



Highlights from Audits Carried Out Between Sep 2014 – Aug 2019 Mapped to New CQAAP Standards

Preamble

This document highlights the lessons learned from the 24 audits that have been carried out between September 2014 and August 2019.

It is a compilation of the mechanisms recognized by the respective audit panel teams as best practice (Commendations) which were showcased in the CQAAP final report for these colleges. These 'best practices' may not be exclusive for the colleges that have been highlighted. Other colleges might have similar mechanisms to accomplish some of the same results, but were not, or not yet, mentioned by their respective audit teams. Each audit panel decides which processes to highlight for each particular college.

This document will be updated at the end of every academic year, to include the highlights of that year's audits. OCQAS is looking forward to showcasing those for the colleges that are up for audits in the years to come. It is a good reflection for each college to consider, "what mechanism to ensure quality will our college be showcased for?"

The last two pages of this document include a list of the requirements that colleges seem to struggle with, the areas where colleges are doing well, and lessons learned from the Self-Study submissions.

This document has been developed in response to requests from colleges to share lessons learned through the audit process available to the system.



STANDARDS	REQUIREMENTS	COMMENDATIONS (MECHANISMS RECOGNIZED BY THE RESPECTIVE AUDIT PANEL TEAMS AS BEST PRACTICE)
<p>1. PROGRAM QUALITY MANAGEMENT SYSTEM Effective quality assurance mechanisms ensure the quality of a program management system.</p>	<p>A college-wide program quality management system:</p>	<p>Overall quality assurance mechanisms for the management of programs of study:</p> <p><i>Mechanism to ensure relevance of programs of study; their effectiveness; their currency; and the quality of program management. Ability of these mechanisms to identify areas of strength or deficiency to ensure quality programs of study, and implement corrective measures to address areas of improvement.</i></p>
	<p>1.1 Has established mechanisms that operationalize the Board of Governor's (BOG) responsibility to ensure quality assurance is embedded in the strategic direction of the organization.</p>	<p>Quality Assurance (QA) policies and practices that connects QA with the role of the Board of Governors</p> <p>LAMB: Has a Policy that assigns the ultimate responsibility for QA to the Board of Governors. Through this policy, the Board establishes the parameters and broad structure for QA at the College. Implementation of the policy is delegated to the President who has established a QA Council. The Council provides oversight and serve as the center and focus of the College QA efforts (e.g. program relevance and fitness).</p> <p>NIAG: The Quality Assurance system at Niagara College flows directly from Board of Governors. The Board policy on Academic Quality assigns responsibility of academic quality to the Board. The processes to operationalize the policy are the responsibility of the VP, Academic and Learner Services.</p> <p>DURH: There was common use of QA "language", approaches to quality and especially an overall understanding of quality, even among students.</p> <p>CENT: Impressed with the level of engagement in evidence by the Board. The Board was knowledgeable of quality assurance processes and clearly supported the college's efforts in this regard. This reflects the college's intentional integration of the Board into the College's approach to quality assurance.</p> <p>SHER: The BOG has taken a proactive approach to supporting the evolution of programs to maintain the relevance and fitness with the College Mission by proactively retuning the work of their committee, using the Senate's work to leverage their responsibility to oversee the operationalization of the QA processes.</p> <p>CAMB: The selection process for Board members screens for individuals who willingly make a significant commitment to the well-being of the College. Board members are knowledgeable about key elements of what the College is doing to assure the quality of its programs, particularly through their oversight and review of; the Strategic Plan, operational frameworks which guide the realization of the Strategic Plan, and the performance indicators used to monitor programs.</p> <p>Board Training</p> <p>SLAW: The Vice President Academic meets with the Board once a year to explain how the Quality Assurance mechanisms in the College work and the role of the College Board in ensuring they understand their role and responsibility in the process.</p> <p>Self-Regulated Board Activities</p> <p>SENE: The Board of Seneca College after every meeting engages in a self-regulated assessment with the objective of improving performance and decision-making. They analyze their roles, the information received and the input provided.</p> <p>FANS: The Board of Governors and the Senior Leadership Team create and support the College's overall culture of quality. This emphasis on quality is demonstrated by undertakings like the Board Monitoring Reports.</p> <p>Self-Regulating Activity</p> <p>NORT: The Quality Assurance Committee has infused a culture of quality throughout the institution by ensuring everyone is aware of the expectations and makes sure that quality, along with the College's Mission, Values, and Strategic Plan are incorporated into every relevant work process and decision.</p>
	<p>1.2 Ensures that there are established mechanisms for:</p>	<p>At the Center of Quality Assurance: Program Quality</p>



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	<ul style="list-style-type: none"> • new program development; • program review; • program revision; • program renewal; • program suspension and cancellation that support program quality and are applied consistently across all programs. 	<p>LAMB: At the heart of the programs themselves are the processes by which programs and curriculum are developed, revised and documented. They have one policy and practice that connect all the stages of the lifecycle of a program. They have a flowchart that highlights the stages of program quality assurance processes and synergies. Including a Program Prioritization, Revitalization and Rationalization process.</p> <p>CONF: Presented a diagram showcasing the data collected, the processes it informs, and the actions coming out of those processes.</p> <p>FLEM: The Learning Design and Support (LDS) team has made a substantial and positive impact on faculty and staff. The team provides excellent support for the college's quality assurance initiatives.</p> <p>FANS: The College and Centre for Academic Excellence (CAE) have established leadership in and commitment to Quality and Program Excellence as demonstrated by the development and implementation of the Program Excellence Model (Policy A126) and the development of excellent Handbooks and guides (New Program Development Handbook, The Code Book for Course Development, the Formal Program Review Process Handbook).</p> <p>MOHA: There is a comprehensive handbook that outlines the timelines, steps and required information for each stage of program development. Well-developed templates assist the developers and the CTL has personnel to assist in the process. The use of the COMMS system for Program Mapping and Course development strongly supports program development and review. There is a well-defined policy, a handbook that outlines the procedures and robust templates for program reviews. The College uses technology effectively to support program development and review. The panel found that the use of the various reports produced by the COMMS system enabled stakeholders to easily track compliance with academic policies and government requirements related to program standards, course outcomes and content and assessment strategies.</p> <p>Systematic and holistic approach to monitoring program quality – external assessors NIAG, ALGO, SENE, HUMB: These colleges have included as part of their program 'review' process, an external auditor assessment.</p> <p>Program Development SENE and ALGO: These two colleges have very strong Program Development processes that has multiple stages and includes the creation of an ad-hoc program advisory group. Each of the stages ensures that there is alignment with the strategic and academic plans of the institution to move to the following stage.</p> <p>Integrated five-year Program Review Schedule - Program review / Provincial Program Standards Release/ Program Accreditation GRBR and CONF: Have a five to seven-year program review schedule that integrates external body accreditation timelines and Provincial Program Standard Release dates in order coordinate efforts and minimize resources.</p>
	<p>1.3 Has mechanisms for gathering, collating and analyzing data and information from various sources and stakeholders that are related to program quality.</p>	<p>Multiple Sources of Data ALGO: Data reviewed include, but are not limited to,</p> <ul style="list-style-type: none"> • Program and Curriculum maps (generated in real-time through the COMMS) • Course Outlines (available through the COMMS) • Key Performance Indicators (Enterprise Reporting Portal) <ul style="list-style-type: none"> ○ Student Satisfaction Survey (capstone and detailed responses) ○ Graduate Satisfaction and Employer Satisfaction (capstone) • Program Registration Data (Enterprise Reporting Portal) • Program Withdrawal Data (Enterprise Reporting Portal) • OCAS Program Choice Data (Enterprise Reporting Portal) • Course Failure Rate (Enterprise Reporting Portal) • General Registrar's Office (RO) Statistics (RO website, also linked from Enterprise Reporting Portal) • Program Costing Information (Enterprise Reporting Portal)



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		<p>Data Gathering for Decision Making HUMB: Humber’s quality assurance system has mechanism for continuously gathering information and informing institutional decision-making and evaluating progress consistent with these priorities. Humber’s quality assurance process involves the collection, analysis and interpretation of data from various sources in order to measure the institution’s progress in meeting its commitment to students, and to make informed recommendations for ongoing improvement.</p> <p>FANS: Student Focus Groups are included in all Program Reviews. Fanshawe has also developed and implemented the additional Employer Satisfaction Survey to enhance the data provided by the KPI Employer Survey. Finally, the College uses external chairs for the External Focus Group consultation in the Program Review Process.</p> <p>SAUL: Has leveraged being a small college to its advantage with established quality assurance mechanisms that are used and reviewed for continuous improvement.</p> <p>Strong connections between the QA office activities and Institutional Research (IR): LAMB: At Lambton College, these two units share a Director. This allows for an expedient implementation or revision of QA processes due to a research design, data gathering and analysis, and publication of results.</p>
	<p>1.4 Uses data and information collected from various sources and stakeholders to assess program performance and inform recommendations.</p>	<p>Program Matrix – Dashboards ALGO: Program performance is assessed through a variety of data detailed in quality standard requirement #1.3 above, such as Key Performance Indicator survey results, program registration/withdrawal data, admission/enrolment trends, Student Course Feedback survey feedback, and stakeholder input (students, employers and faculty). Ultimately, however, program performance is primarily measured through the Program Mix Review element of the Program Quality Assurance Framework. Annually, the Executive Director and Manager, Academic Operations and Planning, provide Academic Administrators with program metrics inclusive of a Quality Index Score based on the KPI Student Satisfaction data, as well as program contribution data pertinent to financial metrics.</p> <p>LAMB: The KPI Student Satisfaction Survey results are analyzed and presented in a report that facilitates cross-program and longitudinal understanding. The Program Prioritization, Revitalization and Rationalization process results in a Scorecard report that measures each program’s performance against each of thirteen criteria targets. This Scorecard, by priority ranking programs and identifying performance shortfalls in programs, serves as an impetus and resource for program departments for ongoing quality improvement and preparation for the annual review the following year.</p> <p>DURH: The development, use, and support of tools such as <i>WebCOT™</i>, <i>Tableau™</i>, <i>MyCampus™</i>, and <i>DC Connect™</i>, enable a broad and consistent level of communication, both for staff and students, and allow for a uniform approach to capturing information about courses, learning outcomes and guidelines for delivery. <i>Tableau</i> provided insight into its effectiveness as a tool to facilitate program reviews and development.</p> <p>CAMB: The Program Plan is a comprehensive review tool, specifically, it articulates follow up items (Strategies) and allows for annual tracking of progress on those strategies.</p> <p>CANA: The Entrisik tool captures and correlates all of the institution’s KPIs. Managers can correlate indicators and make evidence-based decisions to support strategic planning.</p>



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	<p>1.5 Has mechanisms for ensuring that recommendations and action plans arising from program QA processes have been implemented.</p>	<p>Monitoring – Accountability STCL: Established in 2013, the Accountability Office regularly monitors all College programs to ensure full compliance with College policies on quality assurance. The major function is the Quality Assurance Accountability Audit. This is an impartial, objective audit to ensure all programs are adhering to the established quality control review processes and acting on the action items coming out of those processes.</p> <p>ALGO: For five years after the approval of a new program, the Board reviews the KPIs to monitor performance and assess the quality of the data presented during program approval.</p> <p>LOYT and CONF: These two colleges have internal stakeholder committees responsible for reviewing the reports and action plans from program reviews. The program review committee assesses the depth of analysis and recommendations prepared by the program staff, and provides feedback.</p> <p>LAMB: The Dean is expected to address the recommendations coming out of program reviews, engaging the department or school operational plan and, subsequently, the planning and budget process where necessary, to provide the necessary resources. The implementation of the recommendations is tracked to completion. One year after the completion of the review, the Dean is required to report formally on the implementation of the recommendations. The loop is closed when the report is submitted and reviewed by the Board of Governors.</p> <p>DURH: The mechanisms for Annual Program Reviews, Comprehensive Program Reviews, feedback loops, input from stakeholders regarding program and course changes are evident and understood by those who are involved in these activities.</p>
	<p>1.6 (previously 5.5) Has mechanisms for managing and communicating changes to programs and/or courses to keep them current and relevant with industry, provincial standards and professional body requirements.</p>	<p>Modifications to Existing Programs NIAG: Are governed by the Program and Curriculum Modification policy. Modifications can be minor or major in nature as defined by the curriculum change approval process. At the end of each winter term the academic change processes benchmark deadlines for the coming fall and winter academic terms are determined in order to meet marketing and registration effective dates for the following academic year.</p>
	<p>1.7 Manages program maintenance records arising from program lifecycle QA processes.</p>	<p>STCL: Has developed a Share Point site that hosts all documents pertaining the lifecycle of an academic program. It is organized by program and it's accessible by all faculty, coordinators, chairs, senior administration and quality assurance staff.</p>



STANDARDS	REQUIREMENTS	COMMENDATIONS (MECHANISMS RECOGNIZED BY THE RESPECTIVE AUDIT PANEL TEAMS AS BEST PRACTICE)
<p>2. VOCATIONAL LEARNING OUTCOMES AS THE CENTRE OF PROGRAM DEVELOPMENT (THROUGHOUT THE PROGRAM LIFECYCLE)</p> <p>Effective quality assurance mechanisms ensure vocational learning outcomes are at the centre of the program's lifecycle activities.</p>	<p>A college-wide use of vocational learning outcomes at the centre of the program lifecycle:</p>	<p>Overall quality assurance mechanisms for the development of programs of study:</p> <p><i>Mechanism to ensure alignment and coherence of programs of study; and the quality of the program development structure. Ability of these mechanisms to identify areas of strength or deficiency to ensure quality programs of study, and implement corrective measures to address areas of improvement.</i></p>
	<p>2.1 Ensures the existence, relevance and dissemination of Program Vocational Learning Outcomes (PVLOs) as the starting point for any program lifecycle activity regardless of the program location or delivery method.</p>	<p>Course Outline control and repository</p> <p>ALGO: Program Development, Approval and Implementation process [PDAIP] ensures that vocational learning outcomes (VLOs) exist for new programs of study. Vocational learning outcomes are defined through a consultative process where subject matter experts in consultation with industry and the Program Advisory Committee (PAC), bring draft VLOs to the Program Review Committee (PRC) as part of the new program proposal, normally first at the intermediate stage and then for a final level review. Proposals and presentations are also supported by the relevant Academic Administrator(s) with the completed process guided by a Curriculum Consultant.</p>
	<p>2.2 (includes 3.4 from previous version) Ensures that program course structure, course sequence, and course learning outcomes are derived from, and flow coherently from, the Program Vocational Learning Outcomes (VLOs) and Essential Employability Skills and are disseminated.</p>	<p>Program Mapping Tools: These colleges have excellent mapping tools and processes that allow faculty to identify Program Vocational Learning Outcomes and how they translate to Course Learning Outcomes, and Assessments. One can also see how courses are placed to ensure progression.</p> <p>STCL: Has a well-established process and templates to ensure that the mapping of course learning outcomes to program learning outcomes ensures not only the achievement of program vocational learning outcomes but also the appropriate sequencing of courses and laddering or scaffolding of course learning outcomes. It also validates the appropriateness of pre-requisites and co-requisites in the program. This process is situated at the center of course development effort as the assessment, content, and learning activities flow from the course outcome statements.</p> <p>NIAG: Curriculum mapping (or curriculum visualization) is a process that is fundamental in confirming that programs of instruction provide reasonable opportunities for students to achieve the vocational and non-vocational program outcomes. Curriculum mapping assists faculty and administrators in better understanding how student learning outcomes are taught and assessed in a program of study by capturing and integrating curriculum data into a tailored series of charts, graphs and statistics. Through a series of guided questions, faculty provide rich input that will articulate how learning outcomes are aligned, integrated and achieved across course offerings.</p> <p>CENT: The college has developed and implemented COCO (Centennial Online Course Outline Tool). This powerful and robust tool ensures the consistent development of curriculum and course outlines with regard to mapping learning outcomes and explicitly providing direction for appropriate and consistent assessment and guidance for weekly structuring of course delivery.</p> <p>Mapping</p> <p>STCL: The robust program mapping process (at program creation and during its lifecycle for any proposed changes) is a significant assurance that students can be successful in achieving the programs learning outcomes. The learning plans and assessment plans from each course outline are mapped to the respective course learning outcomes which in turn are mapped to the program learning outcomes. This provides significant assurance that students can achieve the programs learning outcomes.</p>
<p>2.3 Ensures that course learning activities, assessments, and Prior Learning Assessments Recognition (PLAR) mechanisms are consistent with and appropriate to the course learning outcomes, PVLOs and EESs, and support meaningful acquisition of the required skills and knowledge.</p>	<p>Course Outline control and repository</p> <p>ALGO: Once the program has launched, the Course Outline Mapping and Management System (COMMS) provides faculty teams the opportunity to view curriculum maps for ongoing validity and refinement. Course to outcomes maps are complemented by the program overview table, where at a glance, the distribution of learning activities and evaluations for each level of the program can be reviewed with an eye to their appropriateness, sequencing and variety assessments are linked to the VLOs, CLRs and EES within the course outlines.</p> <p>Teaching and Learning Plans</p>	



		<p>NIAG and SLAW: Every course and faculty create a 'Teaching and Learning plan' that is an extension of the Course Outline, which clearly identifies the connection between the Course Learning Outcomes, Essential Employability Skills and Assessments as they relate to the VLOs, as well as when and how students will be required to demonstrate their learning through assessments. It can also help students to understand how the course functions in relation to the other courses in their program of study.</p> <p>Prior Learning Assessment</p> <p>ALGO: Each course outline notes whether PLAR is applicable to the course, and if so, how a student would be required to demonstrate their prior learning of the outcomes as indicated on the course outline. Individuals applying for PLAR credit recognition for specific courses are guided to review the course outlines and course learning requirements (CLRs) associated with the individual courses of interest.</p> <p>STCL: A template is used to initiate and record the results of a PLAR process. The form requires faculty to review all outcomes before determining the appropriate method of assessment (e.g. portfolio, demonstration, interview, etc.). The appropriateness of PLAR decisions made by faculty and approved by Chairs is regularly reviewed, monitored and reported on by the Executive Director of the Accountability Office.</p>
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<p>3. CONFORMITY WITH GOVERNMENT REQUIREMENTS Effective quality assurance mechanisms ensure the conformity of programs of study with relevant government requirements.</p>	<p>A college-wide conformity with government requirements:</p>	<p>Overall quality assurance mechanisms for the implementation of programs of study: <i>Mechanism to ensure quality, alignment, conformity and coherence of programs of study. Ability of these mechanisms to identify areas of strength or deficiency to ensure quality programs of study, and implement corrective measures to address areas of improvement.</i></p>
	<p>3.1 Ensures that program titles are consistent with established CVS Titling Protocols.</p>	<p>New Program Titles STCL and ALGO: New program development process ensures that program titles are consistent with the established college system for titling protocols and validated standard titles. When titles are identified for new programs, they are done so under the guidance of a Curriculum Coordinator, with input from relevant faculty and external bodies as well as the ad hoc advisory committee. The proposed titles are reviewed and adjusted as may be seen necessary during this early development process based on existing comparable programs in the province and the established titling protocols established by CVS. In appropriate cases, the Special Coordinator Center for Academic Excellence would consult directly with the Credentials Validation Service for guidance.</p> <p>Modification of Program Titles STCL and ALGO: Modification of program titles is done under the guidance of a Curriculum Coordinator, with input from relevant faculty and external bodies as well as the program advisory committee.</p>
	<p>3.2 Ensures that programs of instruction meet or exceed the provincial credential validation framework (CVF).</p>	<p>General Education: NIAG: General Education electives are jointly approved by the Liberal Studies (Welland Campus) Associate Dean and the Academic and Liberal Studies (NOTL) Associate Dean. The ADs consult with the General Education Coordinators on each campus and follow the considerations and criteria for general education course development outlined in the General Education Course Development Checklist, which was informed by the Minister's Binding Policy Directive Framework, and Niagara College practice.</p> <p>CONS: Has a committee that ensures every program is aligned to all ministry requirements (including Gen Ed, ESS).</p>
	<p>3.3 Ensures that programs of instruction have appropriate Program Advisory Committees (PAC) and that mechanisms exist for the PAC to provide meaningful input into program relevance and quality.</p>	<p>Effective use of PACs ALGO and LAMB: A policy was established in accordance with the MTCU Framework for Programs of Instruction. The Board of Governors has, through the President, directed that there shall be an Advisory Committee for each Program, or cluster of Programs, and that the Advisory Committees shall report annually to the Board.</p> <p>LOYT: A standardized agenda has been developed for the biannual PAC meetings to ensure that relevant industry-related feedback is discussed and an annual PAC report is submitted to the Office of the President for review. PAC meeting minutes are a key element of evidence for program teams in the College's five-year culminating Program Quality Assurance reviews to demonstrate rationale for changes and to report the effectiveness of those changes.</p> <p>SENE: A Program Advisory Committee Status Report is presented each year to the Academic Planning and Student Affairs committee of the Board of Governors in order to keep the board up-to-date on PAC activities. The report includes meeting frequency, number of PAC members, last meeting date, and examples of agenda items. Each Chair is accountable for the reporting of his/her PAC activity.</p> <p>NORT: Program advisory committees are being refreshed to incorporate a diverse membership including recent graduates.</p> <p>SHER: PAC members are committed to promoting the Sheridan "brand" and take their role of ensuring that Sheridan's programs of instruction are consistent with current and future workplace expectations very seriously.</p> <p>CAMB: Has a strong connection with its community, achieved through genuine inclusion of the PAC members in the development and implementation of QA initiatives and practices.</p>



		<p>MOHA: The College has strong affiliations with the community and is well connected to industry. These affiliations and partnerships support the college in keeping the college and the programs current and relevant. These connections also provide opportunities for co-ops and internships. The City School offers mobile classrooms and free courses to introduce college to high-need communities.</p>
	<p>3.4 (previously 3.5) Ensures that changes to provincial program standards are communicated to all relevant stakeholders and implemented in a timely manner to assure that all programs are current.</p>	<p>Mapping before Responding to the Letter from the Ministry for the revision of Standards STCL: The Centre for Academic Excellence arranges to meet with the program Coordinator to map the program curriculum to the newly updated or new provincial program standard. Ultimately, this review of the mapping and re-mapping will identify any gaps or other issues relating to the program curriculum and its ability to implement the new standard. Once this mapping is done an action plan is created, and a verification document is completed and signed by the Centre for Academic Excellence and the Program Coordinator to assure the President that the Program will be able or not to be successfully implemented by the expected date.</p>



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<p>4. PROGRAM DELIVERY AND STUDENT ASSESSMENT Effective quality assurance mechanisms ensure the quality of program delivery and student assessment.</p>	<p>A college-wide program delivery and assessment of students:</p>	<p>Overall quality assurance mechanisms for the delivery of programs of study and student assessment:</p> <p><i>Mechanism to ensure quality, consistency and value of teaching methods used to deliver programs of study; and, of the fair and equitable assessment of students. Ability of these mechanisms to identify areas of strength or deficiency to ensure quality of program delivery and student assessment, and implement corrective measures to address areas of improvement.</i></p>
	<p>4.1 Ensures that instructional activities and assessments are consistent with and appropriate to the course learning outcomes, and well suited to all locations and delivery methods.</p>	<p>Mechanism to ensure consistency of program delivery independent of location or delivery mode STCL: All courses must be delivered in conformity with the learning and assessment plans set out in the approved course outlines regardless of the site or mode of delivery. There is only one authorized course outline for each course regardless of the number of sections, delivery locations or delivery methods.</p> <p>SLAW: Every effort is made for multi-campus programs to collaborate in the delivery of a common program of study for core vocational outcomes (SLC has thirteen such programs). This is accomplished through multi-campus Formal Program Review teams and Curriculum Mapping teams and multi-campus Lead Manager Meetings.</p> <p>CONF: In order to further ensure consistency in the standards for program delivery at the regional campuses and when using third party institutions the College maintains: a) A set of Regional Protocol guidelines (directed at the delivery of programs at its eight regional campuses located, b) An integrated Plan that captures the regional delivery plan to students.</p> <p>FLEM: There is notable collaboration between faculty members. Also, various programs conduct weekly faculty meetings that ensure consistency and awareness of issues needing to be addressed.</p> <p>FANS: Child and Youth Care (CYC) program team and Centre for Academic Excellence (CAE) developed of supported a Cross Campus Coordination Initiative. This process is being carried forward to other multi-campus programs with facilitation by CAE and the CYC program coordinator.</p>
	<p>4.2 Engages faculty in regular experimentation, sharing and evaluation of new strategies, methods and tools for teaching and learning that are consistent with best practices and support ongoing development across all programs of instruction.</p>	<p>Mechanism to encourage teaching staff experimentation of new teaching methods SENE: Seneca offers various opportunities for teaching staff to engage in regular experimentation and innovation in new methods of teaching and learning. The Academic Plan (2012-17) states that “Seneca will develop a cross-disciplinary, networked approach to learning that emphasizes diverse learning experiences, both virtual and physical, through a rigorous, flexible and relevant curriculum”. Seneca has inspired a cross-disciplinary approach through the creation and expansion of personal and professional learning networks, connecting students and faculty across various disciplines to experiment with cross-disciplinary teaching and learning, and through experiential learning opportunities.</p> <p>CAMB: The Teaching and Learning Innovation Hub encourages innovation and new approaches to learning. It provides orientation and training for faculty and one-on-one support. The Hub provides the space and technology for training, educational technology experimentation, research, and communal sharing of practice and results.</p> <p>CANA: Teaching staff are encouraged to explore, monitor and disseminate new teaching and learning methods. Staff can practice in a ‘sandbox’ in the learning management system, a newsletter outlining experiential learning is distributed, content rooms are available, and there is a Facilitating Learning in Higher Education program (FLHE).</p> <p>MOHA: Has a strong commitment to improving and expanding the students’ opportunity for experiential learning. The creation of the Centre for Work Integrated Learning is an example of this commitment. The College has dedicated UDL consultants that work with faculty to modify their courses including delivery and assessment to meet the needs of diverse learners. The faculty also have access to online resources to assist them with this work.</p>



	<p>4.3 Ensures fair and equitable evaluation of student achievement through valid assessment methods, accompanied by prompt and constructive feedback on student performance.</p>	<p>Mechanism to ensure comprehensive and timely assessment and feedback to students LACI: Système Analytique et Visuel d'Observation, d'Identification et de Rétroaction(SAVOIR) is a tool that was designed to allow teachers to communicate feedback to each student on an ad hoc basis. It also allows students to check their progress and performance at any time. In addition, the student receives feedback on week 3 and 6 of every term as well as relevant recommendations on the Student Portal to help him/her in their academic success.</p>
	<p>4.4 Provides holistic, integrated activities for imminent program graduates to demonstrate their capabilities with regard to the PVLOs.</p>	<p>Mechanisms to assess the capabilities of graduates or eminent graduates GEOR: Georgian's strong commitment to preparing students for the workforce is evident in its long history of co-operative education. The Centre for Co-operative Education, Internship, and Career Services offers over 6200 employer connections to help students obtain practical work experience. GRBR: The college works to ensure our near graduates are provided with a variety of field placement and externship experiences and assessments that provide the opportunity for students to demonstrate mastery of their program vocational outcomes in multiple venues. In line with the college's Strategy2020, they continue to enhance, improve, expand and evaluate field education. The college has implemented a set of Field Education Minimum Standards (4.4.1) since its 2010-11 audit and currently the college offers a field education component in 94% of programs. SLAW: Many of the programs have capstone projects or courses.</p>



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<p>5. EXISTENCE, MONITORING AND COMMUNICATION OF POLICIES AND PRACTICES THAT INFLUENCE AND IMPACT ACADEMIC QUALITY</p> <p>Effective quality assurance mechanisms ensure the communication and monitoring of established academic policies and practices related to academic issues.</p>	<p>A college-wide monitoring and communication system of existing academic policies and practices:</p>	<p>Overall quality assurance mechanisms for the monitoring and communication of academic policies and practices:</p> <p><i>Mechanism to ensure quality of programs of study. Ability of these mechanisms to identify areas of strength or deficiency to ensure quality programs of study, and implement corrective measures to address areas of improvement.</i></p>
	<p>5.1 (previously 5.6) Ensures that all applicable college, department, and program academic policies and procedures are published and communicated to all relevant stakeholders and applied consistently.</p>	<p>Communication SENE: Uses multiple media (Orientation package, student handbooks, website, OneCard activation) to ensure students are aware of the academic policies that will govern their academic studies.</p>
	<p>5.2 (previously 5.7) Ensures that established academic policies and procedures are reviewed and monitored regularly and consistently.</p>	<p>Collaborative development of academic policies GRBR: Employs a formal, active academic policy-making process, rather than a college 'meta' policy to effectively ensure that academic policies and practices are monitored regularly. The college initiated a formal review of the responsibilities and processes for categorizing, developing, reviewing, renewing, approving and publishing academic policies in 2012-13. Once college-wide challenges and opportunities were identified, a plan was put in place to address these challenges under the leadership and oversight of the Office of Academic Excellence, in collaboration with the Registrar's Office and with the support of a new college-wide policy committee, the Academic Policy Review Taskforce.</p>
	<p>5.3 (previously 5.2) Ensures that academic policies and procedures regarding admission are established and applied for all programs offered by the college.</p>	
	<p>5.4 (previously 5.1) Ensures that academic policies and procedures regarding student progression are established and applied for all programs offered by the college.</p>	
	<p>5.5 (previously 5.2) Ensures that academic policies and procedures regarding prior learning and transfer credit (recognition) are established and applied for all programs offered by the college.</p>	
	<p>5.6 (previously 5.3) Ensures that academic policies and procedures regarding accommodation and assessment are</p>	



	established and applied for all programs offered by the college.	
	5.7 (previously 5.3) Ensures that academic policies and procedures regarding awarding of credentials (certification) are established and applied for all programs offered by the college.	
	5.8 (previously 5.4) Ensures that appropriate academic policies and procedures exist regarding the establishment of informal and formal arrangements with external educational bodies (e.g., partner institutions) with regard to program admission, progression, laddering, awarding of additional credentials, certifications, and QA.	



STANDARDS	REQUIREMENTS	COMMENDATIONS (MECHANISMS RECOGNIZED BY THE RESPECTIVE AUDIT PANEL TEAMS AS BEST PRACTICE)
<p>6. AVAILABILITY AND ALLOCATION OF COLLEGE-WIDE RESOURCES</p> <p>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 (PVLOs).</p>	<p>A college-wide monitoring and communication system of existing academic policies and practices:</p> <p>6.1 Ensures that faculty involved in the program:</p> <ul style="list-style-type: none"> possess the combination of experience and qualifications appropriate to, and required by, the program credential, the field of study, and the curriculum they are hired to teach; undergo appropriate selection and hiring processes; receive appropriate academic guidance and onboarding; are provided with developmental feedback and are appropriately evaluated (performance appraisal). 	<p>Overall quality assurance mechanisms for the planning of programs of study:</p> <p><i>Mechanism to ensure the implementation of planning and following-up of result; the alignment of human, fiscal and material resources with education needs of programs of study. Ability of these mechanisms to identify areas of strength or deficiency to ensure quality programs of study, and implement corrective measures to address areas of improvement.</i></p> <p>Hiring</p> <p>GRBR: George Brown College has well-defined procedures that ensure teaching staff involved in every program possess the right combination of experience and credentials in the field of study. The Chair and Dean of an academic program work in partnership with a Senior Human Resources Consultant throughout the process (job posting, interview process, credential validation, reference checks).</p> <p>HUMB: Full-time and partial-load faculty positions are subject to the hiring policies laid out in the collective agreement. It provides guidance for the recognition of teaching and professional experience. Humber's Human Resources Services (HRS) offers a series of workshops called Managing Within the Collective Agreement where managers learn about recruitment, employee selection criteria, interviewing techniques and human rights, equity and diversity, among other topics. When there is a hiring need, the Hiring Manager for the respective unit/academic school will contact their HR Business Partner. HRS collates the necessary information for the job posting and advises on the appropriate title, qualifications, salary range, and category (union/non-union) for the position. Approval of the final job posting is based on the expectation that it follows good practice and adherence to policies. HRS handles posting of the position and screening of incoming applications. It is standard practice that a senior-level representative from HRS sits on the interview panel along with the participants from the department that is hiring. This representative ensures that a series of role-specific interview questions are incorporated into the interview and uses a standardized scoring mechanism for the assessment of the candidate. Once a candidate is selected by the department, HRS handles all the data entry associated with the hire including the verification of qualifications, the drafting of the offer letter and details with respect to the College, union and employee benefits.</p> <p>DURH: Human Resources maintains an Applicant tracking system to enable prompt responses to filling vacancies and as a means of building an inventory of skillsets to ensure programs can maintain a level of specialty expertise should the need arise.</p> <p>Orientation/Onboarding</p> <p>CONS: All new faculty receive the Faculty Handbook, which provides information regarding professional practices, teaching requirements and the evaluation of performance. The Handbook is updated annually to provide consistent information and ongoing orientation to teaching at Conestoga. Additional institutional orientation and support of best practices can be found on the Organizational Development website.</p> <p>GRBR: The Staff Development Office offers a wide variety of orientation, training, and professional development activities for all employees of the college. These activities are closely aligned with the strategic goals and directions of the college as set forth by the senior management team.</p> <p>CENT: There is a culture of sharing that the college has nurtured. COLT (Centre for Organizational Learning and Teaching) works in supporting and enhancing the delivery of programs and services through orientation and professional development of faculty and staff. Also, many of the more experienced faculty provide assistance to new and contract/part time faculty.</p> <p>Development</p> <p>STCL: When faculty members are first hired, it is a condition of their employment contract that they participate in an ongoing professional development program in outcome-based education and College-level teaching and learning.</p> <p>CONS: All new faculty members at Conestoga participate in new faculty orientation and the College Educator Development Program (CEDP). The</p>



		<p>purpose of these programs is to orient new faculty, enhance their teaching expertise and engage them in initial professional development, and expose them to the role of reflective practice.</p> <p>GEOR, CONS, SENE, GRBR, HUMB and DURH: These colleges demonstrate a commitment to the ongoing professional development of faculty. The colleges provide comprehensive, professional training through their Centres for Teaching and Learning, and Online Course Development training. Additionally, they have Employee Tuition Assistance Programs that support opportunities for faculty to pursue higher academic credentials, and to remain current in subject matter.</p> <p>NORT: There is an equitable distribution of professional development resources among all full-time employee groups.</p> <p>CANA: Provides a professional development transcript to staff who engage in PD activities – this is cited as a best practice for motivating staff to engage with PD activities.</p> <p>SAUL: Professional development is made available in spite of limited resources, made possible through creative approaches to finding PD opportunities.</p> <p>Performance Reviews</p> <p>CONS: To evaluate the effectiveness of orientation practices, professional development activities, policies and procedures, as well as to foster conversations about best practice, teaching staff participate in a performance review every 2 years. The review provides an opportunity for faculty and chairs to examine past performance and look ahead to new initiatives and opportunities. The performance appraisal process for faculty has been enhanced as part of Conestoga’s continuous quality improvement effort. Current appraisals provide detailed competencies and planning sections that align with key organizational initiatives and enable consistent and effective faculty assessment.</p> <p>CONF: Additionally, during the probationary period the new hire is continuously undergoing evaluation and assessment to ensure suitability of knowledge and expertise. Once the probationary period has been successfully completed staff and faculty become mandatory participants in a regular performance review cycle. The performance review schedule for teaching staff is tracked by the Human Resource department. Although the annual student evaluations provide interim monitoring of performance which provides opportunity for continuous feedback and improvement.</p> <p>DURH: Professional development is linked to the performance review and performance reviews are happening annually with follow up at 6 months, a practice that reinforces the focus on the quality, currency and performance of staff.</p> <p>CANA: All faculty evaluations incorporate a reflective component and there is an intentional focus on reflection around professional practice, specifically teaching and learning practices.</p>
	<p>6.2 Ensures that faculty execute their professional responsibilities by establishing and communicating appropriate expectations, using mechanisms to indicate whether expectations are being met, and are engaging in ongoing professional development activities.</p>	<p>NIAG and GEOR: Curriculum Committees (Dean Councils) are established to give students in a program the opportunity to make recommendations regarding curriculum and course objectives. These committees provide a forum in which students, faculty and administration jointly discuss the curriculum and course objectives of the program with the aim of continuous improvement in the quality and relevance of the program. Curriculum Committees are comprised of a minimum of two student representatives who are elected by students, the program coordinator, professors and the Associate Dean who serves as the Chair of the committee and calls the meetings.</p> <p>CENT: Instructors, program coordinators, and chairs make themselves accessible one-on-one to students. This availability of individual attention can have a very positive effect on student experience and success.</p>
	<p>6.3 (previously 6.4) Ensures that there are established regular mechanisms for all academic support and advising services to determine the quality and adequacy of</p>	<p>Service Reviews and Service Agreements</p> <p>SLAW: Performs Service Reviews, similar to reviews conducted for academic programs. A Service Review Program is a systematic process through which the College conducted a comprehensive examination of all support and administrative services. The review was based upon a set of pre-determined measurement criteria with the objective to: evaluate the alignment to the strategic direction of the College; determine the appropriate</p>



	<p>those services and to implement changes where required.</p>	<p>level of service that should be offered; identify opportunities to increase revenue, reduce costs and improve process efficiencies; determine a process for the on-going review of services.</p> <p>ALGO: Service agreements between Academic and non-Academic departments have been created as useful tools to identify and confirm expectations on both sides. The key elements define the benchmarks for core and ad hoc service provision, using current (where possible) standards and metrics by which the provision of goods and services will be measured and performance tracking that is simple and meaningful.</p> <p>Coordination of Student Services</p> <p>BORE: Uses a health circle between counselors and the nurse practitioner to maximize interventions and referrals to appropriate external resources.</p> <p>CONF: Has the 'Red Couch', a room with videoconference capabilities where a student can go and get access to support independent of campus.</p> <p>CENT: The college has created a Student Advising Model that utilizes "Success Advisors" to provide academic advising for students. This allows program coordinators to concentrate on supporting delivery and quality assurance in their programs. There are also "Pathways Advisors" for students that have questions or issues regarding their program choice or pathways within and beyond their current program.</p> <p>SHER: Full dedication towards student success is realized through close inter-professional collaboration amongst team members.</p> <p>CANA: Academic Support and Advising Services use screening, support, and follow-up measures for at-risk students through a triage process that recognizes the immediacy of some student needs and has reduced wait times for students.</p> <p>SAUL: Exemplary practice that focuses on services to students, particularly in counselling services and the use of scenarios during the first week of class to help students understand the available support resources.</p> <p>MOHA: Is a leader in developing student success strategies. The college partners with the Education Policy Research Initiative and the Higher Education Quality Council to investigate student success initiatives to determine their efficacy. They offer a wide range of support services including outreach to potential students in vulnerable communities. There is a commitment to seeking ongoing feedback from the students to ensure the services are adequate and appropriate.</p> <p>The respectful and targeted support for Indigenous students and breadth of services and proactive outreach approach is exemplary. The college works to overcome barriers that may prevent the participation of Indigenous students. The college routinely solicits feedback from stakeholders to expand and improve these services.</p>
	<p>6.4 (previously 6.5) Ensures that support learning services staff providing student support services:</p> <ul style="list-style-type: none"> • possess the combination of experience and qualifications appropriate to their roles; • undergo appropriate selection and hiring processes; • receive appropriate orientation, guidance and onboarding; • are provided with continuous support in their professional development; 	<p>Hiring and Onboarding</p> <p>CONS: The Hiring Procedure outlines the requirements for the hiring manager and human resources, and the Recruiting Overview expands on the process. A human resources representative participates throughout the recruitment and selection process, reviews the posting for the position, participates in the interview, and assesses the potential employee's qualifications and alignment with Conestoga culture. The Organizational Development Plan outlines support and training for support staff. Additional support is provided through one-on-one, team and departmental meetings.</p>



<ul style="list-style-type: none"> are provided with developmental feedback and are appropriately evaluated (performance appraisal). 	
<p>6.5 Ensures that support learning services staff execute their professional responsibilities by participating in continuing professional development or education.</p>	
<p>6.6 Ensures that there are effective processes for identifying, reviewing and addressing needs related to:</p> <ul style="list-style-type: none"> adequacy of faculty and support learning services staff; adequacy and quality of learning resources; adequacy of informational technology resources that relate to program delivery and student use; adequacy and quality of equipment and facilities needed for instruction. 	<p>BORE: Learning infrastructure requirements are reviewed during the annual program review as well as the results of the student satisfaction surveys on performance indicators, and course surveys, environment, class visits, student forums and e-mails received at Solutions e-mail. The approach is a student-centered focused on academic success and achievement of learning outcomes. It is therefore expected that all services meet the needs of education. Thus, all services for students, including facilities, information technology and COOP Boreal, which manages the purchase of mandatory textbooks and the cafeteria, participate in the implementation of improvement action plans of the Quality Office as well as in the biannual update meeting of these same action plans.</p> <p>HUMB: Each October budget holders are invited to submit requests/changes (with rationale) for staff complement(s). This request is submitted to the appropriate Vice President. The Executive Team then meets to consider all submissions and decisions are communicated in December. For positions tied to program delivery, complement requests are submitted to the SVPA in writing. The requests are then discussed between the Dean and SVPA, prior to the SVPA presenting them for discussion with the Executive Team. Rationale and decision-making processes are based on program relevant factors such as full-time student to full-time faculty ratios, types of delivery, special program or health and safety regulations affecting ratio requirements, among other considerations.</p> <p>BORE: Annual budget planning provides for the allocation of resources for staff allocation. It also provides justification for the addition of administrative and school staff. The process involves supervisors listing the expenditures required to cover staffing requirements. Programming planning takes place 18 months before the program's offer, which allows the planning of human resource needs for school and administrative staff. Human resource requirements are reviewed by Deans and campus directors during the annual review of the program, based on the results of course and environmental surveys and class visits, with comments received by the program teams, and the succession plan following early retirement. They ensure a sufficient number of teachers, tutors, and counselors to ensure student success.</p> <p>Commitment to Student Success NORT: The College's commitment to student success across all campuses is evident through employees' resolve to support any student who needs help.</p> <p>Integrated Planning Process HUMB and SENE: The process supports college-wide strategic decision-making by comprehensively reviewing resources and commitments and ensuring alignment with financial resources and academic priorities. This iterative process provides an opportunity for stakeholder groups to articulate their priorities and initiatives in light of the college's overall priorities.</p> <p>DURH: The <i>Corporate Risk Register</i> is an example of ensuring there is a constant focus on quality and internal/external factors that might have an impact on continuous improvement and progress towards quality. This tool identifies issues and assigns a risk rating, action required and accountability for action.</p> <p>CENT: The college's Strategic Investment Plan and Strategic Initiatives Fund are important mechanisms that allow the college to articulate its priorities and support the development of those priorities with appropriate resourcing. This mechanism for allocating resources is critical to supporting the quality of identified initiatives and the panel views this as an important element to an overall commitment to quality.</p>



		<p>CAMB: The concept of 'one budget, one Cambrian' extends across the College. This is realized through having the budgets of all areas governed by the Budget Development Framework. This process connects the Strategic Plan to the financial support of quality educational experiences both in instructional delivery and student success.</p> <p>Multi-Year Budget Planning SLAW and HUMB: The College strategic priorities must always be at the forefront of the Multi-year Budget Planning to ensure an innovative, vibrant organization that meets the ever-changing needs of our students and community.</p> <p>Collaborative Leadership MOHA: There is a culture of collaboration among the senior leadership team and members of the senior leadership team demonstrate a spirit of mutual respect and support for each other.</p>
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Common Challenges

- Requirement 1.6
Manages program maintenance records arising from program quality management processes.
- Requirement 2.2
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.
- Requirement 2.3
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.
- Requirement 3.2
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).
- Requirement 3.3
Ensures that programs of instruction are consistent with the current workplace expectations (i.e. essential vocational skills, attitudes, knowledge, and competencies).
- Requirement 4.3
Ensures fair and equitable evaluation of student achievement through valid assessment methods, accompanied by prompt and constructive feedback on student performance.
- Requirement 5.2 (previously 5.7)
Ensures that established academic policies and practices are reviewed and monitored regularly and consistently.
- Requirement 6.1
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 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.
- Requirement 6.3 (previously 6.4)
Ensures that academic support and advising services meet the needs of the students and facilitate the achievement of the program vocational learning outcomes.
- Requirement 6.5
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.
- Change in personnel, loss of knowledge and expertise.

Common Successes

- Standard 5.
- Standard 6.
- Commitment of faculty to the success of their students.
- Work of Quality Management Leads.

Self-study Submission

- Size of the report: between 60-100 pages maximum.
- Accessible: in multiple media.
- Flow Charts: use of graphics to explain processes.
- Evidence: linked, numbered, easy to access.
- Affirmations: are required as part of the self-assessment of each Standard. They need to be SMART (Specific, Measurable, Aligned, Realistic/Relevant, and Time-bound).