

COLLEGE QUALITY ASSURANCE AUDIT PROCESS (CQAAP)

AUDIT REPORT

DURHAM COLLEGE

DATE OF SITE VISIT: May 30-31, 2018

PREPARATION DATE: June 25, 2018

SUBMISSION DATE: July 3, 2018

PREPARED BY: Bruce Tawse, Deidre Bannerman, Kelly Fox



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APPROVAL OF THE AUDIT REPORT

This report represents the findings of the College Quality Assurance Audit Process for **DURHAM COLLEGE**.

This report has been prepared, reviewed, and accepted by all parties to the Audit, including the college President, members of the audit panel, and the Chair of the OCQAS Management Board. The signatures of the representative parties demonstrate their acceptance of the content of this report.

COLLEGE PRESIDENT

Don Lovisa Signature: 	Date: November 1, 2018
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CHAIR- OCQAS MANAGEMENT BOARD

Joy Warkentin Signature: 	Date: October 30, 2018
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AUDIT PANEL MEMBERS

<i>Chair</i> Bruce Tawse Signature: 	Date: July 3, 2018
<i>Panelist</i> Deidre Bannerman Signature: 	Date: July 3, 2018
<i>Panelist</i> Kelly Fox Signature: 	Date: July 3, 2018



EXECUTIVE SUMMARY

1. **Conclusions:** *General comments and summary of the findings of the audit panel.*

Durham College continues to operate with an emphasis on quality, a focus that supports the College's mission of "The Student Experience Comes First".

As part of the *College Quality Assurance Audit Process (CQAAP)* requirements, the College prepared a very comprehensive *Self-Study Report* and supporting documentation that allowed the Audit Panel to gain insight into the College's activities and processes. This report provided an informative foundation for discussion and strategies leading up to the subsequent Site Visit. In the *Self-Study Report* the College was very frank and honest in acknowledging areas where it felt further improvements were required to push its quality agenda forward even further. The extensive list of "Areas for Improvement" created by the College helped the Audit Panel to understand the College's own assessment of the level of quality assurance it was striving to meet.

During the Site Visit the Audit Panel met with 109 staff, faculty, students, administration members, industry representatives and other stakeholders, all of whom were willing to share their thoughts, opinions and comments. The Panel found all of the participants to be prepared and ready to engage in the conversations.

It was evident that Durham College has fostered a culture of collaboration. The Panel found that the various stakeholder groups definitely understood the importance of quality in helping them to achieve their individual departments' goals and those of the colleagues in other areas of the College. This emphasis on collaboration permeated the processes the College has in place and was in evidence during the Site Visit conversations.

Durham College has many processes, procedures and activities in place to promote and support the quality of its programs and operations. The Panel was able to identify three overarching themes of Consistency, Professional Development and Systems that seemed to capture the essence of what the College is doing that enables and supports the work of its community.

Through the *Self-Study Report* and the Site Visit, the Audit Panel feels that the College has met all of the Ontario Colleges Quality Assurance Service's *Standards* and these are addressed in this Audit Report.

The Audit Panel congratulates Durham College on its quality assurance approaches and encourages the College to continue to seek ways to communicate the importance of QA in its policy-making and decision-making.



2. Results

a. Audit Results

Standard	Result		
1	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met
2	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met
3	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met
4	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met
5	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met
6	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met

Audit Decision: *(select one)*

- Mature Effort**
- Organized Effort
- Formal Effort



STIPULATIONS

1. Commendations

Provide clear statements that articulate areas where the college has shown exemplary or leadership in the field of quality assurance and improvement. These are mechanisms that are especially good and may be worthy of emulation by other colleges in the system.

The Panel was able to identify three “themes” that stood out and exemplified the quality assurance practices of the College. While the information that led to the recognition of the three themes was quite extensive, the Panel felt that these three categories best summarized the quality initiatives that the College is pursuing. The three themes were:

- Consistency
- Professional Development
- Systems

Consistency:

The Panel heard comments and saw practices that spoke to consistency between the various stakeholders regarding the College’s QA processes.

- There was common use of QA “language”, approaches to quality and especially an overall understanding of quality, even among students.
- It appears that the faculty have a good awareness and understanding regarding the QA processes. The students showed an awareness of the services available to them and where to go for help, for example when seeking transfer credits. They told the Panel of the various ways available to them to provide input on program quality, such as feedback opportunities, how to access information through *My Campus*, and their knowledge of KPIs. The Panel heard how the faculty are accessible to students and responsive to their input, whether through student feedback surveys or direct one-on-one discussions about their course or program.
- PAC members were extremely pleased with the quality of graduates and their work readiness, with Durham graduates their employees of choice when recruiting.

Professional Development

The Panel felt that Durham College has some practices around professional development that warranted commendation.

- It is evident that the C.A.F.E. is a well-respected resource for professional development. The Panel heard how responsive the C.A.F.E. is to requests from faculty for support, often creating learning opportunities for them within a very



short timeframe. The faculty view these opportunities as a commitment from the College to their development as a means of ensuring they are able to continue to deliver quality programs.

- The Panel heard that the faculty respect administration's responses to requests for discipline-specific professional development opportunities. To them, this also indicates a level of respect for their personal development and investment in them and their programs.
- The Panel also heard that that 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 and is to be commended.

Systems

- The College shared demonstrations of *WebCOT™*, *Tableau™*, *MyCampus™* and *DC Connect™*. These are tools that enable a level of broad and consistent level of communication, both for staff and students, and allows for a uniform approach to capturing information about courses, learning outcomes and guidelines for delivery. *Tableau* provided insight into its effectiveness as a tool to facilitate program reviews and development. The College is to be commended for developing, supporting and communicating these mechanisms.
- The mechanisms for Annual Program Reviews, Comprehensive Program Reviews, feedback loops, input from stakeholders regarding program and course changes all seem to be evident, understood by those who are involved in these activities and accessible.
- The *Corporate Risk Register* is an example of Durham College 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.
- 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. No doubt other colleges have similar approaches, but Durham College has adopted an approach that is proactive and intentional.

Apart from the three overarching themes of *Consistency*, *Professional Development* and *Systems*, the Panel also noted the College's approach to working together towards a common goal of quality. This "culture of collaboration" was very evident throughout the Audit, both through the documents and evidence provided in the *Self-Study Report* and the perceptions gained during the Site Visit. Time and time again the Audit Panel heard corroborating comments



from various stakeholder groups, comments that indicated that all involved sought to ensure they were striving to work together towards a common goal: student success and the quality of that experience. This notion of working collaboratively was embedded in the language of the stakeholders and threads of this activity were woven throughout the conversations. Groups were very respectful of the work their colleagues are doing and focused on supporting each other in reaching their respective goals. The Panel heard about the collaborative approach to budgeting that focuses on priorities in support of programs, student experiences and effective learning environments.

The Audit Panel heard two very specific comments expressed by stakeholders during the various interviews and the College is to be commended on these sentiments. These are:

“We do quality, but we are always reaching for even better quality, and we approach it as if it is just out of reach, but we never stop reaching for it”.

“The College has a great vibe and the people like working with each other”.

2. Affirmations

Provide clear statements that articulate areas where the college itself has found a weakness, identified the weakness, and intends to correct it (a plan of action has already been articulated). In effect, this is affirming the college's judgment and findings of its own self-study.

As noted in the *Self-Study Report* and during the Site Visit Durham College was very forthcoming with issues they have identified as “Areas for Improvement”. These twenty-two issues reflect the College's insight into their current quality assurance processes and ways to further improve services. These are:

- Proceed with introduction of APR process for programs offered through the School of Continuing Education (CE) in the 2017-2018 academic year. (Requirement 1.2)
- Update and implement changes to *Course Outline Policy and Procedure* as per the working group recommendations. (1.5)
- Develop and implement an online system to manage program lifecycle, program information data and all associated records to replace the current excel spreadsheet database and folder/files repository system for storing permanent records related to programs. (1.6)
- Implement the revised Curriculum Mapping Process to ensure that the VLOs are assessed throughout the program. (2.2)
- Update all course outlines to include program VLOs to indicate what VLOs are addressed in each course and at what level they are directly mapped to the CLOs. (2.3)



- Enhance learning plans to include a mapping areas to the CLOs for each week, linking the CLOs to teaching and learning, and thus ultimately to the CVLOs. (2.3)
- Update and maintain PLOs in PLOR database in anticipation of using the database to support the program life cycle data and records project mentioned in Standard 1. PLOs will be posted on Durham College's public website. (2.3)
- Include approved program APS title in the Program Guides (posted in *MyCampus™*), in all marketing and promotional materials prepared by the School. (3.1)
- Institute a formalized monitoring/tracking process that accounts for all steps and identify all stakeholders in the process of communicating and implementing new MAESD Program Standards. (3.5)
- Include an EL experience to all programs of study to ensure that all students have an EL experience. (4.4)
- Continue working with schools and faculty to include an experiential learning opportunity to all programs of study. (4.4)
- Review, update and implement the *Admissions Policy and Procedure* which are currently out of date. (5.2)
- Review, update and implement the *Academic Integrity Policy (ACAD-101) and Procedure (ACAD-101.1)* which are currently outstanding and under review by the stakeholder working group. (5.3)
- All post-secondary students who register for Durham College courses will be required to attest to having reviewed Durham College policies and procedures. This additional step in the registration process is under development for implementation in spring 2018. (5.6)
- Increase collaboration between ORSIE and C.A.F.E. to strengthen the connection between research done through both departments, and enhance opportunities to share the results of their Scholarship of Teaching and Learning (SoTL) researchers with other faculty. (6.1)
- Create a new full-time faculty probationary checklist for the School Deans. The checklist would identify the C.A.F.E. specific requirements attached to a full-time faculty probationary status, providing the School Deans with an overall sense of where a particular faculty is in relation to C.A.F.E. supported training. (6.1)
- Development and implement a tracking sheet for all employee professional



development such as training, workshops, conferences, scholarly practice. Tracking form table/chart be created and maintained centrally by department/school. (6.1)

- Update the *Student At-Academic Risk Policy and Procedure* to provide more details regarding who is responsible for outreach and encouraging students to seek academic support. (6.4)
- Explore inclusion of administrative processes for recruiting, verifying credentials, and hiring contract faculty into the *New Academic Employees – Academic and Professional Credentials Requirements Policy (EMPL-316) and Procedure (EMPL-316.1)*. (6.5)
- Review, update and implement the *Space Policy and Procedure*. (6.6)
- Continue the work started by the Classroom Standards group to inform new and renewed teaching and learning spaces to meet twenty-first century standards. (6.6)
- Include additional data in the current room inventory spreadsheet such as including an AV tab of this list. (6.6)

The Audit Panel recognizes that the College has acknowledged and highlighted how it can continue to build on its current quality initiatives. The Panel applauds and encourages the College to continue to seek ways to maintain its attention to continuous improvement.

3. Recommendations

Provide clear statements that articulate areas as needing improvement. Recommendations may also be made in relation to areas of concern identified by the college in its self-study, and for which no plan of action has been articulated by the college.

Requirement 2.3

Course Learning Outcomes to Program Vocational Learning Outcomes Mapping

The Panel noted that the Course Learning Outcomes-to-Program Vocational Learning Outcomes mapping is still to be completed, and this is validated by the College's own comments in the Areas for Improvement outlined in the *Self-Study Report*. This updating of course outlines and the associated learning plans will be a significant improvement in communicating expectations to students and the Panel feels this work should be given priority.

Recommendation 1.0

Proceed with the CLO-to-PVLO mapping projects identified as an area requiring improvement.

Requirement 3.3

Program Advisory Committee Orientation



The Audit Panel raises a minor issue, but one the Panel felt warranted a recommendation. While the Program Advisory Committees are engaged and certainly focused on providing industry input to the content and quality of Durham's programs, the Panel heard that the onboarding and orientation process for new PAC members was less formalized and inconsistent than expected. New PAC members have resources such as the *PAC External Members' Handbook* and *PAC Resource Manual*. However, the process for new members also appeared to be more of an informal "mentoring" process with knowledge and expectations learned over time and through the experience of meetings. Although this approach appears to achieve the desired result for program quality, the Panel feels a more deliberate and formal orientation/onboarding process might help new PAC members in the early stages of their tenure and introduce a level of consistency for members.

Recommendation 2.0

Introduce a formal orientation process for new Program Advisory Committee members to supplement the existing resources provided by the College.

Requirement 6.4

Consolidation of Surveys / Development of a review tool

The Audit Panel noted that every service area conducts a different process to soliciting feedback on their individual departments and service areas. It is possible that multiple surveys may be duplicating information and continued surveying, especially on an annual basis, may lead to survey fatigue. The College has good practices in place to ensure service and may want to consider combining some surveys to develop an overall service review tool that encompasses a broad group of service areas.

Recommendation 3.0

Review the processes used by the different service areas to find a common review process/tool.