



Ontario College Quality Assurance Service

Service de l'assurance de la qualité des  
collèges de l'Ontario

# COLLEGE QUALITY ASSURANCE ACCREDITATION PROCESS (CQAAP)

## GUIDELINES AND FRAMEWORK

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## 1. INTRODUCTION TO THE COLLEGE QUALITY ASSURANCE ACCREDITATION PROCESS (CQAAP) FOR ONTARIO'S COLLEGES

In order to grant greater autonomy to Ontario's colleges of applied arts and technology (CAAT) and with the introduction of *The Colleges of Applied Arts and Technology Act, 2002*, colleges were mandated by government to implement a process to assure quality. Two elements of this expectation were outlined: quality assurance at the individual college level; and, a self-regulating process at the system level.

In the development of an approach to self-regulation, a decision was made to focus on *quality assurance*: the mechanism or procedures used to assure or measure the level or existence of quality. To that end, the Ontario College Quality Assurance Service (OCQAS), a policy-driven, arms-length independent oversight and governance body operating independently of any individual academic institution and of the provincial government established in 2005, focuses on: ensuring that programs leading to an Ontario College credential conform to the ministry's Credential Framework which functions through the Credentials Validation Service (CVS); leading the audit process and evaluating the effectiveness of quality assurance systems within the colleges which operates through the College Quality Assurance Accreditation Process (CQAAP). The purpose of doing so is to contribute and enhance through continual improvement efforts the quality of the public college education in Ontario.

The audit model that operated between 2005 and 2015, titled the *Program Quality Assurance Process Audit (PQAPA)* was developed through a joint government – college sector working group known as the Coordinating Committee of Vice-Presidents, Academic (CCVPA) / Colleges Branch of the Ministry of Training, Colleges and Universities (MTCU) Working Group<sup>1</sup> between 2003 and 2005. Prior to the full implementation of the PQAPA a pilot project was conducted in five of the colleges of applied arts and technology. In the fall 2006 the Pilot Project was evaluated by Dr. William Massy. His evaluation confirmed that the PQAPA reflected global best practices and was well suited to the needs of the Ontario college system at the time.

The Ontario public colleges, through the work of OCQAS have developed a strong, well-received, and effective quality assurance system since 2005. Following the external review and evaluation of the PQAPA model by Dr. John Randall in 2010 using international validated criteria it was obvious that the OCQAS already provided much of the structure and processes that are required to be a viable accrediting agency allowing

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<sup>1</sup> CCVPA /MTCU Working Group on Charter Program Policy Issues had membership from the Coordinating Committee of Vice-Presidents, Academic (CCVPA) and the Colleges Branch of the Ministry of Training, Colleges and Universities (MTCU). This group was co-chaired by the Director of the Colleges Branch and a Vice-President, Academic.



the system to move from a model of audit to a more widely recognized model of accreditation.

An audit (like the current PQAPA) **evaluates the effectiveness and comprehensiveness of the institutions quality assurance system**, and, in making a judgment, will express some level of confidence, based on the evidence provided, in the quality of the institutions' system to do what it says it is doing.

Different from an audit, accreditation is both a **status** and a **process**. As a status, accreditation provides public notification that an institution or program meets standards of quality set forth by an accrediting agency. As a process, same as an audit, accreditation reflects the fact that the institution or program is committed to self-study and external review by one's peers in seeking not only to meet standards but to continuously seek ways in which to enhance the quality of education and training provided.

Despite the effectiveness of the existing PQAPA model, changes in the higher education environment, such as; heightened demands for accountability, new forms of instructional delivery, and the globalization of higher education, are increasing pressures on the colleges. Therefore, with a desire for more international outreach and a need for greater credibility of Ontario public colleges, as of January 2016 the colleges will be adopting a model of accreditation.

## 2. QUALITY ASSURANCE FRAMEWORK

### i. Guiding Principles

A set of *Guiding Principles* were developed and approved by the Committee of Presidents (COP) and the OCQAS Management Board in 2003. These principles were developed as a guide to which any acceptable quality assurance process would conform. These guiding principles ensured that any quality assurance and improvement model developed for Ontario's colleges must:

- be consistent with international best practices;
- be effective, efficient, and cyclical;
- give appropriate notice to colleges prior to review;
- be described and operate as an audit to provide a review of each college's educational quality assurance processes and policies to ensure that minimum standards are met;
- use an external, competent, mutually-agreeable, objective peer review panel;
- follow a mandatory and clear process that identifies strengths and weaknesses, recommends improvements, and facilitates positive change;



- distribute the preliminary report to the college for their response and include the college response in the final report;
- provide for categories of approval;
- provide a method and system for appeals against its decisions and reports;
- provide for consistency of panel decisions; and,
- be sustainable and affordable for the system as a whole and for the individual colleges in the system.

## ii. **Conforming to an Accreditation Model: Evaluative Factors**

Consideration was given to the operation of the PQAPA against five criteria in an attempt to describe the current level of functioning of the audit model and to identify to what extent the current model conforms to foundational accreditation guidelines (principles, practices, standards, characteristics).

1. The first of these criteria is the initial *Guiding Principles* set out by the Committee of Presidents in 2003. Colleges mirrored these principles that incorporate processes to ensure 'ownership of quality'.
2. The second are internationally accepted standards for quality assurance agencies, more precisely the *Guidelines of Good Practice* developed by the International Network of Quality Assurance Agencies in Higher Education (INQAAHE). In 2011, **the OCQAS received recognition from the INQAAHE as being an agency that meets the *Guidelines of Good Practice*.**
3. The third are the standards and guidelines for external quality assurance agencies produced by the European Association for Quality Assurance in Higher Education (ENQA).
4. The fourth are the defining or elemental characteristics of an accreditation model suggested by Dill et al (1996).
5. The final are the central characteristics of accreditation released by the American Council on Education (ACE) in their report to the National Taskforce on Institutional Accreditation (2012).

## iii. **Defining Quality**

The OCQAS defines quality as the alignment and consistency of the learning environment with the institution's vision, mission, and goals (*fit for purpose*) demonstrated by the development of a culture of quality, in other words, the ability of an institution to reach its stated objectives and fulfill them.

- Quality as 'fitness for purpose', which requires the translation of the institution's vision, mission, and goals into learning outcomes, programs, and systems.



- Quality as a 'process' which can be defined in terms of:
  - *Internal quality assurance*, which refers to ongoing activities implemented by an institution to ensure reaching stated objectives.
    - An internal quality assurance system begins with the institutions identity and enters a quality cycle of planning, implementation, review, and enhancement. The plan-do-check-act cycle is applied to the institutions capacity: to translate vision, mission, and goals into desired learning outcomes; to establish quality assurance mechanisms and structures; to review against predetermined defined standards and its accompanying requirements; and, to enhance mechanisms and systems. The cycle continues as the institutions develop into mature institutions.
  - *External quality assurance*, which refers to activities implemented by an external body to evaluate, based on agreed and predetermined quality standards, the ability of an institution's quality assurance processes to conform to ensure meeting its objectives.
  
- Quality as a 'system' which consists of a structured yet dynamic organization of different quality assurance mechanisms.
  
- Quality as 'improvement' which refers to the ability of the established quality assurance system to be effective by demonstrating and ensuring continuous growth.
  
- Quality as 'developing a culture of quality' is the transformational dimension of the notion of quality in an institution.

#### **iv. Outcomes-based Evaluation Approach**

The OCQAS adopts an outcomes-based evaluation of the institutions objectives through an audit process. The audit is based on agreed upon and predetermined standards and its accompanying requirements to determine whether the institutions quality systems are sufficiently robust and effective to ensure that all programs and support services are well designed and achieve the expected outcomes.

Such an audit does not make direct judgments on academic programs, but considers program-level evidence to the extent necessary to establish that institutional systems are functioning properly.

This approach respects an institutions' culture, values, principles, and evaluation methods that allow each institution to demonstrate its ability to meet the established standards, thus takes into consideration the vision, mission, and goals of the institution.



The audit process itself is both systemic and cyclical, and implemented according to a predetermined calendar. Thus every five years, each institution is required to submit a self-study and receives a prearranged on-site visit from the OCQAS. Following the audit site visit, the institution is required to submit a report, in some cases, to provide a follow-up to the audit panel's specific recommendations within an established time frame. All institutions are required to report on its quality assurance activities 18-months following the site visit.

### **3. OVERVIEW OF THE QUALITY ASSURANCE PROCESS**

#### **i. The Quality Assurance Mechanisms**

In a college, the quality assurance mechanisms can take many shapes and forms, and cover different requirements of the standards. For the OCQAS, a quality assurance mechanism is both mandatory and guiding from an institutional perspective and that have been documented and implemented and ensure quality and continuous improvement. Mechanisms most often take the form of (but not limited to) structures, policies, practices, processes, programs, guides, plans, committees, forums, regulations, legislation, by-laws, and various tools.

#### **ii. The Quality Assurance System Submitted to an Audit**

Ontario's public colleges have over the years implemented a diverse range of mechanisms that assure and measure the existence and level of quality within their institution. The institutional quality assurance system includes an institutional management system designed to collect the evidence required to demonstrate the implementation of these mechanisms and their effectiveness.

The audit examines the effectiveness of those mechanisms ensuring quality.

#### **iii. Evaluation Criteria**

The standards and its accompanying requirements provide the framework for Ontario's colleges in assessing the extent to which their quality assurance mechanisms meets the established standards.

The six standards to be applied are the following:

- Program Quality Management System;
- Program Development;
- Conformity with Government Requirements;
- Program Delivery and Student Assessment;
- Existence, Monitoring and Communication of Academic Policies and Practices;



- Availability and Allocation of College-Wide Resources.

It is expected that the determination of the effectiveness of a college’s quality assurance mechanism, therefore its ability to ensure continuous improvement in quality in reaching its stated objectives, will be based on the following:

- The implementation of quality assurance mechanisms;
- The effectiveness of these mechanisms, that is, their ability to ensure a continuous improvement in quality by:
  - conducting a critical assessment of the achievement of the stated objectives of these mechanisms;
  - identifying areas of strength and areas for improvement to ensure meeting these objectives;
  - implementing corrective measures for improvement, namely through an action plan, in a context of continuous quality improvement;
- The review and updating of these mechanisms to ensure their effectiveness.

The following provides details of the standards and its accompanying requirements pertaining to each component of the quality assurance system.

**STANDARD 1**

**PROGRAM QUALITY MANAGEMENT SYSTEM**

Effective quality assurance mechanisms ensure the quality of a program management system and demonstrate continuous improvement.

**REQUIREMENTS**

**A college-wide program quality management system:**

1.1 Facilitates the evolution of programs to maintain their relevance and fitness with the College Mission.
1.2 Ensures that established policies and procedures for all programs of instruction offered by the college, regarding their development, review and maintenance, are monitored (approved and revised) regularly, and applied consistently across all programs of instruction.
1.3 Gathers, collates and analyzes data and information from stakeholders (e.g. graduates, industry representatives, faculty, students, and professional bodies), program maintenance records (e.g. program review) and program indicators (e.g. graduation rates, retention rates).
1.4 Uses program indicators, program maintenance records and stakeholder data to measure program performance.
1.5 Manages changes to programs and courses to keep them current and relevant with provincial standards and relevant professional body requirements, and to ensure that recommendations



arising from previous program reviews have been considered and addressed.
<b>1.6</b> Manages program maintenance records arising from program quality management processes.

**STANDARD 2**

**PROGRAM DEVELOPMENT**

Effective quality assurance mechanisms ensure the quality of the programs of study being developed and demonstrate continuous improvement.

**REQUIREMENTS**

**A college-wide program development system:**

<b>2.1</b> Ensures the existence, articulation and use of clear statements of program vocational learning outcomes as a starting point for any program of instruction regardless of the location or method of delivery; and that they are consistent with the program's intended purpose.
<b>2.2</b> Ensures that program requirements (courses, work placements, admission requirements) stated for each program of instruction are derived from, and flow coherently from, the program's vocational learning outcomes.
<b>2.3</b> Ensures that program vocational learning outcomes are operational in that they provide a sound basis for curriculum development and the design of teaching and learning activities and student learning assessments; are internalized and used in the day-to-day work of program faculty; and are used in prior learning assessments.

**STANDARD 3**

**CONFORMITY WITH GOVERNMENT REQUIREMENTS**

Effective quality assurance mechanisms ensure the conformity of programs of study with relevant government requirements and demonstrate continuous improvement.

**REQUIREMENTS**

**A college-wide program implementation system:**

<b>3.1</b> Ensures that program titles are consistent with established college system titling protocols and validated program standard titles.
<b>3.2</b> Ensures that programs of instruction are consistent with (meet or exceed) the credential framework requirements (i.e. scope of program vocational learning outcomes, essential employability skills (EES), general education, duration for completion, admission requirements, name of credential).
<b>3.3</b> Ensures that programs of instruction are consistent with the current workplace expectations (i.e. essential vocational skills, attitudes, knowledge, and competencies).
<b>3.4</b> Ensures that programs of instruction provide reasonable opportunities for students to achieve



the vocational and non-vocational program outcomes.
<b>3.5</b> Ensures that changes to provincial program standards are communicated to all relevant stakeholders and implemented in a timely manner so to maintain the relevance of the program.

**STANDARD 4**  
**PROGRAM DELIVERY AND STUDENT ASSESSMENT**  
Effective quality assurance mechanisms ensure the quality of program delivery and student assessment, and demonstrate continuous improvement.

**REQUIREMENTS**  
**A college-wide program delivery and student assessment approach:**

<b>4.1</b> Ensures consistent delivery of programs of instruction regardless of the program delivery strategies (hybrid, on-line, full-time or part-time, or are delivered with a third-party or other postsecondary institutions), including those programs which take place offsite.
<b>4.2</b> Engages teaching staff in regular experimentation with new methods of teaching and learning that are consistent with best practices; and that these new methods are reviewed and widely shared to support currency and relevancy of teaching and learning across all programs of instruction.
<b>4.3</b> Ensures fair and equitable evaluation of student achievement through valid assessment methods, accompanied by prompt and constructive feedback on student performance.
<b>4.4</b> Assesses the capabilities of program graduates (recent and/or imminent) consistent with the established program vocational learning outcomes.

**STANDARD 5**  
**EXISTENCE, MONITORING AND COMMUNICATION OF ACADEMIC POLICIES AND PRACTICES**  
Effective quality assurance mechanisms ensure the communication and monitoring of established academic policies and practices related to academic issues that support program implementation and delivery, and student achievement of vocational learning outcomes, and demonstrate continuous improvement.

**REQUIREMENTS**  
**A college-wide monitoring and communication system of existing academic policies and practices:**

<b>5.1</b> Ensures that academic policies and procedures regarding: <ul style="list-style-type: none"><li>• specific pre-and co-requisites;</li><li>• mandatory and optional/elective components in the vocational and non-vocational areas of study; practical/work-based components;</li><li>• advancement in programs and maximum periods for completion; and,</li></ul>
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<ul style="list-style-type: none"><li>• alternative entry and exit points, are established for all programs of instruction offered by the college.</li></ul>
<p><b>5.2</b> Ensures that academic policies and procedures regarding:</p> <ul style="list-style-type: none"><li>• requirements for admission to the program and to courses in the program;</li><li>• provisions for awarding credit towards a credential or exemptions from specific course requirements as a result of cross-crediting, exemptions, transfer credits, and/or recognition for prior learning,</li></ul> <p>are established for all programs of instruction offered by the college.</p>
<p><b>5.3</b> Ensures that academic policies and procedures regarding:</p> <ul style="list-style-type: none"><li>• instances requiring accommodations;</li><li>• assessment, including provisions for re-assessment and appeals;</li><li>• requirements for awarding the credential (i.e. title of any program or series of courses); and,</li><li>• rules and criteria governing any awarding of merit, distinction, and other grades,</li></ul> <p>are established for all programs of instruction offered by the college.</p>
<p><b>5.4</b> Ensures that academic policies and procedures regarding formal arrangements with any relevant external body (ies) exists to govern additional credentials, certifications, etc., are established for all programs of instruction offered by the college.</p>
<p><b>5.5</b> Ensures that academic policies and procedures regarding changes to programs (i.e. courses, vocational learning outcomes) are established for all programs of instruction offered by the college.</p>
<p><b>5.6</b> Ensures that established academic policies and practices for all programs of instruction offered by the college are published, communicated and applied consistently across all programs of instruction.</p>
<p><b>5.7</b> Ensures that established academic policies and practices are reviewed and monitored regularly and consistently.</p>

## **STANDARD 6**

### **AVAILABILITY AND ALLOCATION OF COLLEGE-WIDE RESOURCES**

Effective quality assurance mechanisms ensure the existence, availability and allocation of resources (human, physical, financial) and technological infrastructure to support student achievement of program vocational learning outcomes, and demonstrate continuous improvement.

#### **REQUIREMENTS**

##### **A college-wide planning system:**

<p><b>6.1</b> Ensures that teaching staff involved in the program: possess the combination of experience and credentials appropriate to, and required by, the program credential and the field of study; have</p>
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<p>the level of expertise and ability to provide the published learning experience; participate in reflective practice; undergo initial and continuing professional development to enhance their teaching expertise and to ensure currency in their subject matter; and, are oriented, coordinated, and evaluated.</p>
<p><b>6.2</b> Ensures that teaching staff execute their professional responsibilities; work within structured instructional plans; are accessible and available for student inquiry; meet the needs of the students and facilitate the achievement of the program vocational learning outcomes; provide prompt and constructive feedback to students; promote a positive attitude to learning for students.</p>
<p><b>6.3</b> Ensures sufficient numbers and continuity of faculty and staff to carry out both classroom and non-classroom support roles for student success.</p>
<p><b>6.4</b> Ensures that academic support and advising services meet the needs of the students and facilitate the achievement of the program vocational learning outcomes.</p>
<p><b>6.5</b> Ensures that staff members providing student support services such as tutoring, financial and academic advising, and co-curricular activities are appropriately qualified, trained, and supported.</p>
<p><b>6.6</b> Ensures that learning facilities (including Learning Resource Centres), equipment, and technological infrastructure support the promised modes of delivery and the learning process, and are accessible to students.</p>
<p><b>6.7</b> Ensures that the leadership, organization, and management of human resources, financial services, learning resources, information technology resources, and academic facilities are optimized without sacrificing quality.</p>

#### **iv. The College Self-Evaluation Process**

Each college is required to conduct a comprehensive assessment of the effectiveness of its quality assurance system, according to the standards and its accompanying requirements articulated in this section, and demonstrate their results in a self-study report.

To do so, the OCQAS would assume that the college will first establish a self-assessment plan to steer its operation. This plan should define the main issues, the distribution of duties and responsibilities, data collection and analysis procedures, methods of consultation, as well as a time frame for completing the self-assessment process.

The college can collect data documenting the implementation of its quality assurance mechanisms as well as any corrective measures undertaken to improve quality. The



analysis of this data will allow the college to track and review the effectiveness of its mechanisms. This analysis must be based on valid and sufficient data to provide an effective critical assessment and demonstration of strengths and areas for improvement in the effectiveness of its quality assurance mechanisms. Based on the results of this exercise, the college can then draw conclusions for each component of its quality assurance system. Furthermore, it assesses the overall effectiveness of the quality assurance system as a whole.

The college's conclusions are presented in a self-study report, which will include the necessary supporting evidence/documents. The college will then draw up an action plan to ensure follow-up on the corrective measures identified to address any deficiencies observed in its quality assurance system.

The OCQAS staff will assist the college in preparing for their audit by reviewing various documents (i.e. current state of quality assurance activities report, self-study report) and providing the required support and feedback to the college. This process is not mandatory, but highly recommended.

**v. The audit process**

The audit cycle is comprised of several stages: a self-study carried out by the college, an on-site visit, an audit report by the audit panel, a review of the report and approval by the OCQAS Management Board and a follow-up by the college. The OCQAS publishes executive summaries of all audit reports at the end of the audit cycle.

**vi. The OCQAS Management Board's Decision on the Effectiveness of the Quality Assurance System**

At the end of an audit, the OCQAS Management Board renders a decision on each of the standards assessed, sets forth recommendations for improvement, where applicable, and provides a decision on the overall effectiveness of the quality assurance system.

**4. STAGES OF THE AUDIT PROCESS**

**i. Notification of the Audit**

Based on the colleges previous site visit dates, at the beginning of the audit cycle year the OCQAS communicates with the colleges to be audited in the current calendar year; outlining, in general terms, the information and documentation they are required to submit in advance of the audit, the date of submission of the self-study report and the potential date(s) for the site visit. The OCQAS negotiates a date for the site visit with the college and communicates the agreed upon date providing the college with a time frame for their audit process.



For those colleges applying for accreditation, a formal institutional commitment is required. The **Accreditation Application Form** to be completed and submitted can be found on the OCQAS website- [www.ocqas.org](http://www.ocqas.org)).

ii. **Submission of the College Program List (Program Selection Requirements)**

The program selection requirements are meant to ensure a diverse program representation including supporting evidence that is presented in the college's self-study report demonstrating the implementation of the college's existing quality assurance mechanisms, as prescribed by the standards and its accompanying requirements.

The college must submit to the OCQAS, prior to submitting its self-study report, a complete list of its active programs, including the selection requirements for each of the programs (credential level, provincial program descriptions and standards, field of study, delivery mode). The OCQAS will use a random sampling approach to select two (2) of the college's six (6) programs that will be submitted to review in its self-study report.

A minimum of two (2) programs from the selected program list must be submitted to review throughout the entire self-study report as evidence for all standards and its accompanying requirements. Be aware that; a degree credential cannot be one (1) of the two (2) selected programs; evidence from degree credentials cannot be used to support Standards 2 and 3; and, an accredited program cannot be submitted to review in the self-study.

Once the selection is complete, the OCQAS will advise the designated college representative.

Each audit year, this list will be updated by the college and resubmitted to the OCQAS. The **College Program List Form** to be completed and submitted to the OCQAS can be found on the OCQAS website- [www.ocqas.org](http://www.ocqas.org)).

For those colleges applying for accreditation, the college program list must be submitted with the *Intent to Apply Form*.

The selection requirements are as follows:

- One (1) program from each credential level as indicated in the Minister's Binding Policy Directive- Framework for Programs of Instruction:
  - Certificate, Certificate of Apprenticeship, Ontario College Certificate (OCC), Ontario College Diploma (OCD), Ontario College Advanced



Diploma (OCAD), Ontario College Graduate Certificate (OCGC), Applied Degree (where applicable).

- Evidence from any Applied Degree credential level programs cannot be used in the college's self-study report to support Standard 2 and 3;
- Accredited programs cannot be used in the college's self-study report.
- One (1) program that uses a provincial program standard that has been published by the MTCU in the last five (5) years.
- One (1) program that is aligned to a provincial program description that has been validated by the Credential Validation Service (CVS) in the last five (5) years.
- Each program must be from a different field of study:
  - Applied Arts, Business, Health Sciences, Human Services, Hospitality and Tourism, Technology, Other.
    - Colleges may have a different organizational structure regarding programs that doesn't reflect the fields of study as stated above (e.g. Business and Hospitality and Tourism might be clustered into one School). The aim is to ensure that the College includes a diverse representation of programs, notwithstanding its internal program structure.
- One (1) program that showcases a different delivery mode:
  - In-class delivery (e.g. face to face).
  - Offsite delivery (e.g. third party delivery, a campus/site other than the main one),
  - Not fully classroom based delivery (e.g. online, blended, self-study).

### iii. **Completing the Self-Study**

The college, as part of its internal evaluation process, is required to carry out a critical assessment of the effectiveness of its quality assurance system, and demonstrate this in a self-study report. This report must be concise, be supported by relevant evidence, and be accompanied by a continuous improvement action plan.

Full details on completing the self-study report are found in the ***Guide to Completing a Self-Study Report*** (available on the OCQAS website- [www.ocqas.org](http://www.ocqas.org)). The ***Self-Study Report*** to be completed and submitted can also be found on the OCQAS website.

### iv. **Submission of the Self-Study Documents**

In addition to the completed self-study report, the college must submit the following accompanying documents to the chair of the audit panel and the OCQAS electronically eight (8) to ten (10) weeks prior to college's the site visit date:



- A copy of the:
  - *Evidence Mapping Template; and,*
  - *Current State of Quality Assurance Activities Report;*
- A current organizational chart for the college, including names and responsibilities of the senior college employees.

The ***Evidence Mapping Template*** and the ***Current State of Quality Assurance Activities Report*** to be completed and submitted can be found on the OCQAS website- ([www.ocqas.org](http://www.ocqas.org)).

For those colleges applying for accreditation, the submission of the self-study report is considered as their formal application for accreditation. This happens only once the college has received a “Candidate for Accreditation” status from the OCQAS Management Board.

**v. Auditor Training**

The OCQAS has an on-going application process for qualified applicants who are interested in conducting audits. The OCQAS uses a roster, i.e. a pool of candidates who have already been vetted as viable candidates through the application process and who are ready for immediate selection. If the applicant has been informed of his inclusion in the roster, they can potentially be selected for an upcoming audit without having to undergo the entire application process.

Once the candidate is included in the roster, he will be regularly contacted by e-mail to either confirm his continued interest in upcoming job openings, or you may choose to temporarily put on hold or permanently withdraw his roster candidature.

At the beginning of the audit cycle, a list of potential auditors is created for the each of the college’s. The OCQAS will provide to the group of potential auditors the college’s agreed upon site visit dates. Once the potential auditors have responded with their availability according to the submitted site visit dates, the OCQAS will submit to each of the colleges a slate of approximately twelve (12) potential auditors from which the college may deselect a maximum of four (4) names, with reason.

Once the groups of potential auditors for each college have been confirmed, the training will take place. The training of the potential auditors will be as follows:

- The group of potential auditors will be asked to sign a mandatory confidentiality agreement in order to prevent the unauthorized disclosure of proprietary and confidential information, as will be defined by the agreement;



- The groups of potential auditors will review a self-study from the college to be audited;
- Once the initial review is completed, the group of potential auditors will be asked to submit their initial review results to the OCQAS;
- The results of the initial review will be evaluated by the OCQAS in order to assess inter-reliability using the following statistical measure:
  - Fleiss' kappa: a statistical measure for assessing the reliability of agreement between a fixed numbers of raters when assigning categorical ratings to a number of items or classifying items. The measure calculates the degree of agreement in classification over that which would be expected by chance.
- The groups of potential auditors will receive specific training from the OCQAS in order to address the inconsistencies highlighted by the inter-reliability measure;
- The groups of potential auditors will be asked to submit a second review of the same self-study for re-evaluation by the OCQAS using the same statistical measure;

Based on the results of the re-evaluation, a final selection of three (3) auditors will be made by the OCQAS and submitted to each of the colleges as their final audit panel members.

This approach to training: ensures consistency in the assessment of the standards and its accompanying requirements; and provides increased levels of preparation and team building for the audit panel members prior to the site visit.

### ***The Audit Panel***

The panel composition generally follows the structure outlined below; however, extenuating circumstances and the need for external confidence may demand alterations approved by the OCQAS Management Board after consultation with the college being audited.

- One (1) qualified and trained audit panel chair who is external to the CAAT system; and
- Two (2) qualified and trained panelists from within, or external to, the CAAT system, and external to the college being reviewed.

The members of the audit panel are accompanied by one (1) OCQAS staff who participates as an observer which means they do not interfere in any aspect of the audit (may not inject, provide opinions, argue a finding, speak for or against a finding). The OCQAS staff may also offer redirection at times to ensure standards and their accompanying requirements are being accurately interpreted.



Panelists selected from within the college system, at minimum, must have:

- Demonstrated recent experience in the post-secondary education sector as a senior administrator or a position that collaborated with units and areas across the institution;
- Knowledge and understanding of policies, procedures and practices in the post-secondary education sector;
- Ability to collect and verify audit evidence;
- Ability to compose findings and conclusions (information analysis and synthesis);
- Strong report writing skills;
- Ability to form and develop interpersonal, professional relationships;
- Ability to work independently and in groups (collaborative work);
- Strong problem-solving and critical-thinking skills;
- Strong organizational and project management skills;
- Ability to be objective and impartial.

The panel members are selected both for their knowledge of the post-secondary education network and their experience in evaluation and quality assurance, and receive training to prepare them for carrying out their duties and responsibilities. They are duly informed of the code of conduct regarding confidentiality, impartiality and respect, to which they must conform at all times.

Further, panelists must not have an employment, advising, or contract relationship with the college under review, or any other connection that could create a conflict of interest, potential or real.

For each audit, panel members are selected to analyze the self-study report submitted by the college, visit the college, and make evaluation decisions and recommendations for improvements. The panel members are tasked with:

- Analyzing, prior to the visit, the self-study report and all accompanying documents submitted by the college;
- Identifying items requiring further verification and clarification prior to the site visit;
- Participating in the site visit;
- Verifying the effectiveness of the college's quality assurance mechanisms based on the information acquired prior to, and during the site visit;
- Preparing the audit report which specifies, where applicable, recommendations for continuous improvement to the college based on the audit findings.



The OCQAS recruits experts with diverse backgrounds within the post-secondary education network and elsewhere. These experts can include: academic deans, assistant academic deans, directors of continuing education, human resources directors, faculty members, college professionals and external members of college boards of governors. Experts may also be recruited from different socioeconomic groups or universities in fields related to education.

**vi. Confirmation of the Site Visit Dates and Panelists**

An official electronic confirmation of the site visit dates and audit panel members is sent by the OCQAS to the designated college representative responsible for liaison with the audit panel and the chair of the audit panel.

**vii. Review of the Self-Study Documents and Follow-up Questions**

The college's self-study report along with all other documentation received is further analyzed and reviewed for completeness by the members of the audit panel. Following the audit panel's reception and final review of the self-study report, the audit panel chair promptly forwards any request for additional documentation/evidence and questions related to the college's self-study that requires further clarification and investigation to the designated college representative. This request must be submitted at least four (4) weeks prior to the site visit. The college must respond providing the audit panel chair with the requested information and documentation at least two (2) weeks prior to the site visit.

The ***Audit Panel Self-Study Review Questions Form*** to be completed and submitted can be found on the OCQAS website- [www.ocqas.org](http://www.ocqas.org)).

**viii. Preparation for the Site Visit**

The duration of a site visit is two (2) days which includes meetings with different representative groups involved in the implementation and follow-up of quality assurances mechanisms, the assessment of the effectiveness of those mechanisms and the self-evaluation process. It is expected that the visit will take place at the college's main campus location. If appropriate or necessary, the use of teleconference is encouraged to facilitate the participation of individuals from other campuses' involved in the site visit discussions.

The designated college representative develops a draft schedule for the site visit of the audit panel to the college and submits a copy to the audit panel chair for review and consideration. The panel chair forwards any comments or proposed modifications to the designated college representative regarding the schedule in order to be finalized.



The draft schedule will be drafted according to the following site visit requirements:

<b>Representative Group</b>	<b>Representation Requirements</b>	<b>Duration</b>
Senior Leadership	Locally determined.	Beginning of day 1 (15 min.) for opening remarks.  End of day 2 (1 hr.) for closing remarks.
Board of Governors	Locally determined.	30 min.
Faculty/ Program Coordinators	<p><b>General requirements:</b> In order to provide the audit panel with a complete overview of the college's quality activities, we ask that the college include faculty that are:</p> <ul style="list-style-type: none"> <li>• Program Coordinators;</li> <li>• Full-time and part-time;</li> <li>• Teaching in programs with the following delivery modes: in-class delivery, offsite delivery, not fully classroom based delivery;</li> <li>• Teaching in programs from the following credential level: Certificate, Apprenticeship Certificate, OCC, OCD, OCAD, OCGC, degree (where applicable).</li> </ul> <p><b>Note:</b> Program clusters/ fields of study are Applied Arts, Business, Health Sciences, Human Services, Hospitality and Tourism, Technology, Other.</p> <p>Group Meeting</p> <ul style="list-style-type: none"> <li>• The panel will meet with two (2) groups of faculty separately;</li> <li>• Each group must have two (2) to three (3) faculty from three (3) of the identified program clusters/ fields of study (all program clusters must be represented);</li> <li>• Each group will have between six (6) to nine (9) faculties.</li> </ul>	30 min./ group
Program/Curriculum Development/Review Staff & Quality Leads Teams	Locally determined.	1 hr.
Students	<p><b>General requirements:</b> In order to provide the audit panel with a complete overview of the college's quality activities, we ask that the college include students that are:</p> <ul style="list-style-type: none"> <li>• Full-time and part-time;</li> <li>• Enrolled in programs with the following delivery</li> </ul>	30 min./ group



	<p>modes: in-class delivery, offsite delivery, not fully classroom based delivery;</p> <ul style="list-style-type: none"> <li>Enrolled in programs from the following credential level: Certificate, Apprenticeship Certificate, OCC, OCD, OCAD, OCGC, degree (where applicable).</li> </ul> <p><b>Note:</b> Program clusters/ fields of study are Applied Arts, Business, Health Sciences, Human Services, Hospitality and Tourism, Technology, Other.</p> <p>Group Meeting</p> <ul style="list-style-type: none"> <li>The panel will meet with two (2) groups of students separately;</li> <li>Each group must have two (2) to three (3) students from three (3) of the identified program clusters/ fields of study (all program clusters must be represented);</li> <li>Each group will have between six (6) to nine (9) students.</li> </ul>	
<p>Student Support Service Providers</p>	<p>In order to provide the audit panel with a complete overview of the college's quality activities, we ask that the college include representatives from the all student support services (not limited to):</p> <ul style="list-style-type: none"> <li>Registrar;</li> <li>Admissions;</li> <li>Student Services (e.g. mental health and wellness, tutoring, academic advising, student association, aboriginal, international, first generation, disabilities, etc.);</li> <li>Library.</li> </ul>	<p>1 hr., OR 2 groups (30 min./ each)</p>
<p>Program Advisory Committees (PAC)</p>	<p><b>General requirements:</b></p> <p>In order to provide the audit panel with a complete overview of the college's quality activities, we ask that the college include PAC members of programs that are:</p> <ul style="list-style-type: none"> <li>Full-time and part-time;</li> <li>Offered in the following delivery modes: in-class delivery, offsite delivery, not fully classroom based delivery;</li> <li>From the following credential level: Certificate, Apprenticeship Certificate, OCC, OCD, OCAD, OCGC, degree (where applicable).</li> </ul> <p><b>Note:</b> Program clusters/ fields of study are Applied Arts, Business, Health Sciences, Human Services, Hospitality and Tourism, Technology, Other.</p> <p>Group Meeting</p> <ul style="list-style-type: none"> <li>The panel will meet with two (2) groups of PAC</li> </ul>	<p>30 min./ group</p>



	<p>members separately;</p> <ul style="list-style-type: none"> <li>• Each group must have two (2) to three (3) PAC members from three (3) of the identified program clusters/ fields of study (all program clusters must be represented);</li> <li>• Each group will have between six (6) to nine (9) PAC members.</li> </ul>	
Recent Graduate/ Imminent Graduate	<p>This representative group includes the following:</p> <ol style="list-style-type: none"> <li>1. <b>Recent Graduate:</b> An individual who has met all the requirements and will or has been granted a college credential within the last 18 months;</li> <li>2. <b>Imminent Graduate:</b> A student who has completed a minimum of 80% (time and/or requirements) of the program, and is expected to complete his program of instruction in the term in progress.</li> </ol> <p>In order to provide the audit panel with a complete overview of the college's quality activities, we ask that the college include:</p> <ul style="list-style-type: none"> <li>• Graduates and/or Imminent Graduates from several program clusters/ fields of study;</li> <li>• Three (3) to nine (9) individuals.</li> </ul> <p><b>Note:</b> Program clusters/ fields of study are Applied Arts, Business, Health Sciences, Human Services, Hospitality and Tourism, Technology, Other.</p>	30 min.
Dean/or Head of Academic Department	<p>In order to provide the audit panel with a complete overview of the college's quality activities, we ask that the college include representatives from all program clusters/ fields of study.</p> <p><b>Note:</b> Program clusters/ fields of study are Applied Arts, Business, Health Sciences, Human Services, Hospitality and Tourism, Technology, Other.</p>	1 hr., OR 2 groups (30 min./ each)
Directors/ or Head of Service Departments	<p>In order to provide the audit panel with a complete overview of the college's quality activities, we ask that the college include representatives from all services (not limited to):</p> <ul style="list-style-type: none"> <li>• Registrar;</li> <li>• Admissions;</li> <li>• Student Services;</li> <li>• Library;</li> <li>• Finance;</li> <li>• Information Technology;</li> <li>• Human Resources;</li> <li>• Physical Resources (Facilities);</li> <li>• Institutional Research.</li> </ul>	1 hr., OR 2 groups (30 min./ each)
Audit Panel	Audit Panel members	End of day 1 (3 hr.) for



		<p>deliberations.</p> <p>End of day 2 before closing remarks (1 hr.) for deliberations.</p>
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It is expected that the college will provide a broad range of individuals, as identified by the representation requirements, who represent programs that are different than the one's selected for the college's self-study report.

Also, the college has the opportunity to suggest activities outside of the site visit requirements, such as campus tours or meet and greet receptions, but these activities cannot impede on the established site visit requirements and must be consistent with the purpose of the site visit; to contextualize and supplement the information contained in the college's self-study report and provide a better understanding of the college's conclusions. If for any reason the panel members deem the proposed activities as not being consistent with the site visit purpose, they can request to have them removed from the proposed schedule.

Finally, it is expected that a room will be assigned for the audit panel members to deliberate behind closed doors.

**ix. Site Visit**

The main purpose of the site visit is to contextualize and supplement the information contained in the college's self-study report and provide a better understanding of the college's conclusions. In addition to supplementing the self-study report, the visit enables consideration (where applicable) of any subsequent corrective measures implemented by the college between the adoption of the report and the time of the visit.

Throughout the site visit and at its conclusion, audit panel members meet to summarize and record their observations. They also measure the results of the evaluation for each standard against its objectives, identify key areas of strength and deficiency and render key messages to present to the college. The audit panel's observations are evidence – based and supported by the observations found in the college's self-study report, the views expressed by the college stakeholders during the visit, and any other documents examined while on site.

The site visit concludes with a meeting with the college governance (senior leadership), where the audit panel chair presents the panel's conclusions. This will serve as a way of preparing the college for the possible contents of, and recommendations to be made in, the preliminary audit report.



#### **x. Preparation and Submission of the Preliminary Audit Report**

Following the audit, which includes a thorough review of all documentation received from the college and the completion of the site visit, the audit panel drafts a preliminary version of the audit report, based on the conclusions and messages for improvement of the audit panel. No further evidence can be submitted for consideration once the site visit is completed.

The preliminary report is then submitted four (4) to five (5) weeks following the site visit to the OCQAS for review to ensure clarity and consistency of the text, and analysis and approval before it is sent to the designated college representative for review.

The ***Audit Report Template*** to be completed and submitted can be found on the OCQAS website- [www.ocqas.org](http://www.ocqas.org)).

#### ***Evaluation Framework***

An accreditation decision can only be arrived at after the fair, unbiased implementation of evaluation process and assessment of the college's self-study documents and evidence presented by the college during the site visit against the standards and its accompanying requirements as defined by Ontario College Quality Assurance Service (OCQAS).

The evaluation decisions are as follows:

#### **Requirement Decisions**

- MET: A Requirement is met, if the institution meets or exceeds the expectations embodied in the Requirement.
- PARTIALLY MET: A Requirement is partially met, if the institution demonstrates the characteristics expected by the Requirement, but performance in relation to some aspect of the Requirement must be improved.
- NOT MET: A Requirement is not met, if the institution fails to meet the Requirement in its entirety or is so deficient in one or more aspects of the Requirement.

#### **Standards Decisions**

- A: A Standard gets an 'A' standing, if ALL of the Requirements related to the Standard are "met".
- B: A Standard gets a 'B' standing, if the MAJORITY (51%) of the Requirements related to the Standard are "met" and none are "not met".
- C: A Standard gets a 'C' standing, if the MAJORITY (51%) of the Requirements related to the Standard are "partially met" and none are "not met".



- D: A Standard gets a 'D' standing, if ANY of the Requirements are "not met", regardless of the rating of the other Requirements for that Standard.

### **Accreditation Decisions**

- FULLY ACCREDITED: An institution is fully accredited; if the MAJORITY (51%) of the Standards received an "A" standing, with no "C" or "D" standings.
- ACCREDITED WITH CONDITIONS: An institution is accredited with conditions; if the Standards have received ANY combination of "A", "B" and "C" standings.
- NOT ACCREDITED: An institution is not accredited; if ANY of the Standards have received a "D" standing.

### **Audit Decisions**

- MATURE EFFORT: An institutions quality assurance system is deemed mature; if the MAJORITY (51%) of the Standards received an "A" standing, with no "C" or "D" standings.
- ORGANIZED EFFORT: An institutions quality assurance system is deemed organized; if the Standards have received ANY combination of "A", "B" and "C" standings.
- FORMAL EFFORT: An institutions quality assurance system is deemed formal; if ANY of the Standards have received a "D" standing.

### **Report Findings**

The audit report is designed to describe the college's quality assurance system and its effectiveness. The report outlines the findings of the audit panel, which are reached through its interpretation of the specific information it has gathered. The report notes strengths as well as those areas that require improvement; recommendations for improvement will alert the college to an area for attention, and, rather than instructing it to take a particular action or series of actions, will provide direction and guidance for the college. The report does not comment on individuals (positively or negatively) or on standards irrelevant to the quality assurance process. It also attempts to address all relevant areas without excessive detail or presuming to be exhaustive.

The audit report does not contain statements that cannot be substantiated; evidence must be appended on which to base the statements. Conversely, firm views are stated firmly, avoiding excessive subtlety.

Where a college introduces a new quality assurance mechanism to supersede a former mechanism, and due to its newness there is insufficient evidence of the effectiveness of this new mechanism, the college should provide evidence that the former mechanism was implemented and effective. This principle should be interpreted in the spirit of 'not



punishing colleges for implementing new and more effective quality assurance systems' that replace a prior quality assurance system that was demonstrably effective.

In respect of all conclusions reached and judgments made, the audit report must contain sufficient evaluative narrative to demonstrate the reasoning which led the audit panel to its conclusions. Particularly where remediation is required, the college must be able to understand, from the report, the nature of the weakness to be addressed. Similarly, the college must be able to understand, from the report, reasons given for the meeting of the standards as this is helpful to future audits.

**xi. Review of the Preliminary Audit Report**

The OCQAS forwards the preliminary version of the audit report to the designated college representative, and invites the latter to comment on its decisions and recommendations for improvement, and generally provide feedback on whether the report accurately reflects the situation of the college. The college is also invited to submit its response, in writing, to the OCQAS within four (4) weeks of the receipt of the preliminary audit report.

Within three (3) weeks of the OCQAS receiving the feedback from the college, the panel chair reviews the feedback with the panel members and makes whatever changes to the preliminary report they, at their discretion, agree to make. Any comments or corrections of facts received from the college will be included.

In cases where the panel does not agree to incorporate the college's comments to the audit report or the corrections recommended by the college deemed important, the latter can request to have them submitted to the OCQAS Management Board for review upon submission of the final audit report.

**xii. Submission of the Final Audit Report**

Once all feedback from the college and the audit panel members has been incorporated and the report is final, the OCQAS will submit this final report to the OCQAS Management Board for review and approval.

Once the final report has been approved by the OCQAS Management Board, it is released to the President of the relevant college and the panel members for signatures. At this point, the college can release its official results to its stakeholders.

The audit panel acts on behalf of the OCQAS Management Board, and it is the Board that affirms the conclusions, supports the recommendations in the report, and issues the final report.



### **xiii. Appeal Process**

Colleges undertaking an appeal must do so, in writing to the Chair of the OCQAS Management Board, within four (4) weeks of notice of the receipt of the final audit report. Consult the OCQAS website ([www.ocqas.org](http://www.ocqas.org)) for details regarding the ***Accreditation Appeals Policy***.

### **xiv. Release of the Final Report and Publication of the Audit Report Executive Summary**

The OCQAS Management Board has the authority to release the final audit report once the following conditions have been met:

- the process used by the audit panel conforms to the approved audit guidelines;
- the college has been given the opportunity to comment on the preliminary audit report and has been treated fairly and consistently as compared to other reviews in other colleges;
- the college has provided a written response to their review of the preliminary audit report;
- the deadline for undertaking an appeal has passed and no appeal has been made; or, the appeals committee has heard an appeal, ruled on any changes to be made, and those changes (if any) have been made;
- the final audit report does not contain confidential or proprietary information.

The executive summary of the report is posted on the OCQAS website, and a copy will be held in the office of the OCQAS. It is understood these documents are subject to the Freedom of Information legislation, and will be released on request, charging associated costs.

The audit report is a public document and belongs to the OCQAS Management Board as a whole; not to the audit panel or its individual members.

### **xv. Follow-up Reporting**

The college must submit a follow-up report to the OCQAS 18-months following the release of the final audit report, describing that quality assurance activities it has implemented to address the identified gaps since its last submitted report to the OCQAS. The OCQAS Management Board reviews the follow-up report.

The ***Current State of Quality Assurance Activities Report*** to be completed and submitted can be found on the OCQAS website- [www.ocqas.org](http://www.ocqas.org)).