



Ontario College Quality Assurance Service

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

COLLEGE QUALITY ASSURANCE AUDIT PROCESS (CQAAP)

GUIDELINES AND FRAMEWORK (2024/2025)

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

To enhance the autonomy of Ontario's Colleges of Applied Arts and Technology (CAATs), the government introduced The Colleges of Applied Arts and Technology Act, 2002. This legislation mandated the implementation of a quality assurance process. The expectations were twofold: ensuring quality assurance at the individual college level and establishing a self-regulating process at the college/provincial system level.

In developing a self-regulation approach, a strategic decision was made to prioritize quality assurance, which encompasses the mechanisms and procedures used to evaluate the presence and level of quality. Consequently, the Ontario College Quality Assurance Service (OCQAS) was established in 2005 as a policy-driven, independent oversight and governance body. Operating autonomously from individual academic institutions and the provincial government, OCQAS focuses on:

- ensuring that programs leading to an Ontario College credential conform to the Ministry of Colleges and Universities' (MCU) Credential Framework which functions through the Credentials Validation Service (CVS).
- leading the audit process and assessing the effectiveness of quality assurance systems within colleges, as facilitated by the College Quality Assurance Audit Process (CQAAP).

In this capacity, OCQAS contributes to and enhances the continuous quality improvement efforts of public college education in Ontario.

The audit model that operated between 2005 and 2015, titled the *Program Quality Assurance Process Audit (PQAPA)*, was developed through a joint government-college sector working group comprised of the Coordinating Committee of Vice-Presidents, Academic (CCVPA) and the Colleges Branch of the Ministry of Training, Colleges and Universities (MTCU) Working Group¹ between 2003 and 2005.

2. QUALITY ASSURANCE FRAMEWORK

i. Guiding Principles

A set of *Guiding Principles* were developed and approved by the Committee of Presidents (COP) and the OCQAS Management Board in 2003. These guiding principles ensure that any quality assurance and improvement model developed for Ontario's colleges must:

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



- be consistent with international best practices.
- be effective, efficient, and cyclical.
- give appropriate notice to colleges prior to review.
- be described and operate as an audit which provides a review of each college's educational *quality assurance mechanisms* to ensure that minimum standards are met.
- use an external, competent, mutually agreeable, objective peer review audit panel.
- follow a mandatory and clear process that identifies strengths and weaknesses, recommends improvements, and facilitates positive change.
- distribute a preliminary report to the college for its response and include the college response in the final report.
- provide for categories of approval.
- provide a method and system for appeals regarding its decisions and reports.
- provide for consistency of audit panel decisions.
- be sustainable and affordable for the system as a whole and for the individual colleges in the system.

ii. **Defining Quality**

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

Quality can be defined through the following aspects:

- **Internal Quality Assurance:** This refers to the continuous activities undertaken by an institution to ensure it meets its stated objectives. An internal quality assurance system begins with the institution's identity and follows a quality cycle of planning, implementation, review, and enhancement. The Plan-Do-Check-Act cycle is applied to the institution's capacity to:
 - Translate vision, mission, and goals into desired learning outcomes.
 - Establish quality assurance mechanisms and structures.
 - Review against predefined standards and their accompanying requirements.
 - Enhance mechanisms and structures.

The process develops into a continuous cycle of improvement.

- **External quality assurance:** Activities conducted by an external body to evaluate, based on agreed-upon and predetermined quality standards, the effectiveness of an institution's quality assurance processes in meeting its stated objectives.



- Quality as a *system*: A structured yet dynamic organization of various quality assurance mechanisms
- Quality as *improvement*: The capability of the established quality assurance system to demonstrate and ensure continuous growth and effectiveness.

iii. Outcomes-based Evaluation Approach

OCQAS employs an evidence-based evaluation methodology to assess institutional objectives through a rigorous audit process. This audit is conducted based on predetermined and mutually agreed-upon standards and their associated requirements, ensuring that the institution's mechanisms are both robust and effectively designed to achieve the desired outcomes.

While the audit does not render specific judgments on individual activities, it scrutinizes service-specific evidence to the extent necessary to confirm that institutional systems are functioning as intended.

This approach honors the institution's culture, values, principles, and evaluation methods, allowing each institution to demonstrate its capability to meet established standards. It also considers the institution's vision, mission, and goals.

The audit process is both systematic and cyclical, following a predetermined schedule. Every five years (transitioning to six years), each institution must submit a self-study or QA Book and undergo a scheduled audit visit managed by OCQAS. Post-audit, each institution is required to report on its quality assurance activities on a 24-month cycle.

Note: If a significant potential QA issue for a particular college has been raised either through OCQAS's dealings with the college or credible concerns brought forward to OCQAS from any party, OCQAS may determine that the CQAAP requirements relevant to that issue will receive closer scrutiny during the review of the audit package and/or the audit visit. Both the college and the audit panel will be informed of this in advance.

3. OVERVIEW OF THE QUALITY ASSURANCE PROCESS

i. The Quality Assurance Mechanisms

In a college setting, quality assurance mechanisms can vary widely to meet different standards. For OCQAS, these mechanisms are both mandatory and guiding from an institutional perspective. They have been documented and implemented to ensure quality and continuous improvement. These mechanisms often include, but are not limited to,



structures, policies, practices, processes, programs, guides, templates, plans, committees, forums, regulations, legislation, by-laws, and various tools.

ii. The Quality Assurance System Submitted to an Audit

Over the years, Ontario's public colleges have implemented a variety of mechanisms to ensure and measure the quality of their institutions. These efforts are supported by an institutional quality assurance system, which includes a management system designed to gather evidence to demonstrate the implementation and effectiveness of these mechanisms.

The primary purpose of the audit is to evaluate how effectively these mechanisms ensure quality.

iii. Evaluation Criteria

The standards and their accompanying requirements form the framework for Ontario's colleges to evaluate how effectively their quality assurance mechanisms meet the established criteria.

Quality Assurance Standards

The following *six quality assurance standards* to be met are:

- Program Quality Management System.
- Vocational Learning Outcomes (VLO) as the Centre for Program Development (throughout the *program lifecycle*).
- Conformity with Government Requirements.
- Program Delivery and Student Assessment.
- Existence, Monitoring and Communication of Policies and Practices that Influence and impact Academic Quality.
- Availability and Allocation of College-Wide Resources.

The effectiveness of a college's quality assurance system, specifically its ability to ensure continuous improvement in achieving its stated objectives, will be evaluated based on the following criteria:

- Implementation of quality assurance mechanisms.
- Effectiveness of these mechanisms, which includes their capacity to measure and ensure continuous quality improvement by:
 - Conducting a critical assessment of how well the mechanisms meet their stated objectives.
 - Identifying strengths and areas for improvement to ensure these objectives are achieved.



- Implementing corrective measures for improvement, such as through an action plan, within a context of continuous quality improvement.
- Review and enhancement of quality assurance mechanisms to maintain their effectiveness.

The following provides details of the standards and their accompanying requirements for each component of the quality assurance system.

STANDARD 1

PROGRAM QUALITY MANAGEMENT SYSTEM

Effective quality assurance mechanisms ensure the quality of a program management system.

REQUIREMENTS

A college-wide program quality management system:

1.1	Has established mechanisms that operationalize the Board of Governors' (BOG) responsibility to ensure quality assurance is embedded in the strategic direction of the organization.
1.2	Ensures that there are established mechanisms that are applied consistently to maintain currency and relevancy of programs throughout their lifecycle (development, review, revision, suspension, cancellation and reactivation).
1.3	Has mechanisms for gathering, collating, and analyzing data and information from various sources and invested parties that are related to program quality.
1.4	Uses data and information collected from various sources and invested parties to assess program performance and inform recommendations.
1.5	Has mechanisms for ensuring that recommendations and action plans arising from program QA processes have been implemented.
1.6	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.
1.7	Manages program maintenance records arising from program lifecycle QA processes.

STANDARD 2

VOCATIONAL LEARNING OUTCOMES AS THE CENTRE OF PROGRAM DEVELOPMENT (THROUGHOUT THE PROGRAM LIFECYCLE)

Effective quality assurance mechanisms ensure vocational learning outcomes are at the centre of the program's lifecycle activities.

REQUIREMENTS

A college-wide use of vocational learning outcomes at the centre of the program lifecycle:



2.1 Ensures the existence, relevance, and dissemination of program Vocational Learning Outcomes (VLO) as the starting point for any program lifecycle activity regardless of the program location or delivery method.
2.2 Ensures that program course structure, course sequence, and course learning outcomes (CLO) are derived from, and flow coherently from, the program Vocational Learning Outcomes (VLO) and Essential Employability Skills (EES) and are disseminated.
2.3 Ensures that course learning activities, assessments, including Prior Learning Assessment Recognition (PLAR) mechanisms are consistent with and appropriate to the CLO, program Vocational Learning Outcomes (VLO) and Essential Employability Skills (EES), and support meaningful acquisition of the required skills and knowledge.

STANDARD 3

CONFORMITY WITH GOVERNMENT REQUIREMENTS

Effective quality assurance mechanisms ensure the conformity of programs of study with relevant government requirements.

REQUIREMENTS

A college-wide conformity with government requirements:

3.1 Ensures that program titles are consistent with established CVS Titling Protocols.
3.2 Ensures that programs of instruction meet or exceed the Minister’s Binding Policy Directive – Framework for Programs of Instruction (MBPD-FPI).
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.
3.4 Ensures that changes to provincial program standards are communicated to all relevant invested parties and implemented in a timely manner to assure that all programs are current.

STANDARD 4

PROGRAM DELIVERY AND STUDENT ASSESSMENT

Effective quality assurance mechanisms ensure the quality of program delivery and student assessment.

REQUIREMENTS

A college-wide program delivery and assessment of students:

4.1 Ensures that instructional activities and assessments are consistent with and appropriate to the course learning outcomes (CLO), and well suited to all locations and delivery methods.
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.
4.3 Ensures fair and equitable evaluation of student achievement through valid assessment methods, accompanied by prompt and constructive feedback on student performance.



4.4 Provides imminent program graduates with holistic activities that assess their skills and knowledge to demonstrate the achievement of the program Vocational Learning Outcomes (VLO).

STANDARD 5

EXISTENCE, MONITORING AND COMMUNICATION OF POLICIES AND PRACTICES THAT INFLUENCE AND IMPACT ACADEMIC QUALITY

Effective quality assurance mechanisms ensure the communication and monitoring of established academic policies and practices related to academic issues.

REQUIREMENTS

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

5.1	Ensures that all applicable college, department, and program academic policies and procedures are published and communicated to all relevant invested parties and applied consistently.
5.2	Ensures that established academic policies and procedures are reviewed and monitored regularly and consistently.
5.3	Ensures that academic policies and procedures regarding admission are established and applied for all programs offered by the college.
5.4	Ensures that academic policies and procedures regarding student progression are established and applied for all programs offered by the college.
5.5	Ensures that academic policies and procedures regarding prior learning and transfer credit (recognition) are established and applied for all programs offered by the college.
5.6	Ensures that academic policies and procedures regarding accommodation and assessment are established and applied for all programs offered by the college.
5.7	Ensures that academic policies and procedures regarding awarding of credentials (certification) are established and applied for all programs offered by the college.
5.8	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.

STANDARD 6

AVAILABILITY AND ALLOCATION OF COLLEGE-WIDE RESOURCES

Effective quality assurance mechanisms ensure the existence, availability and allocation of resources (human, physical, financial) and technological infrastructure to support student achievement.

REQUIREMENTS

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



<p>6.1 Ensures that faculty:</p> <ul style="list-style-type: none">• possess the combination of experience and qualifications appropriate for their roles;• undergo appropriate selection and hiring processes;• receive appropriate academic guidance and onboarding;• are provided with professional development opportunities,• engage in a review process and are provided with developmental feedback.
<p>6.2 Ensures that there are established regular mechanisms for all academic support and advising services to determine the quality and adequacy of those services and to implement changes where required.</p>
<p>6.3 Ensures that support learning services employees 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;• are provided with professional development opportunities,• engage in a review process and are provided with developmental feedback.
<p>6.4 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 employees;• 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.

iv. **The College Internal Quality Assurance Process**

Each college must conduct a comprehensive review documenting its quality assurance processes and their effectiveness. To achieve this, OCQAS recommends the college first develop a plan. This plan should outline the main activities, assign duties and responsibilities, detail data collection and reporting, specify consultation methods, and set a timeline for completing the internal process.

The results of this review will inform the audit package documentation.

v. **The College Quality Assurance Audit Process (CQAAP)**

Colleges are required to undergo a quality assurance audit every five (transitioning to every six) years. The audit year is determined by a set audit schedule. An audit year spans from September to August.

The audit process is comprised of several stages:

- an audit package built by the college,



- an audit visit,
- an audit report written by the audit panel,
- a review of the report by the college,
- the approval of the report by the OCQAS Management Board, and
- a 24-month follow-up report submitted by the college.

Upon conclusion of the audit, the OCQAS Management Board, based on the audit report provides a decision on the overall effectiveness of the quality assurance system. Audit decisions, along with any stipulations, are published on the OCQAS website at the end of the audit cycle.

vi. Auditor Training

OCQAS maintains an ongoing application process for qualified individuals interested in conducting audits. OCQAS utilizes a roster system, comprising a pool of pre-vetted candidates who are ready for immediate selection. Candidates informed of their inclusion in the roster may be selected for upcoming audits without needing to reapply.

Once included in the OCQAS roster, candidates will receive regular email communications to confirm their continued interest in job openings for upcoming college audits. Candidates have the option to temporarily be placed on hold or to permanently withdraw from the roster. It is recommended that candidates regularly update their contact information with OCQAS to ensure timely receipt of audit opportunity notifications.

OCQAS will notify potential audit panel members of the agreed-upon audit visit dates for each college. After confirming their availability, OCQAS will present each college with a slate of approximately twelve potential audit panel members, from which the college may select a minimum of six.

Once the various groups of potential audit panel members for each college have been confirmed, auditor training will take place. The training of the potential audit panel members consists of two (2) compulsory training sessions:

i. Auditor Orientation

The group of potential audit panel members are trained on the following:

- The roles and responsibilities,
- The code of conduct (confidentiality, impartiality, respect).
- The guidelines to avoid and manage conflicts of interest.
- The existing resources and documentation.



ii. **Assessment of an Audit Package**

Following the auditor orientation, potential audit panel members will be required to complete an assessment of a college's audit package.

Prior to participating in this training session, potential audit panel members will be required to sign a confidentiality agreement to prevent the unauthorized disclosure of proprietary and confidential information, as outlined in the agreement.

The assessment process of an audit package is as follows:

- The group of potential audit panel members will review the college's audit package.
- Once the initial review is completed, they will be asked to submit their initial review results to OCQAS.
- OCQAS will evaluate the results of the initial review using a statistical measure of inter-reliability:
 - Fleiss's kappa: assesses the agreement for categorical ratings of several items or classifying items between a fixed number of raters. The measure calculates the degree of agreement in classification over that which would be expected by chance.
- During the training, the group of potential audit panel members will discuss and address the inconsistencies highlighted by the inter-reliability measure.
- Following the training sessions, the prospective audit panel members will be requested to submit a second review of the same audit package.
- OCQAS will re-evaluate these reviews using the same statistical measure.

Based on results of the second review, OCQAS will select the three (3) panel members that will conduct the audit, and submit their names to the college as the final audit panel.

This approach to auditor training ensures consistent assessment of standards and their requirements, while also enhancing preparation and team building for the audit panel members before the audit visit.

vii. **Audit Panel Composition**

OCQAS recruits experts with diverse backgrounds within the post-secondary education network and beyond. These experts may include academic deans, directors, faculty, and other higher education professionals.

The audit panel members are chosen for their knowledge of the post-secondary education system and their experience in evaluation and quality assurance.

Qualifications of Audit Panel Members



- Recent experience (5-10 years) in the post-secondary education sector as a senior administrator or role that collaborates with various institutional units.
- Knowledge and understanding of policies, procedures, and practices in the post-secondary education sector.
- Ability to collect and verify audit evidence.
- Proficiency in composing findings and conclusions (information analysis and synthesis).
- Strong report writing skills.
- Ability to form and develop interpersonal and professional relationships.
- Capability to work independently and as part of a team (collaborative work).
- Strong problem-solving and critical thinking skills.
- Excellent organizational and project management skills.
- Objectivity and impartiality.

Audit panel members must not have an employment, advisory, or contractual relationship with the college under review, nor any other connection that could create a real or perceived conflict of interest.

The audit panel composition generally follows the structure outlined below. However, extenuating circumstances and the need for external confidence may require changes, which must be approved by the OCQAS Executive Director after consulting with the college being audited.

- One (1) qualified and trained audit panel chair who is external² to the CAAT system and has demonstrated audit experience, with at least one (1) audit in an Ontario College, either as a panelist or an observer to the process.
- Two (2) qualified and trained audit panelists from within or external to the CAAT system, and external to the college being reviewed.

The audit panel is accompanied by one (1) OCQAS employee who participates strictly as an observer, without interfering in any aspect of the audit. This individual may not inject, provide opinions, argue a finding, or speak for or against a finding but may offer redirection or clarification as required, to ensure standards and their accompanying requirements are being accurately interpreted.

For each audit, panel members are selected to analyze the audit package submitted by the college, visit the college (virtually), and make evaluation decisions and recommendations for improvement. The audit panel members are tasked with:

- Analyzing the audit package submitted by the college prior to the audit visit.

² *External* is defined as follows: residing outside of the province and/or having worked outside of the CAAT system for a minimum of five (5) years.



- Identifying items requiring further verification and clarification prior to the audit visit.
- Preparing questions for each of the representative groups that will participate in the audit visit interviews. (These questions should be clearly linked to key elements of the standards and their accompanying requirements. They should also aim to clarify areas that require further verification or clarification based on the audit panel’s assessment of the college’s audit package and all other supplemental information and documentation received prior to the audit visit.
- Participating in all aspects of the audit visit.
- Verifying the effectiveness of the college’s quality assurance mechanisms based on the information presented in the audit package and during the audit visit.
- Collaborating with other audit panel members.
- Preparing the audit report which specifies recommendations for continuous improvement based on the audit findings.

Audit panel members are expected to conduct themselves professionally throughout the entire audit process. The following guidelines are expected to be followed:

- Perform work with integrity (honesty, diligence, responsibility).
- Perform work impartially.
- Ensure fair presentation (report truthfully, openly, and accurately using evidence-based audit findings).
- Exercise due diligence and professional care.
- Exercise discretion, confidentiality and proper handling of information acquired during the audit process.
- Ask carefully planned audit questions related to the standards.
- Act in a manner that is free from bias and conflict of interest.
- Communicate diplomatically, objectively and timely.
- Maintain open communication channels.

All audit panel members are made aware of the expected professional conduct practices through their training with OCQAS.

Related Document	<u>Job Opportunity: Positions Open for Auditors.</u>
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4. STAGES OF THE AUDIT PROCESS

Related Document	<i>All documents can be found on the OCQAS website:</i> <u>https://www.ocqas.org/resources/categories/guidelines/</u>
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i. Notification of the Audit

At the beginning of the academic year before their audit year, OCQAS reaches out to the designated representatives from the colleges that will be audited. During the initial communication, OCQAS provides a general overview of the required the information and documentation that must be submitted in advance, as well as the available audit dates from the established audit calendar. OCQAS then negotiates a suitable audit visit date with the college and officially informs the designated representative(s) of the audit process timeframe.

Timeframe	<i>Beginning of the academic year before the college's audit year.</i>
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ii. Audit Schedule

a. Fourth Cycle (five years)

2020-2021	2021-2022	2022-2023	2023-2024	2024-2025
CONF	HUMB	CENT	MOHA	BORE
STCL	LOYT	DURH	NORT	CONS
ALGO	NIAG	FANS	CAMB	GEOR
GRBR	SENE	FLEM	CANA	LACI
	SLAW	SHER	SAUL	LAMB

b. Fifth Cycle (six years)

2025-2026	2026-2027	2027-2028	2028-2029	2029-2030	2030-2031
CONF	LOYT	DURH	CAMB	LAMB	BORE (6)
STCL	NIAG	FLEM	SAUL	MOHA (6)	CONS (6)
ALGO	SENE	SHER	FANS (6)	NORT (6)	LACI (6)
GRBR	SLAW	HUMB (6)	CENT (6)	CANA (6)	GEOR (6)

iii. Audit Schedule Adjustment Guideline

Ontario colleges undergo the audit process every five-years (transitioning to a 6-year cycle), and are grouped into cohorts. Maintaining the audit schedule is crucial to ensure that the review of college's quality assurance mechanisms against established standards provides the necessary feedback for offering high-quality programs and services. Adhering



to the schedule ensures fair and consistent services across all colleges, preventing an uneven workload for OCQAS.

However, certain factors beyond a college's control may necessitate adjustments to the audit schedule due to the impact on regular operations. Examples include labour unrest (strikes), pandemics, natural disasters, or other unforeseen events.

Types of Audit Schedule Adjustments Requests

Modifications to the audit schedule can take two forms:

1. **Delay:** The audit process will still take place within the originally planned academic year, but the due dates for different phases (such as the audit package and audit visit) will be adjusted from the initially approved timelines.
2. **Deferral:** The audit process is postponed by one academic year from the original audit package submission date.

Process for requesting CQAAP schedule adjustments

The request for either Delay or Deferral must be submitted in writing to OCQAS. The college must provide a rationale and any supporting evidence for the request. Requests for Delays and Deferrals are initiated by the college Senior Leadership and submitted to the Executive Director of OCQAS. Request for Deferrals will be presented to the Management Board for information.

If a Deferral request is granted, the college must still complete the next audit according to the original schedule with their cohort. This may result in the next audit starting earlier than the standard five-year (transitioning to a 6-year) cycle. The diagram below provides an example of deferral.

Diagram 1. Deferral Example.



iv. Selection of College Programs (Program Selection Process)

The goal is to ensure a diverse program representation.



- Colleges submit a College Program List Form to OCQAS.
- OCQAS randomly selects between four (4) and eight (8) programs. The selection will reflect the college’s program mix considering factors like credential levels, fields of study/School, origin of the program Vocational Learning Outcomes (VLO), funding source, delivery location, and alternative modes of delivery).
- Colleges can request to replace non-representative programs, but they must provide justifications to support their request.

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

Related Document	<i>To be completed by the college and submitted to OCQAS: College Program List Form.</i>
Timeframe	<i>No later than the beginning of the college’s audit year.</i>

The program representation requirements are as follows:

- **Program Type:**
 - **Inclusions:** Credential levels as indicated in the Minister’s Binding Policy Directive - Framework for Programs of Instruction:
 - Ontario College Certificate (OCC), Ontario College Diploma (OCD), Ontario College Advanced Diploma (OCAD), Ontario College Graduate Certificate (OCGC).
 - **Exclusions:**
 - Degrees.
 - Certificates.
 - Certificates of Apprenticeship, even those that lead to an Ontario College Credential.
 - Micro credentials.
 - College programs that require a *mandatory* external accreditation.
- **Fields of study/School:**
 - Applied Arts, Business, Health Sciences, Human Services, Hospitality and Tourism, Technology, Trades, other.
 - Colleges may organize their program differently, which might not align with the fields of study listed above. For example, Business and Hospitality and Tourism could be grouped into a single School). The goal is to ensure that the College maintains a diverse representation of programs, regardless of its internal organizational structure.
- **Origin of the program Vocational Learning Outcomes (VLO):**
 - Programs that use a provincial program standard published by the MCU.
 - Programs that align to provincial program descriptions.



- **Funding Source:**
 - Funded by the Ministry (i.e., APS 01###).
 - Full cost recovery (i.e., APS 04###).
- **Delivery Location:**
 - Alternative campus
 - Third party
 - Public partners
- **Alternate modes of delivery:**
 - In-person, Online
 - Hybrid (e.g., Mix of in-person and online).

v. **Completing the Audit Package/ Informal Review**

The document should be concise, supported by relevant evidence, and include a continuous improvement action plan.

Step 1: Complete the Self-study or QA Book

The self-study or QA Book should clearly articulate *processes and quality assurance mechanisms*. It is also important to identify the person at the college responsible for the *actioning and review of each requirement*.

Step 2: Support with Evidence

The *selected programs* should be clearly linked as evidence to the processes and quality assurance mechanisms described in the self-study or QA Book.

These programs must be used as supporting evidence, more specifically in Standards 1-4. At a minimum, three (3) programs are featured to demonstrate the connectedness of processes across the entire lifecycle of a program. Additional programs could be used to show the consistent application of the quality assurance mechanism or to demonstrate something that none of the selected programs can.

Step 3: Self-Evaluation

As part of the self-study or QA Book the college must conduct a critical evaluation of the effectiveness of its quality assurance mechanisms. Each standard must be critically assessed and affirmations must be articulated to identify gaps in QA as well as how the college plans to remediate the gap. These must be clearly identified as affirmations and linked to the requirement they are addressing (i.e., R. 1.2).

Note: When a college introduces a new quality assurance mechanism to replace a former one, and there is insufficient evidence of the effectiveness of the new mechanism's effectiveness due to its recent implementation, the college should provide evidence that



the former mechanism was effective. This principle ensures that colleges are not unduly penalized for adopting a new and more effective quality assurance systems in place of previously effective ones.

Step 4: Informal Review

The OCQAS Team will help the college by reviewing the draft self-study or QA Book, providing feedback and support. They will assess if the document clearly outlines the processes for auditors to evaluate each requirement. This stage is optional but highly recommended.

Related Document	Guide to Completing a Self-Study
	Guide to Completing a QA Book
Timeframe	At least 10 weeks prior to submitting the audit package

vi. Submission of the Audit Package

Self- Study Option:

In addition to the completed self-study and supporting evidence, the college must submit the enclosed documents to OCQAS:

- A current organizational chart for the college, including names and responsibilities of all senior college employees.
- Previous *Audit Report*.
- Previous *Current State of Quality Assurance Activities Report- Follow-up (18 month) Report*.
- A *Current State of Quality Assurance Activities Report*.

QA Book Option:

In addition to the completed QA Book and supporting evidence the college must submit the enclosed documents to OCQAS:

- A current organizational chart for the college, including names and responsibilities of all senior college employees.
- Previous *Audit Report*.
- Previous *Current State of Quality Assurance Activities - Follow-up (18 month) Report*.
- The *Current State of Quality Assurance Activities Report*.
- Cover letter that includes the college’s QA structure, activities, and goals with the opportunity to brag a little about their commendable practices, and



- A self-evaluation of its quality assurance mechanisms and affirmations (as needed) for each standard.

Documents must be submitted electronically using a platform or tool selected by the college, such as a database or file storage system. The chosen platform must be user-friendly and secure, provide adequate technical support, and ensure that documents are easily accessible, searchable, and clearly identified.

Related Documents	Self-Study Option: Self-Study Template
	QA Book Option: QA Book Template (pilot draft) Cover Letter Template (pilot draft)
	Previous Current State of Quality Assurance Activities - Follow-up (18 month) Report
Timeframe	10 weeks prior to the college's scheduled audit visit date

vii. Confirmation of the Audit Visit Dates and Audit Panel Members

After the auditor training, OCQAS sends an official electronic confirmation of the agreed-upon audit visit dates and the final audit panel members to the designated college representative, who is responsible for communications with the audit panel chair.

Timeframe	8 weeks prior to the college's scheduled audit visit date
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viii. Review of the Audit Package and Follow-up Questions

The audit panel reviews the submitted audit package for completeness. After the final review, the audit panel chair promptly sends any requests for additional documentation or questions to the designated college representative. The college must respond promptly, providing the requested information and documentation to the audit panel chair.

Related Document	<i>To be completed by the audit panel and submitted to the college:</i> Audit Panel Review Questions and Areas Requiring Further Information and Documentation
Timeframe	Submission of request to the college representative for additional information and documentation: at least 4 weeks prior to the college's scheduled audit visit date.
	Submission of college response to the audit panel chair: at least 2 weeks prior to the college's scheduled audit visit date.

ix. Preparation for the Audit Visit



The designated college representative develops a draft schedule for the audit visit and sends it to the audit panel chair for review. The audit panel chair provides feedback or suggested changes to the to the designated college representative to finalize the schedule.

The schedule will be drafted according to the following audit visit scheduling principles:

- a- A 15-minute break is required at every second session or every two hours
- b- Audit visit interviews should not be scheduled during the lunch period.
- c- The college is expected to provide a diverse range of individuals, as identified by the representation requirements. This includes, at minimum, representatives from the programs listed in the college’s audit package, as well as some from other programs.
- d- When participation from certain groups is minimal, it might hinder the audit panel’s ability to corroborate information, leading to a lack of clarity on some processes. It is the college’s responsibility to ensure attendance at the CQAAP audit visit interviews and to adequately prepare the participants for the discussions.
- e- If there are concerns about a shortage of students or graduates, the college may discuss the possibility of surveys with OCQAS, however, the audit visit participation is preferable as it allows for more clarity.
- f- Although the schedule allocates two interview slots for specific representative groups, plan 2 groups only if the number of participants is as prescribed. If the college anticipates fewer participants, making one large group is preferable (i.e., instead of 2 groups of 7 students, one group of 14 students is preferable)
- g- 12 participants are ideal but in certain cases, up to 16 participants is acceptable, colleges may discuss this with OCQAS.
- h- Colleges use the Draft Audit Visit Schedule in Table 1 to develop their site visit timetable.
- i- The audit visit schedule must include the name, role/position, and sector for each member of the representative groups. Additionally, colleges are expected to provide identification for all members during the audit visit interviews indicating their name, role/position, and sector. Colleges must “rename” participants prior to the interview start.

Table 1. Draft Audit Visit Schedule

Representative Group	Representation Requirements	Duration (2.5 days)
Senior Leadership	Locally determined (i.e., President, VP Academic, VP Student Services, VP Finance, VP Human Resources)	Beginning of day 1 (30 min.) for opening remarks. End of audit visit (30 min.) for closing remarks.
Board of Governors	Locally determined	30 min.



Students	<p>General requirements: To give the audit panel a comprehensive view of the college's quality assurance activities, please ensure that priority is given to students from the selected programs.</p> <p>Group Meeting</p> <ul style="list-style-type: none">• The audit panel will meet with two (2) groups of students separately.• Each group must have two (2) to three (3) students from four (4) to eight (8) of the identified programs.• Each group will have between six (6) to twelve (12) students.	45 min./group
Graduates	<p>This representative group includes the following: 1. Graduates: Individuals who have met all the requirements and have been granted a college credential within the last 24 months.</p> <p>Group Meeting</p> <ul style="list-style-type: none">• The audit panel will meet with two (2) groups of graduates separately.• Each group must have two (2) to three (3) graduates from four (4) to eight (8) of the identified programs.• Each group will have between six (6) to twelve (12) graduates.	45 min./group
Program Advisory Committees (PACs)	<p>General requirements: To give the audit panel a comprehensive view of the college's quality assurance activities, please ensure that priority is given to PAS members from the selected programs.</p> <p>Group Meeting</p> <ul style="list-style-type: none">• The audit panel will meet with two (2) groups of PAC members separately.• Each group must have two (2) to three (3) PAC members from four (4) to eight (8) of the identified programs.• Each group will have between six (6) to twelve (12) PAC members.	30 min./group
Faculty/Program Coordinators	<p>General requirements: To give the audit panel a comprehensive view of the college's quality assurance activities, please ensure that priority is given to Faculty/Program Coordinators from the selected programs.</p> <p>Group Meeting</p> <ul style="list-style-type: none">• The audit panel will meet with two (2) groups of faculty separately.	40 min./ group



	<ul style="list-style-type: none"> Each group must have two (2) to three (3) faculty members from four (4) to eight (8) of the identified program clusters/fields of study (all program clusters must be represented). Each group will have between six (6) to twelve (12) faculty members. 	
Program/Curriculum Development/Review Staff & Quality Lead Teams	<p>Locally determined.</p> <p>The group should be at maximum twelve (12) individuals.</p>	60 min.
Student Support Service Providers (front-line employees not managers)	<p>To give the audit panel a comprehensive view of the college's quality activities, please include representatives from the student support services (not limited to):</p> <ul style="list-style-type: none"> Admissions. Financial Aid. Student Services (mental health and wellness, tutoring, academic advising, student association, aboriginal, international, first generation, disabilities, etc.). Library. <p>Group Meeting(s):</p> <ul style="list-style-type: none"> The group composition may be determined by the college however it chooses or deems appropriate. <p>Each group should be at maximum twelve (12) individuals.</p>	60 min. OR 2 groups (30 min. each)
Deans, Associate deans, Program or Department Chairs, or Heads of Academic Department	<p>To give the audit panel a comprehensive view of the college's quality activities, please ensure <i>all</i> deans, associate deans, and program/department chairs be included among the representatives from all program clusters/fields of study.</p> <p>Group Meeting(s):</p> <ul style="list-style-type: none"> The group composition may be determined by the college however it chooses or deems appropriate. <p>Each group should be at maximum twelve (12) individuals.</p>	90 min. OR 2 groups (45 min. each)
Directors/ or Heads of Service Departments	<p>To give the audit panel a comprehensive view of the college's quality activities, please include representatives from all services (including, but not limited to):</p> <ul style="list-style-type: none"> Registrar. Student Services. Library. Finance. Information Technology. Student Residence. Fitness/Sports Centre. Human Resources. Physical Resources (Facilities). Alumni Foundation. Applied Research. 	90 min. OR 2 groups @ 45 min. each



	<ul style="list-style-type: none"> • Employment Services. • Institutional Research. <p>Each group should be at maximum twelve (12) individuals.</p>	
Audit Panel	Audit Panel members	End of audit visit before closing remarks (60 min.) for deliberations.

Colleges are strongly encouraged to inform the members of representative groups of their roles and responsibilities in the college’s audit process, including the purpose and scope of the CQAAP, prior to the audit panel interviews.

For onsite audit visits, OCQAS requires that colleges inform their security department of the presence of each audit panel member, including the duration of their visit and provide temporary security ID badges if needed. If necessary, colleges should also provide parking passes for the audit panel members for the duration of the visit. **Please note that since Spring 2020, all audit visits are virtual until further notice. See Appendix A: Guidelines and Protocols for Virtual Audit Visits.**

Related Documents	<i>To be submitted by the college to the audit panel chair: Draft Audit Visit Schedule. Appendix A: Guidelines and Protocols for Virtual Audit Visits</i>
Timeframe	<i>At least 1 week prior to the college’s scheduled audit visit date.</i>

x. Audit Visit

The primary objective of the audit visit is to verify the information in the college’s audit package to strengthen the understanding of the college’s QA mechanisms. Additionally, the audit visit allows for the consideration of any subsequent corrective measures implemented between the submission of the audit package and the audit visit.

The audit visit spans two and one-half (2.5 days) and includes interviews with various representative groups involved in the implementation and follow-up of quality assurance mechanisms, as well as the assessment of their effectiveness.

The audit visit is expected to be conducted via videoconference to facilitate the participation of individuals from other campuses involved in the representative groups, programs and discussions. OCQAS will supply the necessary tools for conducting the interviews, while the college must ensure sufficient technical support for the videoconference format.

Audio or video recordings of the audit visit interviews with the representative groups are not permitted. However, OCQAS reserves the right to record an interview or part of an interview if an auditor loses connection.



Throughout the audit visit, the audit panel will meet to summarize and document its observations. The audit panel members will assess the results for each requirement against its objectives, identifying strengths and areas of needing improvement to present their findings to the college.

The audit panel's observations are strictly evidence-based and supported by the information in the college's audit package, the views expressed by the college participants during the audit visit, and any other documents reviewed during the audit visit.

The audit visit concludes with a meeting involving the college's senior leadership and other relevant administrative employees. The sole purpose of the meeting is for the audit panel chair to present the panel's conclusions; it is not an opportunity to discuss audit findings. The meeting serves to prepare the college for the potential contents of the preliminary audit report and recommendations it may include.

All evidence is expected to be submitted prior to the completion of the audit visit.

Timeline	Duration: 2-3 days.
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xi. Preparation and Submission of the Preliminary Audit Report

Following the audit, which involves a comprehensive review of all documentation from the college and the completion of the audit visit, the audit panel drafts a preliminary version of the audit report.

Evaluation Framework

An audit decision is made only after a fair and unbiased evaluation process. This includes assessing the college's audit package and the evidence presented during the audit against the standards and requirements set by OCQAS.

The evaluation decisions are as follows:

Requirement Results:

- MET: A Requirement is **met** if:
 - the college meets or exceeds the expectations embodied in the Requirement.
- PARTIALLY MET: A Requirement is **partially met** if:
 - the college meets in part the expectations embodied in the Requirement, or
 - performance in relation to some aspects of the Requirement must be improved.



- NOT MET: A Requirement is **not met** if:
 - the college fails to meet the expectations embodied in the Requirement, or
 - performance in relation to one or more aspects of the Requirement is deficient.

Standard Results:

- MET: A Standard is **met** if the college meets or exceeds the expectations embodied in the Standard.
- PARTIALLY MET: A Standard is **partially met** if:
 - the college meets in part the expectations embodied in the Standard, or
 - performance in relation to some aspects of the Requirements must be improved.
- NOT MET: A Standard is **not met** if:
 - the college fails to meet the expectations embodied in the Standard, or
 - performance in relation to one or more aspects of the Requirements is deficient.

Maturity Results:

- MATURE EFFORT: A College receives a Mature Effort when it meets or exceeds the expectations embodied in the Quality Standards.
- ORGANIZED EFFORT: A College receives an Organized Effort when it meets in part the expectations embodied in the Quality Standards.
- FORMAL EFFORT: A College receives a Formal Effort when it fails to meet the expectations embodied in the Quality Standards.

Report Findings

The audit report aims to describe the college's quality assurance system and assess its effectiveness. It outlines the audit panel's findings based on the specific information reviewed, highlighting both strengths and areas requiring development, and providing recommendations for improvement. The report addresses all relevant areas concisely, without excessive detail or presuming to be exhaustive. It avoids commenting on individuals or on standards unrelated to the quality assurance process.

All statements within the audit report are substantiated by appended evidence. Strongly held views are expressed clearly and directly, avoiding excessive subtlety.

The audit report includes sufficient evaluative narrative to demonstrate the reasoning behind the audit panel's conclusions. Where remediation is required, the report clearly



outlines the deficiencies to be addressed. Similarly it provides insight into why certain requirements were met, offering valuable information for future audits.

Upon completion, the preliminary report is submitted to OCQAS for review to ensure clarity and consistency. It undergoes analysis and approval before being sent to the designated college representative for review.

<i>Related Document</i>	<i>To be submitted by the audit panel chair to OCQAS: Audit Report Template.</i>
<i>Timeframe</i>	<i>Within 5 weeks following the audit visit.</i>

xii. Review of the Preliminary CQAAP Report

OCQAS sends the preliminary version of the audit report to the designated college representative for comments and feedback to ensure the report accurately reflects the college’s situation. The college must submit its written response to OCQAS within the specified timeframe.

Upon receiving the college’s feedback, OCQAS forwards the document to the audit panel chair. The chair, in consultation with the audit panelists, reviews the feedback and may amend the preliminary report at the audit panel’s discretion.

If the audit panel decides not to incorporate the college’s comments or recommended corrections, the college may request that these be submitted to the OCQAS Management Board for review when the final audit report is submitted.

<i>Timeframe</i>	<i>Submission of the college feedback to OCQAS: within 4 weeks of the receipt of the preliminary audit report.</i>
	<i>Submission of the final report: within 3 weeks of OCQAS receiving the response from the college.</i>

xiii. Submission of the Final CQAAP Audit Report

After the audit panel chair incorporates the feedback from the college and the audit panel and finalizes the report, OCQAS submits the final document to the OCQAS Management Board for review and approval.

The OCQAS Management Board is responsible for affirming the conclusions, endorsing the recommendations and approving the final audit report. After its review, the OCQAS Management Board may request the audit panel to make certain amendments to ensure



consistency before approval. Additionally, the Board may require the President to provide an attestation addressing any incomplete work on previous recommendations.

Timeframe	<i>Scheduled monthly OCQAS Management Board meetings.</i>
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xiv. Formal Board Approval

After the OCQAS Management Board approves the final audit report, the Executive Director of OCQAS releases it to the President of the audited college and the audit panel members for signatures. At this stage, the college may share the report with its invested parties.

Timeframe	<i>Scheduled monthly OCQAS Management Board meetings.</i>
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xv. Appeal Process

Colleges wishing to appeal must submit their request in writing to the Chair of the OCQAS Management Board.

Related Document	<i>Appeals Policy.</i>
Timeframe	<i>Within 4 weeks of notice of the receipt of the final audit report.</i>

xvi. Release of the Final CQAAP Report, Publication of the Audit Decision and Stipulations

The OCQAS Management Board holds the authority to release the audit decision and any associated stipulations (commendations, affirmations, and recommendations once the following conditions are met:

- The audit panel’s process adhered to the approved audit guidelines.
- The college has had the opportunity to comment on the preliminary audit report and has been treated fairly and consistently compared to other college reviews.
- The college has provided a written response to their review of the preliminary audit report.
- The deadline for filing an appeal has passed without an appeal being made, or the appeals committee has heard and ruled on the appeal, and any required changes have been implemented.
- The final audit report does not contain confidential or proprietary information.

Subsequently, OCQAS publishes an executive summary of the college’s audit decision and any accompanying stipulations (commendations, affirmations, and recommendations) on its website.



The final audit report is a public document and is the property of the OCQAS Management Board.

xvii. Follow-up CQAAP Reporting

The college is required to submit a follow-up report to OCQAS subsequent to the issuance of its final audit report. This follow-up report should detail the quality assurance activities undertaken to address the recommendations and affirmations identified in the final report or since its last report submitted to OCQAS. If any recommendations have been delayed or remain unaddressed, an explanation must be provided within this report.

The OCQAS Management Board will review the follow-up report. Notably, the submission of evidence is not required for this report.

<i>Related Document</i>	<i>To be submitted by the college to OCQAS: Current State of Quality Assurance Activities Report.</i>
<i>Timeframe</i>	<i>24-months following the release of the final audit report.</i>



APPENDIX A

GUIDELINES AND PROTOCOLS FOR VIRTUAL AUDIT VISITS

INFORMATION FOR THE COLLEGE

- The college develops the agenda and educates all invested parties on the process.
- The Virtual Audit Visit lasts for **two and a half days (2.5 days)**.
- Each participant should join the audit visit interview on a separate device, clearly identified by name and with their camera enabled if possible.
Please note: Multiple participants are not allowed to attend interviews from the same room, even if the room has advanced meeting technology.

Audit Visit Interviews

- CQAAP Guidelines and Framework inform on expected length of audit visit interviews for each group.
- To reduce 'screen fatigue or screen gloom':
 - Breaks are scheduled between interviews (at minimum 15 minutes every two sessions or every 2 hours).
 - Auditors should use this time to step away from their devices and relax.
 - Colleges can use this time to assist participants experiencing technical issues.

Preparing the Agenda/ Selection and Number of Individuals per Session

- Audit visit interviews participation/selection
 - Balance participant representation.
 - 12 participants are ideal but in certain cases, up to 16 participants is acceptable, colleges may discuss this with OCQAS.
 - Although the schedule allocates two interview slots for specific representative groups, plan 2 groups only if the number of participants is as prescribed. If the college anticipates fewer participants, making one large group is preferable (i.e., instead of 2 groups of 7 students, one group of 14 students is preferable)
 - The sessions will start only when all the confirmed participants are present.
 - The final agenda should list the names and representation of all participants.



IT and Support - ZOOM

- Two weeks before the audit visit
 - Share IT instructions with participants and IT support contact information.
 - Offer to each participant a 15-minute virtual trial session, according to a published availability timetable, to familiarize them with Zoom and session protocols. (OCQAS can provide a practice link if required.)
- One week before the virtual audit-visit
 - Send invitations to each participant.
 - Hold 15 minutes sessions with participants who requested a trail, according to the published timetable. IT staff will assist with troubleshooting and provide video conferencing tips.
- During the audit visit
 - A college member will admit participants, welcomes them, and ensure their name and representation are correctly displayed on screen.

INFORMATION FOR THE PARTICIPANTS

Leading Up to the Audit Visit

- One – two weeks before the audit visit.
 - Familiarize yourself with Zoom.
- The night before the audit visit.
 - Prepare your space:
 - i. Find a quiet and private area to join the session.
 - ii. Decide on the device you will use.
 - iii. Keep your headphones or earphones nearby.
 - Computer housekeeping:
 - i. Reboot your system.
 - ii. Check all settings and test your audio and video (preferably using Zoom).
- The day of the audit visit interview
 - Turn off and quit other applications, especially those that might compete for the mic and camera (e.g., other video conferencing, chat, and collaboration tools).
 - Log in five minutes early (contact IT if you have trouble logging in).

During the Audit Visit Interviews

- **Video:** Start your video camera by clicking the “Video” button on the toolbar.



- **Microphone:** Leave your microphone off unless required.
- **Audio:** Use headphones or earphones to listen.
- **Waiting Room:** You may be placed in a “waiting room” before being admitted. Please be patient.
- **Session Etiquette:** The interview chair/facilitator will review the online session etiquette with all participants at the beginning of each meeting.
- **Mute on Entry:** Your microphone will be muted upon entry. Please remain muted unless speaking.
- **Chat window:** Enable the Chat window by clicking the ‘Chat’ icon in the toolbar. The Chat window will open at the side of the screen. The audit panel will invite you to use the chat to answer questions. Please note that responses on the main area or the chat will not be attributed to individuals. The audit panel is looking for common understandings and verify how the college’s mechanisms are working.
- **Non-Verbal Feedback tools:** Use the Non-Verbal feedback tools (at the bottom of the participant window) to:
 - **Raise Hand:** Indicate your desire to speak.
 - **Speaking:** Wait for the Panel Chair/Facilitator to call you by name to introduce yourself or speak. Unmute your microphone when asked to speak and mute it again when you are finished.

Recording of sessions

- Sessions will be recorded only if a panel member gets dropped from the audit visit interviews. The following parameters will be followed:
 - Only the ongoing session will be recorded.
 - The facilitator will indicate when the recording starts and when it stops.
 - Recordings will be done by the OCQAS moderator only.
 - Recordings will be stored on a computer by the OCQAS moderator (not in the cloud).
 - Recordings will be shared only with audit panel members for the purpose of writing the college’s audit report.
 - All audit panel members have signed a confidentiality agreement to ensure no information (audio, video, documents, etc.) is shared outside the audit panel, including interview recordings.
 - The audited college will not receive a copy of the recordings, they are confidential and proprietary to OCQAS.



- Once the final audit report is approved by the OCQAS Management Board, the recordings will be destroyed by the OCQAS recording holder.

INFORMATION FOR THE OCQAS MODERATOR

During the Audit Visit Interviews

- **Meeting Management:** Manage the virtual meetings (creation of the audit visit interviews and of the breakrooms, welcoming the participants, transferring the participants into the appropriate breakrooms, record the interview when necessary) so that the chair/facilitator can fully engage in session discussions.
- **Monitoring:** Monitor non-verbal feedback and chat activity.
- **Speaker's Queue:** Maintain the speakers' queue, as per raised hands.
- **Alerts:** Alert the session chair/facilitator to raised hands and questions posed in chat.
- **Screen Sharing:** Share screen and documents as needed.
- **Recording:** Inform participants when the recording of the interview starts and finishes.
- **Timekeeping:** Serve as a timekeeper announcing when there are 5 and again when there are 2 minutes left in the session.
- **Store recording:** Store the recording to the OCQAS private folders.