While such arrangements are common within public sector institutions, they may present limitations with regard to the agency's ability to exercise full operational and administrative autonomy. The Panel noted that the Agency's position within a ministerial structure may influence the degree of independence with which it carries out its functions.

In relation to administrative and operational autonomy, the Panel noted that certain key management functions are governed through broader public sector systems rather than being fully internalized within the agency. In particular, staffing, and recruitment, processes are managed through national public service structures. While this arrangement ensures compliance with national public sector regulations, it may limit the agency's flexibility in managing its human resources in a manner tailored to its specialized quality assurance mandate.

The Panel also observed that the agency has limited internal capacity in several core support functions that are essential for strengthening operational independence. The absence of fully established internal structures for functions such as legal services, human resource management, and communications may affect the agency's ability to independently manage its institutional processes and external engagement.

In terms of its autonomy in decision making, the panel noted that the agency has complete autonomy in matters concerning programme accreditation and institutional audits. Despite the fact that the agency is administratively considered a Directorate of the Ministry, the panel found no evidence of the Ministry or any other actor outside the agency influencing the outcomes, judgements or decisions of the agency in these two EQA processes. The panel, however, is doubtful about the extent to which the agency is completely independent in matters related to registration of HEIs, as the legal framework does not put them in a particularly strong position to exercise autonomy in this matter.

Conclusion

Partially Compliant

Recommendation

The panel recommends that the agency engages the Ministry of Education, Innovation, Youth, Sports, Arts and Culture to review regulations concerning the registration of private higher education institutions to enhance independence of the agency in matters related to institutional registrations.

Suggestion for Improvement

The panel suggests that NCHE considers proposing amendments to the Higher Education Act in order to strengthen institutional autonomy particularly, in matters concerning human resources recruitment and development.

STANDARD 5. POLICIES, PROCESSES AND ACTIVITIES

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

Findings

The review of documentation and supporting information indicates that the agency has established a range of policies, processes, and activities to guide its regulatory and quality assurance functions within the higher education sector. The agency's annual plan 2025/26 outlines strategic objectives, projects, outputs, key performance indicators, and achievements, providing a clear operational roadmap for implementing these functions.

The agency has developed and formally established minimum standards for higher education institutions that were approved through a cabinet decision number 26th/21.10.25/006. These standards form a critical reference point for regulating and monitoring institutional quality and compliance across the higher education sector. Complementing these standards are the regulations for registration of private higher education institutions and associated documentation requirements, which provide a structured framework for institutional registration and operational oversight.

The agency's Quality Assurance System for Higher Education in Namibia, 2009 establishes the procedures and mechanisms for monitoring institutional and programme quality. Supporting this system is the integrated accreditation manual dated June 2025 for institutional and programme accreditation, which provide detailed guidance for conducting reviews, evaluations, and compliance checks. Evidence further indicates that the agency conducts institutional audits and monitors improvement measures, illustrating an ongoing commitment to evaluating institutional performance and supporting the enhancement of quality standards.

The agency also developed the HEMIS in 2013 (updated in March 2023), which serves as a centralized platform for collecting, storing, analyzing, and disseminating higher education data. This system enables the Agency to coordinate effectively with higher

education institutions nationwide and ensures that decision-making is informed by accurate and comprehensive data.

In addition to these operational and procedural frameworks, the agency has published a Charter that articulates its mandate, objectives, and governance principles. The Charter is publicly accessible and displayed at the agency's premises, reinforcing transparency and institutional identity. Furthermore, the agency actively engages stakeholders in the formulation of key policies, including the development of minimum standards for higher education, ensuring that regulatory processes incorporate sector input and promote consensus-based approaches.

Analysis

The Panel observed that the agency has developed a comprehensive framework of policies and operational procedures that guide its work in regulating and assuring quality across higher education institutions. The policies and procedures are well aligned with Part B of the ASG-QA. In addition, strategic planning is integrated into the agency's operations, with clearly defined objectives, programmes, outputs, and performance indicators. This structured approach enables the agency to operationalize its mandate effectively while also identifying and addressing challenges, demonstrating a commitment to continuous improvement.

The agency has established formal standards for higher education institutions, complemented by regulations and operational frameworks that govern institutional registration and compliance. These instruments provide a systematic basis for assessing institutional quality, promoting consistency in regulatory oversight, and supporting the accountability of higher education institutions.

In addition, the agency operates a structured quality assurance system, which encompasses procedures for institutional and programme reviews, accreditation, and audits. These mechanisms ensure that institutional and programme performance is evaluated systematically, and that recommendations for improvement are monitored and implemented. This demonstrates the agency's proactive approach to enhancing quality standards, maintaining sector-wide accountability and ensuring that its EQA mechanisms are aligned to Part B of the ASG-QA.

The Panel also noted that the agency employs centralized data management systems to coordinate with institutions, collect and analyze higher education data, and inform decision-making. Such systems strengthen evidence-based regulation and contribute to effective monitoring of the sector.

Furthermore, the agency has formalized its mandate, objectives, and governance principles in a publicly accessible Charter, reinforcing transparency and institutional identity. Stakeholder engagement is embedded in policy formulation processes, allowing for inclusive consultation and consensus-building in the development of standards and regulatory frameworks.

Conclusion

Compliant

Commendations

The panel commends the agency for:

1. Use of centralized data management systems and thereby strengthening evidence-based decision-making, sector monitoring, and coordination with higher education institutions.
2. The existence of an accessible Service Charter which reinforces institutional clarity, accountability, and alignment with its mandate.

Suggestions for Improvement

The panel suggests that the agency consider the following:

1. Promoting continuous innovation in quality assurance methodologies, including the use of emerging digital tools and adaptive review approaches.
2. Enhancing feedback loops with stakeholders, ensuring that outcomes of quality assurance processes are communicated and utilized for sector-wide improvement.

STANDARD 6. INTERNAL QUALITY ASSURANCE POLICIES, CRITERIA AND PROCESSES

STANDARD: *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.*

Findings

To demonstrate compliance with this requirement, the agency provided a number of documents as evidence of the existence of internal quality assurance policies, criteria and processes. These include the Quality Assurance System for Higher Education in Namibia (2009) which outlines procedures for external quality assurance mechanisms such as accreditation and audits. It also outlines standards and guidelines for the higher education institutions in Namibia. The standards and guidelines provide a means for the agency's objectivity and fairness in its decisions.

Further, the panel observed that NCHE is considered a public enterprise under the Public Enterprise Governance Act of Namibia. Under this Act, NCHE is required to develop annual business plans which are subject to monitoring and evaluation of NCHE's performance. In this regard, the NCHE's integrated business plan (2022) provides an important basis for internal evaluation of its operations and can be viewed as an important basis of the agency's internal quality management mechanisms. Other complementary instruments utilized as internal controls by the agency include reports of annual business financial plans, quarterly performance reviews and stakeholder consultation and satisfaction surveys.

The documents were verified during site visits and provide the only means for IQA for the agency's activities. In addition, it was established during the interviews that NCHE as a public agency is also required to adhere to the Public Service Code of Conduct and Ethics and Affirmative Action Policy frameworks which are aimed at promoting impartiality, professionalism, non-discrimination, transparency and accountability in public service operations. Consequently, NCHE has established its own code of ethics aligned with these frameworks.

Analysis

To maintain trust within the higher education sector, it is important for an external quality assurance agency to have its own IQA system. An IQA system allows the agency to foster accountability and provide a basis for continuous improvement of its operations. In the case of NCHE, the panel findings show that the agency has a number of practices that are intended to enhance the quality and integrity of its activities. These include monitoring and review of its activities and establishment of NCHE code of ethics to foster professionalism and ethical conduct of its staff. Besides this, the agency employs a number of feedback mechanisms to evaluate the effectiveness of its operations. Perhaps the strongest of these is the Stakeholder Satisfaction Survey, which provides critical feedback on the agency's EQA processes and internal systems.

While it was evident that a number of practices carried out by the agency are intended to enhance the quality and integrity of the agency's, it was also established by the panel that the IQA mechanisms put in place by the agency are fragmented and not codified into a coherent policy document that sets out the objectives and procedures for IQA. Further, a review of the agency's organisational structure and establishment shows that the agency has no unit or officer responsible for coordinating or overseeing the agency's internal quality assurance activities. In this regard, IQA related activities are conducted on an ad hoc basis with no defined cycle or guiding policy framework.

Conclusion

Partially Compliant

Recommendation

The panel recommends that the agency develop a comprehensive all-encompassing IQA policy and provide clear criteria and processes for IQA. The stakeholder consultation and satisfaction survey, which remains the strongest tool for IQA should also be anchored on this policy.

Suggestion for Improvement

Given that the effectiveness of internal quality assurance underpins the effectiveness of external quality assurance, the panel recommends that the agency considers establishing a dedicated IQA unit.

STANDARD 7. FINANCIAL AND HUMAN RESOURCES

STANDARD: *The QAA shall have adequate and appropriate human, financial and material resources to carry out its QA mandate effectively and efficiently.*

Findings

Based on interviews conducted with the Council and management of the agency, it was established that the agency's funding is primarily from the state through annual national budget appropriations. The funding covers the agency's project costs (such as programme accreditation, institutional audits and monitoring) and personnel costs. The management of financial resources is governed by the State Finance Act (1991) and the Public Procurement Act (2015). Other than budgetary allocations, the agency has, on a few occasions, received some complimentary funding through donor supported projects. The agency does not charge fees for its external quality assurance services other than application fees for registration of private HEIs and programme accreditation.

In terms of human resources, the agency has twenty-one (21) members of staff that manage the day to day operations of the Secretariat which is headed by a Chief Executive Officer (CEO) who is at the level of Director in the Ministry of Education, Innovation, Youth, Art and Culture. The three units, including the Quality Assurance Unit the Finance and Administration Unit and the Research, Policy and Planning Unit are all headed by a Deputy-Director. The qualifications of officers that comprise the Secretariat are tabulated below:

Table 4.1: Highest Qualifications of Staff in the Agency

S/No.	Category of Staff	No.	Below Bachelor's degree	Bachelor's degree	PostDip or Master's degree	Doctoral Degree
1.	Senior Management CEO & Deputy Director)	4		1	2	1
2.	Chief & Senior Officers	8		4	4	0
3.	Administrative Officers/ Support Staff	9	3	5	1	0
	Total	**21**	**3**	**10**	**7**	**1**

As shown in Table 4.1, eight (8) of the agency's staff have postgraduate qualifications including one member of staff with a doctoral qualification.

Further, the Panel observed that the agency does not independently conduct recruitment processes for its staff. Recruitment is undertaken by the Public Service Commission, in accordance with the Recruitment Policy Framework of the Public Service of Namibia**.** Consequently, the agency does not maintain an independent recruitment policy, as staffing processes are governed by national public service regulations.

From interviews with the agency and inspection of the Secretariat's premises, the panel established that the agency has sufficient physical resources to carry out its mandate. These include its own premises with sufficient office space, meeting rooms, furniture, and ICT facilities (computers, printers, and internet). The agency also has seven utility vehicles in good running conditions. The vehicles include 3 buses which are used by reviewers during institutional audits and programme accreditation visits.

Analysis

Although the agency seems well funded as indicated in some of its documentation, it was also clear from interviews with the agency's staff and stakeholders that the country's expanding higher education sector and other responsibilities were putting a lot of pressure on its finances. For example, during interviews with the agency's management, the panel heard that sometimes, the agency has to use its reserves in order to fund EQA activities. Moreover, the agency's activities extend to responsibilities beyond EQA to include management of the Higher Education Financing Framework. Thus, although at the moment, the budgetary allocations may seem sufficient, there are indications that the agency may need to turn to other sources of revenue such as registration and accreditation fees to sustain their EQA operations in the face of expanding higher education fees.

From the evaluation of the agency's human resources capacity, it was evident that the agency was inadequately staff to efficiently carry out its mandate. To operate effectively and efficiently, the agency's ideal establishment is 48. However currently, the agency's staffing level is less than 50% of this ideal establishment.

Besides the fact that the agency has inadequate staff, it was evident through interviews with the board and representatives of higher education institutions serviced by the agency that the agency was also experiencing difficulties in attracting well-qualified staff. Consequently, the agency has only one member of staff with a doctoral qualification who also serves as the CEO.

The agency's limitation, both in terms of adequacy and quality of its EQA staff, is rooted in the fact that the agency largely operates as a department of the Ministry of Education, rather than an autonomous stand-alone QAA. Thus, unlike other agencies in the Namibian higher education quality assurance space such as the Namibia Qualifications Authority that can make their own recruitment decisions, NCHE is constrained by public service organisational and recruitment policies and guidelines. Thus, the agency has to wait for government approvals to increase its establishment, recruit or even promote staff. The entry qualifications for staff and salary scales are also based on public service conditions rather than board determined rates. As the scales seem to be lower than those of public universities, it is difficult for the agency to attract well-qualified and experienced

academics into EQA positions in the agency. As a result, the staff of the agency are largely drawn from the general public service.

The consequence of the above situation is that the agency's organisational structure is inadequate to meet its mandate. For example, the agency does not have a human resource specialist or legal counsel in its establishment. The agency outsources human resource functions. In addition, most units such as finance, IT, and procurement units are staffed by just a single person.

For its core business, the agency only has 6 quality assurance staff who must cope with providing services to a growing number of HEIs and applications for accreditation. During interviews with the QA Department of NCHE, it was reported that in 2025 alone, the agency received over 200 applications which had to be processed by the six members of staff. This growing workload makes it impossible for QA staff to provide feedback to HEIs in a timely manner.

The agency also requires capacity in key areas such as monitoring and evaluation and coordination of internal quality assurance.

Conclusion

Partially Compliant

Commendation

The panel commends the agency for ensuring that it has its own permanent and appropriate premises and facilities. This is critical to the agency's stability and operations.

Recommendations

The panel recommends that:

1. The agency should recruit staff in critical areas such as Human Resource Management, Legal and Communication, Monitoring and Evaluation to enhance its performance.
2. The agency should develop a recruitment plan commensurate with the expanding scope of its mandate.
3. The agency should engage the government for increased funding in view of its expanding responsibilities.

Suggestions for Improvement

The panel suggests that the agency consider:

1. Putting in place continuous professional development programmes to improve performance and ensure that the staff are always up to date with latest developments in EQA.

2. Improving terms and conditions of service of staff to attract experienced and highly qualified higher education quality assurance practitioners.

STANDARD 8. BENCHMARKING, NETWORKING AND COLLABORATION

STANDARD: *The QAA shall promote and participate in international initiatives, workshops and conferences, and collaborate with relevant Professional bodies on QA to exchange and share experiences and best practices*

Findings

Based on reviewed documentation and interviews held with the agency's management and staff, the panel observed that the agency collaborates with a number of stakeholders within the higher education space in Namibia. Some of the collaborations are formalised through Memoranda of Understanding (MOUs) and contribute significantly to the development and strengthening external quality assurance systems in higher education. Among the notable players that the agency collaborates with include:

(a) Namibia Qualifications Authority
(b) Professional bodies such as the Health Professions Council of Namibia, Engineering Council of Namibia, Namibian Veterinary Council and Institute of Chartered Accountants of Namibia
(c) Namibia Statistics Agency (evidenced by the 2016 MOU signed between the two agencies).

The panel observed that these collaborative bodies play a critical role in the development of national standards for higher education and the accreditation process. The agency, in this regard, shares critical QA information with these bodies particularly on standards development and accreditation matters. The Namibia Qualifications Authority, for example, works closely with NCHE in the development of the Qualifications Framework and ensures that NCHE's accreditation standards are well aligned to the National Qualifications Framework. The agency has developed integrated accreditation manuals with the NQA (NCHE-NQA Integrated Manual, 2025) and the Institute of Chartered Accountants of Namibia (ICAN). Professional bodies are also involved in the review and approval of professional training programmes prior to final accreditation by the agency. The panel also observed that the agency has, in the past, been involved in joint accreditation activities with professional bodies

Beyond collaboration with professional bodies, the panel also noted that the agency utilises conferences and workshops as platforms for networking and engagement with various stakeholders in the higher education sector. One such conference was the National Quality Assurance in Higher Education Conference held in 2019. At the international level, evidence was provided of the agency's participation in regional and international quality assurance networking initiatives and activities. The agency is a member of the SAQAN and hosted the network's Secretariat between 2020 and 2023. The agency also currently holds the SAQAN presidency for the period 2024 -2026. Further, the agency

participates in African Quality Assurance Network (AfriQAN) and has held board membership since 2024.

Besides membership to regional bodies, the panel observed that the agency also maintains collaborative relations with other quality assurance agencies including the Lesotho Council on Higher Education (CHE)（since 2013) and the Zimbabwe Council for Higher Education (ZIMCHE) (since 2014). In addition, NCHE has been a board member of the International Network for Quality Assurance Agencies in Higher Education (INQAAHE) since 2023. These international networks and collaborative initiatives have enabled the agency to benchmark its EQA policies, standards and processes against regional and international best practices. For example, during the site visit, the agency provided a report of its benchmarking visit to the Commission for University Education, Kenya. The agency also benchmarked its processes with the ZIMCHE and has aligned its qualifications with the Southern African Development Community (SADC) qualifications framework. Other institutions and institutions with which the agency has benchmarked with include the Netherlands-Flemish Accreditation Organisation and the European Standards and Quality Assurance for Quality Assurance.

Analysis

NCHE demonstrates a strong collaboration and internationalisation agenda. This is evidenced by the agency's engagements at both national and international levels as well active participation in regional and global quality assurance initiatives. The panel further noted that the agency has played an important role in the development of regional and global quality assurance policies and frameworks as evidenced by its participation in the global policy dialogue on quality assurance and co-authoring of the African regional chapter in the INQAAHE Second Global Study Edition. Notwithstanding these achievements, the panel noted that the agency has no internationalisation policy or guidelines to guide these international engagements.

However, the panel observed that the agency does not have a formal internationalisation policy or guidelines to provide strategic direction for its international engagements and collaborations. Consequently, these engagements appear to be largely unstructured and are not guided by clearly defined objectives, priorities, or expected outcomes. The panel therefore considers it important for the agency to institutionalise and strategically coordinate its internationalisation agenda through the development of a formal policy framework that will guide, strengthen, and sustain its regional and international engagements.

Conclusion

Compliant

Commendation

Notwithstanding the lack of an internationalisation policy, the agency is commended for its activeness in collaborative initiatives, both at national and international level. At

national level, the agency is commended for signing MOUs and joint operations frameworks with both the Namibia Qualifications Authority and Professional bodies.

Suggestion for improvement

The panel recommends that in order to strengthen its internationalisation agenda, the agency should develop an internationalisation policy document or guidelines.

STANDARD 9. PERIODIC REVIEW OF QUALITY ASSURANCE AGENCY

STANDARD: *The QAA shall undergo periodic internal and external reviews for Continuous Improvement*

Findings:

The panel observed that the agency's periodic internal reviews are embedded within routine planning, monitoring and evaluation processes. These reviews include management performance reviews, unit-level retreats and reflective planning sessions to assess operational effectiveness, annual performance appraisals, terminal reviews of strategic plans and annual external audits of its accounts. The agency complements these routine processes with structured stakeholder feedback mechanisms such as stakeholder satisfaction surveys and quality assurance conferences. Documented evidence of the feedback mechanisms was provided in form of the 2023/2024 stakeholder satisfaction survey report and the 2019 National Quality Assurance in Higher Education Conference report.

According to NCHE management, these internal review mechanisms enable the agency to identify strengths, gaps and areas requiring improvement within its IQA system and operations. During interviews, management gave examples of quality assurance tools and instruments that were either redesigned or introduced as a result of feedback from the review process. These included: (a) redesign of institutional registration application forms; (b) harmonisation of accreditation tools with selected professional bodies and (c) introduction of virtual or blended accreditation assessments. The redesigned registration tools and harmonised accreditation tools were verified during the site visit.

Regarding external reviews, the panel observed that the agency has not previously subjected itself to periodic external reviews by regional, continental or international QA bodies. This review, organised by AAU, under the HAQAA3 initiative, was the first external review undertaken by the agency. Notwithstanding this observation, the panel acknowledges the agency's commitment towards external reviews as demonstrated by its voluntary participation in the HAQAA3 review exercise.

Analysis

The evidence evaluated shows that the agency uses a variety of instruments to monitor progress in its activities and to obtain feedback on its operations and policies.The instruments support accountability, transparency and operational efficiency within the agency. While these efforts are commendable, the panel noted that most of the internal review mechanisms outlined by the agency are primarily human resource management,

performance management and strategic planning tools intended to monitor the implementation of planned activities and business plans. Except for stakeholder satisfaction surveys, these mechanisms are not specifically designed to facilitate systematic self-evaluation or reflections on the robustness, quality or effectiveness of the agency's EQA system, processes and operations. Furthermore, although the stakeholder satisfaction survey represents the agency's significant mechanism for obtaining feedback on its EQA system, the panel observed that it is not conducted on a regular basis as only one report (2023/2024) was availed for verification by the panel during the review process.

The panel further established that the agency lacks a formal policy framework or guidelines outlining the objectives, scope, review cycles or timelines and procedures and processes for both internal and external reviews. Consequently, mechanisms such as stakeholder consultation workshops and satisfaction surveys, appear to be implemented without a clearly documented framework specifying their purpose, frequency, methodology and expected outcomes.

Conclusion

Partially Compliant

Commendation

The panel commends the agency for voluntarily participating in the HAQAA agency review as an expression of its commitment towards external review for continuous quality improvement.

Recommendation

The panel recommends that the agency should develop a formal policy framework or guidelines outlining the objectives, scope, review cycles or timelines and procedures and processes for both internal and external reviews.

Suggestion for Improvement

The panel suggests that the agency consider institutionalising stakeholder surveys to ensure a structured and repeatable approach to its utilisation.

CHAPTER 5. SUMMARY OF COMMENDATIONS, RECOMMENDATIONS AND SUGGESTIONS

Summary of Commendations

Standard	NCHE Commended For:
Part B 1	Institutionalising SER-based reflective practice in the evaluation of an HEI's vision and mission statement.
Part B 2	a) Integrating HEMIS data into EQA processes to support evidence-based evaluation and development of fitness for purpose policies and standards. b) Designing a differentiated and coherent set of external quality assurance mechanisms that strengthen institutional internal quality assurance systems and support continuous quality enhancement.
Part B 3	-
Part B 4	a) Incorporating student representation in the evaluation process. b) Including international experts to mitigate shortage of national experts, enhance independence and benchmarking.
Part B 5	-
Part B 6	Early reviews for programmes undergoing significant changes or accredited on condition. This reflects a proactive, risk sensitive quality assurance approach rather than a rigid compliance model.
Part B 7	-
Part C 1	-
Part C 2	-
Part C 3	-
Part C 4	-

Standard	NCHE Commended For:
Part C 5	a) Use of centralized data management systems and thereby strengthening evidence-based decision-making, sector monitoring, and coordination with higher education institutions. b) The existence of an accessible Service Charter which reinforces institutional clarity, accountability, and alignment with its mandate.
Part C 6	-
Part C 7	Ensuring that it has its own permanent and appropriate premises and facilities. This is critical to the agency's stability and operations.
Part C 8	Activeness in collaborative initiatives, both at national and international level. At national level, the agency is commended for signing MOUs and joint operations frameworks with both the Namibia Qualifications Authority and Professional bodies.
Part C 9	Voluntarily participating in the HAQAA3 agency review as an expression of its commitment towards external review for continuous quality improvement.

Summary of Recommendations

Standard	The Panel Recommends that NCHE:
Part B 1	-
Part B 2	-
Part B 3	-
Part B 4	-
Part B 5	-
Part B 6	Establishes mechanisms of ensuring that EQA evaluations are undertaken within the published timelines.
Part B 7	a) Develop a formal comprehensive appeals system to include appeals against programme accreditation and institutional audit outcomes. b) Develop a complaints and appeals procedure document that outlines the manner of lodging complaints, hearing, decision making and feedback mechanisms.

Standard	The Panel Recommends that NCHE:
Part C 1	-
Part C 2	-
Part C 3	Develops and operationalizes an institutional communication strategy to enhance public visibility and accountability.
Part C 4	The panel recommends that the agency engages the Ministry of Education, Innovation, Youth, Sports, Arts and Culture to review regulations concerning the registration of private higher education institutions to enhance independence of the agency in matters related to institutional registrations.
Part C 5	-
Part C 6	Develops a comprehensive all-encompassing IQA policy and provide clear criteria and processes for IQA. The stakeholder consultation and satisfaction survey, which remains the strongest tool for IQA should also be anchored on this policy.
Part C 7	a) Recruits staff in critical areas such as Human Resource Management, Legal and Communication, Monitoring and Evaluation to enhance its performance. b) Develops a recruitment plan commensurate with the expanding scope of its mandate. c) Engages the government for increased funding in view of its expanding responsibilities.
Part C 8	Develop an internationalisation policy document or guidelines.
Part C 9	Develop a formal policy framework or guidelines outlining the objectives, scope, review cycles or timelines and procedures and processes for both internal and external reviews.

Summary of Suggestions

Standard	The panel suggest that the agency should consider:
Part B 1	-
Part B 2	Enhancing fitness for purpose EQA, the agency should also consider developing standards and guidelines that adequately address the unique characteristics and requirements of ODeL mode of delivery of programmes. The agency should also consider the integration of data analytics for predictive and comparative quality assurance insights.
Part B 3	a) Developing a centralized digital QA management system to track evaluation processes, reports, and follow-up actions. b) Conducting periodic meta-evaluations of EQA processes to assess

Standard	The panel suggest that the agency should consider:
	reliability, validity, and stakeholder satisfaction.
Part B 4	a) Strengthening capacity-building initiatives for emerging local experts in specialized disciplines. b) Implementing a digital expert management system to track availability, expertise, and performance of panel members
Part B 5	Enhancing the depth and analytical quality of its audit reports to provide evidence-based findings that support higher education institutions in improving their internal quality assurance systems.
Part B 6	a) Harmonising its programme review cycle with that of the Namibia Qualifications Authority. Aligning these cycles will promote coherence in quality assurance processes, minimise institutional burden, and ensure more consistent monitoring and evaluation of academic programmes. b) Drawing a schedule of institutional audits and be made publicly available on its website on periodic basis to allow HEIs prepare well in advance. c) Developing and implementing a monitoring and tracking system that follows the progress of evaluations against established timelines and flags potential delays.
Part B 7	-
Part C 1	The panel suggests that that the agency considers engaging the Ministry of Education, Innovation, Youth, Sports, Arts and Culture to clarify and formalise operational boundaries with the Namibia Qualifications Authority to enhance transparency and reduce duplicity of functions.
Part C 2	Establishing and institutionalising a formal mechanism for the systematic collection, analysis, and utilization of stakeholder feedback to inform the periodic review of its vision, mission, and strategic priorities
Part C 3	-
Part C 4	Proposing amendments to the Higher Education Act in order to strengthen institutional autonomy, particularly in matters concerning human resources recruitment and development.
Part C 5	a) Promoting continuous innovation in quality assurance methodologies, including the use of emerging digital tools and adaptive review approaches.

Standard	The panel suggest that the agency should consider:
	b) Enhancing feedback loops with stakeholders, ensuring that outcomes of quality assurance processes are communicated and utilized for sector-wide improvement
Part C 6	Establishing a dedicated IQA unit
Part C 7	a) Putting in place continuous professional development programmes to improve performance and ensure that the staff are always up to date with latest developments in EQA. b) Improving terms and conditions of service in order to attract experienced and highly qualified higher education quality assurance practitioners.
Part C 8	-
Part C 9	Institutionalising stakeholder surveys to ensure a structured and repeatable approach to its utilisation.

CHAPTER 6: CONCLUSIONS

Based on reviewed documentary evidence, interviews with stakeholders and physical inspection of the agency's premises, the panel established that NCHE, Namibia was substantially compliant with the ASG-QA in the performance of its functions. The panel found that the agency was compliant with 11 of the standards (B1, B2, B3, B4, B5, B6, C1, C2, C3, C5, C8) and partially compliant with 5 standards (B7, C4, C6, C7, C9). The results are are summarized in Table 6.1 (shaded).

Table 6. 1: Summary of Results

Standard	Description	Compliant	Partially Compliant	Not Compliant
Part B 1	Objectives of EQA and consideration for IQA Compliant			
Part B 2	Designing EQA mechanisms fit-for-purpose Compliant			
Part B 3	Implementation processes of EQA			
Part B 4	Independence of evaluation			
Part B 5	Decision and reporting of EQA Outcomes			
Part B 6	Periodic review of institutions and programmes			
Part B 7	Complaints and appeals			
Part C 1	Legal status			
Part C 2	Vision and mission statement			
Part C 3	Governance and management			

Standard	Description	Compliant	Partially Compliant	Not Compliant
Part C 4	Independence of QAA			
Part C 5	Policies, processes and activities			
Part C 6	Internal Quality Assurance			
Part C 7	Financial and human resources			
Part C 8	Benchmarking, networking and collaboration			
Part C 9	Periodic review of QAAs			

ANNEXES

Annex 1: Mapping grid for panel members

ASG-QA[1]	STANDARD	ISSUES FOR DISCUSSION	SESSION Nr
PART B: EXTERNAL QUALITY ASSURANCE			
1	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.	-How does NCHE move beyond "fitness-for-purpose" assessment to systematically measure the actual performance and outcomes of IQA systems? -What is the evidence that external review recommendations lead to measurable enhancements in teaching, learning, and institutional quality?	Session 8, 9,10

[1] Available here: https://haqaa2.obsglob.org/wp-content/uploads/2020/06/ASG-QA_Manual_en_areevidenceis09.FINALE-with-License-1.pdf

ASG-QA[1]	STANDARD	ISSUES FOR DISCUSSION	SESSION Nr
2	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.	-What is the evidence that programme accreditation and institutional audit complement each other? -What are the respective focus areas of accreditation, audit, and monitoring?	8, 13,14, 16,17
3	The standards, processes, and procedures for EQA shall be pre-defined, reliable, published, and consistently implemented for purposes of accountability.	What measures are taken when institutions do not address recommendations from external quality assurance reviews? Frequency and process of SAR	8, 13,15, 16,17
4	EQA shall be carried out by panels of external experts drawn from a wide range of expertise and experience.	-Does the “no-objection” mechanism and induction process effectively safeguard impartial judgement?	8, 9,13

ASG-QA[1]	STANDARD	ISSUES FOR DISCUSSION	SESSION Nr
5	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.	-How do recommendations and conditions support measurable improvement and strengthening of institutional quality culture?	6, 8,9,10, 15
6	External quality assurance of institutions and programmes shall be undertaken on a cyclical basis.	Where is the audit cycle published (website?) Are there sample re-accreditation reports and follow-up reports on agency's recommendations	8,13
7	The procedure for lodging complaints and appeals shall be clearly defined and communicated to the institution concerned.	The agency has provided samples of appeal and response letters, but are there samples of minutes/reports on how the appeal was handled?	6, 8, 13,16,17
PART C: INTERNAL QUALITY ASSURANCE FOR QA AGENCIES			

ASG-QA[1]	STANDARD	ISSUES FOR DISCUSSION	SESSION Nr
1	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.	What mechanisms are in place to prevent/address regulatory gaps or inconsistencies? How are joint activities with professional bodies operationally managed?	6,8,12
2	The QAA shall have written and published vision and mission statements or objectives taking the higher education context into account.	Is there documented evidence showing how stakeholder input has influenced revisions of the agency's strategic priorities? How frequently are the vision and mission reviewed?	8, 13,16,17

ASG-QA[1]	STANDARD	ISSUES FOR DISCUSSION	SESSION Nr
3	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.	Does the current organisational structure adequately support the agency's mandate under the Quality Assurance System for Higher Education? Are there succession planning and staff development mechanisms in place?	6,8,12
4	The QAA shall be independent in its operations, outcomes, judgements and decisions.	How are appeals and disputes managed? Are there delays in enforcement due to capacity constraints?	6, 8,12, 13,16,17

ASG-QA[1]	STANDARD	ISSUES FOR DISCUSSION	SESSION Nr
5	The QAA shall undertake its quality assurance activities in accordance with the standards and guidelines articulated in Part B of the ASG-QA.	How prepared is the QA system to respond to emerging issues in the education system.	7,9,13
6	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.	Is the stakeholder satisfaction survey utilised by the agency guided by an existing policy or framework for internal quality assurance or is it done on adhoc basis (i.e this is not clear in the QA framework document provided as evidence). Other than the stakeholder satisfaction survey, what internal feedback mechanism exist (i.e evidence of internal feedback mechanisms is required) Is there a sample summary report produced by the agency that examines the general trends in the findings of	8,9,6

ASG-QA[1]	STANDARD	ISSUES FOR DISCUSSION	SESSION Nr
		external reviews/assessment/ evaluations for policy direction? (This is not clear in the SAR) How are standards and guidelines made user friendly and accessible to remote areas? (no clear evidence has been provided in the SAR)	
7	The QAA shall have adequate and appropriate human, financial and material resources to carry out its QA mandate effectively and efficiently.	Financial statements and staff establishment (& qualifications) will need to be verified on site. Probably, agency did not provide some of the evidence such as audited financial statements and asset report due to sensitivity of information).	6,8
8	The QAA shall promote and participate in international initiatives, workshops and conferences, and collaborate with relevant bodies on QA to exchange and share experiences and best practices.	The agency has provided a set of evidence on national and collaborative activities. Questions remain on: (a)	8,9

ASG-QA[1]	STANDARD	ISSUES FOR DISCUSSION	SESSION Nr
		whether the agency has a codified internationalisation policy /or guiding framework (b) samples of 'comparative engagement reports' stated in the SAR evidence of bench-marking	
9	The QAA shall undergo periodic internal and external reviews for continuous improvement.	Sample of an internal review report required as the SAR does not provide one but mentions several types of reviews	6, 8,9, 12

Annex 2: Site Visit Schedule of Meetings and Activities

SESSION No.	TIMING	TOPIC	PERSONS FOR INTERVIEW	LEAD PANEL MEMBER
[10.02.2026] - Online meeting with the agency's resource person [Time: 10:00 GMT]				
1	120 min	Review panel's kick-off meeting and preparations for site visit		Eunice Marete
2	10:00 - 11:30 (90 min)	An online clarification meeting with the agency's resource person regarding the specific national/legal context in which an agency operates, specific quality assurance system to which it belongs and key characteristics of the agency's external QA activities	DED, NCHE	Eunice Marete
[02.03.2026] – Day 0 (pre-visit)				
3	16:00 - 17:00 (60 min)	Review panel's pre-visit meeting and preparations for day 1		Orleans Mfune
4	17:00 - 17:45 (45 min)	A pre-visit meeting with the agency's resource person to clarify any remaining questions after the online clarifications meeting	DED and Chief Education Officer: Quality Assurance Unit NCHE	Eunice Marete
[03.03.2026] – Day 1				
5	8:00 - 8:30 (30 min)	Review panel's private meeting		Habtamu Teshome
6	8:30 - 9:15 (45 minutes)	Meeting with the DED and the Chair of the Board (or equivalent)	DED and Chair of the Board, NCHE	Eunice Marete

SESSION No.	TIMING	TOPIC	PERSONS FOR INTERVIEW	LEAD PANEL MEMBER
	9:15 - 9:30 (15 minutes)	Review panel's private discussion		Temitope Oriola
7	9:45-10:30 (45 min)	Meeting with the team responsible for preparation of the self-assessment report	NCHE Self-Assessment Preparation Team	Habtamu Teshome
	9:45 - 10:00 (15 min)	Review panel's private discussion		Orleans Mfune
8	10:00 - 10:45 (45 min)	Meeting with representatives from the Senior Management Team	NCHE Senior Management Team	Eunice Marete
	10:45 - 11:00 (15 min)	Review panel's private discussion		Habtamu Teshome
8	11:00 - 11:45 (45 min)	Meeting with key staff of the agency/staff in charge of external QA activities	NCHE Quality Assurance Unit	Orleans Mfune
	60 min	Lunch (panel only)		
9	14: 00 - 14:45 (45 min)	Meeting with department/key body of the agency 1	NCHE Policy, Planning and Research Unit	Habtamu Teshome
	14:45 - 15:00 (15 min)	Review panel's private discussion		Habtamu Teshome
10	15:00 - 15:45(45 min)	Meeting with department/key body of the agency 2	NCHE Finance and Administration Unit	Orleans Mfune
11	15:45 - 16:45(60 min)	NCHE Facility viewing	NCHE Chief Education Officer: Quality Assurance Unit	
	16:45 - 17:45(60 min)	Wrap-up meeting among panel members and preparations for day 2		Eunice Marete
	18:30 - 20:00	Dinner (panel only)		

SESSION No.	TIMING	TOPIC	PERSONS FOR INTERVIEW	LEAD PANEL MEMBER
[04.03.2026] – Day 2				
	8:00 - 9:00 (60 min)	Review panel private meeting		Eunice Marete
12	9:00 - 9:45 (45 minutes)	Meeting with ministry representatives (where relevant)	Ministry Representatives and Education Statutory Bodies	Eunice Marete
	9:45 - 10:00 (15 min)	Review panel's private discussion		Eunice Marete
13	10:00 - 10:45 (45 min)	Meeting with heads of some reviewed HEIs/ HEI representatives	Heads of some reviewed HEIs/HEI Representatives	Orleans Mfune
	10:45 - 11:00 (15 min)	Review panel's private discussion		Orleans Mfune
14	11:15- 12:00 (45 min)	Meeting with quality assurance officers of HEIs	Quality Assurance Officers of HEIs	Habtamu Teshome
	12:30 - 13:30	Lunch (panel only)		
15	14:00 - 14:45 (45 min)	Meeting with representatives from the reviewers' pool	Representatives from NCHE Reviewers Pool	Habtamu Teshome
	14:45 - 15:00 (15 min)	Review panel's private discussion		Habtamu Teshome
16	15:00 - 15:45 (45 min)	Meeting with representatives of employers and students	Student Representatives and past and current Interns	Temitope Oriola
	15:45 - 16:00 (15 min)	Review panel's private discussion		Temitope Oriola

SESSION No.	TIMING	TOPIC	PERSONS FOR INTERVIEW	LEAD PANEL MEMBER
17	16:00 - 16:45 (45 min)	Meeting with stakeholders, such as employers, students, local community	NCHE Service Beneficiaries, Industry/Employers and Corporative Education Officers from HEI	Temitope Oriola
18	16:45 - 17:45 (60 min)	Wrap-up meeting among panel members: preparation for day 3 and provisional conclusions		Eunice Marete
[05.03.2026] – Day 3				
19	8:00 - 9:00 (60 min)	Meeting among panel members to agree on final issues to clarify		Eunice Marete
20	9:00 - 10:30 (90 min)	Meeting with DED to clarify any pending issues	DED, NCHE	Eunice Marete
21	10:30 - 12:30(120 min)	Private meeting between panel members to agree on the main findings		Orleans Mfune
	12:30 - 13:30	Lunch (panel only)		
22	13:30 - 14:00 (30 Min)	Final de-briefing meeting with staff and Board members of the agency to inform about preliminary findings	NCHE Board and NCHE Secretariat	Eunice Marete

Annex 3 : List of Documents (Evidence Reviewed by the Panel)

1. Annual Business and Financial Plans (2022/23-2026/27)
2. Confidentiality Agreement (Sample)
3. Credentials for audit panel members for institutional audit for Montessori
4. Teacher Training College dated September 2021
5. Funding Framework for Public Higher Education Institution in Namibia
6. Higher Education Act, 2003 (No. 26 of 2003)
7. Higher Education Management Information System (HEMIS) Guide
8. Higher Education Management System (2023)
9. Institutional Audit Manual
10. Institutional Self- evaluation template
11. Integrated Strategic Business Plan (2022 -2027)
12. List of Accredited Programmes
13. Minimum Standards for Higher Education Institutions (2005)
14. Namibia College of Open Learning Act, 1997
15. Namibia Higher Education Statistical Yearbook 2023
16. Namibia Students Financial Assistant Fund Act, No.26, 2000
17. National Qualifications Framework
18. National Vocational Training Act, 1994
19. NCHE Code of Ethics
20. NCHE Customer Service Charter
21. NCHE-HPCNA-NQA Streamlined Processes for Registration and Accreditation (2024)
22. NCHE-ICAN Integrated Accreditation Manual for New and Continued accreditation applications
23. NQA-NCHE Integrated Accreditation Manual (2025)
24. Programme Accreditation Manual
25. Public Enterprises Governance Act, No.1, 2019

26. Public Service Code of Conduct, Integrity and Ethics
27. Public Staff Rules
28. Quality Assurance System for Higher Education in Namibia (2009)
29. Regulations for the registration of private Higher Education Institution (2009)
30. Sample application form for institutional audit dated September 2021
31. Sample appointment letter as panel member for institutional audit
32. Sample communication to HEIs on CVs of potential audit members for institutional audit exercise
33. Sample Communication to HEIs on modalities and addition information for institutional audit exercise.
34. Sample Board minutes dated 24/7/2025
35. Sample Call for experts dated 6/9/2024
36. Sample Confidentiality Agreement for audit panel for Institutional Audit
37. Sample confirmation of no objection dated 1/7/2025
38. Sample Institutional Portfolio for HeadStart Montessori Teacher Training College dated June 2021
39. Sample Institutional Audit Site Visit Programme, September 2021
40. Sample letter communication factual verification of the draft Institutional quality audit report dated 6th October 2021
41. Sample letter on the selection as a panel member for institutional audit
42. Sample request to HEI on progress report on the implementation of the recommendations in the improvement plan.
43. Sample Summaries of Institutional Audit Reports
44. Stakeholder consultation on the formulation of minimum Standards for
45. NCHE dated 19/10/2021
46. Stakeholder Satisfaction Survey Report 2023/24
47. Terms of Reference for Reviewers (sample)
48. The Namibia Qualifications Authority Act, No. 29 of 1996
49. Tripartite Memorandum of Agreement Between NCHE, NQA and HPCNA