COLLEGE QUALITY ASSURANCE AUDIT PROCESS (CQAAP)

GUIDELINES AND FRAMEWORK (2023/2024)

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

In order to grant greater autonomy to Ontario’s colleges of applied arts and technology (CAATs), and with the introduction of The Colleges of Applied Arts and Technology Act, 2002, colleges were mandated by the government to implement a process to assure quality. Two elements of this expectation were outlined as: quality assurance at the individual college level; and a self-regulating process at the college/provincial system level.

In the development of an approach to self-regulation, a decision was made to focus on quality assurance: the mechanism or procedures used to measure the level or existence of quality. To that end, the Ontario College Quality Assurance Service (OCQAS), a policy-driven, arms-length independent oversight and governance body, established in 2005, and operating independently of any individual academic institution and of the provincial government 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 evaluating the effectiveness of quality assurance systems within colleges which operates through 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. Prior to the full implementation of the PQAPA, a pilot project was conducted in five of the colleges of applied arts and technology. In the fall of 2006, Dr. William Massy evaluated the pilot project. His evaluation affirmed that the PQAPA reflected global best practices and was well suited to the needs of the Ontario college system at the time.

The Ontario public colleges, through the work of OCQAS, have developed a strong, well-received, and effective quality assurance system since 2005. This was affirmed by an

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.
external review and evaluation of the PQAPA model by Dr. John Randall in 2010 using international validated criteria.

II. 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:

- 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
The 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 as a process which can be defined in terms of:
  - Internal quality assurance, which refers to ongoing activities implemented by an institution to ensure it is indeed reaching its stated objectives.
    - An internal quality assurance system begins with the institution’s identity and enters 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 predetermined defined standards and their accompanying requirements.
➢ enhance mechanisms and systems.

The process develops into a continuous cycle of improvement.

- **External quality assurance**, which refers to activities implemented by an external body to evaluate, based on agreed-upon and predetermined quality standards, the ability of an institution’s quality assurance processes to ensure it is meeting its stated objectives.

- Quality as a *system* which consists of a structured yet dynamic organization of different quality assurance *mechanisms*.
- Quality as *improvement* which refers to the ability of the established quality assurance system to be effective by demonstrating and ensuring continuous growth.

### iii. Outcomes-based Evaluation Approach

The OCQAS adopts an evidence-based evaluation of the institution’s objectives through an audit process. The audit is based on agreed-upon and predetermined standards and their accompanying requirements to determine whether the institution’s mechanisms are sufficiently robust and effectively designed to achieve the expected outcomes.

Such an audit does not make specific judgments on activities; however, it does examine service-specific evidence to the extent necessary to be able to establish that institutional systems are functioning properly.

This approach respects an institution’s culture, values, principles, and evaluation methods that allow each institution to demonstrate its ability to meet the established standards, and thus takes into consideration the vision, mission, and goals of the institution.

The audit process itself is both systemic and cyclical and is implemented according to a predetermined calendar. Thus, every five years (transitioning to six years), each institution is required to submit a self-study or a QA Book and receives a prearranged audit visit from OCQAS. Following the audit visit, each institution is required to report on its quality assurance activities on a 24-month schedule following the audit visit.
III. OVERVIEW OF THE QUALITY ASSURANCE PROCESS

i. The Quality Assurance Mechanisms
In a college, the quality assurance mechanisms can take many shapes and cover different requirements of the standards. For OCQAS, a quality assurance mechanism is both mandatory and guiding from an institutional perspective and has been documented and implemented to ensure quality and continuous improvement. Mechanisms most often take the form of (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
Ontario’s public colleges have over the years implemented a diverse range of mechanisms that assure and measure the existence and level of quality within their institutions. The institutional quality assurance system includes an institutional management system designed to collect the evidence required to demonstrate the implementation of these mechanisms and their effectiveness.

The primary purpose of the audit is to examine the effectiveness of those mechanisms in ensuring quality.

iii. Evaluation Criteria
The standards and their accompanying requirements provide the framework for Ontario’s colleges to assess the extent to which their quality assurance mechanisms are meeting the established standards.

Quality Assurance Standards
The following six quality assurance standards to be met are:

- Program Quality Management System.
- Vocational Learning Outcomes as the Centre for Program Development (throughout the program lifecycle).
- Conformity with Government Requirements.
- Program Delivery and Student Assessment.
- Availability and Allocation of College-Wide Resources.

It is expected that determination of the effectiveness of a college’s quality assurance system, in other words, its ability to ensure continuous improvement of quality in its stated objectives, will be based on the following:
• implementation of quality assurance mechanisms.
• effectiveness of these mechanisms, that is, their ability to ensure a continuous improvement in quality by:
  - conducting a critical assessment of achievement of the mechanisms’ stated objectives.
  - identifying areas of strength and areas for improvement to ensure these objectives are met.
  - implementing corrective measures for improvement, namely through an action plan, in a context of continuous quality improvement.
• review and updating (enhancement) of quality assurance mechanisms to ensure 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:

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<th>REQUIREMENT</th>
<th>DESCRIPTION</th>
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<tr>
<td>1.1</td>
<td>Has established mechanisms that operationalize the Board of Governors’ (BOG) responsibility to ensure quality assurance is embedded in the strategic direction of the organization.</td>
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<td>1.2</td>
<td>Ensures that there are established mechanisms that are applied consistently to maintain currency and relevance of programs throughout their lifecycle (development, review, revision, suspension, cancellation and reactivation).</td>
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<td>1.3</td>
<td>Has mechanisms for gathering, collating, and analyzing data and information from various sources and invested parties that are related to program quality.</td>
</tr>
<tr>
<td>1.4</td>
<td>Uses data and information collected from various sources and invested parties to assess program performance and inform recommendations.</td>
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<td>1.5</td>
<td>Has mechanisms for ensuring that recommendations and action plans arising from program QA processes have been implemented.</td>
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<tr>
<td>1.6</td>
<td>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.</td>
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<tr>
<td>1.7</td>
<td>Manages program maintenance records arising from program lifecycle QA processes.</td>
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### 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 (PVLOs) 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 are derived from, and flow coherently from, the Program Vocational Learning Outcomes (VLOs) and Essential Employability Skills 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 course learning outcomes, PVLOs and EESs, 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 provincial credential validation framework (CVF).

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, 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 PVLOs. |

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 of PVLOs.

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

6.1 Ensures that faculty:
- 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.

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.

6.3 Ensures that support learning services employees providing student support services:
- 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.

6.4 Ensures that there are effective processes for identifying, reviewing and addressing needs related to:
- 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 Self-Evaluation Process
Each college is required to conduct a comprehensive assessment of the effectiveness of its quality assurance system, according to the standards and their accompanying requirements.

To do so, OCQAS assumes that the college will first establish a plan to steer its operation. This plan should define the main issues, the distribution of duties and responsibilities, data collection and analysis procedures, methods of consultation, as well as a time frame for completing the internal assessment process.
The college should collect data documenting the implementation of its quality assurance mechanisms as well as any corrective measures undertaken to improve quality. The analysis of this data allows the college to track and review the effectiveness of its mechanisms. This analysis must be based on valid and sufficient data to provide an effective critical assessment and demonstration of strengths and areas for improvement in the effectiveness of its quality assurance mechanisms. Based on the results of this assessment process, the college can then draw conclusions for each component of its quality assurance system.

The college can present its conclusions in a self-study or a QA Book, which at the time of the audit will include the necessary supporting evidence. The college will then draw up an action plan to ensure follow-up on the corrective measures identified to address any deficiencies observed in its quality assurance processes.

The OCQAS staff will assist the college in preparing for its audit by doing an ‘informal review’ of a draft copy of the self-study or QA Book prior to the final submission, providing support and feedback. This opportunity for an informal review is not mandatory; however, it is highly recommended.

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.

At the end of an audit, the OCQAS Management Board, based on the audit report, renders a decision on each of the standards and requirements assessed, sets forth recommendations for improvement, where applicable, and provides a decision on the overall effectiveness of the quality assurance system. The OCQAS publishes audit decisions and any accompanying stipulations on its website at the end of the audit cycle.
vi. **Auditor Training**

The OCQAS has an ongoing application process for qualified applicants who are interested in conducting audits. The OCQAS uses a roster, i.e., a pool of candidates, who have already been vetted as viable candidates through the application process and who are ready for immediate selection. If a candidate has been informed of their inclusion in the roster, they can potentially be selected for an upcoming audit without having to re-apply.

Once a candidate is included in the OCQAS roster, they will regularly receive e-mail communications to confirm continued interest in job openings for upcoming college audits. The candidate may also opt to temporarily be put on hold or to permanently be withdrawn from the roster. Candidates are encouraged to regularly provide OCQAS with updated contact information to ensure notification of audit opportunities may be received in a timely fashion. Upon being notified of successful selection for an upcoming audit, the candidate will be asked to provide OCQAS with an updated biography.

The OCQAS will advise the group of potential audit panel members of the college’s agreed-upon virtual audit visit dates. Once the potential audit panel members have confirmed their availability according to the submitted dates, OCQAS will submit to each college a slate of approximately twelve (12) potential audit panel members from which the college may select a minimum of six (6) names.

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:

- Understanding of the Standards and the Requirements.
- Expected code of conduct (confidentiality, impartiality, respect).
- Roles and responsibilities.
- Conflict of interest guidelines.
- Accessing and using the required 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, the potential audit panel members will be asked to sign a mandatory confidentiality agreement to prevent the unauthorized disclosure of proprietary and confidential information, as will be defined by 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, the group of potential audit panel members will be asked to submit their initial review results to OCQAS.
- OCQAS will evaluate the results of the initial review to assess inter-reliability using the following statistical measure:
  - Fleiss’s kappa: a statistical measure for assessing the reliability of agreement between a fixed number of raters when assigning categorical ratings to several items or classifying items. The measure calculates the degree of agreement in classification over that which would be expected by chance.
- The groups of potential audit panel members will receive specific training from OCQAS to address the inconsistencies highlighted by the inter-reliability measure.
- The groups of potential audit panel members will be asked to submit a second review of the same audit package for re-evaluation by OCQAS according to the same statistical measure.

Based on results of the re-evaluation, a final selection of three (3) audit panel members will be made by OCQAS and submitted to each of the colleges as their final audit panel.

This approach to auditor training ensures consistency in the assessment of the standards and their accompanying requirements and provides increased levels of preparation and team building for the audit panel members prior to the audit visit.

vii. Audit Panel Composition

The OCQAS recruits experts with diverse backgrounds within the post-secondary education network and elsewhere. These experts may include academic deans, assistant academic deans, directors of continuing education, human resources directors, faculty members, college professionals and external members of college boards of governors. Experts may also be recruited from diverse socioeconomic groups or from colleges/universities offering degrees in education-related fields.

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

Audit panel members must have the following qualifications:

- Demonstrated recent experience (5-10 years) in the post-secondary education sector as a senior administrator or a position that collaborated with units and areas across the institution.
• Knowledge and understanding of policies, procedures, and practices in the post-secondary education sector.
• Ability to collect and verify audit evidence.
• Ability to compose findings and conclusions (information analysis and synthesis).
• Strong report writing skills.
• Ability to form and develop interpersonal and professional relationships.
• Ability to work independently and as a member of a team (collaborative work).
• Strong problem-solving and critical thinking skills.
• Strong organizational and project management skills.
• Ability to be objective and impartial.

Further, audit panel members must not have an employment, advising, or contract relationship with the college under review, or any other connection that could create a conflict of interest, whether perceived or real.

The audit panel composition generally follows the structure outlined below; however, extenuating circumstances and the need for external confidence may require changes to be approved by the OCQAS Management Board after consultation with the college being audited.

• One (1) qualified and trained audit panel chair who is external\textsuperscript{2} to the CAAT system and has demonstrated audit experience, preferably direct 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 members of the audit panel are accompanied by one (1) OCQAS employee who participates strictly as an observer which means without interference in any aspect of the audit (this individual may not inject, provide opinions, argue a finding, speak for or against a finding). The OCQAS employee may however offer redirection or clarification at times, 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, prior to the audit visit, the audit package submitted by the college.

\textsuperscript{2} External is defined as follows: residing outside of the province and 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.
• Participating in all aspects of the audit visit.
• Verifying the effectiveness of the college’s quality assurance mechanisms based on the information acquired prior to, and during the audit visit.
• Collaborating with other audit panel members.
• Preparing the audit report which specifies, where applicable, recommendations to the college for continuous improvement based on the audit findings.

Audit panel members are expected to conduct themselves in a professional manner throughout the entire audit process. The following are the guidelines that audit panel members are expected to follow:
• Perform work with integrity (honesty, diligence, responsibility).
• Perform work in an impartial manner.
• 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 in a diplomatic and objective and timely manner.
• Maintain open communication channels.

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


4. STAGES OF THE AUDIT PROCESS

| Related Document | All documents can be found on the OCQAS website: https://www.ocqas.org/resources/categories/guidelines/ |

i. Notification of the Audit
The OCQAS communicates with the designated college representative(s) from the colleges to be audited at the beginning of the academic year preceding their audit year. At that time, the OCQAS outlines, in general terms, the information and documentation that the college is required to submit in advance of the audit, and the available audit dates based
on an established audit calendar. Based on the available dates in the audit calendar, the OCQAS negotiates a date for the audit visit with the college and officially communicates to the designated college representative(s) the timeframe for its audit process.

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<tr>
<th>Timeframe</th>
<th>Beginning of the academic year preceding the college’s audit year.</th>
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ii. **Audit Schedule**

   a. **Fourth Cycle (five years)**

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   b. **Fifth Cycle (six years)**

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<tr>
<th>2025-2026</th>
<th>2026-2027</th>
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<th>2028-2029</th>
<th>2029-2030</th>
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<td>LAMB</td>
<td>BORE (6)</td>
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<td>NIAG</td>
<td>FLEM</td>
<td>SAUL</td>
<td>MOHA (6)</td>
<td>CONS (6)</td>
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<tr>
<td>ALGO</td>
<td>SENE</td>
<td>SHER</td>
<td>FANS (6)</td>
<td>NORT (6)</td>
<td>GEOR (6)</td>
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<td>GRBR</td>
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<td>HUMB (6)</td>
<td>CENT (6)</td>
<td>CANA (6)</td>
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iii. **Audit Schedule Adjustment Guideline**

   Ontario colleges go through the audit process in five-year (transitioning to 6-year) cycles and are divided in cohorts. It is important to maintain the audit schedule to ensure review of college’s quality assurance mechanisms against established standards provides the colleges with the feedback necessary to offer high quality programs and services. Another reason to follow the schedule is to ensure fair and consistent services to all colleges without creating uneven workload for the OCQAS.
There may be factors outside of a college’s control that would necessitate adjustments to audit schedule because of the implications on regular college operations. Some examples include labour unrest (strikes), pandemics, natural disasters, or other unforeseen events.

**Types of Audit Schedule Adjustments Requests**

Modifications to audit schedule can take two different forms as outlined below:

1. **Delays**: The audit process occurs within the same academic year as originally planned, however, the due dates for the phases of the process (i.e., audit package, audit visit) are modified from the original approved timelines.

2. **Deferral**: The audit process is postponed one academic year from the original date of the audit package submission.

**Process for requesting CQAAP schedule adjustments**

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

It is expected that even when a deferral request is granted that the College will still need to complete the next audit as per the audit schedule, with their original cohort. This may mean that the next audit will start earlier than the five-year (transitioning to a 6-year) cycle. Diagram below provides an example of deferral.

![Diagram of Audit Schedule Adjustments]

iv. **Selection of College Programs (Program Selection Process)**

The purpose of the program selection process for CQAAP is to ensure a diverse program representation.

- Colleges will submit a College Program List Form to OCQAS.
- All programs will be randomly selected by OCQAS (range between four (4) and eight (8)) and the mix will be representative of the college’s program combination (credential levels, fields of study/School, origin of the Program Vocational Learning
Outcomes (PVLOs), funding source, delivery location, and alternative modes of delivery).

- Colleges will be given opportunity to replace programs that are not representative with a list of conditions/criteria to justify the nature of the request.

Once the Random program selection is complete, OCQAS will advise the designated college representative.

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

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 have a different organizational structure regarding programs that does not reflect the fields of study as stated above (e.g., Business and Hospitality and Tourism might be clustered into one School). The aim is to ensure that the College includes a diverse representation of programs, notwithstanding its internal organizational program clustering.

- **Origin of the Program Vocational Learning Outcomes (PVLOs):**
  - 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###).
v. **The College Self-Evaluation Process**

The college is required to collect evidence and conduct a comprehensive assessment of the effectiveness of its quality assurance mechanisms, according to the standards and their accompanying requirements.

This analysis must be based on valid and sufficient data to provide an effective critical assessment and demonstration of strengths and areas for improvement in the effectiveness of its quality assurance mechanisms. Based on the results of this self-assessment process, the college can then draw conclusions for each component of its quality assurance system.

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

As part of its internal assessment process, the college is required to carry out a critical assessment of the effectiveness of its quality assurance mechanisms in a self-study or QA Book. The self-study or QA Book must be concise, supported by relevant evidence, and accompanied by 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 (Organizational Structure).*

**Step 2: Support with Evidence**

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

The selected programs must be used as supporting evidence, more specifically in Standards 1-4. The minimum expectation is that three (3) programs are featured as evidence of the connectedness of processes across the entire lifecycle of a program. The remaining programs should be used as additional evidence to demonstrate the consistent use of the quality assurance mechanism across the institution.
During the informal review the OCQAS staff will assist the college by reviewing the draft self-study or QA Book and providing feedback and support. The OCQAS staff will read the narrative and determine whether it presents its processes with sufficient clarity to allow the auditors to assess each requirement. This stage is not mandatory; however, it is highly recommended.

<table>
<thead>
<tr>
<th>Related Document</th>
<th>Guide to Completing a Self-Study</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Guide to Completing a QA Book</td>
</tr>
<tr>
<td>Timeframe</td>
<td>At least 10 weeks prior to submitting the Audit package</td>
</tr>
</tbody>
</table>

vii. **Submission of the Audit Package**

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

- A current organizational chart for the college, including names and responsibilities of all senior college employees.
- Previous Audit Report.

QA Book Option:
In addition to the completed QA Book and supporting evidence the college must submit the following accompanying 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.
- Cover Letter including the following items:
  - The college’s QA structure, activities, and goals with the opportunity to brag a little about their commendable practices, and
  - A self-reflection and affirmations (as needed) for each standard.

The documents must be submitted electronically using a system/tool of the college’s choosing, (i.e., database system, file storage and synchronization system, etc.). Regardless of the system, colleges must select technology that is user-friendly and secure, provide
appropriate technical support, and ensure that documents are easily accessible, searchable, and clearly identified.

<table>
<thead>
<tr>
<th>Related Documents</th>
<th>Self-Study Option: Self-Study Template</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>QA Book Option: QA Book Template (pilot draft)</td>
</tr>
<tr>
<td></td>
<td>Cover Letter Template (pilot draft)</td>
</tr>
<tr>
<td></td>
<td>Previous Current State of Quality Assurance Activities - Follow-up (18 month) Report</td>
</tr>
</tbody>
</table>

| Timeframe         | 10 weeks prior to the college’s scheduled audit visit date |

viii. **Confirmation of the Audit Visit Dates and Audit Panel Members**

Following the auditor training, an official electronic confirmation of the previously agreed-upon audit visit dates and final audit panel members is sent by OCQAS to the designated college representative responsible for liaison with the audit panel chair.

| Timeframe         | 8 weeks prior to the college’s scheduled audit visit date |

ix. **Review of the Audit Package and Follow-up Questions**

The college’s audit package received is analyzed and reviewed for completeness by the audit panel. Following the reception and final review of the audit package, the audit panel chair promptly submits to the designated college representative any request for additional documentation/evidence and questions related to the college’s audit package that require further clarification and investigation. The college must respond in a timely fashion, providing the audit panel chair with the requested information and documentation.

<table>
<thead>
<tr>
<th>Related Document</th>
<th>To be completed by the audit panel and submitted to the college: Audit Panel Review Questions and Areas Requiring Further Investigation</th>
</tr>
</thead>
</table>

| Timeframe         | Submission of request to the college representative for additional information: 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. |

x. **Preparation for the Audit Visit**

The designated college representative develops a draft schedule for the audit visit and submits a copy to the audit panel chair for review and consideration. The audit panel
chair forwards any comments or proposed modifications to the designated college representative to help finalize the audit visit schedule.

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

<table>
<thead>
<tr>
<th>Representative Group</th>
<th>Representation Requirements</th>
<th>Duration (2.5 days)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Senior Leadership</td>
<td>Locally determined (i.e., President, VP Academic, VP Student Services, VP Finance, VP Human Resources)</td>
<td>Beginning of day 1 (30 min.) for opening remarks.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>End of audit visit (30 min.) for closing remarks.</td>
</tr>
<tr>
<td>Board of Governors</td>
<td>Locally determined</td>
<td>30 min.</td>
</tr>
<tr>
<td>Students</td>
<td><strong>General requirements:</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>To provide the audit panel with a complete overview of the college’s quality activities, we ask that the college include at minimum students from the programs selected.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Group Meeting</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• The audit panel will meet with two (2) groups of students separately.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Each group must have two (2) to three (3) students from four (4) to eight (8) of the identified programs.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Each group will have between six (6) to a maximum of twelve (12) students.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>40 min./group</td>
<td></td>
</tr>
<tr>
<td>Graduates</td>
<td>This representative group includes the following:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1. <strong>Graduates:</strong> Individuals who have met all the requirements and have been granted a college credential within the last 24 months.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Group Meeting</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• The audit panel will meet with two (2) groups of graduates separately.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Each group must have two (2) to three (3) graduates from four (4) to eight (8) of the identified programs.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Each group will have between six (6) to a maximum of twelve (12) graduates.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>40 min./group</td>
<td></td>
</tr>
<tr>
<td>Program Advisory Committees (PACs)</td>
<td><strong>General requirements:</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>To provide the audit panel with a complete overview of the college’s quality activities, we ask that the college include at minimum PAC members from the programs selected.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Group Meeting</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• The audit panel will meet with two (2) groups of PAC members separately.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>30 min./group</td>
<td></td>
</tr>
<tr>
<td>Role/Group</td>
<td>General requirements</td>
<td>Time Commitment</td>
</tr>
<tr>
<td>---------------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------------------</td>
<td>-----------------</td>
</tr>
<tr>
<td>Faculty/Program Coordinators</td>
<td>To provide the audit panel with a complete overview of the college's quality activities, we ask that the college include at minimum Faculty/Program Coordinators from the programs selected.</td>
<td>40 min./ group</td>
</tr>
<tr>
<td></td>
<td>Group Meeting</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- The audit panel will meet with two (2) groups of faculty separately.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- 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).</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Each group will have between six (6) to a maximum of twelve (12) faculty members.</td>
<td></td>
</tr>
<tr>
<td>Program/Curriculum Development/Review Staff &amp; Quality Lead Teams</td>
<td>Locally determined. The group should be at maximum twelve (12) individuals.</td>
<td>60 min.</td>
</tr>
<tr>
<td>Student Support Service Providers (front-line employees not managers)</td>
<td>To provide the audit panel with a complete overview of the college’s quality activities, we ask that the college include representatives from the student support services (not limited to):</td>
<td>60 min. or</td>
</tr>
<tr>
<td></td>
<td>- Admissions.</td>
<td>2 groups (30 min. each)</td>
</tr>
<tr>
<td></td>
<td>- Financial Aid.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Student Services (mental health and wellness, tutoring, academic advising, student association, aboriginal, international, first generation, disabilities, etc.).</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Library.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Group Meeting(s):</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- The actual group composition may be determined by the college however it chooses or deems appropriate.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Each group should be at maximum twelve (12) individuals.</td>
<td></td>
</tr>
<tr>
<td>Deans, Associate deans, Program or Department Chairs, or Heads of Academic Department</td>
<td>To provide the audit panel with a complete overview of the college’s quality activities, we ask that the college ensure that all deans, associate deans, and program/department chairs be included among the representatives from all program clusters/fields of study.</td>
<td>90 min. or</td>
</tr>
<tr>
<td></td>
<td>Group Meeting(s):</td>
<td>2 groups (45 min. each)</td>
</tr>
</tbody>
</table>
The actual group composition may be determined by the college however it chooses or deems appropriate.
Each group should be at maximum twelve (12) individuals.

| Directors/ or Heads of Service Departments | To provide the audit panel with a complete overview of the college’s quality activities, we ask that the college include representatives from all services (including, but not limited to):
| Registrar.
| Student Services.
| Library.
| Finance.
| Information Technology.
| Student Residence.
| Fitness/Sports Centre.
| Human Resources.
| Physical Resources (Facilities).
| Alumni Foundation.
| Applied Research.
| Employment Services.
| Institutional Research.
| Each group should be at maximum twelve (12) individuals. | 90 min. OR 2 groups @ 45 min. each |

It is expected that the college will provide a broad range of individuals, as identified by the representation requirements, at minimum those who represent programs that are identified in the college’s audit package, as well as some who represent other programs. When the participation in some groups is minimal, the conversations may not allow for the audit panel members to corroborate information and cause a lack of clarity on some processes. It is the responsibility of the college to secure attendance to the CQAAP audit visit meetings and to adequately prepare the participants for the discussion. No meetings are to be held during the lunch period.

The audit visit schedule must include the name, role/position, and sector for each of the members of the representative groups. In addition, colleges are expected to provide identification for all members of the representative groups during the meetings (interviews) indicating their name, role/position, and sector (college must “rename” participants in virtual setting if needed prior to the interview meeting start).

Prior to the audit panel commencing the audit visit interviews, it is expected that interview questions are prepared for each of the respective representative groups. The questions should be clearly linked to key elements of the standards and their accompanying requirements and serve to clarify areas of the college’s audit package 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.

If a significant possible QA issue for a particular college has been raised either through OCQAS’s dealings with the college or seemingly credible concerns brought forward to OCQAS from any party, OCQAS may determine that the CQAAP requirements relevant to that issue will be given closer attention in the review of the self-study and/or during the audit visit. Both the college and the audit panel will be informed of this in advance.

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

When the audit visit is carried onsite, OCQAS requires that colleges inform their security department of the presence of each of the audit panel members for the purpose of the audit, including the duration of their visit and provide temporary security ID badges (if needed). If necessary, colleges are also expected to provide the audit panel members with parking passes for the duration of the audit 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.

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

xi. **Audit Visit**

The main purpose of the audit visit is to verify and supplement the information contained in the college’s audit package and provide a better understanding of the college’s conclusions. In addition to supplementing the audit package, the audit visit enables consideration (where applicable) of any subsequent corrective measures implemented by the college between the time of adoption of the audit package and that of the audit visit.

The duration of the audit visit is two and one-half (2.5 days), which includes meetings (interviews) with various representative groups involved in the implementation and follow-up of quality assurance mechanisms and the assessment of the effectiveness of those.

It is expected that the audit visit will take place through videoconference to facilitate the participation of individuals from other campuses involved in the visit target groups,
programs and discussions. The college must provide adequate technical support for the videoconference format used.

Audio or video recordings of the meetings (interviews) with the representative groups are not permitted, however, OCQAS reserves the right to record an interview or part of an interview should an auditor lose connection.

Throughout the audit visit, the audit panel meets to summarize and record its observations. The audit panel members also assess the results of the evaluation for each requirement against its objectives, identify key areas of strength and key areas of requiring improvement to render key messages to present to the college.

The audit panel’s observations are strictly evidence-based and supported by the information provided in the college’s audit package, the views expressed by the college participants during the audit visit, and any other documents that followed the audit package or those examined during the audit visit.

The audit visit concludes with a meeting with the college senior leadership, including other administrative employees the college deems should be present. The sole purpose of the meeting is for the audit panel chair to present its conclusions; this is not an opportunity to discuss audit findings. The meeting serves as a way of preparing the college for the possible contents of the preliminary audit report, and recommendations to be included within it.

It is expected that all evidence will have been submitted prior to the completion of the audit visit.

| Timeline | Duration: 2-3 days |

xii. Preparation and Submission of the Preliminary Audit Report

Following the audit, which includes a thorough review of all documentation received 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 can only be arrived at after the fair, unbiased implementation of the evaluation process and the assessment of the college’s audit package and evidence presented during the audit visit in relation to the standards and their accompanying requirements as defined 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 is designed to describe the college’s quality assurance system and its effectiveness. The report outlines the findings of the audit panel which are reached through its interpretation of the specific information it has reviewed. The report notes strengths as well as those areas that require development and provides recommendations for improvement. It also attempts to address all relevant areas without excessive detail or presuming to be exhaustive. The report does not comment on individuals (positively or negatively) or on standards that bear no relevance to the quality assurance process.

The audit report does not contain statements that cannot be substantiated; evidence must be appended on which to base the statements made. Conversely, strongly held views are stated firmly and in a forthright manner, avoiding excessive subtlety.
Where a college introduces a new quality assurance mechanism to supersede a former mechanism, and due to its newness, there is insufficient evidence of the effectiveness of this new mechanism, the college should provide evidence that the former mechanism was implemented and effective. This principle should be interpreted in the spirit of ‘not unduly punishing colleges for implementing new and more effective quality assurance systems’ in lieu of a prior quality assurance system that was demonstrably effective.

In respect of all conclusions reached and judgments made, the audit report must contain sufficient evaluative narrative to demonstrate the reasoning which led the audit panel to its conclusions. Particularly where remediation is required, the college must be able to understand, from the report’s content, the nature of the deficiency to be addressed. Similarly, the college must be able to understand, from the report’s content, reasons given for the meeting of the requirements as this is helpful insight for future audits.

Once completed, the preliminary report is then submitted to OCQAS for review to ensure clarity and consistency of the text, and for analysis and approval before it is sent to the designated college representative for review.

<table>
<thead>
<tr>
<th>Related Document</th>
<th>To be submitted by the audit panel chair to OCQAS: Audit Report Template.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Timeframe</td>
<td>Within 5 weeks following the audit visit.</td>
</tr>
</tbody>
</table>

xiii. **Review of the Preliminary CQAAP Report**

The OCQAS forwards the preliminary version of the audit report to the designated college representative for comments and feedback on whether the report accurately reflects the situation of the college. The college must submit its response, in writing, to OCQAS within the designated timeframe.

Once OCQAS has received the college’s feedback, the document is forwarded to the audit panel chair, who in turn, reviews the feedback with the audit panelists and may make changes to the preliminary report, at the audit panel’s discretion.

In cases where the audit panel does not agree to incorporate the college’s comments to the audit report or the corrections recommended by the college that have been deemed important, the latter can request to have them submitted to the OCQAS Management Board for review upon submission of the final audit report.
### Timeframe

| **Submission of the college feedback to OCQAS:** within 4 weeks of the receipt of the preliminary audit report. |
| **Submission of the final report:** within 3 weeks of the OCQAS receiving the response from the college. |

### xiv. Submission of the Final CQAAP Audit Report

Once the feedback from the college and the audit panel has been incorporated and the report is final, OCQAS will submit the final report to the OCQAS Management Board for review and approval.

It falls within the Board’s purview to affirm the conclusions, support the recommendations in the report, and approve the final audit report. Following its revision, the Board may ask the audit panel to make certain amendments to the audit report to ensure consistency prior to its approval and could ask the President to explain/respond with an attestation to incomplete work on previous recommendations.

| **Timeframe** | **Scheduled monthly OCQAS Management Board meetings.** |

### xv. Formal Board Approval

Following its review of the final audit report, the OCQAS Management Board will approve the final audit report.

Once the final report has been approved by the OCQAS Management Board, it is released by the Executive Director of OCQAS to the President of the audited college and the audit panel members for signatures. At this point, the college may share the report with its invested parties.

| **Timeframe** | **Scheduled monthly OCQAS Management Board meetings.** |

### xvi. Appeal Process

Colleges undertaking an appeal must do so, in writing, to the OCQAS Management Board Chair.

| **Related Document** | **Appeals Policy.** |
| **Timeframe** | **Within 4 weeks of notice of the receipt of the final audit report.** |

### xvii. Release of the Final CQAAP Report and Publication of the Audit Decision and Stipulations
The OCQAS Management Board has the authority to release the audit decision and any stipulations (commendations, affirmations, and recommendations) and accompanying this decision once the following conditions have been met:

- the process used by the audit panel conforms to the approved audit guidelines.
- the college has been given the opportunity to comment on the preliminary audit report and has been treated fairly and consistently as compared with other reviews in other colleges.
- the college has provided a written response to their review of the preliminary audit report.
- the deadline for undertaking an appeal has passed and no appeal has been made; or, the appeals committee has heard an appeal, ruled on any changes to be made, and those changes (if any) have been made.
- the final audit report does not contain confidential or proprietary information.

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

The final audit report is a public document and belongs to the OCQAS Management Board as a whole, not to the audit panel or its individual members.

**xviii. Follow-up CQAAP Reporting**

The college must submit a follow-up report to OCQAS following the release of its final audit report, describing the quality assurance activities it has implemented to address any identified gaps since its last submitted report to OCQAS. Should some recommendations be delayed or not addressed, an explanation is required in this report.

In turn, the OCQAS Management Board reviews the follow-up report.

The follow-up report does not require the submission of evidence.

<table>
<thead>
<tr>
<th>Related Document</th>
<th>To be submitted by the college to OCQAS:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>Current State of Quality Assurance Activities Report</strong>.</td>
</tr>
</tbody>
</table>

| Timeframe | 24-months following the release of the final audit report. |
APPENDIX A

COLLEGE QUALITY ASSURANCE AUDIT PROCESS (CQAAP)
GUIDELINES AND PROTOCOLS FOR VIRTUAL AUDIT VISITS
INFORMATION FOR THE COLLEGE

- The college develops the agenda and prepares/educates invested parties on the process.
- The Virtual Audit Visit duration is **two and one half-days (2.5 days)**.

**Virtual Meetings**

- OCQAS Guidelines and Framework inform on expected length of meetings for each group.
- To reduce the effect of ‘screen fatigue or screen gloom’.
  - Breaks are added in between meetings to reduce the ‘screen effect’ (at minimum 15 minutes every two sessions).
    - Auditors should use this time to step away from their device and relax.
    - Colleges could use this time to troubleshoot with participants that are having challenges accessing the tool.

**When Preparing the Agenda/ Selection and Number of Individuals per session**

- Meeting participation/selection
  - Balance stakeholder representation.
  - Less than 12 people in each session.
    - The sessions will start only when all the confirmed participants are present.
  - The Final Agenda should contain the names and representation of all participants.

**IT and Support - ZOOM**

- No later than two weeks before the audit visit
  - Develop participant instructions, manuals, and contact information.
  - Offer to each participant the possibility of accessing a 15 minute virtual trial session, according to a published availability timetable, so that they can familiarize themselves with Zoom as well as with the protocols put into place for the sessions.
- One week before the virtual audit-visit
  - Send virtual invitations to each participant.
  - Hold 15 minutes sessions with participants who expressed their desire to participate in the test, according to the published availability timetable. IT participates in the test sessions to help troubleshoot and provide tips for effective video conferencing.
During the virtual audit visit
  - One member of the college admits participants and welcomes them to the meeting and ensures every participant’s name and representation are showing correctly on screen.

INFORMATION FOR THE PARTICIPANTS

Recording of sessions
  - Sessions will be recorded only if one or more of the panel members gets dropped off the meeting. These are the parameters that will be followed:
    - Only the ongoing session will be recorded.
    - The facilitator will indicate when the recording starts and when it stops.
    - The recordings will be done by the OCQAS moderator only.
    - The recordings will be kept on a computer by the OCQAS moderator (they will not be saved in the cloud).
    - The recordings will be shared with the audit panel members only, and only for the purpose of writing the college’s audit report.
    - All audit panel members have signed a confidentiality agreement so that no information shared (audio, video, documents, etc.) during the audit process cannot be shared with others outside the audit panel group; this includes the meeting recordings.
    - The audited college will not have a copy of the recordings; these are considered confidential and proprietary of OCQAS.
    - Once the final college audit report is approved by the OCQAS Management Board, the Recordings will be destroyed by the OCQAS recording holder.

HOW TO BE PREPARE FOR THE VIRTUAL AUDIT VISIT

Leading Up to the Visit
  - One – two weeks before the virtual audit visit.
    - Familiarize yourself with Zoom.
  - The night before the virtual audit visit.
    - Prepare your space:
      - Find a quiet and private area to join the session.
      - Decide on the device you will use for the session.
      - Leave your headphones or earphones close.
    - Computer housekeeping:
      - Re-boot your system.
ii. Check all your settings, test your audio and video (if possible, check your audio and video using Zoom).

· The day of the meeting.
  o Turn off and quit other applications, especially the ones that might compete for the mic and the camera (e.g., other video conferencing, chat, and collaboration tools).
  o Come online five minutes early before the anticipated start time (contact the IT representative if you have any troubles logging in).

During the Meeting

  o Leave your microphone off unless required.
  o Use headphones or earphones to listen.
  o You may be placed in a “waiting room” before being admitted. Please be patient.
  o Your microphone will be muted upon entry. Please stay muted unless speaking.
  o 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.
  o Use the Non-Verbal feedback tools (at the bottom of the participant window) to:
    o Raise Hand – for a turn to speak.
  o Wait for the Panel Chair/Facilitator to call you by name to introduce yourself or speak.
  o Unmute microphone when asked to speak.
  o Mute your microphone when you are finished speaking

INFORMATION FOR THE AUDIT PANEL MEMBERS

HOW TO BE PREPARE FOR THE VIRTUAL AUDIT VISIT

· One – two weeks before the virtual audit visit.
  o Familiarize yourself with Zoom.
· The night before the virtual audit visit
  o Prepare your space:
i. Find a quiet and private area to join the session.
ii. Decide on the device you will use for the session.
iii. Leave your headphones or earphones close.
   o Computer housekeeping:
      i. Re-boot your system
      ii. Check all your settings, test your audio and video (if possible, check your audio and video using Zoom).

The day of the meeting.
   o Turn off and quit other applications, especially the ones that might compete for the mic and the camera (e.g., other video conferencing, chat, and collaboration tools).

Come online ten to fifteen minutes early before the anticipated start time (contact the OCQAS representative if you have any troubles logging in).

During the Meeting
- Start your video camera by clicking the “Video” button on the toolbar.
- Unmute the microphone when you need to speak, by clicking the “Unmute” button on the toolbar.
- The meeting chair/facilitator will advise the moderator when to allow participants into the meeting.
- The meeting chair/facilitator will review the online session etiquette with all participants at the beginning of each meeting.

INFORMATION FOR THE OCQAS MODERATOR
During the Meeting
- Manage the virtual meeting (creation of the meetings and of the breakrooms, welcoming the participants, transferring the participants into the appropriate breakrooms, record the meeting when necessary) so that the chair/facilitator can fully engage in session discussions.
- Monitor non-verbal feedback and chat activity.
- Maintain speakers’ queue, as per raised hands.
- Alert the session Chair/Facilitator to raised hands and questions posed in chat.
- Share screen and documents as needed.
- When needed, let the participants know when the recording of the meeting starts and when the recording of the meeting finishes.
- Serve as a timekeeper, announce when there are 5 and again when there are 2 minutes left in the session.