



**ONTARIO UNIVERSITIES**  
COUNCIL on QUALITY ASSURANCE

# **Self-Study: Ontario Universities Council on Quality Assurance**

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# Self-Study: Ontario Universities Council on Quality Assurance

## 1. General Considerations

### Overview

It is mandated in Section 6.2 of the Quality Assurance Framework (QAF) that an independent review of the Quality Assurance Framework (QAF) and its application by the Ontario Universities Council on Quality Assurance (henceforth the Quality Council or QC), its committees and the Secretariat be undertaken once every eight years. This will be the first of such a review. On behalf of the Steering Committee in preparation for the external review visit, and to ensure the rigor and transparency of the review criteria and processes, the Secretariat has prepared a self-study on the Quality Council's various operations during its first eight years.

The Quality Council, which was established in 2010 by the Council of Ontario Universities (COU), oversees quality assurance processes for all levels of academic programs in the province's publicly assisted universities. More specifically, the Quality Council, in the words of its [website's home page](#), "is the provincial body responsible for assuring the quality of all programs leading to degrees and graduate diplomas, including new undergraduate and graduate programs, and for overseeing the regular audit of each university's quality assurance processes." While the Quality Council has this responsibility for quality assurance, the Ministry for Advanced Education and Skills Development (MAESD) is responsible for reviewing programs to determine eligibility for funding.

These introductory comments go on to explain that, in support of the Quality Council's responsibilities, each of Ontario's universities "has developed its own Institutional Quality Assurance Process (IQAP), which is subject to review and approval by the Quality Council," and note that "the requirements for the IQAP are set out in the [Quality Assurance Framework](#)".

The Quality Council and each of its two committees (Appraisal and Audit) have prepared submissions for the consideration of the external reviewers whose site visit constitutes the first phase of the review process. These documents, which together with this one constitute the self-study, mostly address quality assurance issues from the perspective of the work of the Council and its committees. This document also raises a few issues of a more overarching nature.

The first such issue the external reviewers are invited to consider is the independence of the Council. As Appendix 2 of the QAF states, the Council "has final authority for decisions concerning recommendations for approval of new programs and compliance with audit guidelines." In all other respects, however, the Quality Council is responsible to COU through the Ontario Council of Academic Vice-Presidents (OCAV), an affiliate group of COU.

The second issue arises in the form of a question: what exactly does the word "quality" mean when used with reference to the assurance of the quality of academic programs offered by universities? In particular, and as is documented below, the Council has elected to adopt a

multi-faceted approach to defining quality, given which the discussion of what constitutes quality is perhaps more precisely framed as the question that is naturally prompted by this approach: are all facets equally important as indicators of program quality?

The third and final issue addressed herein is the QAF itself, and more specifically the practical implications of working with one very lengthy document that includes both policies and procedures. In this case, an obvious question that arises is whether separating policies and procedures would contribute to, or detract from, the assurance of quality, however defined, in Ontario's universities.

### **The Independence of the Quality Council**

The integrity of any quality assurance process, either local or system-wide, requires that its operations be conducted without undue influence or interference from interests that might compromise its assessment of quality. Confidence in integrity requires not just policies and procedures that address undue influence or interference, but also the avoidance of any appearance of conflict of interest. That is, the actual practices of quality assurance must be seen to be independent and at arms' length from those who might compromise quality assessment, where "arms" is deliberately plural, because conflicts of interest can be internal to the Quality Council, or external.

With respect first to the internal workings of the Quality Council, the members of the Council and its committees almost all come from the universities in Ontario and have a broad interest in the success of program proposals, reviews and audits. Sometimes an item on an agenda will come from a member's own university. Even though the item may be in a department or faculty remote from the member's own discipline, conflict of interest must be avoided in practice and appearance, and that member must leave the discussion, not taking part in deliberations or decisions.<sup>1</sup>

This is, furthermore, true even for faculty members who have retired from that university. In addition, to provide further distance from the current business of Ontario universities, the Council itself includes an extra-provincial member and a citizen member, and is chaired by an independent academic with no current ties to a member university.

There are, in addition, a myriad of possible external conflicts of interest, including the universities themselves, and those agencies or agents that fund them.

Across all university quality assurance agencies in Canada and elsewhere, it is a fundamental principle that they have independent status. Indeed, this is seen to be a necessary condition for

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<sup>1</sup> See Section 5, Conflict of Interest, of the [Council's Operating Principles](#): "Members of the Quality Council and its Committees must avoid conflicts of interest in carrying out their responsibilities. To that end, no member of Council or its Committees who currently is employed by an Ontario university will participate in a discussion or decision on a submission from his or her own institution. Members shall not participate in any discussion or decision in which they believe their impartiality may be affected by personal interest, by financial interest or by a recent personal or professional relationship with one of the parties. Members who believe they may have, or be seen to have, a conflict of interest on any matter before Council or its Committees shall declare it to the Chair in advance of the discussion."

their very existence.<sup>2</sup> Additionally, all agencies have conflict of interest policies that must be observed by members and reviewers.

The same is true outside Canada. The Standards and Guidelines for Quality Assurance in the European Higher Education Area, adopted after broad consultation by the Ministers responsible for higher education in the European area, prescribe Independence as a standard: “Agencies should be independent and act autonomously. They should have full responsibility for their operations and the outcomes of those operations without third party influence.” See pages 32-33 of the [Guidelines](#) for this Standard where the meaning and implications are spelled out more fully.<sup>3</sup>

In Ontario, the Quality Council was set up by the province’s universities rather than by the government. Universities are created, or authorized to operate, in the province by provincial legislation or ministerial consent, but in their founding acts or charters, Ontario universities are granted autonomy in academic matters.

Academic policy, regulations, and decisions are the responsibility of senate or senate-like bodies with faculty members forming their majority membership. Just as the offering of programs is done under the shelter of university autonomy, so the assessment of the quality of those programs, including student learning, belongs to the universities. Assessment of academic matters requires academic expertise.

That said, the universities must themselves avoid conflict of interest and safeguard the independence of quality assessment. They must also be accountable for their procedures to those with an interest in the education they offer.

Independence with respect to the accountability of the quality assurance procedures in Ontario universities is to be found at several stages. Every Ontario university’s IQAP builds in expert

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<sup>2</sup> For example, autonomy is mentioned twice in the [Principles of the Campus Alberta Quality Council](#), the Saskatchewan Higher Education Quality Council refers to its [independence](#), and in British Columbia, the Degree Quality Assessment Board, on its website, calls itself an “independent advisory board” on its [website](#).

<sup>3</sup> Autonomous institutions need independent agencies as counterparts. In considering the independence of an agency the following are important:

- Organizational independence, demonstrated by official documentation (e.g., instruments of government, legislative acts or statutes of the organization) that stipulates the independence of the agency’s work from third parties, such as higher education institutions, governments and other stakeholder organizations;
- Operational independence: the definition and operation of the agency’s procedures and methods as well as the nomination and appointment of external experts are undertaken independently from third parties such as higher education institutions, governments and other stakeholders;
- Independence of formal outcomes: while experts from relevant stakeholder backgrounds, particularly students, take part in quality assurance processes, the final outcomes of the quality assurance processes remain the responsibility of the agency.

Anyone contributing to external quality assurance activities of an agency (e.g., as an expert) is informed that while they may be nominated by a third party, they are acting in a personal capacity and not representing their constituent organisations when working for the agency. Independence is important to ensure that any procedures and decisions are solely based on expertise.

academic independence along with accountability, and transparency which is usually achieved by posting documentation on a publicly accessible website. New program proposals, and continuing program reviews, are assessed by the principles, standards and procedures in the university's own framework. And, as noted already, over an eight-year cycle each university is audited by the Council's Audit Committee for compliance with both its IQAP and the QAF.

The Quality Council thus operates in independence from the particular university that seeks approval for particular programs, and with respect to government and other societal interests. The Council also enjoys independence from the body that created it. Ontario universities understand the importance of an independent council, and want its independence to be substantial in appearance and reality. Indeed, it is in the interest of each university that all other universities be held to common standards and practices about quality. The Council has final authority for its decisions, which may not be overturned by the universities and are not even communicated to OCAV. As noted, members of the Council and its committees are highly conscious of their independence and are required to declare any conflict of interest or attempt at undue influence.

The system, we believe, insures objectivity and independence. The review team's experience may provide suggestions for enhancing the understanding of this independence, and we would be pleased to consider them, particularly with respect to the authority of the Council and the HR reporting relationships of the secretariat.

### **Quality Assurance: What is Assured?**

The question of what quality means when used with reference to a university's academic programs is not explicitly addressed in the introductory section of the QAF. Instead the introduction discusses the international context for quality assurance and suggests that the adoption of the QAF brings "Ontario's universities into line with international quality assurance standards."

It would be of value if our external reviewers were to comment on the veracity of this suggestion, especially given the international expertise and focus they bring to their task. Certainly, a comparison of the QAF with the [Quality Code](#) of the United Kingdom's [Quality Assurance Agency](#) (especially [Part A](#), which deals with setting and maintaining academic standards, and [Part B](#), which deals with assuring and enhancing academic quality) indicates that the QAF is structurally similar.

The Quality Assurance Agency's [General Introduction](#) to its Quality Code identifies four purposes for the code, one of which is "to assure the quality of the learning opportunities that UK higher education offers to students." Aside from the reference to "learning opportunities" rather than academic programs, the definition of quality is thus mostly implicit, and embedded within the code itself. The same is true of Ontario's QAF, which includes two sets of evaluation criteria, one for [new program proposals](#), and another for [cyclical program reviews](#).

In the case of new programs, there are 27 criteria across 10 subsections. Any university wanting to begin offering a new program must, in its program proposal, "evaluate" the new program against all the criteria. The proposal is then reviewed by the Quality Council's Appraisal



Committee against these criteria. Only after a positive recommendation from this committee and an endorsement of the recommendation from the Council is the program approved to commence.

The evaluation criteria for cyclical program reviews number 16 across eight subsections. The responsibility resides with the unit of the university offering the program to “address and document” the evaluation criteria in its self-study, and with the external reviewer(s) engaged by the university to “address [in their report] the substance” of the self-study and the sections that address and document the evaluation criteria. The Quality Council’s primary involvement in this process is when a sample of such self-studies and reports is, along with a considerable amount of other documentation, reviewed during a quality assurance audit.

With so many evaluation criteria, it is possible that any review becomes little more than a counting exercise. Regardless of whether or not this does in fact occur, it is worthwhile to ask whether all evaluation criteria should be regarded as equivalent for the purposes of quality assurance. Some might take the position that teaching and learning, for example, is more critical for quality assurance purposes than some other criteria, which would mean paying special attention to QAF 2.1.6 (assessment of teaching and learning) in the case of new program proposals, and to QAF 4.3.4 (teaching and assessment) in the case of cyclical program reviews.

In this context, it is perhaps pertinent to mention the fairly widespread agreement among members of the Quality Council and its Appraisal Committee that the most common pitfall for universities submitting new program proposals is criterion QAF 2.1.6 (assessment of teaching and learning). The QAF includes a lengthy [Guide](#), which provides links to numerous websites offering “[excellent resources and examples to illustrate application of degree level expectations and learning outcomes](#)” and [extended commentary on QAF 2.1.6](#), much of which consists of examples of how universities have provided information that was seen as particularly helpful to those charged with the task of appraising new program proposals. These resources notwithstanding, concerns continue to be expressed about the adequacy of universities’ proposals with respect to evaluation criterion 2.1.6, given which commentary from the external reviewers is encouraged.

### **The Quality Assurance Framework**

The QAF itself is a 30-page document, exclusive of its two appendices. Every university’s IQAP must, at a minimum, conform to the QAF’s requirements for IQAPs, and the Quality Council goes through a formal re-ratification process whenever a university makes substantive changes to its IQAP. Aside from the possibility of changes to this process, an issue that is raised in the submission from the Council’s Audit Committee, it is also worth noting that IQAPs have on several occasions been re-ratified only for a lack of conformity in one area or another to be subsequently discovered.

With this in mind, it bears asking whether there is an argument for making a more structured distinction within the 30 pages between what does actually constitute policy, and what might be more appropriately described as procedures. It is generally agreed that policies should be

stated concisely and clearly and define the boundaries within which operations occur, whereas procedures describe in detail the operations that occur within the boundaries.

Such a change lines up with a structure that would be familiar to any lawyer who practiced administrative law. It also fits neatly with the suggestion coming from the Council and its committees in their submissions that the QAF include more narrative (or, in legal jargon, recitals) to explain why we choose to engage in a rigorous quality assurance process. Both suggestions would seem to be consistent with the notion of the QAF as the document that constitutes the process (not the process itself) and is the place for broad statements of policy.

There might be additional benefits from such an exercise. One example involves the process for making changes to the QAF. The last of the 30 pages of the QAF notes that either the Quality Council or OCAV “may request changes at any time, subject to approval of both the Quality Council and OCAV.” The need to invoke this process may occur less frequently if it were to apply only to the policies themselves and not, as is currently the case, the procedures too.

It is, perhaps, also worth noting that the review itself may well lead eventually to modifications to the QAF. Should this turn out to be the case, and if there were also widespread support for expressing the policies within the QAF more concisely, there would be value in doing both simultaneously.

As the review reflects on the wisdom of such a change, it will also have to pay attention to several related considerations:

- What stays in the QAF (the policy document) and what will be moved into the procedure document?
- If the procedures document is to be more nimble, more capable of responding to a changing environment, does this argue for different amendment practices for the two documents?
- Is the procedure document intended still to be a set of requirements, or would it be better seen as reflecting best practice?

None of these questions has an obvious answer, but, to repeat, this is an excellent time to be asking them because it is difficult to imagine that the outcome of the review process will not involve modifications to the QAF.

## **2. Submission from the Quality Council**

Eight years ago the QAF ushered in a new approach to quality assurance for Ontario’s publicly assisted universities. It moved away from a static review of quality to embrace continuous quality improvement in university programming. The Quality Council, composed of senior academics and professionals who have experience in and deep commitment to quality assurance, was appointed as the oversight body for this peer-reviewed quality assurance system.

This has been a significant transition for the sector. Eight years into the new approach is the right time to take stock of the system; however, because it is still early days in that transformation and because, on the whole, the system appears to have responded well, we propose some fine tuning rather than radical change to the QAF.

The Quality Council also believes that now is not the time to significantly particularize existing definitions<sup>4</sup> and concepts in the QAF. Rather, the current approach that is based on broad and general concepts in the QAF allows both universities and the Council some latitude in decision-making, a degree of professional judgment and, most importantly, case by case evaluation of every situation. An overly codified system would preclude this level of inherent flexibility, which is one of the distinguishing strengths of the Ontario approach. It honours institutional distinctiveness while maintaining a commitment to quality assurance.

With that in mind, the Quality Council has reviewed the QAF and reflected on its experience with the QAF over the first eight years of this new approach to quality assurance in the Ontario university system. Our comments fall under two broad categories:

1. Reflections about the system of quality assurance in Ontario universities
2. Comments about the role of the Quality Council in that system

In addition, we have included Appendix A to this submission, a collection of issues that have come up in the course of the business of the Quality Council. These suggestions for areas that may be explored by the Review Committee arise from both the Quality Council and from stakeholders interacting with the Council.

### **Reflections on the System of Quality Assurance in Ontario Universities**

A robust system of quality assurance for the university system in Ontario is vitally important to the full range of stakeholders: administrators, faculty, staff, students and their parents, and funders. A strong, bold, emphatic statement of our commitment to the value of the activities underpinning that robust system – rigorous independent review of new programs, cyclical review of existing programs, annual reports on major modifications to existing programs and regular audits – is important to demonstrate to all stakeholders the reason why we “do what we do” in quality assurance.

Statements to that effect should be included in a preamble to the QAF where it would have the profile appropriate to the principle being articulated. The same principles should also be articulated - in a way more particular to the section - in preambles to each section of the QAF (new programs, expedited approvals, cyclical program reviews, and audits).

### **The Role of the Quality Council in the System**

The culture that has developed around the QAF, the Quality Council and its committees has evolved over the last eight years to be one that is firmly committed to a supportive and

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<sup>4</sup> See, however, appendix A where the Quality Council recommends better defining “learning outcomes”, a central concept in the QAF

collaborative process. This culture is evident in the way the Council and its committees engage with universities on new program approvals, audits, and the review of existing programs (including final assessment reports and implementation plans, a critical component of cyclical program review).

The Quality Council firmly supports this culture of working together rather than “policing” the work of universities. Nevertheless, authority to comment, question and even impose sanctions remains an important part of the authority of the Quality Council to make the system work. There may be some situations where a collaborative and supportive approach simply does not work and the Council must have some authority – to be used judiciously – to direct an institution to act. And yet, there are several instances in the QAF where that authority is lacking and that should be rectified.

In many of the examples set out below, adding a preamble to the relevant sections of the QAF that speaks to the importance of the activity and the reason we “do what we do” would strengthen the process as a whole; however, some clarity around the Quality Council’s authority to comment, question, direct or sanction – particularly in cases of activities where the Council is the only point of contact with the institution (for example, FARs and IPs) - should be made explicit.

### **Major Modifications**

Under QAF Section 3.4 institutions must file an annual report summarizing major program modifications made to existing programs during the course of the year. The role of the Council is currently limited to receiving the report. We have found that scrutinizing major modifications is an important function of the Council because the line between a major modification and a new program is often thin. Ensuring that new programs are subjected to external review is fundamental to the integrity of the system; yet, if the Council has questions about a purported major modification or even a disagreement with the institution about whether a change is correctly identified as such, there is no authority in the QAF to probe the issue or, if appropriate, direct the university to submit the change as a new program.

Adding a preamble to QAF Section 3.3 reflecting on (without trying to delineate) the tipping point where major modifications become new programs would be helpful to remind stakeholders of why it is important to scrutinize major modifications. In addition, a clear statement about the Quality Council’s role in that scrutiny and its authority to challenge an institution’s decision and direct an external review of the changes is vital to the work of the Council.

### **Cyclical Program Reviews**

Cyclical Program Reviews (CPRs), and particularly the ensuing Final Assessment Reports (FAR), Implementation Plans (IP) and subsequent monitoring reports, are fundamental to the continuous quality improvement that the QAF seeks to support. Those documents (particularly the IP) ought to set the direction for improving a program into the future and should set some objectives for the next CPR.

Again, the Quality Council is the only body to review all FARs on an ongoing basis; and the Council's role is again confined by the QAF to receiving a copy of the FAR and IP. There is no express authority for the Council to question, comment or make recommendations on the FAR; nevertheless, the Quality Council's practice when reviewing these documents is to make suggestions that encourage institutions to view the CPR process as an opportunity to inform continuous quality improvement into the future.

Again, language in a preamble to QAF Section 4.2 that speaks to these exercises as fundamental to continuous quality improvement would be helpful. But, as with major modifications, adding language in QAF Section 4.2.6 that strengthens the Council's oversight role to more accurately reflect the current practice with respect to FARs and IPs would clarify the more active role of the Quality Council in this exercise.

### **Audits**

In this self-regulated system, the authority to act on "causes for concern" is arguably one of the most important parts of the Quality Council's role in ensuring the quality of universities' academic programs. Yet, apart from three options identified in 5.2.5(b) (all of which relate to audits) the QAF says little about how this extremely serious situation may be handled by the Council. The scope of the Council's authority to manage causes for concern in the first instance or to address an ongoing failure to rectify a cause for concern is not clearly articulated.

### **Section 1.5 IQAP Reviews**

Section 1.5 of the QAF speaks to "substantial changes" to the IQAP and the role of the Quality Council in ratifying those changes. We agree that it is important that universities report amendments to their IQAPs to the Quality Council on an ongoing basis and not leave that scrutiny to audits every eight years; however, the task of delineating substantial changes from housekeeping matters is one that requires a deep familiarity with both the QAF and the IQAP and is somewhat beyond the capacity of Council members. While this is not a matter for changing the current terms of the QAF, we believe one solution to this challenge would be to recommend adding a staff position at the Secretariat with responsibility for reviewing all amendments and flagging those that ought to be more closely scrutinized by the Quality Council before being ratified. Because of the importance of ensuring that IQAP changes do not affect the overall integrity of the IQAP or its conformity with the QAF, such a staff resource would be extremely valuable. They would also be a useful resource to universities in the process of an IQAP review.

## **Appendix A**

- Should the QAF better define and distinguish between learning outcomes, learning objectives and degree level expectations?
- The question of whether accreditation can replace cyclical program reviews is an ongoing issue for the Quality Council. Should the QAF include a stronger statement on this issue?
- Should there be a different and separate process for assessing new faculties or schools within institutions?
- There are ongoing issues around how to assess new joint programs and cyclical program reviews for existing ones. Should the QAF include clearer statements on those issues?
- Are the right stakeholders represented in the Quality Council's membership?
- Is the QAF sufficiently nimble to accommodate significant changes in teaching and learning environments?

### **3. Submission from the Quality Council's Appraisal Committee**

The Appraisal Committee (AC) set aside time at its January 8, 2018 meeting to discuss the review of the QAF and the Quality Council. A small working group comprised of current (S. Lachapelle, J. Polgar, G. Finn) and past (S. Welsh) members drafted this report which was subsequently discussed at the February 5, 2018 meeting.

With respect to the work of the Appraisal Committee, the following items have been identified:

#### **Assessment of Teaching and Learning**

Sections 2.1.6.a and 2.1.6.b of the QAF have been misunderstood since inception. In 2016, the Appraisal Committee put together and distributed some guidance on how universities might helpfully approach addressing these criteria. It is unclear whether this guidance has assisted universities or not, as the same issues are still coming up. It may be worth considering whether there is more that can be done to assist universities in understanding these areas, not just for new program submissions, but for the quality of academic programs in general.

The QA Key Contacts group and the Learning Outcomes Symposium have held several sessions at their annual meeting to discuss this aspect of the QAF, yet the results do not seem to be filtering down to program proponents.

It is suggested that this section of the QAF be revised to more explicitly state the intent of these sections with sufficient guidance, examples and support materials to assist universities in addressing this issue.

#### **Evaluation Criteria Misalignment**

In examining the evaluation criteria for new undergraduate and graduate program proposals there is a misalignment of some required criteria. For example, there is an evaluation criterion on class sizes for undergraduate programs but not for graduate programs. A review of how the evaluation criteria might better be aligned between undergraduate and graduate program proposals would be helpful.

#### **Reviewers Section**

With respect to the selection of external reviewers for a new program proposal it is suggested that universities be asked to explain and document why the external reviewer(s) were appropriate to review the program.

Also with respect to the reviewers, the Quality Council should look to develop a checklist or template for the external reviewers' use that contains a set number of specific questions related to the quality and experience of the faculty contributing to the proposed program. This would, include such items as sufficient depth and focus of research expertise related the specific program being proposed, a balance of experienced and novice supervisors, and a range of

faculty ranks and associated expertise. This checklist will assist in addressing the next item as well.

### **Faculty Contributions**

It is suggested that the provision of more context and substance on the faculty in the proposal itself would be more helpful than the submission of CVs. Those CVs that are submitted should only be for faculty that are going to play a significant role in the proposed program rather than all those faculty from the Faculty where the proposed program is to be housed. It is proposed that adjustments be made to QAF Section 2.1.7.b to ensure that proponents clearly identify the individual faculty making significant contributions to the proposed program, what their specific contributions will be, especially with respect to the courses they will teach, what their supervisory responsibilities will be, and other significant contributions to the program, etc.

### **Appraisal Committee Mandate Limits**

It would also be helpful to explore ways in which to better assist the AC to stay within its mandate. Often times the lead reviewers may struggle with some of the external reviewers' recommendations, and/or the internal responses to the recommendations, which appear to fall outside of the mandate of the Committee but are significant enough to be raised as they directly or indirectly impact quality. When this happens, AC must remain mindful of its mandate when communicating back to Institutions.

### **Committee Membership**

While not specifically to be included in the QAF, to ensure that the work of the AC is consistent from year-to-year, guidance should be provided by the Quality Council with respect to how the AC members are appointed and to have new members terms further staggered to allow for reduced turnover and the creation of an 'institutional' memory. This will be crucial moving forward as in 2018-2019, two long serving members of the AC will be stepping down, leaving a relatively "new" membership on the Committee.

## **4. Submission from the Quality Council's Audit Committee**

The following submission was developed over two meetings of the Audit Committee (December 19, 2017 and February 9, 2018), and included consultation with previous and existing Audit Committee members.

### **Introduction**

The experience of auditing Quality assurance policy, processes, and practices in Universities across Ontario leads to a detailed discussion, analysis, and reflection on the relationships between the Quality Assurance Framework (QAF) and the Institutional Quality Assurance Processes (IQAPs), and between the specific IQAPs and the actual practices that are generated by those IQAPs. While following the general guidelines of the QAF, each university offers its



own version of how quality assurance is defined and measured; auditors attend carefully to the balance between consistency in quality assurance province wide and the independent nature of each University. In undertaking this work, the three-person Audit Teams and the Secretariat are afforded the unique opportunity to see how the abstract form of Quality Assurance as set out in the QAF takes particular shape in the individual IQAP and then is put into practice through the actions of each university in the creation of new programs, the modification of existing programs and the review of ongoing programs. The suggestions included here arise from the cumulative experience of these auditors.

One overarching observation arises from the perspective of auditors accustomed to painstakingly working through the QAF, individual IQAPs, and the thousands of pages of documentation, including Cyclical Program Reviews (CPRs), New Program Proposals, Expedited Approvals, and Major Modifications, that form the basic elements of each audit. In CPRs and New Program Proposals, an overall focus in the academic units and in each university as a whole tends to be with the self-study and New Program Proposal documents, which respectively seem to consume the greatest attention in terms of time and labour. These particular processes also have the most extensive treatment in the QAF and consequently each IQAP. While it is understood that the process of producing extensive documentation – including a wide range of consultation, extensive discussion of the evaluation criteria in existing and new programs, and the use of CVs, data sets and surveys – does form a useful foundation for program review and creation, this activity has tended to dominate the quality-assurance process often to the detriment of a focus on the recommendations for program enhancement and the follow-up processes used to ensure the recommendations are pursued. This may be a consequence of the fact that universities have been undertaking their first round of quality assurance activities under the new system, including the first round of audits. The auditors' focus has largely been on the extent to which the system is up and running and the level of compliance of practice against policy. The auditors' thinking is now moving to the follow-up process as we think about the second round of audits. Many of the following suggestions to the Quality Assurance reviewers are designed to rebalance the development of review documentation against the implementation and follow-up on recommendations.

The Audit Committee also recognizes that care needs to be taken concerning the extent of any changes to the QAF, given that extensive revisions could have significant impact throughout the university system.

The Audit Committee offers the following areas for consideration.

### **Establish clear objectives for quality assurance overall and for each stage of the QAF**

While the QAF and its Guide set out often detailed descriptions of processes, these documents do not relay clearly and systematically the overall objectives for the quality-assurance process or the individual steps. There is an extensive set of requirements for the self-study, for instance, but the role of the self-study in the overall process of the review is not clearly defined. During the audits of a number of universities, Audit Teams have noted a recurrent sense of uncertainty about the actual purposes of some steps in the CPR as a whole. The Final Assessment Reports (FARs) and Implementation Plans (IPs), for example, are often not fully understood as providing

a road map for the development, enhancement, or full-scale revision of academic programs over an eight-year period. The Audit Reports themselves have noted that academic units are not always informed about the existence of the FARs and IPs or the fact that they are posted on University web sites for the information of the University community. In discussions with members of the academic units responsible for the programs being audited and sometimes with administrative teams overseeing the quality-assurance processes, there is not a shared understanding of the overall purpose of quality assurance or the individual stages. Likewise, for the approval and introduction of a new program, the final step required by the QAF is for the IQAP to ensure that monitoring of new programs takes place. Adding a description on the rationale and importance of this step would be helpful.

A clear set of objectives for the overall practice of Quality Assurance in the Ontario context, along with statements of purpose for each stage, could give the clarity of a shared vision and counter the occasional charges that the entire process is simply a make-work project.

### **Refine and add to existing definitions in the QAF**

The addition of clear objectives and purposes for each stage might also lead into the development of sharper definitions for the terminology in the QAF. The QAF offers a set of definitions under section 1.6. These have proven critical in establishing a common vocabulary between the Quality Council, the Audit Committee, the Appraisal Committee, and the Universities. However, in the course of audits, it has become apparent that there is some lack of clarity or even ambiguity in some of these terms. Indeed, some important concepts have not been defined at all in the document. For example, the concept of learning outcomes is central to the QAF, but there is no definition of these in the document. While it is understood that the term itself is subject to debate, it is also challenging for universities to implement a central conceptual element in of this framework when that central concept is ambiguous. In addition, Audit Teams often wrestle with determining if the learning outcomes described for given programs are in fact learning outcomes at all. The confusion is heightened by the fact that the QAF uses learning outcomes and learning objectives somewhat interchangeably. The language of "learning outcomes" is used under Objectives (4.3.1), Admission requirements (4.3.2), and Curriculum (4.3.3); however, "learning outcomes" and "learning objectives" are used under Teaching and assessment (4.3.4):

- a) Methods for assessing student achievement of the defined learning outcomes and degree learning expectations are appropriate and effective.
- b) Appropriateness and effectiveness of the means of assessment, especially in the students' final year of the program, in clearly demonstrating achievement of the program learning objectives and the institution's (or the program's own) statement of Degree Level Expectations.

Since there is general controversy over these terms, it would be best to use only one – i.e., learning outcomes – exclusively and give it a clear definition. It should be further noted that learning outcomes and learning objectives are used in conjunction with degree learning expectations. These associations have created further terminological confusion, with several institutions asking if degree level expectations are outcomes, objectives or something

independent. The definition of degree level expectations adds to the confusion by stating that they are "knowledge and skill outcome competencies" (p. 4). This definition seems to mix outcomes and competencies; the latter term is recently taking on a specific definition, but it is not clear the associations were part of the considerations made when this definition was created. Further, the intended relation between learning outcomes and degree level expectations in the QAF is not always clear. A revised definition of 'degree level expectations' – and one that distinguishes them from learning outcomes – might be useful.

### **Strengthen the sections on the Final Assessment Reports, Implementation Plans, and Executive Summary (Summaries?)**

As noted above, the FARs, IPs, and Executive Summaries provide a roadmap for moving forward on program development and enhancement, but this critical stage is often overshadowed by the upfront work and extensiveness of the self-study. The central role of these later-stage documents as a guide for continued assessment of programs and for general direction is not fully articulated in the QAF. In addition, audits have revealed some confusion about the content of these documents and their relationship to one another. Some institutions provide an executive summary that is a duplicate of the FARs and IPs; some have distinct variations among these documents; and the QAF itself is somewhat unclear about the nature and purpose of these documents and the relationship between them. There is also some uncertainty about the required components of the IP and who is responsible for overseeing it. At some institutions the external reviewers' recommendations are carried forward to the IP complete and unedited; other institutions may heavily redact the recommendations. Discussions in the Audit Committee and at the Quality Council and among institutions have demonstrated that some revision of this section of the QAF to clarify expectations is needed.

### **Clarification of Follow-up practices for New programs and CPRs**

Quality assurance follow-up on New Programs and CPRs is described in sections 2.4 and section 4.2.6, c, respectively in the QAF. The majority of completed audits have noted insufficiencies in the articulation and pursuit of systematic follow-up protocols for both New Programs and CPRs, with specific challenges in the area of follow-up on implementation of recommendations arising in CPRs. The QAF is particularly vague in its description of the "timely monitoring of the implementation of the recommendations" and most IQAPs are also generally vague about regular monitoring. Several include the opportunity for a one-time follow up within the eight years between CPRs, but none is specific on the kind of regular monitoring that would be typical of a quality-assurance practice that seeks for continuous assessment and improvement. The same concerns arise in the development of new programs. The Protocol for New Program Approvals includes a section on "Subsequent Institutional Process" (2.4), but it only states that there should be "monitoring of new programs." With the idea of continuous assessment in mind, institutions should be encouraged to consider a monitoring process that leads directly into the first CPR. Greater clarity and specificity could be brought to the relevant sections on the purposes of such monitoring and the activities required to regularize them.

## **Consider Changes to the Second Cycle of Audits**

The Audit Committee is currently considering revising the protocols for the second round of Audits. The Committee agrees that the basic requirements of the Audit Process should continue; however, the second round of audits will see universities using revised IQAPs and more highly developed quality-assurance processes. The focus in many of the first-round audits has been on the specifics of each part of the quality-assurance process, with less time spent on the larger aims of ensuring that the quality assurance practices enhance student education. The second round could therefore, in part, move away from the technical details to include a focus on larger considerations connected to the building of quality programs, how to enrich student experience, and how to assess the outcomes of education across the province. As the system matures, the purpose of the Audit Process will also change. The Committee is proposing the site visits include a workshop-oriented format, meeting with groups to discuss the higher goals of quality assurance, how to meet these, and how to build a culture of quality assurance and continuous improvement. Topics for these workshops might be generated by the institutions themselves so that the focus can turn to how each university can enhance its own approach to continuous assessment and the development of quality assurance. The Audit Committee hopes to articulate some of these ideas more fully, to present them to universities at the Key Contacts Day in 2019, and to develop some documentation describing the aims of the second-round audit process. The QA Review offers an excellent opportunity to discuss and consider this forward-looking enhancement of the QA process.

## **Handling Causes for Concern**

The Audit Committee is currently dealing with three Causes for Concern at one Ontario institution. These Causes for Concern involve serious departures from the QAF and the institutional IQAP. A new set of challenges has arisen in attempting to manage negotiations arising from these matters. First, timelines can be difficult to manage since the kinds of institutional changes required to rectify the sources of Causes for Concern are not easily achieved over the period of a few months. Revision, internal approval, and Quality Council re-ratification of IQAPs involve processes which are challenging to rush forward. Second, while it is helpful for the QAF not to prescribe how the Quality Council should address a Cause for Concern, thereby allowing it to assess this on a case-by-case basis, the QAF does not indicate clearly the potential consequences of failing to fully address a Cause for Concern. What action can or should the Quality Council take? When should such actions be taken? How does the Quality Council enact a sanction and still maintain a positive working relationship with the university? Under such circumstances, might “quality assurance trusteeship” be an option under the QAF? These matters are part of the serious discussions in the Audit Committee as it recommends follow-up on Causes for Concern. The QA review might be able to offer viewpoints on these issues.

## **Review Audit Committee Membership**

The first few years of the operation of the Audit Committee saw significant turnover in membership. The emerging challenge has been to develop and retain institutional memory in the Committee and to develop training programs that adequately introduce new members to

some of the complexities of quality-assurance Audits. A variety of options have been discussed. Would a Vice Chair be part of the sharing of responsibilities and a method of creating continuity in the administration of the committee? Should the membership be expanded to allow for a larger pool of auditors, especially experienced auditors, and to support the work load (especially in cases where another member becomes ill or is unable to complete an audit)? There is also a two-term limit for reappointment. There may be cases in which this term limit should be extended to retain experienced members.

### **Re-ratifying IQAPs**

Currently, the re-ratification of IQAPs takes place through the Quality Council. There has been preliminary discussion about whether or not the current practice should continue. As universities become more sophisticated managing and documenting their quality-assurance processes, the need for the Quality Council to closely monitor each IQAP is reduced. Discussions around the possibility of not having each revision of the IQAP ratified have arisen, and it has been suggested that the IQAP might be reviewed against the QAF only at the time of formal Audit. At this time, if any institutional IQAP was found to be out of alignment with the QAF, the Audit Committee might list this as a Cause for Concern. The monitoring of the IQAP would thus become mainly the responsibility of the institution, with only periodic review by the Audit Committee. Recommendations on action regarding issues with an individual IQAP would then be made at the Audit Committee level and be sent forward to the Quality Council for action. Commentary from the external reviewers on the advisability of such an approach would be welcomed.

### **Establish a small working group to address minor inconsistencies or points of confusion in the QAF**

The audit processes have turned up several areas in the QAF which are unclear, contradictory, or extremely challenging to operationalize. The Audit Committee has developed its own list of items for correction and improvement. It is expected that the current Review will focus mainly on the large-scale issues in quality assurance such as those noted in the recommendations above. However, it is also hoped that the post-review consideration and implementation of overall recommendations that will arise will allow for the improvement of specific phrasing in the QAF. A small working group that includes representation from the Audit and Appraisal Committees may be sufficient for that activity.