



Ontario College Quality Assurance Service

Service de l'assurance de la qualité des
collèges de l'Ontario

COLLEGE QUALITY ASSURANCE AUDIT PROCESS (CQAAP)

AUDIT REPORT

DURHAM COLLEGE

DATE OF SITE VISIT: May 30-31, 2018

PREPARATION DATE: June 25, 2018

SUBMISSION DATE: July 3, 2018

PREPARED BY: Bruce Tawse, Deidre Bannerman, Kelly Fox



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APPROVAL OF THE AUDIT REPORT

This report represents the findings of the College Quality Assurance Audit Process for **DURHAM COLLEGE**.

This report has been prepared, reviewed, and accepted by all parties to the Audit, including the college President, members of the audit panel, and the Chair of the OCQAS Management Board. The signatures of the representative parties demonstrate their acceptance of the content of this report.

COLLEGE PRESIDENT

<p>Don Lovisa</p> <p>Signature: </p>	<p>Date: November 1, 2018</p>
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CHAIR- OCQAS MANAGEMENT BOARD

<p>Joy Warkentin</p> <p>Signature: </p>	<p>Date: October 30, 2018</p>
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AUDIT PANEL MEMBERS

<p><i>Chair</i> Bruce Tawse</p> <p>Signature: </p>	<p>Date: July 3, 2018</p>
<p><i>Panelist</i> Deidre Bannerman</p> <p>Signature: </p>	<p>Date: July 3, 2018</p>
<p><i>Panelist</i> Kelly Fox</p> <p>Signature: </p>	<p>Date: July 3, 2018</p>



EXECUTIVE SUMMARY

1. **Conclusions:** *General comments and summary of the findings of the audit panel.*

Durham College continues to operate with an emphasis on quality, a focus that supports the College's mission of "The Student Experience Comes First".

As part of the *College Quality Assurance Audit Process (CQAAP)* requirements, the College prepared a very comprehensive *Self-Study Report* and supporting documentation that allowed the Audit Panel to gain insight into the College's activities and processes. This report provided an informative foundation for discussion and strategies leading up to the subsequent Site Visit. In the *Self-Study Report* the College was very frank and honest in acknowledging areas where it felt further improvements were required to push its quality agenda forward even further. The extensive list of "Areas for Improvement" created by the College helped the Audit Panel to understand the College's own assessment of the level of quality assurance it was striving to meet.

During the Site Visit the Audit Panel met with 109 staff, faculty, students, administration members, industry representatives and other stakeholders, all of whom were willing to share their thoughts, opinions and comments. The Panel found all of the participants to be prepared and ready to engage in the conversations.

It was evident that Durham College has fostered a culture of collaboration. The Panel found that the various stakeholder groups definitely understood the importance of quality in helping them to achieve their individual departments' goals and those of the colleagues in other areas of the College. This emphasis on collaboration permeated the processes the College has in place and was in evidence during the Site Visit conversations.

Durham College has many processes, procedures and activities in place to promote and support the quality of its programs and operations. The Panel was able to identify three overarching themes of Consistency, Professional Development and Systems that seemed to capture the essence of what the College is doing that enables and supports the work of its community.

Through the *Self-Study Report* and the Site Visit, the Audit Panel feels that the College has met all of the Ontario Colleges Quality Assurance Service's *Standards* and these are addressed in this Audit Report.

The Audit Panel congratulates Durham College on its quality assurance approaches and encourages the College to continue to seek ways to communicate the importance of QA in its policy-making and decision-making.



2. Results

a. Audit Results

Standard	Result		
1	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met
2	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met
3	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met
4	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met
5	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met
6	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met

Audit Decision: (select one)

- Mature Effort**
- Organized Effort
- Formal Effort

AUDIT PROCESS

1. Self-Study Documentation Review

- a. Description of the process used to review the materials received from the college.

Durham College provided the *Self-Study Report* to OCQAS and the potential audit team members on April 6th, 2018.

The *Self-Study Report* was provided as an e-mail attachment and the supporting evidence documents were available as live links within the *Self-Study Report* itself or through an accompanying *Evidence Mapping Spreadsheet* listing over 700 documents that were accessible through *Google Docs™*.

Seven potential auditors reviewed the evidence and Report and individually ranked each requirement as *Met*, *Partially Met* or *Not Met* for each of the Standards and Requirements and submitted this initial assessment to OCQAS on April 16th.

All of the potential auditors then met via teleconference on April 17th to review the group's responses and hear from each other how their individual ranking was made. On April 19th each potential auditor submitted a second review that took into account their own further analysis of the evidence as well as information gained from each other through the first teleconference. OCQAS then identified the *Durham Audit Panel* by using the Fleiss Kappa statistical analysis tool to determine the three candidates having the highest degree of agreement for the rankings.



The three Audit Panel members continued to review the materials provided in the *Self-Study Report*, the *18 Month Follow-up Report* (2015), the *Current State of Quality Assurance 2018* and the *Evidence Mapping Spreadsheet*. The Panel met through teleconferences and email to develop a set of questions and additional information the Panel felt they required from the College. This *Accreditation Panel Review Questions and Areas Requiring Further Investigation* document was submitted to OCQAS and the *Manager, Program Development and Quality Assurance* at Durham College on May 8th, 2018. The College's response to these questions was received on May 22nd and the Audit Panel reviewed the response in preparation for the Site Visit on May 30th-31st, 2018.

The evening before the Site Visit the Audit Panel met in person to review material and finalize questions for the various meetings.

b. Comments on the relevancy and adequacy of the Self-Study Report.

Durham College provided a very clear, detailed and complete *Self-Study Report* that addressed each of the Standards and Requirements. The *Self-Study Report* incorporated many live links to supporting documentation, a feature that made it relatively easy to access the evidence relating to the narrative of the *Report*.

A comprehensive Excel spreadsheet was provided that contained 726 individual documents of supporting evidence and these were compiled in *Google Docs™*. This tool enabled easy access to the detailed evidence for the Audit Panel members.

The Audit Panel had several questions regarding information submitted in the *Self-Study Report* and also requested some additional information from the College. The Audit Panel received a complete response to these questions that fully satisfied their needs.

The College's *Program Development and Quality Assurance* department managed the communication between the College and the Audit Panel and did an excellent job of preparing the material and responding to the Panel's needs.

c. Comments on the college's ability to meet the Program Selection requirements established by the OCQAS.

Durham College met the Program Selection requirements established by OCQAS. Six programs that were put forward as part of the review:

- Welding Engineering Technician (WETN) - *Diploma*
- Victimology (VICT) – *Graduate Certificate*
- Court Support Services (CTSS) - *Certificate*
- Sport Administration (SPAD) - *Diploma*
- Electromechanical Engineering Technology (EMTY) – *Advanced Diploma*



- Activation Coordination in Gerontology (ACGR) – *Graduate Certificate*

Sport Administration (SPAD) and *Court Support Services (CTSS)* were selected by the College as the two programs for review throughout the *Self-Study Report*. *Victimology (VICT)* and *Welding Engineering Technician (WETN)* were randomly chosen by OCQAS from the College's program list.

2. Site Visit

- a. Comments on the logistics of establishing and conducting the Site Visit.

The Site Visit date was established between OCQAS and Durham College and set for May 30th and 31st, 2018. A draft agenda was developed by the *Manager, Program Development and Quality Assurance* and after initial review the Audit Panel suggested some very minor changes, such as the ability to incorporate a short tour of the facilities as a way of providing context to the discussions. In addition the Panel requested a demonstration of some of the interactive systems the College was using for student communication and program and course outline development. The College accommodated these requests and the final agenda was agreed upon in advance of the Site Visit.

The College had organized the stakeholder groups very well and the Audit Panel was able to keep to the agenda timelines. The flow through of stakeholders was efficient and respectful of everyone's time. All guests arrived with name panels for the table so the Panel had a clear idea of who was speaking during the interviews. The detailed agenda listed every participant, along with their role, which made it very easy for the Audit Panel to connect an individual's responses to College functions and assist with taking notes. The Audit Panel had prepared a series of questions specific to each stakeholder group. These questions were designed to clarify any additional information the Panel felt they needed and each question was connected to specific Standards and Requirements.

The Panel met with 109 stakeholders over the two-day Site Visit.

The College welcomed the Audit Panel upon arrival and made the group feel very welcome and comfortable.

The Audit Panel would like to thank the *Durham College Leadership Team (DCLT)* and the *Manager, Program Development and Quality Assurance* for their work in making the Site Visit a very efficient and enjoyable experience. No doubt there were many others "behind the scenes" who worked as part of an efficient team to make the Site Visit happen and the auditors want to acknowledge their work and support.



- b. Comments on the 'exit meeting' held with the Senior Administrators from the college at the end of the site visit.

After the first day of the Site Visit, the auditors reviewed the input from the various stakeholders and began to identify some themes around what had been heard. Throughout Day Two the auditors continued to listen to the responses from the second group of stakeholders and used this information to expand on the initial thoughts around themes and the status of the College's quality assurance activities.

At the end of Day Two the Audit Panel had the opportunity to meet once again with the *Durham College Leadership Team (DCLT)*. This provided an opportunity for the Panel to thank the College for the hospitality and organization extended to the Audit Panel. At this meeting the Audit Panel shared some initial thoughts around the Site Visit experience and congratulated the College on three themes that stood out for the Panel. These were:

- Consistency
- Professional Development
- Systems

The Panel then outlined the timelines and next steps in the process, including the development of the draft audit report which would go to the College, and the timeframes for review of the draft report and any follow up required.

The *Manager, Program Development and Quality Assurance* informed the Audit Panel that the various stakeholder groups had provided feedback that they found the process and meetings to be positive and certainly not intimidating.

3. Final Assessment and Draft Report

- a. Description of the process used by the audit panel to review all supplemental materials and information collected prior to or during the site visit.

The Audit Panel found the materials provided by the College to be very informative, complete and aligned with the Standards and Requirements set out by OCQAS. Requests for additional information and answers to questions raised by the Panel were promptly supplied and satisfied any knowledge gaps the Panel had.

As the Site Visit approached, the Panel felt prepared and informed and looked forward to the various meetings to validate their perceptions.



- b. Comments on how the supplemental materials impacted the audit panel's final assessment.

As noted, the Audit Panel had requested several additional pieces of information and had forwarded some questions arising from their review of the *Self-Study Report* and related supporting documentation. The College provided prompt and complete answers to these questions that helped confirm the Panel's initial thoughts.

- c. Description of the process used by the audit panel to draft the final report.

After the first day of the Site Visit, the Audit Panel met to review their thoughts and observations from the various meetings with stakeholders. This allowed the members to share their impressions around the "themes" which seemed to be surfacing and to develop an approach to questions for the groups that would be presenting on the second day.

Each Panel member made comprehensive notes throughout the meeting and these were shared electronically among the members. The Audit Panel Chair compiled the various comments and notes and provided relevant narrative to develop a "working draft" of the report for the other members to review, provide more input and suggest edits. Rankings were not included at this stage.

Each Panel member then ranked the various Standards and Requirements as Met, Partially Met or Not Met and this information was discussed in a teleconference on June 12th. Changes and edits were incorporated into the working draft as agreed upon and the document was circulated to the Panel members until a final version was approved by all involved.

The Audit Panel's report was submitted to OCQAS on July 3rd, 2018.

COMPLIANCE WITH STANDARDS AND REQUIREMENTS

Below is a chart that records the audit panel's findings following the review of the college's quality assurance mechanisms. The audit panel must supply sufficient evaluative narrative to demonstrate the reasoning that led to its decision. Particularly if any remediation is required, the college must be able to understand the nature of the weakness to be addressed and appropriate action points should be provided. Similarly, the college needs to understand the areas of strength upon which they can continue to build.

Standard 1 PROGRAM QUALITY MANAGEMENT SYSTEM



Effective quality assurance mechanisms ensure the quality of a program management system and demonstrate continuous improvement.

Requirement	Result		
1.1	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met
1.2	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met
1.3	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met
1.4	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met
1.5	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met
1.6	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met

Evaluative Narrative

Articulation of reasons for the audit panel’s findings and any action points recommended to the college.

The Audit Panel felt that the Durham College has developed and implemented good quality assurance mechanisms and is continuously striving to improve the policies, activities and communication around QA.

- The College has developed mechanisms to evaluate and improve programs to ensure currency, relevancy, effectiveness and quality. *Annual Program Reviews* are conducted on all programs and include a six-month follow-up; *Comprehensive Program Reviews* are done on a five-year rotation and incorporates a review of all elements of the program, however, action can be taken at any time. A *Program Change Policy* is in place to provide a mechanism for minor and major changes to programs.
- Students have opportunities to provide input on courses, programs and instructors. In addition, students and other stakeholders have the opportunity to participate in the *Comprehensive Program Reviews*, a practice that gives a broad “voice” in the quality of content and delivery of programs.
- The College’s Mission – “*The Student Experience Comes First*” – focuses college staff and activities on how to ensure the learning experience of the students is in the forefront of decisions and the programs reflect the quality expected by students and industry.
- The College has adopted and effectively uses some online tools such as *WebCOT™* and *Tableau™* that are used for faculty, program review teams, administration and others to review current and past information about program health, any areas of strength or deficiency, enrolment trends, graduate employment, graduate satisfaction and other indicators. This allows all concerned to have access to the same information for decision-making. This “dashboard” approach provides clear and pertinent information to inform the program status.



- *Tableau™* is a tool developed to capture the details of a program’s statistics over time. This online tool developed by Institutional Research gives internal users a multi-year “snapshot” of each program’s status and compares the status of the program with competitors’ programs. This tool is used by program teams to help inform the *Annual Program Review*.

Standard 2 PROGRAM DEVELOPMENT

Effective quality assurance mechanisms ensure the quality of the programs of study being developed and demonstrate continuous improvement.

Requirement	Result		
2.1	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met
2.2	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met
2.3	<input type="checkbox"/> Met	<input checked="" type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met

Evaluative Narrative

Articulation of reasons for the audit panel’s findings and any action points recommended to the college.

- Durham College has established mechanisms and practices to ensure the programs offered – and those in development – are reviewed through a variety of processes.
- The College’s *New Program Development Policy* defines the VLOs as the starting point for any new program development.
 - The *Program Learning Outcomes (PLO) Policy* guides the development, changes and monitoring over time of the Vocational Learning Outcomes (Note: PLOs is the preferred terminology at Durham College) and the PLO/VLO requirements are published in the Program Guides. Students are advised of the outcomes through their course materials, online course repositories and through direct faculty contact.
 - Program Teams review VLO’s on an annual basis as part of the Annual Program Review process and during the Comprehensive Program Review. Program Advisory Committees also review the learning outcomes annually.
 - Students shared that they were aware of the processes and how to access student supports such as *Prior Learning Assessment Recognition (PLAR)*, an improvement resulting from a recommendation from the previous 2013 audit.
 - The content of the College’s *Program Guides* reflect many of the QA activities that are in place. The *Program Guides* are comprehensive and outline the program’s expectations, learning outcomes, employment opportunities, timelines and program



specific academic policies and procedures. Course listings, including pre- and co-requisites, General Education and Essential Employability Skills and Field Placements are shown along with the course and program's evaluation methodologies.

- The Panel noted that the Course Learning Outcomes-to-Program Vocational Learning Outcomes mapping is yet to be completed. This shortcoming is validated by the College's own comments in the Areas for Improvement. Updating of course outlines and the associated learning plans will be a significant improvement in communicating expectations to students and the Panel feels this work should be given priority.

Standard 3 CONFORMITY WITH GOVERNMENT REQUIREMENTS

Effective quality assurance mechanisms ensure the conformity of programs of study with relevant government requirements and demonstrate continuous improvement.

Requirement	Result		
3.1	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met
3.2	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met
3.3	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met
3.4	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met
3.5	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met

Evaluative Narrative

Articulation of reasons for the audit panel's findings and any action points recommended to the college.

Durham College is meeting the credential framework requirements and through policies such as the *New Program Development and Approval Policy* and the *Program Change Policy* the College monitors compliance with the *Credential Validation Service* and *Ministry of Advanced Education and Skills Development* requirements. The College follows the Ontario College nomenclature and titling principles.

- The College has a functioning *Program Proposal Review Committee* that encompasses a broad section of members whose role is to ensure new programs and/or changes to programs adhere to Ministry requirements, titling protocols, and other standards.
- The College has very engaged *Program Advisory Committees* for programs/clusters of programs. Industry representatives are involved in the early development of program proposals and once programs are in place, the PACs review programs regularly.
- *Program Advisory Committees (PACs)* have input to Program Learning Outcomes to ensure relevancy of the current and future program mix. PACs have input for Vocational Learning Outcomes and regularly review program content and monitor



graduate skills. PACs meet twice a year and include student and faculty representation.

- As program standards/titles change the College administration, faculty and others are involved in the communication of program changes through a *Program Change Memo* to all stakeholders. This ensures that the titling protocols are compliant with policy and communicated broadly.

Standard 4 PROGRAM DELIVERY AND STUDENT ASSESSMENT

Effective quality assurance mechanisms ensure the quality of program delivery and student assessment, and demonstrate continuous improvement.

Requirement	Result		
4.1	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met
4.2	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met
4.3	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met
4.4	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met

Evaluative Narrative

Articulation of reasons for the audit panel's findings and any action points recommended to the college.

A variety of student assessment methods are in place and responsive to the requirements of the programs and the needs of students learning styles. Graduates from Durham College possess the required skills and experience to engage in the workplace in their chosen field.

- *WebCOT™* (web-based course outline tool) ensures that faculty have a single source of content for a particular course and an archive as courses change over time.
- Current course outlines are published in *MyCampus™* and accessible by students, faculty and others who require ready access to these documents.
- The College supports a single course outline, regardless of whether delivery is via in-class, hybrid methodology or completely on-line. This approach ensures consistency of course content, learning outcomes and student performance expectations. The College's *School of Continuing Education* uses the same program content for part-time delivery, thus ensuring consistency in content and learning outcomes. When changes are introduced in the full-time delivery model, the School reflects these changes in the part-time delivery model as well.
- C.A.F.E. provides a team of experienced specialists to support faculty in the effective use of the LMS and offers several vehicles to distribute seminars, workshops, web-



based lessons and other opportunities for faculty to become proficient in the use of the LMS.

- The College has a *Scholarly Teaching and Learning* fund for faculty to apply for support for research and the results of any research is distributed and shared widely through example is the *Research Day*.
- When innovative ideas and interests arise the College finds funds to support exploration. As a result, funding was obtained to develop the *AI Hub* used by students and faculty alike to expand their knowledge.
- Faculty engage in ongoing events such as the Eastern Regional colleges *Focus on Learning* programs. The *Celebrating Great Teaching & Learning* sessions allow teachers to observe and shadow others to expand their skills as teachers.
- The College has policies and procedures in place regarding prompt feedback to students on assessments and the *Annual Program Review* process ensures the timing of feedback is addressed. Students shared that they received timely feedback from faculty, either electronically or in-person. Students felt that their assessments were aligned with the program and course expectations and the breakdown of the marking systems allowed them to know expectations. *Program Guides* helped them understand what was required of them to succeed. Assessment tools were varied, including tests, hands-on demonstrations and were consistently aligned with the learning.
- Regarding field placements, the students felt that they experienced placements that were appropriate to their area of study, provided them with a practical learning experience and, in some cases, resulted in a job offer. Students were confident that they were ready to go into the workforce; some stated they were “100% ready to take on the job.”
- Graduates reflected on their experiences with the courses and programs and validated that they received the skills and training that helped them get employment and are aligned with the workplace requirements. PAC Chairs commented on the quality of the graduates coming out of Durham College’s programs and rated them as preferred candidates and employees.

Standard 5 EXISTENCE, MONITORING AND COMMUNICATION OF ACADEMIC POLICIES AND PRACTICES

Effective quality assurance mechanisms ensure the communication and monitoring of established academic policies and practices related to academic issues that support



program implementation and delivery, and student achievement of vocational learning outcomes, and demonstrate continuous improvement.

Requirement	Result		
5.1	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met
5.2	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met
5.3	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met
5.4	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met
5.5	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met
5.6	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met
5.7	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met

Evaluative Narrative

Articulation of reasons for the audit panel's findings and any action points recommended to the college.

The Panel found that Durham College has processes, policies and procedures in place to ensure the monitoring and communication of academic policies and practices. There are established policies and procedures in place to address program content and credential requirements, and progression.

- Durham College has implemented a standing *Quality Assurance Committee* that meets three times a year and oversees policies, including academic and other supporting policies.
- The College has in place policies and procedures for students at academic risk, academic advising, communication for students who have failed courses and students have access to information regarding their academic standing through *MyCampus™*.
- The College has in place policies to support and monitor student status and success. The *Student Well-Being & Campus Response Policy, Academic Integrity Policy, Academic Progression Policy, Aegrotat Standing Policy* all contribute to an environment focused on helping students who are facing challenges in their studies.
- The College has several policies for managing and monitoring field placements, admissions, academic grading, graduation, academic progression, PLAR and credit transfers.
- *Program Guides* describe and explain the relevant policies and procedures pertinent to the course of study, including direction to policies for pre- and co-requisites, program pathways, general education and essential employability skills expectations, co-op education requirements, grading, graduation and other academic requirements.



- The College has demonstrated that appropriate policies and procedures are in place for accommodations, assessments, appeals, withdrawals, students at academic risk and honorary credentials.
- Policies are in place to address agreements with external bodies, such as articulation agreements, letters of agreement and understanding with societies and professional bodies (Law Society of Upper Canada, Paralegals, Practical Nursing , MAESD, PEQAB an OCQAS).
- Program changes are guided by the College’s *Program Change Policy, Academic Program Review and Renewal Policy* and the *Program Proposal Review Committee*.
- The College ensures communication about academic policies are covered through *Program Guides*, course outlines and online modes such as *DC Connect™*.
- The College has identified the need to have students attest to having read and reviewed the College’s policies and procedures and is currently being put in place. This is in response to the PEQAB requirement for degree programs but will be implemented for all programs.
- Academic policies and procedures are reviewed and monitored through the *Policy and Procedure Development and Renewal Policy*.

Standard 6 AVAILABILITY AND ALLOCATION OF COLLEGE-WIDE RESOURCES

Effective quality assurance mechanisms ensure the existence, availability and allocation of resources (human, physical, financial) and technological infrastructure to support student achievement of program vocational learning outcomes, and demonstrate continuous improvement.

Requirement	Result		
6.1	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met
6.2	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met
6.3	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met
6.4	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met
6.5	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met
6.6	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met
6.7	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Partially Met	<input type="checkbox"/> Not Met

Evaluative Narrative

Articulation of reasons for the audit panel’s findings and any action points recommended to the college.

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Durham College has shown that it has processes in place to ensure the resources and infrastructure necessary to provide quality programs and supports for quality programs, facilities and services.

- Academic, support and administrative hiring is guided by the *Recruitment and Selection Policy* to ensure qualified candidates are in place.
- Durham's Human Resource Department maintains an applicant tracking system to allow for quick recruitment when needed. Potential faculty/staff are screened in advance for appropriate credentials and become part of a pool available to hiring managers when a vacancy or new position opens up on short notice. This process also ensures that a pool of people with the required expertise is tracked so a program can continue to function if a member with specialized expertise leaves.
- The Human Resources Information System tracks faculty credentials.
- It is evident the College supports ongoing professional development of faculty to ensure the programs are being delivered by experienced and current instructors. The College respects faculty's personal commitment to professional development and provides support whenever possible.
- The College's C.A.F.E. (Centre for Academic and Faculty Enrichment) plays an important role in the development of faculty. C.A.F.E.'s design as a focus for faculty development was praised as an example of the College's investment in faculty's development. C.A.F.E. was held up as an area where faculty could comfortably seek help and the Audit Panel heard of examples where a faculty member felt they needed assistance with an area and within a week C.A.F.E. staff had put together a program for them. C.A.F.E. also facilitates programs for indigenization and internationalization of programs/courses. A weekly newsletter about teaching and learning resources is distributed through C.A.F.E..
- To support the ongoing development of faculty, the College offers a variety of methods to engage faculty, such as *Teaching Squares*, the mandatory *College Teaching Certificate*, *Jumpstart* and *Focus on Learning* sessions.
- New faculty participate in an orientation program and the mandatory *College Training Certificate Program* to develop teaching skills and related expertise.
- Part-time and contract faculty are provided with professional development opportunities including *Jumpstart*, orientation sessions, programs through C.A.F.E., orientation to the LMS, sessions on the College's policies and procedures and overall awareness of the Durham College environment.
- Full-time, probationary and contract faculty participate in the *Program Faculty Performance Appraisal Policy* process which incorporates an assessment of the faculty



member's strengths and potential PD opportunities to address shortcomings in their skills and knowledge. Classroom observations/visits by the Executive Dean or designate, *Student Feedback Questionnaires* and a self-reflection component are part of the appraisal process.

- All indicators from students (Student Feedback Questionnaires, student interviews) are that faculty are engaged and carrying out their professional responsibilities satisfactorily and are focused on student success.
- Student to FT/contract faculty ratios, retirement projections, program growth projections, the *Annual Business Plan*, *Enrolment Management Plan*, *Academic Plan* and similar data informs the School Deans and others regarding faculty and support staff needs to maintain and enhance program quality.
- Durham College offers a menu of support services to assist students, such as *Student Academic Learning Services (SALS)*, the *Access and Support Centre (ACS)*, *Office of Student Diversity, Inclusion and Transitions*, the *Aboriginal Student Centre*, *Career Development Office*, and the *Campus Health Centre*. All of these supports signal a commitment to ensuring Durham College students have access to supports for success.
- The College has a *Space Policy and Procedure* to guide decisions and priorities. There is a 10-year Capital plan to renovate the entire Oshawa campus, with a building wing renovated each year.
- The College has adopted a standardized approach to classrooms and learning spaces, including flooring, furniture, wall treatments, technology equipment and these standards are adopted across all sites for consistency.

OVERALL IMPRESSIONS

Comment on the **comprehensiveness**, **adequacy**, and **effectiveness** of the college's implementation of its quality assurance processes/ mechanisms/ activities, therefore the college's compliance to its quality assurance policies and its ability to meet the Standards and Requirements.

Durham College has adequate, comprehensive, mature and effective quality assurance policies, practices and processes in place.

The College has established many policies guiding academic program development and review, along with reporting and other communication mechanisms to ensure those involved have input and the necessary information to perform their duties. Annual and comprehensive program reviews are scheduled, conducted and monitored. Stakeholder



input is sought and incorporated into the processes. Program and course materials, changes, reports and supporting documentation are stored and communicated.

Durham College has a **comprehensive** inventory of QA processes, mechanisms and activities.

The College has demonstrated a focus on communicating its quality assurance commitments to its stakeholders and through a variety of mechanisms.

Durham College has established a QA Team that integrates representatives from several administrative and operational areas to work in a collaborative manner. This team manages the many processes around program review and renewal, policy changes, program changes, curriculum development and review, professional development activities and research.

Support areas of the College - Facilities and Ancillary Services, Communications and Marketing, Information Technology Services, Finance, Human Resources, Student Affairs, Enrolment Management, Academic Learning Services, Access and Support Services, Diversity, Inclusion and Transitions, Co-op and Career Development, Athletic Centre, Campus Safety, International Education and Library Services - all work together to build processes that are collaborative, focused on improvement and supportive of quality.

Durham College has **adequate** quality assurance measures in place yet it looks for continuous improvement.

The College has demonstrated to the Panel through the *Self-Study Report*, interactions with stakeholders during the Site Visit and detailed supporting evidence and examples that the quality assurance systems in place are **effective**.

STIPULATIONS

1. Commendations

Provide clear statements that articulate areas where the college has shown exemplary or leadership in the field of quality assurance and improvement. These are mechanisms that are especially good and may be worthy of emulation by other colleges in the system.

The Panel was able to identify three “themes” that stood out and exemplified the quality assurance practices of the College. While the information that led to the recognition of the three themes was quite extensive, the Panel felt that these three categories best summarized the quality initiatives that the College is pursuing. The three themes were:

- Consistency
- Professional Development
- Systems



Consistency:

The Panel heard comments and saw practices that spoke to consistency between the various stakeholders regarding the College's QA processes.

- There was common use of QA "language", approaches to quality and especially an overall understanding of quality, even among students.
- It appears that the faculty have a good awareness and understanding regarding the QA processes. The students showed an awareness of the services available to them and where to go for help, for example when seeking transfer credits. They told the Panel of the various ways available to them to provide input on program quality, such as feedback opportunities, how to access information through *My Campus*, and their knowledge of KPIs. The Panel heard how the faculty are accessible to students and responsive to their input, whether through student feedback surveys or direct one-on-one discussions about their course or program.
- PAC members were extremely pleased with the quality of graduates and their work readiness, with Durham graduates their employees of choice when recruiting.

Professional Development

The Panel felt that Durham College has some practices around professional development that warranted commendation.

- It is evident that the C.A.F.E. is a well-respected resource for professional development. The Panel heard how responsive the C.A.F.E. is to requests from faculty for support, often creating learning opportunities for them within a very short timeframe. The faculty view these opportunities as a commitment from the College to their development as a means of ensuring they are able to continue to deliver quality programs.
- The Panel heard that the faculty respect administration's responses to requests for discipline-specific professional development opportunities. To them, this also indicates a level of respect for their personal development and investment in them and their programs.
- The Panel also heard that that professional development is linked to the performance review and performance reviews are happening annually with follow up at 6 months, a practice that reinforces the focus on the quality, currency and performance of staff and is to be commended.

Systems



- The College shared demonstrations of *WebCOT™*, *Tableau™*, *MyCampus™* and *DC Connect™*. These are tools that enable a level of broad and consistent level of communication, both for staff and students, and allows for a uniform approach to capturing information about courses, learning outcomes and guidelines for delivery. *Tableau* provided insight into its effectiveness as a tool to facilitate program reviews and development. The College is to be commended for developing, supporting and communicating these mechanisms.
- The mechanisms for Annual Program Reviews, Comprehensive Program Reviews, feedback loops, input from stakeholders regarding program and course changes all seem to be evident, understood by those who are involved in these activities and accessible.
- The *Corporate Risk Register* is an example of Durham College ensuring there is a constant focus on quality and internal/external factors that might have an impact on continuous improvement and progress towards quality. This tool identifies issues and assigns a risk rating, action required and accountability for action.
- Human Resources maintains an Applicant tracking system to enable prompt responses to filling vacancies and as a means of building an inventory of skillsets to ensure programs can maintain a level of specialty expertise should the need arise. No doubt other colleges have similar approaches, but Durham College has adopted an approach that is proactive and intentional.

Apart from the three overarching themes of *Consistency*, *Professional Development* and *Systems*, the Panel also noted the College's approach to working together towards a common goal of quality. This "culture of collaboration" was very evident throughout the Audit, both through the documents and evidence provided in the *Self-Study Report* and the perceptions gained during the Site Visit. Time and time again the Audit Panel heard corroborating comments from various stakeholder groups, comments that indicated that all involved sought to ensure they were striving to work together towards a common goal: student success and the quality of that experience. This notion of working collaboratively was embedded in the language of the stakeholders and threads of this activity were woven throughout the conversations. Groups were very respectful of the work their colleagues are doing and focused on supporting each other in reaching their respective goals. The Panel heard about the collaborative approach to budgeting that focuses on priorities in support of programs, student experiences and effective learning environments.

The Audit Panel heard two very specific comments expressed by stakeholders during the various interviews and the College is to be commended on these sentiments. These are:

"We do quality, but we are always reaching for even better quality, and we approach it as if it is just out of reach, but we never stop reaching for it".

"The College has a great vibe and the people like working with each other".



2. Affirmations

Provide clear statements that articulate areas where the college itself has found a weakness, identified the weakness, and intends to correct it (a plan of action has already been articulated). In effect, this is affirming the college's judgment and findings of its own self-study.

As noted in the *Self-Study Report* and during the Site Visit Durham College was very forthcoming with issues they have identified as "Areas for Improvement". These twenty-two issues reflect the College's insight into their current quality assurance processes and ways to further improve services. These are:

- Proceed with introduction of APR process for programs offered through the School of Continuing Education (CE) in the 2017-2018 academic year. (Requirement 1.2)
- Update and implement changes to *Course Outline Policy and Procedure* as per the working group recommendations. (1.5)
- Develop and implement an online system to manage program lifecycle, program information data and all associated records to replace the current excel spreadsheet database and folder/files repository system for storing permanent records related to programs. (1.6)
- Implement the revised Curriculum Mapping Process to ensure that the VLOs are assessed throughout the program. (2.2)
- Update all course outlines to include program VLOs to indicate what VLOs are addressed in each course and at what level they are directly mapped to the CLOs. (2.3)
- Enhance learning plans to include a mapping areas to the CLOs for each week, linking the CLOs to teaching and learning, and thus ultimately to the CVLOs. (2.3)
- Update and maintain PLOs in PLOR database in anticipation of using the database to support the program life cycle data and records project mentioned in Standard 1. PLOs will be posted on Durham College's public website. (2.3)
- Include approved program APS title in the Program Guides (posted in *MyCampus™*), in all marketing and promotional materials prepared by the School. (3.1)
- Institute a formalized monitoring/tracking process that accounts for all steps and identify all stakeholders in the process of communicating and implementing new MAESD Program Standards. (3.5)



- Include an EL experience to all programs of study to ensure that all students have an EL experience. (4.4)
- Continue working with schools and faculty to include an experiential learning opportunity to all programs of study. (4.4)
- Review, update and implement the *Admissions Policy and Procedure* which are currently out of date. (5.2)
- Review, update and implement the *Academic Integrity Policy (ACAD-101) and Procedure (ACAD-101.1)* which are currently outstanding and under review by the stakeholder working group. (5.3)
- All post-secondary students who register for Durham College courses will be required to attest to having reviewed Durham College policies and procedures. This additional step in the registration process is under development for implementation in spring 2018. (5.6)
- Increase collaboration between ORSIE and C.A.F.E. to strengthen the connection between research done through both departments, and enhance opportunities to share the results of their Scholarship of Teaching and Learning (SoTL) researchers with other faculty. (6.1)
- Create a new full-time faculty probationary checklist for the School Deans. The checklist would identify the C.A.F.E. specific requirements attached to a full-time faculty probationary status, providing the School Deans with an overall sense of where a particular faculty is in relation to C.A.F.E. supported training. (6.1)
- Development and implement a tracking sheet for all employee professional development such as training, workshops, conferences, scholarly practice. Tracking form table/chart be created and maintained centrally by department/school. (6.1)
- Update the *Student At-Academic Risk Policy and Procedure* to provide more details regarding who is responsible for outreach and encouraging students to seek academic support. (6.4)
- Explore inclusion of administrative processes for recruiting, verifying credentials, and hiring contract faculty into the *New Academic Employees – Academic and Professional Credentials Requirements Policy (EMPL-316) and Procedure (EMPL-316.1)*. (6.5)
- Review, update and implement the *Space Policy and Procedure*. (6.6)
- Continue the work started by the Classroom Standards group to inform new and renewed teaching and learning spaces to meet twenty-first century standards. (6.6)



- Include additional data in the current room inventory spreadsheet such as including an AV tab of this list. (6.6)

The Audit Panel recognizes that the College has acknowledged and highlighted how it can continue to build on its current quality initiatives. The Panel applauds and encourages the College to continue to seek ways to maintain its attention to continuous improvement.

3. Recommendations

Provide clear statements that articulate areas as needing improvement.

Recommendations may also be made in relation to areas of concern identified by the college in its self-study, and for which no plan of action has been articulated by the college.

Requirement 2.3

Course Learning Outcomes to Program Vocational Learning Outcomes Mapping

The Panel noted that the Course Learning Outcomes-to-Program Vocational Learning Outcomes mapping is still to be completed, and this is validated by the College's own comments in the Areas for Improvement outlined in the *Self-Study Report*. This updating of course outlines and the associated learning plans will be a significant improvement in communicating expectations to students and the Panel feels this work should be given priority.

Recommendation 1.0

Proceed with the CLO-to-PVLO mapping projects identified as an area requiring improvement.

Requirement 3.3

Program Advisory Committee Orientation

The Audit Panel raises a minor issue, but one the Panel felt warranted a recommendation. While the Program Advisory Committees are engaged and certainly focused on providing industry input to the content and quality of Durham's programs, the Panel heard that the onboarding and orientation process for new PAC members was less formalized and inconsistent than expected. New PAC members have resources such as the *PAC External Members' Handbook* and *PAC Resource Manual*. However, the process for new members also appeared to be more of an informal "mentoring" process with knowledge and expectations learned over time and through the experience of meetings. Although this approach appears to achieve the desired result for program quality, the Panel feels a more deliberate and formal orientation/onboarding process might help new PAC members in the early stages of their tenure and introduce a level of consistency for members.

Recommendation 2.0



Introduce a formal orientation process for new Program Advisory Committee members to supplement the existing resources provided by the College.

Requirement 6.4

Consolidation of Surveys / Development of a review tool

The Audit Panel noted that every service area conducts a different process to soliciting feedback on their individual departments and service areas. It is possible that multiple surveys may be duplicating information and continued surveying, especially on an annual basis, may lead to survey fatigue. The College has good practices in place to ensure service and may want to consider combining some surveys to develop an overall service review tool that encompasses a broad group of service areas.

Recommendation 3.0

Review the processes used by the different service areas to find a common review process/tool.