

**QUALITY ASSURANCE PROCESS AUDIT
ASSESSORS' REPORT WORKBOOK**

Okanagan College

DATE OF SITE VISIT: October 25, and 26, 2017

PREPARATION DATE: 2017/10/26

SUBMISSION DATE: January 31, 2018

PREPARED BY: Panel of Assessors

Overall Assessment

Summary:

Okanagan College has policies, procedures and a good track record of program reviews and continuous improvements of programs. The Panel's site visit indicated there is buy-in and commitment to the process from program chairs, deans/directors, associate deans and the VP, Education. OC has provided evidence of a culture of continuous improvement of education throughout the institution.

The Panel agrees with the self-study. There are significant areas of institutional strengths. OC's reflective practice has also outlined many areas for improvement. The Panel applauds OC's intent not only to address continuous improvement of its programs but also the process itself. In addition to the areas of strengths and the areas for improvement identified in the self-study, the panel has identified what it perceives as strengths and has provided recommendations related to additional areas for improvement.

The Panel offers these recommendations not as a sign of weaknesses but rather as constructive comments intended to assist OC in its ongoing journey towards Excellence in Quality Assurance.

Commendations

Provide clear statements that articulate areas where the institution has shown exemplary practice in the field of program quality assurance and improvement. These are mechanisms that are especially noteworthy and may be worthy of emulation by other institutions in the system.

1. **Three-Tiered Program Review policy/Process**
The Program Review Policy calls for all programs to be reviewed using the most recent data at the Tier 1 process, which identifies areas of concerns, and areas of exemplary practice; concerns can be addressed at the Tier 2 level. Best practices can be identified, celebrated and shared with the college community. The review process uses resources effectively for continuous improvement of programs.
2. **Commitment to Continuous Improvement and Quality Assurance**
Within the strategic plan documents and throughout the site visit it was evident that the commitment to continuous improvement and quality assurance is a shared value. From the executive level presentation in the first session, to the dialogue with faculty and other members of the Okanagan team, the passion for making sure that programs are meeting student and industry needs shone through.
3. **Program Advisory Committees**
OC has 28 active Program Advisory Committees (PAC) that individually support one or more programs. In addition to supporting students and their success, the PACs are a means of accountability for OC for relevance, currency and quality of programs.

Affirmations

Provide clear statements that articulate areas where the institution itself has found a weakness, identified the weakness, or intends to correct it (a plan of action has already been developed). In effect, this is affirming the institution's judgment and findings in its Institution Report.

1. Deans Accountability & Intranet Posting
Deans are accountable for reporting on progress of Tier 3 reviews via the Director of Learning & Applied Research at Deans Forum. Reports of the Tier 3 reviews are posted on the OC intranet with access to all employees. The posted programs should be extended to include programs, which have gone through external program accreditation. Finally, OC should consider posting all Tier 1 and 2 reports to the website.
2. Consistency in Program Reviews & Greater Buy-In. OC outlines areas for improvements by:
 - Providing onboarding for all from faculty to deans to gain a better understanding of the review processes and consistency in the depth of analysis.
 - Defining more consistent timelines for the self-study and dean's reporting and accountability (templates & timelines) at Deans Forum.
 - Supporting faculty to become more proficient in writing course and program level learning outcomes.

The Panel supports OC initiatives in these regards.

Recommendations

Provide clear statements that articulate areas needing improvement. Recommendations may also be made in relation to areas of concern identified by the institution in its Institution Report, and for which no plan of action has been articulated by the institution.

1. Inconsistencies in Program Review policy and Procedure
The panel noted a few inconsistencies between the policy and demonstrated practice, which requires a review and rectification. Examples are noted in this report. The policy and procedure are currently included in the one document "Program Review & Renewal Framework". The Panel agrees with OC to separate the two documents. This enables fine-tuning of the procedure without having to go through a policy approval.
2. Seven-Year Tier 3 Review Cycle
The Panel interprets that the Policy indicates that all programs are to be reviewed using the Tier 3 process on a seven-year cycle (see flowchart Appendix J), except programs which undergo an external accreditation review. OC will ensure that all programs undergo a Tier 3 review on a cyclical review schedule. A draft plan for cyclical review of all programs should be created.
3. Consistency of Tier 3 Reviews
It was noted in the self-study that not all programs reach out to Learning and Applied Research for support during the program review process. There is also a comment in

the self-study that indicates that reviewers "...are not required to use a specific format..." (Self-Study, Part 1, p. 22). In addition, the panel observed that the report structure for the Tier III reviews provided as examples in the self-study were not all presented in a consistent format. The panel recommends that OC consider implementing additional standardized tools and processes to support better consistency. Given reviews occur so infrequently and the teams lack experience, the panel also recommends that OC consider making mandatory the requirement to engage Learning and Applied Research support for the Tier 3 process. The goal here would be to leverage capacity and ensure a more streamlined and standardized review and reporting process. This would require OC to ensure appropriate capacity in Learning and Applied Research.

4. Closing the loop on the Tier 3 Review cycle

As it is currently outlined in the policy and procedure document, and as it has been implemented in practice based on the examples provided in the self-study, the Tier 3 Review process appears to end with the submission of the external review teams' report. While follow-up on recommendations made appears to be ensured through operational processes such as annual unit planning and Deans Council planning, there is no evidence of a formal follow-up component with identified compliance monitoring processes. The panel suggests that OC articulate the review process as an ongoing cycle, rather than a process with a beginning and an end. We also recommend the addition of a formal requirement to respond to the external review teams' report. This should include the creation of a standardized report and action plan template (with clear objectives, expected costs, accountability for completion, and timelines) that links the Self-Study Report and External Review Report. The action plan document with accompanying progress reports should be included as part of the supporting/background documentation for subsequent program review processes.

5. Standardized program mapping


Based on the panel's review of the OC self-study report, programs generally have learning outcomes, but it appears that program-level goals do not exist in all cases. The panel highly recommends that OC implement a standardized program mapping process and template, demonstrating the link between program outcomes/goals to course learning outcomes. The panel further recommends that OC ensure that program mapping is in place prior to commencing any Tier 3 review process.

6. New Program Development Policy

As part of the self-study, OC provided a copy of a draft new program development policy. In the self-study, there is an indication that "No decision has been made to determine if the draft policy will be presented for further discussion" (Self-study Part 1, p. 38). Given the QAPA requirement that "The institution can demonstrate that it has a policy and process for new program approval..." (Assessor Workbook, section 1 (ii)), the panel would like to stress the importance of proceeding with the formal adoption of such a program development policy. An appropriately structured new program development policy and procedure will create an open, transparent and consistent process for use by all faculty and education administration to launch new programs. Completion and approval of the policy is strongly encouraged.

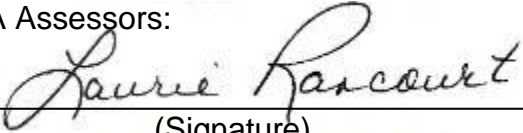
Signed:

Chair of the QAPA Team:

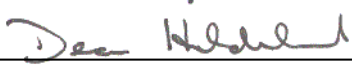


(Signature) _____ Jan 31, 2018 _____
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1. Overall Process

<i>Does the process reflect the institution's mandate, mission, and values?</i>	
CRITERIA:	COMMENTS / RECOMMENDATIONS:
<p>The institution should be able to demonstrate that it has an established institutional and program review planning cycle and process to assess the effectiveness of its educational programs and services, their responsiveness to student, labour market, and social needs.</p>	<ul style="list-style-type: none"> OC has developed an appropriate model for a three-tiered review process. Tiers 1 and 2 involve a data analysis for all programs, annually. Programs requiring an in-depth review undergo the Tier 3 process. The 2 degrees offered by OC go through the Tier 3 review on a 5-year cycle, per DQAB requirements. The Vice-President, Education has responsibility for quality assurance. Coordination for the review process resides with the Director of Learning & Applied Research (Director LAR). The Tier 3 program review follows a two-stage process conducted by two teams; the Internal and the External Review Team. The review teams document their recommendations for continuous improvement of the program.
<p>The process should contribute to the continuous improvement of the institution.</p>	<ul style="list-style-type: none"> The Panel reviewed three Tier 3 reviews. The reviews presented a good investigation and analysis with input from a number of stakeholders. It was noted that for the three reviews provided in the self-study, other than a blank template in the appendix, there was no specific evidence of the response to the Tier 3 recommendations or of the action plans that were developed and implemented where appropriate. During the site visit, additional anecdotal and document evidence was provided to demonstrate that follow-up occurs as part of the colleges operating and planning procedures (i.e. Unit Planning Process and

	<p>Dean’s Council activity). However, as indicated in recommendation #4 above, the panel feels that the follow-up process should be formalized as an integral part of the program review process and ongoing multi-year cycle.</p> <ul style="list-style-type: none"> • Continuous improvement of the institution requires all programs are reviewed. The Director LAR as a part of her workload and an assistant are responsible for program reviews, which allows for two Tier 3 reviews, annually (Appendix K2). The Quality Assurance Audit Report (Page 5) indicates OC has 126 programs. The panel would suggest that in order to remain compliant with their program review policy and procedure (which currently foresees a seven-year cycle for Tier 3 reviews) OC, needs to either modify or clarify its policy to indicate that the required Tier 3 review cycle is not 7 years, or to ensure that it has the resources to conduct more reviews annually. The panel notes that maintaining a 7 year Tier 3 review cycle for all programs is the recommended option and the one that most effectively aligns with current best practice.
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<i>Is the scope of the process appropriate?</i>	
CRITERIA:	COMMENTS / RECOMMENDATIONS:
<p>(i) There should be evidence of a formal, institutionally approved policy and procedure for the periodic review of programs against published standards that includes the following characteristics:</p> <p style="padding-left: 40px;">A self-study undertaken by faculty members and administrators of the program based on evidence relating to program performance, including</p>	<ul style="list-style-type: none"> • OC has an established Program Review & Renewal Framework (Program Review Policy), which was approved by Education Council in 2007. • The three sample programs were reviewed by OC in 2012, 2013 and 2015. The quality of the reviews has improved over time and with each

strengths and weaknesses, desired improvements, and future directions. A self-study takes into account:

- the continuing appropriateness of the program's structure, admissions requirements, method of delivery and curriculum for the program's educational goals and standards;
- the adequacy and effective use of resources (physical, technological, financial and human);
- faculty performance including the quality of teaching and supervision and demonstrable currency in the field of specialization;
- that the learning outcomes achieved by students/graduates meet the program's stated goals, the credential level standard, and where appropriate, the standards of any related regulatory, accrediting or professional association;
- the continuing adequacy of the methods used for evaluating student progress and achievement to ensure that the program's stated goals have been achieved;
- the graduate satisfaction level, student satisfaction level, and graduation rate; and
- where appropriate, the graduate employment rates, employer satisfaction level, and advisory board satisfaction level.

➤ *An assessment conducted by a panel that includes independent experts external to the institution. The assessment should normally include a site visit, a written report that assesses program quality and may recommend quality*

review. Program faculty spoke positively about the value and intent of the reviews.

- An independent external team of reviewers was selected for each of the three sample reviews. The External Review Team reviewed various documents, including student and graduate data and the report generated by the Internal Review Team. Interviews with key college personnel took place during the site visit. The External Review Team submitted a written report to the VP, Education. The report included recommendations for improvements to the program. The panel did note that OC has an established guideline to assist the External Review Team but felt that the procedure could be improved by adding more detailed instructions on the scope, process, validation of findings, report content, etc.
- The QAPA panel also found some inconsistencies between the review policy and practice. For example, the Program Review Policy references an Internal Review Panel (page 6) to consist of at least seven members. The three sample programs show only two or three members. OC needs to ensure the intended breadth and diversity is included. In addition, page 17 of the review policy indicates that the review should result in "5-10 specific recommendations ordered by priority" and a "local operational/action plan to respond to recommendations made by the review teams". The panel noted inconsistencies in the number of recommendations and that formal action plans were not evident (see

<p><i>improvements; and an institution response to the report;</i></p> <ul style="list-style-type: none"> • <i>A summary of the conclusions of the evaluation that is made appropriately available.</i> 	<p>recommendation #4 above).</p>
<p>(ii) The institution can demonstrate that it has a policy and process for new program approval that includes peer / external review by appropriate experts.</p>	<ul style="list-style-type: none"> • As part of the self-study, OC provided a copy of a draft new program development policy (Appendix M). In the self-study, there is an indication that “No decision has been made to determine if the draft policy will be presented for further discussion” (Self- study Part 1, p. 38). The policy is an excellent step towards quality assurance of new programs but needs to be completed and approved at the earliest opportunity. The panel also notes that the draft policy and procedure would potentially benefit from a more formal needs assessment that could include supporting evidence from industry, potential students, etc.

<p><i>Are the guidelines differentiated and adaptable to respond to the needs and contexts of different units, e.g. faculties or departments or credential level?</i></p>	
<p>CRITERIA:</p>	<p>COMMENTS / RECOMMENDATIONS:</p>
<p>(i) Are the guidelines adaptable to the range of programs and offerings within the institution?</p>	<ul style="list-style-type: none"> • The Panel reviewed three Tier 3 programs reviews from a cross-section of program areas. The documented review guidelines applied very well to all programs. • Tier 1 and 2 dashboards work well for career-focused programs. The panel agrees with OC that other data elements focused on student transfer and completion rates need to be developed for associate degrees and other transfer programs.
<p>(ii) Do the guidelines provide measurable, consistent means and direction to</p>	<ul style="list-style-type: none"> • Generally, the guidelines meet the requirements for a diversified program

<p>undertake diversified program review?</p>	<p>review. However, as noted in recommendation #3 above, the panel feels that the procedure could be improved by providing additional standardized tools and supports to ensure better consistency at the Tier 3 review level. These could include further details around required data and supporting evidence to be included in all Tier 3 review (i.e., surveys and focus groups).</p>
<p>(iii) Are the guidelines consistent with institutional Mandate, mission, vision and associated strategic goals?</p>	<ul style="list-style-type: none"> • OC has ensured the guidelines are consistent with the Mandate, mission, vision and values.

<p><i>Does the process promote quality improvement?</i></p>	
<p>CRITERIA:</p>	<p>COMMENTS / RECOMMENDATIONS:</p>
<p>(i) The institution should be able to demonstrate that it has appropriate accountability mechanisms functioning for vocational, professional and academic programs.</p>	<ul style="list-style-type: none"> • Based on three program reviews selected from the full spectrum of programs and the site visit interviews, OC has an appropriate accountability mechanism for the range of programs offered at OC as articulated in the Program Review and Renewal policy and procedure. • The panel did note that although the policy and procedure have been approved by Education Council, at the time of the review and site visit, the policy was not posted on the website for OC stakeholders to view. This should be addressed. • In addition, the lack of Dean’s Forum reporting of a program accrediting review is an apparent gap (as noted by OC on p. 28 of the self-study) that should be addressed for full transparency and accountability.
<p>(ii) The institution should be able to demonstrate how faculty scholarship and professional development inform teaching and continue to be a foundation for</p>	<ul style="list-style-type: none"> • OC has a good professional development program for full-time and sessional faculty. The Learning and Applied Research Unit offers an orientation

<p>ensuring that programming is up to date.</p>	<p>program to support new faculty to acquire skills in teaching and learning. Faculty can also participate in the Instructor Certification Program. OC invests over \$1M in faculty PD, annually and twelve course releases for scholarly activity. All continuing faculty members complete an annual Faculty Development Activity Report. The report is the faculty member's accountability for the resources used and the benefit to the individual and the program.</p>
<p>(iii) The institution should be able to demonstrate how learning outcomes are being achieved and how student progress is assessed and measured.</p>	<ul style="list-style-type: none"> • The Learning and Applied Research Unit supports faculty in developing relevant program and course learning outcomes. Students are assessed for their learning through quizzes, examinations, demonstration labs and other assessment tools. Students are graded on their learning to OC's standards. Students who are successful in completing the current courses are able to progress to the next level and eventually through to graduation. • As noted previously in this report, the Panel noted the Tier 3 reviews did not include program and course mapping which indicates how the program level goals are supported by course level outcomes. The panel recommends the mapping process is included in the review process.

Quality assessment issues raised by the institution in its self-study that the institution would like the assessors to address.

CRITERIA:	COMMENTS / RECOMMENDATIONS:
<p>(1) Given that Associate of Arts and Associate of Science programs are focused on providing students with foundational credentials that generally lead to the graduates transferring to other programs or</p>	<ul style="list-style-type: none"> • The Panel agrees that the career-focused data elements are not useful for associate degrees and transfer programs. Data elements focused on transfer rates, continuation in PSE

<p>post-secondary institutions, we would appreciate the Assessors sharing their perspective on the types of quality assurance processes that they used or observed for these types of programs.</p> <p>(ii) Okanagan College is considering applying for exempt status and as such, we would appreciate any comments from the Assessors in terms of our readiness in relation to the Quality Audit.</p>	<p>education, and subsequent success rates in more focused PSE education are more relevant in these programs. Camosun College has used a different dashboard for analysis on transfer verses career-focused programs.</p> <ul style="list-style-type: none"> The Panel members do not feel that they have the appropriate knowledge or experience to advise OC on their readiness in relation to exempt status. <p>That being stated, the panel members do expect that among other possible requirements, OC would be required to have a formal policy and procedure in place for New Program Development, which is currently lacking.</p>
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2. Review findings

<i>Were the responses to the sample program review findings adequate?</i>	
CRITERIA:	COMMENTS / RECOMMENDATIONS:
<p>The institution has a follow up process for internal program reviews and acts in accordance with it.</p>	<ul style="list-style-type: none"> The Dean in consultation with the Program Chair has the responsibility for which recommendations will be pursued. The Dean shares information on the progress of implementation with peers at the Deans Forum. The VP, Education summarizes the information for sharing with the Board of Governors. Tier 3 review reports are shared with college community via the OC intranet. Continuous improvement requires as broad engagement and buy-in of faculty as possible. OC should consider sharing Tier 1 and 2 information widely in the college. When questioned by the Panel, many faculty were not aware of the Tier 1 and 2 reports. The decision to share with department faculty is at the discretion of the Dean, Associate Dean and the

	<p>Program Chair. Some teams share the information while others do not.</p> <ul style="list-style-type: none"> As noted in recommendation #4 and elsewhere in this report, the Tier 3 review of the three sample programs did not document an official action plan. This is a critical document outlining priority recommendations and the accountability for continuous improvement. Given that all programs can benefit from continuous improvement, the Tier 1 and 2 processes should also document a mini action plan. The subsequent review should consider progress from the previous year to develop the next action plan.
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<i>Does the process inform future decision making?</i>	
CRITERIA:	COMMENTS / RECOMMENDATIONS:
<p>The program review ensures that the program remains consistent with the institution’s current mission, goals and long-range plan.</p>	<ul style="list-style-type: none"> The Tier 3 review ensures the program remains consistent with the mission and long-term planning. However, with such a small fraction of programs undergoing this process and some never at all, it is difficult to conclude that all programs can remain consistent with current mission, goals and long-range plan. This can be addressed by creating and ensuring the effective implementation of a comprehensive 7- year review planning cycle (see Recommendation #2).

<i>Are the review findings appropriately disseminated?</i>	
CRITERIA:	COMMENTS:
<p>The institution has a well-defined system to disseminate the review findings to the appropriate entities.</p>	<ul style="list-style-type: none"> OC has a good system for disseminating review findings to the employee groups through the intranet. This is for Tier 3 reviews only. The results of the Tier 1 and 2 reviews are

	<p>shared between the Program Chair level, Dean and the VP, Education. The results should be shared with all department faculty and staff consistently across the college. By understanding the strengths and weaknesses of all programs by all stakeholders, there will be peer learning and continuous improvement across the college.</p>
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