



ONTARIO UNIVERSITIES
COUNCIL on QUALITY ASSURANCE

**SUMMARY OF AUDITORS' REPORT ON THE
SCOPE OF YORK UNIVERSITY'S RESPONSE TO
THE QUALITY ASSURANCE AUDIT**

SEPTEMBER 2017

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SUMMARY OF THE ONE-YEAR FOLLOW-UP RESPONSE ON THE QUALITY ASSURANCE AUDIT OF YORK UNIVERSITY

The Ontario Universities Council on Quality Assurance (Quality Council) undertook an Audit of Quality Assurance at York University in 2015-16. As with all such audits, the purpose was to assess the extent to which York complies with its own Institutional Quality Assurance Processes (outlined in the York YUQAP) and to affirm that the institution's IQAP is consistent with the Quality Assurance Framework that governs quality assurance activities at publicly assisted Ontario Universities.

A team of three Quality Council auditors was assigned to conduct the audit. They prepared a report based on a desk audit of documents submitted by York and a two-day site visit to the institution in November 2015. The Report on the Quality Assurance Audit of York (Audit Report) was approved by the Quality Council and sent to the University in May 2016.

The Quality Assurance Framework requires that each institution submit a One-Year Follow-Up Response to the Quality Council in which it describes the steps it has taken to address the Recommendations in the Audit Report. This Response is reviewed by the auditors, who then prepare a Report to the One-Year Follow-Up Response as well as a Summary of that Report, for consideration by the Audit Committee and, ultimately, by the Quality Council. Upon approval of the Institutional One-Year Follow-Up Response by the Quality Council, the Institutional One-Year Follow-Up Response and the Summary of the Auditor's Report are published on the Quality Council website.

In May 2017, York submitted its One-Year Follow-Up Response, which included explanations of how it had addressed each of the Recommendations. While not required to do so by the Quality Assurance Framework (QAF), York had also addressed each of the Suggestions. The auditors reviewed the documentation and conferred in the drafting of their Report and Summary.

The 2016 Audit Report for York contained 11 Recommendations (listed below) and 12 Suggestions. Recommendations are made when auditors have identified practices that are not in compliance with an institution's IQAP or when they have noted instances where an institution's IQAP is not consistent with the Quality Assurance Framework. Institutions are obliged to respond to the Recommendations in their One-Year Follow-Up Response. Suggestions are made when auditors think there are ways in which the quality assurance practices at an institution could be improved. As noted above, institutions are not obliged to respond to Suggestions in their One-Year Follow-Up Response.

RECOMMENDATION 1: Retain complete and accurate documentation for each stage of all quality assurance processes.

RECOMMENDATION 2: Ensure that every program is reviewed at least once every eight years.

RECOMMENDATION 3: Provide comprehensive information in the self-study or new program proposal to ensure that all of the evaluation criteria are addressed.

RECOMMENDATION 4: Ensure that identified authorities who approve the self-study check that the content of the document includes all the relevant information required by the YUQAP.

RECOMMENDATION 5: Document how external reviewers are chosen to participate in quality assurance processes.

RECOMMENDATION 6: Enhance the methods of briefing the external reviewers on the requirement to address all the evaluation criteria set out in the YUQAP.

RECOMMENDATION 7: Amend the YUQAP to establish a clear process for the selection of the internal reviewer in the CPR processes.

RECOMMENDATION 8: Ensure that responsibility for contacting, selecting and vetting potential external reviewers is formally assigned to the Office of the Vice Provost Academic in conformity with the YUQAP.

RECOMMENDATION 9: Ensure that the “senior academic lead” from the academic unit arranges and manages the site visit of the reviewers (as set out in 7.8.4) or revise the YUQAP to indicate that the Office of the Vice Provost Academic oversees these aspects of the CPR process.

RECOMMENDATION 10: Ensure that the final approved documents posted on the Vice-President Academic and Provost’s Website on Quality Assurance conform to the description set out in “Reporting requirements and Access” (YUQAP 7.9.4).

RECOMMENDATION 11: Include on the Periodic Review Schedule all programs offered.



May 26, 2017

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Dear Dr. Timney,

I am pleased to provide you with the York University Institutional Follow-up Report as our response to the Report on the Quality Assurance Audit of York University provided to us on May 20, 2016.

As specified in the Quality Assurance Framework (QAF 5.2.9), we are submitting this report which serves to inform the auditors, through the Secretariat, of the steps we have taken to address the recommendations. In addition, we have provided some comments on the suggestions which we hope that you will find helpful.

We at York (my office and the members of the Joint Sub-Committee on Quality Assurance, as well as other key individuals at York) found the audit experience provided us with a great deal of insight to our processes, both the good and the challenging. The Audit Recommendations have been discussed at length and in a variety of collegial contexts.

We continue to contemplate changes to be made to the York University Quality Assurance Procedures (YUQAP), and we anticipate that some small changes will come forward in the 2017-2018 academic year. Our focus has been on the improvement of standard operating procedures, with an emphasis on ensuring documentation of steps and decisions, and improved templates and guidelines that better support and align with YUQAP.

We are committed to continuing to improve our processes and our support for Quality Assurance at York University.

Yours sincerely,

A handwritten signature in blue ink, appearing to read "Alice Pitt".

Alice Pitt
Vice-Provost Academic

**York University Institutional Follow-up Report to the
Report on the Quality Assurance Audit of York University
May 26, 2017**

RECOMMENDATION 1: Retain complete and accurate documentation for each stage of all quality assurance processes.

York University is committed to retaining complete and accurate documentation for each stage of all quality assurance processes.

Standard Operating Procedures have been put in place to ensure that all documentation is captured. This includes e-mail correspondence which may include formal acknowledgement or authorization to proceed to the next stage.

Particular attention has been paid to the documentation related to external reviewers, including matters relating to selection and to maintaining records of what was provided to external reviewers and when.

The Office of the Vice-Provost Academic has a shared directory that allows multiple staff members to see and store documentation related to program reviews and approvals. Standard Operating Procedures have been established to ensure consistent nomenclature for documents and standard practices for storage.

York University has acquired a curriculum management tool (August 2016) and the Office of the Vice-Provost Academic will be a key participant in the deployment of the governance structures and business rules for this system over the next three to five years (beginning in 2016-2017). The initial focus will be on course approvals, but the Office of the Vice-Provost is assured that elements of this tool will eventually be applied to program approvals and the Cyclical Program Review Process as well as the approval processes for new programs. It should be noted that this same system is currently used by the University of Toronto, and it is expected that the shared experience will benefit both as the systems and tool evolve.

RECOMMENDATION 2: Ensure that every program is reviewed at least once every eight years.

The YUQAP will be amended to indicate that programs “*are required to initiate a review at least once every eight years*”. York University’s records for program review are tied to the initiation year rather than the site visit or other elements.

RECOMMENDATION 3: Provide comprehensive information in the self-study or new program proposal to ensure that all of the evaluation criteria are addressed.

A Data Kit has been prepared for each program as a support for Self-Study preparation and will be included in the appendices of the Self-Study reports. The self-study template has been revised to ensure that all aspects of criteria are addressed. For example, the Program Learning Outcomes are now to be included as a specified criterion in the template for the Self-Study.

RECOMMENDATION 4: Ensure that identified authorities who approve the self-study check that the content of the document includes all the relevant information required by the YUQAP.

Standard operating procedures have been put in place to ensure that a review of self-studies is undertaken and documented prior to distribution to the External Reviewers.

RECOMMENDATION 5: Document how external reviewers are chosen to participate in quality assurance processes.

Standard Operating Procedures for the maintenance of documentation related to the recommendations, ranking and commissioning have been established. Additional information is outlined in the response to Recommendation 8 below.

RECOMMENDATION 6: Enhance the methods of briefing the external reviewers on the requirement to address all the evaluation criteria set out in the YUQAP.

Effective September 2016, the Vice-Provost Academic has established the practice of meeting alone with reviewers at the start of the site visit. Reviewers are provided with all documentation related to the site visit, normally via electronic distribution. In addition, the Vice-Provost Academic has established the practice of a pre-site visit telephone meeting with the reviewer(s) when desirable.

RECOMMENDATION 7: Amend the YUQAP to establish a clear process for the selection of the internal reviewer in the CPR processes.

The Office of the Vice-Provost has established guidelines for selection of the internal reviewer. In addition, Standard Operating Procedures have been put in place to ensure documentation related to the appointment of an internal reviewer is maintained. Note: the YUQAP does not provide for an internal reviewer for new programs.

RECOMMENDATION 8: Ensure that responsibility for contacting, selecting and vetting potential external reviewers is formally assigned to the Office of the Vice Provost Academic in conformity with the YUQAP.

York University's Guidelines on external Reviewer Nominations provided for both New Programs Review and the Cyclical Program Reviews guiding York University practices have been revised to ensure clarity about responsibility for the Office of the Vice-Provost Academic in terms of the commissioning of external reviewers, including the consideration of recommendations by the Dean (and where a graduate program is involved, the Graduate Dean).

The information provided to programs on the YUQAP website in the prior to the 2016 CPR cycle, which suggested wording for initial contact with reviewers, has been removed. Initial contact with recommended reviewers now lies exclusively with the Vice Provost Academic. This protocol also enhances the practical assurance that the selections of external reviewers are informed of the requirements of the role (see recommendation 6).

RECOMMENDATION 9: Ensure that the “senior academic lead” from the academic unit arranges and manages the site visit of the reviewers (as set out in 7.8.4) or revise the YUQAP to indicate that the Office of the Vice Provost Academic oversees these aspects of the CPR process.

The Senior Academic Lead from the program is indeed responsible for the arrangements of the site visit itinerary. The programs are supported by the Office of the Vice-Provost who finalizes the site visit dates in consultation with the reviewers, the Vice-Provost and the program, who coordinates with the relevant Deans. Once the date is set, the Senior Academic Lead sets the schedule for the day other than the initial breakfast meeting with the Vice-Provost. The Office of the Vice-Provost reviews the itinerary to ensure the requisite meetings have been scheduled.

RECOMMENDATION 10: Ensure that the final approved documents posted on the Vice-President Academic and Provost’s Website on Quality Assurance conform to the description set out in “Reporting requirements and Access” (YUQAP 7.9.4).

The Final Assessment Report has been improved and now includes the charts that outline the prioritized Dean’s Implementation Plan activities with associated dates and responsible parties. Descriptions of the Reviewer’s recommendations and suggestions are incorporated into the FAR section “Opportunities for Enhancement.”

After some experimentation, the Final Assessment Reports are now more robust and reflect the Dean’s Agenda of Concerns, the thorough recommendations of the External Reviewers Report, and the rich discussion of the Program Response. The Final Assessment Report contains a significant section that is dedicated to the Dean’s Implementation Plan.

The Final Assessment Reports include all the programs under review, for example, the International BA programs that follow the BA program expectations and supplemented with additional requirements. There is no separate self-study expected for these programs, and steps are in process to clarify the relationship between the iBA and the BA in relation to Degree Level Expectations, Learning Outcomes and assessment.

Note: Senate approval of the iBA as a distinct degree credential is under review with a view to normalizing the credential as an augmented, as opposed to distinct, credential within the BA Degree Level Expectations.

RECOMMENDATION 11: Include on the Periodic Review Schedule all programs offered.

York University is a large institution with over 150 undergraduate programs and close to 60 graduate programs. In addition to these programs there are certificates, graduate diplomas and iBA options.

The newly established Access Data Base includes all programs and also includes information on the associated certificates and graduate diplomas, as well as inter-institutional relationships.

The annual ROTA that is published in the spring for programs that will launch their Cyclical Program Review has been reviewed with the goal of providing the details of all programs and degrees, as well as intra and inter-institutional programs to be included in a review.

CPR and the associated ROTA require units to clarify offerings with clear expectations about alignment between the academic calendar and the review process.

SUGGESTIONS from the Quality Assurance Audit Report

SUGGESTION 1: Consider requiring that the responsible authority sign and date the self-study as confirmation that it has been approved.

As outlined in the response to Recommendation 4 above, standard operating procedures have been created to ensure that the Vice-Provost Academic has reviewed and approved the Self-Study prior to distribution to the reviewers. The SOPs also provide for retention of the statement of approval.

SUGGESTION 2: Consider implementing a process for dealing with the Review Committees' reports that do not meet the requirements of the YUQAP.

Changes to the process for selection of external reviewers (see recommendation 8) provide better opportunity for the Vice Provost to convey the expectations of the review. In addition, a revised template has been developed to align criteria.

In practice, the Vice Provost has often been consulted by reviewers as they craft their report, and such consultations have often been productive. On other occasions, we have deemed that a more productive approach entails a collaboration between the dean/s and the units in a strong effort to engage with underlying issues.

The example the audit committee identifies is an indication of 'uneven development' whereby the reviewers' expertise may not have been aligned with our expectations while otherwise offering good advice.

Our experience indicates that it is incumbent upon our full process to address the unit's self assessment, the decanal response and 'agenda of concerns' and the reviewers' report with recommendations in our final assessment report.

We respect the integrity and expertise of our reviewers and appreciate their input. As important as their role is, we also insist that they play an advisory role and, as such, we place primary responsibility on the units, the deans and university administration to respond to review reports.

SUGGESTION 3: Enhance the communication with programs, concerning the Final Assessment Report and Executive Summary.

Communication with the program has been enhanced to ensure that in addition to the Launch Meeting held in the fall, there are individual meetings prior to the site visit, followed by an individualized memo, drawing attention to the process and timelines. Standard operating procedures have been established to ensure that all key communication with the programs is kept, including the distribution of the Final Assessment Report to the Deans, the Academic Lead in the program and the relevant Senate committees.

SUGGESTION 4: Establish practices for consistently involving students in the CPR, from the creation of the self-study to the 18-month Follow-Up Report.

The Office of the Vice-Provost discusses student participation in the CPR at the Launch meeting, the Individual meetings, through review of the Site Visit Itinerary. The Office of the Vice-Provost Academic funds the development, distribution and reporting for student survey in programs where there are sufficient numbers and, in addition, a small amount of funding is available for student meetings during the Cyclical Program Review.

The Idea of a student guide to quality assurance is an intriguing one and may be explored at a future date, when staff resources permit. In the meantime, the fact that York University has student representation on all of its approval bodies ensures that student input is possible and valued.

SUGGESTION 5: Consider removing the current letter templates for “External Nominations for Cyclical Reviews.”

As outlined above in the response to Recommendation 8, this has been completed.

SUGGESTION 6: Investigate how long it is taking to complete the cyclical reviews of its undergraduate and graduate programs, identify reasons for delays, and implement measures to reduce delays.

The Office of the Vice-Provost Academic has reviewed the timelines and noted that some issues related to efforts to align cognate programs and graduate and undergraduate programs. In addition, efforts have been made to align new program offerings with units with existing programs on established timelines. The strong principle of an eight year cycle has been enforced even when this means that some programs will be reviewed within a shorter timeframe. There have been interruptions to our process due to labour disruptions and other considerations at the program level; we have made and continue to make every effort to ensure that cycle timelines are respected. As an example, requests for deferral on the part of well-established programs due to off-cycle program major program revision processes have been incorporated into the review process with good success. The Office of the Vice-Provost Academic has now established a comprehensive reminder system and this is expected to improve timeliness.

SUGGESTION 7: Consider amending the YUQAP to define the role of the internal reviewer.

The internal reviewer is expected to be a guide to the culture of the University for the external reviewers. The internal reviewer is a signatory to the review report, and we will establish this as distinct from the author role played by the external reviewers.

York will establish more clarity for the role: in addition to providing guidance to the external reviewers about culture, the internal reviewer will be responsible for making introductions at meetings, taking some high level notes to share with external reviewers, communicating with parties any requests for additional materials, and reviewing and

providing input to the draft review report. The internal reviewer should be satisfied that review criteria have been addressed and that the report reflects the perspectives of the meetings under the auspices of the review.

This information will be shared in through our internal documents and consideration will be given to what modifications may be required for the YUQAP over the coming year.

SUGGESTION 8: Consider adding a brief note in the self-study template to indicate that the “Method and Preparation” section (1.3) should include reference to how stakeholders (faculty, staff, students, employers, alumni, etc.) took part in the development of the self-study and the overall cyclical review process.

Cyclical Program Review templates for the Self-Study have reviewed and revised to ensure contemplation of and reflection on the data provided.

At the individual meetings with programs, discussion about the involvement of students, staff, employers, faculty and alumni is discussed to ensure full participation.

SUGGESTION 9: Consider indicating on the Periodic Review Schedule where there are partner institutions and multiple sites.

This is an excellent suggestion and has been incorporated in to the database for the Periodic Review Schedule and will be included as the ROTA as published.

SUGGESTION 10: Consider revising the YUQAP to clarify the steps involved in developing a proposal for a program that is subject to expedited approval.

The Office of the Vice-Provost Academic has undertaken to elaborate the participation of the Dean of Graduate Studies in all stages, not only the Early Notification stage.

In addition, the Office of the Vice-Provost Academic is working to establish some guidelines for response to the Notices of Intent to ensure a robust response. Standard Operating Procedures are also being elaborated to ensure consultation and information exchange from the time of receipt of an NOI to the approval statement.

SUGGESTION 11: Consider revising the YUQAP to reflect the current practice of University committees (APPRC, FGS, or FC) that are, or should be, involved in the approval pathways of cyclical program reviews, new programs, or expedited program approvals.

The Office of the Vice-Provost Academic has taken this suggestion under consideration and, as the role of our Faculty of Graduate Studies evolves, will elaborate on the committees that have oversight or approvals of proposals.

SUGGESTION 12: Add a statement in the YUQAP about the delegation of decision-making on the distinctions between major and minor modifications to the Faculties by the Vice Provost Academic.

The Office of the Vice-Provost Academic is in the process of reviewing this and will establish guidelines in the coming year to assist with making the determinations and clarifying the roles of those involved with those decisions.

A new template has been developed by the Senate's on Academic Standards, Curriculum and Pedagogy to support proposals that fall somewhere in between major and minor modifications.