

Quality Assurance Audit Pilot Project Task Force: Final Report

December 2013

The Audit Pilot Project is a joint venture, supported by the Comprehensive Academic and Research Institutions (CARIs) in Alberta, the Campus Alberta Quality Council (CAQC), also referred to as Council) and the Enterprise and Advanced Education (EAE) Ministry.

Preamble

From the period of September 2008 to September 2010, a series of meetings were held with the CAQC Chair, Alberta University Association (AUA/CARI) Provosts, Advanced Education and Technology (Enterprise and Advanced Education) representatives and other CAQC and institutional representatives. The initial years were crucial in developing trust among the stakeholders as they dealt with several fundamental issues including an audit that focused on process and not program/unit content and the establishment of the CAQC. This led to the development of a *process* document that was signed off by the four Provosts, CAQC's Chair and a Ministry representative in December of 2010 detailing a two-year pilot project to audit the internal quality assurance processes at the CARIs. Beginning with implementation letters in February 2011, four separate audits at the University of Alberta (U of A), the University of Lethbridge (U of L), the University of Calgary (U of C), and Athabasca University (AU) were completed. This document completes the Pilot Project and concludes with recommendations for future audits. It will be submitted to the CARIs, CAQC and the EAE Ministry.

Mandate

The Quality Assurance Audit Pilot Project was created to explore whether a mutually agreed-upon audit process would assist CAQC in exercising its legislated monitoring role vis-à-vis degree programs at CARI institutions in a way that fully respects the existence of internal quality assurance policies and practices within autonomous institutions. The five purposes of the Audit Pilot Task Force were as follows:

- *to ensure criteria and processes are in place at each institution for the rigorous examination of programs and to provide external assurance that those criteria and processes are being rigorously applied;*
- *to explore ways of creating streamlined processes enabling CAQC to inform its monitoring role with procedures that respect the internal processes used in each of the institutions;*

- *to ensure that an audit process will, to the extent possible, avoid unnecessary duplication of effort and will be cost-effective for both institutions and CAQC;*
- *to inform the design of a made-in-Alberta auditing system that avails itself of leading practices found in quality assurance audit systems in other jurisdictions in Canada and in the world;*
- *to identify leading practices within institutions' cyclical review practices that will be shared with each other and with other institutions from other sectors in the Alberta system.*

Principles

A series of high-level principles were identified to help guide the evaluation of the Quality Assurance Audit Pilot Project and assist in the preparation of the recommendations (see Appendix A).

Membership

The Task Force consists of a representative of each of the four CARI institutions and of several members of the CAQC. The members included:

- Dru Marshall (University of Alberta); subsequently replaced by Colleen Skidmore
- Margaret Haughey (Athabasca University); subsequently replaced by Alex Kondra
- Sandy Murphree (University of Calgary); replaced by Benedikt Hallgrimsson for one year
- Robert Boudreau (University of Lethbridge)
- Ronald Bond (CAQC); subsequently replaced by Olive Yonge
- Greg Moran (CAQC); subsequently replaced by Paul Gooch
- Art Quinney (CAQC)
- Marilyn Patton (CAQC Secretariat): administrative support

Throughout the Pilot Project the CAQC Chair (Ron Bond initially, then Olive Yonge) served as the Task Force chair.

Meetings

Since its inception, the Task Force convened seven times with a mixture of face-to-face and teleconference meetings.

Background Work Prior to Audit Team Reviews

a) Glossing the Process Document:

Much of the early effort of the Task Force involved attempts to interpret and amplify, for operational purposes, the *Process* document that the four Provosts, the Chair of CAQC and a government official had signed off in order to launch the project. As a result of its attention to operational procedures, the Task Force produced “notes of changes” to the original *Process* document. Use of these supplementary notes allowed the Task Force to proceed steadily with its work without having to seek approval from all signatories for successive iterations of the *Process* document, which established the directions to be followed but is sometimes silent on operational niceties. The notes of changes accompany the *Process* document and are included in the version of the master document that was shared with audit teams. The “notes of changes” address topics such as the composition and selection of audit teams and the submission of documentation by institutions whose cyclical review processes are to be appraised by an external audit team (see Appendix B).

b) Prospective Audit Team Members:

The Task Force compiled a “living list” of potential audit team members comprised of senior Canadian academic administrators and following criteria set out in the *Process* document. The list was periodically refreshed. From this list, the university to undergo an audit identified its preferred candidates, who were ratified by the Task Force as a whole before being contacted by the Chair of the Task Force about serving on an audit team. The process worked well, in the opinion of the Task Force, all of the audit teams formed were conscientious, rigorous and fully engaged in their assignment.

The Task Force decided that for each audit it would be beneficial if one of its members from a university not undergoing the current audit shadowed the team as a silent observer to see first-hand and in detail the unfolding of the process and to answer questions from audit team members about the process. Our practice was to assign this role to the Task Force member whose internal institutional review processes were the subject of the next audit in the series of four.

c) Framework for Audit Teams:

This document (see Appendix B) was drawn up by a sub-group of the Task Force and endorsed in October, 2011 by the complete Task Force as an instrument to be used by all Audit Teams. The *Framework* appears to have been effective in guiding Audit Teams’ efforts and in shaping their reports.

d) Tasks and Timelines:

To assist management of the project, Marilyn Patton developed and kept an up-to-date “tasks and timelines” document that enabled the Task Force to track its work and ensure sufficient lead time and sequencing were provided for the various tasks that needed to be done and outcomes realized in overseeing the entire project.

e) Mid-Review Evaluation:

After the first two CARI institutions had been reviewed by their respective Audit Teams, the Audit Task Force considered whether any changes to the process were necessary. It was found that incremental interpretations of and adjustments to the *Process* document were unnecessary and inadvisable any significant “mid-course” corrections (see *Process* document, 5.0).

Audit Team Site Visits

Each of the CARI institutions provided suggestions to the Audit Pilot Task Force as to programs/units that had gone through their own quality assurance process for consideration by an Audit Team Site Visit. The Task Force subsequently selected the programs/units reviews (three exemplars for each institution) to be evaluated by an Audit Team. The programs/units included:

- Augustana Faculty (U of A)
- Faculty of Engineering (U of A)
- Faculty of Nursing (U of A)
- Department of Art (U of L)
- MEd program (U of L)
- Combined BSc (Agricultural Biotechnology), BA/BSc (Agricultural Studies), BSc (Environmental Science) (U of L)
- Faculty of Education (U of C)
- Department of Anthropology (U of C)
- Department of Biological Sciences (U of C)
- Bachelor of Commerce (AU)
- Bachelor of Science in Computing and Information Studies (AU)
- Master of Nursing/Master of Health Science (AU)

The Task Force also selected the Audit Team members and established, through consultation with each CARI institution, the dates of the site visits:

University of Alberta:

Site Visit: December 4-6, 2011

Audit Team Members:

- Jamie Cassels, former Provost of the University of Victoria (selected by the team as its chair);
- Karen Chad, Vice President Research at the University of Saskatchewan;
- Mo Watanabe, former Dean of Medicine, University of Calgary, and former member of CAQC;
- Bob Boudreau was the Task Force member who shadowed this Audit Team.

University of Lethbridge:

Site Visit: April 3-5, 2012

Audit Team Members:

- John Stubbs, Emeritus Professor of History and former President, Simon Fraser University (selected by the team as its chair);
- Donna Romyn, Associate Vice President Research at Athabasca University and former Dean of Health Disciplines there;
- Esther Enns, Dean of Arts and Interim Dean of Education at St. Mary's University, Halifax;
- Sandy Murphree was the Task Force member who shadowed this Audit Team.

University of Calgary:

Site Visit: September 30-October 2, 2012

Audit Team Members:

- Rene Barendregt, Associate Dean of the Faculty of Arts and Science, University of Lethbridge (selected by the team as its chair);
- Noreen Golfman, Dean of Graduate Studies, Memorial University;
- Myer Horowitz, Adjunct Professor, University of Victoria and President Emeritus, University of Alberta;
- Margaret Haughey was the Task Force member who shadowed this Audit Team.

Athabasca University:

Site Visit: April 8-10, 2013

Audit Team Members:

- Jim Frideres, Professor Emeritus and former Associate Vice-President (Academic), University of Calgary (selected by the team as its chair);
- Jonathan Driver, Vice-President Academic, Simon Fraser University;
- John Shephard, Vice-Provost and Associate Vice-President (Academic), Carleton University;
- Colleen Skidmore was the Task Force member who shadowed this Audit Team.

Each site visit began with an orientation given by the Task Force Chair and Director of the CAQC Secretariat to reaffirm the purposes of the audit. The Audit Team then met with various members of the CARI institution (including where possible individuals involved with the programs/units' quality assurance exemplars).

Each Audit Team submitted a report of the kind outlined in the *Framework* document, and the CARI institution prepared a written response to it, as per the *Process* document. The Task Force, through its Chair, conveyed concise high-level summary comments on the findings and conclusions it had reached when considering the report and the response to it.

General Observations from the Four Audits

1. It was clear from each of the audit reports that the four CARI institutions demonstrated a strong commitment to quality assurance.
2. The Quality Assurance Audit Pilot Project was very well served by four highly competent and committed audit teams. The process of selecting the audit teams worked extremely well.
3. The *Process* document as amended was crucial to the success of the Pilot Project. Initial feedback from the first audit was also critical to the success of the audits to follow.
4. The orientation sessions were valuable to the process in emphasizing and delimiting the mandate and scope for each of the four audit teams.
5. The joint-venture approach to the Pilot Project provided valuable expertise and sound oversight to and for the entire project.
6. The inclusion of a CARI institutional representative as a nonparticipant observer (shadow) on the audit team was viewed as helpful by the audit team and a useful experience by the four institutional representatives.
7. The support provided by the CAQC Secretariat was invaluable to the overall success of the Quality Assurance Audit Pilot Project.
8. The choice of program/unit reviews to ensure diversity worked reasonably well. In one instance, however, the audit team suggested that the chosen program did not reflect the enrolment of the majority of students at the institution.
9. In some cases the program/unit reviews chosen for the audit had been internally reviewed several years earlier; current administrators had not been involved in those reviews and thus were limited in their ability to provide feedback to the audit process.
10. Differences between institutions with regard to program reviews versus unit reviews did not compromise the overall audit process.
11. The audit process provided an opportunity to identify and share program/unit review effective practices that can be shared with other CARI institutions or more broadly.

Fulfillment of the Five Purposes

1. *“to ensure that criteria and processes are in place at each institution for the rigorous examination of programs and to provide external assurance that those criteria and processes were being vigorously applied”*

Each of the four audit team’s reports concluded criteria and processes were in place for the rigorous examination of programs and provided assurance that criteria were being rigorously applied. In two instances, the audit teams reviewed proposed enhancements to the current program/unit review processes and were quite complimentary in their appraisal of the changes.

2. *“to explore ways of creating streamlined processes enabling the CAQC to inform its monitoring role with procedures that respect the internal processes used in each of the institutions”*

The Quality Assurance Audit Pilot Project was very effective in enabling CAQC to fulfill its monitoring role with regard to the CARI institutions. The joint-venture approach respected the autonomy of the CARI institutions while providing a transparent process to produce valuable outcomes.

3. *“to ensure that an audit process will, to the extent possible, avoid unnecessary duplication of effort and will be cost-effective for both the institutions and CAQC”*

The success of the Pilot Project was viewed differently by some of the CARI institutions with respect to the cost/benefits required to carry out the audit. CAQC viewed the Pilot Project as being very effective in meeting the monitoring requirement of its mandate. If an audit process were to be implemented as an ongoing procedure, there are a number of potential cost reduction strategies that could be considered.

4. *“to inform the design of a made-in-Alberta auditing system that avails itself of leading practices found in quality assurance audit systems in other jurisdictions in Canada and the world”*

The *Process* document for the Pilot Project was developed by the Task Force and approved by the CARI institutions and CAQC to guide the audits. Feedback from the audit teams was quite positive with respect to the audit process and no significant changes were recommended. The procedures outlined in the *Process* document are similar to those used in other provinces.

5. *“To identify leading practices within institutions’ cyclical review practices that will be shared with each other and with other institutions from sectors in the Alberta system”*

The four audits revealed that each of the CARI institutions developed and implemented sound quality assurance policies and procedures. In each case, the audit team also made recommendations they believed would enhance the institutional processes in place. It was clear that each of the CARI institutions has essential differences that must be taken into account in their quality assurance policy and procedures. The principles that guide quality assurance in each of the institutions are similar but the policies and procedures reflect the diversity of the institutions. CAQC would be a logical repository for current quality assurance policies and procedures of

all the degree granting institutions in Alberta and by making this information easily accessible would support the sharing of cyclical review practices with all Alberta Post-secondary Educational (PSE) institutions and beyond.

Recommendations

- An audit process be established through which each CARI institution's quality assurance processes would be reviewed every 5-7 years. It has become critical to PSE institutions operating in an open international market that they provide timely and objective evidence of the quality of their academic programs. In many countries, that evidence is provided through national quality assurance processes that meet international standards of quality excellence. Canada does not have such a system in place but relies on provincial processes to provide this evidence.
- The audit process must be done as a partnership between the CARI institutions and CAQC with an oversight group like the Audit Pilot Project Task Force and should be guided by words such as: negotiation/collaboration/partnership. The primary responsibility and accountability for quality assurance must rest with the institution, but there is a value to having external validation of internal processes. External audit processes are enhanced through the use of peer review that meets the need for external evidence.
- The *Process* document was invaluable and is central to the process and should be maintained. Clear guidelines facilitated the success of the audit pilot project and while minor changes might be considered, operationally it is most important to ensure that everyone understands the purposes of the audit, including the reviewers. However, a one-size-fits-all approach should be avoided although the audit itself shouldn't be different for different institutions.
- The choice of completed program/unit reviews to audit is important and should be selected based on a discussion between the CARI institutions and the oversight group. In practice the Task Force found that three exemplars was an appropriate number, but more important was the timeliness of the completed reviews. If reviews by an institution were done too far in the past, there may be little institutional memory left to inform what has or has not happened.
- CAQC and the EAE Ministry consider disseminating this proposed ongoing audit process across the Alberta PSE sectors. Task Force members found the information provided through the audit process from other institutions was helpful in shaping their quality assurance knowledge and believed it should be shared across the Campus Alberta PSE sectors. The possibility of a workshop on "leading practices" sponsored by CARI and CAQC should be considered.

Conclusion

A CAQC/CARI institution joint audit is a viable process as evidenced by the outcome of the Quality Assurance Audit Pilot Project. Special mention of the importance of the willingness of the four CARI institutions, CAQC and the EAE Ministry to work together should be made. The success of this Quality Assurance Audit Pilot Project is due in no small part to that collaborative partnership. Further, the funding provided by the EAE Ministry was crucial to achieving the full benefits of the Project.

Appendix A

Principles for Audit Pilot Project Final Report and Recommendations

Principle 1: Visible and credible evidence of robust quality assurance criteria and processes is vital to each of the institutions in Campus Alberta, to Council and the Ministry, and to the national and international reputation of Alberta degrees.

Comments: This principle, derived from Campus Alberta Quality Council's Operating Principle 1 and the first purpose of the Quality Assurance Pilot Project Task Force, takes as a starting point the necessity of having in place at each institution credible criteria and processes for the rigorous examination of programs, and that monitoring of quality assurance is externally assured and visible.

Principle 2: The primary responsibility and accountability for academic and institutional quality assurance rests with post-secondary institutions themselves.

Comments: This principle, derived from Council's Operating Principles 15 and 13 acknowledges the autonomy and accountability of Board-governed institutions and the commonalities and differences among institutional review processes. Placing the primary responsibility within institutions provides the rationale for piloting an audit system of peer assessment within the CARI sector as a possible vehicle for Council to exercise, jointly with the CARI institutions, its mandate for monitoring quality in this sector.

Principle 3: The on-going monitoring of quality assurance criteria and processes should be carried out so as to maximize the opportunity for affirming, and adding value to, the internal quality assurance processes at each institution through peer evaluation and sharing of best practices from other institutions in Alberta and elsewhere.

Comments: This principle is based loosely on two Pilot Project purposes: (#5) "to identify leading practices within institutions' cyclical review practices that will be shared with each other and with other institutions from other sectors in the system," and (#4) "to inform the design of a made-in-Alberta auditing system that avails itself of leading practices found in quality assurance audit systems in other jurisdictions in Canada and in the world."

Principle 4: Credible quality assurance should be dynamic, responsive, and have peer evaluation as a central feature.

Comments: The audit pilot process is itself based on peer evaluation, and peer evaluation is built into each institution's quality assurance processes. The guidelines for peer review should articulate the importance of assessment of the extent to which quality assurance processes are dynamic and responsive.

Principle 5: Monitoring of QA processes should be streamlined, avoid unnecessary duplication of effort, and the benefits should be commensurate with the costs and effort.

Comments: The extent of and mechanisms for monitoring by Council in concert with each sector and with the diversity of institutions within each sector, is based on an assessment of the demonstration of robust implementation of criteria and processes by an institution. In carrying out such assessment and monitoring, high value is placed on building and maintaining trusting relationships among institutions and between institutions and Council.

Appendix B

QUALITY ASSURANCE AUDIT PILOT PROJECT TASK FORCE

A Process for The Pilot Project to Audit the Internal Quality Assurance Processes at Comprehensive Academic and Research Institutions (CARI)

1.0 PREAMBLE

Throughout this document, “review” is used when referring to a CARI sector institution’s own internal processes for ensuring the quality of its own programs/units, while “audit” is used when referring to the external assessment processes of this pilot project. It is understood that some institutions (“institution” refers hereafter to the four universities from the CARI sector) undertake stand-alone program reviews and some undertake program reviews as part of broader unit reviews. In what follows, the word review means a program review, whether or not this forms part of a broader unit review.

It is an expectation of the Ministry that degree-granting institutions will have internally approved processes requiring the cyclical review of degree programs, both at the undergraduate and graduate level. While respecting the autonomy and accountability of Board-governed institutions and the commonalities and differences among institutional review processes, the audit pilot project has the following purposes:

- to ensure that criteria and processes are in place at each institution for the rigorous examination of programs and to provide external assurance that those criteria and processes are being rigorously applied;
- to explore ways of creating streamlined processes enabling the CAQC to inform its monitoring role with procedures that respect the internal processes used in each of the institutions;
- to ensure that an audit process will, to the extent possible, avoid unnecessary duplication of effort and will be cost-effective for both institutions and CAQC;
- to inform the design of a made-in-Alberta auditing system that avails itself of leading practices found in quality assurance audit systems in other jurisdictions in Canada and in the world;

- to identify leading practices within institutions' cyclical review practices that will be shared with each other and with other institutions from other sectors in the system.

2.0 AUDIT PROCESS OBJECTIVES

The main objectives of an audit are to ascertain that the institution:

- (a) Has a quality assurance process for internal review of its degree programs that meets the Minister's expectations; and
- (b) Applies its quality assurance process for its degree programs and addresses review findings with an appropriate response.

3.0 DURATION OF AUDIT PILOT PROJECT

The pilot project will be conducted over two years, with audits performed in each year at two of the four institutions, one that undertakes stand-alone program reviews and another that undertakes program reviews as part of unit reviews.

4.0 AUDIT PROCESS FOR THE PILOT PROJECT

4.1 Initiation of the Audit

The Task Force will schedule audits during the pilot (i.e., University of Alberta and University of Lethbridge in 2011-2012 and University of Calgary and Athabasca University in 2012-2013).

The Task Force will work with each institution to determine both the schedule for the audit, including the site visit, and the information and documentation to be provided.

4.2 Audit Team

An audit team will normally consist of three members with senior academic administrative experience and with experience in participating in institutional review processes. One of the members will be from another CARI sector institution. The Task Force will accept suggestions for auditors from the institution and from CAQC members on the Task Force, will ask the institution to prioritize the complete lists of potential auditors (i.e., one list for those from CARI institutions and another for those from other institutions) and will make the final decision on who will be invited to serve on the audit team. The Task Force will make every effort to secure as members of the Audit Team those who have been highly ranked in the prioritized lists provided by the institution. The audit team will select its own team lead.

A Task Force member from a CARI sector institution not being audited will accompany the audit team on the site visit as an observer but will not participate actively either in the interviews or in writing the report.

4.3 Submission of Documentation Relevant to an Institution's Policy and Practice

Prior to the audit, the institution will submit the following documents, care of the CAQC Secretariat, to the Task Force:

- policy or other documents describing the institution's quality assurance process for cyclical program reviews;
- a schedule of completed and planned reviews; and
- a commentary, completed by the administrator(s) responsible for the cyclical quality assurance reviews, addressing institutional processes, criteria, practices and follow-up actions.

4.4 Sampling of Completed Reviews for Audit

From the schedule of completed reviews conducted by the institution, the Task Force will select a minimum of three in order to examine how the institution is applying its approved internal review process. In its selection the Task Force will consider the diversity of types and levels of degrees offered by the institution. In consultation with the institution, the Task Force will determine the appropriate documentation necessary to enable it to assess the application of the institution's internal review process to the specific reviews selected.

The documentation to be submitted for each of the program reviews selected would normally include a self-study document, the external review team's report, and an account of the institution's follow-up response. Other relevant documents will be made available on site and on a confidential basis to the audit team at its request.

4.5 Site Visit

The audit pilot process will include a site visit to the institution so that the audit team can speak both with members of the senior administration responsible for implementing the cyclical review process, and with the deans whose program reviews were selected for sampling by the audit team. The site visit will begin with an orientation/briefing session by the Task Force Chair, the Provost (or designate) of the institution whose internal processes are being audited and the Task Force institutional member who is participating as an observer. These same individuals will attend the final session with the audit team.

4.6 Audit Report

Using the materials provided by the institution as well as insights gained from the site visit, the audit team will prepare a report to the Task Force. First and foremost, the report should address the two objectives of the audit process identified in section 2.0 of this document. Second, the report should identify strengths and weaknesses in the internal quality assurance processes it has examined and should provide recommendations for improvement, if there are any. Finally, the audit team should identify leading policies or procedures or effective

practices in an institution's internal review process that might be shared with other institutions.

The audit report will be forwarded by the Task Force to the institution for a written response, in which the institution will have an opportunity to comment on the audit report and to respond to the findings and recommendations of the audit team.

4.7 Outcome

The audit team's report and the institution's response will be reviewed by the Task Force. The Task Force will report to CAQC and to the institution whose internal review processes for its degree programs were the subject of the audit.

5.0 EVALUATION OF PILOT PROJECT

After the first year of the pilot project has been completed according to the specifications of section 4, the Task Force will provide an interim report to both CAQC and AUA and may recommend mid-stream adjustments to the process outlined in this document.

Following the completion of the two-year pilot project, the Quality Assurance Audit Pilot Project Task Force will review the pilot project and what has been learned from it, and will make a recommendation on whether an on-going audit process, perhaps with modifications, will serve thereafter as Council's vehicle for monitoring programs at institutions from the CARI sector. The Task Force will develop an appropriate evaluation process prior to the completion of the pilot.

Notes to update the 14 February 2011 version of the Process document

4.0 Audit Process for the Pilot Project

- The attached Framework was adopted by the Task Force in Fall 2011 to guide the work of each audit team.

4.2 Audit Team –

- The list of possible auditors that was compiled prior to selection of the first audit team is to be considered a “living list” which will be customized for each of the CARI institutions.
- Once the institution has commented on the customized list of possible auditors and has provided its comments and preferences, the Task Force ratifies the list to be used for recruitment. Once recruitment is complete, the Task Force Chair notifies the institution, the Task Force and members of the audit team of the membership.
- The Task Force designated the members to shadow the audit teams as follows:

<u>Task Force Member</u>	<u>Audit Team</u>
Bob Boudreau (UofL)	University of Alberta
Sandy Murphree (UofC)	University of Lethbridge
Margaret Haughey (AU)	University of Calgary
Colleen Skidmore (UofA)	Athabasca University

- The CARI member of the audit team cannot be from the same university as the Task Force member shadowing the team.
- The institution being audited will name a contact who will be responsible for working with the review team with respect to logistical arrangements (travel, accommodation, etc.)
- The Task Force member shadowing the audit teams should be present for the full site visit, including team meetings. Although the primary role of the observer will be to participate silently as a member of the audit team, on rare occasions that person might be consulted by the team about the audit pilot project process.

4.3 Submission of Documentation Relevant to an Institution’s Policy and Practice –

- At a minimum, each university should provide the following documents:
 - A commentary/context piece written by the administrator(s) responsible for cyclical quality assurance reviews. The purpose of this document is to introduce the audit team to the processes currently and previously in use at the university and to comment on the other materials found in the package that the team will receive or that will be made available during the site visit.
 - The university’s current policy/practice for cyclical quality assurance reviews

- For each of the three sample completed program or unit reviews the institution should provide the following to the Secretariat six weeks prior to the site visit:
 - The policy/process in effect at the time of the review
 - A summary of process dates
 - The site visit itinerary
 - The unit's or program's self-study (normally without appendices, containing CVs and similar information)
 - The external team's review report
 - The institution/unit's response to the review, including, when pertinent follow-up actions taken in light of the review.

Audit Pilot Project Task Force

Framework for Audit Teams

Background

Item 2.0 of the Quality Assurance Audit Pilot Project Task Force process document speaks directly to the objectives of the Audit:

2.0 “.... to ascertain that the institution:

- (a) Has a quality assurance process for internal review of its degree programs that meets the Minister’s expectations; and
- (b) Applies its quality assurance process for its degree programs and addresses review findings with an appropriate response.”

Item 4.6 details the Audit Report:

4.6 Using the materials provided by the institution and insights gained during the visit, the audit team prepares a report.

“First and foremost, it should address the two objectives” (set out above)

Second, it should identify “strengths and weaknesses in the internal quality assurance processes it has examined and should provide recommendations for improvement, if there are any.”

“Finally, the audit team should identify leading policies and procedures or effective practices in an institution’s internal review process that might be shared with other institutions.”

Framework

The following framework to assess the two items (2.0 Process and 4.6 Review findings) has been constructed based on these directions.

1. Overall Process

- a. Does the process reflect the institution’s mission and values?
- b. Is the scope of the process appropriate?
- c. Are the guidelines adaptable to the needs and contexts of different units?
- d. Does the process promote quality improvement?

2. Review Findings

- a. Is the response to the review findings appropriate
- b. Does the process inform future decision-making?
- c. Are the review findings appropriately disseminated?