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'Never mind the quality, feel the width': The nonsense of 'quality', 'excellence', and 'audit' in education, health and research[☆]

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Summary The worlds of health care and education have been colonised by 'The Audit Society' and managerialism. Under the benign guise of 'improving quality' and 'ensuring value for money' a darker, more Orwellian purpose operates. Academics had to be transformed into a workforce of 'docile bodies', willing to scrutinise and survey themselves and their 'performance' as outcome deliverers and disciples of the new 'Qualispeak'. This paper critiques the current obsession with audit and performativity, the constant and often pointless 'change' is that held to be so self-evidently 'a good thing' and the linguistic wasteland that so often passes for discussion or policy in the Brave New Worlds of health and education.

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This paper considers the synergies that are afforded in relation to the foundational concepts of excellence and total quality as these relate to nursing research and education and to utilise a solution-focused approach in terms of identifying the key stakeholders and partnerships that could form the strategic alliances necessary to take forward the nurs-

ing research agenda and to delivering the mission-critical knowledge outcomes that our customers and clients require if they are to deliver fully evidence-based care. If we are to take ownership of and demonstrate our commitment to best practice in research, it is vital that we ensure a whole-of-university approach to high impact research quality and the creation of the dashboard indicators that will allow real-time monitoring and leveraging of the benchmarked competitive advantage that nursing's shared governance track record has evidenced.

Are you still with me or did you have to down your copy of *Collegian* and rush off to the toilet for a purge after reading this introductory ipecac? The more disturbing reaction is that perhaps today's readers are so steeped in such drivel in their hospital or uni-

[☆] It should be obvious that the views expressed in this paper are my own and may not be shared by any organisation that I am associated with. Apart from a few pet hates and sacred cows, no animals were harmed in the writing of this paper.

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versity that pap of this magnitude scarcely raises an eyebrow.

Introduction: revisiting the 'destitute time'

Twenty-five years ago I wrote an editorial called 'Preserving nurse caring in a destitute time' (Darbyshire, 1993). This was Thatcher's Britain and the commodification of health care and the instrumentalisation of nursing were well under way. The Brave New World of health care deemed that hospitals were just another business and could be run by anyone who had ever managed a supermarket or sold telephones. Patients were 'customers' whether they believed this or not and the notion of a vital, caring, human relationship existing between a nurse and the person(s) that they work with was being supplanted by the technological understanding that imagined every 'health problem' having a convenient 'solution' that could be diagnosed, prescribed and demanded as some kind of 'competence'. Nurses were just another 'silo' in a health workforce 'tasked' with the role of 'delivering quality care'. Whether part of this new 'commitment to excellence' included asking patients if they would also like fries is not recorded. The era of 'nursing by numbers' had arrived when an algorithm was preferable to skilled clinical judgment and where managerial gibberish infected not only our language (Watson, 2003), which was bad enough, but also our understanding of the nature of nursing, health, health care and the world (Loughlin, 1993, 1994, 2002b). The Barbarians were truly at the gates.

The 'university in ruins' (Readings, 1996)

Given that the philosophical and economic forces that drove the ascent of managerialism in health care had such widespread success in colonizing the field, it would have been a surprise indeed had education not been their next target. In schools and universities, the Barbarians are no longer at the gate. They broke through many years ago (Loughlin, 2004; Readings, 1996). Well, not so much broke through as slipped in using the terminological Trojan Horses of 'quality', 'excellence', 'accountability', 'best practice', 'transparency' and all of the rest of the metastatic lexicon of 'Audit Culture' (Horrocks, 2006; Strathern, 2000) or 'The Audit Society' (Power, 1997). These Trojan Horses entered our world with all the ease of their earlier Greek forebear and are now as ubiquitous, invidious and destructive as their contemporary computing counterparts. Who, after all, could possibly be opposed to 'quality' or 'excellence'? Who would not think that 'accountability' was per se a good thing, since its absence or lack must mean that people are 'unaccountable' and thus irresponsible and culpable? Thus, held in a semantic snare which makes Alice in Wonderland look like a model of pellucidity, such descriptive detritus came to colonise both health care and university worlds just as surely as it had obfuscated industry and management. For this particular jabberwocky, 'All quality mimsy were the borogoves of excellence' indeed.

How did our universities find themselves wallowing in the same linguistic and audit-driven sty as health care? Howie asked just such a question of UK Universities:

"What has happened to higher education in the United Kingdom? What has driven the expansion of the sector, the introduction of quality assurance and research assessment processes, and a casualisation of contracts second only to the fast-food industry?" (Howie, 2005, p. 1)

The Audit Society and its metastases

To understand these questions (and I would not have to remind a single reader that these issues are as germane to Australia as they are to the UK), requires an understanding of the functioning of an Audit Society and an appreciation of the political forces that shape it. No one has dissected managerialism and the shibboleth of the 'Quality Revolution' to reveal their bankruptcy with as much forensic skill and passion as Michael Loughlin. His sustained critique over many years has remained studiously unanswered by those touting the snake oil of quality. While much of his work has targeted health care 'reform' and the 'evidence-based medicine' movements (Loughlin, 1993, 1995, 2002b, 2006, 2007; Miles & Loughlin, 2006; Miles, Loughlin, & Polychronis, 2007), he has recently broadened his critique to account for what he calls, "the effortless conquest of the academy by bureaucrats" (Loughlin, 2004). Loughlin comes characteristically straight to the point, noting that:

"The purpose of the 'quality revolution' in management theory was explicitly Orwellian. Its goal: to produce a language to facilitate the control of working populations by making meaningful opposition to the policy decisions of senior management within organisations strictly impossible" (Loughlin, 2004, p. 717)

The 'Audit Society' is ultimately not about quality but about control and creating the illusion that all is well within an organisation or sector. (For a moving account of Audititis from a sufferer's perspective, see <http://www.tagg.org/rants/audititis/audititis.html>.)

It is the world's most expensive security blanket or as Power, a Professor of Accounting, aptly named it, 'an industry of comfort production' (Power, 1997, p. 147).

Universities may not initially have wished to go down this particular road but successive government policies in the UK, New Zealand, Australia and many other countries were a potent force. Such cash-starving policies were born of a fierce anti-intellectualism (Furedi, 2004) that saw universities as 'elites' and academics as having far too much autonomy and 'academic freedom' than was good for them. Lessons would have to be taught and examples would have to be made. He who paid the piper was hell-bent on calling a very different tune. Enter the armies of managers, auditors, spin doctors and 'quality assurers', all ostensibly there to work in 'partnership' with academics to enable them to 'deliver value for money' and 'excellence' to the new breed of educational 'customers' who have paid their money and who now demand their piece of paper, or degree, that such payment 'entitles' them to. And why should they not? If I went into a shop, handed over my payment for a tin of beans and didn't receive the beans, I would not be best pleased.

The educational supermarket?

The commodification and corruption of higher education has had so many deleterious effects that it would take not only a paper but a special issue of a journal, to even begin to highlight them¹. In this paper I will discuss only three, the linguistic hyperinflation that renders meaning all but impossible, the promotion of 'change' as a control strategy and the current nadir of audit-asteses as it affects research, the Research Quality Framework (RQF).

Travels in hyper-unreality

Of all the linguistic hyperinflation being peddled around higher education (and health care), nothing is higher on the Richter scale of rot than 'excellence'. Blame Peters and Waterman for heading off in search of this in 1982 and starting a frenzy of 'excellence' self-identification and rampant corporate and organisational narcissism. It scarcely seemed to matter that of their 43 'excellent' companies, "Just five years after its publication, two-thirds of the companies listed in the book were in trouble. Fourteen at most could still be held up as examples of good corporate management." (Anon, 1999) (<http://www.apmforum.com/news/apmn233.htm>)

Such a credibility collapse was not about to stop managerialism in its rampant promotion of 'excellence' as a kind of universal 'keyword' (Allan, 2007) that could essentially mean anything that its user wished. It could be a thing, a process, a criterion, an achievement or a description and because its rhetorical power conferred serious kudos on both its user and target and because it proclaimed to the world that the university had truly joined the corporate world, its spread was viral. Bill Readings, in his memorable dissection of 'The University in Ruins' highlighted the vacuity of 'excellence':

"Generally, we hear a lot of talk from University administrators about excellence because it has become the unifying principle of the contemporary university. (...) As an integrating principle, excellence has the singular advantage of being entirely meaningless, or to put it more precisely, non-referential." (Readings, 1996, p. 22)

Readings cites the example of Cornell University Parking Services receiving an award for "Excellence in parking" which bore no relationship to either the number of additional cars that could be parked or the number of cars less that could be parked, or anything else of any substance pertaining to car parking for that matter.

The problem with 'excellence' in a culture of linguistic hyperinflation is that its bragging power diminishes with constant and widespread use. How do you tout your university as being superior to others if everyone is claiming 'excellence' as their defining feature across every aspect of their organisation from research to the canteen? As Gilbert and Sullivan put it, "When everybody is somebody, no one is anybody." What seems to be happening is that the self-promotion stakes keep rising to almost surreal levels. Just as 'Qual-

ity' was drained of all meaning by a parasitic, managerialist discourse and then had to be reified into the philosophically and linguistically absurd 'Total Quality', so excellence may not be quite pompous enough to satisfy the university image managers for much longer. 'Total Excellence' anyone?

One Australian university has recently run advertisements, puffing itself up with the strapline: "World class is our minimum standard". I am not making this up. What are we to make of this interplanetary aspirationalism? Where do your 'standards' go after reaching 'world class' status? No doubt the International Office at this university has been benchmarking themselves against a few extra-terrestrial species and already has a delegation boldly going spaceward in the hope of enticing some alien life forms back as full fee-paying students.

The hunting of the Snark of research quality

The understandable reaction of many academics as they survey the state of higher education is to wonder how on earth it could have come to this. As Loughlin observes of managerialism:

"Its success in higher education is perhaps all the more remarkable, since this is a sector whose primary workforce is supposedly trained precisely to resist manipulation by crude fallacy and irrational persuasion. It is our *job* to think, to question, to expose faulty reasoning, to demand and scrutinise evidence." (Loughlin, 2004, p. 721)

I would add here that perhaps our job in an audit and corporate culture may well be to do the above, but certainly not if such critical thinking is turned inwards and risks disrupting the smooth functioning or in any way challenging the air-brushed, public relations persona of our own organisations. Here, the 'hard realities' of university or hospital life will be played as the trump card and woe betide any 'employee' whose questioning or exposing can be neatly reconceptualised as 'damaging the image or reputation' of the organisation.

Governments showed great political skill in not tackling universities head on in their attempts to deskill and disempower academics. As universities moved into the era of 'mass production of middle-managers' (Charlton, 2002), governments did this far more effectively by stealth, incremental erosion and by creating the empires of the quality and audit industry to provide 'external scrutiny' (Brecher, 2005; Charlton, 2002; Charlton & Andras, 2005; Gombrich, 2000; Howie, 2005; Preston, 2001).

Far more subtle and effective were the strategies of leeching in the ideas of the marketplace and the shining path to excellence nirvana promised by the quality revolution. At the core however was money and perhaps it was always thus. Governments have opted, through their various funding schemes and formulae, to reduce university funding and have then rewarded or punished universities for respectively fawning over or ignoring government 'policies' or 'goals'. This is an approach that worked well for Nye Bevan in enticing the hospital consultants on board at the inception of the UK National Health Service in the 1940s. How did he manage it? "I stuffed their mouths with gold", was his famous reply.

¹ See Critical Quarterly 2005, V1-2 for a good start.

The Research Quality Framework (RQF), gold fillings and the nadir of audit-asteses

A rather Pollyanna view of research assessment exercises sees their "principal drivers" being "to improve the quality of research, to ensure value for money, to encourage collaboration, to avoid duplication and to build on excellence" (Luker, 2007, p. 1). Critics of the pervasive nature of government and institutional audit as embodied in the UK's 'Research Assessment Exercise(s)' (RAE), New Zealand's 'Performance Based Review Fund' (PBRF) and Australia's Research Quality Framework (RQF), take a more jaundiced view. Sparkes (2007) paints a compelling portrait of academic life in Gulag RAE while Gombrich wonders of the RAE, "Is this a serious way of funding academic research, or a kind of sadistic party game?" (Gombrich, 2000). An overview of the UK and NZ systems questions whether such a "costly and arduous exercise" has any value (Shewan & Coats, 2006).

There is a telling comment within an evaluation discussion document regarding New Zealand's PBRF (Duignan, 2005), under the heading of 'Risks which need to be managed in the PBRF evaluation'. One risk listed is, "Inability to define research excellence sufficiently independent of PBRF scores to enable evaluation" and the explanatory note cautions that:

"PBRF quality scores claim to measure research excellence. The attempt will have to be made to get another measure of research excellence with which to evaluate whether the PBRF has actually increased research excellence. Increasing PBRF scores in themselves will not prove this as they may be measuring something else." (Duignan, 2005, p. 72)

You may need to rub your eyes and read this a second time before you consider the possibility that such a 'research excellence' measuring exercise was not even clear as to what it meant by its key term, 'excellence'. Loughlin has identified this phenomena as a defining aspect of the 'buzzword approach to policy formation', arguing that:

"It is hard to think of many areas in professional practice where it would be deemed intelligible, never mind good practice, to 'operationalise' a policy before 'conceptualizing' it. As I have argued in a number of places, such ideas are, nevertheless, commonplace in public sector management. It is by no means uncommon for the authors of articles explaining how the latest innovation in management thinking has been 'incorporated' into their organization to describe lengthy, time-consuming and sometimes expensive processes of re-organization, only to admit that they do not know how to define the key terms used to describe the policy, and that no common understanding of the meaning of these terms exists." (Loughlin, 2002b, p. 230)

Having viewed the train wrecks that were the RAE and PBRF, it beggars belief that Australia's most considered response was; 'What a wonderful idea, we must have one of those too.' Reisner sidesteps academic niceties in arguing that far from improving research in any meaningful way, the RQF is "burying Australian academic research under a pile of horse manure" (Reisner, 2007). I have discussed these

various research assessment exercises with numerous colleagues here in Australia and in the UK and New Zealand over several years and have yet to find one single person who believes that they are a good idea or that they will in any way improve research funding or quality for nursing or midwifery. Sadly, Gombrich may well be right when he suggests that, "Almost everything academics are now asked to do, most of them believe to be wrong" (Gombrich, 2000). However, to be surprised by the introduction of the RQF is to cling to a forlorn notion that such policies are determined by a rational and sensible process arising from a noble motivation. Critiques of such research assessment exercises are wide-ranging and often caustic (Howie, 2005; Reisner, 2007; Sparkes, 2007; Tapper & Salter, 2002), but we can no longer expect sound argument to sway the forces of Audit Culture.

Money talks. The prospect of a large pot of money as a reward for research 'outcomes' or 'deliverables' is almost irresistible to underfunded universities. It would be a courageous Vice-Chancellor indeed who would bite this particular hand that feeds by telling government that their institution cannot be bought so cheaply. If new discretionary government funding were suddenly made available for universities whose academic staff were prepared to dye their hair pink, there is little doubt that university 'quality management systems' and 'commitments' would be 'strategically realigned', so quickly that the massed mops of academia would soon resemble a Barbie doll convention supporting breast cancer awareness.

Impact factors; the new academic status symbol

The obsession with impact factors, H-indexes and other measurement criteria has grown dramatically over the last 15 years (Smith, 2006), driven of course by research assessment exercises and their alchemic quest for 'objective measures' of research quality. The impact factor was first proposed by Eugene Garfield in 1955 and developed for many years until his company was sold to the Thompson Corporation whose revenue in 2006 was US\$ 6.6 billion (<http://www.thomson.com/about/>). The failings, limitations, manipulations and abuses of the impact factor and its deeply suspect nature as a meaningful measure of research or the quality of an author's work have been detailed for many years (Abbasi, 2007; Cheek, Garnham, & Quan, 2006; Chew, Villanueva, & Van Der Weyden, 2007; Lund, 2006; Rogers, 2002; Russell-Edu, 2003; Tuck, 2003) but not surprisingly, such criticism has never deterred the auditmeisters' infatuation with this mirage of meaningfulness.

Somewhere in a university, at this moment a memorandum is surely being written, 'advising' staff only to publish in journals with an impact factor of "X" or above, pointing out that a failure to achieve this level of 'publication excellence' will be deemed to 'demonstrate' a level of performance that is unacceptable and in need of remediation. That such epistemological fundamentalism could even be considered, let alone tolerated will scarcely raise a ripple of concern as the memo will be couched in the soporifically comforting context of being an 'initiative' designed to show the institution's 'commitment' to 'improved quality' and to 'ensuring' that all staff are suitably 'on message' about this.

Given the current RQF mania within universities, academics will surely be pressured into asking why on earth we would waste time writing for what, in RQF terms, would be a *volumen non-grata* of a journal such as 'Collegian' which does not as yet *have* an impact factor to crow about, let alone a low one. The day is not far away when publishing in a low or non-impact factor journal will be perceived as being more indicative of 'poor performance' than not publishing at all. In Collegian's case, the fact that an author might wish to actually be *read* by a not insignificant readership of nearly 10,000 nurses in Australia and overseas will be immaterial. Fortunately, some journal editors are now saying that the game is up and that they are no longer prepared to pimp their journal's integrity for the sake of a higher impact factor (Abbasi, 2007; Rogers, 2002; Smith, 2006).

Ch-ch-ch-ch-changes

Constant, capricious change is endemic in current health and university systems and reorganizing, restructuring or re-engineering hospitals, departments, schools or faculties is the Obsessive-Compulsive Disorder of today's managers. As Loughlin observes:

'The culture of change for the sake of change, with its attendant confusion and insecurity for the workforce (...) makes sense only from the perspective of those who control the direction of change'. (Loughlin, 2004, p. 720)

For example, I could never understand why organisations such as hospitals and universities seemed almost genetically incapable of co-ordinating and collating information so that staff only needed to submit such 'performance' or 'achievement' details once to a central database from where it could be subsequently extracted and used for several different purposes. Such naivety is touching for it assumes that organisations would want to spare their staff the time wasting tedium of submitting the same dubious information again and again for a plethora of spurious 'audit' or 'reporting requirements'. However, in a managerially driven Audit Culture the purpose of such 'reporting requirements' is emphatically not to collect important information efficiently. It is a 'performativity' (Land, 2006) discipline designed to keep staff 'on their toes' and under control and to continue the inexorable process of trying to make everything in the world countable and measurable.

In the context of inspecting schools, Perryman, draws on Foucault's and Lyotard's work to illustrate how this is part of 'Panoptic Performativity', a process of constant, relentless scrutiny and observation related to 'performance'. The school discussed in her study was inspected "8 times within eighteen months" (Perryman, 2006, p. 154) and had to produce reams of revised process and policy documentation to 'demonstrate' to the inspectors that standards were improving. From the teachers' perspective, they were merely 'playing the game' and 'jumping through the hoops' nimbly enough to get the inspectors out of their hair. As Ball (2003, p. 8) astutely observed, what such an obsession with audit and performance produces is "a spectacle or what we might see as an 'enacted fantasy' which is there to be seen and judged" (cited in Perryman, 2006, pp. 157–158).

Richard Gombrich from Oxford is more blunt in his reaction to the charade of 'Teaching Quality Assessments', recalling how he sent inspectors a parody for his department's 'self-assessment statement' which was so enthusiastically received that it was borrowed by another institution! (Gombrich, 2000)

Gombrich is in danger here of being 'resistant to change', a fate worse than death in the bizarre world of today's organisational climate, for who, being of sound mind, would want to occupy such a dinosaur stance? In Oceania Hospital or University all change is good, as long as it is mandated from above in the name of 'quality improvement' and all resistance is futile. The idea that some changes may not be 'a good thing' is discursively disbarred. The modus operandi of many senior executives is to descend into an organisation, wreak as much re-engineered havoc as possible and then disappear a year or two later with a suitably golden handshake before the words 'excrement' and 'fan' begin to coalesce too firmly in the minds of the workforce. This is not management, it is occupational therapy for failed bureaucrats the world over with a pathological need to be seen to 'do something'. No doubt their CVs laud these achievements as 'modernising' an organisation or acting as 'change agents' in order to bring about a total quality revolution. In a further irony which will not be lost on nurses in this 'evidence-based' age, organisational reorganizations, policy changes and procedural revisions will be excused from any such evidentiary obligation. The teachers and practitioners who will be pressured to produce 'evidence' and possibly a few dozen references to justify their every micropractice will wonder why wholesale organisational and departmental changes can be imposed on no more than an executive whim. There are two things in this world that you should never see being made—sausages and health/education policy. Evidence-based reorganisation of a hospital or university? I would like to see that!

Discussion

What is to be done? At first blush the task of 'resisting' the juggernauts of managerialism and Audit Culture seems nigh impossible. Many of the authors cited in this paper suggest campaigns of passive or active resistance such as refusing to take part in 'quality activities' that they deem to be pointless. This is tempting but given the wider cultural forces at work in Audit Culture organisations that often moulds academics into 'docile bodies', I am not optimistic about this option. Organisations cleverly 'devolve' responsibility and it may well be that your Department Head or Director of Nursing is not the 'enemy', but just another colleague caught up in the same managerialist treadmill. Nor do we want our responses to seem like academic preciousness or petulance.

What emphatically can and should be done though, is that we should not simply accept without comment, the vapid, cliché-ridden 'Qualipak' (Loughlin, 2002a, p. 71) that crosses our desks so regularly. Yet accepting this is so often what we do. As Power notes:

"We seem to have lost an ability to be publicly sceptical about the fashion for audit and quality assurance; they appear as 'natural' solutions to the problems we face. And yet, just as other fashions have come and gone as

the basis for management thinking, the audit explosion is also likely to be a passing phase.” (Power, 1996, p. 32)

We are not only entitled, but mandated to ask “of those in positions of power and influence: what do you mean?” (Loughlin, 2004, p. 723) and to receive a coherent answer.

There is a flicker of hope in Power’s comments that the audit explosion may be yet another passing fad or fashion, and in the concerns raised by at least some university senior managers (Thomas, 2005). We can but hope. Nursing is no stranger to adopting passing fads and fashions as if they were stray dogs. Does anyone remember, let alone care about such former obsessions as ‘Models of Nursing’, ‘The Nursing Process’ or ‘Nursing Diagnosis’? Much could be gained if we could find ways to speed the Audit Culture’s demise and regain a sense of the trust that used to exist as a basis of professional conduct and judgment. (O’Neill, 2002).

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