

Advice on Continuous Improvement and Self-reflection

- How are other institutions describing their approaches for continuous improvement? Have some been more successful than others?
- How have other institutions embraced the QA process as a means for self-reflection and improvement? (Does everyone see their role in contributing to this report?)

General reflections and advice

- While continuous improvement was implicitly built into the original Quality Assurance Framework (QAF) (i.e., the 2010 version), it was only explicitly discussed as part of the revised 2021 version. Many universities are therefore still grappling somewhat with what this means and how best to describe their relationship to it (see the relevant extract from the recent [Omnibus Report](#) below).
- Actively seeking opportunities to improve the IQAP and its associated QA processes, templates and guidelines is also seen as a highly commendable continuous improvement exercise by the Audit Committee (as observed in several cycle 1 audits), as well as by the Quality Council. Regularly seeking feedback from the following key stakeholders (among others) can help inform this work:
 - Senate sub-committee(s) with responsibility for QA
 - Programs that have completed a QA activity
 - Internal reviewers
 - External reviewers
- Ensuring that the University's Senate sub-committees and other bodies within the institution that have responsibility for aspects of your quality assurance work are explicitly tasked with recognizing high quality QA work, as well as with being given the authority to signal where there is room for improvement and/or the requirements of the IQAP are not being met. The latter might include inadequate external reviews, incomplete or inappropriate internal responses to the external reviewers' recommendations, and/or unsatisfactory action on the Implementation Plans via the scheduled monitoring reports.
- The introduction to the QAF's Protocol for Major Modifications (Program Renewal and Significant Change) also has some helpful language about what continuous improvement is and how minor and major modifications to existing programs are a critical part of this process.
- The university's Cyclical Audit is an opportunity for further self-reflection and expert advice on what is working and where there are opportunities (or requirements) for improvement. Any subsequent revisions can also go a long way to building on the university's existing good work in ensuring continuous improvement of its academic programs and the associated QA processes to do so.

- If you've not already done so, exploring the language of other IQAPs and associated templates and guidelines posted on other university websites may spark some new ideas. The following universities' IQAPs contain some helpful language and are worth looking at:
 - The overarching Introduction to York University's IQAP
 - The introduction to the CPR Protocol in Carleton University's IQAP

Finally, this continues to be a good topic to discuss further at future Key Contacts' meetings.

Relevant observations from the first cycle of audits

- Auditors found particularly notable the role Deans play in the management of the deliberations related to the quality assurance process that are distributed across various committees at one university. Here, Deans chair these committees and rotate the responsibility for specific committees among each other. This provides a signal throughout the institution that quality assurance practice is important. Further, it enables the Deans, individually and as a group, to maintain an active watch on the state of quality assurance within the institution.
- Sharing of the CPR/QA experience at the Dean's Council (or equivalent): The Dean of a particular Faculty described a process where aspects of the CPR process by one department were shared with all the chairs in that Faculty. This has been identified as a best practice at several institutions and is encouraged more broadly.
- At another university, it was noted that programs prepare an annual review of the progress on implementation of the Final Assessment Report (FAR) and Implementation Plan (IP) for their most recent cyclical program review. Based on this, they prepare a plan for the coming year and discuss progress and plans with the Dean. More generally, the Office of the Vice-President, Academic and Provost was actively involved in monitoring progress related to the FAR and IP. These were identified by the auditors as reflecting a strong emphasis on continuous improvement at that university.
 - NOTE: other universities also require regular monitoring reports on the implementation of the FAR and IP, which would equally be considered a best practice.
- Support Unit Engagement by the Library in the QA process: During an audit site visit meeting with members of the Library, the auditors were encouraged by the Library staff's desire to provide reports with impact, containing information and analysis going beyond simply following the criteria specified in the IQAP. Further, the Library is focused on continuous improvement of the required Library reports.
- Another example of identified best practice linked to continuous improvement was a case where some programs treated FARs and IPs as living documents that could be modified to record successful completion of goals and to adjust their objectives accordingly. They sometimes added additional objectives, building on what had been already achieved.
- Several universities received the suggestion to find ways in which to reinforce the idea of how the quality assurance processes can be envisioned as an opportunity for continuous improvement of programs across the institution.

- Having the senior administrators seriously engaged with the quality assurance processes and evidence of significant positive evolution in the use of templates and support for individual units undergoing reviews was praised in another audit. In addition, the processes involved in the governance structures used to approve new programs and major modifications and in supporting the Cyclical Program Reviews were found to have evolved to provide a thorough and systematic assessment of quality assurance work.

Extract from the 2021-22 [Omnibus Report](#) (pages 6 – 7):

Opening Plenary - Developing a Shared Culture of Continuous Improvement: Experiences with Cyclical Program Reviews

The opening plenary panel, with representatives from the University of Guelph, Queen's University and Western University, identified some of the frustrations that Key Contacts can experience in getting their colleagues engaged in continuous improvement of their existing programs.

Key Themes

Issues with engagement: Limited resources and difficulties in accessing data can hamper engagement and enthusiasm in the processes that drive continuous improvement. Other challenges include delays in process with no sticks to help move the CPR forward and dealing with colleagues' cynicism in the value of undertaking a CPR. Finally, the panel also noted that when present, a lack of buy-in to the process and a belief that the senior administration has just "made this up" can be a significant barrier to engaged and quality reviews.

Conveying the value: The session then focused on the importance of conveying the value of the CPR process, and provided some concrete suggestions of how universities can accomplish this, including:

- Identify "QA champions" to develop a "community of peers" / individuals who can help motivate others:
 - Use program representatives that did a particularly good job process-wise on recently completed CPRs to help convey the process tips, tricks and best practices to other units.
 - Use representatives from those programs that have recognized the value of their CPR in leading to program improvement(s) in the first cycle of reviews conducted under the 2010 Quality Assurance Framework (QAF) to help motivate others.
- Identify specific benefits and/or opportunities to the programs coming up for review:
 - Champion the CPR as the primary mechanism for programs to provide evidence of need (program quality-wise) to seek approval for any requests for resources/resource requests. Make it hard for units to make such requests outside of the CPR process.

- Reinforce the CPR as a program's primary means to explore plans / ideas / requests for growth.
- Create feedback mechanisms throughout the process.
- Other advice included:
 - Relate CPR to curriculum renewal and build in formal ties to Centre for Teaching and Learning (or equivalent) throughout CPR process.
 - Consider building in orientation / training / reflection workshops for the development of the self-study stage.
 - Create a checklist and timeline for the CPR process for the units to ensure consistency of understanding / clarity of expectations.
 - Consider building in a participatory retreat for students to introduce them to the review process and help guide them on what to expect. This is particularly helpful for universities that include students as a member of the review team. It can also be used to introduce students who are meeting with external reviewers to the review process more generally, as well as to help them understand how programs are developed and then cyclically reviewed.
 - Fix bureaucratic and technical challenges, e.g., in accessing data, and ensuring continuity of process during staff turnover.

Additional resources – These are available via the following links:

- [Exchange Forum Resources – June 20 2021](#) (password protected)
- QAF Guidance on the [Assessment of Teaching and Learning \(QAF 2.1.2.4 and 5.1.3.1.4\)](#) — Ontario Universities Council on Quality Assurance (oucqa.ca)
- QAF [Guidance for External Reviewers of New Programs](#) — Ontario Universities Council on Quality Assurance (oucqa.ca)
- QAF [Guidance for External Reviewers of Existing Programs](#) — Ontario Universities Council on Quality Assurance (oucqa.ca)
- QAF Guidance on [Involving Students in Quality Assurance Processes](#) — Ontario Universities Council on Quality Assurance (oucqa.ca)
- QAF Guidance on [Creating an Effective Self-Study](#) — Ontario Universities Council on Quality Assurance (oucqa.ca)
- QAF Guidance on the [Final Assessment Reports, Implementation Plans, and the Executive Summary \(Section 5.3.2\)](#) — Ontario Universities Council on Quality Assurance (oucqa.ca)

See also handouts 1, 6 and 7 for related comments on self-reflection and opportunities for continuous improvement.