



Highlights from Audits Carried Out Between Sep 2020 – Aug 2025 Mapped to New CQAAP Standards

Preamble

This document highlights the lessons learned from the audits that have been carried out between September 2020 up-to-date.

It is a compilation of the mechanisms recognized by the respective audit panel teams as best practice (Commendations) which were showcased in the CQAAP final report for these colleges. These 'best practices' may not be exclusive for the colleges that have been highlighted. Other colleges might have similar mechanisms to accomplish some of the same results, but were not, or not yet, mentioned by their respective audit teams. Each audit panel decides which processes to highlight for each particular college.

This document will be updated at the end of every academic year, to include the highlights of that year's audits. OCQAS is looking forward to showcasing those for the colleges that are up for audits in the years to come. It is a good reflection for each college to consider, "what mechanism to ensure quality will our college be showcased for?"

The last two pages of this document include a list of the requirements that colleges seem to struggle with, the areas where colleges are doing well, and lessons learned from the Self-Study submissions.

This document has been developed in response to requests from colleges to share lessons learned through the audit process available to the system.



STANDARDS	REQUIREMENTS	COMMENDATIONS (MECHANISMS RECOGNIZED BY THE RESPECTIVE AUDIT PANEL TEAMS AS BEST PRACTICE)
<p>1. PROGRAM QUALITY MANAGEMENT SYSTEM</p> <p>Effective quality assurance mechanisms ensure the quality of a program management system.</p>	<p>A college-wide program quality management system:</p> <p>1.1 Has established mechanisms that operationalize the Board of Governor's (BOG) responsibility to ensure quality assurance is embedded in the strategic direction of the organization.</p>	<p>Overall quality assurance mechanisms for the management of programs of study: <i>Mechanism to ensure relevance of programs of study; their effectiveness; their currency; and the quality of program management. Ability of these mechanisms to identify areas of strength or deficiency to ensure quality programs of study, and implement corrective measures to address areas of improvement.</i></p> <p>Quality Assurance (QA) policies and practices that connect QA with the role of the Board of Governors SENE: The Board of Governors structure, including the APSA and that QA processes are discussed at most BOG meetings.</p> <p>Training for Board of Governors NIAG: The full day onboarding, emphasis and support of the College Ontario Board training, and the Focus Spotlights are activities that the Board of Governors praised and enrich the relationship of the college with their Board.</p> <p>Committees CENT: The Learning and Engagement Committee (LEC) as a standing committee of the Board of Governors. This committee plays a pivotal role in the college's commitment to a student-centered approach and maintaining academic excellence.</p> <p>Self-Regulating Activity ALGO: The audit panel commends the College on the quality of engagement demonstrated by the Board of Governors (BOG), the work of the BOG committees and the quality processes that the BOG employs to monitor their own work. Example: The audit panel commends the College on the process of having new programs report to the Academic Affairs Committee of the BOG at the two-year mark, to assess all metrics to date.</p> <p>GRBR: There is a clear connection between what happens in the schools and departments at GBC and the strategic and business plans, and there is a deep level of commitment to the mission and vision of the College. This is a vital underpinning of a robust and widely adopted QA system. The governance of QA at GBC works well with no discernable discontinuities between the Board, administration, faculty and students.</p> <p>Connection of Strategic initiatives to program-courses SHER: The importance of the college's strategic initiatives was evident across all stakeholder groups. There is a keen awareness across the organization of their existence and importance. Equally significant, the operationalization of these initiatives and institutional priorities was observed in processes associated with quality assurance. The college has succeeded in making them a living part of what they do and how they do it.</p> <p>LACI: Collaboration permeates all levels of the college, not only promoting the achievement of common goals, but also contributing to the continuous improvement of a quality assurance system that values student success.</p> <p>LAMB: We commend the college for the Board of Governors understanding of their responsibility to ensure quality assurance is embedded in the strategic direction of the organization.</p> <p>Engagement DURH: The Board of Governors level of engagement with Quality Assurance processes at Durham, and the enthusiastic way they approached their roles. They were proud of the diverse make-up of the Board, as well as their processes and activities to engage with their own members and the rest of the college. They used Quality Assurance terminology naturally, and they clearly understood the Quality Assurance processes at Durham.</p> <p>Connection with the Program Advisory Committees CANA, LAMB: Board of Governors embraced the role of the college's Program Advisory Committees (PACs). Board members said how integral the PAC reports were to their view of overall quality of college programs and the relevance of the college offerings. They also said that as ambassadors of the college in the community they felt a duty to make the President aware of individuals from industry and the community who could be excellent potential PAC members.</p>



STANDARDS	REQUIREMENTS	COMMENDATIONS (MECHANISMS RECOGNIZED BY THE RESPECTIVE AUDIT PANEL TEAMS AS BEST PRACTICE)
	<p>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).</p>	<p>Program Quality - Prioritization STCL: Cohesive institutional approach to quality - demonstrated through the Self-study report, interviews and established mechanisms. The commitment by CAE related to all aspects of quality assurance, while still leveraging the professional autonomy and experiential aspects of teaching and learning. Additionally, the commitment to establishing a role that has a systems approach to leading quality. LOYT: Commitment, openness and transparency to the strengths and weaknesses of their QA is extremely strong and will serve them well in many of the recommendations and implementation activities. GRBR: The system of QA is complex as would be expected for a large, urban institution, but people at all levels understood and appreciated the processes and controls. The culture of QA is deep, both in the formal processes and the informal approaches. The College has a robust New Program Development set of policies, procedures and tools, and it also engages in post-launch follow after 2 years to ensure that the program is on track as proposed. FANS: The quality culture is based on people. Specifically, the Centre for Academic Excellence (CAE's) leadership continues to create a culture of quality across the college. They exemplify quality and ensure that assurance processes are working effectively and are applied consistently. FLEM: The Program Efficacy Review (PER) process and its tiered approach to determining whether program cancellation or suspension proposals should be brought forward to the Senior Management Team (SMT) and the Board of Governors.</p> <p>Program Review Committee/Program Implementation Committee CONF: The establishment of the Academic Council Program Review Sub-Committee is a unique and innovative way of an inclusive approach to program quality. The committee provides cross-representation from all academic areas, and has a well-defined role in making recommendations for quality improvement. The TOR frames roles and responsibilities in a manner that creates clarity and facilitates faculty engagement. This committee is leveraging the college's strength as collaborative and inclusive institution, contributing a culture of quality. An example shared was that there was 100% completion of APRs in 2020/21. HUMB: The strength of the Comprehensive Program Review model, in particular the development of a program Self-Study and the role of the two external reviewers. As well how the Action Plans arising from the reviews were made so central to the Faculties, supported by Program Planning Development and Renewal and the Centre for Innovative Learning. FLEM: The Program Implementation Committee which uses information from internal stakeholders to assess the College's capacity to deliver a new program. CENT: The Learning and Engagement Committee (LEC's) deep involvement in program quality assurance processes and ensuring that new programs and modifications align effectively with the college's objectives. Their comprehensive review process, recommendations to the Board of Governors, and adherence to regulatory requirements, including OCQAS validation, uphold the college's esteemed reputation for excellence. GEOR: The units that are central to QA at Georgian (in particular the OAQ, IR, CTL, and the RO) are each to be commended for their dedication to quality and the student experience, and (most importantly) their interconnectedness: there was no evidence of them operating in siloes and plenty of indications that they collaborate effectively.</p> <p>Elements of Program Quality CANA: The college has developed a comprehensive approach involving six different components that address the various elements of program quality. As an organization the college clearly understands the multiple factors that contribute to program excellence and student success. This inclusive approach supports "buy in" from all areas of the organization and is a representation of a strong quality assurance culture. MOHA: The Center for Teaching and Learning Innovation (CTLI) has to the quality assurance culture of the institution and to student success. The CTLI supports quality through programs' life cycle. One participant expressed that "We benefit greatly from CTLI from their structured approach to course design" and "CTL has been great in helping us with applying UDL principles". SAUL: Centralizing quality functions has been key to promoting consistency and enhancing the department's overall impact. GEOR: A strong and effective relationship has been established between the Annual and Comprehensive Program Review processes. This alignment ensures programs remain relevant and current in a timely manner, while also supporting continuous quality improvement. The integration of these review cycles has streamlined the Comprehensive process, making it more manageable and focused.</p>



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	<p>1.3 Has mechanisms for gathering, collating and analyzing data and information from various sources and stakeholders that are related to program quality.</p>	<p>Multiple Sources of Data HUMB: The development and use of the Tableau Dashboard and its role in the college-wide culture of evidence-based decision making. BORE: The wide variety of data sources used to carry out its quality assurance processes. The voice of students, stakeholders and faculty are actively involved in the production of evidence. In short, a few dozen distinct sources of data are effectively used to guide its decisions related to program quality assurance. LACI: At every stage of the program life cycle, student support services, finances, or other areas, the importance of this data has been emphasized repeatedly. The ability to access this information on a dynamic platform such as Power BI, which also allows for comments, is a considerable advantage. This interactive feature not only facilitates data analysis and interpretation but also encourages active and collaborative participation by all members involved.</p> <p>Data Gathering for Decision Making SHER: The use of data and information collected from multiple and varied sources to inform decisions during program development and assess program performance during the comprehensive review process. The cited importance of making decisions and/or recommendations based on information gathered, collated and analyzed from stakeholder data (e.g., professional bodies, program advisory committees (PACs), employers, community liaisons, graduates, faculty, students) as well as quantitative data found in Tableau (e.g., program indicators, program records, PULSE and SES). Data was used very effectively to shape change and answer the “why” before informed decisions are made.</p> <p>Student feedback LOYT: There is a focus on student feedback and engagement through the student leaders’ forums is deeply integrated in many of the QA processes.</p> <p>Strong connections between the QA office activities and Institutional Research (IR): GRBR: The emergence of an Academic Quality Dashboard, phase 1 of which is now in place, provides real-time and historical data to academic leaders on all their programs. Further development of this is encouraged.</p>
	<p>1.4 Uses data and information collected from various sources and stakeholders to assess program performance and inform recommendations.</p>	<p>Program Matrix – Dashboards Use of Data CONF: It was clear that evidence-based data driven decisions are being made and that staff understand the close linkage to Institutional Research and Strategic Planning that support the program life cycle. The Program Health Checklist showcases a consistent use of data that is embedded in the QA processes. The Program Improvement Plans (PIPs) are another example of how reports are data driven (developed based on the Annual Program Reviews [APR] and the Comprehensive Program Reviews [CPR]). CANA: The institution has developed dashboards that allow them to make informed decisions in harmony with the organization's strategic objectives and operational targets. LACI: The College collects, compiles, and analyzes data and information from various sources and stakeholders that are relevant to program quality. As a result, decisions are better informed, more transparent, and aligned with the institution's actual needs and strategic objectives. CONS: The use of data analytics in decision making. Available dashboards support the ability of faculty and academic administrators to focus on quality assurance assessment and reflection in program review (APR/MPR) processes.</p> <p>Program Performance HUMB: Humber had developed a model of interdisciplinary horizontal and vertical integration & collaboration that ensures that nothing happens in silos, and everything connects. Described in the Self-Study as the “liaison model” each of the 6 Academic Faculties is assigned a Program Consultant from Program Planning and Renewal (PPDR), who provides support for the various program lifecycle and quality processes, a Curriculum Coordinator from the Office of the Registrar who, support the implementation and communication of curriculum and program changes and a member of the Teaching Excellence Team from the Centre for Innovative Learning, who supports faculty in the development and renewal of course outlines. During the virtual site-visit, the audit panel was witness to the full scope of this integration model as it learned that consultants, librarians, counsellors, and advisors, from all of the Student Support areas are also assigned to Faculties to provide their services and support. FANS: The institution’s commitment to evidence-based decision making in alignment with organizational goals was evident. Throughout sessions, the use of quantitative and qualitative data and respective benchmarks are consistently operationalized throughout the Program Excellence Model.</p>



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	<p>1.5 Has mechanisms for ensuring that recommendations and action plans arising from program QA processes have been implemented.</p> <p><i>(previously 5.5)</i></p> <p>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.</p> <p>1.7 Manages program maintenance records arising from program lifecycle QA processes.</p>	<p>Monitoring – Accountability STCL: Established in 2013, the Accountability Office regularly monitors all College programs to ensure full compliance with College policies on quality assurance. The major function is the Quality Assurance Accountability Audit. This is an impartial, objective audit to ensure all programs are adhering to the established quality control review processes and acting on the action items coming out of those processes. SENE: The Recommended Action Plans which will be a required aspect of Deans’ Individual Development Plans and will be part of formal and informal performance discussions with the Vice-President Academic and Students. FLEM: The Program Improvement Plans enable both faculty and academic leadership to track progress on approved items. Deans can enter all approved items from the PIP’s on their School Improvement Plans, and provide updates to the Associate Vice President, Academic Experience on their implementation. The Quality Report to be completed at the end of every program review cycle for each program within the school is also noted as an easily accessible snapshot of program compliance with Quality Assurance requirements. NORT: Innovative use of the ASANA database to track action items. This notable quality measure reflects a strong commitment to effective and transparent process management, exemplifying best practices in institutional accountability. LACI: Outstanding work in following up on action and improvement plans resulting from comprehensive annual program reviews. After hearing from the deans, program coordinators, and the Center for Quality team, this step is a priority for the College. GEOR: There is a clear mechanism in place for monitoring and following up on action items, which reinforces a culture of accountability and ongoing program enhancement. The college does a very good job closing the loop on many of their quality assurance initiatives (using existing and new tools and processes) both on the academic side as well as among the Student Services (e.g. using Navigate 360).</p> <p>Modifications to Existing Programs NIAG: New and expanded role of the Academic Affairs and Strategic Enrolment Committee (AASEC) with Program Review reports, action plans and program suspensions. The work that this committee has done to engage internal stakeholders along with work by the Program Change and Development Committee (PCD) to streamline program changes are great examples of continuous improvement. FLEM: The Major Program Modification Process is an excellent response to the matter of approving and documenting changes in between review cycles. CONS: Robust systems to track and follow up on program changes and enhancements.</p> <p>Curriculum management ALGO: The development and implementation of the Program Lifecycle Management System (PLMS). FLEM: The comprehensive repository of all documents relevant to program review and program improvement is housed on the AQ website. CANA: The adoption of automated systems for critical processes, including approval workflows and faculty performance evaluations. These systems making the workload more efficient and manageable. SAUL: Use of common digital platforms, such as SharePoint and other Microsoft tools, to support academic quality assurance processes. Faculty, staff, and students report that these tools are easy to access and help ensure consistency and transparency. GEOR: Effective use of digital systems such as CIM, SYL, and Navigate 360 effectively support QA.. The CIM demonstration highlighted the advantage of using this system enabling the institution (not just a person or department) to track documentation over the lifespan of a program.</p>
<p>2. VOCATIONAL LEARNING OUTCOMES AS THE CENTRE OF PROGRAM DEVELOPMENT</p>	<p>A college-wide use of vocational learning outcomes at the centre of the program lifecycle:</p>	<p>Overall quality assurance mechanisms for the development of programs of study: <i>Mechanism to ensure alignment and coherence of programs of study; and the quality of the program development structure. Ability of these mechanisms to identify areas of strength or deficiency to ensure quality programs of study, and implement corrective measures to address areas of improvement.</i></p>



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<p>(THROUGHOUT THE PROGRAM LIFECYCLE)</p> <p>Effective quality assurance mechanisms ensure vocational learning outcomes are at the centre of the program's lifecycle activities.</p>	<p>2.1 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).</p>	<p>Course Outline control and repository NORT: The College's systemic focus on the critical importance of program vocational learning outcomes (VLOs). This emphasis ensures alignment between curriculum development, delivery, and assessment, showcasing a thoughtful and integrated approach to academic excellence.</p>
	<p><i>(includes 3.4 from previous version)</i></p> <p>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.</p>	<p>Program Mapping Tools <i>These colleges have excellent mapping tools and processes that allow faculty to identify Program Vocational Learning Outcomes and how they translate to Course Learning Outcomes, and Assessments. One can also see how courses are placed to ensure progression.</i></p> <p>HUMB: The development and implementation of COSSID and the completion of the mapping process for all programs. The leadership for creating the space, positions, and departments that enabled this process to occur.</p> <p>FLEM: Mapping and review process for the Indigenous Perspectives Designation (IPD) as well as the designation of eligible programs which have been mapped to the Indigenous Learning Outcomes.</p> <p>BORE: The presentation of the mapping of the VLO/EES covered in the courses is remarkably well done. Using a matrix format where the rows are the VLO/EES and the columns represent the different courses, a color code allows one to see at a glance what is taught, practiced, and evaluated in the program. This makes it possible to quickly identify the overall contribution of each course as well as the level of coverage of the various VLO and EES across the program as a whole.</p> <p>CONS: The quality of learning outcomes evidenced in program mapping and the utilization of tools to track and scaffold outcomes.</p>
	<p>2.3 Ensures that course learning activities, assessments, including Prior Learning Assessment Recognition (PLAR) are consistent with and appropriate to the course learning outcomes (CLO), program Vocational Learning Outcomes (VLO) and Essential Employability Skills (EES), and support meaningful acquisition of the required skills and knowledge.</p>	<p>Course Outline control and repository ALGO: The quality of the curriculum documentation developed by the College, COMMS, Course Outlines, Course Section Information (CSI), and the consistency of application across locations and modes of delivery.</p> <p>FLEM: The Curriculum Reports produced by the Business Intelligence Analyst in Academic Operations.</p> <p>Educational Journey MOHA: Students and graduates described their educational journey as a 'powerful learning experience,' emphasizing how well-prepared they felt for the workforce upon graduation. The recurring theme of faculty availability and genuine care further underscores the positive impact of your institution's supportive environment.</p>
<p>3. CONFORMITY WITH GOVERNMENT REQUIREMENTS</p> <p>Effective quality assurance mechanisms ensure the conformity</p>	<p>A college-wide conformity with government requirements:</p> <p>3.1 Ensures that program titles are consistent with established CVS Titling Protocols.</p>	<p>Overall quality assurance mechanisms for the implementation of programs of study <i>Mechanism to ensure quality, alignment, conformity and coherence of programs of study. Ability of these mechanisms to identify areas of strength or deficiency to ensure quality programs of study, and implement corrective measures to address areas of improvement.</i></p>



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<p>of programs of study with relevant government requirements.</p>	<p>3.2 Ensures that programs of instruction meet or exceed the Minister's Binding Policy Directive – Framework for Programs of Instruction (MBPD-FPI).</p>	<p>General Education Review of Requirements FLEM: Implementation of a pre-audit of all Ministry requirements.</p> <p>Indigenous Designation FLEM: The Indigenous Perspectives Designation (IPD) as an option to students within approved programs. The IPD incorporated into QA processes for those programs, and curriculum development takes place across the entirety of the program's curriculum.</p>
	<p>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.</p>	<p>Effective use of PACs STCL, LAMB: PAC (Program Advisory Committee) consistent understanding of their role and participation in the quality assurance process of the college. Additionally, consistent use of mechanisms (including templates) for the benefit of collecting evidence, to provide meaningful input contributing to program relevance and quality.</p> <p>DURH: The many ways that PAC members were engaged and enthusiastic about their roles.</p> <p>LOYT: The sense and engagement of community through PACs.</p> <p>GEOR: Through orientation, onboarding and contribution, they are very involved in decision-making, with the student experience at the heart of those decisions.</p> <p>PAC Scorecard LAMB: Performance of PAC is monitored to ensure they are meeting established standards and are aligned with the College's policies and strategic goals.</p>
	<p><i>(previously 3.5)</i> 3.4 Ensures that changes to provincial program standards are communicated to all relevant stakeholders and implemented in a timely manner to assure that all programs are current.</p>	<p>Mapping before Responding to the Letter from the Ministry for the revision of Standards</p>
<p>4. PROGRAM DELIVERY AND STUDENT ASSESSMENT</p> <p>Effective quality assurance mechanisms ensure the quality of program delivery and student assessment.</p>	<p>A college-wide program delivery and assessment of students:</p> <p>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.</p>	<p>Overall quality assurance mechanisms for the delivery of programs of study and student assessment: <i>Mechanism to ensure quality, consistency and value of teaching methods used to deliver programs of study; and, of the fair and equitable assessment of students. Ability of these mechanisms to identify areas of strength or deficiency to ensure quality of program delivery and student assessment, and implement corrective measures to address areas of improvement.</i></p> <p>Mechanism to ensure consistency of program delivery independent of location or delivery mode ALGO: The quality of the curriculum documentation developed by the College, COMMS, Course Outlines, Course Section Information (CSI), and the consistency of application across locations and modes of delivery.</p> <p>SENE: The College requirement that if an assessment of student learning has a weight of more than 20% of the final grade it must be approved by the Chair or Program Manager using the course learning outcomes and Bloom's Taxonomy.</p> <p>BORE: The use of an institutional platform to standardize course outlines is an excellent initiative. The Simple Syllabus tool documents all course outlines and makes them available to students, faculty, and staff. This helps maintain the integrity of the programs.</p>



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	<p>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.</p> <p>4.3 Ensures fair and equitable evaluation of student achievement through valid assessment methods, accompanied by prompt and constructive feedback on student performance.</p> <p>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).</p>	<p>Mechanism to encourage teaching staff experimentation of new teaching methods GRBR: GBC has a very active Teaching and Learning Exchange (TLX), offering robust training programs, and the Panel heard from various employees that Universal Design for Learning was well understood and deployed as a framework for quality curriculum development and revision. NIAG: The Centre for Academic Excellence (CAE) has played an essential role in professional development, as well as teaching and learning activities. Training and professional development offerings were greatly appreciated by faculty. The CAE website is robust and houses a wealth of resources. FLEM: Faculty are provided with safe opportunities to practice "micro-lesson" teaching experimentation and opportunities to obtain peer feedback. MOHA: From faculty to administration, the Audit Panel heard the impact that Center for Teaching and Learning Innovation (CTLI) has to the quality assurance culture of the institution and to student success. They provide an agile response and collaboration to programming/services e.g. workshops on AI, newcomer training. CAMB: The special initiative around trauma informed delivery enabled by a faculty member's Professional Development activity, was noted as valuable by not only that faculty member, but also by their peers who engaged in this training. The use of Communities of Practice was also noted as an excellent approach to emerging issues such as Artificial Intelligence. Your leadership teams promote an environment of open communication that places quality assurance efforts and student success at the centre of professional development. SAUL: The Vice-President Academic's monthly Program Coordinator Forum, which fosters active dialogue and the exchange of current innovations across programs.</p> <p>Assessment of Learning SENE: The College requirement that if an assessment of student learning has a weight of more than 20% of the final grade it must be approved by the Chair or Program Manager using the course learning outcomes and Bloom's Taxonomy. LACI: The various forms of feedback provided by school staff throughout the learning process were widely recognized. The impact of this feedback was raised by several participants in the audit visit, including students and graduates, the dean and directors, the directors of education, and members of the program advisory committees. This feedback, described as "life feedback," was considered essential not only for affirming professional knowledge, but also for supporting students' personal development. CONS: The development and implementation of policies that limit the number of assessments (max. seven assessments) and their distribution (40% of grade by mid-point), in a manner that promotes student success. CONS: The development of Chair tools that allow for effective monitoring of compliance with assessment policy and procedures. CONS: Their strong commitment to ensure timely feedback for students on their assignments</p> <p>Mechanisms to assess the capabilities of graduates or eminent graduates FANS: The college-wide focus on student success was for all stages of the student experience, from the teaching and learning through to the work integration experiences. CONS: The scope and breadth of authentic, holistic, and relevant WIL and experiential learning activities integrated across programs. LACI: The global activities and integrative projects are particularly appreciated by students and graduates. Innovative initiatives and practical experiences, such as job simulation in an accounting firm, a week-long immersive experience in multi-platform journalism, and professional cooking practice serving real customers, have been widely recognized for their significant impact on students' professional and personal confidence.</p>
<p>5. EXISTENCE, MONITORING AND COMMUNICATION OF POLICIES AND PRACTICES</p>	<p>A college-wide monitoring and communication system of existing academic policies and practices:</p>	<p>Overall quality assurance mechanisms for the monitoring and communication of academic policies and practices: <i>Mechanism to ensure quality of programs of study. Ability of these mechanisms to identify areas of strength or deficiency to ensure quality programs of study, and implement corrective measures to address areas of improvement.</i></p>



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<p>THAT INFLUENCE AND IMPACT ACADEMIC QUALITY</p> <p>Effective quality assurance mechanisms ensure the communication and monitoring of established academic policies and practices related to academic issues.</p>	<p><i>(previously 5.6)</i></p> <p>5.1 Ensures that all applicable college, department, and program academic policies and procedures are published and communicated to all relevant stakeholders and applied consistently.</p>	<p>Communication</p>
	<p><i>(previously 5.7)</i></p> <p>5.2 Ensures that established academic policies and procedures are reviewed and monitored regularly and consistently.</p>	<p>Collaborative development of academic policies</p> <p>FLEM: For policy and procedure updates, Student Service departments work in consultation, with a panel of students with disabilities.</p> <p>CAMB: A robust Policy Development Framework that guides the cyclical review, maintenance, development, or suspension of policies. This framework clearly outlines the roles and responsibilities of involved groups and emphasizes communication of policy updates to the college community. The Policy Development Working Group has demonstrated a high level of effectiveness in ensuring that regular policy review is completed in a timely and comprehensive manner. The established template and writing guide are two excellent tools that support consistency and efficiency in policy development and review.</p>
	<p><i>(previously 5.2)</i></p> <p>5.3 Ensures that academic policies and procedures regarding admission are established and applied for all programs offered by the college.</p>	
	<p><i>(previously 5.1)</i></p> <p>5.4 Ensures that academic policies and procedures regarding student progression are established and applied for all programs offered by the college.</p>	
	<p><i>(previously 5.2)</i></p> <p>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.</p>	
	<p><i>(previously 5.3)</i></p> <p>5.6 Ensures that academic policies and procedures regarding accommodation and assessment are established and applied for all programs offered by the college.</p>	<p>GRBR: The College has embraced the “paradox of the pandemic” and the Audit Panel saw evidence many times of people seeing opportunity for positive change as a result, rather than dwelling on what may have been lost. For example, accommodations for students that might be continued, and the digitization of services and process for greater efficiency and flexibility for all.</p>



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	<p><i>(previously 5.3)</i> 5.7 Ensures that academic policies and procedures regarding awarding of credentials (certification) are established and applied for all programs offered by the college.</p>	
	<p><i>(previously 5.4)</i> 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.</p>	<p>Partner Institutions CANA: The college use of consistent mechanisms and tools, regular meetings with academic and non-academic areas to ensure the high level of quality in programs with their partner institutions. As well, the audit panel noted that the college has made a substantial human resource commitment to support these partnerships.</p>
<p>6. AVAILABILITY AND ALLOCATION OF COLLEGE-WIDE RESOURCES</p>	<p>A college-wide monitoring and communication system of existing academic policies and practices:</p>	<p>Overall quality assurance mechanisms for the planning of programs of study: <i>Mechanism to ensure the implementation of planning and following-up of result; the alignment of human, fiscal and material resources with education needs of programs of study. Ability of these mechanisms to identify areas of strength or deficiency to ensure quality programs of study, and implement corrective measures to address areas of improvement.</i></p>



<p>Effective quality assurance mechanisms ensure the existence, availability and allocation of resources (human, physical, financial) and technological infrastructure to support student achievement of program vocational learning outcomes (PVLOs).</p>	<p><i>(previously 6.1 and 6.2)</i> 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>Hiring CENT: Efforts to address anti-Indigenous and Anti-Black racism. Ensuring that programming and staffing includes such matters as global citizenship, diversity, social justice, inclusion, and equity. Using results of the Anti-Black Racism Task Force Report will help to inform changes and reinforce the College’s commitment to ensuring a great learning experience for all students and a positive and inclusive space for staff.</p> <p>Professional Development SENE: The support offered College wide for professional development in general and specifically for the paid Professional Development leaves available to support staff and administrators that are in addition to requirements of the Collective Agreements. Additionally, the panel notes that tuition rebates are available to all staff and that the value of the rebates was recently increased.</p> <p>FLEM: PT faculty are permitted to audit courses to get exposure to a new delivery. Each is given time on the SWF for auditing/class time.</p> <p>Performance Reviews SENE: The use of portfolios for faculty to reflect on their work and document their development as Professors.</p> <p>SHER: Value placed on the Formative Faculty Reflection (FFR). It offers faculty members a unique chance to explore their personal interests and areas of growth, while showcasing their achievements in a creative manner. The FFR serves as a vital component of faculty development by enabling them to express their passions and effectively communicate trends and emerging opportunities that can be incorporated into the classroom setting.</p> <p>DURH: The value it places on the authentic evaluation of all full and other than full-time faculty in accordance with policy, which clearly demonstrates the College’s deep commitment to teaching and learning as the centre of what it does.</p> <p>CANA: The authentic evaluation of all full and other than full-time faculty in accordance with Canadore’s policy. This, and the tracking of the evaluation process by HR (Performance Review Tracking spreadsheet), all which clearly demonstrates the college’s deep commitment to teaching and learning.</p> <p>MOHA: Performance reviews happen as annual conversations that faculty have with their supervisors, where they reflect on their previous year’s work and set goals for the upcoming year. They also include professional development plans for the following year included a focus on students (academics), subject matter (remaining current in their field of expertise) and college-wide initiatives (UDL, technology, EDI, Indigenous, International) and are seen as opportunities to celebrate achievements and learning.</p> <p>NORT: The College for its robust support of faculty professional development, notably through regular faculty review practices. These include decanal visits to review in-class teaching, demonstrating a comprehensive and proactive approach to faculty engagement and performance enhancement.</p> <p>Student Support SLAW: The focus on the success of students and on the processes to support student learning is exemplary. The Student Success facilitators, valued by both students and instructors, are an important component of this, as is the support provided through the Beacon software. It is clear that students value and respect their instructors, and that the collegial atmosphere evident among academic and non-academic staff promotes an effective integration of supports for students.</p> <p>LAMB: Faculty use of both informal and formal mechanisms to support student success.</p> <p>SAUL: Strong relationships observed between faculty and students, which contribute positively to the learning environment. Additionally, faculty members demonstrate meaningful engagement with industry, supporting student employment opportunities and ensuring the ongoing currency and relevance of program content.</p> <p>Faculty Expectations NIAG: The use of the Curriculum committees in each program that were led by students really seemed to be making an impact on curriculum for the future cohorts.</p> <p>FANS: Faculty consistently exceed their expectations, related to alignment of their learning with industry needs through relevant hands-on experiences.</p> <p>DURH: Clear evidence of the dedication faculty have, to their practice and their students. Student success was at the forefront of what they do and all the professional development they are involved in. They are dedicated, creative, and inspiring.</p> <p>Professional Development SHER: The commitment to professional development is very strong; everyone is very positive about the opportunity to participate in PD and there is wide ranging access. The College has created an environment that is very supportive of PD opportunities and there is lots of enthusiasm for PD from staff who said they were encouraged to participate in PD by their managers.</p>
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STANDARDS	REQUIREMENTS	COMMENDATIONS (MECHANISMS RECOGNIZED BY THE RESPECTIVE AUDIT PANEL TEAMS AS BEST PRACTICE)
	<p><i>(previously 6.3)</i></p> <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>Service Reviews and Service Agreements</p> <p>ALGO: The quality of enhanced services provided to students at regional campuses and online with the use of the Net Promotion Score (NPS) data in evaluating all student support services.</p> <p>STCL: Service Charter Agreement – an established framework that governs practices around how academic and support areas integrate operations, working together in support of students.</p> <p>SENE: The quality assurance frameworks and work of the Library Users Services and the Teaching and Learning Centre departments for supporting students and staff.</p> <p>Response to student needs</p> <p>CONF: COVID presented some challenges, but also some opportunities such as increased access to services for students. There is a student-centered approach to providing individualized attention and support. Services have been adapted to meet the needs of students.</p> <p>SLAW: The coordination and integration across the three campuses resulting from the college’s commitment to a “Tri-campus” approach to the delivery of programs and support services has made a significant contribution to the on-going improvement of quality assurance.</p> <p>BORE: A member of senior management meets with every student through classroom visits at the beginning of each academic year. These meetings allow senior management to hear students' concerns and understand their reality.</p> <p>International Students</p> <p>SENE: The supports available to international students throughout the College and in particular the support offered by the International Department.</p> <p>Collaboration</p> <p>CENT: Student service areas, e.g., library, learning strategists, pathways, accessibility, co-op, career and success, continuously communicate and collaborate with academic departments through academic department meetings, facilitation and participation in workshops, so that everyone is on the same page. Student advisors are integrated as part of the academic team.</p> <p>DURH: The culture of the organization which came across as very positive, collaborative, and aligned with best practices of quality assurance processes. This positive mind set was best demonstrated by the framing of the challenges brought about by the pandemic as “opportunities”, leading to positive developments which were characterized as “a big win” for the organization. At each level of the service areas - there was a clear and demonstrated understanding of how each specific “piece” of QA fit within the overall organizational “pie”.</p> <p>CAMB: Enhancing the access to services using technology-driven approaches. By example, the Enrolment Centre have effectively leveraged technology to allow students quicker and more self-directed access to actions such as course add/drops. Based on interviews with students and staff, the implementation of Cognito Forms with automated workflows, and a virtual queuing system have significantly streamlined processes and reduced wait times for students. The use of QR codes, is another example of a technology-enhanced solution that meets the needs of the students. Queueing systems have aided in the prioritization of requests, ensuring that time-sensitive student requests are managed first. Additionally, informal feedback from staff and students is utilized to quickly address issues that may arise, as evident by operational changes made to forms.</p>



STANDARDS	REQUIREMENTS	COMMENDATIONS (MECHANISMS RECOGNIZED BY THE RESPECTIVE AUDIT PANEL TEAMS AS BEST PRACTICE)
	<p><i>(previously 6.4 and 6.5)</i></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>Hiring and Onboarding</p> <p>Professional Development SENE: The support offered College wide for professional development in general and specifically for the paid Professional Development leaves available to support staff and administrators that are in addition to requirements of the Collective Agreements. Additionally, the panel notes that tuition rebates are available to all staff and that the value of the rebates was recently increased.</p> <p>Equity, Diversity and Inclusion HUMB: The on an institutional culture that promotes and celebrates, equity, diversity and inclusion.</p> <p>Performance Reviews MOHA: Performance reviews happen as annual conversations that staff have with their supervisors, where they reflect on their previous year's work and set goals for the upcoming year. They also include professional development plans for the following year and are seen as opportunities to celebrate achievements and learning.</p> <p>CAMB: High level of commitment to performance reviews for support staff. The policy requiring annual assessment formal process is current and up to date. Support staff commented that their supervisors pursue provided effective feedback utilized the reviews as an opportunity to support their personal as well as professional development. Support staff supervisors create an environment of open communication puts staff at ease in having developmental conversations. This has allowed for the informal and formative assessment and development discussions to be utilized.</p>
	<p><i>(previously 6.6)</i></p> <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 staff; • 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. 	



Common Challenges

- Requirement 1.2
- Requirement 3.3
- Requirement 5.2
- Requirement 5.8
- Requirement 6.1

Common Successes

- Standard 5.
- Commitment of faculty to the success of their students.
- Work of Quality Management Leads.

Audit Package Submission

- Size of the report: approximately 100 pages.
- Accessible: in multiple media.
- Flow Charts: use of graphics to explain processes.
- Evidence: linked, numbered, easy to access.
- Affirmations: are required as part of the self-assessment of each Standard. They need to be SMART (Specific, Measurable, Aligned, Realistic/Relevant, and Time-bound).