



Ontario College Quality Assurance Service

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

COLLEGE QUALITY ASSURANCE AUDIT PROCESS (CQAAP)

CURRENT STATE OF QUALITY ASSURANCE ACTIVITIES REPORT

SHERIDAN COLLEGE

DATE OF PREPARATION OF REPORT: May 16, 2025

REPORT PREPARED BY: Mary Vaughan, Provost & Vice President Academic

Note: This template is used for the 18-month follow-up report and to demonstrate the current state of QA activities during a CQAAP submission.



This report aims to provide updated information regarding the quality assurance activities that the college is implementing to address the identified gaps (affirmations, recommendations and other).

The OCQAS Management Board is looking for the following:

- 1. Completeness: Adequate information about implementation progress for each of the recommendations and affirmations from the Audit Report. This includes statements of the specific deliverables/tasks that the college is undertaking to implement each recommendation and affirmation. The current status should be stated in terms of percent of implementation completion for the specific deliverables/tasks. Where a specific deliverable/task is not complete, the expected completion date should be stated. If there has been slow progress in implementing specific deliverables/tasks, an explanation for why that is the case should be provided.*
- 2. Appropriateness of the college's chosen deliverables/tasks for achieving the intent of the Audit Report recommendation.*
- 3. Sufficient Progress: The college should have made overall substantial progress on all Audit Report recommendations with implementation of some of specific deliverables/tasks already completed.*

Note: When using acronyms, please include their unabbreviated form.



1. Provide the continuous improvement plan (action/ implementation plan) and results to date.

* *The college must provide (at the very least) the affirmations made by the college and the recommendations made by the audit panel at the time of the last audit. These stipulations (affirmations and recommendations) should be listed, verbatim as they appear in the audit report.*

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Recommendation 1: Standard 1.6					
The procurement and implementation of a Curriculum Lifecycle Management Tool is an outstanding item from the previous audit and is in process for completion. The college has indicated that this action is to be completed by Fall 2025. Advancement of this initiative and the development of an evaluative process related to its effectiveness of the tool will support continued quality assurance in programs.	Deliverable 1: Procure a cloud-based off-the-shelf Curriculum Management tool.	Complete procurement of Curriculum Lifecycle Management tool.	Registrar & AVP, Enrolment Management Associate Vice President, Academic Quality & Teaching Innovation	November 2024	100% complete Sheridan entered an agreement with an academic operations platform vendor in Fall 2024. Sheridan's procurement includes cloud-based modules for course and program level Curriculum Management, Course Syllabus, and Catalog & Handbook.
	Deliverable 2: Implement selected cloud-based off-the-shelf Curriculum Management tool.	Map existing curricular processes and governance model to inform setup of workflows in Curriculum Management tool.	Registrar & AVP, Enrolment Management Associate Vice President, Academic	April 2025	100% complete Working with an external consultancy, we have identified challenges in our current curricular



			Quality & Teaching Innovation		process and are embedding best practices in the academic operations platform integrations and workflow based on the consultants' input for process optimization (see Affirmation 1 for additional information on this work).
		Implement the selected Curriculum Lifecycle Management Tool in partnership with the vendor including process mapping and configuration, integration design, data migration and User Acceptance Testing.	Registrar & AVP, Enrolment Management Associate Vice President, Academic Quality & Teaching Innovation	August 2025	50% complete Cross-college project implementation team assembled and implementation with vendor ongoing through Spring/Summer 2025.
		Train staff on use of CLM tool and support related change-management initiatives.	Registrar & AVP, Enrolment Management Associate Vice President, Academic Quality & Teaching Innovation	December 2025	0% complete Training plan and work on end-user training materials to be developed in partnership with vendor through Spring/Summer 2025 with training planned for Fall 2025.
	Deliverable 3: Launch Curriculum Management	Full launch and implementation of the	Registrar & AVP, Enrolment Management	January 2026	0% complete



	tool to Sheridan community.	academic operations platform modules (Curriculum Management, Course Syllabus, Catalog & Handbook).	Associate Vice President, Academic Quality & Teaching Innovation		
	Deliverable 4: Ensure ongoing monitoring of effectiveness of Curriculum Management tool.	Develop monitoring and evaluation framework to ensure optimal use of, and ongoing effectiveness of, implemented academic operations platform modules.	Registrar & AVP, Enrolment Management Associate Vice President, Academic Quality & Teaching Innovation	April 2026	0% complete
		Implement ongoing monitoring and evaluation to ensure academic operations platform, and associated business processes, support continued quality assurance in programs, and the phasing out of manual processes related to curriculum development and modification.	Registrar & AVP, Enrolment Management Associate Vice President, Academic Quality & Teaching Innovation	May 2026	0% complete



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Recommendation 2: Standard 1.6					
<p>The development of a formal process to inform users (faculty, students) and related stakeholders (PACs, industry partners), that includes information on the nature of program changes, their rationale, and effect date is needed. This process can utilize existing program change timeframes and communication channels (i.e., internal communications, website, student program sites/pages, meeting agendas).</p>	<p>Deliverable 1: Leverage new and existing communication channels to communicate program changes.</p>	<p>Review existing communication practices for program changes to identify good practice and potential gaps.</p>	<p>Associate Vice Provost, Academic Quality & Teaching Innovation</p>	<p>April 2025</p>	<p>100% complete</p> <p>A review of existing communication practices related to program changes was built into the current state review for Curriculum Management System (CMS) implementation. The review identified opportunities to leverage CMS modules for communication to internal partners through integrated workflows (system notification) and student communication. Additionally, communication of program changes to external stakeholders re: is being considered in terms of Affirmation 3, related to more</p>



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		Develop guidelines for adapting existing channels or utilizing new channels to support the formalized process (see Deliverable 2), ensuring they meet stakeholder needs and don't duplicate system processes.	Associate Vice Provost, Academic Quality & Teaching Innovation	August 2025	effectively engaging PAC members. 0% complete Guidelines for the use of new and existing communication channels will be designed in tandem with CMS design and implementation (see above).
	Deliverable 2: Establish a comprehensive communication framework.	Develop formal communication process documents outlining the steps for informing stakeholders about program changes, including responsible parties, timelines, and key message components.	Associate Vice Provost, Academic Quality & Teaching Innovation	December 2025	0% complete Comprehensive communication framework will include steps, responsible parties, timelines, and key messaging components. This framework will also include methods for evaluating the efficacy of communication channels.



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Recommendation 3: Standard 4.3					
The review of the Student Assessment and Evaluation Procedure regarding timely feedback on student performance should include a formal process to ensure each school/program has an established process, that it is approved by the appropriate level of academic administration, and that the process includes a mechanism to ensure all students are aware of the process for timely feedback.	Deliverable 1: Revise existing policy and procedure to address gaps.	Work with Associate Deans and Senior Policy Analyst to revise the policy and procedure. Include clearer institutional guidelines related to timely feedback.	Director, Teaching and Learning Innovation	July 2025	90% complete Slight delay encountered during the final policy and procedure review originally planned for Winter 2025. Final approvals and posting of policy and procedure to be completed in Summer 2025 (projected July 2025).
	Deliverable 2: Ensure community awareness of the requirements for timely feedback as captured in the updated policy and procedure.	Develop a communication strategy to regularly disseminate information about the guidelines contained in the policy and procedure to students and faculty through multiple channels (e.g., Faculty & program meetings, course syllabi, learning management systems, and student handbooks).	Director, Teaching and Learning Innovation	August 2025	20% complete Communication plan in final concept stage, to be completed through Spring/Summer 2025 term. Projected implementation to kick off in October 2025.



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	Deliverable 3: Ensure revised policy and procedure are actioned by Faculties.	Ensure all programs have adjusted course elements or developed a plan to adjust course elements (course outlines, evaluation plan), to reflect the revised policy and procedure and support faculty success.	Director, Teaching and Learning Innovation	December 2025	0% complete
	Deliverable 4: Monitor the effectiveness of the implementation of the procedure on the provision of timely feedback to students.	Create a reporting mechanism to verify that all schools/programs have implemented the changes to expectations regarding timely feedback.	Director, Teaching and Learning Innovation	December 2025	0% complete
Using the reporting mechanism, determine a periodic review schedule for the timely feedback process to ensure continued relevance and effectiveness.		Director, Teaching and Learning Innovation	December 2025	0% complete	
Assess the existence/applicability of existing metrics and KPIs		Director, Teaching and Learning Innovation	December 2025	0% complete	



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		to assess the performance of the process (e.g. course evaluation surveys, etc.). Develop new instruments, as needed.			
		Train academic leaders on the use of metrics/KPIs in assessing the provision of timely feedback within their programs to ensure ongoing compliance with the policy/procedure (course evaluation surveys, etc.) and to support further action.	Director, Teaching and Learning Innovation	February 2026	0% complete



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Recommendation 4: Standard 5.2					
<p>The review of the academic policy review and development process to ensure that it aligns with the present quality assurance model (post academic senate) should include a clear definition of the roles and responsibilities associated with various groups and individuals involved in the process. As well, the review should involve the development of a communication strategy to ensure understanding and compliance to the established roles and responsibilities.</p>	<p>Deliverable 1: Clearly define roles and responsibilities in the policy review and development process.</p>	<p>Create a Roles and Responsibilities document detailing the functions of various groups and individuals involved in the academic policy review and development process and guidelines for the various groups.</p>	<p>Senior Policy Analyst</p>	<p>February 2024</p>	<p>100% complete</p> <p>Information regarding roles and responsibilities in the policy development and approval process are captured in Sheridan's POLICY ONE – <i>Development and Management of Policy and Procedures</i>. POLICY ONE was updated in February 2024 and reflects changes to the college's governance model that accompanied the dissolution of Sheridan's Senate in 2021. POLICY ONE defines the concepts of Policy and Procedure at Sheridan; outlines the steps for formulation, consultation, approval, issuance, amendment,</p>



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					and withdrawal of Sheridan’s Policies and Procedures; and defines the roles and responsibilities of responsible individuals and offices.
		Create stakeholder-specific materials (e.g., FAQs, presentations, and infographics) tailored to explain the roles and responsibilities in a clear and accessible manner.	Senior Policy Analyst	April 2024	100% complete A "Policy 101" PowerPoint was developed following the updates to POLICY ONE which has been distributed to various internal stakeholders participating in the policy review and approval process for information.
	Deliverable 2: Develop a communication strategy to foster understanding and compliance.	Develop a communication plan outlining how information about the defined roles and responsibilities will be disseminated to all relevant stakeholders.	Senior Policy Analyst	April 2024	100% complete Development of a communication plan ensures that documents supporting the understanding of roles and responsibilities are



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					appropriately distributed to relevant stakeholders when they become involved in the policy development process. This plan establishes clear channels for disseminating information at the right time to the right people.
	Deliverable 3: Monitor and sustain adherence to established roles and responsibilities.	Ensure ongoing monitoring of the effectiveness of the defined roles and responsibilities during the policy review and development process, updating the roles and responsibilities, as required.	Senior Policy Analyst	May 2024	100% complete Sheridan's Senior Policy Analyst works collaboratively with stakeholders across the college who fulfill the roles and responsibilities defined in POLICY ONE. Through this ongoing engagement, the Senior Policy Analyst actively monitors adherence to and effectiveness of these defined roles. When opportunities for improvement are



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					identified, the Senior Policy Analyst collaborates with senior leadership to update the roles and responsibilities in POLICY ONE as required.

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Recommendation 5: Standard 5.2					
The establishment of a policy review timeline, to manage the existing backlog of “out-of-date” policies should be supported by a completion plan that ensures the needed resources to compliance.	Deliverable 1: Establish a policy review timeline to address the backlog of out-of-date policies	Develop a policy review schedule that prioritizes out-of-date policies based on factors such as institutional risk, relevance, and regulatory requirements.	Senior Policy Analyst	May 2024	100% complete Per POLICY ONE this process will now occur annually to determine which policies will be reviewed in the year ahead. The policy review schedule/workplan for each upcoming year is developed by the Senior



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					<p>Policy Analyst and reviewed and approved by the President and Vice Presidents Committee.</p> <p>Note, the revision to POLICY ONE in February 2024 clarifies the process for a review of minor policy changes that are editorial in nature vs. as needed or legislatively mandated reviews to support streamlined vs. full review.</p>
		<p>Develop a policy tracking database or other mechanism to monitor the review status, timelines, and completion of individual policies.</p>	<p>Senior Policy Analyst</p>	<p>May 2024</p>	<p>100% complete</p> <p>This work has been rolled into the development of the policy review schedule whereby all policies are tracked and prioritized for review based on mandatory review dates or when needed. The Senior</p>



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					Policy Analyst works with Subject Matter Experts and monitors review status, timelines, and completion of individual policies.
		Create a progress reporting framework to regularly update stakeholders on the status of the policy review and completion efforts.	Senior Policy Analyst	May 2024	100% complete This process is part of the annual review plan developed. Part of the briefing note that accompanies the annual workplan presentation to Presidents and Vice Presidents Committee includes a report back on work that has been completed over the previous year.
	Deliverable 2: Enhance the inputs and considerations built into the completion plan to further support timely reviews and mitigate risk.	Undertake a broad assessment to identify the typical staff, time, and budget required to complete a policy review.	Senior Policy Analyst	October 2025	0% complete The next stage of development of the policy review schedule will build more consideration to



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					capturing staff, time, and budget into the decision-making process. Per POLICY ONE, policy leads develop work plans for submission to the Office of General Counsel prior to presentation of the workplan to President and Vice Presidents Committee (PVP) the following Spring.
		Further enhance the current policy review schedule by building it into a more comprehensive completion roadmap. This roadmap will outline specific actions, human and other required resources, milestones, and deadlines for reducing the backlog (as identified in previous task). Include risk	Senior Policy Analyst	March 2026	0% complete Building on the work of creating the initial policy review completion schedule, a more comprehensive workplan that builds resource considerations into the process will better assist with identifying challenges and bottlenecks prior to review kickoffs.



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	Deliverable 3: Monitor progress to maintain compliance while designing opportunities for continuous improvement in the policy review process.	mitigation tactics to support timely completion of the plan. Monitor metrics and KPIs to measure progress (e.g., percentage of backlog cleared, adherence to the timeline), and gather additional intelligence related to resource needs, timing, etc. to enhance quality of cyclical review plan.	Senior Policy Analyst	August 2026	0% complete. Initial monitoring framework is in place. Beyond monitoring completion rates, this enhanced tracking and reporting will be used through the 2025-26 academic year to further enhance the planning for and completion of policy reviews.



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Recommendation 6: Standard 6.4					
<p>The broad-based implementation of the previously piloted electronic Performance and Talent Management system (ePTM) is an outstanding recommendation from the previous audit and consequently should be prioritized. As well the implementation should be accompanied by a review of its effectiveness and impact on professional development activities for support staff.</p>	<p>Deliverable 1: Prioritize and implement the Electronic Performance Talent Management System (ePTM) institution wide.</p>	<p>Create a project implementation plan outlining key activities, timelines, and milestones for the broad-based rollout of the ePTM system.</p>	<p>Director, Total Rewards, People & Culture</p>	<p>September 2024</p>	<p>75% complete</p> <p>The ePTM was implemented institution wide with a cascaded approach. Administrators began completing the Performance Feedback and Development Review (PFDR) process in ePTM in April 2022. Support Staff were put into ePTM in January 2023 with the PFDR process occurring annually on their hiring anniversary date. Utilizing elements of the ePTM for the Formative Faculty Reflection (FFR) process was anticipated for Fall 2024 but has been delayed due to competing priorities and other considerations.</p>



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					Deadline will be revisited in summer 2025 as part of conversations regarding the tool (see deliverable 2).
		Develop training resources and sessions for managers and support staff to ensure effective system adoption.	Director, Total Rewards, People & Culture	January 2023	100% complete Training completed (i) prior to implementation, (ii) throughout enrollment, and (iii) on an ongoing basis. Training resources included videos, user guides, and FAQ's posted on Sheridan's intranet, as well as virtual synchronous training clinics and just-in-time individual support for managers and staff.
	Deliverable 2: Evaluate the effectiveness and impact of the ePTM system.	Develop a post-implementation review framework to assess the system's functionality,	Director, Total Rewards, People & Culture	May 2024	100% complete Reporting via monthly dashboards, and



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		user adoption, and integration with existing workflows.			quarterly metrics on completion stats have been built into the system. In the spring of 2024 feedback from leaders and users was gathered through focus groups and surveys. Based on the feedback it is anticipated that support staff performance year will change to the fiscal year, mirroring the administrator PFDR timeline. Exploratory conversations about transitioning to a new system for improved cost and better alignment with existing systems are currently underway.
		Develop a survey or focus group strategy to gather feedback from support staff and managers on the	Director, Total Rewards, People & Culture	May 2024	100% complete See above.



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		system's usability and effectiveness.			
		Determine performance metrics (e.g., percentage of staff completing evaluations on time, engagement in professional development activities) and evaluate these metrics to evaluate the system's impact.	Director, Total Rewards, People & Culture	April 2025	50% complete Performance metrics currently focus on completion percentage, and reports in ePTM can be pulled to evaluate effectiveness in this regard. As noted in Deliverable 1, changing the ePTM system is currently being explored. The availability of metrics and reporting on completion rates and participation in PD activities will be integrated into decision making regarding adoption of any new system. Deadline will be revisited as part of this work.



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	Deliverable 3: Enhance professional development activities based on evaluation results.	Create a report on findings from the effectiveness review, including overarching recommendations for improving professional development activities.	Director, Total Rewards, People & Culture	September 2026	50% complete Feedback from focus groups and surveys highlighted that aligning to the fiscal year timelines will allow for the best matching of performance goals to Sheridan's strategic programs and initiatives. This includes better supporting and capturing the completion of professional development activities as college-supported PD programs align with fiscal year timelines. Gathering baseline data to inform recommendations will commence once the system and timing change has been implemented.



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		Develop a refinement plan for professional development programs, informed by insights from the ePTM system data and user feedback.	Director, Total Rewards, People & Culture	September 2026	25% complete User feedback is collected following every internal professional development offering, with the feedback used to refine the college learning calendar and the content of the individual offerings. This process will be enhanced when data can be pulled from the ePTM to analyze uptake and trends based in employee groups (e.g. employment group, length of tenure, function, etc.).



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<p>Affirmation 1: Standard 1.2 and Standard 1.6 Note: Sheridan recognizes the significant opportunity that process optimization and automation provide for enhancing academic excellence, student experience, and organizational effectiveness. While specifics related to optimization and communication of program changes are addressed in Recommendations 1 and 2, this response focuses on Sheridan's broader strategy to reduce manual processes across the academic enterprise and enhance the quality assurance framework within which these initiatives are embedded. Please refer to Recommendations 1 and 2 for specific deliverables related to automating curricular change processes and improving program change communications.</p>					
<p>College efforts to continue the migration away from manual process will be vital, as is your identification of the need to enhance your communication processes related to program change.</p>	<p>Deliverable 1: Sustain institutional commitment to systematically identifying and replacing manual processes with optimized digital workflows.</p>	<p>Ensure that the prioritization of migrating away from manual processes is well-socialized across the college to ensure appropriate attention and prioritization.</p>			<p>100% complete</p> <p>The college's <i>Sheridan 2027</i> strategic plan includes <i>Organizational Excellence</i> as a strategic priority, with a key area of focus being to "enhance organizational agility, efficiency and effectiveness by reimagining our processes, technologies and organizational design." Regular communications with leadership across all departments have emphasized how automation reduces error rates, improves</p>



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					<p>service delivery, and allows staff to focus on higher-value activities. Leaders are supported in socialization through engagement with their senior leaders and a robust <i>Sheridan 2027</i> Leadership Toolkit. Additionally, this key area of focus is reflected in departments' operational plans, where appropriate, and has been built into the template for administrators' annual performance goals.</p>
		<p>Establish a cross-functional governance model for process automation initiatives that includes clear criteria for project review, scoping, approval, and resource allocation to ensure strategic alignment and</p>	<p>Vice President, Administrative Services</p>	<p>May 2024</p>	<p>100% complete</p> <p>Sheridan's Strategic Initiatives Committee (SIC) is responsible for providing strategic oversight and decision making related to Strategic Plan (2024-</p>



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		maximum institutional benefit, as well as regular assessment of project progress and outcomes.			2027) implementation activities. The Committee identifies opportunities for concept development, collectively prioritizes strategic initiatives, and produces funding recommendations. SIC also serves change advisory functions, performance monitoring, and portfolio mediation including clarifying scope and accountability for initiatives spanning multiple portfolios.
		Develop a process automation roadmap identifying manual processes across the institution and prioritizing them for migration based on impact and feasibility.	Vice President, Administrative Services	December 2024	100% complete A process optimization program, supported by external consultants, has been developed and phase 1 work kicked off in Fall 2025. This program includes the critical Curriculum



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					Lifecycle Management process, as well as other important adjacencies related to student communication, registration, and scheduling. Additionally, smaller-scale automation and/or optimization projects have been captured in departmental-level plans for capture and regular reporting, such as a key academic integrity project. Additional projects may be added to the roadmap over time through application to the Strategic Initiatives Committee (SIC).
		Develop an implementation timeline for migrating key manual processes to digital platforms, including	Manager, Integrated Planning & Projects	February 2025	100% complete Phase 1 optimization implementation plans, including Curriculum Lifecycle Management,



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		resource needs and timelines.			are complete. Resource needs and timelines for Phase 2 and departmental-level projects will be developed as they enter the Strategic Implementation Committee process.
		Develop a monitoring system to track progress in reducing manual processes and measure efficiency gains post-migration.	Business Units	May 2024	100% complete Business Units are required to establish their own relevant metrics for measuring efficiency gains. These may be formalized within Service Level Agreements to ensure accountability and consistent reporting to the Strategic Initiatives Committee.
	Deliverable 2: Enhance communication processes related to program change.	Please see Recommendation 2.			



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Affirmation 2: Standard 2.3					
<p>The College's identification of the continued movement to automated process and further embedding the SPARK expertise into curriculum lifecycle management, especially in the development and re-development of curriculum is an important realization. The audit panel certainly saw several positive examples of the work that you have already undertaken in this area.</p>	<p>Deliverable 1: Further embed SPARK expertise into curriculum lifecycle management</p>	<p>Create a collaborative framework outlining SPARK's role at each stage of the curriculum lifecycle, including development, review, and re-development.</p>	<p>Director, Curriculum Excellence</p>	<p>August 2025</p>	<p>40% complete</p> <p>SPARK has been engaged in supporting Sheridan with academic quality process optimization, including curriculum lifecycle management (development, review and re-development). This ongoing initiative integrates SPARK's expertise alongside contributions from internal partners. The insights and takeaways expected by March 2025 will inform the development of a collaborative framework that outlines SPARK's role at each stage of the curriculum lifecycle.</p>



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	Deliverable 2: Leverage automation in curriculum lifecycle processes.	Create an integrated process automation plan to streamline workflows associated with curriculum development and re-development (e.g., approval workflows, document management) while incorporating digital tools and templates that align with institutional quality standards and SPARK's pedagogical expertise.	Director, Curriculum Excellence	August 2025	40% complete SPARK is assessing the viability of the selected academic operations platform's Curriculum Management System for workflows related to curriculum development and re-development. A project led by the Provost's Office is currently underway to centralize and streamline the implementation of program development and re-developments.
		Hold training sessions for faculty and staff on how to use automated tools and incorporate SPARK resources effectively in their curriculum work.	Director, Curriculum Excellence	October 2025	30% complete Once SPARK has determined the viability of the selected academic operations platform for workflows related to curriculum development and re-development,



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					training needs will be identified. Training sessions and materials will be provided by launch in Fall 2025.
	Deliverable 3: Highlight and build on existing successes in SPARK's contributions.	Develop a website highlighting examples of SPARK's successful contributions to curriculum initiatives, with insights into best practices and impact.	Director, Curriculum Excellence	October 2025	80% complete SPARK has developed a new website showcasing successful contributions and curriculum initiatives. Next steps include publishing the site and adding content on strategic initiatives and key projects.
		Develop feedback channels for faculty and staff to share their experiences with SPARK, identifying opportunities for further embedding expertise into curriculum processes.	Director, Curriculum Excellence	October 2025	70% complete SPARK has developed an Experience Survey for program teams engaged in Comprehensive Program Review, as well as a similar survey for external panel members evaluating Sheridan's



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					<p>programs. These surveys will be distributed at the end of the review cycle, with feedback informing continuous improvements. Additionally, SPARK's Associate Vice Provost meets regularly with Deans to gather insights and ensure faculty and staff have opportunities to share their experiences and contribute to curriculum processes.</p>

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Affirmation 3: Standard 3.3



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<p>Although the audit panel agree that there is still work to be done in your efforts to “effectively and fully engage” PACs the audit panel did observe signs that your efforts over the past year have led to progress in this area.</p>	<p>Deliverable 1: Develop an institutional PAC engagement strategy and associated tactics.</p>	<p>Develop a long-term PAC engagement strategy and roadmap to sustain momentum and ensure continuous improvement in how PACs are utilized and supported.</p>	<p>Vice Provost, Academic Excellence and Transformative Learning</p>	<p>August 2025</p>	<p>75% complete</p> <p>Roles and responsibilities and accountabilities related to PAC administration (institutional and Faculty-level) were revisited and redefined. Initial tactics, including those below, have been developed. The remaining tasks related to this deliverable includes developing a communication strategy re: PAC engagement.</p>
	<p>Deliverable 2: Identify best practices from successful PACs</p>	<p>Develop a survey tool designed to collect detailed information from programs with high-performing PACs, focusing on engagement strategies, meeting structures, and outcomes and analyze survey results to identify</p>	<p>Vice Provost, Academic Excellence and Transformative Learning</p> <p>Senior Manager, Institutional Research</p>	<p>October 2025 (revised)</p>	<p>25% complete</p> <p>Groundwork for development of survey tool and engagement with Associate Deans has taken place. Finalization and distribution of survey and analysis of results was</p>



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		common practices, tools, or structures contributing to PAC success.			delayed due to competing priorities but is planned for Spring/Summer 2025 with analysis taking place in Fall 2025.
		Develop a PAC best practices guide/toolkit for programs, highlighting actionable strategies to strengthen PAC engagement.	Director, Curriculum Excellence	January 2026 (revised)	0% complete Guides, toolkits, etc. will be developed when survey analysis is complete.
	Deliverable 3: Enhance communication and support for PAC engagement	Consider the development of a recognition program to celebrate and acknowledge PAC members for their contributions, reinforcing their value to the institution.	Vice Provost, Academic Excellence and Transformative Learning	January 2026 (revised)	25% complete Although resource constraints present a challenge in terms of traditional recognition events, Sheridan is currently exploring modes to better involve PAC members in strategic institutional-level engagements (e.g. college-wide industry summit).



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	Deliverable 4: Monitor progress and impact of PAC engagement efforts.	Review possible additional metrics and benchmarks that could be collected to measure PAC engagement (e.g., number of actionable recommendations, satisfaction surveys for PAC members) to inform future strategy and enhance reporting to senior leadership and the Board of Governors.	Vice Provost, Academic Excellence and Transformative Learning	June 2026	0% complete Addition of new engagement metrics will be explored during analysis of survey results from high-performing PACs.

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Affirmation 4: Standard 4.2					

The commentary related to role that SPARK can play supporting the development of effective teaching and learning	Deliverable 1: Leverage SPARK to enhance teaching and learning practices.	Develop and launch a strategic collaboration plan to outline how SPARK will support faculty in developing	Director, Teaching and Learning Innovation	July 2025	25% complete The plan is complete but launch of some programs is slightly
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<p>and the importance of collecting, sharing and utilizing those outcomes is something the audit panel strongly believe you should be addressing, to enhance program and course delivery and student assessment.</p>		<p>innovative teaching and learning practices, aligned with institutional goals.</p>			<p>delayed. Work has been completed via Sheridan's Signature Learning Experience modules to train faculty in innovative teaching and learning practice. A new innovation hub is scheduled to be completed in the spring/summer 2025 term. The hub will serve as an exploratory space for faculty to learn and practise new strategies including alignment with flexible learning opportunities</p>
		<p>Develop workshops and resources designed and delivered by SPARK to help faculty integrate evidence-based teaching methods and tools into their courses.</p>	<p>Director, Teaching and Learning Innovation</p>	<p>April 2026</p>	<p>50% complete Work is progressing on the development of workshops and resources which have been released to the</p>



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					community. This work is ongoing.
		Consider the development of communities of practice and other mentorship opportunities led by SPARK to foster peer learning and the sharing of best practices in teaching.	Director, Teaching and Learning Innovation	May 2026 (revised)	25% complete This work was started but has been paused in light of competing priorities. It will be revisited in early 2026.
	Deliverable 2: Develop mechanisms to collect and share outcomes of teaching and learning innovations.	Develop a centralized repository or database to document and share case studies, success stories, and outcomes from SPARK-supported initiatives in teaching and learning.	Director, Teaching and Learning Innovation	May 2026 (revised)	0% complete This work was started but has been paused in light of competing priorities. It will be revisited in early 2026.
		Plan an annual showcase or symposium to celebrate and disseminate teaching and learning innovations, encouraging cross-departmental collaboration.	Director, Teaching and Learning Innovation	October 2024	100% complete SPARK: The Sheridan Centre for Academic Excellence held an event to showcase work of faculty completing the Teaching and Learning



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					Academy program. These projects provided faculty the opportunity to engage in course quality improvement in a structured approach, systematically planning the necessary components for course improvement and collecting pertinent quality assurance data to evaluate the effectiveness of their interventions.
	Deliverable 3: Utilize outcomes to improve program and course delivery.	Hold faculty training sessions on how to use collected outcomes to make evidence-informed improvements to course delivery and student engagement.	Director, Teaching and Learning Innovation	December 2025	0% complete
		Create a feedback mechanism for students and faculty to evaluate the impact of new teaching methods and	Director, Teaching and Learning Innovation	December 2025	0% complete



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		course changes driven by SPARK initiatives.			
		Disseminate actionable insights provided to program leads and academic leadership based on data and outcomes from SPARK's contributions.	Director, Teaching and Learning Innovation	June 2026 (revised)	0% complete A program to establish data analysis and visualization is unfunded at this time, but other opportunities to disseminate insights will be explored.
	Deliverable 4: Strengthen Student Assessment Practices Through SPARK Expertise	Create guidelines for effective student assessment, co-developed with SPARK, focusing on diverse and inclusive assessment methods.	Director, Teaching and Learning Innovation	December 2025	10% complete A funded strategic initiative that encompasses this task (Assessment Hub pilot) has been approved through the Strategic Initiatives Committee. This work will kick off in Winter 2025 and continue through Spring/Summer 2025.
		Develop training modules for faculty on aligning assessment	Director, Teaching and Learning Innovation	May 2024	100% complete



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		practices with learning outcomes and program goals.			Modules and training including <i>Intentional Assessment</i> (January 2024) and <i>Assessment Re-Design in the Age of AI</i> (June 2024) have been developed and made available to the community.

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Affirmation 5: Standard 5.2

The identification of the need to revisit many of your academic policies and to develop a framework for this process to occur is an important one. The audit panel heard of some efforts that are underway	Please see Recommendation 5				
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<p>in this area, but early attention to this identified opportunity for enhancement will support many of your other activities and initiatives.</p>					
<p>* What has been identified as needing to be done? (stipulation)</p>	<p>What deliverables are associated with addressing the stipulation?</p>	<p>What tasks are associated with addressing the deliverable?</p>	<p>Who is responsible for the specific deliverable/ task?</p>	<p>When is the completion deadline of the specific deliverable/ task?</p>	<p>What is the status of each specific deliverable/ task? (include a completion percentage)</p>
<p>Affirmation 6: Standard 6.6</p>					
<p>The identification of the need to fully utilize the output of your Comprehensive Program Reviews in the access to and prioritization of resources allocation is an important realization. The audit panel saw evidence that would support that this is occurring, but there is an opportunity to ensure these occurrences are better documented. Implementing a process to track Action Plans</p>	<p>Deliverable 1: Revise Annual Program Review process to include an update on items in CPR Action Plan.</p>	<p>Implement action plan update process for programs pre-2024/25 cycle.</p>	<p>Director, Curriculum Excellence</p>	<p>March 2024</p>	<p>100% complete All historical CPR Action Plans have been successfully updated to align with the new Action Plan Template.</p>
	<p>Deliverable 2: Create and implement a process by which items identified in CPR Action Plans are directed into new and existing institutional workflows for investment.</p>	<p>Amend CPR Action Planning Template to include categorization of existing resourcing modes (strategic, capital, operating, etc.).</p>	<p>Director, Curriculum Excellence</p>	<p>January 2026</p>	<p>40% complete Sheridan is undergoing organizational changes to enhance operational efficiency, including a review of the annual program review process, which is expected to be completed by 2026. As part of this transition, a</p>



<p>and their completion will support the prioritization of resources.</p>					<p>new college-wide approach to action planning has been proposed to better allocate resources for program changes and will be integrated into the revised annual program review process.</p> <p>To support this shift, program review action plans have been updated to include the categorization of resourcing modes and annual updates on planned actions. Additionally, SPARK has developed asynchronous resources for programs, including a Guide to Action Planning and an Action Plan Overview Video, which outline key considerations to support the development of effective action plans.</p>
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		Update existing CPR Action Plans to include a column where programs can provide an update on each action item (pre-2024/25 cycle Action Plans).	Director, Curriculum Excellence	January 2026	40% complete
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2. Provide additional comments (if applicable).

In our most recent College Quality Assurance Audit Process (CQAAP), Sheridan was commended for the seamless integration of our strategic initiatives throughout the institution. The audit panel particularly noted how we have succeeded in making these initiatives "a living part of what you do and how you do it" through their operationalization in our quality assurance processes.

Sheridan has since approved our new strategic plan, Sheridan 2027, which continues to guide our institutional direction during the challenging times facing Ontario's college sector. Consistent with our commitment to continuous improvement, we remain focused on implementing and refining the process enhancements identified in our audit report. Our approach to quality assurance extends beyond implementing mechanisms to emphasize "closing the loop" through effective monitoring, evaluation, adjustment, and stakeholder communication. This holistic approach ensures that quality assurance becomes embedded in our institutional culture rather than existing as isolated processes.

Like many institutions, Sheridan has faced resource constraints that have required thoughtful prioritization of initiatives. We have placed significant focus on activities that support the college's financial sustainability while advancing our quality assurance agenda. In some cases, we have strategically delayed work on certain items to redirect resources to address more imminent challenges. Despite these necessary adjustments, our strategy remains focused on building frameworks and mechanisms that support long-term sustainability through effective monitoring and evaluation, ensuring processes are clear and non-duplicative, and designing systems with sufficient flexibility to maintain institutional agility. The implementation of our new Curriculum Management system exemplifies this approach—addressing multiple audit recommendations while streamlining processes in ways that are both efficient and clearly understood by our



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community. These efforts reflect our commitment to sustainable quality assurance practices that can withstand resource challenges while continuously improving the student experience.

We look forward to providing further updates on our progress during our next audit cycle.