



Ontario College Quality Assurance Service

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

COLLEGE QUALITY ASSURANCE AUDIT PROCESS (CQAAP)

AUDIT REPORT

SAULT COLLEGE

DATE OF AUDIT VISIT: April 30 to May 1

SUBMISSION DATE: June 4, 2025

PREPARED BY: Deidre Bannerman, Richard Rush and
Barry Weese



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APPROVAL OF THE AUDIT REPORT


This report represents the findings of the College Quality Assurance Audit Process for **Sault 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

<p>Signature: </p>	<p>Date: October 24, 2025</p>
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CHAIR- OCQAS MANAGEMENT BOARD

<p>Signature: </p>	<p>Date: September 26, 2025</p>
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AUDIT PANEL MEMBERS

<p><i>Chair, Richard Rush</i></p> <p>Signature: </p>	<p>Date: July 9, 2025</p>
<p><i>Panelist, Deidre Bannerman</i></p> <p>Signature: </p>	<p>Date: July 9, 2025</p>
<p><i>Panelist, Barry Weese</i></p> <p>Signature: </p>	<p>Date: July 9, 2025</p>



STIPULATIONS

1. Commendations

There are four elements of the College's processes and practices that stand out as making significant contributions to the quality of the college's operations:

- The audit team commends the notable progress of the Institutional Quality and Learning Innovation department over the past 2 to 3 years. Key achievements include the CAFÉ framework, comprehensive standards and practice guides, and the New Faculty Orientation (NFO) program. During the audit team interviews, IQLI received recognition from the Board of Governors, and senior academic leadership, reflecting strong institutional support. Centralizing quality functions has been key to promoting consistency and enhancing the department's overall impact. (Requirement 1.2).
- The college has implemented the thoughtful use of common digital platforms, such as SharePoint and other Microsoft tools, to support academic quality assurance processes. Faculty, staff, and students report that these tools are easy to access and help ensure consistency and transparency. (Requirement 1.7)
- The audit team commends the Vice-President Academic's monthly Program Coordinator Forum, which fosters active dialogue and the exchange of current innovations across programs. (Requirement 4.2)
- The audit team commends the strong relationships observed between faculty and students, which contribute positively to the learning environment. Additionally, faculty members demonstrate meaningful engagement with industry, supporting student employment opportunities and ensuring the ongoing currency and relevance of program content. (Requirement 6.1)

2. Affirmations

The areas of improvement that were presented by the College in its Self-Study report (described in each section) are summarized below as they were presented in the Self-Study report, and their inclusion here expresses the audit panel's affirmation for each of them.

Note that the number of self-identified areas of improvement are considered as evidence of the college's commitment to addressing opportunities for improvement. The panel has linked the affirmations with specific requirements.

Sault College Affirms:

AFFIRMATION #1: the need for effective quality assurance processes that bring value to the people involved in and impacted by the process. As such, the College commits to redesigning the program review process for implementation May 2025. (Requirement 1.2)



AFFIRMATION #2: will incorporate more formal tracking of and follow up on, action items identified through the program review process. The Quality Assurance Office will manage a process for monitoring action on identified action items (Requirement 1.5)

AFFIRMATION #3: We will continue collaborative efforts toward increasing the recognition of prior learning for credit and will continue to lead a culture shift of defaulting to “yes” (defaulting to PLAR eligible). (Requirement 2.3)

AFFIRMATION #4: We will continue to work with Faculty on their development of PLAR assessments and grading criteria that fairly and effectively evaluate whether the course outcomes were met through the student’s prior experiences. (Requirements 2.3 and 4.3)

AFFIRMATION #5: Improve communication of program standards changes and formalize a program renewal work plan for standards implementation. (Requirement 3.4)

AFFIRMATION #6: Develop an Assessment of Student Learning Policy published prior to the start of the 2025-2026 academic year. (Requirement 4.3, 5.1 and 5.2)

AFFIRMATION #7: Undertake a review of student communications with the aim of consolidating and streamlining platforms to reduce communication fatigue. While many policies are posted to the Sault College website, not all academic policies are available there. A next step in our continued development of our work around policy management and communications to make all Academic policies available publicly. (Requirement 5.1)

AFFIRMATION #8: Commits to publishing all Academic policies on the public website. Program handbooks are perceived as a valuable communication mechanism to students. As such, our next commitment is around further supporting the use of these resources. (Requirement 5.1)

AFFIRMATION #9: Create a Program Handbook template for use by program teams across the College to communicate all program-specific and relevant college-side information to students. And finally, while we have made great strides in policy oversight giving policy oversight to department managers, removing the backlog at the Academic Policies Committee, there is still an important role for a policy-focused committee. (Requirement 5.2)

AFFIRMATION #10: Commits to re-establishing a committee focused on policy governance to ensure integrity of our Academic policies and consistency with each our strategic direction. (Requirement 5.2)



3. Recommendations

The Panel recommends:

RECOMMENDATION #1 (Requirement 1.3)

The college continue to develop and refine its data collection methodologies to ensure greater consistency across the institution. While new roles have been established to support this work, further maturation of the processes is needed to fully realize their intended impact.

RECOMMENDATION #2 (Requirement 1.4)

The college develop and consistently implement standardized data collection and analysis processes across all programs to ensure consistent program-level data is used effectively to inform decisions about program quality.

RECOMMENDATION #3 (Requirement 1.5)

The college refines the system for annual tracking of all Program Review recommendations and their implementation is put in place so that progress is visible beyond the Dean level and institutional trends and opportunities can be identified. In addition, the panel recommends that the college actively work on the formal tracking of and the follow up on, action items identified through the program review process; as per affirmation #2

RECOMMENDATION #4 (Requirement 2.3)

The college complete the good work already started on formally establishing quality assessment practices, including PLAR, as a priority for the College. Therefore, the panel recommends that the college actively continue to work with Faculty on their development of PLAR assessments and grading criteria that fairly and effectively evaluate whether the course outcomes were met through the student's prior experiences; as per affirmation #4.

RECOMMENDATION #5 (Requirement 3.4)

The college improves communication of program standards changes and formalize a program renewal work plan for standards implementation; as per affirmation #5.

RECOMMENDATION #6 (Requirement 4.3)

The college develops an Assessment of Student Learning Policy that ensures a fair and equitable evaluation of student achievement through valid assessment methods, accompanied by prompt and constructive feedback on student performance; as related to affirmation #6.

RECOMMENDATION #7 (Requirement 5.1)

The college ensure that all applicable college, department, and program academic policies and procedures are published and communicated to all relevant invested parties and applied consistently; as per affirmations #6, #7 and #8.



RECOMMENDATION #8 (Requirement 5.2)

The college consistently execute the timeline for policy review and revision and provide evidence on the success of the approach taken. Furthermore, the panel recommends the college establishes clear policies to address overlap from different policies originating from different policy owners that will impact other stakeholders. In addition, the panel recommends that the college actively works on the stated affirmations 6, 9 and 10 within the Self-Study report to address, improve and resolve items identified with requirement 5.2.

RECOMMENDATION #9 (Requirement 5.6)

The college establish an assessment of student learning policy/procedure, as well as review and update the accommodations policy/procedure, as needed. Furthermore, the panel recommends that the college implement consistent procedures for providing, monitoring, and reviewing academic accommodations and assessment practices.

RECOMMENDATION #10 (Requirement 6.1)

The college consistently applies the new processes for faculty performance appraisals beyond the probationary requirements in support continuous professional development planning.

RECOMMENDATION #11 (Requirement 6.2)

The college implement a continuous, coordinated, and systematic process for evaluating and documenting the adequacy of academic support and advising services and improving these services where necessary.

RECOMMENDATION #12 (Requirement 6.3)

The college puts mechanisms in place to ensure that all support services staff are appropriately evaluated through regular and consistent performance appraisals.

RECOMMENDATION #13 (Requirement 6.4)

The college enhance coordination between academic and service areas by establishing a formal mechanism for integrating key data and information (e.g. program review outcomes, PAC input, enrollment trends) into resource planning and budgeting decisions. This would support more effective evaluation of comparative program quality and needs, complement quality assurance processes, and inform budgeting and planning decisions.



CONCLUSION

It is the finding of the audit panel that Sault College has established quality assurance policies, processes, and practices. As evidenced through the Self-Study report and site visit, the college has committed effort and resources to achieve and improve its current level of quality assurance.

The primary reason for the college's success in achieving its current level of quality assurance is the notable progress of the Institutional Quality and Learning Innovation department over the past 2 to 3 years. Key achievements include the CAFÉ framework, comprehensive standards and practice guides, and the New Faculty Orientation (NFO) program. During the audit team interviews, IQLI received recognition from the Board of Governors, and senior academic leadership, reflecting strong institutional support. Centralizing quality functions has been key to promoting consistency and enhancing the department's overall impact.

As outlined in the full narrative, the audit panel has assessed that the college has demonstrated an "Organized Effort", with a rating of "Met" on four of the six CQAAP standards, and "Partially Met" on the remaining two. It should be noted that only two standards were met for all requirements within that standard. A total of ten requirements were deemed as partially met and a few requirements deemed met still have recommendations associated with them.

The college's affirmations demonstrate strong self-awareness of areas for improvement, which the panel considered in its evaluation. This self-reflection aided the audit panel in the assessment of the college's quality assurance state. The college has a few areas that the panel saw risks with either its processes or recognizes that the changes underway need time to mature to provide evidence of a "Mature" effort.

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 type="checkbox"/> Met	<input checked="" type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met
6	<input type="checkbox"/> Met	<input checked="" type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met

Audit Decision:

- Mature Effort
- Organized Effort
- Formal Effort



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