DAWSON COLLEGE

QUALITY ASSURANCE AUDIT REPORT

FEBRUARY 2015

**ADOPTED BY THE BOARD
OF GOVERNORS:
FEBRUARY 23, 2015**

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SECTION I: INTRODUCTION

1.1   Purpose of the Quality Assurance Audit

During the 2012-2013 academic year, the *Commission d'évaluation de l'enseignement collégial* (CEEC) embarked on a new direction with respect to evaluation. The CEEC has shifted its focus from evaluating the quality and implementation of programs of study and the effectiveness of policies and plans to auditing the effectiveness of the quality assurance system in each institution. Each college will be asked to assess the effectiveness of the quality assurance mechanisms for its programs of study, the evaluation of student achievement, its strategic plan and its student success plan. The CEEC defines the effectiveness of a quality assurance mechanism as its ability to ensure continuous improvement in quality in reaching its stated objectives.[1] The CEEC has also requested that colleges provide an assessment of their quality assurance systems[2], which they define as "an institutional information system designed to collect the data required to demonstrate the implementation of these mechanisms and their effectiveness."

The quality assurance audit will be cyclical. Each college will be asked to submit a quality assurance audit report every five years to the CEEC on the effectiveness of its own quality assurance system. Dawson College volunteered, along with four other colleges, to participate in the second phase of this newly-mandated quality assurance audit, starting in the 2013-2014 academic year. The College decided to participate in the quality assurance audit at this early stage so that it can learn about the effectiveness of its quality assurance mechanisms and also offer feedback to the CEEC on the process of conducting the audit.

A set of guidelines and a framework was developed by a committee that included representatives from the CEEC and representatives from various colleges across the province. The guidelines and framework were pilot tested by four colleges in Winter 2013: Cégep Marie-Victorin, Cégep de Sainte-Foy, Collège Shawinigan, and Collège André-Grasset.

In May 2013, the CEEC gave a one-day workshop for Dawson College on the quality assurance audit guidelines and framework. A plan was then developed by the College based on the guidelines and framework and the information provided at the workshop. This plan was approved by the Dawson College Board of Governors on October 28, 2013.

The purpose of Dawson's quality assurance audit is to assess the effectiveness of the quality assurance mechanisms for its programs of study, the evaluation of student learning, its strategic plan and student success plan as well as to provide an assessment of the College's quality assurance system. As per the CEEC's request, the period of review for this audit includes only the 2012-2013 and 2013-2014 academic years.

An action plan is also being submitted to the CEEC along with the audit report to build upon the strengths of the quality assurance mechanisms and quality assurance system and to address the weaknesses highlighted in this report.

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[1] Commission d'évaluation de l'enseignement collégial (CEEC) (March, 2013*), Evaluating the Effectiveness of Quality Assurance Systems in Québec Colleges*, page 18.
[2] *Ibid.* page 16.

1.2   Evaluation Criteria

The CEEC has asked the colleges to apply the following three evaluation criteria for the audit:[3]

1) The implementation of the quality assurance mechanisms
2) The effectiveness of these mechanisms, that is, their ability to ensure a continuous improvement in quality by:
   a. Conducting a critical assessment of the achievement of the stated objectives of these mechanisms;
   b. Identifying areas of strength and areas for improvement to ensure meeting these objectives
   c. Implementing corrective measures for improvement, namely through an action plan, in a context of continuous quality improvement;
3) The review and updating of these mechanisms to ensure their effectiveness.

1.3   Dawson's Specific Context

1.3.1   General Description

Dawson College, located in downtown Montreal, is the largest English language college in the province and one of the largest colleges overall. The College offers 26 programs of study: five pre-university programs and 21 technical programs. For 15 of the 21 technical programs, Dawson is the only college offering them in English.

In Fall 2012, there was a total of 10,744 students enrolled in the College; 8,207 in Regular Day programs and 2,537 in Continuing Education credit programs and courses. In Fall 2013, there was a total of 10,675 students enrolled in the College: 8,159 in Regular Day programs and 2,516 in Continuing Education credit programs and courses.

Dawson College was granted recognition of a CCTT-PSN *(Centre collégiaux de transfert de technologie – practiques sociales novatrices)* related to the integration of persons with disabilities into academic, professional and social life. Dawson is the first English college to be awarded a CCTT and manages the CCTT-PSN jointly with Cégep du Vieux-Montreal. This partnership led to the creation of the Research Centre for the Educational and Professional Inclusion of Students with Disabilities *(CRISPESH - le Centre de recherche pour l'inclusion scolaire et professionnelle des étudiants en situation de handicap)* in 2010. The Centre promotes research and the transfer of innovative social practices.

In August 2011, *le Centre d'études collègiales des Premières Nations – Secteur Anglophone* (Kiuna Institution)[4] was inaugurated at Odanak. This centre is affiliated with Dawson College for English-language instruction and with Cégep de l'Abitibi-Témiscamingue for French-language instruction. It was established to offer a First Nations approach to college instruction. In the fall semesters of 2012 and 2013, enrolments were nine and 24 students respectively for English-language instruction.

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[3] Commission d'évaluation de l'enseignement collégial (CEEC) (March, 2013), *Evaluating the Effectiveness of Quality Assurance Systems in Québec Colleges*, page 19.
[4] This centre will be referred to as the Kiuna Institution in the rest of the report.

During the 2011-2012 academic year, the College created a Centre for Innovation and Entrepreneurship Education (CIEE). The Centre, established in collaboration with Cégep du Vieux Montréal and Cégep Limoilou, is dedicated to providing resources and pedagogical tools to foster entrepreneurial knowledge and spirit among the colleges' faculty, students and graduates.

In Fall 2014, Dawson College inaugurated the Peace Centre. The Centre is a hub for learning, innovation, knowledge, mobilization and action about peace and non-violence through education.

1.3.2 Mission Statement

Dawson College's Mission Statement was adopted in 1986. Its relevance to the current and future work of the College was reconfirmed as part of the Institutional Evaluation Report completed in June 2003 and as part of the current Strategic Plan, which was adopted by the Board of Governors in October 2010. The Dawson College Mission Statement is:

As a College in the province of Quebec, aware of its responsibility to contribute to the intellectual, economic, and social development of our society, Dawson College believes that it is equally important to prepare students for further academic education and for immediate employment.

Therefore, the Mission of the College is:

- *to provide a sound education in English to the broadest student population;*
- *to value the ethnic and cultural diversity of our College and to celebrate this diversity within the context of an English education;*
- *to maintain standards of academic excellence essential to our students' future successes and to provide the appropriate programs, services and technology to ensure that any student admitted has the opportunity to develop the skills necessary to achieve these standards;*
- *to continue to develop innovative and flexible educational approached to serve the needs of our students;*
- *to affirm that the College, as a community, requires the participation and representation of all its members – students, staff and faculty – in its governance;*
- *to encourage the personal and social development of Dawson students through activities outside the classroom;*
- *to develop the role of the College as a community resource and as a centre for life-long learning.*

1.3.3 Program Mix

Dawson College offers 26 different diploma (DEC) programs of study plus six programs leading to an Attestation of College Studies (AEC). Five of the DEC programs are pre-university programs and 21 are technical programs. They are listed in Table 1.

Table 1: Programs of Study at Dawson College

TYPE OF PROGRAM	SECTORS		
	Creative and Applied Arts	**Science, Medical Studies and Engineering**	**Social Science and Business Technologies**
Technical Programs (DEC)	3-D Animation and Computer Generated Imagery (574.B0)*	Biomedical Laboratory Technology (140.B0)*	Accounting and Management Technology (410.B0)
	Graphic Design (570.A0)*	Civil Engineering Technology (221.B0)*	Business Management (Marketing) (410.D0)
	Illustration and Design (570.82)*	Diagnostic Imaging (142.A0)*	Community Recreation Leadership Training (CRLT) 391.A0*
	Industrial Design (570.C0)*	Electronics Engineering Technology (243.B0)	Computer Science (420.A0)
	Interior Design (570.E0)*	Laboratory Technologies/ Analytical Chemistry (210.A0)*	Social Service (388.A0)*
	Professional Photography (570.F0)*	Mechanical Engineering Technology (241.A0)*	
	Professional Theatre (561.C0)	Nursing (180.A0)	
		Physical Rehabilitation (144.A0)*	
		Radiation Oncology (142.C0)*	
Pre-University Programs (DEC)	Visual Arts (510.A0)	Science (200.B0)	Liberal Arts (700.B0)
	Creative Arts, Literature and Languages (500.A0)		Social Science (300.A0)

Note: Programs marked with an asterisk (*) are those that Dawson is the only college to offer in English.

The Physical Rehabilitation Program, which is new to Dawson, was implemented in Fall 2012.

The College also offers programs and courses in Continuing Education. Students may take credit courses leading towards DEC programs or may choose prerequisite courses for university programs. The DEC programs offered through Continuing Education are:

- Science (200.BC)
- Social Science (300.CE)

AEC _(Attestation d'études collégiales)_ programs are also offered through the Continuing Education division. In the 2012-2013 and the 2013-2014 academic years, the following programs were offered:

- Accounting Principles and Related Computer Applications (LCA.6X)
- Commercial Photography (NTA.1A)
- Independent Video Game Design (NWE.33)
- Network Administration and Support (ELJ.3B)
- Preparation for CISCO and CompTIA Linux+ Certification (ELJ.2J)
- Preparation for Microsoft Certification (ELJ.2N)

1.3.4   Student Profile

Figure 1, Figure 2, and Figure 3 show the enrolment breakdown by gender, by mother tongue, and by country of birth for students registered in Regular Day programs in Fall 2012 and Fall 2013.

Figure 1: Enrolment by Gender in Regular Day Programs in Fall 2012 and Fall 2013
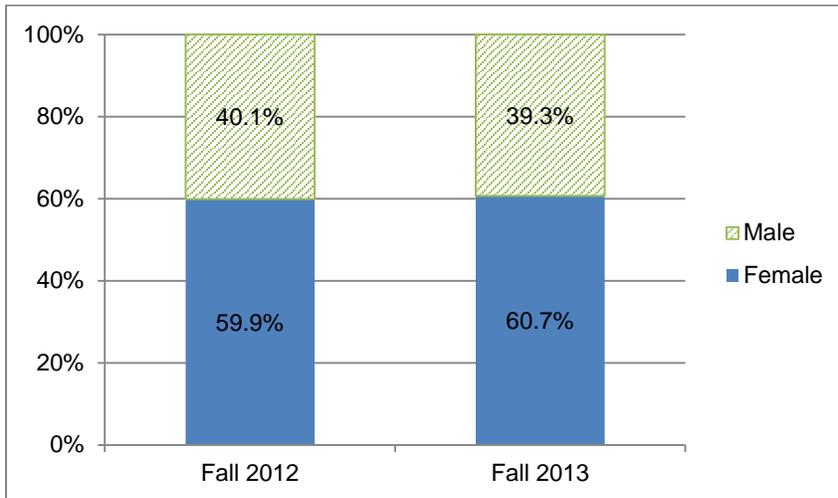
Source: CARS[5]

Figure 2: Enrolment by Mother Tongue in Regular Day Programs in Fall 2012 and Fall 2013
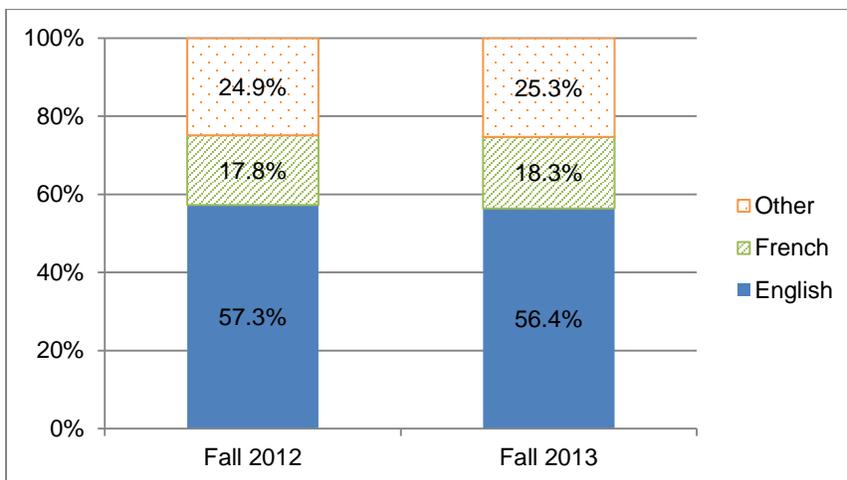
Source: CARS

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[5] CARS: Customized Academic Reporting System

Figure 3: Enrolment by Country of Origin in Regular Day Programs in Fall 2012 and Fall 2013
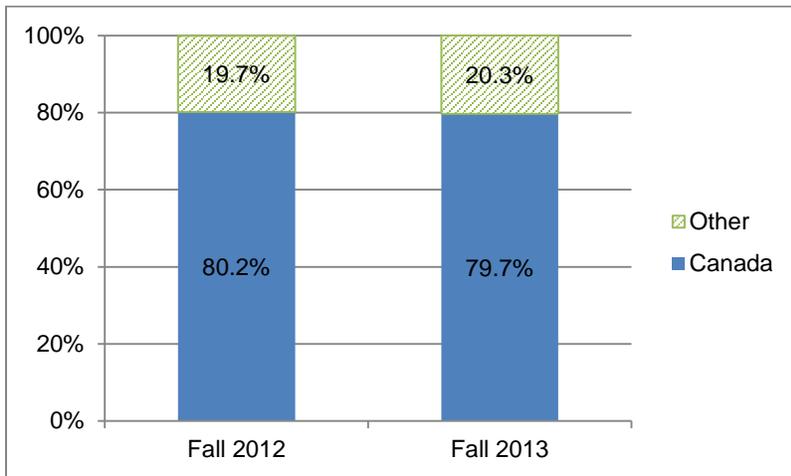
Source: CARS

Figures 4 and 5 show the enrolment breakdown by gender and by mother tongue for Continuing Education (credit) students in Fall 2012 and Fall 2013.

Figure 4: Enrolment by Gender in Continuing Education in Fall 2012 and Fall 2013
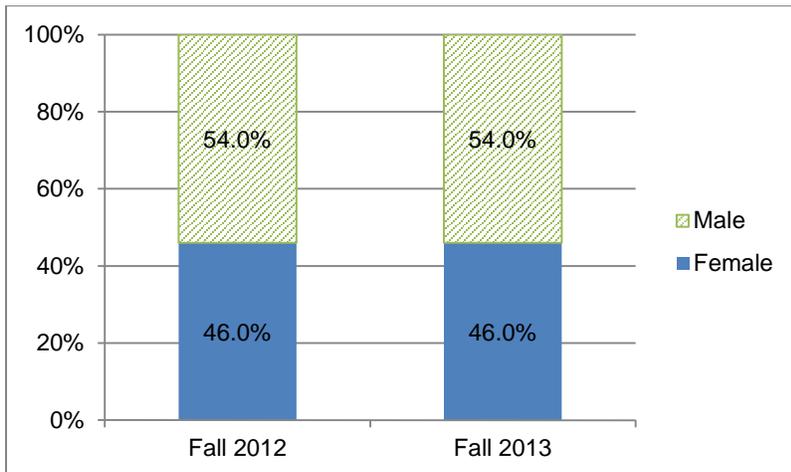
Source: Office of Institutional Research

Figure 5: Enrolment by Mother Tongue in Continuing Education in Fall 2012 and Fall 2013
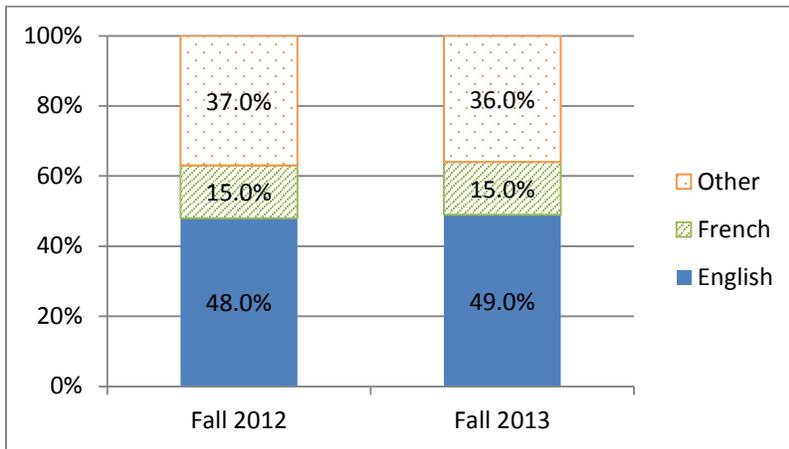
Source: Office of Institutional Research

1.3.5   Employee Profile

Table 3 shows the number of employees, by job category, who were employed at the College in Fall 2012 and Fall 2013.

Table 2: Employee Profile by Job Category in Fall 2012 and Fall 2013

	Fall 2012		Fall 2013	
	Permanent	**Non-Permanent**	**Permanent**	**Non-Permanent**
Management	35	0	35	0
Faculty	484	285	496	289
Professionals	48	25	51	20
Support Staff	199	78	200	70
Total	**766**	**388**	**782**	**379**

Source: Human Resources Department

1.3.6   Organizational Structure

The organizational structure of the College during the 2014-2015 academic year is shown in Chart 1.

Chart 1: Dawson College Organizational Chart

DAWSON COLLEGE

January 19, 2015

1/6/2015

- **RICHARD FILION** — DIRECTOR GENERAL
- **Donna Varrica** — Coordinator, Communications

J. Terrance Brennan — Director, Administrative Services and Corporate Affairs
- Glenys Ronnie — Comptroller
- Rosalba Monti — Coordinator, Financial Services
- Soula Tsafaras — Coordinator, Human Resources
  - Rita Smith — Manager, HR / Payroll
  - Mercedes Mangas — Manager, Benefits / Recruiting

François Paradis — Director, Information Systems & Technology
- Kieran Huxley — Coordinator, IT Operations
- Derek Gaucher — Coordinator, IT Solutions

Diane Gauvin — Academic Dean
- Louise Paulauskas — Coordinator, Canada-Quebec Entente
- Barbara Freedman — Dean, Instructional Development
- Carmela Gumelli — Dean, Academic Systems
  - Julie Brosseau — Coordinator, Academic Systems
    - Wendy Meldrum — Manager, Records & Registration
    - Marguerite Stratford — Manager, Admissions & Sched.
- Ray Bourgeois — Dean, Science, Medical Studies & Engineering
  - Wilson Wong — Assistant Dean, Science, Medical Studies & Engineering
- Leanne Bennett — Dean, Social Science & Business Technologies
  - Isabelle Carrier — Assistant Dean, Social Science & Business Technologies
- Andréa C. Cole — Dean, Creative & Applied Arts
  - Wolfgang Krotter — Assistant Dean, Creative & Applied Arts
- Donald Walker — Dean, Program Services and International Devel't
  - Nadia Bissada — Manager, Centre for Training & Development
  - Pietro Calderone — Manager, AEC Programs

Raymond Boucher — Director, Student Services
- Daniel Boyer — Coordinator, Student Services

Wai Bong Shum — Director, Plant & Facilities
- Jorge Sanchez — Coordinator, Auxiliary Services
- Mary Wawrzetz — Manager, Bookstore
- Véronique Paris — Coordinator, Plant & Facilities
  - Vincent Mansueto — Manager, Maintenance (Evening)
  - Daniel Deschênes — Manager, Maintenance (Day)

1.4   Description of the Process for Conducting the Quality Assurance Audit

The process for conducting the quality assurance audit began with identifying the main institutional mechanisms and practices for each of the components described by the CEEC. These components are:

1) Programs of study
2) The evaluation of student achievement
3) Strategic planning within a context of results-based management
4) Success planning within a context of results-based management

The College has interpreted the fourth component as planning for student success within a context of results-based management in accordance with the CEEC's mandate.

The Director General organized a joint meeting of the directors and deans in September 2013 in which examples of the main institutional mechanisms were presented by the writers of this report. The writers also presented the main points of the CEEC's guidelines and framework at this meeting.

The list of mechanisms and practices were then reviewed by the Quality Assurance Audit Task Force in October 2013. Once the list of mechanisms for each component had been finalized, the writers conducted interviews with the directors and the deans about their use of the mechanisms and their assessment of the effectiveness of the mechanisms in the Winter 2014 semester. The directors and deans were asked to provide sample documents such as policies, templates, etc. that they use for quality assurance in their respective departments or sectors. The writers summarized the main points made during each interview and sent them back to the interviewees for review and revision, if necessary. The Campus Director for the Kiuna Institution was interviewed concerning the quality assurance mechanisms and practices related to the evaluation of student achievement.

A preliminary draft report describing the mechanisms and practices was sent to the Quality Assurance Audit Task Force in October 2014. The report was reviewed at three meetings of the Task Force in late October and November 2014 and revisions to the descriptions were made by the writers as per the feedback provided at the meetings. The writers also provided their preliminary assessment of the effectiveness of the mechanisms and practices for each of the components based on the results of the interviews that were conducted with the directors and deans in Winter 2014. The Task Force discussed the preliminary assessments and the writers began writing the assessment portion of the report based on these discussions. The Task Force reviewed a final draft of the report, including recommendations, in January 2015. The report was reviewed at Senate in February 2015. The report was adopted by the Board of Governors in February 2015.

1.5   Organization of the Report

The report is divided into six main sections.

Section I describes the purpose of the quality assurance audit and provides a description of Dawson's specific context i.e., Mission Statement, program mix, student profile, employee profile and organizational structure.

Section II provides a description of the quality assurance mechanisms for programs of study, an assessment of the effectiveness of the quality assurance mechanisms, a description of the review and update of the main quality assurance mechanisms and recommendations.

Section III and Section IV have the same structure as Section II. Section III covers the mechanisms related to the evaluation of student achievement and Section IV covers the Strategic Plan and Student Success Plan (the Graduate Profile). The Strategic Plan and the Graduate Profile are presented together because the Graduate Profile is an integral part of the 2010-2015 Strategic Plan.

Section V provides an overall conclusion regarding the effectiveness of the quality assurance system.

Section VI provides a summary of the recommendations to improve the College's quality assurance mechanism.

SECTION II: QUALITY ASSURANCE MECHANISMS FOR PROGRAMS OF STUDY

According to the CEEC's guidelines and framework for *Evaluating the Effectiveness of Quality Assurance Mechanisms in Québec Colleges* there are three categories of mechanisms:

1) Institutional mechanisms governed by regulations related to the Commission's mandate
2) Other institutional mechanisms such as policies and by-laws[6]
3) Institutional practices adopted in relation to the implementation of a given policy or other institutional mechanism.

The CEEC lists six sub-criteria in its guidelines and framework that should be taken into account in the College's description and assessment of its quality assurance mechanisms for programs of study.[7] These six sub-criteria are:

1) Relevance
2) Coherence
3) Quality[8] of teaching methods and student supervision
4) The alignment of human, financial and material resources
5) Effectiveness
6) Quality of program management

Section 2.1 describes the three main categories of the quality assurance mechanisms with respect to the six sub-criteria. In section 2.2, an assessment of the effectiveness of the three categories of mechanisms is presented. In section 2.3, a critical assessment of the practices and procedures for the review and updating of the College's main mechanisms for programs of study is presented.

Recommendations to improve the mechanisms are included in section 2.4.

2.1. Description of Quality Assurance Mechanisms for Programs of Study

2.1.1 Institutional Mechanisms Governed by Regulations Related to the Commission's Mandate

Institutional Program Evaluation Policy (IPEP)

The Dawson College Institutional Program Evaluation Policy (IPEP) governs the evaluation of DEC and AEC programs of study at Dawson College. It is one of the policies that are governed by regulations related to the CEEC's mandate. The Academic Dean and the Dean of Program Services are the key persons responsible for the implementation of this policy.

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[6] The CEEC explained at its one-day workshop at Dawson in May 2013 that the mechanisms in this category are those that are approved by the College's Senate and/or Board of Governors.

[7] Commission d'évaluation de l'enseignement collégial (CEEC) (March, 2013), *Evaluating the Effectiveness of Quality Assurance Systems in Québec Colleges,* pages 21 to 23.

[8] The CEEC has translated the French version of this criterion "valeur des méthodes pédagogiques" as "value of teaching methods." Dawson uses the term "quality of teaching methods" in its Institutional Program Evaluation Policy (IPEP).

The objective of the policy is to ensure that program evaluation is undertaken in a manner that:[9]

- *is appropriate to the program being evaluated;*
- *is rigorous;*
- *acquires relevant, quality information;*
- *uses a methodology that allows sound conclusions to be reached and credible judgments to be made;*
- *respects ethical standards appropriate to an evaluation process;*
- *takes into account the efforts and opinions of major stakeholders;*
- *is useful and timely in providing realistic proposals that contribute to improvement of the program;*
- *is conducive to the development of a culture of continuous evaluation.*

The policy lists eight factors that are to be taken into account in determining which programs are to be evaluated:

1. *A major change is planned or has occurred in the factors which affect the program (e.g. the industry or field addressed by the program).*
2. *A major change is planned in the mode of delivery or clientele of the program.*
3. *Information system data or ongoing evaluation results (e.g. application, retention and graduation rates) raise questions with respect to the viability and/or integrity of the program.*
4. *Student feedback indicates problems in the program.*
5. *The Program Committee requests an evaluation.*
6. *The Dean responsible for the program or the Academic Dean requests an evaluation.*
7. *The Commission d'évaluation de l'enseignement collégial requires the evaluation of a specific program.*
8. *A new or revised program has completed one cycle.*

According to the policy, a program evaluation normally addresses the following criteria:

- *Program relevance*
- *Program coherence*
- *Quality of teaching and student "encadrement"*
- *Appropriateness of resources*
- *Program effectiveness*
- *Quality of program management*

The policy stipulates that programs will be evaluated at least every 10 years.

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[9] Passages in *italics* are taken verbatim from the bylaw or policy.

The policy describes the composition, mandate and responsibilities of the Program Evaluation Committee. The Program Evaluation Committee's responsibilities are:

- *Striking relevant working committees*
- *Developing and recommending an Evaluation Plan*
- *Carrying out such activities as are necessary to conduct the evaluation*
- *Developing an Evaluation Report in accordance with the Evaluation Plan and*
- *Developing recommendations to the College*

IPEP states that the evaluation plan and the evaluation report will be recommended by Senate to the Academic Dean and in the case where submission to an outside body is required, the Academic Dean will make a recommendation for approval to the Board of Governors. It also states that the Academic Dean will ensure that a plan of action arising from the evaluation report is created and implemented.

Institutional Student Evaluation Policy (ISEP)

The College's Institutional Student Evaluation Policy (ISEP), which will be described in further detail in section 3.1.1 of this report, specifies the information that must be included in a course outline. The preparation and approval of course outlines is a quality assurance practice that is used for ensuring program coherence and program effectiveness.

The information required on a course outline was revised in September 2011 in response to a recommendation in the 2008 evaluation of ISEP. All course outlines must include a description of the course content and, since Winter 2012, must include the statement of the competency, the competency number, the elements of the competency and whether the competency will be partially or fully addressed. The course outline must also include the grading scheme, the class participation requirements and a tentative schedule of activities. Course outlines must include a description of learning activities. They must also include contact information for the teacher and teacher accessibility.

ISEP also specifies the roles and responsibilities of programs and departments as they relate to the evaluation of student achievement, which is linked to the criterion of the quality of program management.

2.1.2   Institutional Mechanisms

Bylaw Number 4 – Concerning Human Resource Management

This bylaw, portions of which were adopted in 1988 in accordance with Regulation 5.3, is entitled "Bylaw Concerning Human Resources Management of the College" and is designated as Bylaw Number 4. It covers the following:

- *Human resource management*
- *Working conditions*
- *Creation and abolition of positions*
- *Decision to fill a vacant position*
- *Selection of candidates*
- *Hiring and appointment of regular employees*
- *Hiring of occasional and replacement employees*

- *Hiring of student employees*
- *Transfers, promotions and demotions*
- *Administrative and disciplinary measures*
- *Personnel evaluation*
- *Professional development*
- *Orientation of new employees*
- *Signing authority for specific purposes*

The bylaw does not indicate who is the key person responsible for its implementation, but Bylaw Number 1 – Concerning the General Administration of the College lists the responsibilities of the College's officers. This bylaw falls under the criterion of the alignment of human, financial and material resources.

Bylaw Number 5 – Concerning the Financial Management of the College

Bylaw Number 5, first adopted by the Board of Governors in February 1988, covers the following:
- *General provisions*
- *Development fund*
- *Budget transfers*
- *Approval of financial transactions*
- *Authorization of payment*
- *Transactions with financial institutions*
- *Signing authorities for specific purposes*
- *Provisions in case of absence or emergency*

The bylaw does not indicate who is the key person responsible for its implementation, but Bylaw Number 1 – Concerning the General Administration of the College lists the responsibilities of the College's officers. This bylaw falls under the criterion of the alignment of human, financial and material resources.

Bylaw Number 6 – Concerning the Senate (Academic Council)

The mandate of the Academic Council is established by the Colleges Act, articles 17.01 and 17.02. The Academic Council is called the Senate at Dawson. Bylaw Number 6, first adopted by the Board of Governors in November 1993, covers the following:
- *General provisions*
- *Definitions*
- *Mandate*
- *Composition*
- *Specific provisions*

In the section on the mandate of Senate, it is stated that Senate's function is *to advise the Board on any matter concerning the programs of study dispensed by the College and the evaluation of learning achievement, including the procedures for the certification of studies.* Senate may also *make recommendations to the Board with respect to these matters.*

Bylaw Number 7 – Concerning Special Conditions for Admission

Bylaw Number 7 was adopted by the Board of Governors in February 1994. It covers the following:

- *General provisions*
- *Special conditions for admission*
- *Equivalent preparation*

The bylaw does not indicate who is the key person responsible for its implementation, but Bylaw Number 1 – Concerning the General Administration of the College lists the responsibilities of the College's officers. This bylaw falls under the criterion of effectiveness.

Bylaw Number 8 – Concerning the Promotion of Academic Success

Bylaw Number 8 was adopted by the Board of Governors in December 2001. It covers the following:

- *General provisions*
- *Application*
- *Measures for academic success*
- *Effective date*

The bylaw applies to full-time students who fail more than one course in a given semester or repeatedly fail courses from semester to semester or fail half or more of their courses in a given semester.

The Academic Dean or a delegate duly mandated by the Academic Dean is responsible for the application of this bylaw. This policy falls under the criterion of quality of teaching and student supervision.

Bylaw Number 9 – Concerning the Management of Programs of Study

Bylaw Number 9 was adopted by the Board of Governors in February 2006. It covers the following:

- *General provisions*
- *Legal framework*
- *Elaboration of programs*
- *Program implementation*
- *Program evaluation*
- *Program revision*
- *Program committees and departments*
- *Revision of the bylaw*

The Academic Dean is the key person responsible for the implementation of this policy. This bylaw falls under the criterion of quality of program management.

Human Resource Management Policy

The Human Resource Management Policy, which was adopted by the Board of Governors in March 2004, outlines the guiding principles of effective human resource management. It specifies the College's expectations of its management and of its employees.

The Director General is responsible for the application of this policy.

Roles of Program Committees and Departments

This document, which was recommended by Senate to the Academic Dean in May 2006, outlines the roles of program committees and departments. The document was developed to support article 7.03 of Bylaw Number 9, which states: "The roles of program committees and departments are described further in the College document entitled "Roles of Program Committees and Departments.""

The Roles of Program Committees and Departments document states that:

In the context of the program approach, the program committees and the departments ensure that:

- *all competencies are addressed in accordance with the competency/course matrices;*
- *that there is vertical and horizontal integration of learning activities;*
- *that there is equivalence when more than one discipline can deliver the same competence.*

The document also covers the following:

- *Program committees*
  - *Composition*
  - *Mandate*
  - *The program coordinator*
  - *Meetings*
  - *Constitution*
- *The department*
  - *Composition and mandate*
  - *Responsibilities*
  - *Department coordinator*

This document falls under the criterion of quality of program management.

Key Performance Indicators

The College has a set of 11 Key Performance Indicators:

1. Graduation rates
2. Student retention rates
3. Pass rates in courses
4. Student satisfaction: pre-graduation
5. Graduate satisfaction: various intervals
6. Placement rates with employers
7. Employer satisfaction

8. Placement rates with universities
9. Success of graduates at university
10. Program evaluations, also by external bodies
11. Market share

Targets for graduation rates in prescribed time plus two years in "any program," for retention rates to the third semester in "any program" and for course success rates (i.e., the percentage of students who pass 100% of their courses in their first semester) were set by the College in 2001 and approved by the Board of Governors in October 2001.

Graduation rate targets were set for the 1998 and 2004 Cohort A students for the College as a whole, for the pre-university sector, the technical programs sector and *Accueil and Transition* students. Targets were also set for programs designated by the Ministry. Dawson also added all other programs not designated by the Ministry.

Retention rate targets were set for the 2001, 2002 and 2003 Cohort A students for the College as a whole, for the pre-university sector, the technical programs sector and *Accueil and Transition* students. Targets were also set for programs designated by the Ministry. Dawson also added all other programs not designated by the Ministry.

Course success rate targets were set for the 2001, 2002 and 2003 Cohort A students for the College as a whole, for the pre-university sector, the technical programs sector and *Accueil and Transition* students. Targets were also set for programs designated by the Ministry. Dawson also added all other programs not designated by the Ministry. In 2004, the Academic Dean set new targets for the 2004 to 2006 Cohort A students.

Key Performance Indicators fall under the criteria of program relevance and the effectiveness of programs of study.

Program Evaluation Plans

IPEP requires all program evaluations to begin with an evaluation plan. The evaluation plan will minimally contain the following:

- *a list of relevant committees together with their membership;*
- *a statement of purpose of the program evaluation;*
- *the context for the evaluation in terms of various indicators (e.g. KPIs[10])*
  o *the basis of the selection of interviews (e.g., focus groups)*
- *a list of key issues in priority order;*
  o *a list of questions related to each key issue provided in an appendix*
- *the criteria identified;*
- *the proposed researchers and data sources;*
- *the critical path.*

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[10] KPI: Key Performance Indicator

IPEP states that the Office of Institutional Research will provide information in support of program evaluation.

IPEP states that the Program Evaluation Committee is responsible for developing and recommending an evaluation plan. Senate recommends the plan to the Academic Dean.

During the period of review, two evaluation plans were developed and recommended by Senate to the Academic Dean. These two plans were for the Accounting and Management Technology Program and the Business Management (Marketing) Program.

Program Evaluation Reports

IPEP specifies the components of evaluation reports, which are the following:

- *a program description;*
- *the analysis of the key issues and criteria;*
- *an analysis of the data including a review of relevant institutional data (e.g. KPIs);*
- *the conclusions and recommendations which flow from the report;*
- *a description of the evaluation process.*

IPEP states that the Program Evaluation Committee is responsible for developing an evaluation report and recommendations. Senate recommends the report to the Academic Dean.

During the period of review, one evaluation report for the Professional Theatre (Acting) Program was recommended by Senate to the Academic Dean.

Program Revision Documents

Programs are revised at Dawson for three main reasons:

1) There is a recommendation for revision in a program's evaluation report (and data/recommendations that help guide the direction of the revision).
2) The Academic Dean, the Sector Dean and/or the program have requested a revision in order to address particular issues.
3) The Ministry has revised a program's competencies.

During the period of review, two programs were revised following their evaluations. These programs are Laboratory Technology – Analytical Chemistry and Professional Theatre (Acting). The Social Science Program was revised at the request of the program to address changes to courses and some profiles. The Liberal Arts Program was revised to address changes to courses. Three programs were revised to respond to changes the Ministry made to the competencies: Visual Arts, Graphic Design and Arts, Literature and Communication.

Program revision documents fall under the criterion of coherence.

Program Standing and Advancement Policies

Each program has a Program Standing and Advancement Policy which dictates the conditions by which a student may remain in good academic standing and advance through the program. Each program's standing and advancement policy contains a component common to all programs, which is dictated by the College's Institutional Student Evaluation Policy (ISEP). A program may also add specific requirements. As well, most technical programs include a professional conduct clause in their standing and advancement policies, outlining the behaviours expected from students in all activities associated with the programs.

New and revised academic standing and advancement policies are recommended by each program to the Academic Administration. An Academic Standing and Advancement Policy Committee, chaired by the Dean of Academic Systems, is responsible for reviewing and approving or amending the policy, which then becomes part of the revised program document brought to Senate.

Program standing and advancement polices fall under the criterion of quality of teaching and student supervision.

2.1.3   Institutional Practices

2.1.3.1 Practices Related to All IPEP Criteria

Development and Approval of Program Evaluation Plans

The evaluation plans are developed by faculty writers who are usually appointed by the program in consultation with the Program Evaluation Committee, which is chaired by the Dean of Program Services. The plans usually cover all six IPEP criteria. There is a list of questions common to all technical and all pre-university program evaluations and customized questions are also developed for the specific program being evaluated.

The customized questions for the evaluation plans are developed through a review of each program's Key Performance Indicators by the Office of Institutional Research and through a Logic Model Analysis[11] with faculty from Specific Education and General Education. Student input is obtained by holding a focus group of randomly selected students from the program. The focus group, consisting of about 10 students, is organized by the Office of Program Services. A list of questions for the focus group is drawn up by the faculty writers and the program evaluator assigned to the evaluation. The list of questions is reviewed with an external consultant who leads the focus group and presents the results to the Program Evaluation Coordinating Committee. The Coordinating Committee normally consists of the Dean of Program Services (Chair), the Sector Dean, the program coordinator and/or department chair, the faculty writers and the program evaluator. In order to guarantee the anonymity of the students in the focus group, the external consultant does not ask for their names during the focus group and the members of the Coordinating Committee and the Program Evaluation Committee (PEC) are never informed about which students participated in the focus group.

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[11] A Logic Model Analysis is a systematic and visual way to present the relationships among the resources used to operate a program, the activities that a program is doing or plans to do, and the changes or results a program hopes to achieve or is achieving.

Once the Coordinating Committee has reviewed the draft evaluation plan, the plan is reviewed with the Program Evaluation Committee. The Program Evaluation Committee may ask for modifications to the plan. Once the PEC has recommended the plan, it is reviewed by the Deans' Group and the Academic Planning Committee (APC), which is a sub-committee of Senate. Senate reviews the plan and may ask for modifications to it. It then recommends the plan to the Academic Dean.

During the period of review for this audit, two evaluation plans were developed: one for the [Accounting and Management Technology Program](#) and one for the [Business Management (Marketing) Program](#).

The Office of Institutional Research prepared analyses of the Key Performance Indicators (KPIs) for the development of the evaluation plans for the Accounting and Management Technology Program and the Business Management (Marketing) Program. The KPI analyses reviewed data related to program relevance (e.g., employment, university acceptance rates), program effectiveness (e.g., pass rates, retention rates and graduation rates) and quality of teaching and student *encadrement.* A Logic Model Analysis for each program was led by two professionals from the Office of Program Services with teachers who teach the Specific Education courses and faculty representatives from General Education who sit on the Business Administration Program Committees. Focus groups with students were not held because of the difficulty in recruiting a sufficient number of students.

The evaluation plans were drafted by two faculty writers for the evaluation with assistance from two professionals from the Office of Program Services. The plans were reviewed, revised and adopted by the Business Administration Program Evaluation Committees in January 2014. They were then reviewed by the Deans' Group and by the Academic Planning Committee, a sub-committee of Senate. Senate recommended both plans to the Academic Dean at its March 2014 meeting.

Development and Approval of Program Evaluation Reports

Evaluation reports are drafted by a writing committee which consists of faculty writers and a program evaluator from the Office of Program Services. A wide variety of data is gathered and analyzed for the evaluation reports. These include surveys of current students, graduates, employers and faculty. Minutes of program committee and program sub-committee meetings are reviewed. Course outlines for all Specific Education courses are reviewed, as well as course frameworks, where applicable. Course outlines and assessment tools for General Education courses adapted to programs are also examined. Other program documentation such as program policies, the program's constitution, student handbook and standing and advancement policies are usually reviewed during the program evaluation. The assessment tools used in the evaluation of a competency or competencies in a terminal course are also examined. Additional analyses of Key Performance Indicators may also be carried out.

Once the writing committee has prepared a draft of the evaluation report, it is reviewed and revised by the Coordinating Committee. Drawing on the information contained in the report, the Coordinating Committee also drafts a list of best practices, strengths and weaknesses of the program and a list of recommendations. The report is then submitted to the Program Evaluation Committee for review. The Program Evaluation Committee provides feedback on the report and may request modifications to it. Once the PEC has reviewed and recommended the report, it is reviewed by the Deans' Group and the Academic Planning Committee. Senate reviews the report and may ask for modifications to it. It then recommends the report to the Academic Dean.

During the period of review for this audit, one evaluation report was recommended by Senate to the Academic Dean. This evaluation report was for the [Professional Theatre (Acting) Program](#). The evaluation of this program began in the Winter 2010 semester with the development of an evaluation plan that was recommended by Senate to the Academic Dean in June 2010. This program was selected for evaluation because it had been revised in 2002 and had completed at least one cycle (article 3.8 of [IPEP](#)).

Data collection for the evaluation began at the end of the Winter 2010 semester and continued through the Fall 2010 semester. [Surveys](#) were distributed to students, program teachers, graduates and employers. [Program documents](#) such as minutes of program meetings and department meetings, course outlines, course frameworks, the student handbook and assessment tools were also reviewed for the evaluation.

Two faculty writers and a professional from the Office of Program Services drafted the report starting in the Winter 2011 semester. A first draft of the report was completed in August 2011. The report includes a program description and a description of the evaluation process. The report provides data and analysis for the six IPEP criteria and data and analysis for the customized issues for the program. Each criterion includes a conclusion and recommendations. The report also highlights best practices, strengths and weaknesses related to each of the six criteria.

The report was reviewed and revised by the Professional Theatre Program Evaluation Coordinating Committee between October 2011 and May 2012. It was then sent to the Professional Theatre Program Evaluation Committee for review. The report was reviewed and revised by this committee between May 2012 and February 2013. Once the report was adopted by the Professional Theatre Program Evaluation Committee, it was then reviewed by the Deans' Group, who suggested a few changes to the recommendations. The changes were made by the Dean of Program Services who then sent the report to the Academic Planning Committee (APC) for review in March 2013. The members of the Academic Planning Committee met with the Dean of Program Services, the two faculty writers for the evaluation and the program evaluator in October and November of 2013. APC requested changes to some of the recommendations, best practices, strengths and weaknesses. The Dean of Program Services, the writers and the program evaluator revised the document as per APC's request. The revised document was sent to the Professional Theatre Program Evaluation Committee for feedback. The document was then discussed at the February 4, 2014 meeting of Senate. Senate adopted a motion to table the report back to APC for review. APC reviewed the document and brought it back to Senate at a special meeting on February 18, 2014. The [document](#) was reviewed again by Senate and then recommended by it to the Academic Dean.

A second evaluation was completed in Winter 2013 for the Laboratory: Analytical Chemistry Program (210.AB), but a full evaluation report based on the evaluation plan was not submitted to Senate for review and adoption. Instead, a summary report was drafted by the Office of Program Services in response to particular questions from the Sector Dean. The summary report was then reviewed with the Program Committee. The evaluation criteria covered in the summary report are relevance, effectiveness, coherence, quality of teaching and resources. This program was selected for evaluation because it had been revised in 2002 and had completed at least one cycle (article 3.8 of [IPEP](#)).

A third evaluation report for the Commerce Profile of the Social Science Program was completed in the Fall 2013 semester. A review of the profile was requested by the Academic Dean in late Fall 2012 (article 3.6 of IPEP). The purpose of the review was to gather pertinent data and make recommendations to the Academic Dean regarding the optimal course set for the Commerce Profile. The review was limited to looking at issues related to relevance and coherence. The evaluation was conducted by a Coordinating Committee consisting of the Dean of Program Services, the Assistant Dean of the Social Science and Business Technologies sector, a faculty member from the Social Science Program and a professional in the Office of Program Services.

Action Plans

IPEP states that the Academic Dean will ensure that a plan of action arising from an evaluation report is created and implemented. The usual practice is that the Academic Dean delegates the development of the action plan to the Sector Dean. The Sector Dean then consults with the program coordinator to develop the action plan. The action plan usually covers all six IPEP criteria because there is usually at least one recommendation in the evaluation reports for each criterion.

2.1.3.2 Practices Related to the Relevance of Programs of Study

Data on Customized Academic Reporting System (CARS)

The Customized Academic Reporting System (CARS) is an online database that is maintained on a continuous basis by the Office of Institutional Research. The data on CARS is available to all College personnel, who can access it through the MyDawson portal.

Data on the employment rates of technical program graduates, provided by *Relance,*[12] is provided in CARS. For pre-university programs, there is data on CRC *(Cote de rendement collégial)* scores and placement rates within Quebec universities. Employment (placement) rates and placement rates with universities are two Key Performance Indicators.

Graduate Destinations Survey

The Graduate Destinations Survey is an annual survey of DEC program graduates that is conducted by the Office of Institutional Research. The survey asks graduates whether they are working full time or part time and in a field that is related to their program of study. It also asks them whether they are in full-time or part-time study and in which type of institution. The Office of Institutional Research analyzes the results of the Graduate Destinations Survey and sends a report of the findings to the Director General, the Academic Dean and the sector deans. Program Coordinators and the Office of Program Services are informed through email that the report is available on SharePoint.[13] Graduate satisfaction is a Key Performance Indicator.

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[12] *La Relance au collégial en formation technique.* An annual survey conducted by the Ministère de l'Enseignement supérieur, de la Recherche, et de la Science.

[13] SharePoint is an integrated web server platform sharing documents and information as well as searching and collaborating in one single place.

Advisory Mechanisms

There is no College policy that requires programs to have advisory mechanisms. However, all programs that undergo a revision are required by the Office of Program Services to have some form of advisory mechanism and there are usually recommendations in evaluation reports that programs establish advisory groups if they do not already have one. In addition to the advisory groups that are consulted by the program and by the Office of Program Services during a program's revision, some programs regularly consult with industry and/or university representatives. One of the sector deans asks programs to report on the feedback they have received from their advisory groups in their annual reports.

2.1.3.2 Practices Related to the Coherence of Programs of Study

Development and Approval of Program Revision Documents

Programs are revised according to a process that has been established by the Dean of Program Services. Before any changes are made to a program, the Office of Program Services, in collaboration with the program undergoing revision, sets up an advisory group which consists of external and internal members. External members may represent industry or local universities. For example, during the revision of the Graphic Design Program in 2013-2014, the advisory group included 12 external members, all from Montreal graphic design firms.

Advisory group members meet and answer questions about their observations regarding the current state of the industry (or university programs) and possible directions for the revised program. Information gathered at this meeting, combined with data and recommendations from the evaluation report, aid in the design of the new program. Convening an advisory group helps to ensure relevance of the revised program.

In order to ensure the coherence of a program undergoing revision, an Exit Profile is developed by a writing committee with input from Specific Education and General Education. The writing committee includes a professional from the Office of Program Services and program faculty. The next major step in the revision process is to determine the number of hours required for each of the Specific Education competencies and then to develop a course or a set of courses to which the competencies are assigned. During this part of the process, the vertical and horizontal integration of the Specific Education and General Education competencies are taken into account.

The writing committee develops a course/competency matrix for each term of the program which includes all competencies, courses, *pondération* and total hours. Extensive consultation regarding the proposed matrix is held at the department, program and administrative levels. When consensus is reached, the Dean of Academic Systems conducts an impact study to determine whether the revised program will incur additional financial costs.

The writing committee is also responsible (with consultation) for planning the Comprehensive Examination, revising the Academic Standing and Advancement Policy and determining course prerequisites. A document of a revised program usually contains:
- Acknowledgements – naming the writers, deans and program committee
- Program identification – ministerial description
- Admission requirements

- Ministerial goals of the program
- Exit profile
- Program objectives
- An introduction and complete overview of the proposed program structure and rationale of why changes were made, and an explanation of the proposed Comprehensive Examination structure
- Academic Standing and Advancement Policy
- Course prerequisites
- Course/competency matrix(ces)

Once a draft of the revision document is deemed to be ready by the writing committee, it is reviewed and revised by the Program Committee. After the Program Committee has reviewed and recommended the revision document, it is reviewed by the Deans' Group and the Academic Planning Committee. Senate reviews the document and may ask for modifications to it. It then recommends the document to the Academic Dean. The Academic Dean submits the document to the Board of Governors for approval.

Preparation and Approval of Course Outlines

Sector deans send out memos to teachers at the beginning of each semester reminding them that the course outline must comply with ISEP. Each dean includes a template of what must be included in the course outline. Once teachers have completed their course outlines, they are required to send them to their department chair for verification. The chairs then submit them to their respective deans. The Dean of Program Services checks the AEC course outlines and they are stored by the AEC Manager. The course outlines for Continuing Education credit courses given by departments in the Social Science and Business Technologies sector are stored by the sector dean's office. For courses given in the other two sectors, the course outlines are stored by the Coordinator, Pre-university Studies in Continuing Education.

2.1.3.3 Practices Related to the Quality of Teaching and Student Supervision for Programs of Study

Teacher Evaluation Policy and Practices

The teacher evaluation process is subject to the Dawson Teacher Evaluation Policy, which was presented to the Board of Governors in November 1993, but not approved by the Board. The teacher evaluation process for Regular Day teachers is conducted by the Office of Instructional Development (OID), under the supervision of the Dean of Instructional Development.

New teachers who teach in the Regular Day division are evaluated annually except in their first semester, when they are given the choice of an optional evaluation. They are then evaluated in their second and fourth semesters. All other teachers, permanent and non-permanent, are evaluated every two years. A teacher's survey is flagged by the Office of Instructional Development if his/her scores fall below a certain level, according to established criteria. Survey results are flagged in order to identify teachers who may be having difficulties; the goal is to improve the quality of teaching by assisting those teachers who are in need of help. All flagged surveys are reviewed (initially no names are used) by the Sector Dean who will then decide whether follow-up is required.

OID also prepares College-level and department-level reports, which are sent to teachers along with their own reports. These two reports are also made available to the sector deans on the College's shared computer drive at the end of January for the Fall semester and at the end of June for the Winter semester. The sector deans also have access to a report through the MyDawson portal that summarizes when a teacher has been evaluated and for which courses. There is also a PDF file of their evaluations for each of these courses.[14]

Teachers who teach in AEC programs are evaluated each year by the AEC Office, which is under the direction of the AEC Manager. The AEC Manager reviews the survey results and he meets with teachers who receive low ratings. New teachers who teach in the Continuing Education credit courses are evaluated every year and the process is overseen by the Coordinator, Pre-university Studies in Continuing Education. The evaluations are made available by the coordinator to the teacher, the sector deans and the department chairs.

The teacher evaluation form that students enrolled in Continuing Education courses complete is identical to the one that is used for Regular Day teachers, except that students are not asked about teacher availability outside of class.

Instructional Effectiveness Subscale of the Student Satisfaction Inventory (SSI)

Every four years, the Office of Institutional Research conducts a Student Satisfaction Inventory (SSI) for all Regular Day students and students enrolled in Continuing Education credit courses. The latest SSI was conducted during the Winter 2013 semester and 1,577 students participated in the survey.[15] In addition to preparing a report on all the results of the SSI, the Office of Institutional Research prepares a separate report on the Instructional Effectiveness Subscale of the Student Satisfaction Inventory. The Instructional Effectiveness sub-scale includes 14 items related to teaching and students are asked to respond to each of these items on a seven-point importance scale and a corresponding seven-point satisfaction scale. The Instructional Effectiveness Report is routinely sent to the Director General, the Academic Dean and the sector deans. The outcomes of the 2013 survey were also presented at the General Assembly and to the Management Group, Senate and Council of Career Programs. In addition, the document is posted on SharePoint and an email is sent by the Office of Institutional Research to all Dawson staff indicating that the report is available. Student satisfaction (pre-graduation) is a Key Performance Indicator.

Graduate Satisfaction – Point of Exit Survey

The Graduate Satisfaction Point of Exit Survey is administered each year by the Office of Institutional Research at the time students are expected to graduate from their programs. The results of the Graduate Satisfaction Survey are sent to the Director General, the Academic Dean, the sector deans and are also posted on SharePoint. An email is sent to all Dawson staff indicating that the report is available. Student satisfaction (pre-graduation) is a Key Performance Indicator.

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[14] There is no hyperlink to an example of the teacher evaluation summary report because it contains nominal information.

[15] The SSI is described in more detail in section 2.1.3.5.

Mid-term Assessment

Regular Day students and students enrolled in Continuing Education credit courses receive a mid-term assessment in each of their courses in the fall and winter semesters. Students in two AEC programs, Commercial Photography and Independent Video Game Design, also receive mid-term assessments. Some AECs are offered intensively and with irregular starting dates, hence mid-term assessment does not occur at the same time as it does for the rest of the College. The mid-term assessment process is overseen by the Office of Instructional Development. Students are informed by their teachers if they are passing, are at risk or are failing. If they are at risk or failing, they are advised to see their teachers and to consult the necessary support services. A list of support services is provided with the mid-term assessment.

A summary of the mid-term assessments of all students in each program is available to the program coordinators through MyDawson portal. This summary report shows the courses in which each student is enrolled, whether they have passed or failed the mid-term assessment and any teacher comments.[16]

Individualized Education Plan (IEP)

Upon admission to the College and before every subsequent registration, each DEC and AEC student receives an Individualized Education Plan (IEP) from the Academic Advisors. Continuing Education students registered in a program also receive an IEP. IEPs were originally developed in 2000 as a key element of the Student Success Action Plan. IEPs are based upon the Standing and Advancement Policy, the program structure and the course grid of each program. IEPs are reviewed each term by the Academic Advisors. IEPs summarize all the important academic information concerning students' advancement and standing in their program as well as the ministerial graduation requirements for this program. They also serve as a means of communication with the students. IEPs provide immediate and accessible information to students about their status in their program, such as:

- program title;
- course load;
- academic standing;
- date of admission;
- semester of study;
- courses passed;
- courses in progress;
- courses to be taken;
- English Exit Examination – done/to do;
- Comprehensive Examination– done/to do;
- substitutions.

Finally, IEPs are used by sector deans, program coordinators, department chairs and staff in the Registrar's Office to track students' academic status and their progress toward graduation.

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[16] There is no hyperlink to an example of the mid-term assessment summary report by program coordinator because it contains nominal information.

Bylaw Number 8 Procedures

Full-time Regular Day students who fail two or more courses in a given semester are sent a letter by their Sector Dean encouraging them to take advantage of the various services offered in the College. Students who fail at least half of their courses in a semester are required to meet with an Academic Advisor at the beginning of the next semester to sign a contract for the semester outlining the student's course load, a plan of action and the consequences of not fulfilling the obligations of his/her contract. Continuing Education students enrolled full time in a DEC program or in the Commercial Photography AEC Program who fail at least half of their courses in a semester are required to sign a contract when they next register on a full-time basis.

Snapshot of Students in Programs/Profiles

Program coordinators have access to a report in Clara that provides regularly updated information about each of their students:[17]

- Date of birth
- SPE (semester of study)
- EUL (English Exit Exam Result)
- ESP (Comprehensive Examination)
- Secondary V incoming average
- Academic standing
- French placement
- English placement
- Number of courses passed

Support Options for At-Risk Students (SOARS)

The SOARS Program is designed to identify at-risk students as early as possible and to ensure that they are offered appropriate support in a timely manner. It is also designed to provide assistance to faculty in addressing the needs of at-risk students by providing Regular Day and Continuing Education teachers with a list of resources and a referral form for students whom they identify as being at risk. This program is administered by the Department of Student Services.

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[17] There is no hyperlink to an example of the Snapshot report because it contains nominal information.

2.1.3.4 Practices Related to the Alignment of Human, Financial and Material Resources for Programs of Study

HUMAN RESOURCES

Departmental Opinion Survey

The Departmental Opinion Survey assesses staff agreement with a number of statements about management, communication, and professional development. The survey was administered by the Office of Institutional Research in February 2014 at the request of the Director of Administrative Services. The survey had been administered previously at the College in 2002 and 2006. There were 325 replies to the 2014 survey, representing a response rate of 23.0%. The four categories of Dawson staff responded to the survey: managers, teachers, professionals and support staff.

Human Resource Practices for Faculty

Teacher Hiring Criteria

Each department has specific hiring criteria for teachers who teach in Regular Day and/or in Continuing Education. These hiring criteria are developed by the departments and submitted to their respective sector deans for review. The Academic Dean has final approval on the hiring criteria for each discipline.

The hiring criteria are listed on the Human Resources page of the Dawson website.

Faculty Staffing Plan

The development of the Faculty Staffing Plan is the responsibility of the Dean of Academic Systems in collaboration with the other deans. The Academic Dean and the Human Resources Department determine in which disciplines full-time positions will be opened. The plan is developed for each academic year at the end of the previous winter semester. It includes staffing allocations for each discipline, including release time for program and departmental coordination and release time for various research projects. The plan is recommended by the deans to the Academic Dean for approval.

Professional Development Committee for Faculty

This committee oversees the application of the Faculty Professional Development Policy and approves requests for professional development funding for faculty. It consists of two College representatives (from the Human Resources Department), the Dean of Social Science and Business Technologies, the Dean of Instructional Development and two representatives from the Dawson Teachers' Union. Professional development funds are available to Regular Day and Continuing Education teachers.

Pedagogical Day

Pedagogical (Ped) Day is an annual full-day event held at Dawson in the Fall semester that offers professional development to faculty through workshops and presentations given by College teachers and professionals or invited speakers and external workshop leaders. The event is organized and managed by the Office of Instructional Development (OID). OID canvases the College community to see what it wants to be presented at Ped Day. Although Ped Day is geared towards faculty, professionals and

support staff may attend the presentations and workshops with their managers' permission. All faculty, including those teaching in Continuing Education, are invited to Ped Day.

OID also surveys participants at the end of each Ped Day to see whether they were satisfied with the activities and what other types of workshops they would like to have for the following year's Ped Day.

New Faculty Orientation

OID organizes a New Faculty Orientation every January for new teachers in Regular Day and Continuing Education. A list of new teachers to invite to the orientation session is generated by OID. Department chairs, program coordinators and faculty mentors, members of the OID, as well as assistant-deans and deans of the various programs also attend New Faculty Orientation.

The New Faculty Orientation is an informal occasion where faculty can meet their new colleagues. OID has on display information about its various services and also hands out a New Faculty Information Package. A link to the document is also available on the OID website. New faculty are also given USB keys that contain general information about the College, a phonebook of key contacts, an extensive list of answers to frequently asked questions and a list of resources offered by the OID.

Specific Requests

OID also provides training for Regular Day and Continuing Education faculty when it receives specific requests for training. Some of the training activities that OID provided during the period of review are:

- Workshops on iPads
- One-on-one training by a professional in the OID computer training room.
- Workshop for the Nursing Department for the creation of short answers in tests
- One-one-one training on the use of iClickers
- Video recording of lectures
- One-on-one consultation and/or training with pedagogical counsellors

Performa Master Teacher Program

Regular Day and Continuing Education teachers are invited to register for the program through the Office of Instructional Development, which manages the Master Teacher Program for Dawson.

Human Resources Practices for Non-Teaching Staff

Management Evaluation Process

The process for evaluating managers at Dawson College is specified in the Management Evaluation Process document, which was adopted by the Board of Governors in February 2004. The document covers the following:

- Objectives of the management evaluation process
- Aspects of performance which must be considered in the evaluation of managers
- Process
- Summative aspects

The Director General is responsible for the application of the process.

Evaluation Policy for Professionals

The evaluation policy for professionals is a Human Resources Department policy that was adopted pursuant to clause 12.01 of Bylaw Number 4 – Concerning Human Resources. The policy was first adopted by the department in December 1994 and was last amended in February 2006. The policy states that the purpose of performance evaluation is to encourage open and ongoing communication between the professional and the supervisor to improve understanding and promote more effective job performance. One of the objectives of the policy is to identify professional development needs and provide support in meeting them. The policy is applicable to all professionals except for those in the first year of a special project and professionals hired on short-term replacement contracts.

Evaluation Policy for Support Staff

The evaluation policy for support staff is a Human Resources Department policy that was adopted pursuant to clause 12.01 of Bylaw Number 4 – Concerning Human Resources. The policy was first adopted by the department in December 1992 and was last amended in February 2006. The policy states that the purpose of performance evaluation is to be formative, provide feedback to employees on their accomplishments, help them achieve their potential and to identify training and development needs. The policy applies to all regular support staff personnel.

Professional Development Policy – Professionals

The professional development policy for professionals is a Human Resources Department policy that was first adopted by the department in January 1984 and was last amended in March 2014. It establishes the mandate and composition of the Professional Development Committee for professionals. This committee oversees the application of the policy and approves requests for professional development funding for professionals. It consists of two College representatives, the Dean of Program Services and a manager from the Human Resources Department, and two representatives from the Association of Dawson Professionals.

Professional Development Policy – Managers

The professional development policy for managers is part of the working conditions for senior and operational managers. The policy includes the composition of the local professional development committee, sets out the framework for the types of professional development available to managers and dictates the annual budget for professional development.

Professional Development Policy – Support Staff

The professional development policy for support staff is a Human Resources Department policy that was first adopted by the department in January 1984 and was last amended in November 2011. It establishes the mandate and composition of the Professional Development Committee for support staff. This committee oversees the application of the policy and approves requests for professional development funding for support staff. It consists of two College representatives, who are both managers in the Human Resources Department, and two representatives from the Dawson Support Staff Union.

Staffing Plan

Each year, as part of its operating budget review process, the College reviews the number of employees (support staff, professionals and managers) it currently has for each department and whether staffing levels should increase, decrease or remain the same. The Staffing Plan is reviewed each year by the Budget Consultation Committee.

The Staffing Plan is also submitted to the respective *Comité de relations de travail* (CRT) for the support staff and professionals for review.

Staff Training

The Human Resources Department provides workshops to staff on various topics. During the period of review, the department provided workshops on Microsoft Word and Excel. It also supports an annual training day for support staff.

Professionals in the College do not receive specific training at the College, but the College's professional development policy provides financial support for group training for professionals that they either organize on campus or attend outside the College.

The College also subsidizes non-credit courses for all staff, including teachers, at the Dawson Centre for Training and Development.

Financial and Material Resources

Operating Budgets – Development and Management – Policy and Procedures

This policy, which comes under the responsibility of the Director of Administrative Services, was first adopted in February 2013 and revised in January 2014. It states that:

> *"This policy and procedures document is subject to the Colleges Act (RSQ ch C-29) and to Dawson College bylaws and policies. Its purpose is to outline principles and practices in the day-to-day and annual budgetary management of the College."*

The policy covers the following:

- Principles of Budget Management
- Budgetary Structure: The College's Chart of Accounts
- Annual Operating Budget Development Process
- Current Budget Management and Control

Development and Approval of the Operating Budget

The College's operating budget is developed by the College's directors after consultation with management, programs and departments. The budget is reviewed annually by the Budget Consultation Committee. This committee is chaired by the Director General and includes the Academic Dean, the Director of Administrative Services, the Comptroller and one representative from each of the Dawson Teachers' Union, the Dawson Support Staff Union, the Association of Dawson Professionals, the

Management Association, and the Dawson Student Union. The committee usually meets in April, at which time the operating budget is presented. It then meets again, usually in May, for the final recommendation of the budget.

The operating budget is reviewed usually in June of each year with any revisions approved as necessary by the Board's Executive Committee. However, if the Board adopts a provisional budget, usually due to a lack of information coming from the Ministry, a revised operating budget is then adopted in September by the Board with any subsequent revisions approved by the Executive Committee.

Development and Approval of the Capital Budget

The College's capital budget is developed by the College's directors after consultation with management, programs and departments. The annual normalized budget is generally divided in two parts, equipment and renovations, and is supplemented by special Ministry allocations for various projects including program revisions, program implementations and allocations tied to specific ministerial programs (*plan quinquennal d'investissement,* science labs, construction projects, etc.). These additional allocations are designated for equipment and/or renovations as the case may be.

The normalized equipment budget, approximately $2M per year, is the subject of a comprehensive consultation process via the Capital Budget Requests System. About 85% of this budget is allocated to requests that are then prioritized by the deans and decided upon by the Academic Dean after consultation with the Director of Information Systems and Technology. The other directors (Director General, Director of Administrative Services, Director of Student Services, Director Plant and Facilities, Director of Information Systems and Technology) determine the distribution of the remaining 15% of the available normalized equipment budget. The normalized renovation budget is under the direction of the Director of Plant & Facilities who proposes projects to the Space Allocation Committee, the Executive Committee and the Board of Governors.

During the year, all other capital equipment requests require the approval of the Capital Budget Committee. The Capital Budget Committee, which meets about once a month, is chaired by the Director General and includes the Academic Dean, the Director of Information Systems Technology, the Director of Plant and Facilities and the Coordinator of Financial Services. The committee's mandate is to review and approve or decline requests for equipment and furnishings. Between meetings, the Chair may approve requests and the committee is informed at a subsequent meeting.

The Board of Governors reviews and approves a preliminary Capital Budget in April, with a final version approved in September.

Approval Process for Space Allocation

The Space Allocation Committee oversees the allocation of space for programs of study as well as other non-academic departments. Academic departments and programs make their requests for space to their respective deans. Non-academic departments make their requests to their directors. The committee is chaired by the Director General and includes the Academic Dean, the Director of Student Services, the Director of Plant and Facilities, the Dean of Academic Systems and the Coordinator of IT Operations. The committee meets approximately every six weeks during the academic year.

2.1.3.5 Practices Related to the Effectiveness of Programs of Study

Data Provided on the Customized Academic Reporting System (CARS)

This database, which is maintained by the Office of Institutional Research, provides data for DEC programs and profiles for:

- Employment
- Enrolment
- Grades (including course pass rates)
- Number of graduates
- Graduation/retention rates
- Secondary V averages

Employment rates, graduation rates, retention rates, course pass rates are Key Performance Indicators.

Data is available for the College as a whole, for the pre-university and technical sectors, and for individual programs and profiles. DEC programs can also obtain a summary report called Ongoing Program Evaluation (OPE), which covers:

- Graduation and retention rates
- Secondary V incoming averages
- Placement rates within Quebec universities and CRC scores (pre-university programs only)
- Employment rates of graduates (technical programs only)
- Graduate Satisfaction Point of Exit Survey results
- Course success rates (i.e., the percentage of students who passed a designated percentage of their courses in the first semester).

The Graduate Satisfaction Point of Exit Survey results and the placement rates within Quebec universities are Key Performance Indicators.

CARS also provides data on English placement rates and English Exit Examination results for DEC programs.

CARS also provides the following data on AEC programs:

- Enrolment
- Number of graduates
- Graduation rates

CARS is accessible to managers, staff and teachers through MyDawson portal.

Data about Programs on SharePoint

The Office of Institutional Research has developed a set of 14 reports about programs and profiles that is accessible on SharePoint. SharePoint is an integrated web server platform for sharing documents and information as well as searching and collaborating in a single place. The reports are provided in table and graphical formats. The reports that are available on SharePoint are:

1) Total enrolment by session
2) Total enrolment by gender
3) Total enrolment by language
4) Total enrolment by age
5) Total enrolment by country of birth
6) Graduate satisfaction (point of exit)
7) Course success rates (cohort a) – comparison to targets
8) Retention to semester 3 (cohort a) – comparison to targets
9) Graduation in prescribed time plus 2 years (cohort a) – comparison to targets
10) Pass rates – specific education and general education
11) Pass rates – general education by discipline
12) Graduate destinations survey – employment rates
13) graduate destinations survey – university study
14) First choice applications, admissions and registrations

SharePoint is accessible to managers, staff and teachers on the Dawson website and through the Dawson portal.

Student Satisfaction Inventory (SSI)

Every four years the Office conducts a Student Satisfaction Inventory (SSI) for all DEC and Continuing Education students. The latest SSI was conducted during the Winter 2013 semester and 1,577 students participated in the survey. The SSI results were presented to the academic administration and to the Dawson community at the College's annual general meeting held in August 2013. The results were also presented to the Dawson Board of Governors in November 2013. Student satisfaction is a Key Performance indicator.

Graduate Satisfaction – Point of Exit Survey

The Graduate Satisfaction – Point of Exit Survey is conducted each year by the Office of Institutional Research and targets all Regular Day students about to graduate. There are three subscales in the survey – Teaching, Generic Skills and Clear Goals and Standards. There is also an "overall satisfaction with the program" score. The results of this survey are sent to the Director General, the Academic Dean and the sector deans. The program coordinators and the Office of Program Services are advised by the Office of Institutional Research that the report is posted on SharePoint

In 2012, 1,228 students participated in the survey, representing a participation rate of 48.5% of all potential graduates. In 2013, 1,400 students participated in the survey, representing a participation rate of 61.1% of all potential graduates.

Student satisfaction is a Key Performance indicator.

AEC Graduate Satisfaction Survey

The AEC Graduate Satisfaction Survey is conducted each year by the Office of Institutional Research and targets all AEC program students about to graduate. Students are asked to rate their satisfaction on 24 items associated with their programs. Students are also asked whether they would choose the program or College again. They are also asked to comment on the most positive aspects of their program and to make recommendations for improvements. The results of this survey are sent to the Director General, the Academic Dean, the Dean of Program Services and International Development, who is responsible for AEC programs, and the AEC Manager. The Dean of Program Services and International Development reviews the report with the AEC Manager and determines if there are specific areas that need to be addressed. If so, he develops an action plan.

In 2012, 167 students participated in the survey. Survey response rates ranged from 48% to 92% for individual programs with an average of 77%. In 2013, 118 students participated in the survey. Survey response rates ranged from 26% to 100% for individual programs with an average of 62%.

Student satisfaction is a Key Performance indicator.

2.1.3.6 Practices Related to the Quality of Program Management

Program Constitutions

All program committees are required to have a constitution as per the Roles of Program Committees and Departments document, which was recommended by Senate to the Academic Dean in May 2006, and to meet at least once per semester. The constitution must describe the program committee's composition, substructures and the assignment of responsibilities to ensure that all aspects of the program's mandates are discharged.

Preparation and Review of Program Annual Reports and Work Plans

All three sector deans require their programs to submit an annual report and work plan. Each dean has developed their own template as to what they require in their annual reports. Two of the deans provide data in the report templates for each of their programs on enrolment, graduate satisfaction, course success rates, retention, graduation and incoming Secondary V averages. The other dean does not provide data but asks the programs to review the indicators that the program relies on to reveal the health of the program. Each of the deans requires the programs to report on the objectives contained in the previous year's work plans. Two of the deans require programs to report on the dates of the program committee meetings and to provide agendas and minutes for these meetings. Two of the deans ask the program coordinators to give an overall assessment of the health of their programs.

Ongoing Self-Evaluation of Programs and General Education Departments

One of the objectives of IPEP is to ensure that evaluation is undertaken in a manner that is conducive to the development of a culture of continuous evaluation. In order to support this objective, the College developed a set of guidelines for ongoing self-evaluation of programs and another set for ongoing self-evaluation of general education departments. The guidelines were developed between Winter 2012 and Fall 2012 by a working group that was chaired by the Dean of Program Services. The working group included teachers from five programs, one teacher from the French Department and one teacher from

Humanities, a professional and a support staff member from Program Services. The programs represented on the working group were Nursing, Photography, Social Service, Social Science, and Science.

In Winter 2013, the teachers in the initial working group pilot tested the guidelines and the ongoing self-evaluation process. The process involved choosing a question from one of the seven criteria included in the guidelines and then gathering and analyzing data to answer the question. The participants were then asked to prepare a two- to four-page summary report with recommendations that were to be included in their program's or department's annual report.

A second working group was established in Fall 2013 with teachers from four programs and two teachers from the Physical Education Department. The four programs represented on the 2013-2014 working group included Community Recreation Leadership Training (CRLT), 3D Animation & CGI, Visual Arts, and Civil Engineering Technology. These four programs and the Physical Education Department were supported by the Program Services Office in carrying out their self-evaluation projects in Winter 2013. These programs followed the same process for ongoing evaluation that the first group of participants used.

During the 2013-2014 academic year, the Office of Program Services began working with the Office of Institutional Research and the Information and Systems Technology (IST) Department to develop data in a graphical reporting format that would be easily accessible for program coordinators and chairs for the purpose of ongoing evaluation. The format and content of these reports were presented to the Deans' Group and the members of the Ongoing Self-Evaluation Working Group in Winter 2013. Feedback from these two groups was incorporated into the reports and the reports were made available to the College community on SharePoint in May 2014.

There are several reasons that the College decided to implement a structured process of ongoing self-evaluation. The process of regular IPEP-mandated evaluation is time-consuming, requires a lot of resources to support, and occurs infrequently (once every 10 to 12 years). During the time between evaluations, many things can change, such as the program's relevance to society, its enrolment, retention and graduation rates, etc. There are also outside influences that can affect evaluations such as directives from the Ministry of Education and reports and recommendations from the *Commission d'évaluation de l'enseignement collégial.* By implementing a process of ongoing self-evaluation, the College aims to help programs develop the expertise and the confidence to evaluate what is working properly within their programs so that they can take the appropriate steps to rectify any problems before they are identified as such within a formal program evaluation. Moreover, the data collected and analyzed during ongoing self-evaluation can be used for formal program evaluations, which should help to make the latter process more timely and efficient. Finally, for a program that has already undergone a formal IPEP-mandated evaluation, the ongoing self-evaluation process can help it to monitor the implementation of the recommendations stemming from the evaluation and to adjust, as necessary, the actions required to carry them out.

2.1.3.7 Additional Practices Related to the Quality Assurance of Programs of Study

Participation in the Canadian Medical Association Conjoint Accreditation Process

There are three Dawson programs that regularly participate in the Canadian Medical Association Conjoint Accreditation process. These programs are Biomedical Laboratory Technology (140.B0)[18], Diagnostic Imaging (142.A0),[19] Radiation Oncology (142.C0)[20]. These programs go through an accreditation process that certifies the program as compliant with national competency profiles set by the respective professional orders. The maximum period between accreditations is six year. The criteria that are assessed by the Canadian Medical Association for the accreditation include relevance, coherence, quality of teaching and student support, effectiveness, resources and management. Other criteria include safety, student confidentiality, evidence of continuous quality improvement and the existence of an effective mechanism for receiving and acting on stakeholder feedback.

The accreditation reports are written by program faculty and the reports are reviewed by the department, the program committee, the Dean of Science, Medical Studies and Engineering, and the program's Advisory Committee. The report is then sent to the Canadian Medical Association.

The three programs that are subject to accreditation by the Canadian Medical Association Conjoint Accreditation process have never been evaluated by the College with respect to the Institutional Program Evaluation Policy (IPEP).

During the period under review, two programs, Diagnostic Imaging (142.A0) and Radiation Oncology (142.C0), were in the process of being assessed for the purposes of renewing their accreditation with the CMA.

2.2   Assessment of the Effectiveness of the Quality Assurance Mechanisms for Programs of Study

The CEEC states in its Guidelines and Framework that it will render a ruling on whether the college's quality assurance mechanisms and their management ensure, generally ensure, partly ensure or do not ensure the continuous improvement of quality for each of the four components. The CEEC defines the effectiveness of a quality assurance mechanism as *its ability to ensure continuous improvement in quality in reaching its stated objectives.*[21] However, the CEEC does not provide definitions for their levels of effectiveness. Therefore, the Task Force has developed its own definitions for its assessment of the mechanisms and practices.

Bylaws and policies that are approved by Senate and/or the Board of Governors can be considered to be effective in ensuring continuous quality improvement if their objectives are clearly stated so that continuous quality assurance practices can be developed to support the objectives.

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[18] This program was accredited in 2011-2012 and is due for re-certification in 2017-2018.
[19] This program was accredited in 2008 -2009 and is due for re-certification in 2014-2015.
[20] This program was accredited in 2008 -2009 and is due for re-certification in 2014-2015.
[21] *Italics* provided by CEEC. Commission d'évaluation de l'enseignement collégial (CEEC) (March, 2013), *Evaluating the Effectiveness of Quality Assurance Systems in Québec Colleges,* page 18.

With respect to practices, three levels of assessment are used for this audit: ensures, somewhat ensures and does not ensure. "Ensures" means that the quality assurance practice always or almost always leads to continuous quality improvement. "Somewhat ensures" means that the practice only sometimes results in continuous quality improvement and "does not ensure" means that the practice rarely or never leads to continuous quality improvement. Continuous means on a regular ongoing basis. The Task Force also concluded that, in some cases, it did not have enough information to ascertain if a particular practice ensures continuous quality improvement.

Mechanisms and Practices Related to All IPEP Criteria

The main mechanisms and practices related to all the criteria used by the College to ensure continuous quality improvement for programs of study are Bylaw Number 6 – Concerning Senate, the Institutional Program Evaluation Policy (IPEP), the development and approval of program evaluation plans and evaluation reports, and the development of action plans. Bylaw Number 6 clearly states Senate's role in advising the Board of Governors about programs of study. Senate is the body that recommends program evaluation reports to the Academic Dean, but the reports are not reviewed by the Board of Governors unless they are being submitted to an outside body like the CEEC.

During the period of review, two programs were selected for evaluation. The Dean of Program Services reviewed the programs that were due to be evaluated as per IPEP with the Deans' Group. IPEP states that program evaluation occurs when a new or revised program has completed one cycle. Two programs that had been revised in 2010 fell under this criterion. These programs were the Accounting and Management Technology Program and the Business Management (Marketing) Program. In order to develop the evaluation plans the Office of Institutional Research was asked by the Office of Program Services in June 2013 to prepare a report on each program's Key Performance Indicators (KPIs). The KPI report for the Accounting and Management Program was completed at the beginning of October 2013 and the one for the Business Management (Marketing) Program was completed in mid-October. The KPI reports were reviewed by each program's faculty under the guidance of the professional staff in the Office of Program Services at a meeting at the end of October 2013 for the Accounting Program and at another meeting for the Marketing Program in November 2013. Focus groups with current students are usually held for the development of evaluation plans. However, focus groups were not held for either program because of the difficulty in recruiting a sufficient number of students. An evaluation plan for each program was developed with the input of two faculty writers (who were given release time) in Fall 2013. The plans included all six criteria listed in IPEP with a list of common questions used in the evaluation of technical/career programs and customized questions for each program. The plans were reviewed by several College bodies including each program's respective program evaluation committee, the Deans' Group, the Academic Planning Committee and finally, Senate. Senate recommended the evaluation plans to the Academic Dean in March 2014. Each of these bodies provided feedback and in some cases asked for modifications to be made to the plans. This feedback helps to ensure that the evaluation plans are appropriate to the program being evaluated and takes into account the efforts and opinions of the major stakeholders. **We conclude that the process of developing evaluation plans ensures continuous quality improvement.**

During the period of review, two programs were evaluated as per IPEP because they had been revised and had completed at least one cycle. These two programs were the Professional Theatre (Acting) Program and the Laboratory Technology: Analytical Chemistry Program. However, the College's experience with these program evaluations underscores certain challenges in conducting evaluations in practice that may, in part, be linked to weaknesses in IPEP.

The Professional Theatre (Acting) Program Evaluation Plan was recommended by Senate to the Academic Dean in the Winter 2010 semester. Most of the data gathering and analyses was completed by the end of the Fall 2010 semester and the writing of the report began in Winter 2011. The report was written by two faculty writers from the Professional Theatre Department and a professional in the Office of Program Services. A first draft of the report was completed by the start of the Fall 2011 semester. The review and revisions to the report by the Program Evaluation Coordinating Committee and the Program Evaluation Committee took another two and a half academic years. It was finally reviewed at two meetings of Senate in February 2014 and then recommended to the Academic Dean.

The reasons for the long delay in reviewing and approving the report were due to differences of opinion among the stakeholders. IPEP does not provide direction in such circumstances. There is some ambiguity in IPEP about the roles and responsibilities of the various vetting committees. There is a lack of clarity about the role of the Program Evaluation Committee. IPEP states that the PEC develops and recommends an evaluation plan but only develops an evaluation report and recommendations. In practice, PECs have always developed and recommended the plans and the subsequent reports and recommendations, but it is not clear what recourse exists if a PEC does not recommend an evaluation report. In theory, the Dean of Program Services and the sector dean could bring the report for recommendation to other vetting bodies or directly to the Academic Dean. IPEP also does not state if a plan or report needs a majority vote by the PEC to be recommended and what constitutes a majority vote (for example, a simple majority or a two-thirds majority). The composition of the PEC is also not clearly stated. IPEP states that a PEC is a Program Committee that is normally expanded to include various other stakeholders including at least one student in the program and a graduate. The Professional Theatre Department objected to having students and graduates on the PEC and used the word "normally" in IPEP as their justification. The Academic Dean and the Dean of Program Services insisted that students and graduates be recruited to sit on the Professional Theatre Program Evaluation Committee.

The mandate of one of the vetting bodies that review program evaluation reports (and plans for that matter) is not stated in IPEP. The Deans' Group, composed of all the sector deans, have an important role in deciding which programs will be evaluated and what resources will be allocated (i.e. teacher release time) for evaluation. The deans always review and sometimes suggest revisions to evaluation plans and reports, yet their role is not spelled out in IPEP.

There is no provision in IPEP about what happens if an evaluation is not completed as per the evaluation plan. This was the case with the evaluation of the Laboratory – Analytical Chemistry Program whose evaluation was started but never completed according to the evaluation plan recommended by Senate to the Academic Dean in March 2010. A truncated version of the report was completed by the Office of Program Services and presented to the Program Evaluation Committee and the Sector Dean in March 2013 but was never reviewed by other vetting bodies. IPEP also states that the dean responsible for the program or the Academic Dean can request an evaluation. The Academic Dean requested a partial evaluation of the Commerce Profile in the Social Science Program during the period of review. The report was prepared by the Office of Program Services with the assistance of the Assistant Dean of the Social Science and Business Technologies sector and a faculty writer from the Social Science Program. The Academic Dean provided a copy of the report to the Social Science Program Coordinator and the Commerce Profile Coordinator as well as the Dean of Social Science and Business Technologies. However, the report never went through the regular vetting process.

IPEP states that program evaluation should be conducted in a timely fashion but it does not state how long a normal program evaluation should take and what happens if an evaluation should take longer than expected. IPEP also states that programs should be evaluated at least every 10 years but given that the College has 26 DEC programs and 5 or 6 AEC programs that are offered on a regular basis but only a limited number of professional staff to guide and support these evaluations, it has not been possible to keep to this schedule. The Professional Theatre (Acting) Program was revised by competency in 2002 and the Laboratory – Analytical Chemistry Program was revised in 2003 but their program evaluations did not start until almost 10 years after revision. The last time an AEC program was evaluated was in 1997.

There are currently four DEC programs whose evaluation occurred more than 10 years ago and eight DEC programs that have been revised and had at least one cohort graduate, but have never been evaluated. Three of these programs are medical programs that participate in the Canadian Medical Association (CMA) Conjoint Accreditation process and have been excluded from an IPEP-mandated evaluation. The programs send reports to the CMA that present evidence of their efforts to meet the CMA criteria. All these criteria can be linked to the six criteria in IPEP. However, the reports do not evaluate the effectiveness of the various mechanisms related to these criteria and they do not summarize the programs' strengths and weaknesses or provide recommendations for improvement as is done in IPEP-mandated evaluations. Moreover, these reports do not undergo the same vetting process that is required of IPEP-mandated evaluations.

The College has been pilot testing an ongoing self-evaluation process for DEC programs and General Education departments, but it is too early to conclude if this practice leads to continuous quality improvement for programs of study. Also, the pilot projects have focused on one question from one of the seven criteria included in the Ongoing Self-Evaluation guidelines and the Academic Dean is reviewing whether this process is sufficient to ensure continuous quality improvement. The process has yet to be pilot tested with AEC programs and incorporated into IPEP.

IPEP states that the Academic Dean ensures that a plan of action arising from an evaluation report is created and implemented. In practice, the Academic Dean delegates the writing of the action plan to the sector dean whose program has undergone an evaluation. The Professional Theatre Program action plan was presented by the Dean of Creative and Applied Arts to the Academic Dean at a Deans' Group meeting in June 2013.

Based on the College's recent experiences with program evaluation and the weaknesses we have identified in IPEP and its application, we conclude that IPEP itself and the development and approval of evaluation reports somewhat ensure continuous quality improvement.

Practices Related to Program Relevance

The main practices for ensuring continuous improvement for program relevance are the data about graduate employment and graduate placement at university that is available to the College community on the Customized Academic Reporting System (CARS). The employment data is taken from the *Relance* data provided to the College. The *Relance* data is often incomplete in that it does not have data for some programs in any one year and the sample sizes tend to be small. The university placement data is provided by CREPUQ but is only for graduates of pre-university programs.

The Office of Institutional Research conducts its own annual Graduates' Destination Survey that is more comprehensive than the data provided by *Relance* on the employability of both technical program

graduates and pre-university graduates. The survey also provides data on pre-university and technical program graduates' post-DEC studies at university or at other educational institutions. The results of this survey are now part of a series of program reports on SharePoint and can be used by programs and sector deans to monitor program relevance. The data is also used in the development of program evaluation plans to ensure that any issues with a program's relevance are examined in a program evaluation.

Employer satisfaction is a Key Performance Indicator. Although employers are surveyed during the evaluation of a technical program, the College does not regularly collect employer satisfaction data except for the programs that undergo accreditation with the Canadian Medical Association. Success of graduates at university is also a Key Performance indicator, but the College has had difficulty in obtaining this information from universities.

Advisory groups can be another important source of information on the relevance of programs to the workplace and to universities. They contribute to the continuous quality improvement of programs of study. There is, however, no college policy that requires programs to have an advisory mechanism and not all programs have one. When a program is being developed or revised, the Office of Program Services establishes and consults an advisory group. As well, there are usually recommendations in evaluation reports that programs establish an advisory mechanism if they do not already have one.

We conclude that these two sources of complementary data, the *Relance* data and the result of the Graduation Destinations Survey, are effective in ensuring continuous quality improvement for program relevance. However, the College does not have formal mechanisms to receive ongoing feedback from employers and/or universities about all its graduates. We conclude that advisory mechanisms are effective, but there is no College policy requiring them and they are used only by some programs.

Mechanisms and Practices Related to Program Coherence

The main practice that ensures continuous quality improvement for program coherence is the program revision process established by the Dean of Program Services. However, the process itself is not governed by a College policy. Programs are revised following a recommendation in a program evaluation report, or because the sector dean or a program requests one to address particular issues with the program's coherence, or the Ministry has revised a program's competencies. The process involves consulting with many stakeholders including employers, universities, faculty and students. The revision document that is produced by a committee of faculty and Office of Program Services professional staff is reviewed and approved by the same vetting bodies that review and approve evaluation plans and reports. The revision document is finally approved by the Board of Governors. For example, the Laboratory Technologies – Analytical Chemistry Program was revised in 2013 because there was a recommendation in its evaluation report to revise the program so as to provide more training opportunities for students through longer internships and the opportunity of participating in a work-study program, or ATE (*Alternance travail etudes*). The revision began with the formation of an Advisory Group that included 11 industry representatives, faculty in the Chemistry Department, the Dean of Program Services, a professional from the Office of Program Services, the sector dean and the Academic Dean. The revision process started in March 2013 and was concluded in February 2014 with the approval of the program revision document by the Board of Governors. **The process ensures continuous quality improvement because it is timely and is based on data that comes either from program evaluation or from concerns expressed by the program's stakeholders such as faculty or students.**

The College's Institutional Student Evaluation Policy (ISEP) is a mechanism that is used to ensure program coherence. It stipulates what must be included on a course outline with respect to coherence i.e., statement of competency, the competency number, the elements of the competency, and whether the competency will be partially or fully addressed in the course. The main practice that is used for ensuring quality of program coherence is the preparation and approval of course outlines. Teachers are responsible for developing their course outlines according to ISEP and these outlines are checked by the department chairs for courses in Regular Day programs. Each dean specifies in a template what must be included on a course outline. AEC course outlines are checked by the Dean of Program Services. It is not clear who checks the course outlines for Continuing Education credit courses. One of the problems with this practice is that while course outlines are checked to see if they include all the items required by ISEP for course outlines, they are not often checked to see if these items are correct. For example, ISEP states that a course outline must include the competency statement and elements and the competency number. It appears that the course outlines are checked to see if these items are included but not if they are accurate. The accuracy of these items is systematically checked during a program's evaluation and it is has been discovered through this process that the items are sometimes incorrect. For example, a statement of competency listed on a course outline might have been changed so that its meaning no longer reflects the Ministry's original wording or a competency might be included on a course outline that is not reflected in the course-competency matrix approved by the Board of Governors. **Therefore, we conclude that ISEP ensures continuous quality improvement with respect to program coherence because it clearly states what must be included on a course outline, but the preparation and approval of course outlines only somewhat ensure continuous quality improvement for courses given in Regular Day programs and Continuing Education because they are not systematically checked for accuracy except during program evaluation.**

Mechanisms and Practices Related to the Quality of Teaching and Student Supervision

The main practice for ensuring continuous improvement in the quality of teaching is the Teacher Evaluation Policy, and its associated practices, for which the Office of Instructional Development is responsible. The policy has not been formally adopted by the College. New teachers who teach in Regular Day programs are evaluated annually and other teachers who teach in Regular Day programs are evaluated every two years. Teachers who receive low ratings are flagged by the Office of Instructional Development and all flagged surveys are reviewed by the sector deans who will then decide what follow up is necessary. The follow up sometimes includes having teachers work with professionals in the Office of Instructional Development. The sector deans also have access to College-level and department-level reports about the quality of teaching each semester and to summary reports for individual teacher's evaluations.

Teachers who teach in AEC Programs or Continuing Education credit courses are also evaluated on a regular basis by the College, but it is unclear if the process for evaluating them falls under the Teacher Evaluation Policy.

Although the Teacher Evaluation Policy has never been formally adopted by the Academic Administration, the practices associated with it are considered to be effective because they give the College information about the quality of teaching on a regular basis and this information is followed up by sector deans and the Office of Instructional Development as needed.

Other practices that the College uses to monitor the quality of teaching are the Instructional Effectiveness Subscale of the Student Satisfaction Inventory (SSI) and the Graduate Satisfaction – Point of Exit Survey. Both surveys are administered by the Office of Institutional Research. The SSI is administered about every four years and the Point of Exit Survey is administered annually. Both sets of reports present data at the College level and at the program level on the quality of teaching. The Point of Exit Survey results are used in the development of evaluation plans. **We conclude that the Graduate Satisfaction – Point of Exit Survey are effective in ensuring continuous quality improvement for the quality of teaching because they give teachers, sector deans and senior management regular and timely feedback. The Instructional Effectiveness subscale of the SSI ensures continuous quality improvement with respect to the quality of teaching. Although the SSI is conducted only every four years, it is still considered an effective mechanism because it gives the College valuable information about the quality of teaching from a large sample of students and comparisons can be made between data collection periods at the College level and at the program level.**

The main policy mechanisms used for quality improvement in student supervision are Bylaw Number 8 and its associated procedures and program standing and advancement policies. Bylaw Number 8 and its procedures are designed to help identify on a regular basis students who are at risk and to specify the actions students must take to improve. A program's standing and advancement policy is included in a program's revision document approved by the Board of Governors. The policies are also reviewed prior to Board approval by the College's Standing and Advancement Committee to ensure that rules about students' progression through a program are clearly spelled out and specify what steps the program may take for students who are not progressing normally, such as remediation and expulsion.

Two other practices that the College uses for student supervision are the Individualized Education Plan (IEP) and the mid-term assessment. The IEPs provide immediate and accessible information about their status in a program as well as providing information to sector deans, program coordinators, department chairs and staff in the Registrar's Office. For example, department chairs can track if the students are passing or failing certain pre-requisite courses based on the information on the IEPs. The mid-term assessments provide feedback to students about their performance so that they can take the necessary steps to improve. **Program coordinators also have access to summary mid-term assessment reports. It can be concluded that these mechanisms and practices ensure continuous quality improvement with respect to student supervision because the mechanisms clearly specify the rules and actions needed to provide adequate supervision of students and the practices are followed on a regular basis.**

Two other practices that the College has for student supervision are the Snapshot Reports of Students in Programs and Profiles and the Support for At-Risk Students (SOARS) Program administered by the Department of Student Services. The Snapshot reports give program coordinators information such as incoming Secondary V averages and English and French placement tests which help identify at-risk students. Teachers who believe that a student is at risk are encouraged to complete a SOARS referral form to one or more of the College's services for students such as the AccessAbility Centre, the Academic Skills Centre, and the Career and Counselling Centre. However, there is currently no mechanism in place to collate and review the types of referrals made and the effects of these referrals on students. **Therefore, the College cannot assess whether or not this practice leads to continuous quality improvement with respect to student supervision.**

Mechanisms and Practices Related to the Alignment of Human, Financial and Material Resources

The College has two main mechanisms related to the management of human resources. They are [Bylaw Number 4 – Human Resources Management](#) and the [Human Resources Management Policy](#). Bylaw Number 4 clearly spells out the processes for hiring, promotion and professional development of teaching and non-teaching staff. However, with respect to the evaluation of non-teaching staff, the bylaw states that these employees will be evaluated periodically, but does not specify what periodic means. The Human Resources Management Policy clearly outlines the guiding principles of effective human resource management. It specifies the College's expectations of its management and its employees.

The College has several practices that flow from these two mechanisms. With respect to faculty, there are specific hiring criteria for each discipline and the faculty staffing plan. These practices ensure that teaching resources are adequate to meet the educational needs of the program because they are reviewed on a regular basis by various stakeholders within the College such as the Academic Dean, the sector deans, the department and the Human Resources Department. The evaluation of faculty is conducted through an established set of procedures and is conducted on a regular basis. Faculty professional development is supported through the Professional Development Committee for Faculty, which oversees the application of the Faculty Professional Development Policy. Faculty professional development is also supported by the Office of Instructional Development which provides training and workshops for faculty on a variety of topics as requested. **The College does not have a profile of teaching competencies that clearly spells out what skills teachers should have or develop. Therefore, we cannot conclude if the activities that are provided by the Office of Instructional Development and the activities supported through the Faculty Professional Development Policy are effective in maintaining faculty motivation and skills level because no regular feedback (except for feedback about Pedagogical Day) is obtained from faculty on their professional development.**

The Staffing Plan for non-teaching personnel ensures that programs have an adequate number of managers, professionals and support staff. The plan is reviewed annually by various stakeholders including the Budget Allocation Committee, the respective *Comité de relations de travail* (CRT) for support staff and professionals, and the Board of Governors. Professional development for managers, professionals and support staff is supported through their respective professional development policies. The evaluation of professionals and support staff, as stated in their respective evaluation policies, is designed to identify professional development needs and to provide support in meeting them. The College supports professional development for all categories of staff through the subsidization of non-credit courses offered by the College's Center for Training and Development. The Centre tracks the categories of staff who take courses and the types of courses they take. The Human Resources Department provides workshops for support staff and supports an annual support staff professional development day. Professionals in the College do not receive specific training from the College, but the College's professional development policy supports individual professional development activities and group professional development activities. **We cannot conclude if the activities that are provided by the College for non-teaching staff are effective in maintaining their motivation and skills level because no regular feedback is obtained from them on their professional development.**

Managers, professionals and support staff are required to be evaluated according to their respective evaluation policies. Managers are evaluated on an annual basis through a process that is overseen by the Director General, but according to Bylaw Number 4 non-teaching staff are to be evaluated periodically without specifying what periodic means. The College has no mechanism to track when and how often non-teaching staff are evaluated.

The College obtains feedback from teaching staff and non-teaching staff about management, communication and professional development through the Departmental Opinion Survey. **However, the survey is conducted infrequently, and therefore cannot be considered a mechanism that ensures continuous quality improvement with respect to human resource management and professional development.**

The College has two main mechanisms related to the management of financial and material resources. They are Bylaw Number 5 – Concerning the Financial Management of the College and the Operating Budgets – Development and Management – Policy and Procedures. Bylaw Number 5 clearly spells out the principles for the financial management of the College's budgets and the second document specifies the procedures for the development of the annual operating budget. The College has several practices that flow from these two mechanisms. They are the development and approval processes for the operating budget and the capital budget. **These practices ensure that financial and material resources are adequate to meet the educational needs of programs because they are reviewed on a regular basis by various stakeholders within the College such as the managers, programs and departments, and the Board of Governors.**

Space requirements for programs are reviewed on a regular basis by the College's Space Allocation Committee and therefore this committee ensures continuous quality improvement for program material resources.

Mechanisms and Practices Related to the Effectiveness of Programs of Study

ISEP is an important mechanism related to the effectiveness of programs of study. One of the objectives of ISEP is that students receive clear, timely and complete information about course and program content, objectives, standards, requirements, grading schemes, and evaluation instruments and methods. ISEP specifies that course outlines should include the grading scheme and the grade assigned to each assessment item. **However, ISEP does not specify that the assessment practices should be linked to the competencies attached to the courses. ISEP also does not include a stipulation that all courses must have a final assessment, as recommended by the CEEC to the College in December 2011 and in April 2014.**

Two other institutional mechanisms for the quality assurance regarding the effectiveness of programs of study are Bylaw Number 7 – Special Conditions for Admission and the Key Performance Indicators. Bylaw 7 clearly states the rules for admission into the College.

The Key Performance Indicators include pass rates, retention rates, graduation rate, student satisfaction, and graduate satisfaction. Other indicators such as placement rates with employers, employer satisfaction and placement rates with universities are covered under the Program Relevance criterion. Data on the Key Performance Indicators is regularly tracked and updated by the Office of Institutional Research and maintained on the Customized Academic Reporting System. This database is available to managers, program coordinators, department chairs, teachers and staff. The database is often a source

of information when conducting program evaluations. The Key Performance Indicators are also now included in a series of reports on another database, SharePoint. There are 14 reports on these indicators, which will be updated annually and will be sent to sector deans and program and profile coordinators. The reports are also currently being used for the ongoing evaluation process to give programs and departments information that may guide them in the development of their ongoing evaluation projects. **We conclude that the Key Performance Indicators and the two databases in which they are housed ensure continuous quality improvement because they give the College timely and relevant information about the effectiveness of programs of study. However, the targets for two of the three KPIs, third-semester retention rates and graduation rates in prescribed time have not been updated since 2001 and the targets for course success rates have not been updated since 2004.**

The College also has at its disposal several surveys to track the effectiveness of programs. These are the Student Satisfaction Inventory, which gathers data on various topics from a large sample of Regular Day students and Continuing Education students. The survey is run about every four years by the Office of Institutional Research and the results are presented to the academic administration, the College community and the Board of Governors. The College uses this data to track the effectiveness of academic programs and also non-academic services and to take the necessary actions to address weaknesses identified in this report. **Although the SSI is conducted only every four years, we consider it to be an effective mechanism because it gives the College valuable information on a variety of topics from a large sample of students and comparisons can be made between data collection periods at the College level and at the program level.**

The Office of Institutional Research also conducts another survey on an annual basis that provides the College with information on the effectiveness of its programs. This survey is the Graduate Satisfaction Point of Exit Survey for Regular Day students. The Graduate Satisfaction Survey results are sent to the Director General, the Academic Dean and the sector deans. Program coordinators, department chairs and the Office of Program Services have access to this data on CARS and SharePoint. The data is often used in the development of program evaluation plans. Sector deans use the data to identify programs that may be having difficulties and may subsequently recommend that a program undergo an evaluation. **The College concludes that this survey ensures continuous quality improvement because it gives the College timely and relevant information about the effectiveness of DEC programs of study.**

The Office of Institutional Research also conducts an annual survey of AEC graduates. The results of this survey are sent to the Director General, the Academic Dean, the sector deans, the Dean of Program Services and International Development, who is responsible for AEC programs, and the AEC Manager. The Dean of Program Services and International Development reviews the report with the AEC Manager and determines if there are specific areas that need to be addressed. The Office of Institutional Research also has data on enrolment and the number of graduates on CARS for AEC programs, but this data has not been updated since 2009. **The College concludes that the survey of AEC graduates ensures continuous quality improvement because it gives the College timely and relevant information but that the data on CARS is only somewhat effective because it is not kept up to date.**

Students who take Continuing Education credit courses outside of AEC programs are not usually surveyed. The Academic Dean has undertaken a survey of Continuing Education students to determine their level of satisfaction with existing services and where improvements are needed.

Mechanisms and Practices Related to the Quality of Program Management

The main mechanisms for the quality assurance of programs of study are Bylaw Number 9 – The Management of the Programs of Study and the Role of Program Committees and Departments. Bylaw Number 9 clearly spells out the roles and responsibilities of senior management and programs and departments with respect to the elaboration of programs, program implementation, program evaluation and program revision.

The Roles of Programs and Departments document lists three main responsibilities of program committees and departments. The first two of these responsibilities fall under the criterion of program coherence and the third falls under the criterion of fair and equitable evaluation. There is nothing in this document that can be linked to the other criteria for ensuring the continuous quality improvement of programs of study such as relevance, effectiveness, quality of teaching and student supervision and the appropriateness of human, financial and material resources. **Therefore, we conclude that this document is only somewhat effective in ensuring continuous quality improvement for programs of study.**

According to the Roles of Programs and Departments, all programs are required to have a constitution that describes its composition, substructures and the assignment of responsibilities. Sector deans can refer to the constitutions to ensure that programs are fulfilling their mandates such as holding program committee meetings and preparing annual reports. All three sector deans require their programs of study to submit an annual report and work plan. Each dean has a template that programs can use for the preparation of the annual reports and the work plans. Although the templates are somewhat different from sector to sector, they all require programs to report on certain Key Performance Indicators such as enrolment, graduate satisfaction, course success rates, retention, graduation and incoming Secondary V average. Programs are required to address any weaknesses in their annual work plans. Programs are not required, however, to report on other criteria related to the management of programs of study such as relevance and coherence. **Therefore, we consider that annual reports are somewhat effective in ensuring continuous quality improvement because they do not include a standard set of criteria across all sectors.**

Another important mechanism related to program management is ISEP. ISEP lists the responsibilities of programs with respect to the evaluation of student achievement but the evaluation of ISEP that the College conducted in 2008 included a recommendation to clarify these roles and responsibilities because they were not deemed to be clearly stated. **This recommendation has not yet been addressed.**

The College has been pilot testing a process of ongoing self-evaluation of programs since January 2012. Programs have volunteered to examine one of the six IPEP criteria and to prepare a summary report that is included in their program's annual report. To date, 12 programs and all four General Education Departments have participated in the process of ongoing self-evaluation. It is too early to conclude if this process leads to continuous quality improvement for programs of study. One of the challenges in supporting this process is that the release time that has been allocated to it has come from a special fund approved by the Board of Governors for the implementation of the Strategic Plan. The challenge now is to incorporate ongoing self-evaluation into the College's regular operations and its regular sources of funding for release time and to determine if the current pilot process is sufficient to provide sufficient information.

2.3.   Review and Update of the Main Quality Assurance Mechanisms for Programs of Study

The Board of Governors adopted the <u>Institutional Program Evaluation Policy (IPEP)</u> in 2005. The College revised the policy to reflect the changes to the management structure in 2005 and the revised version was adopted by the Board of Governors in June 2006. IPEP states that the policy will be reviewed by Senate every five years, but the policy has not been reviewed at Senate since 2006. The Academic Dean is responsible for the application of the policy.

The Institutional Student Evaluation Policy (ISEP) is currently being revised and the process of revising it and the revisions that have been made to date are described in section 3.3 of this report. <u>Bylaw Number 4 – Concerning Human Resources Management</u> was first adopted by the Board of Governors in 1988. It has been amended five times since then with the latest amendments taking effect in March 2004. <u>Bylaw Number 5 – Concerning the Financial Management of the College</u> was adopted in 1988 and has been amended five times. The last amendments were adopted by the Board in 2010. <u>Bylaw Number 6 – Concerning the Senate</u> was adopted in 1993. It has been amended four times since that time and the latest amendments were adopted by the Board of Governors in June 2010. <u>Bylaw Number 7 – Concerning Special Conditions for Admission</u> was adopted in 1994 and has never been amended. <u>Bylaw Number 8 – Concerning the Promotion of Academic Success</u> was adopted in 2001 and has been amended twice. The last amendments were made in 2004. Three bylaws (Number 4, 5, and 7) do not specify who are the key persons responsible for their implementation. However, <u>Bylaw Number 1</u> lists the responsibilities of each of the College's officers.

The <u>Human Resources Management Policy</u> was adopted by the Board in 2004 and has never been amended. The <u>Roles of Program Committees and Departments document</u> was recommended by Senate to the Academic Dean in 2006 and has never been amended. It is not clear if this document is a policy. The College's <u>Key Performance Indicators</u> were adopted by the Board of Governors in 2001 and have never been amended except for the course success rate targets that were amended in 2004 by the Academic Dean.

2.4   Recommendations

Based on the assessment of the quality assurance mechanisms for programs of study, it is recommended that:

1. IPEP be reviewed and revised as necessary.
2. A requirement for programs to have an advisory mechanism to ensure program relevance be included in College policy.
3. The College take steps to improve the mechanisms used to ensure the accuracy of course outlines with respect to program statements of competency.
4. The status of Continuing Education teachers be clarified in the Teacher Evaluation Policy and that the policy be formally adopted by the Academic Administration.
5. The College evaluate the effectiveness of the Support for At-Risk Students Program.
6. The College develop a profile of teaching competencies and a plan to further develop them among Dawson faculty.
7. The College obtain and respond to regular feedback from faculty and staff about their professional development needs and activities.

8.   The College ensure that professionals and support staff are evaluated regularly as per their respective evaluation policies.

9.   The College review the Key Performance Indicator targets and revise if necessary.

10. The data on CARS about AEC programs be updated on a regular basis.

11. The Roles of Programs and Departments document be revised with respect to the six IPEP criteria.

12. Program annual reports include a standard set of criteria across all sectors.

SECTION III: QUALITY ASSURANCE MECHANISMS FOR THE EVALUATION OF STUDENT ACHIEVEMENT

3.1.   Description of Quality Assurance Mechanisms for the Evaluation of Student Achievement

The CEEC lists two sub-criteria in its guidelines and framework that should be taken into account in the College's description and assessment of its quality assurance mechanisms for the evaluation of student achievement.[22] These two sub-criteria are:

1) Fair evaluation of student achievement
2) Equitable evaluation of student achievement

This section of the report (3.1) describes the three main categories of the quality assurance mechanisms and their links to the two criteria. It is the College's opinion that these two criteria are not mutually exclusive and, therefore, we are presenting the description of the mechanisms and practices related to them together. In section 3.2, an assessment of the effectiveness of the three categories of mechanisms is presented. In section 3.3, a critical assessment of the practices and procedures for the review and updating of the College's main mechanisms for programs of study is presented. Recommendations to improve the mechanisms are included in section 3.4.

3.1.1   Institutional Mechanisms Governed by Regulations Related to the Commission's Mandate

Institutional Student Evaluation Policy (ISEP) – Dawson College

The policy that covers the evaluation of student learning at Dawson is called the Institutional Student Evaluation Policy (ISEP). The Board of Governors approved the first version of ISEP in July 1994. It was last amended in September 2011.

The policy includes 10 objectives:
1. *To ensure that information about the methods of evaluation of student learning employed at Dawson College is available to the College community and to the public at large.*

2. *To ensure that students receive clear, timely and complete information about course and program content, objectives, standards, requirements, grading schemes, and evaluation instruments and methods.*

3. *To ensure that mechanisms exist for the development and application of suitable and equitable methods of evaluating student learning, for each course and each program in the college.*

4. *To identify the various individuals and groups who are responsible for the application of the policy, and to define their roles and responsibilities.*

5. *To state the principles underlying the granting of course equivalences, substitutions and exemptions, and the mechanisms by which these principles are implemented.*

6. *To state the mechanisms which are to be used by the College in recommending the granting of diplomas.*

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[22] Commission d'évaluation de l'enseignement collégial (CEEC) (March, 2013*), Evaluating the Effectiveness of Quality Assurance Systems in Québec Colleges,* pages 21 to 23.

7. *To ensure that a Comprehensive Assessment has been developed and implemented for every DEC program in the College.*

8. *To ensure that mechanisms are in place to verify that students who graduate from programs have attained the objectives and met the standards set by the Ministry of Education and the College.*

9. *To ensure the existence of application of program advancement and academic standing policies.*

10. *To identify the mechanisms to be used in monitoring application of this policy.*

The following individuals and bodies are responsible for monitoring the implementation of ISEP:

1. *Academic Dean*
   The Academic Dean will assure the Board of Governors of the integrity of the evaluation process based on periodic reports from the sectors, as detailed below. Although charged with overall responsibility for its operation, the Academic Dean is not directly involved in the implementation of the ISEP.

2. *Senate*
   The Senate will conduct an annual general review of the validity of the policy and its implementation, and present its findings to the Academic Dean.

3. *Sector Deans*
   On a yearly basis, Sector Deans report to the Academic Dean, certifying the current status and general functioning of the evaluation process at the department and program levels, as well as detailing any steps required to improve it.
   When it comes to the attention of a Sector Dean that an academic department or program may not be abiding by College policies, the Sector Dean should take such measures as are appropriate to discover the facts, and if necessary, correct the situation.

4. *Departments and Program Committees*
   Departments and Program Committees use such means as they deem appropriate to monitor content and structure of course plans, and the structure and implementation of grading schemes. On a yearly basis, they report to their Sector Dean detailing their procedures, any alterations to those procedures currently being undertaken, the current status and general statistical picture of the evaluation process, as well as the number and disposition of grade reviews undertaken during the reporting period. The report for an academic year shall be presented to the Sector Dean not later than the following September 30th.
   When it comes to the attention of the coordinator of a program or the chair of an academic department that a teacher may not be abiding by College policies, the chair or coordinator should take such measures as are appropriate to discover the facts, and if necessary, correct the situation.

The Director of Information Systems is responsible for making accessible data which is needed by departments and programs in order to comply with the verification and reporting requirements for grievance monitoring mechanisms.

The Dean of Academic Systems is responsible for systems that are used to execute a range of procedures, such as equivalences, substitutions, and exemptions, which affect, verify or certify students' academic status in the College.

Institutional Policy on the Evaluation of Student Achievement (IPESA) – Kiuna Institution

The policy that covers the evaluation of student learning at the Kiuna Institution is called the [Institutional Policy on the Evaluation of Student Achievement](#). Dawson's Board of Governors approved the policy in April 2011.

The policy includes six objectives:

1. *To ensure a fair and equitable evaluation of student learning;*
2. *To define a set of rules and standards that can ensure the quality of evaluation of student learning;*
3. *To specify the roles and responsibilities of individuals and groups involved in the evaluation of student learning;*
4. *To inform the college community about the rules and standards for evaluation of student learning;*
5. *To contribute to the professional development of teachers and to the improvement of practices related to the evaluation of student learning;*
6. *To assure the quality of education offered at the college and the value of diplomas and certificates.*

The Academic Dean of Dawson College is responsible for monitoring the application of the policy and ensuring that the necessary corrective actions are taken. She must also report to Dawson's Board of Governors regarding the application of the policy. Dawson College's Board of Governors is responsible for the following:

1. *Adopting the Institutional Policy on the Evaluation of Student Achievement of the First Nations Postsecondary Institution and any amendments made to it.*
2. *Recommending to the Minister to award a diploma to students who have satisfied the requirements of a program leading to the Diploma of College Studies (DEC).*
3. *Awarding certificates to students who have satisfied the requirements of a program leading to the Attestation of College Studies (AEC).*

3.1.2   Institutional Mechanisms for Dawson College

Academic Integrity Policy

Dawson's Board of Governors approved an [Academic Integrity Policy](#) in April 2012. The goal of the policy is to promote academic integrity as an abiding value for the entire Dawson community.

Program Evaluation Reports

Topics related to the fair and equitable evaluation of student achievement are examined in a program's evaluation. During an evaluation, the program's assessment methods and tools are examined in order to determine whether faculty have delivered program objectives at the established standards. A program's course outlines are also examined to ensure that they include information on how students are graded.

The Comprehensive Examination is reviewed in order to determine if it adequately evaluates the skills, knowledge and attitudes as outlined in the program's Exit Profile. Equity of evaluation is examined if a program has multiple sections of a course given by different teachers. The evaluation also determines whether there are effective mechanisms in place to ensure that a program is in compliance with ISEP.

Policy on Ombudservices

The objective of the Policy on Ombudservices is to delineate the roles, responsibilities, sphere of activity, reporting structure and process for nomination of the ombudspersons of Dawson College. The policy was adopted by the Board of Governors in February 2002 and this version remains in effect. The Ombudsperson is appointed by the Executive of the Board of Governors.

The policy covers the following:
- *Mandate of the Ombudspersons*
- *Operating principles of Ombudservices*
- *Specific roles of the Ombudspersons*
- *Reporting structure*
- *Appointment of Ombudspersons*

One of the roles of the Ombudsperson is to act as an information or referral source and has the mandate to deal with Regular Day and Continuing Education student complaints.

Ombuds Reports

As per the Policy on Ombudservices, the Ombudsperson presents an annual report to the Board of Governors summarizing the type of issues and concerns that students have brought to her attention or sought help in resolving. The Ombudsperson presents the report at a Board of Governors meeting, usually in the Fall semester, and answers questions about the report. The Ombudsperson also presents the report to Senate after the presentation at the Board. The number of grade reviews per sector and how they were resolved, and issues with course outlines were presented in the 2012-2013 Ombudsperson's report. The report also had two recommendations; one pertaining to the Grade Review procedures and one about course outlines. The 2013-2014 Ombudsperson's Report had recommendations dealing with timelines for grade reviews, evaluation of internships and course outlines.

3.1.3 Institutional Practices at Dawson College

Program and Department Annual Reports

ISEP requires programs to submit an annual report to their respective sector dean on the assessment (grading) used in their programs as well on the number and disposition of grade reviews undertaken. Each of the sector deans has a template for program annual reports.

The Dean of the Creative and Applied Arts sector requires programs to report on academic grievances and grade reviews. The Dean of Social Science and Business Technologies requires programs to report on the grade distribution by course section. The Dean of Science, Medical Studies and Engineering does not require programs to report on anything specifically related to ISEP but asks them to comment on the indicators that they usually refer to such as grade statistics, grade reviews, etc.

Preparation and Approval of Course Outlines

ISEP stipulates that each course outline must include information about how students are evaluated. Department chairs and sector deans review course outlines to ensure that information about evaluation of student achievement is included.

Reports on Academic Grievances and Grade Reviews

ISEP outlines two appeals procedures that are available to students in Regular Day programs and Continuing Education who are dissatisfied with their evaluation in a specific course:

- Academic Grievance
- Grade Review

ISEP states that an Academic Grievance is a procedure used by a student who has a disagreement with a teacher during the semester. When a student has a disagreement with the teacher over a final grade, that dispute is dealt with, according to ISEP, through a Grade Review. In practice the academic grievance procedure is used for any matter that does not directly affect a student's grade while the grade review process is used for disputes about all grades. These practices were put into place as a result of an agreement of interpretation of the Faculty Collective Agreement by the Dawson Teacher's Union (DTU) and the College.

The sector deans keep statistics on the number of grade review files that are handled in their sectors, the number of Grade Review Committees that are convened in each academic year, and the number of grades that are changed as a result of the formal grade reviews. Grade review statistics are usually presented in the annual Ombudsperson's Report that is presented to the Board of Governors.

Procedures for Ensuring Academic Integrity

The College has established several procedures to ensure academic integrity. The Academic Dean sends out a letter to all teachers informing them that they must report all instances of cheating and plagiarism to their respective deans. In order to minimize the opportunities for cheating, teachers are also instructed not to leave student papers, assignments, or tests outside their offices. The Academic Dean also advises teachers that they should ensure that their door code is protected and that all student assignments, graded or not, should be stored in a secure location.

The Office of Instructional Development (OID), which is responsible for final examination procedures, has taken a number of steps to ensure the academic integrity of final examinations.[23] Students who are writing final examinations are given a Final Examination Cover Sheet that lists the Final Examination Rules. They must read and sign it before writing the exam. OID has developed a system using mini-iPads in which staff who are invigilating the exams record the student's name and desk number. Students are not permitted to have a cell phone or any other electronic equipment in the exam room. If they are caught with any electronic device, they are ejected from the exam room and cannot complete the exam. The Security service plays a heightened role during the final examination period by monitoring the cameras that are installed in the exam rooms.

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[23] The final examination period takes place at the end of each term once classes have ended.

The OID has worked with the Student AccessAbility Centre to review examination procedures and to ensure the implementation of examination rules during tests administered by the Centre. The OID has also introduced a number of security procedures that had already been implemented in Regular Day for examinations organized by the Coordinator, Pre-University Studies in Continuing Education.

At the end of each final examination period, the Examination Coordinator submits a written report concerning the final examination process to the Dean of Instructional Development.

Grade Distribution Grade Reports (CARS)

Data is available on CARS for multi-section courses given in Regular Day programs for each semester and shows the course number, the section number, the number of registered students, the distribution of grades, the average grade, the number and percentage of students taking the course for the first time and the number and percentage of repeaters, and students' relative performance. The relative performance data shows how students are doing in the course sections relative to their overall grades. The Dean of Social Science and Business Technologies requires programs to review the grade distribution grade reports in their annual reports.

Comprehensive Examination Approval Procedures

The content and format for Comprehensive Examinations are included in program revision and program development documents, which are reviewed by the College's Senate and approved by the Board of Governors.

Procedures for Granting Substitutions and Equivalences

The process of granting substitutions is the overall responsibility of the Dean of Academic Systems. Academic Advisors, who are the professionals directly involved in the granting of substitutions, report to the Dean of Academic Systems. Substitutions are usually granted without students having to request them. As part of the standard admissions procedure, Academic Advisors examine the Individualized Educational Profile (IEP) of each incoming student to see whether the student has already passed any CEGEP courses and, thus, evaluate whether he/she might be eligible for a substitution. There are exceptions (for example, when a student moves from a career program at another CEGEP to a career program at Dawson, they must consult their new program coordinator regarding specific education substitutions that are possible). Each student's IEP can be scrutinized a number of times – always upon admission, and before registration for returning students, and sometimes during the registration process at the request of a student – to ensure that all possible substitutions are discovered. Students are consulted by an advisor if need be (for example regarding the desirability of a complementary substitution). When the substitution is granted and a transaction report is generated, which includes the corresponding courses, the information is entered and verified in *SOCRATE*[24] and added to the student's file. The IEPs are then mailed to students and are also made available online. Students may request a meeting with an Academic Advisor if they have questions.

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[24] Système de gestion de données d'élèves au collégial.

The granting of equivalences is also under the overall responsibility of the Dean of Academic Systems. The direct responsibility lies with the Manager of Admissions and Scheduling who supervises the Equivalence Officer, a clerk who works in the Admissions Office. The Equivalence Officer maintains an Equivalency Guide which lists all the courses that have been evaluated and accepted as equivalent to Dawson's courses. For each course in the Equivalency Guide, the initials of the Department Chair who accepted the equivalence and the date of the assessment are noted. The guide is updated by the Equivalence Office when new courses are assessed. The guide is also updated whenever departments reassess previous equivalences. If a student requests an equivalence for a course already assessed and entered in the Equivalency Guide, the course equivalence is granted. Students must have received a passing grade for the course.

When students request equivalences for courses that have not already been assessed, the file is sent to the appropriate Department Chair along with all supporting documents (official transcripts, and detailed course descriptions). As part of the assessment, the student may be interviewed and/or tested. All decisions related to course equivalences approved by department chairs are subsequently entered in the Equivalency Guide.

When requests for equivalence are approved, students receive a letter confirming the approval, as well as a copy of their transcript. The mention EQ and the credit weight appear next to the equivalent course once students are registered at the College. Students are advised to contact the Equivalence Officer or an Academic Advisor if they require additional information. The College has never granted an exemption, although it is included in ISEP.

Feedback from Students

The College obtains feedback from students about fair and equitable evaluation of student achievement through two surveys that are conducted on an ongoing basis by the Office of Institutional Research. These surveys (described in Section II of this report) are the Graduate Satisfaction Point of Exit Survey and the Student Satisfaction Inventory. Both surveys include questions pertaining to fair and equitable evaluation of student achievement.

3.1.4   Institutional Practices at the Kiuna Institution

Preparation and Approval of Course Outlines

Course outlines are discussed and approved by the program committee before being distributed to students. The program committee develops a common framework for all courses in the program so that items such as cheating and plagiarism are dealt with in the same way.

Student Pedagogical Guide

The Student Pedagogical Guide is distributed to all students. It contains a condensed version of the IPESA as well as other pertinent academic information.

Grade Reviews

At present, Kiuna follows Dawson's procedures and uses its forms. Students are informed about the Grade Review procedure in Kiuna's Pedagogical guide.

There are two types of grade reviews, priority and regular. Students apply for "priority" grade reviews when the review is time sensitive, that is, before they receive their final course schedule for a new term and have started the term. The priority review avoids a situation where a student might be obliged to change classes a few weeks into a term. Not being time sensitive, the regular review can be applied for no later than two weeks into a semester.

Kiuna does not have an Ombudsperson but students can request an academic advisor to be present at a grade review committee.

Comprehensive Examination

The Program Committee has established a Comprehensive Examination and a common evaluation grid. Using the final content of the integrative seminar, the program has worked backward to ensure that all competencies are addressed in the right sequence.

Verification of Course Outlines and Assessment Tools

The course package, consisting of PowerPoint presentations, course outline, evaluations and evaluation grids are placed in Dropbox. A random selection of course packages is verified by the program committee.

3.2 Assessment of the Effectiveness of the Quality Assurance Mechanisms for the Evaluation of Student Achievement

Dawson's [Institutional Student Evaluation Policy (ISEP)](#) is an effective mechanism for the evaluation of student achievement because it has clear objectives and procedures related to the fair and equitable evaluation of student achievement. However, the current practices for academic grievances and grade reviews do not reflect what is currently in the policy. The policy details the individuals and bodies that are responsible for the implementation of ISEP. One of these bodies is Senate. Senate is responsible for conducting an annual general review of the validity of the policy and its implementation and to present its findings to the Academic Dean. However, Senate did not conduct such a review during the period of review for this audit. Recommendations to improve the policy that are included in the ISEP Evaluation Report of 2008 have been or are currently being addressed by the College.

The [Academic Integrity Policy](#) is a new policy for Dawson and it is too early to conclude if it is effective as a quality assurance mechanism for ensuring fairness and equity. However, the College has established procedures for ensuring academic integrity and these procedures are regularly reviewed and reported on by the Office of Instructional Development. These reports are shared with the Deans' Group, which is chaired by the Academic Dean, and with Senate.

Program [evaluation reports](#) are effective mechanisms because they include information on whether faculty have delivered program objectives at established standards and whether there is equity of evaluation in multi-section courses. Students are surveyed in an evaluation about their perceptions of fairness and equity and teachers are asked to provide information on how they grade students. The evaluation reports include an analysis of the link between the Comprehensive Examinations and programs' Exit Profiles and also examines whether there are effective mechanisms in place to ensure that programs are in compliance with ISEP.

The **Policy on Ombudservices** is an effective mechanism because it clearly states the roles and responsibilities of the Ombudsperson with respect to students' concerns including those that relate to fairness and equity in grading. The Ombudsperson's Report is an effective mechanism because it describes and provides data on the types of issues and concerns students have had in a given academic year. The report is reviewed by the Board of Governors and Senate on an annual basis. Issues arising from this report are addressed by the Academic Dean and the deans.

Program and department annual reports are required by ISEP to include information on grade reviews, but the annual report template for only one of the sectors includes this stipulation. However, the sector deans keep track of all the grade reviews in their sector and, therefore, programs may not need to report on grade reviews. **The data that the sector deans keep on the number of grade reviews handled in their sector is an effective mechanism because it provides the deans with a good overview of issues related to fairness and equity on an ongoing basis.**

ISEP stipulates that each course outline must include information about how students are evaluated. Department chairs and sector deans review course outlines to ensure that information about evaluation of student achievement is included**. However, this practice is only somewhat effective because the assessment practices are not systematically checked to see if they actually evaluate students' attainment of the competencies to ministerial standards.** This type of analysis is usually carried out in a program's evaluation, but because programs are evaluated every 10 years or more, the College does not have a regular ongoing mechanism to ensure that assessment practices evaluate competencies.

Data about the grades in multi-section courses given in Regular Day programs for each semester is available on the Customized Academic Reporting System (CARS). **This database is an effective practice because it gives sector deans and department chairs ongoing data on students' performance in multi-section courses, which is used to identify problems among sections with respect to equity of evaluation. However, only one of the sector deans requires programs to review and report on grade distribution in their annual reports.**

The Comprehensive Examination approval procedure is an effective mechanism because a description of the Comprehensive Examination is included in all program revision and program development documents, which are developed by program committees and are reviewed by the College's Senate and Board of Governors. The approval procedure ensures that the Comprehensive Examination addresses the Specific Education and General Education components for each program through the inclusion of various stakeholders in its development and final adoption by the Board of Governors.

The granting of substitutions and equivalences are done following detailed procedures that have been established by the Dean of Academic Systems. Substitutions are recorded on students' Individual Education Profiles (IEPs), which are scrutinized a number of times by professionals in Academic Systems. Students are informed about the substitution on their IEPs and can consult with a professional if they have questions about the substitution. The Department of Academic Systems maintains an Equivalency Guide, which lists all courses that have been evaluated and accepted as equivalent to Dawson's courses. **The procedures for granting substitutions and equivalences are considered to be effective because they are carried out systematically and are reviewed on an ongoing basis.**

The Graduate Satisfaction Point of Exit Survey and the Student Satisfaction Survey, which are conducted on a regular basis by the Office of Institutional Research, are effective practices because they give the College management as well as programs student feedback on fairness and equity on an ongoing basis. The results of these surveys are used by management to identify problems related to fairness and equity.

The Kiuna Institute's [Institutional Policy on the Evaluation of Student Achievement (IPESA)](#) is an effective mechanism because it describes the principles of the evaluation of student learning, provides definitions of formative and summative evaluations, lists clear objectives and provides a list of responsibilities for students, teachers, the program committee, the Institute's Academic Council, the Registrar, the Academic Dean of Dawson College, and Dawson's Senate. The detailed responsibilities of the program committee have led to the development of effective practices such as the development of a [Student Pedagogical Guide](#), a grade review procedure, a procedure for the development and implementation of the Comprehensive Examination, the preparation and approval of course outlines, and the verification of course outlines and assessment tools. Moreover, the practices are effective because the campus is small enough that the Associate Director, program coordinator and pedagogical adviser can closely monitor and control what happens, frequently on a one-to-one basis with teachers.

3.3. Review and Update of the Main Quality Assurance Mechanisms for the Evaluation of Student Achievement

The evaluation of the Institutional Student Evaluation Policy (ISEP) was conducted by the College in 2007-2008. The report was adopted by the Board of Governors in June 2008 and submitted to the CEEC for review. The report included 25 recommendations and an action plan.

Following the 2008 evaluation, the College revised the Academic Grievance and Grade Review Procedures in the policy. The Board of Governors adopted the revised policy in June 2009. Further revisions were made to the 2009 version of the policy. These revisions focused on what should be included on course outlines, a statement related to attendance and procedures for the granting of AEC diplomas. The revised policy was [adopted by the Board](#) in September 2011.

The rest of the recommendations from the 2008 ISEP Evaluation Report are being reviewed and addressed by the ISEP Committee, which is chaired by the Dean of Program Services. This committee, which is a sub-committee of Senate, includes sector deans, faculty, a professional, a support staff member, students, and the Ombudsperson. At the time of the writing of this report, the committee was reviewing recommendations pertaining to lateness and participation, summative assessments, new procedures for professional conduct and procedures for student appeals related to off-campus physical education courses. In addition, the committee is reviewing the literacy policy.

The [Academic Integrity Policy](#) was approved by the Board of Governors in April 2012. The Academic Integrity Committee, which is chaired by the Dean of Social Science and Business Technologies, is currently developing procedures and practices to support the policy. This committee is composed of the Chair, two teachers and three professionals. The dean has been given the mandate by the Academic Dean to convene the sector deans, teachers, professionals and other members of the community to discuss how best to promote academic integrity in non-final exam settings.

3.4   Recommendations

Based on the assessment of the quality assurance mechanisms for the evaluation of student achievement, it is recommended that:

13. The College develop mechanisms to ensure that assessment practices are systematically checked on an ongoing basis to ensure that they evaluate students' attainment of competencies to ministerial standards.

14. ISEP be revised to reflect current practices with respect to academic grievances and grade reviews.

SECTION IV: QUALITY ASSURANCE MECHANISMS FOR STRATEGIC PLANNING AND FOR STUDENT SUCCESS PLANNING WITHIN A CONTEXT OF RESULTS-BASED MANAGEMENT

4.1. Description of Quality Assurance Mechanisms for Strategic Planning and Student Success Planning Within a Context of Results-Based Management

The CEEC lists two sub-criteria in its guidelines and framework that should be taken into account in the College's description and assessment of its quality assurance mechanisms with respect to the Strategic Plan and the Student Success Plan within a context of results-based management[25]. These two sub-criteria are:

1) The implementation of strategic planning and planning for student success
2) The follow up of strategic planning and student success planning results

The Student Success Plan – The Graduate Profile is an integral part of the College's Strategic Plan and therefore the description of the quality assurance mechanisms and practices related to it are included with the Strategic Plan.

This section of the report (4.1) describes the three main categories of the quality assurance mechanisms with respect to these two sub-criteria. In section 4.2, an assessment of the effectiveness of the three categories of the mechanisms is presented. In section 4.3, a critical assessment of the practices and procedures for the review and updating of the College's main mechanisms for the Strategic Plan and the Student Success Plan is presented. Recommendations to improve the mechanisms and practices are included in section 4.4.

4.1.1 Institutional Mechanisms Governed by Regulations Related to the Commission's Mandate

Strategic Plan and Student Success Plan

Dawson's current Strategic Plan (2010-2015) is its second strategic plan. It was approved by the College's Board of Governors in October 2010.

The current Strategic Plan (2010-2015) includes three strategic directions and five major goals. The strategic directions are:

1. *Academic Excellence*
2. *Enhancement of the Learning Environment*
3. *Service to Society*

The five goals are:

1. *To deliver high quality programs and services*
2. *To help our faculty and staff to grow and to develop to their highest potential.*
3. *To develop the student as a whole person as outlined in the Graduate Profile.*
4. *To enhance the learning environment in support of student success.*
5. *To be a leader in anticipating and responding to the needs of society.*

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[25] Commission d'évaluation de l'enseignement collégial (CEEC) (March, 2013*), Evaluating the Effectiveness of Quality Assurance Systems in Québec Colleges,* page 26.

The plan lists the main strategies for implementing the goals and the indicators used to measure their achievement.

The Director General is the key person responsible for the overall implementation of the Strategic Plan.

The Student Success Plan – The Graduate Profile – is an integral part of the 2010-2015 Strategic Plan. The plan presents a Graduate Profile that delineates nine key learning outcomes that the College expects students to develop and demonstrate upon graduation. These nine key learning outcomes are:

1. *Learning to learn*
2. *Mastery of program competencies*
3. *Communication*
4. *Quantitative reasoning and information technology literacy*
5. *Critical thinking, problem-solving skills and imagination*
6. *Engagement, teamwork and leadership skills*
7. *Health and well being*
8. *Ethical understanding and behavior*
9. *Social responsibility and global awareness*

The Academic Dean is the key person responsible for the implementation of the Student Success Plan.

4.1.2   Institutional Mechanisms Concerning the Implementation of the Strategic Plan

Annual Management Plan

The Annual Management Plan (AMP) is developed annually by the Director General and presented to the Board of Governors for adoption. The Annual Management Plan details the actions that the College will take in a given academic year to support the implementation of the Strategic Plan as well as to address non-strategic operational objectives. The actions are organized by the Strategic Plan's three strategic directions – Academic Excellence, Enhancement of the Learning Environment, and Service to Society. The managers responsible for implementing the action are included in the Annual Management Plan. The Annual Management Plan includes an environmental scan.

Strategic Plan Action Plan

An action plan related to the main strategies identified in the Strategic Plan covering the 2012-2015 period was presented to the Board of Governors in April 2012. The purpose of this document was to provide a comprehensive overview of the initiatives to be undertaken and to ask the Board of Governors to authorize the use of the accumulated operating budget for an amount totaling $900K for the targeted period. The Board approved the budget.

Director General's Objectives

The Director General prepares a set of annual objectives that are in line with the Strategic Plan and presents them to the Board of Governors for approval in June.

Academic Dean's Objectives

The Academic Dean prepares a set of annual objectives that are in line with the Strategic Plan and the Student Success Plan and presents them to the Senate for discussion and to the Board of Governors for approval in June.

4.1.3 Institutional Practices Concerning the Implementation of the Strategic Plan

Strategic Plan Operating-related Initiatives

The Director General's Office prepared a document to provide the directors with a comprehensive view of the operating-related initiatives related to the implementation of the Strategic Plan to be undertaken from 2012-2015 and how they were to be funded.

Strategic Plan Capital-related Initiatives

The Director General's Office prepared a document to provide the directors with a comprehensive view of the capital-related initiatives related to the implementation of the Strategic Plan to be undertaken from 2012-2015 and how they were to be funded.

Managers' Annual Objectives

Every year each manager at Dawson is required to develop a set of management objectives as per the Working Conditions of Senior and Operational Managers.

> *"Such objectives may be directly linked to the manager's current tasks and responsibilities and/or may represent new and additional challenges. Objectives should be consistent with institutional goals and priorities as articulated in the College Strategic Plan and consequent action plans."[26]*

4.1.4 Institutional Mechanisms Concerning the Follow up of the Strategic Plan

College Annual Report

The College presents its annual report to the Board of Governors prior to submitting it to the Minister of Higher Education, Research and Science (*Ministère de l'Enseignement supérieur de la Recherche et de la Science)*. This report details the initiatives and actions the College has undertaken to implement the Strategic Plan and the Student Success Plan. It is also available on the Dawson website.

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[26] Working Conditions of Senior and Operational Managers, page 7.

4.1.5   Institutional Practices Concerning the Follow up of the Strategic Plan

Directors' Reports on the Achievement of the AMP Objectives

Each year, usually at the start of a new academic year, the Director General asks the College's directors to prepare reports on the achievement of the objectives of the Annual Management Plan in their respective areas of responsibility. The Director General uses this information in his report to the Board of Governors on the Annual Management Plan and for the preparation of the College's Annual Report.

Progress Report on Strategic Plan Actions and Indicators

The 2010-2015 Strategic Plan includes a set of strategies (actions) and indicators for each of the goals included in the plan. Once the Strategic Plan Action Plan was reviewed by the Board of Governors, another set of documents was developed in September 2012 for each of the three main Strategic Plan directions entitled "Indicators of Achievement to Measure the Achievement of the Strategic Plan Goals". In these documents, each of the actions included in the Strategic Plan Action Plan was linked to at least one output indicator and one outcome indicator. The output indicators show what actions have been carried out in a given academic year. The outcome indicators measure the attainment of each of the Strategic Plan goals by the end of Winter 2015. The documents were developed by the Office of Program Services and were reviewed by the Director General's Group and the Deans' Group in Fall 2012 and Winter 2013.

In December 2013 and March 2014, the actions and indicators for each of these documents were reviewed by the Director General's Group and adjustments were made to the dates for implementation of some of actions. The Deans' Group reviewed the revised documents.

The Director General asked for a progress report from each of the directors for the actions undertaken in 2012-2013. The Academic Dean also requested a progress report from the Deans for 2013-2014. A professional in the Office of Program Services summarized the information provided by the directors and the deans into a set of progress reports for each of the Strategic Plan directions. The progress reports were then sent to the Director General.

Record of Student Success Action Plan Initiatives

The College supports student success through Student Success Action Plan projects. Teachers apply for funding for these projects to the Office of Instructional Development. Some teachers also receive release time for these projects. The Office of Instructional Development keeps a record of the projects, which gives a description of the projects, who is responsible for the projects, and the number of students involved in each project.

Survey of Faculty and Students about the Graduate Profile

A survey for faculty about the Graduate Profile was distributed via Omnivox to all faculty who teach in Regular Day programs and in Continuing Education (credit) in Fall 2012. The survey asked teachers to indicate if they implemented any of the Graduate Profile outcomes in their courses and if so what types of learning activities and assessment tools were used. A total of 150 teachers completed the survey. The results of the faculty survey were presented to the Deans' Group in March 2013.

A [survey for students about the Graduate Profile](#) was distributed via Omnivox to all students in Regular Day programs and to students enrolled in Continuing Education credit courses in Winter 2013. The survey asked students to indicate to what extent the College emphasizes each of the nine Graduate Profile outcomes and to what extent they felt that they had made progress in items related to each of the nine outcomes, since coming to Dawson. A total of 2,268 students completed the survey. The results of the faculty survey and the students' survey were presented to the Dawson community in October 2013 at Ped Day.

4.2   Assessment of the Effectiveness of the Quality Assurance Mechanisms for Strategic Planning and Student Success Planning Within a Context of Results-Based Management

The College's [Strategic Plan](#) includes strategic directions and main goals. It also lists the main strategies and indicators used to measure the achievement of the goals. It does not list who is responsible for carrying out the main strategies and the timelines for doing so. This information was not included in the Strategic Plan because the Director General, who is responsible for the plan, fully intended to detail the responsibilities and timelines in other mechanisms that would be more responsive to ongoing internal or external events.

The College has various mechanisms related to the implementation of the Strategic Plan and Student Success Plan. These are the [Annual Management Plan](#), the [Strategic Plan Action Plan](#), the [Director General's Objectives](#) and the [Academic Dean's Objectives](#). **All these mechanisms are effective in ensuring that the Strategic Plan is implemented because they detail the actions that are required to implement the Strategic Plan and the responsibilities for carrying out these actions.** These mechanisms are reviewed annually by the College's management and by the Board of Governors. These reviews ensure that the actions are clearly linked to the Strategic Plan. The Director General also requests that all managers link their objectives to the Strategic Plan. However, this practice has proven to be difficult for some managers whose objectives are more closely linked to their daily operations than to the Strategic Plan.

The College's [Annual Report](#) is the main mechanism in which a follow up to the implementation of the Strategic Plan is provided to the Board of Governors and the Ministry on an annual basis. The report provides a detailed description of the actions that were undertaken in a given year and these actions are organized by the three main strategic directions included in the Strategic Plan. The report also includes some indicators related to the achievement of the five main goals such as graduation rates and course success rates. **Therefore, it can be concluded that the Annual Report is an effective quality control mechanism for the follow up of the Strategic Plan.**

The main practices for the follow up of the Strategic Plan are the directors' reports on what has been achieved with respect to the Annual Management Plan for their areas of responsibility and the progress report on the Strategic Plan actions and indicators. This report is drafted by a professional in the Office of Program Services on an annual basis under the leadership of the Director General with input from the deans and the directors. The actions that have been undertaken by the various directors and deans are reviewed and adjustments for the next year's actions are made. The results from some of the indicators are also reviewed and included in this report. However, the results for many of the indicators that are included in the Strategic Plan will only be obtained during the Winter 2015 semester, towards the end of the Strategic Plan's timeframe. **It can be concluded that these practices are effective in that they give the College's management information and data that are used to follow up the Strategic Plan.**

With respect to the follow up of student success, the Office of Instructional Development keeps a detailed record of how the College supports student success projects. The Office recently received a grant from the Canada Quebec Entente to evaluate the effectiveness of these projects on student success.

The College developed and conducted two surveys: one for faculty and one for students about the Graduate Profile. This data gave the Deans' Group an overview of how teachers were incorporating the Graduate Profile outcomes in their classes and in out-of-class activities, and students' perceptions about the extent to which the outcomes of the Graduate Profile were emphasized by the College. **These surveys are considered to be somewhat effective because they have been only conducted once. In order to be considered a practice that supports continuous quality improvement, the surveys would have to be conducted on a regular basis and the feedback obtained from them acted upon.**

4.3.   Review and Update of the Main Quality Assurance Mechanisms for Strategic Planning and Student Success Planning Within a Context of Results-Based Management

Annual Review of the Strategic Plan at the Board of Governors

The Strategic Plan includes an annual review process to take into account changes to the external and internal environments and progress made towards the achievement of the strategies as reflected in annual reports. The Board of Governors is responsible for reviewing the Strategic Plan on an annual basis and approving any necessary changes. During the period of review, the Strategic Plan was reviewed by the Board of Governors in June 2013 and June 2014. No changes were made to the plan at either meeting.

4.4   Recommendations

Based on the assessment of the quality assurance mechanisms for strategic planning and student success planning within a context of results-based management, it is recommended that:

15. The College obtain and respond to feedback from students and faculty about the Graduate Profile on a regular basis.

SECTION V: CONCLUSIONS REGARDING THE EFFECTIVENESS OF THE QUALITY ASSURANCE SYSTEM

In its guidelines and framework, the CEEC states that the colleges must include in their audit reports conclusions about the overall effectiveness of their quality assurance systems.[27] The CEEC suggests that in drawing these conclusions, the colleges should try to answer four questions. The answers to these questions are included in this final section of the report. They are presented in a different order than what is shown in the CEEC guidelines and framework so as to build upon one another in a logical order that leads to an overall conclusion.

1. **Does the information system enable the collection of sufficient data to support informed decision-making in ensuring continuous quality improvement?**

The CEEC states that the quality assurance system includes an institutional information system designed to collect the data required to demonstrate the implementation of various mechanisms and their effectiveness.[28] The CEEC defines the institutional information system as an institutional quality management tool for the collection of data required to support decision making and ensure effective quality management. The information system is the institutional repository of information demonstrating the effectiveness of quality assurance mechanisms.[29] It can also serve, according to the CEEC, as the database to store the information required by the colleges to provide evidence for the audit on the effectiveness of their mechanisms.[30] Therefore, the information system would appear to have two functions. The first function is a tool that provides information that the College's management uses to monitor and ensure quality with respect to the four components – programs of study, the evaluation of student achievement, strategic planning within a context of results-based management, and planning for student success within a context of results-based management. The second function is to serve as an accountability tool for the audit. The CEEC uses the words data and information interchangeably. According to Paterson (2005), "data is raw unprocessed facts and figures that have no context or purposeful meaning and information is processed data that has meaning and is presented in a context." [31] Therefore, for this audit the College is referring to information that is stored in the information system and not data.

The CEEC's definition of the information system seems to imply that it is one system or repository where all the information about each of the four components is stored. However, an information system has also been defined as follows:

> *An information system is a group of interrelated components that work to carry out input, processing, storage, output and control actions in order to convert data into information that can be used to support forecasting, planning, control, coordination, decision making and operational activities in an organization.[32]*

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[27] Commission d'évaluation de l'enseignement collégial (CEEC) (March, 2013), *Evaluating the Effectiveness of Quality Assurance Systems in Québec Colleges,* page 62.
[28] *Ibid*, page 16.
[29] *Ibid*, page 17.
[30] *Ibid*, page 17
[31] Paterson, A. (2005). Information Systems, Using Information. Learning and Teaching Scotland, page 9.
[32] *Ibid*, page 29.

For this audit, the College views the information system as a group of interrelated components rather than as a single repository of information. Dawson's information system consists of three main components: SharePoint, the Customized Academic Reporting System (CARS) and Clara. SharePoint is an integrated web server for sharing documents and information as well as searching and collaborating in one single place. The Customized Academic Reporting System (CARS), which is a database maintained by the Office of Institutional Research, has information pertaining to DEC programs and profiles and AEC programs. Clara is a database that contains student, financial, payroll, classroom management and human resources information.

Information System for Programs of Study

Table 3 shows the information that is stored on SharePoint with respect to the first two categories of quality assurance mechanisms for programs of study. Table 3 also shows where other information is stored if it is not on SharePoint.

Table 3: Information on College's Information System Concerning Quality Assurance Mechanisms for Programs of Study

Institutional Mechanisms	Information System Component SharePoint	Other
Institutional Mechanisms Governed by Regulations Related to the CEEC's Mandate		
Institutional Program Evaluation Policy (IPEP)	X	
Institutional Mechanisms (Approved by Board of Governors and/or Senate)		
Bylaw 4 – Concerning Human Resource Management	X	
Bylaw 5 – Concerning the Financial Management of the College	X	
Bylaw 6 – Concerning the Senate	X	
Bylaw 7 – Special Conditions for Admission	X	
Bylaw 8 – The Promotion of Academic Success	X	
Bylaw 9 – The Management of Programs of Study	X	
Human Resources Management Policy	X	
Roles of Program Committees and Departments	X	
Program Evaluation Plans	X	
Program Evaluation Reports	X	
Program Revision Documents (including Program Standing and Advancement Policies and Comprehensive Examinations)	X	
List of Key Performance Indicators (as approved by the Board in 2001)	X	Administrative Services/ Corporate Affairs
Summary of Dawson Graduation, Retention and Course Success Targets	X	
Staffing Plan (Managers, Professionals, Support Staff)		Administrative Services/ Corporate Affairs

It should be noted that all of these mechanisms are also available on the College's website, except for the two documents that are kept by Administrative Services.

Table 4 to Table 9 show the information that is stored on SharePoint, Clara and CARS with respect to the third category of quality assurance mechanisms, institutional practices for programs of study. There is a table for each of the six sub-criteria that the College regularly takes into account with respect to programs of study.

Table 4: Information on College's Information System Concerning Quality Assurance Practices for the Relevance of Programs of Study

Institutional Practices	Information System Component			Other
	SharePoint	**CARS**	**Clara**	
Graduate Destinations Survey Reports	X			
Employment Rates – *Relance*	X	X		
Placement rates within Quebec universities and CRC Scores		X		

Table 5: Information on College's Information System Concerning Quality Assurance Practices for the Coherence for Programs of Study

Institutional Practices	Information System Component			Other
	SharePoint	**CARS**	**Clara**	
Course outlines and course outline templates for Regular Day courses				Sector Deans
Course outlines for Continuing Education credit courses				Dean of Social Science and Business Technologies (for courses given by departments in this sector) Coordinator, Pre-university Studies (for courses given by departments in the Creative and Applied Arts sector and the Science, Medical Studies and Engineering sector
Course outlines for AEC programs				AEC Manager

Table 6: Information on College's Information System Concerning Quality Assurance Practices for the Quality of Teaching and Student Supervision for Programs of Study

Institutional Practices	Information System Component			Other
	SharePoint	CARS	Clara	
Teacher Evaluation Policy				Office of Instructional Development
College-level and department-level reports on the results of teachers' evaluations				Office of Instructional Development
Teacher Evaluation Summary Report			X	MyDawson Portal
Student Satisfaction Inventory (Instructional Effectiveness Subscale)	X			
Graduate Satisfaction Point of Exit Survey Results	X	X		
Individualized Education Plans			X	
Mid-Term Assessment Summary Report by Program Coordinator			X	MyDawson Portal
Snapshot of Students in Programs/Profiles			X	MyDawson Portal

Table 7: Information on College's Information System Concerning Quality Assurance Practices for the Alignment of Human, Financial and Material Resources for Programs of Study

Institutional Practices	Information System Component			Other
	SharePoint	CARS	Clara	
Human Resources (HR)				
HR-06 – Evaluation of Professionals	X			
HR-07 – Evaluation of Support Staff	X			
HR-16 – Professional Development – Professionals	X			
HR-17- Professional Development – Support Staff	X			
Faculty Development Policies and Procedures	X			
Evaluation of Managers	X			
Departmental Opinion Survey Results				Administrative Services
Teacher Hiring Criteria				College website
Faculty Staffing Plan				Academic Systems

Institutional Practices	Information System Component			Other
	SharePoint	CARS	Clara	
Results of Ped Day Surveys				Office of Instructional Development
New Faculty Orientation Package				College website
Staffing Plan (for Managers, Professionals and Support Staff)				Administrative Services/ Corporate Affairs
Financial and Material Resources				
Operating Budgets			X	
Capital Budgets			X	

All the Human Resources policies listed in Table 7 are also stored on the College's website.

Table 8: Information on College's Information System Concerning Quality Assurance Practices for the Effectiveness of Programs of Study

Institutional Practices	Information System Component			Other
	SharePoint	CARS	Clara	
DEC Programs				
Student Satisfaction Inventory (SSI) Reports	X			
Graduate Satisfaction – Point of Exit Survey Reports	X	X		
AEC Graduate Satisfaction Survey Reports	X			
Enrolment (by session, by gender, by language, by age, by country of birth)	X	X		
Course Success Rates	X	X		
Retention to Semester 3	X	X		
Retention to Semester 5 (for technical programs)		X		
Graduation in Prescribed Time	X	X		
Graduation in Prescribed Time Plus 2 years	X	X		
Pass Rates – Specific Education and General Education	X	X		
Grade Distribution by Discipline		X		
Pass Rates – General Education by Discipline	X	X		

Institutional Practices	Information System Component			Other
	SharePoint	**CARS**	**Clara**	
Employment Rates – *Relance*		X		
Graduate Destinations Survey – Employment Rates	X			
Placement rates within Quebec universities and CRC scores (CREPUQ)		X		
Graduate Destinations Survey – University Study	X			
First Choice Applications, Admissions and Registrations	X			
Reports on Secondary V averages		X		
Reports on English Placement Results		X		
Reports on English Exit Results		X		
AEC Programs				
Enrolment		X		
Number of Graduates		X		
Graduation Rates		X		

During the period of review for this audit, the Office of Institutional Research in collaboration with the Information and Systems Technology Department developed a set of 14 reports about programs that is accessible on SharePoint. The reports present data that the Office of Institutional Research regularly collects on programs of study. The reports are provided in table and graphical formats so as to provide the users, sector deans and program coordinators, with information that is easy to understand and use. The Coordinator of Institutional Research presented and explained these reports to sector deans and Program coordinators in June 2014.

Although not all of the information that is currently available on CARS is available on SharePoint, the Office of Institutional Research is planning to add more information based on the input and feedback it receives from users. The Office of Institutional Research also plans to send these reports to the Sector Deans and Program chairs and coordinators on an annual basis. The Office of Program Services has been using these reports for the ongoing evaluation pilot projects that it has supported during the period of review.

Table 9: Information on College's Information System Concerning Quality Assurance Practices for the Quality Management of Programs of Study

Institutional Practices	Information System Component			Other
	SharePoint	CARS	Clara	
Program Constitutions				Sector Deans
Program, Profile and Department Annual Reports and Work Plans				Sector Deans

Information System for the Evaluation of Student Achievement

Table 10 shows the information that is stored on each of the information systems components with respect to quality assurance mechanisms for the evaluation of student achievement.

Table 10: Information on College's Information System Concerning Quality Assurance Mechanisms for the Evaluation of Student Achievement

Institutional Mechanisms	Information System Component			Other
	SharePoint	CARS	Clara	
Institutional Mechanisms Governed by Regulations Related to the CEEC's Mandate				
Institutional Student Evaluation Policy (Dawson)	X			
Institutional Policy on the Evaluation of Student Achievement (Kiuna)				Academic Dean's Office
Institutional Mechanisms (Approved by Board of Governors and/or Senate)				
Academic Integrity Policy	X			
Policy on Ombuds Services	X			
Program Evaluation Reports	X			
Ombuds Reports				Administrative Services/ Corporate Affairs
Comprehensive Examinations (as part of Program Revision documents)	X			
Institutional Practices				
Grade Distribution Grade Reports	X	X		
Graduate Satisfaction Point of Exit Reports	X	X		
Student Satisfaction Inventory Reports (SSI)	X			
Program, Profile and Department Annual Reports and Work Plans				Sector Deans

Institutional Mechanisms	Information System Component			Other
	SharePoint	CARS	Clara	
Course outlines (and course outline templates) for Regular Day Programs				Sector Deans
Course outlines for Continuing Education credit courses				Dean of Social Science and Business Technologies (for courses given by departments in this sector) Coordinator, Pre-University Studies (for courses given by departments in the Creative and Applied Arts sector and the Science, Medical Studies and Engineering sector)
Course outlines for AEC Program courses				AEC Manager
Summaries of Grade Reviews				Sector Deans
Final Examination Cover Sheet	X			
Final Examination Report Prepared by Examination Coordinator				Office of Instructional Development
Individualized Education Plans (IEPs)			X	
Equivalency Guide				Academic Systems

Information System for the Strategic Plan

Table 11 shows the information that is stored on each of the information system components with respect to quality assurance mechanisms for the Strategic Plan, which includes the Graduate Profile, the plan for student success.

Table 11: Information on College's Information System Concerning Quality Assurance Mechanisms for the Strategic Plan

Institutional Mechanisms	Information System Component			Other
	SharePoint	CARS	Clara	
Institutional Mechanisms Governed by Regulations Related to the CEEC's Mandate				
Strategic Plan				College Website
Institutional Mechanisms (Approved by Board of Governors and/or Senate)				
Annual Management Plan	X			College Website and Director General
Strategic Plan Action Plan				Director General and Administrative Services/ Corporate Affairs

Institutional Mechanisms	Information System Component			Other
	SharePoint	CARS	Clara	
Director General's Objectives				Director General and Administrative Services/ Corporate Affairs
Academic Dean's Objectives				Academic Dean and Administrative Services/ Corporate Affairs
College Annual Report	X			College Website
Institutional Practices				
Directors' Reports on the Annual Management Plan				Director General
Progress Report on Strategic Plan Actions and Indicators				Director General
Strategic Plan Operating-related Initiatives				Director General
Strategic Plan Capital related Initiatives				Director General
Managers' Annual Objectives				Director General and Directors
Record of Student Success Plan Initiatives				Office of Instructional Development
Survey Results from the Student Survey about the Graduate Profile				Office of Program Services
Survey Results from the Faculty Survey about the Graduate Profile				Office of Program Services

Conclusion

The College stores most of its bylaws and policies on SharePoint. With respect to the information concerning programs of study, all the policies and bylaws concerning programs of study are on SharePoint. Program evaluation plans and reports can be found on SharePoint. However, CMA accreditation reports are not on SharePoint or any other database but are kept in the Science, Medical Studies and Engineering Dean's Office and the Academic Dean's Office. Program revision and program development documents are stored on SharePoint. The program revision documents include each program's standing and advancement policy and Comprehensive Examination. Information about program relevance and effectiveness is detailed in a series of reports in SharePoint that are prepared by the Office of Institutional Research. All other reports prepared by the Office of Institutional Research are on SharePoint and/or the Customized Academic Reporting System (CARS) such as the Student Satisfaction Inventory, the Graduate Satisfaction Point of Exit Survey, the Graduate Destinations Survey, and the AEC Student Satisfaction Survey. Operating and capital budgets are on CLARA. Information regarding program management such as program constitutions, annual reports and work plans are kept in the sector deans' offices. Information about the quality of teaching and professional development activities for faculty is maintained on a system maintained by the Dean of Instructional Development.

With respect to the evaluation of student achievement, the College's Institutional Student Evaluation Policy (ISEP) is on SharePoint and the College's website. The Ombuds Policy is on SharePoint, but the Ombudsperson's reports are not. Grade distribution reports for each of the College's disciplines are on SharePoint. Information pertaining to substitutions and equivalences is on CLARA. Grade review statistics are kept by the sector deans. Course outlines for each sector are kept on the sector deans' individual databases. The examination report prepared by the Office of Instructional Development is maintained on its own database.

The Strategic Plan and the College's Annual Report are on the College's website. The latest Annual Management Plan is on the College website. The Strategic Plan Action Plan is kept by the Director General's Office and by Corporate Affairs. The Strategic Plan Operating-related initiatives and capital-related initiatives, the progress reports on the Strategic Plan Action Plan are kept on file in the Director General's Office and in Administrative Services. The information about the Student Success Plan Activities is kept on the Office of Instructional Development's database. The results of the Graduate Profile Survey for Students and Graduate Profile Survey for Faculty are housed with the Academic Dean and the Office of Program Services.

A review of where information concerning the College's quality assurance mechanisms and practices are housed demonstrates that this information resides mostly on two databases, SharePoint and CARS. Some information such as operating budgets and capital budgets and students' Individualized Education Plans (IEPs) are on CLARA. It may be prudent to store the College's finances and student records separately in CLARA in order to ensure confidentiality. Most of the information concerning the Strategic Plan is not on any of the three main databases of the information system but is housed in the Director General's Office. While having this information on any of these three databases would make it more accessible to the rest of the College's management, it does not preclude the College's senior management from being able to use this information to make informed decisions in ensuring continuous quality improvement. **Therefore, the College concludes that the information system enables the College's management to make informed decisions related to quality improvement. However, making the information about the four components accessible through one central interface may make it easier for the College's management to monitor its quality control mechanisms and practices.**

2. **To what extent does the interaction between different quality assurance mechanisms promote an integrated and dynamic management of quality?**

In order to answer this question, the French and English versions of the questions were compared. The French version of the question is "*Dans quelle mesure les interactions entre les mécanismes d'assurance qualité favorisent-elles une gestion dynamique et intégrée de la qualité?* " The CEEC has translated the word "*favoriser*" as promote, but it can also mean to facilitate. The meaning of "*dynamique"* can also be "active." Therefore, for this audit the College has translated this question as follows: To what extent does the interaction between different quality assurance mechanisms facilitate an integrated and active management of quality?

With respect to programs of study, the College concludes that there is a great deal of interaction among the quality assurance mechanisms to promote an integrated and dynamic management of quality based on the description and assessment of these mechanisms provided in this report. Program evaluation is conducted according to the College's Institutional Policy on Program Evaluation (IPEP). Key Performance Indicators that the Office of Institutional Research tracks on an ongoing basis about programs are used to develop program evaluation plans and are also used as data sources for

program evaluation reports. This data is also being used by programs as part of the ongoing evaluation process developed by the College. Information that the sector deans have about their respective programs such as grade review statistics are also used in program evaluation reports. The results of program evaluations are used to make improvements to the program, which sometimes include support from other areas of the College such as the Office of Instructional Development or Plant and Facilities. Program evaluations also often lead to program revision However, in order to improve the interaction among these mechanisms, the College has recommended a revision to IPEP in order to make program evaluation more timely.

With respect to the evaluation of student achievement, the College concludes that there is a great deal of interaction among the different quality assurance mechanisms. The Institutional Student Evaluation Policy is currently being revised to address the recommendations that came out of the evaluation of this policy in 2008. Program evaluation reports include information on fairness and equity of evaluation and the information that the sector deans have on grade reviews are sometimes used in program evaluation. The Ombudsperson's reports provide the College's management, including the Board of Governors, with an additional source of information about fairness and equity. The reports that the Office of Institutional Research conducts on a regular basis such as the Student Satisfaction Inventory (SSI) and the Graduate Satisfaction Point of Exit Survey provide the College's management with another source of information about fairness and equity. This information is also used as part of the ongoing evaluation process and for the development of IPEP-mandated program evaluation plans.

With respect to the Strategic Plan, the College concludes that there is a great deal of interaction among the different quality assurance mechanisms. The Annual Management Plan details the actions that will be carried out in a given academic year and who is responsible for carrying out these actions. The Director General requests the directors to report annually on the actions they have carried out. A professional in the Office of Program Services also gathers information on what actions have been carried out by the deans and directors and provides a summary report to the Director General. The Director General prepares an annual report that details this information and it is presented to the Board of Governors.

3. **How is the quality assurance system incorporated in the governance and management of the institution? To what extent is an institutional culture of quality integrated in management practices to collectively meet and demonstrate quality standards?**

The concept of quality assurance has been embraced by the College first and foremost through its Strategic Plan. One of these directions, Academic Excellence, is centered on quality assurance. One of the goals that is linked to this direction also centers on quality assurance: to deliver high quality programs and services.

One of the strategies that fall under the first bullet is "to support and implement ongoing evaluation in programs and services." During the period of review, the College pilot tested a set of guidelines and a process for ongoing self-evaluation of programs and General Education departments. During the period of review eight programs and three General Education Departments conducted ongoing evaluation projects and prepared summary reports that were included in their annual reports. At the time of the writing of this audit report, three additional programs and the English Department had started the process of ongoing self-evaluation. The Student Services Department undertook an evaluation of two of its services during the period of review, the Career and Counselling Centre and the Academic Skills Centre. A survey of Regular Day and Continuing Education students about the quality of the registration process

was requested by the Dean of Academic Systems in Fall 2014 and another survey will be conducted in Winter 2015. The Academic Dean has undertaken a survey of Continuing Education students to determine their level of satisfaction with existing services and where improvements may be needed.

The Annual Management Plan is centered on all three Strategic Directions and the goals that are linked to each of these directions. The Annual Management Plan requires the input of all of the directors and the plan is reviewed by the Board of Governors. Managers are asked to link their annual objectives to the Strategic Plan. The Director General keeps track of the achievement of Annual Management Plan an annual basis through reports from the directors and sector deans and informs the Board of Governors. The Strategic Plan is reviewed on an annual basis by the Board in order to determine if it requires modification. Quality assurance is also incorporated into the College's management practices through managers' use of the information that is stored in the College's information system.

With respect to IPEP-mandated program evaluations, this audit has demonstrated that the evaluation process has been fully integrated into the College's governance and management. The development of the evaluation plans and the evaluation reports are reviewed by several vetting bodies with the final vetting body being the College's Senate. Program revisions and program development documents are also reviewed by different vetting bodies which include program committees, Senate and the Board of Governors.

Revisions to the College's Institutional Student Evaluation Policy (ISEP) also go through a rigorous vetting process that includes Senate and the Board of Governors.

Therefore, the College concludes that an institutional culture of quality improvement has been integrated to a great extent in the College's management practices and in its governance to collectively meet and demonstrate quality standards.

4. **To what extent does the quality assurance system and its management ensure continuous quality improvement?**

The CEEC states in its Guidelines and Framework that "the quality assurance system consists of a structured yet dynamic organization of different quality assurance mechanisms, including an information system, established by the institution to ensure and demonstrate continuous improvement."[33] The College has accepted this definition in its conclusion but uses the word active instead of dynamic in its definition.
The description and assessment of the mechanisms and practices for each of the four components demonstrates that almost all of them, with a few exceptions, are deemed to be effective in ensuring continuous quality improvement. With respect to the institutional mechanisms for the quality assurance of programs of study, 11 of them are deemed to fully ensure continuous quality improvement while two of them somewhat ensure continuous quality improvement. These two mechanisms are the Institutional Program Evaluation Policy (IPEP) and the Roles of Program Committees and Departments. The College has recommended improvements to both these mechanisms. Twenty-five (25) of the practices reviewed for this audit fully ensure continuous quality improvement and 10 partly ensure it. The College does not have enough information about six practices, particularly those related to professional development for faculty and staff, to determine if these practices fully ensure continuous quality improvement with respect to the alignment of human resources.

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[33] Commission d'évaluation de l'enseignement collégial (CEEC) (March, 2013), *Evaluating the Effectiveness of Quality Assurance Systems in Québec Colleges*, page 18.

All the institutional mechanisms fully ensure continuous quality improvement for the evaluation of student achievement as well as five practices described in this audit. Two practices, program and department annual reports and the preparation and approval of course outlines, partly ensure continuous quality improvement. The College has recommended improvements to these two practices. All the practices the Kiuna Institution uses to ensure fair and equitable evaluation of student achievement fully ensure continuous quality improvement.

Finally, all the institutional mechanisms fully ensure continuous quality improvement with respect to strategic planning and student success planning within a context of results-based management. Four practices described in this audit fully ensure continuous quality improvement and three partly ensure it. These three practices are managers' annual objectives, and the surveys of students and faculty about the Graduate Profile.

The College has established an institutional culture of continuous quality improvement primarily through its Strategic Plan and this approach has been incorporated to a great extent in the College's management practices and in its governance to collectively meet and demonstrate quality standards.

The description of the information system demonstrates that the College's management has access to various types of information about its mechanisms and practices and actively uses this information to monitor and improve quality. However, putting all or most of this information about the four components into one centralized information system may make it easier to provide evidence for the quality assurance audit that will be conducted for the CEEC every five years.

Therefore, given the description and assessment of the quality assurance mechanism provided for this audit, the College concludes that the quality assurance system and its management ensure continuous quality improvement to a great extent.

Recommendation

Based on the assessment of the effectiveness of the quality assurance system, it is recommended that:

16. The College make information about the four components – programs of study, evaluation of student achievement, strategic planning and student success planning – accessible through one central interface.
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SECTION VI: SUMMARY OF RECOMMENDATIONS

Based on the assessment of the quality assurance mechanisms for **programs of study,** it is recommended that:

1. IPEP be reviewed and revised as necessary.
2. A requirement for programs to have an advisory mechanism to ensure program relevance be included in College policy.
3. The College take steps to improve the mechanisms used to ensure the accuracy of course outlines with respect to program statements of competency.
4. The status of Continuing Education teachers be clarified in the Teacher Evaluation Policy and that the policy be formally adopted by the Academic Administration.
5. The College evaluate the effectiveness of the Support for At-Risk Students Program.
6. The College develop a profile of teaching competencies and a plan to further develop them among Dawson faculty.
7. The College obtain and respond to regular feedback from faculty and staff about their professional development needs and activities.
8. The College ensure that professionals and support staff are evaluated regularly as per their respective evaluation policies.
9. The College review the Key Performance Indicator targets and revise if necessary.
10. The data on CARS about AEC programs be updated on a regular basis.
11. The Roles of Programs and Departments document be revised with respect to the six IPEP criteria.
12. Program annual reports include a standard set of criteria across all sectors.

Based on the assessment of the quality assurance mechanisms for **the evaluation of student achievement**, it is recommended that:

13. The College develop mechanisms to ensure that assessment practices are systematically checked on an ongoing basis to ensure that they evaluate students' attainment of competencies to ministerial standards.
14. ISEP be revised to reflect current practices with respect to academic grievances and grade reviews.

Based on the assessment of the quality assurance mechanisms for **strategic planning and student success planning** within a context of results-based management, it is recommended that:

15. The College obtain and respond to feedback from students and faculty about the Graduate Profile on a regular basis.

Based on the assessment of the effectiveness of **the quality assurance system,** it is recommended that:

16. The College make information about the four components – programs of study, evaluation of student achievement, strategic planning and student success planning – accessible through one central interface.