Internal influential factors affecting accreditation processes in small universities: a conceptual framework based on the case of Curaçao

Abstract
The University of Curaçao (UoC) is a relatively small Dutch-Caribbean university located in the SIDS region. The university has started its accreditation processes about a decade ago. After years of thorough preparation UoC succeeded in its first attempt to obtain the accredited status for all the submitted programs. As of 2009 I performed a comparative analysis based partly on participative observation that resulted in a PhD dissertation (Isabella, 2014). This paper presents part of the results of this study, aiming to identify the internal influential factors (enablers and barriers) affecting the progress and outcomes of accreditation processes.

In my paper, following on the empirical findings I will present the conceptualized heuristic framework consisting of internal influential factors affecting the progress and outcomes of accreditation processes. This framework can generically be used by small universities, in particular those located in less developed global regions. It may be used not only as a descriptive and prescriptive instrument, but also as an analytical tool for the design, implementation and monitoring of accreditation processes. As such, it facilitates progress and hence makes the achievement of a successful result more feasible.

The UoC case study will be presented to illustrate how it has managed the great challenges (internal influential factors) encountered during its accreditation processes so to obtain positive accreditation results. The two key components that the study has shown to be critical for a positive outcome will be detailed, i.e. dedicated efforts at the institutional level and high commitment at faculty level.

Keywords: accreditation processes in small universities, internal influential factors
Introduction
In 2001 the four ministers of education in the Dutch kingdom agreed that all higher education programs ought to be accredited by the accreditation organization of the Netherlands, following upon the Bologna Declaration in 1999 (Departement van Onderwijs, 2001). Subsequently, the University of Curaçao (UoC)\(^1\) was enforced to start the accreditation process of its programs.

The University of Curaçao is a relatively small Dutch-Caribbean university\(^2\) located in the SIDS Caribbean region. About a decade ago the accreditation process of its programs started in order to obtain the accredited status by the Dutch-Flemish Accreditation Organization (NVAO). Consequently, this university gradually started with the improvement of several educational aspects and the implementation of various quality mechanisms (University of the Netherlands Antilles, 2003, 2004, 2009a, 2010, 2011c). Obtaining an accredited status not only helps UoC to remain abreast of international developments in the higher education field, but also to ensure the delivery of highly qualified graduates equipped with the tools necessary to support the attainment of national goals projected for Curaçao.

After years of thorough preparation 81% of the submitted programs succeeded in their first attempt to obtain the accredited status by the NVAO; for 8% the accredited status was obtained after a short improvement period. The remaining programs are still in the process towards accreditation, to be completed in 2016.

A detailed analysis of the accreditation processes in UoC in the period of 2002 – 2012 was one of the five case studies\(^3\) during my PhD study (Isabella, 2014). The study aimed to identify internal encouraging (enablers) and hindering (barriers) factors affecting the progress and outcomes of accreditation processes, in particular in small states located in less developed regions. Finally, a framework has been developed to facilitate future accreditation attempts.

This paper presents part of the dissertation, namely the UoC case study. This study gives insights into how even universities with limited resources can develop valuable quality assurance systems in order to overcome challenges of the globalized environment and meet international accreditation requirements. In this paper, following on the theoretical framework, the applied research methodology and the empirical findings the conceptualized framework consisting of internal influential factors is presented. These factors have proven to influence the progress of the studied accreditation processes and consequently affecting the achieved outcomes. This framework can generically be used as a descriptive, prescriptive and analytical instrument for the design, implementation and monitoring of accreditation processes. As such, it facilitates their progress and hence makes the achievement of a successful result more feasible.

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\(^1\) Previously the University of Curaçao Dr. Moises Da Costa Gomez (UoC) was named University of the Netherlands Antilles (UNA). As of November 2013 UNA became UoC.

\(^2\) In UoC five faculties offer 27 programs at undergraduate or graduate level to about 2200 students.

\(^3\) The other case studies were University of Aruba, University of St. Martin, Utrecht University and HZ University of Applied Science, both located in the Netherlands.
Topic of study
The UoC was established in 1979 as a national university for the former Netherlands Antilles. With the establishment of this university the government aimed to institutionalize a national instrument for local capacity building so to promote further sustainable socio-economic development of the Antillean society, while at the same time addressing the phenomenon of brain drain (Commissie Hoger Onderwijs, 2002; Narain, 2004). Considering the accomplished output of UoC since its establishment, this university has demonstrated considerable progress in achieving the original goal of becoming a national capacity builder with its graduates occupying important positions in the private sector as well as in public organizations (Isabella, 2011).

The year 2000 can be considered as the year of a great turnaround for the UoC. In that year the university started a restructuring process designed to solve the many organizational difficulties and improve the quality of its programs, with the aim to eventually achieve an accredited status for its programs (Commissie Totaalbeeld UNA-problematiek, 2000). The UoC has faced major challenges in order to meet the quality standards for higher education programs set by the NVAO (NVAO, 2003). While looking back at the accreditation experiences of the last decade, the faced concerns are related to international influences due to ongoing global developments, national issues originating from the local context or internal institutional features. All these factors had an impact on the internal quality improvement processes and on the long on the accreditation endeavor, yet only the internal organizational factors can be swayed by this university (Isabella, 2011). In order to facilitate future accreditation attempts it will be an asset if this university could strengthen the encountered positive internal influential factors (enablers) while weakening those factors that could negatively influence (barriers) the progress and outcomes of its accreditation processes. It is within this context that identifying the enablers and barriers during accreditation processes at UoC became a valuable exercise.

Research objective
There can be little dispute that currently obtaining an accredited status has become of great importance for programs offered in large as well as in small universities, regardless of their location on this globe and their developmental status. However, there are barely any studies on this topic in small universities. Considering the lack of information on quality assurance developments in small states, the scientific-theoretical goal of the completed PhD study was to enrich the body of knowledge on this topic. In this paper only the practical-oriented goals will be addressed. More specifically, after analysing the accreditation processes in UoC the internal factors that have proven to be influential on their progress and eventually on their outcomes will be presented in a practical heuristic framework to be used to design, implement and monitor future accreditation attempts in similar small universities, while aiming to obtain the highly coveted accredited status. This framework contributes to face the encountered challenges of this type of universities while they are aiming to tie down global quality demands to their local possibilities. The research question to be addressed in this paper is:

Which were the enabling and hindering factors encountered during the first accreditation period in UoC and how can these factors be joined to guarantee future positive accreditation results?
Theoretical framework

Accreditation processes are considered as one of the reasons for diversified organizational change processes in higher education institutions (HEI). Organizations can be considered as open systems in continuous interaction with their environment (Boddy, 2008; Carnoy, 2005; Hooiberg & Choi, 2001). Open-system organizations are characterized by their interdependency and connections within subsystems in- and outside the organization and clustering at different levels.

The contingency theory holds that organizations adapt their structures in order to maintain a fit with changing contextual factors, so as to attain high performance (Donaldson, 2001, 2008; Lawrence and Lorsch, 1967). Consequently, contingency theorists claim that it is important to identify the contingency factors that are relevant in the environment in which an organization operates. They further claim that there is no single best way to organize an organization, to lead a company or to make decisions. Leadership and decision-making styles that are effective in one situation may not be successful in other situations; it depends upon various internal and external contingency factors.

Furthermore, Dill (1999) and Giesecke and McNeil (2004) assert that the success rate of an organization is also highly dependent of its ability to function as a learning organization. The review of definitions illustrates three basic elements of learning organizations: an organization skilled at acquiring new knowledge, transferring this new knowledge across the organization and modifying the way it operates. Accordingly, organizations need to be learning and consequently modifying themselves in order to meet continuous internal and external developments.

HEIs are considered as changing organizations. The emerged global competitive environment together with the increased universal focus on ‘knowledge society’ and ‘knowledge economy’ requires these institutions to be highly adaptive in response to the evolving competitive world. They are facing a period of unprecedented change as they struggle to respond to more external pressure (international and national) and also internal modifications affecting their internal organizational functioning and outcomes (van Ameijde et al., 2009; Baer et al., 2008; Carnoy, 2005). HEIs are expected to connect contemporary global quality demands to their local possibilities in order to attain accreditation.

Considered from this point of view, the perspective of defining quality as a transformation process and hence, the concept of quality as a result of change is most relevant. The emphasis in the transformation view is one of improvement and change oriented rather than stakeholder or product focused (Douma, 2004; Harvey & Newton, 2004).

In line with the perspective of quality as part of a transformation process, a link between quality assurance and quality improvement is evident (Harvey & Newton, 2004; Westerheijden, 2013). Harvey and Newton (2004) state that there is an improvement function connected to quality monitoring mechanisms and procedures to encourage institutions to reflect upon their practices and to further develop what they do. This approach to quality assurance, directed to continuous quality improvement is known as the Plan, Do, Check and Act (PDCA) cycle.

Lomas (2004) asserts that quality assurance activities give HEIs a means by which they can find out whether their academic programs and performances are comparable with those of other institutions, meeting national expectations and international demands. Martin and Stella (2007) state that if a HEI wants to become part of this highly competitive world it has to prove it meets international quality standards. So, it must be ‘accredited’. Hence, accreditation has become one prime external quality assurance vehicle that HEIs use to prove that the quality of their
educational programs complies with quality standards on an international level. Over the years there has been an evolution of external quality assurance, moving towards a system that is legally managed by the national government, externally driven, making use of internationally recognized external quality agencies, and resulting in public reports based on summative judgments (Douma, 2004; Westerheijden, 2013). But in many cases both the internal and external functions of quality assurance (improvement and accountability) are served.

There is an emerging uniformity in the methodology of external quality assurance in the higher education sector. Usually, three key steps are undertaken: self-evaluation resulting in a self-study report, followed by external peer review by selected peers, including site visit, resulting in the external review report. Eventually, based on the review report the accreditation organization decides to grant the accredited status, or provide conditional accreditation with an improvement period followed by reassessment or completely withhold the accredited status. Accreditation is awarded when the institution complies with the agreed quality standards. According to the Salamanca Convention of the European University Association (2001, p.6):

The basic idea of accreditation (of which there are different interpretations) is that it is a formal, published statement on the quality of a programme or institution, following an evaluation based on agreed standards. Accreditation is a process and a status: a process in that it gives the opportunity and incentive for improvement and a status in that it provides public certification of acceptable quality.

Accreditation is hence considered as a (inter)national instrument for external quality assurance, mostly linked to an internal quality assurance system within the HEI being reviewed. Governments tend to implement such a quality tool in order to guarantee that the graduates are indeed highly qualified and equipped to contribute to the nation’s sustainable development. This is also the case with the government of Curaçao and its accreditation mandate for UoC.

Five potential internal influential factors affecting change processes such as accreditation processes in HEIs were identified:

Organizational structure
Mintzberg (2001) indicates that HEIs are usually considered as professional bureaucracies due to their organizational structure. The responsibilities are granted based on professionalism. According to Donaldson (2001) the most effective organizational design is where the structure fits the contingencies. The division of the tasks, authorities and responsibilities are expected to be in accordance with the delineated roles and accountabilities lines set by the organizational structure.

Leadership and management style
Leaders and managers are expected to ensure that plans are executed, encourage ownership of plans of action by all stakeholders so they take their responsibility (Baer et al., 2008; van Ameijde et al., 2009). Leadership in academic settings involves the development of a vision on quality assurance and accreditation, promoting this vision, encouraging its implementation and ensuring that this institutional vision is seen and used as an opportunity for continuous quality improvement. Accreditation is considered as a shift of power from educators to managers, infiltrating the professional autonomy at the operating level. Accordingly managers at the different levels of HEIs ought to play a prominent role as steering officers in quality management and implementation of internal quality policies and hence in accreditation processes.
Quality culture
The existence of a quality culture within an organization refers to the commitment of all
involved to be responsible to produce products and services at their part of the job that meet pre-
set quality standards, thereby creating a quality culture at all organizational levels (Harvey &
Stensaker, 2008; Lomas, 2004).

Available resources
The availability of financial, human and facilities resources also has an impact on the progress of
accreditation processes (Baer et al., 2008). The available resources, their quality and quantity,
can facilitate or hinder accreditation processes. Insufficient availability of resources can obstruct
the implementation of quality improvement actions and therefore hold back the accreditation
process.

Internal quality assurance policy
Although the previous potential influential factors have been described as stand-alone variables,
they can all be addressed as part of the internal quality assurance policy (Douma, 2004; Harvey
& Newton, 2004; Lomas, 2004). This policy takes the organizational structure as a starting point
and is expected to take due account of the leadership and management capabilities, the (non-)
existence of a quality culture and the availability of resources. This policy plan outlines, among
other things, the internal quality assurance system and the lines of authorities and responsibilities
among the involved stakeholders and is usually arranged in such a way to comply with the
quality standards of the involved external quality agency, illustrating the link between internal
and external quality assurance.

Research methodology
This study can be characterized as a combination of an exploratory and an explanatory
qualitative case study research. Following on what Yin (2009), Gerring (2007) and Stake (2006)
indicate, conducting a case study allowed thorough investigation of a particular, contemporary
phenomenon (accreditation process) in a well-defined context (national university). Only by
looking at details of accreditation processes, will it become evident if the selected variables can
be actually identified as encouraging or countervailing factors during such processes.

A pilot case study was done in an exploratory way, applying the research method of
‘organizational self-ethnography’ (Hamdan, 2012). In addition, ten exploratory interviews were
conducted with staff members of NQA, QANU and NVAO, three of the evaluation agencies
involved in the accreditation processes in the Dutch Kingdom. Together with the literature
review, they contributed to the conceptualization of a research model.

Answering the research question entails the explanatory part of this study. The answer explains
the variables which actually had an impact on the progress of such processes and their effect on
the results.
Figure 1 outlines the research process.

Participatory observation, document analysis and ten in-depth semi-structured interviews with staff members of the university were the three sources of data collection in order to obtain extensive information of the UoC case. Combining these three sources supplied data acquisition from a variety of respondents and also provided more in-depth information from different perspectives, which contributed to enhance the study’s validity. In addition, to confirm the validity of the research process triangulation is used as a research strategy, thereby increasing the ability to interpret the findings (Eisenhardt, 1989).

Figure 2 presents the research model. Five independent variables (internal organizational factors) may have an encouraging or hindering effect on the progress towards accreditation and eventually on the achieved outcomes (dependent variables).

**Figure 1 Outline of the research process**

**Figure 2 The Research Model**
Moving throughout the challenging endeavour towards attainment of an accredited status and consistently working to maintain this status assume that the identified potential internal influential factors are predominantly present as enablers. Each independent variable is operationalized in indicators with measurable components. On the basis of high or positive values of most of its indicators an independent variable is expected to have a positive influence on the process of accreditation, so to be identified as a potential enabler (+) or in case of negative impact as a potential barrier (-). Whether it actually has the expected impact depends on the results of the analysis. In case an indicator did not act as a barrier even though not all positive conditions were present to call it an enabler, it is marked as neutral (0).

Findings
Gathering information by the three data collection methods, the actual influence of each indicator on the accreditation processes was assessed. The mechanisms underlying the functioning of the indicators were unravelled and finally the actual enabling factors were identified.

Organizational structure
Although according to its legal regulations UoC ought to be centralized, in its daily practice a decentralized organizational structure could be detected, with the Council of Deans demanding great involvement in the decision making. This practically decentralized decision-making structure has led to great differences among many indicators across the faculties. However, these indicators had barely any effect on the progress of the accreditation processes.

Leadership and management style
All institutional leaders and deans at UoC were interested in attaining the accreditation goal. Across the several institutional leaders during the research period the pattern was to delegate in an indirect manner (not written on paper) large responsibilities to the institutional quality manager to direct the accreditation processes at her own pace and based on her insights and perspectives; the institutional leaders were committed, but contributed from a distance. For sure they cannot be labelled as barrier, but also neither as enabler. No managerial pattern matching could be derived at faculty level. Of the deans 60% can be labelled as steering officers, the others allowed the institutional quality manager to lead his/her accreditation processes; they were merely participants. In any case, it was largely thanks to the commitment of the deans, the institutional quality manager and other staff involved that the pursuit for accreditation of UoC’s programs ensued in positive results.

Quality culture
At UoC no general quality culture could be perceived; quite some differences existed regarding the evolving stage of a quality culture in the different faculties and several organizational cultures co-exist within UoC. The focus of the managers at all levels was mainly concentrated on reaching the accredited status instead of embedding a structural approach of continuous quality improvement and creating a quality culture. The absence of an embedded and perceptible quality culture caused some years of delay in the scheduled accreditation processes. Most indicators actually did not encourage the progress of the accreditation processes, yet acted mostly as barriers; only the indicator ‘Commitment of stakeholders’ was substantially present.
Available resources
UoC can be categorized as a small, resource-poor university, with insufficient human and financial resources. In the beginning lack of financial resources affected the progress of the accreditation processes. The regular annual budget could not serve the accreditation goal as well; additional funds were only granted for the first two years of accreditation processes. Lack of the required financial resources also had repercussions on the availability of other resources. Quality improvement activities were constantly held against the availability of funds compared to other daily routines. In any case, the NVAO’s quality standards have facilitated the allocation of the limited funds primarily to related quality improvement activities. Accordingly, the lack of financial and human resources actually hampered the progress of accreditation processes.

Internal quality assurance policy
An institutional internal quality assurance policy document was available. However, the content of this policy plan was not carried out in practice. A fairly decentralized quality structure was detected, providing the faculties only with guidelines based on the ‘unity in diversity’ principle, allowing each faculty to develop its own quality assurance system. However, great similarities could be detected in the ‘who, what and how’ of these systems since they all aim to meet the NVAO’s quality standards in this matter. Even though there were countless complaints by the academic staff regarding their increased work load due to the accreditation efforts, most of them were still highly committed and involved so as to reach the accreditation goal. Additionally, a large number of external experts were hired to assist to direct the course of the accreditation processes, so encouraging their progress. Hence, most indicators did not score well; only the involvement of stakeholders and external experts acted as enablers. However, apart from delay in the progress of the accreditation schedule, no other perceptible negative effect on the overall accreditation processes could be measured.

Reflecting on the research findings shows that 24% of the indicators had an encouraging effect on the progress of accreditation processes in UoC, while 35% obstructed this progress, causing significant delays. Nevertheless, the accreditation goal was obtained for 89% of the programs. This study demonstrates that the actual enablers, i.e. management at faculty level fortified by the high commitment and involvement of internal stakeholders and the extensive involvement of external experts, were by far more dominant than the force of the encountered hindering factors. The data analysis also reveals that none of the indicators of organizational structure did have any effect on the accreditation processes. However, while studying the other indicators evidently the decision making structure has an indirect effect on them. So, disregarding this indicator in future accreditation attempts is not recommended. Furthermore, the analysis reveals that even though the institutional leaders acted from a distance, the fact that the institutional quality manager received delegated mandate to direct, control and push the accreditation processes, together with the high involvement and commitment of the deans played a determinant role, underpinning the enabling effect of the variable ‘leadership and management style’ during accreditation processes.

Table 1 contains an overview of the research findings.
Table 1 Summary of the research findings

<table>
<thead>
<tr>
<th>Variable</th>
<th>Indicator</th>
<th>Operationalized</th>
<th>UoC</th>
<th>UoC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Organizational structure</td>
<td>Organizational chart</td>
<td>Centralized</td>
<td>Centralized</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Decentralized</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Decision-making structure</td>
<td>Formalized</td>
<td>Not formalized</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Non-formalized</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Leadership and management style</td>
<td>Role of institutional leader</td>
<td>Committed, involved and supportive</td>
<td>At a distance</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Management at faculty level</td>
<td>Steering officer</td>
<td>Diversified</td>
<td>+</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Merely participant</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Quality Culture</td>
<td>Care for quality</td>
<td>Existent</td>
<td>Diversified</td>
<td>-</td>
</tr>
<tr>
<td></td>
<td>Non-existent</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Shared responsibility, ownership, cooperation and collaboration</td>
<td>High</td>
<td>Low</td>
<td>-</td>
</tr>
<tr>
<td></td>
<td>Commitment of internal stakeholders</td>
<td>High</td>
<td>High</td>
<td>+</td>
</tr>
<tr>
<td></td>
<td>Norms, values, traditions, customs, people behavior</td>
<td>Present</td>
<td>Not present</td>
<td>-</td>
</tr>
<tr>
<td></td>
<td>Communication channels and interaction among internal stakeholders</td>
<td>Regulated</td>
<td>Sketchy</td>
<td>-</td>
</tr>
<tr>
<td>Available Resources</td>
<td>Human resources</td>
<td>Sufficient</td>
<td>Insufficient</td>
<td>-</td>
</tr>
<tr>
<td></td>
<td>Financial resources</td>
<td>Sufficient</td>
<td>Insufficient</td>
<td>-</td>
</tr>
<tr>
<td></td>
<td>Facilities</td>
<td>Adequate</td>
<td>Adequate</td>
<td>0</td>
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<tr>
<td></td>
<td>Inadequate</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Internal Quality Assurance Policy</td>
<td>Document on Internal Quality Assurance Policy</td>
<td>Available</td>
<td>Available</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Internal Quality Assurance System</td>
<td>Specified and implemented</td>
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<td>0</td>
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<tr>
<td></td>
<td>Quality structure</td>
<td>In place</td>
<td>In progress</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Non-existent</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Involvement of stakeholders</td>
<td>Structured</td>
<td>Not structured, but high</td>
<td>+</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Not structured</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Involvement of external experts</td>
<td>Extensive</td>
<td>Extensive</td>
<td>+</td>
</tr>
<tr>
<td></td>
<td></td>
<td>No involvement</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Conclusion
Each independent variable was assumed to have significant influence on the progress and outcomes of the studied accreditation processes. The analysis uncovered the impact of each variable and the research findings contradict this preliminary, simple assumption of indispensability of each independent variable. At the end, it was evident that a compensatory relationship among the independent variables is more realistic than an additive one. It certainly became clear that a strict distinction between the variables was not realistic. In practice, the variables are highly connected and greatly interrelated to each other; none of them can really operate independently.
The variable ‘Leadership and Management style’ appeared to be of eminent importance during accreditation processes. The driving force of institutional leaders and deans acting as steering officers will enable the development of a quality culture, manage in an effective and efficient way the available resources and also implement successfully the internal quality assurance policy so as to meet the accreditation requirements. Looking back at the analysis, the answer to the research question is that most of the enablers of the progress and outcomes of the accreditation processes in UoC were the indicators related to the ‘human factor’.

At the end a complicated and complex picture emerges to illustrate how accreditation processes are affected. After excluding and regrouping the indicators, in figure 3 a framework based on the evidence of the UoC case study is delineated, representing a comprehensive overview of the potential internal influential independent variables operationalize into indicators. This framework can be used as a model for future research so as to facilitate the design, implementation and monitoring of the progress of the accreditation processes to enhance the success rate.

The actual impact of each variable, even of each indicator, is on the one hand dependent on external and internal contingency factors and the ability of the HEI to operate as a learning organization, but on the other hand also on the degree of interdependency from one variable on the others and from one indicators on others. Pulling on an indicator sets various other indicators in motion too. In any case, this framework can be used as guidance for decision makers in HEIs to determine on which variables and/or indicators their focus should be. Yet, it is no ‘one-on-one’ additive model: for instance, one cup extra of financial resources does not always lead to two additional cups of human resources, nor always result in a spoonful of progress towards accredited status. In addition, this framework can form the basis for the starting up of the accreditation process, illustrating its descriptive and exploratory functions. It can be used to conduct a baseline study at the beginning of an accreditation process to identify those indicators that could have a negative impact on its progress if not addressed adequately and promptly so to turn their effect in a positive direction. Conversely, those indicators primarily identified as potential enablers could be strengthened to facilitate the achievement of the aspired accredited status. This exemplifies its analytical function. To conclude, the progress of the accreditation process is reliant on the force of the enablers to neutralize the impact of the barriers.
References


