

SUMMARY OF AUDITORS' REPORT ON THE SCOPE OF OCAD UNIVERSITY'S RESPONSE TO THE QUALITY ASSURANCE AUDIT

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AUDITORS' REPORT ON THE INSTITUTIONAL ONE-YEAR FOLLOW-UP RESPONSE ON THE QUALITY ASSURANCE AUDIT OF OCAD UNIVERSITY

SUMMARY

The Ontario Universities Council on Quality Assurance undertook an Audit of Quality Assurance at OCAD University in 2019. As with all such audits, the purpose was to assess the extent to which the University is in compliance with its own Institutional Quality Assurance Processes (IQAP) and to affirm that institutional practices are consistent with the Quality Assurance Framework that governs all Ontario Universities.

The 2019 Audit Report of the University contained six recommendations and 12 suggestions. Under the Quality Assurance Framework, universities must satisfy audit recommendations, as they identify institutional practices that are not compliant with the university's IQAP. Suggestions are made by the audit team in the spirit of encouraging reflection on how practice might be improved, and thus compliance is not mandatory.

The six recommendations were that OCAD University must:

Recommendation 1: Use the IQAP ratified by the Quality Council in its quality assurance processes.

Recommendation 2: Ensure that there are separate responses to external review reports prepared by the program and the appropriate Dean.

Recommendation 3: Ensure the engagement of staff in cyclical program reviews.

Recommendation 4: Complete one-year reports on new programs for consideration by Senate.

Recommendation 5: Ensure that learning outcomes are linked to curriculum (through curriculum mapping) and to modes of assessment.

Recommendation 6: Ensure that new program proposals address all of the evaluation criteria required by the Quality Assurance Framework.

The Quality Assurance Framework requires that each institution submit a One-Year Follow-Up Response to the Quality Council. The auditors review this response to ensure that the Audit Report's recommendations are being satisfactorily implemented. OCAD University submitted its One-Year Response and supporting documents on January 27, 2021.

After careful review of OCAD University's One-Year Follow-Up Response auditors have concluded that it satisfactorily addresses the Audit Report's six recommendations. The auditors are of the view that the University's One-Year Follow-Up Response demonstrates the University's commitment to ensuring and improving its quality assurance processes and practices. This commitment embodies both a focus on continuous improvement and a resolve to ensure that the OCAD University IQAP remains consistent with best quality assurance practice within the University and with the Quality Assurance Framework. The auditors commend OCAD University for making or proposing the changes described in its One-Year Follow-Up Response.



RECOMMENDATION 1: Use the IQAP ratified by the Quality Council in its quality assurance processes.

The University will ensure that our practices follow the IQAP ratified by the Quality Council. As noted by the auditors, OCAD U strived to improve on best practices, which were Senate approved but not yet ratified by the Quality Council. The recent change in process by the Quality Council (as of October 2019) is helpful in this regard, moving forward, as it no longer requires less substantive modifications to IQAPs to be submitted for re-ratification.

RECOMMENDATION 2: Ensure that there are separate responses to external reviewer reports prepared by the program and the appropriate Dean.

Our CPR Internal Response template was revised in 2018 in time for use for the 2016/17-2017/18 cycle of program reviews, in order to include a separate distinct section for decanal response. Furthermore, our ratified 2018 IQAP policy clearly states a separate step for the Dean to add a response rather than approaching the document collaboratively with the program team as was in the previous iteration of the policy. In Fall 2020, we also reformatted the template regarding the decanal response to better flow into the FAR/IP document, following more recent feedback from the Quality Council.

RECOMMENDATION 3: Ensure the engagement of staff in cyclical program review.

To ensure even involvement in academic support staff in the cyclical program review (in addition to the reports they already provide program teams), meetings have been established early in the CPR cycle to enable the program teams to discuss and further analyze the information together with the various academic support units. This practice already exists and works well between the program teams and Institutional Analysis staff concerning data received. This will allow for further engagement and better highlight the role of the academic support unit's input. To capture input from a staff perspective, beyond an administrative capacity, instruction will be provided to program teams to capture this information within the "Faculty and Staff Perspective" section already within our self-study brief template.

RECOMMENDATION 4: Complete one-year reports on new programs for consideration by Senate.

A template was created for new program annual reports in Spring 2020 to ensure that new degree programs are successfully initiated and to identify, and work to address, any unforeseen implementation issues. Two of OCAD University's newest degree programs, BFA Creative Writing and MDes Design for Health, successfully completed this report at the end of 2019/20 academic year.

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RECOMMENDATION 5: Ensure that learning outcomes are linked to curriculum (through curriculum mapping) and to modes of assessment.

Curriculum mapping is already embedded and required in our CPR processes and therefore can be linked to modes of assessment more intentionally in the curriculum map. Modes of assessment will be built into the CPR process with regard to the review of student work to ensure thesis-level students are meeting program learning outcomes starting with the 2022 cycle of programs when more capacity is available to coordinate this further development.

RECOMMENDATION 6: Ensure that new program proposals address all of the evaluation criteria required by the Quality Assurance Framework.

In early 2018 the University created a new and more comprehensive template for new program proposals to ensure adequate instruction for the evaluation criteria required in accordance with the Quality Assurance Framework.

SUGGESTION 1: Develop a flowchart or clear summary statement clarifying the roles of Senate committees with responsibilities for quality assurance.

To augment the responsibilities of each Senate committee already stipulated in Section 1.3 of our IQAP policy, summary documents of their roles with flowcharts have been created and will be provided to the committees at the start of each academic year alongside their regular practice of reviewing committee terms of reference. A presentation to further orient the committees, which already occurs in the Senate Quality Assurance Committee, may accompany this practice.

SUGGESTION 2: Continue to increase its emphasis on providing data and support for data analysis to programs going through QA, especially the CPR process.

In general, we will continue our practices of having our Institutional Analysis Office meet with the programs teams to help them interpret the data they have provided and to provide other data sets, if available and when requested. Alumni tracking is an area under continual development and our Alumni Relations Office has been increasingly engaged to understand ways in which they can support program teams in their collection of alumni information. Furthermore, data is being provided to programs on a more regular basis from our Office of the Registrar. In general, however, our university does not have capacity at present to provide more robust support in this area.

SUGGESTION 3: Consider involving the Senate Undergraduate Studies Committee and the Senate Graduate Studies Committee more directly in the IQAP revision process.

The Senate Quality Assurance Committee will now consult with the Senate Undergraduate Studies Committee and Senate Graduate Studies Committee on suggested revisions to the IQAP policy, when applicable, before submitting changes to Senate for approval. This would include changes to processes or procedures in the policy for new program development or major modifications, for example. This is noted on the summary document created in response

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to suggestion #1. Likewise, if the Senate Undergraduate Studies Committee or Senate Graduate Studies Committee have suggested revisions to the IQAP policy, they may recommend these changes to the Senate Quality Assurance Committee.

SUGGESTION 4: Consider integrating the contributions of courses and resources from the Faculty of Liberal Arts and Sciences and the School of Interdisciplinary Studies into the development of new programs and the review of existing programs earlier in the quality assurance process.

We have improved upon this integration in our ratified 2018 IQAP policy with the introduction of the Letter of Intent step to help facilitate early notification and consultation for new programs and major modifications before they proceed to the proposal brief stage. In section 5.4 of our IQAP policy, it also stipulates that at least one faculty member should be included from other faculties who deliver required courses in the program, which normally results in a faculty member from the Faculty of Liberal Arts and Sciences and School of Interdisciplinary Studies (FoLASSIS), directly involved in cyclical program review process for an Art or Design program. More recently, however, with the implementation of OCAD University's Flow: Curricular Transformation initiative, our programs have become more open, inclusive and interdisciplinary, which has mitigated this concern and has resulted in the uptake of more courses within FoLASSIS.

SUGGESTION 5: Consider developing a formal description of the role and responsibilities of individuals assigned the lead in a CPR or new program development.

A statement under section 1.3.1 of IQAP policy has been added to define the role and responsibilities of leads in a CPR or new program development process. The policy revision was approved by our Senate and has been submitted for ratification by the Quality Council.

SUGGESTION 6: Develop a protocol for ensuring an arm's length relationship between members of the institution and external reviewers during the site visit.

Guidelines will be communicated more effectively recommending that there should be no occasion for gatherings between the reviewers and program team that may encourage less than frank discussions such as off-campus dinners or other activities that are not essential to the review process.

In a related note, to continue our diligence in ensuring the selection of arm's length of reviewers in advance of the site visit, the university has also implemented a declaration form for the reviewers to sign off on to confirm arm's length from members of the program team.

SUGGESTION 7: Consider broadening the membership of the Senate Graduate Studies Committee

The Senate Efficiency & By-Laws Working Group, a working group established under the Senate Academic Policy & Planning Committee, will be meeting in the 2021 winter term to begin the review of the Senate By-Laws with a view to update committee memberships compositions among other items. It will be considering the suggestion to model Senate Graduate Studies

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Committee membership on that of the Senate Undergraduate Studies Committee. A similar suggestion has already been flagged in recent past.

SUGGESTION 8: Review the process for engaging with students to ensure that they understand the intent and nature of the quality assurance process and their roles in the process (CPR).

The Office of Vice-President, Academic and Provost began being more involved in the messaging to students regarding CPR processes in Spring 2019 and our Faculty & Curriculum Development Centre is involved in providing information to students when surveys are being circulated or focus groups are organized. We will continue this practice with a standard communication that has now been developed to explain the purpose of CPR and their role in the process in advance of site visits. This is being used by Faculty Offices when recruiting students to participate.

SUGGESTION 9: Consider adding timelines to its CPR processes in the IQAP

Timelines have been added to Figure 4 in our IQAP policy alongside the existing steps for CPRs in our IQAP policy, particularly the time of notification for programs to begin, to reinforce the regular rhythm of the process across all programs. This policy revision was approved by Senate and has been submitted for ratification by the Quality Council. A timeline has also previously existed in a CPR protocol document provided to program teams during their orientation.

SUGGESTION 10: Adopt the practice of reviewing whether to merge the cyclical reviews of undergraduate and graduate programs on a case-by-case basis.

The question of combing or separating undergraduate and graduate CPRs will always explicitly be addressed in order to determine the optimal approach. In advance of the start of a CPR cycle, where this is applicable, stakeholders, namely the Deans, have been engaged to discuss the approach. To-date, this question has only been applicable to the Digital Futures and Criticism and Curatorial Practice programs at the University.

SUGGESTION 11: Review the role of the internal reviewer in writing the reviewers' report (CPR).

To be efficient with resources, and ensure arm's length practices, the Senate Quality Assurance Committee was consulted on the role of the internal reviewer moving away from an active contributor to the report and instead to be a knowledge base of university procedures and policies/fact checker. To solidify this new approach, section 5.5 of the IQAP policy was revised and approved by Senate and submitted to the Quality Council for ratification.

SUGGESTION 12: Include a statement in its IQAP about how it will link quality assurance to accreditation processes (CPR).

Section 5.2 of our IQAP policy was augmented to further clarify how quality assurance links to accreditation processes. The policy revisions were approved by Senate and submitted to the Quality Council for ratification.

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