INQAAHE GUIDELINES OF GOOD PRACTICE ALIGNMENT

EXTERNAL REVIEW REPORT

Organisation	Ontario College Quality Assurance Service
Place	Toronto, Canada
Date of the visit	2–4 December 2020

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INTRODUCTION

The Ontario College Quality Assurance Service (OCQAS) requested the International Network for Quality Assurance Agencies in Higher Education (INQAAHE) to conduct an external review of its work, policies and procedures against the Guidelines of Good Practice (GGP). The review was carried out against the 2016 version of the GGP and following the "Procedural Manual 2018" by an independent team of international experts (or review Panel) appointed by INQAAHE and accepted by OCQAS

The review Panel (the Panel) consisted of

- Maria Jose Lemaitre (Chair): Executive Director, Centro Interuniversitario de Desarroll
- Fabrizio Trifiro (Secretary): Head of Quality Benchmark Services, UK NARIC
- Stephen Doughty: Higher Education consultant, Director, Eseldi Ltd.

OCQAS submitted as per protocol a Self-Assessment Report (SAR) with supporting evidence to inform the GGP alignment review. The Panel would like to thank OCQAS for the clear and comprehensive nature of the SAR, and for having clearly signposted and made easily accessible the supporting evidence.

Having conducted a detailed analysis of the information set submitted by OCQAS, the Panel met with a range of key stakeholders to pursue lines of inquiry identified during the desk-based analysis and triangulate evidence in support of its assessment of OCQAS alignment with the GGP. Between the 2nd and 4th of December 2020 the Panel held meetings with the OCQAS Management Board, the Executive Director and supporting part-time staff, representatives from the Ministry and key sector bodies, Senior Management and Quality Managers of colleges falling within scope of OCQAS' oversight, and a number of students. Due to COVID 19 and associated international travel restrictions the meetings were held remotely via Video-Conference.

After the meetings were concluded the members of the Panel drafted a first version of the report, which was shared with OCQAS for a factual accuracy check, before being submitted to the INQAAHE Board of Directors for final decision.

Context

In 2002, Ontario government legislation gave Ontario colleges the responsibility for autonomous program approval and development with the requirement that quality assurance processes be in place to ensure that the colleges consistently meet quality standards. In response to this legislation, the Ontario College Quality Assurance Service (OCQAS) was established in 2005 to provide efficient tools to ensure specific quality and consistency standards are met by the Colleges of Applied Arts and Technology in Ontario (CAAT). OCQAS is owned, operated and funded by the 24 public colleges in Ontario.

The Ontario Public College sector

The Ontario Public College sector consists of 24 institutions spreading across the province. As a sector, the Ontario Colleges serve over 500,000 students, with approximately 220,000 full-time enrolments in 2017/2018. There are two French-language colleges, College Boréal and La Cité, located in the Northern and Eastern Regions, respectively. Enrolment in the French-language colleges represents approximately 3% of the Ontario college student population.
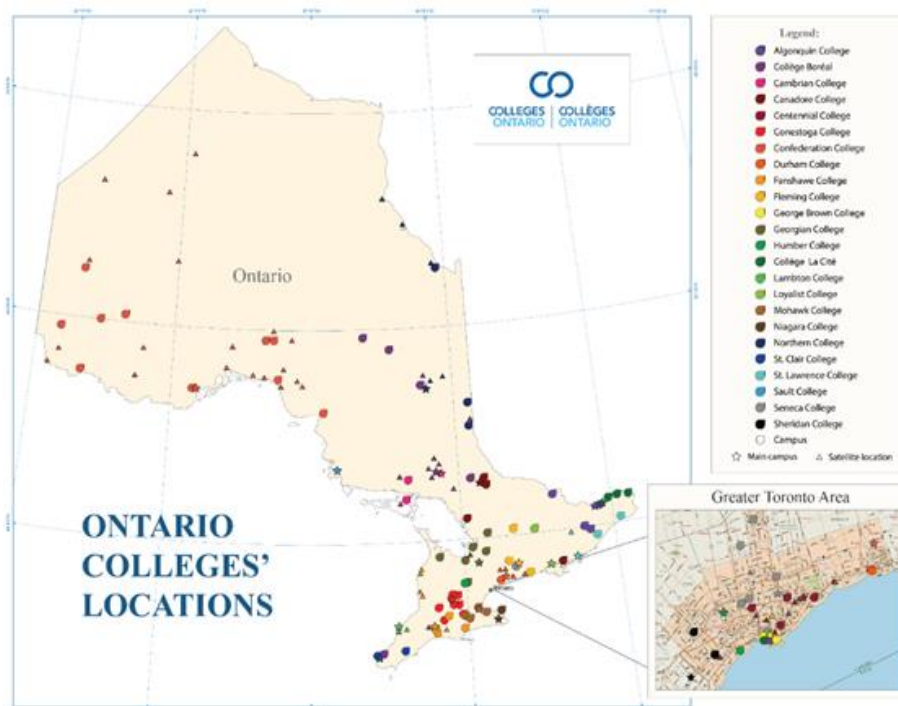
The OCQAS secretariat is composed of a full time Executive Director, two part-time quality assurance associates seconded from the sector, and a french speaking part-time quality assurance associate. Occasionally it makes use of independent consultants for ad hoc projects. The OCQAS secretariat gets direction from a 12 member Management Board representing different positions from within the college system and other stakeholders.

OCQAS's mission is 'to deliver credential validation and quality assurance processes for the public college system in Ontario to assure students, graduates, employers and the public of the quality of the system's comprehensive programs and services.' It delivers on its mission by managing two key services at program and institutional level respectively, the Credential Validation Service (CVS) and the College Quality Assurance Audit Process (CQAAP).

The Credential Validation Service (CVS)

The Ontario Ministry for Colleges and Universities established the Ontario Qualifications Framework (OQF) to be used to define all credentials delivered by institutions in the province. CVS uses the OQF to maintain the integrity of five credentials offered by the colleges:

- Certificate II: Locally Board Approved Certificate - LBC (on a voluntary basis)
- Certificate III: Ontario College Certificate – OCC
- Diploma II: Ontario College Diploma – OCD
- Advanced Diploma: Ontario College Advanced Diploma – OCAD
- Post-Diploma Certificate: Ontario College Graduate Certificate – OCGC

CVS consists of desk-based reviews of all new programs of instruction with a specific view to:

- providing reasonable assurance that all programs of instruction, regardless of funding source, conform to the established Credentials Framework and are consistent with accepted college system nomenclature and/or program titling principles;
- maintaining the integrity of the credentials and protecting the interests of students and employers who require a reasonable guarantee of consistency and quality in Ontario's programs of instruction.

To that effect, CVS works closely with the colleges supporting them in aligning their proposals to the Ontario Qualification Framework in order to validate their programs.

The College Quality Assurance Audit Process (CQAAP)

CQAAP is an institutional level process that involves the regular and cyclical review of each college's quality assurance mechanisms. Its purpose is developmental, with an intent to ensure continual improvement. Through CQAAP, every five years OCQAS reviews each College's internal Quality Assurance processes against established standards.

CQAAP replaces the the audit model that operated between 2005 and 2015, which was titled the Program Quality Assurance Process Audit (PQAPA). PQAPA was developed through a joint government – college sector working group known as the 'Coordinating Committee of Vice-Presidents, Academic (CCVPA) / Colleges Branch of the Ministry of Training, Colleges and Universities (MTCU) Working Group'. In 2010, an external review and evaluation of OCQAS, focusing on CVS and PQAPA, was carried against a set of international reference points, including INQAAHE's GGP. Following that review, OCQAS received recognition from INQAAHE in 2011 as being an Agency that meets their Guidelines of Good Practice. This is the first external review of OCQAS' operation since the 2010 review.

ASSESSMENT OF COMPLIANCE WITH THE INQAAHE GUIDELINES OF GOOD PRACTICE

I. The structure of the External Quality Assurance Agency (EQAA)

The EQAA is a recognised, credible organisation, trusted by the higher education institutions and the public. It has adequate mechanisms to prevent conflicts of interest in the decisions it makes; its staff has the needed skills to carry out the functions associated to external QA. The EQAA has the needed resources to carry out their mission.

☐ Not compliant	☐ Partially compliant	■ Substantially compliant	☐ Fully compliant

1.1 Legitimacy and recognition

OCQAS (hereafter also referred to as the Agency) began operations on February 1, 2005 after Ontario government legislation gave Ontario colleges the responsibility for autonomous program approval and development, with the requirement that quality assurance processes be in place. The Agency was established through a joint government – college sector agreement which sought to develop an oversight body to align two services; the Credential Validation Service (CVS) which began operations in 2003, and the (then named) Program Quality Assurance Process Audit (PQAPA) which was approved in principle in 2004. The CVS service was developed to provide assurance that post-secondary programs developed by the Colleges of Applied Arts and Technology (CAATs) conform to the Credentials Framework, part of the Ontario Qualifications Framework. The second service was to provide a program-based quality assurance model. Whilst OCQAS's existence was mandated by the government, it is not a government agency and has no direct relationship with government, ensuring appropriate independence. Its legal position is hence clearly well-defined and established.

The Panel noted positively that all of the stakeholders interviewed indicated that OCQAS was extremely well recognized and **affirms** that its work is perceived as benefiting the sector by both the government and the Ontario colleges that it serves.

There is evidence that the Agency has aligned with relevant guidelines and approaches from international networks and others whilst developing its policies and practices. OCQAS received recognition from INQAAHE in 2011 for following its Guidelines of Good Practice (GGPs). It has also undertaken reviews and analysis of other systems for identifying best practice and adapting elements where appropriate, including from other Canadian Quality Assurance agencies, European Higher Education Area (EHEA) and the UK's QAA. Such reviews have led to the development and revision of the CQAAP standards. OCQAS actively participates in international networks of QA agencies such as

the Canadian Quality Assurance Network, INQAAHE and the CHEA International Quality Group (CIQG) to maintain relevancy to its approaches. This is predominantly through conference and workshop attendance and informal interactions, although OCQAS also gains from external membership of its Management Board.

OCQAS has published a conflict of interest policy since 2015 and this was updated in 2019 to include staff members. The Panel **affirms** that there was appropriate management of potential conflicts of interest throughout OCQAS' work especially given how some of the part-time staff are secondees from within the Colleges that they serve. Whilst the Panel identified a minor issue relating to the potential for Colleges to obtain an unfair advantage through this secondee arrangement, the management of conflict of interest alongside the broader significant value-added advantage to development within the System was recognised as being appropriate.

1.2 Mission and purposes

OCQAS has an appropriate mission and vision statements and these are well publicised and embedded within the original Guiding Principles adopted in 2003 as well as defined within the performance planning documentation for the Executive Director.

The Mission is "*To deliver credential validation and quality assurance processes for the public college system in Ontario to assure students, graduates, employers and the public of the quality of the system's comprehensive programs and services.*"

The Vision is "*To be the leading post-secondary education quality assurance agency in Canada and to provide guidance and direction to improve the overall excellence of post-secondary education as we move Ontario's colleges to a standard of quality assurance recognized on the global stage.*"

These statements were viewed by the Panel to be valid and stakeholders who were interviewed could clearly identify with what it is that the Agency does and what it intends to do. As such, the Panel **commends** the Agency for its clearly defined and recognised mission and vision.

1.3 Governance and organisational structure

The Panel identified that OCQAS has an appropriate governance structure that is consistent with its mission and vision through ensuring broad representation and clear leadership within its Management Board. Stakeholders are well represented with College representative, student/graduate representatives and external expertise (including in quality assurance). The Panel found that the voices of the student representative and the external members are heard and their input is respected. The Colleges have a number of representatives (senior academic staff and quality managers) on the Management Board and one member is a College President appointed by the Committee of Presidents to act in a liaison role. The Chair of the Management Board is an individual who is external to the Ontario College system and is appointed by the

Committee of Presidents. The Panel heard that the current Chair of the Management Board has held meetings with individual College Presidents and engages them proactively in discussion, not relying solely on the Committee of Presidents representative for liaison.

The Panel recognised that OCQAS had spent time and effort reviewing the composition of the Management Board and concurred with their view that current split of a minimum of 40% members being external to the Ontario College system ensures independence and impartiality of decisions. In addition, the skillset brought to the Agency could be utilised to assist the Executive Director in their decision making. The Panel **affirms** the Agency's commitment to ensure an appropriately diverse representation of stakeholders in the Management Board.

However, whilst noting that there is a good Policy around Management Board membership, the Panel **recommends** that the Agency should formalize within the Management Board Structure and Membership policy, the mechanism for appointment of members of the Management Board**.** The Panel did note that there was an appropriate informal mechanism for appointment in use, but recommends that this be formalised for the avoidance of doubt in future.

OCQAS operates an organisational structure based around a small team of one full-time Executive Director who reports to the Management Board, supported by three part-time Quality Assurance Associates (including secondees from the College system) and an external consultant to assist on a project-basis. One of the Quality Assurance Associates supports the work in the French-speaking Colleges.

The governance and organisational structures enable OCQAS's verification and audit activities to be performed efficiently and with appropriate oversight. CVS decisions are broadly decided by the OCQAS staff (through a double-review mechanism) with oversight from the Management Board whilst the College Quality Assurance Audit Process (CQAAP) reviews are undertaken by an external audit review team, facilitated by OCQAS staff and the outcome reports are ratified by the Management Board.

OCQAS undertakes appropriate strategic planning, with its Management Board setting annual Strategic Goals, which for 2019/20 focussed on accreditation, students and Indigenization. The Panel **commends** the Agency's strategic planning and strong leadership within its Management Board that contributes significantly to the development of a quality culture both within OCQAS and the Ontario College System. However, certain strategic objectives (e.g. accreditation) had been under consideration without significant progress towards implementation for a number of consecutive years and the OCQAS Management Board might want to reflect on that within the next cycle of prioritisation for strategic planning.

1.4 Resources

Staff at OCQAS are appropriately qualified and trained in order to deliver the outcomes expected of the Agency. The use of secondees from the College system has the potential to lead to system-wide development and enhancement. The short-term nature of the Quality Assurance Associate role was recognised by the OCQAS Executive Director as being resource-intensive in terms of training and establishment, but this ultimately benefited the sector with the plan that after a few cycles, the system would benefit from multiple Colleges having had secondees within these roles. However, the Panel **recommends** that the Agency gives due consideration to formalising the advertising and appointment of secondees, currently relying on word-of-mouth and a first come, first served basis, so as to ensure that the appointment process is deemed as fair and transparent to all stakeholders.

Staff are competent to undertake the framework compliance checking within the CVS verification process. CQAAP audit and evaluation is undertaken by non-staff auditors, but facilitated by the Executive Director or an appropriate staff member (e.g. for French-speaking Colleges).

The Panel **affirms** that the current Executive Director performs an exceptional role with extreme diligence and has contributed to the enhancement of the Agency's standing within the Ontario college sector. However, the Panel **recommends** OCQAS reflects upon its dependency on the current Executive Director and should note that over-reliance on an individual raises potential issues around succession planning and creating an identity for the Agency.

It should be noted that the Panel did not hear any specific requests for additional support from any of the stakeholders and noted that resources for staff expansion were in fact available and that the Management Board had a clear mechanism for hearing from the Executive Director should resources be requested. Indeed, stakeholders and OCQAS staff felt that the current resources met demand and noted that should the workload of the Agency expand then the staff resources would need to expand to match. However, the Panel identified that additional permanent staff resourcing would enable OCQAS to pursue a broader range of strategic initiatives, including to develop more national/international collaboration, undertake advocacy activities including standards development, enhancing student engagement and would also mitigate against the potential negative perception of unfairness arising from the fact that the other Quality Assurance Associates were seconded from specific Colleges. Furthermore, as mentioned above, the short-term nature of the secondees whilst benefiting the broader system could lead to frequent loss of 'institutional memory and learning' from OCQAS itself, which would be mitigated by the presence of a further permanent staff member. The Panel therefore **recommends** that due thought be given to resourcing OCQAS with additional permanent staff members.

The Panel understood that appropriate financial resourcing was in place for OCQAS to meet its objectives, with funding coming from the 24 Ontario Colleges. The Panel heard that the Management Board had effective oversight of the Agency's financial position

and responded to resourcing issues should they arise. Office space is rented from Colleges Ontario along with services for support services such as accounting, etc.

Professional development needs of staff at OCQAS appear to be being appropriately met and the Agency has a suitable mechanism for allowing staff to identify needs as well as specific resource allocation for this purpose. These have mostly included conference and workshop attendance, shadowing opportunities, as well as attendance at formal training programs.

Commendations

- Clearly defined mission and vision of the Agency.
- Strategic leadership provided by the Management Board Chair and Board members leading to a strengthening of a culture of quality within the Agency and the System more broadly.

Affirmations

- Effective Management Board oversight provided through good composition of internal and external membership, including student representation.
- Clear policies and procedures for most Agency activities, including around conflict of interest.
- A dedicated and effective Executive Director who manages the Agency effectively and has ensured that the Agency is well regarded within the Ontario College sector.

Recommendations

- Amend Management Board's membership policy to ensure that there is formal clarity around the mechanism for making Management Board appointments.
- Give due consideration to formalising the process for advertising, selection and recruitment of candidates to the Quality Assurance Associate roles.
- Give thought to supporting the Executive Director in the role in order to support succession planning, and enable the Agency to carry out more effectively a broader range of strategic activities such as national/international cooperation, advocacy, student engagement, and sector wide enhancement activities.

Conclusion of The Panel's Assessment:

The Panel considers that the governance and management arrangements of OCQAS are a strength that promotes quality within the sector and the Agency is commended for the strong leadership from the Board and the effective management from the Executive Director. Given the small team, OCQAS is recommended to reflect on what more might

be achieved if the Executive Director could shift some responsibility for day-to-day activities in order to focus on more strategic activities. This recommendation highlights the state of growth and maturation of OCQAS and reflects the development stage of the Agency and what it might now be able to achieve moving forwards if it was further resourced.

OCQAS is broadly fully compliant around guidelines for recognition, purpose and governance, whilst is substantially compliant around guidelines for organisational structure and resourcing.

Assessment for the Guideline:

Substantially compliant

II. Accountability of the EQAA

The EQAA has in place policies and mechanisms for its internal quality assurance, which demonstrate a continuing effort to improve the quality and integrity of its activities, its response to the changes to the context in which it operates and its links to the international community of QA.

☐ Not compliant	☐ Partially compliant	■ Substantially compliant	☐ Fully compliant

2.1 Quality assurance of the EQAA

The Panel was able to appreciate how OCQAS conducts its operations with transparency and integrity.

On the Agency website it is possible to find a clear and informative description of the status and mission of the Agency, its organisational structure, including the Management Board composition, and the CVS and CQAAP processes it operates. Colleges can find all the necessary information needed to submit programs for validation and to prepare for external institutional audit, including a range of resources and supporting material such as templates and guidelines.

The Executive Summaries of the audit reports for all colleges are regularly published and easily accessible on the OCQAS website, as well as the 18-month follow up reports.

The Panel was also able to **affirm** that a clear conflict of interest policy has been put in place applying to all members of staff, Management Board members and auditors

The performance of the Agency is assessed and reviewed regularly by the Management Board, and the Management Board and the Board Chair are also subject to regular formal and informal evaluation.

There are also informal and formal mechanisms to enable OCQAS to review its own activities and the effectiveness and value of its activities. The Agency is proactive in collecting informal feedback through its regular engagement with a range of stakeholders, including Presidents, Vice-Presidents and Heads of Quality Management of colleges, and auditors and sector bodies, and responding to that feedback, such as by adding resources and guidance materials.

A yearly review of the CQAAP audit cycle is carried out, which includes collection of both quantitative and qualitative feedback on the audit process from both participating colleges and audit panel members. The analyis of this yearly feedback has informed a recent full review of the CQAAP audit process in coincidence with the end of the last audit cycle in 2019. The thematic findings from the feedback analysis provided the framework to engage stakeholders in this review process. The Panel **commends** this regular and proactive effort to consult with stakeholders with a view to continuously improving the Agency's processes and ensure they remain fit for purpose over time.

OCQAS has in the past also been subject to external reviews, and there is evidence that it has acted on or considered reflectively, the recommendations resulting from these reviews, such as that of reforming the membership of the Management Board, with the appointment of an independent chair and involving stakeholders outside the college sector. The latest external review, which informed the first GGP alignment, was however carried out in 2010, and a number of recommendations resulting from that review are still current. The Panel therefore **recommends** that, starting with this second GGP alignment review, the Agency undergoes external review on a more regular basis, ideally not exceeding five years.

2.2 Links to the QA community

OCQAS is proactively engaging with the international quality assurance community, in particular through attendance of international conferences, including INQAAHE's events, and bilateral exchanges. The Panel however **recommends** the Agency to consider developing more formal and strategic relationships with other quality assurance bodies in key countries for the Ontario College sector, such as those where Ontario colleges have overseas operations. This area of development was already picked up in the 2010 external review.

Nonetheless the Panel appreciates how the Agency benefits from regular engagement with QA agencies across Canada, as well as from the input of the external members of the Management Board who come from QA bodies operating in different sectors.

Commendations

- The regular and proactive effort with which the Agency consults with stakeholders with a view to continuously improving its processes and ensure they remain fit for purpose

Affirmations

- A clear conflict of interest policy has been put in place applying to all members of staff, Management Board members and auditors

Recommendations

- Undergo external reviews on a more regular basis, ideally not exceeding five years.
- Develop more formal and strategic relationships with other international QA bodies, especially in countries where Ontario colleges have overseas operations

Conclusion of The Panel's Assessment:

The Panel considers that the Agency has in place policies and mechanisms for its internal quality assurance that enables it to regularly review its activities taking into account the views of a number of stakeholders and responding to the changing landscape in which it operates. However, the Agency should strive to undergo independent external review on a more regular basis, and might want to consider strengthening its international strategic engagement in particular in response to the internationalisation efforts of the Ontario college sector.

Assessment for the Guideline:

Substantially compliant

III. The EQAA's framework for the external review of quality in higher education institutions

The main concern of the EQAA is the promotion of quality education and student achievement. In doing this, it recognises that quality is primarily the responsibility of the higher education institutions themselves, and, supports this principle in its criteria and procedures. These promote internal quality assurance (IQA) and provide higher education institutions with clear guidance on the requirements for self-assessment and external review.

☐ Not compliant	☐ Partially compliant	■ Substantially compliant	☐ Fully compliant

3.1 The relationship between the EQAA and higher education institutions

OCQAS is systematically recognized by stakeholders as an effective organization, that provides support to the colleges with a highly developmental approach. Colleges are autonomous in terms of curriculum development and pedagogical practices, provided they meet the requirements of the Credential Framework (CF) (a part of the Ontario Qualifications Framework) and the common practice of other programs in the system. When they want to have a new program approved (and especially if it is to be funded by the Ministry Colleges and Universities -MCU) they submit a proposal to OCQAS for a Credential Validation Service (CVS). This is limited to checking its alignment with the CF and the definition of learning outcomes that are compatible with the titling regulations stated by the Ministry. The Panel **commends** the constructive work OCQAS does with the colleges to help them meet the statutory requirements for program approval and funding.

It also **commends** the effort put into the development of a quality culture in the colleges, through a wide range of mechanisms. This includes the practice of secondment, described in GGP 1. Nonetheless, while the practice of secondment is a very effective way to share good practice and establish a quality culture across the sector, it raises a question about possible conflicts of interest (e.g. colleges which provide secondees might get market advantage by gaining insight into what programmes are being advanced by competitor colleges). The Panel valued the positive aspects of secondment, but **recommends**, as per recommmandation on page 9, that the Agency should formalise the appointment of secondees, to ensure fairness and transparency, so that in a reasonable period of time, all colleges that wanted it could have their staff included in the secondment.

The audit process (CQAAP) focuses on the internal quality arrangements of the colleges and therefore is a useful mechanism for improving and updating them, something recognized by the colleges and the external reviewers.

3.2 The definition of criteria for external quality review

The standards established for the CVS are the responsibility of the Program Standards Unit (PSU) at the Postsecondary Quality Assessment Board (PEQAB), which is part of the MCU. These sometimes make innovation or alignment with new language or industry requirements difficult, since some have not been adjusted since 2009. Although, OCQAS reports the issues it finds to PEQAB, it has no input on programme standards and their review.

Audit criteria are developed by OCQAS. The Agency had a major review in 2018 and every year a survey is sent to the colleges audited during the year to get their feedback. The Panel heard from some colleges that some aspects of the audit had been changed without their previous understanding, which made preparation for the audit more time consuming and expensive.

The audit criteria cover the main issues related with internal quality management: Program Quality Management System; Vocational Learning Outcomes as the Centre for Program Development (throughout the program lifecycle); Conformity with Government Requirements; Program Delivery and Student Assessment; Existence, Monitoring and Communication of Policies and Practices that Influence and Impact Academic Quality; Availability and Allocation of College-Wide Resources. These are explained clearly in the corresponding requirements.

The Panel **commends** OCQAS for the clear and complete criteria for the audits, and the fact that they are reviewed periodically.

3.3 The external review process

The CVS is carried out with a clear set of guidelines, which include the Minister's Binding Policy Directive - Framework for Programs of Instruction. The proposal is reviewed by at least two staff members at OCQAS and the Agency guides the colleges in interpreting the Policy Directive and works with the colleges to help them meet all relevant requirements when needed.

OCQAS has a well-organized and effective external review process for the audits, which involves a self-evaluation exercise carried out by the college, focusing on the criteria and their experience, and a comprehensive review carried out by a team of three reviewers. The selection of the peer reviewers for each audit includes a pre-selection by the college from a list of potential reviewers; a draft review of the self-evaluation report by at least twice the reviewers needed; a decision on the final team after an assessment of the draft review. The chair is always someone external to the college system. The Panel **commends** the rigorous process for selecting reviewers for CQAAP audits.

The Panel is able to **affirm** the effectiveness of the training process for peer reviewers, which includes an initial training when they are inducted into the roster, and then again for each audit. Both the training process and the guidelines and supporting materials ensure a thorough review, although the panel suggests that thought be given to ways to ensure the roster of reviewers captures both diversity and innovation accross the sector.

Consistency between external review reports is assured through a clear set of guidelines, the training process before each review, the presence of a member of the Secretariat (usually, the Executive Director) during the site visit, a review of the report and a final decision by the Management Board.

3.4 The requirements for self-evaluation

A full set of guidelines for the work the colleges need to do to prepare for both CVS and audit is permanently and publicly available. In addition, OCQAS offers workshops and training sessions to the colleges that are to undergo an audit. The Panel was informed that colleges could also submit a draft self-evaluation report for a preliminary review.

Students are consulted during the evaluation process, but there is no consistent mechanism or process to develop their awareness of QA and its potential to improve quality. The Panel **recommends** strengthening mechanisms for raising awareness of the OCQAS system with the student body as key for pursuing further the student engagement agenda identified as a priority for the Agency**.**

Commendations

- The constructive work the Agency does with the colleges to help them meet the statutory requirements for program approval and funding.
- The effort put into the development of a quality culture in the colleges, through a wide range of mechanisms including through secondments, guidance documents supporting internal (and external) quality assurance processes, and workshops and training sessions.
- The clear and complete criteria for the audits, and the fact that they are reviewed periodically.
- The rigorous process for selecting peer reviewers.

Affirmations

- The effectiveness of the training process for peer reviewers, which includes an initial training when they are inducted into the roster, and then again for each audit.

Recommendations

- Review the practice of secondment to ensure fair and conflict-free access to secondment for all colleges that wish to take part in it.
- Raise awareness about the QA arrangements in place and the role the Agency plays in order to improve student engagement.

Conclusion of the Panel's assessment

The Panel recognizes the significant work OCQAS does to develop a quality culture in the colleges, through different mechanisms, such as workshops, complete and clear support documents, and a close relationship between the Management Board and the Executive Director with the colleges. Peer reviewers are systematically trained and updated, and their appointment to each audit is innovative and participatory. Students seem to have a limited awareness of the QA processes, which needs to be strengthened to advance the student engagement process OCQAS considers important.

Assessment for the guideline:

Substantially compliant

IV. The EQAA and its relationship to the public

The EQAA makes public its policies and decisions about institutions and programs, discloses the decisions about its own performance and disseminates reports on outcomes of QA processes.

☐ Not compliant	☐ Partially compliant	☐ Substantially compliant	■ Fully compliant

4.1 Public reports on EQAA policies and decisions

OCQAS provides a full disclosure of its materials (criteria, requirements, guidelines and other documents) to colleges and all stakeholders, through its website, direct communications and a newsletter.

While this information is easily accessible to colleges and to other interested stakeholders, there is little information addressed to students or to the general public. In the case of students, it would be certainly important to let them know the importance of quality audits, and it would be a way to encourage them to become more involved in quality issues at their colleges. For the public in general, it would be important to learn about the quality work being carried out by OCQAS. The Panel therefore **recommends** to disseminate the results of the Agency's work more broadly, to provide the general public with an increased awareness of the benefit to society associated with QA processes.

CVS decisions are sent to the colleges and to the MCU. Audit decisions are sent to the college and an executive summary is published on the website. The executive summary includes the review panel's general conclusions about the audit, the audit results (that is, whether each criteria has been met) and the audit decision on the level of maturity of the college (formal, organized or mature). In addition, it reports the commendations, the recommendations and affirmations resulting from the site visit and the self-assessment report, and provides a justification for its decisions, mainly through the supporting evidence for its commendations and recommendations. Colleges must prepare a report 18 months after the audit, and these reports are also published in the website.

The publication of full reports has been discussed in different meetings, but both the college and OCQAS consider that the current approach is the right one for the sector.

4.2 Other public reports

OCQAS has published on its website the results of the two external review processes it has gone through (in 2006 and 2010).

A full report on the CVS is sent to the Management Board every year, and an Annual report documenting the validation data is disseminated to all stakeholders and published on the website. The Panel **commends** this.

Regarding institutional audits, the Management Board receives the results for the previous five years of audits and an analysis of recommendations from that cycle. OCQAS also prepares and publishes a report on the CQAAP Standards with highlights from audits, which is published on the website.

It also uses the Newsletter to inform the public of any changes or upcoming activities. However, there is little dissemination of the work done by the Agency to the general public.

Commendations

- The preparation of annual reports on CVS and audits, and their distribution to a wide range of stakeholders.

Recommendations

- Disseminate the results of the Agency's work more broadly, to provide the general public with an increased awareness of the benefit to society associated with QA processes.

Conclusion of the Panel assessment

The Panel found that the Agency fully meets the requirements for information to the public. Still, it would be good to find ways to make the general public more aware of the QA arrangements and develop a clearer understanding about their potential to improve the quality of college offerings.

Assessment of the guideline:

Fully compliant

V. Decision making

The EQAA has policies and procedures in place that ensure a fair and independent decision-making process in the final review of the institution or the program. It provides effective procedures to deal with appeals and complaints.

☐ Not compliant	☐ Partially compliant	■ Substantially compliant	☐ Fully compliant

5.1 The decision-making process

OCQAS makes effective use of multiple reference points within its decision making, including compliance with relevant frameworks, considering an institution's self-assessment and the outcomes of an external review audit. There is a clear methodology within OCQAS's procedures and audit reviews appear to be evidence-based and auditor training encourages triangulation within decision making. Decisions are hence considered to be impartial and there is an appropriate mechanism of moderation to ensure consistency in decision making which includes both OCQAS staff (usually the Executive Director) and ultimately the Management Board.

Criteria are clear and transparent for both CVS and CQAAP processes with published policies, criteria and procedures. Reported outcomes are similarly clear with decisions and communications to institutions being template-based for both CVS and CQAAP.

The Panel therefore **affirms** that decision making is informed by using an evidence-based methodology with clearly published criteria and an appropriate mechanism of moderation.

5.2 The EQAA's process for appeals and complaints

The Panel found that OCQAS had a suitable and appropriate appeals process which included clear criteria indicating the basis for a formal appeal. There exists a clear process and expectation for institutions. Appeals in relation to the CQAAP process are managed by a Panel that was not involved in the original decision making and hence conflicts of interest are resolved. Timescales in relation to appeals appeared to be reasonable and stakeholders indicated that the appeals process functioned well and met their needs. Stakeholders commented that many issues that might constitute minor grounds for appeal were normally effectively resolved through an informal mechanism involving communication with the Executive Director or staff of OCQAS and successful resolution was frequently obtained.

Stakeholders also commented that complaints were frequently resolved through an informal process, usually through Management Board, although the Panel noted that a formal complaints process was still being developed by the Agency. The Panel **recommends** that the Agency would benefit from having a formal complaints policy in place as soon as possible and they should expedite the development of this work. This

will protect the Agency should any complaint issue not be resolvable through an informal route, and also to ensure that all complaints are formally recorded for statistical and historical record keeping.

Affirmations

- Decision making for quality assurance audits is informed by using an evidence-based methodology with clearly published criteria and an appropriate mechanism of moderation.

Recommendations

- Formalise the Agency's formal complaints process through the development of a complaints policy.

Conclusion of The Panel's Assessment:

The Panel considers that the decision-making function of OCQAS is effective through the use of an evidence-based approach, supported by templated outcomes and communications. OCQAS has policies and procedures in place to ensure that decision making is impartial, consistent, transparent and rigorous. The Panel believes that the Agency has a sound and robust appeals procedure but needs to develop a formal policy for managing complaints.

OCQAS is fully compliant around guidelines for decision making and handling appeals, but is not compliant around guidelines for managing complaints about its procedures or operation.

Assessment for the Guideline:

Substantially compliant

VI. The QA of cross border higher education

The EQAA has policies relating to both imported and exported higher education. These policies take into account the characteristics of the providers and the receivers, and, refer to all types of transnational higher education.

☐ Not compliant	☐ Partially compliant	■ Substantially compliant	☐ Fully compliant

6.1 Criteria for cross border higher education

The CQAAP Standards and Requirements clearly sets out the expectation that Ontario's colleges operating overseas retain the responsibility for ensuring the equivalent quality of the transnational education offered, and that appropriate academic policies and procedure are in place regarding the establishment and management of transnational education partnerships, including through formal partnership agreements.

The CQAAP Standards and Requirements also set out, albeit implicitly, the expectation that colleges should provide clear information to students and stakeholders about the program of studies they offer, such as through comprehensive program handbooks. More emphasis might be placed however on the importance for colleges to clearly manage the expectations of students studying Ontario colleges' degrees offered overseas. It is also less clear from either the Self-Assessment Report and the meetings the Panels held with different stakeholders that the Agency has robust processes in place to check colleges' compliance with CQAAP Standards and Requirements for their Transnational Education (TNE) provision. The Panel **recommends** that the Agency considers strengthening its policies and processes for the quality assurance of TNE provision offered by Ontario's colleges. This might involve elaborating further its Standards and Requirements, and ensuring that its pool of auditors covers expertise in TNE.

6.2 Collaboration between agencies

There is little evidence that the Agency has developed significant cooperation with international quality assurance bodies in the external quality assurance of TNE provision, and that the Agency's international engagement goes beyond engagement in international conferences, and sporadic bilateral meetings with other international agencies, with the exception of its regular participation in the Cross Country Checkup, the network of the QA agencies in Canada. The Panel therefore **recommends** the Agency to strengthen its international engagement work, with a specific view to developing relationships with agencies in strategic countries for Ontario's colleges TNE provision.

The Panel also believes that OCQAS might benefit from developing an international engagement strategy to underpin its international work, and **recommends** that due consideration is given to this.

Recommendations

- Strengthen policies and processes for the quality assurance of TNE provision offered by Ontario's colleges.
- Strenghten the Agency's international engagement work, with a specific view to developing relationships with agencies in strategic countries for Ontario's colleges TNE provision.
- Develop an international engagement strategy to underpin the Agency's international work.

Conclusion of The Panel's Assessment:

The Panel considers that the CQAAP set of Standards and Requirements clearly set out the expectation that colleges should have policies and procedures in place to safeguard the quality and standards of their TNE provision. However, more emphasis might be placed on ensuring that the expectation of TNE students is well-managed, and the Agency should consider reflecting on the best way to ensure that its external quality assurance processes apply adequately to TNE provision.

The Agency should also consider strengthening its international engagement work, with a view to developing cooperation with agencies in key countries for the international activities of Ontario's colleges.

The Panel finds that OCQAS is partially compliant with regards to criteria and processes for transnational education, and partially compliant with regards to cross-border cooperation with other international QA agencies.

Assessment for the Guideline:

Substantially compliant

CONCLUSIONS

OCQAS's governance and management arrangements are a strength that promotes quality within the sector. The Management Board provides strong leadership and the Executive Director effective management.

The Agency has clear and transparent policies and processes in place to underpin its quality assurance activities, and it regularly consults with stakeholders in keeping its processes under review and ensuring that they remain fit for purpose. OCQAS also has clear policies and mechanisms for its internal quality assurance that enables it to regularly review its activities taking into account the views of a number of stakeholders and responding to the changing landscape in which it operates.

The Agency works effectively to develop a quality culture in the colleges, through different mechanisms, such as workshops, complete and clear support documents, and a close relationship between the Management Board and the Executive Director with the colleges.

The Agency has reached a developmental stage at which it will benefit from being better resourced in order to move forward and engage in a number of broader strategic activities it is currently unable to progress fully, including sector wide enhancement work, public engagement, student engagement, and international engagement.

Overall the Panel found OCQAS to be **substantially compliant** with the GGP

SUMMARY LIST OF COMMENDATIONS, AFFIRMATIONS AND RECOMMENDATIONS

Commendations

- Clearly defined mission and vision of the Agency.
- Strategic leadership provided by the Management Board Chair and Board members leading to a strengthening of a culture of quality within the Agency and the System more broadly.
- The regular and proactive effort with which the Agency consults with stakeholders with a view to continuously improving its processes and ensure they remain fit for purpose
- The constructive work the Agency does with the colleges to help them meet the statutory requirements for program approval and funding.
- The effort put into the development of a quality culture in the colleges, through a wide range of mechanisms including through secondments, guidance documents supporting internal (and external) quality assurance processes, and workshops and training sessions.
- The clear and complete criteria for the audits, and the fact that they are reviewed periodically.
- The rigorous process for selecting peer reviewers.
- The preparation of annual reports on CVS and audits, and their distribution to a wide range of stakeholders.

Affirmations

- Effective Management Board oversight provided through good composition of internal and external membership, including student representation.
- Clear policies and procedures for most Agency activities, including around conflict of interest.
- A dedicated and effective Executive Director who manages the Agency effectively and has ensured that the Agency is well regarded within the Ontario College sector.
- A clear conflict of interest policy has been put in place applying to all members of staff, Management Board members and auditors.
- The effectiveness of the training process for peer reviewers, which includes an initial training when they are inducted into the roster, and then again for each audit.
- Decision making for quality assurance audits is informed by using an evidence-based methodology with clearly published criteria and an appropriate mechanism of moderation.

Recommendations

- Amend Management Board's membership policy to ensure that there is formal clarity around the mechanism for making Management Board appointments.
- Give due consideration to formalising the process for advertising, selection and recruitment of candidates to the Quality Assurance Associate roles.
- Give thought to supporting the Executive Director in the role in order to support succession planning, and enable the Agency to carry out more effectively a broader range of strategic activities such as national/international cooperation, advocacy, student engagement, and sector wide enhancement activities.
- Undergo external reviews on a more regular basis, ideally not exceeding five years.
- Develop more formal and strategic relationships with other international QA bodies, especially in countries where Ontario colleges have overseas operations.
- Review the practice of secondment to ensure fair and conflict-free access to secondment for all colleges that wish to take part in it.
- Raise awareness about the QA arrangements in place and the role the Agency plays in order to improve student engagement.
- Disseminate the results of the Agency's work more broadly, to provide the general public with an increased awareness of the benefit to society associated with QA processes.
- Formalise the Agency's formal complaints process through the development of a complaints policy.
- Strengthen policies and processes for the quality assurance of TNE provision offered by Ontario's colleges.
- Strengthen the Agency's international engagement work, with a specific view to developing relationships with agencies in strategic countries for Ontario's colleges TNE provision.
- Develop an international engagement strategy to underpin the Agency's international work.

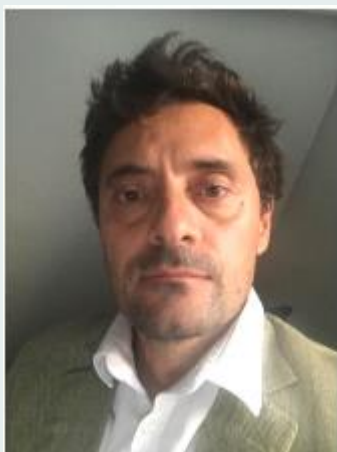# APPENDIX 1: INQAAHE GGP REVIEW PANEL

CHAIR	SECRETARY	MEMBER

Dr. MariaJose Lemaitre

Executive Director CIND

Dr. Fabrizio Trifiro'

Head of Quality
Benchmark Services, UK
NARIC

Dr. Stephen Doughty

Director, Eseldi Ltd, UK.

INQAAHE GGP Project Director: Concepción Herruzo Fonayet, AQU Catalunya

Report signed off by INQAAHE GGP Project Director in Barcelona, 22 January 2021

APPENDIX 2: GGP REVIEW VIRTUAL SITE VISIT PROGRAM

DAY-1: Wednesday 2 December 2020

Time	Meeting
09.00 – 10.00	Management Board
10.00 – 11.00	Executive Director
11.00 – 11.45	Supporting Part-time Staff
10.00 – 11.00	Ministry of Education Representatives & PQAB
11.00 – 11.45	Senior management representatives from colleges that have taken part in CVS/ President representatives from colleges that have taken part in CVS and (audits)

DAY-2: Thursday 3 December 2020

Time	Meeting
08.30 – 09.30	Senior management representatives from colleges that have gone through audits/ Vice President Academics representatives from colleges that have taken part in audits (and CVS)
09.30 – 10.30	Quality Managers (audit and CVS)
10.40 – 11.45	External Audit Reviewers

DAY-3: Friday 4 December 2020

Time	Meeting
08.30 – 09.30	Student Council Representatives
09.30 – 10.30	Clarification Meeting with Executive Director
12.30 – 13.30	Exit Meeting with Management Board and Executive Director

APPENDIX 3: SUMMARY EVALUATION OF REVIEW PANEL

#	INQAAHE GGP	REVIEW PANEL ASSESSMENT
1	THE STRUCTURE OF THE EQAA	SUBSTANTIALLY COMPLIANT
1.1	Legitimacy and recognition	
1.1.1	The EQAA has an established legal basis and is recognized by a competent external body.	Fully compliant
1.1.2	The EQAA takes into consideration relevant guidelines issued by international networks and other associations, in formulating its policies and practices.	Fully compliant
1.1.3	The EQAA has a clear and published policy for the prevention of conflicts of interest that applies to its staff, its decision-making body, and the external Reviewers.	Fully compliant
1.2	Mission and purposes	
1.2.1	The EQAA has a written mission statement and a set of objectives that explicitly provide that external quality assurance of higher education is its major concern, describe the purpose and scope of its activities and can be translated into verifiable policies and measurable objectives.	Fully compliant
1.3	Governance and organisational structure	
1.3.1	The EQAA has a governance structure consistent with its mission and objectives, and, adequate mechanisms to involve relevant stakeholders in the definition of its standards and criteria.	Fully compliant
1.3.2	The composition of the decision-making body and/or its regulatory framework ensure its independence and impartiality.	Fully compliant
1.3.3	The EQAA's organisational structure makes it possible to carry out its external review processes effectively and efficiently	Substantially compliant
1.3.4	The EQAA has a strategic plan that helps assess its progress and plan for future developments	Fully compliant
1.4	Resources	
1.4.1	The EQAA has a well-trained, appropriately-qualified staff, able to conduct external evaluation effectively and efficiently in accordance with its mission statement and its methodological approach.	Fully compliant
1.4.2	The EQAA has the physical and financial resources needed to fulfil its goals and carry out the activities that emerge from its mission statement and objectives.	Substantially compliant
1.4.3	The EQAA provides systematic opportunities for the professional development of its staff.	Fully compliant

2	ACCOUNTABILITY OF THE EQAA	SUBSTANTIALLY COMPLIANT
2.1	**Quality Assurance of the EQAA**	
2.1.1	The EQAA operates with transparency, integrity and professionalism and adheres to ethical and professional standards.	Fully compliant
2.1.2	The EQAA has in place mechanisms that enable it to review its own activities in order to respond to the changing nature of higher education, the effectiveness of its operations, and its contribution towards the achievement of its objectives.	Fully compliant
2.1.3	The EQAA periodically conducts a self-review of its own activities, including consideration of its own effects and value. The review includes data collection and analysis, to inform decision-making and trigger improvements.	Fully compliant
2.1.4	The EQAA is subject to external reviews at regular intervals, ideally not exceeding five years. There is evidence that any required actions are implemented and disclosed.	Partially compliant
2.2	**Links to the community**	
2.2.1	The EQAA is open to international developments in quality assurance and has mechanisms that enable it to learn about and analyse the main trends in the field.	Fully compliant
2.2.2	The EQAA collaborates with other QA agencies where possible, in areas such as exchange of good practices, capacity building, and review of decisions, joint projects, or staff exchanges.	Substantially compliant
3	**THE EQAA'S FRAMEWORK FOR THE EXTERNAL REVIEW OF QUALITY IN HIGHER EDUCATION INSTITUTIONS**	SUBSTANTIALLY COMPLIANT
3.1	**The relationship between the EQAA and higher education institutions**	
3.1.1	The EQAA recognises that institutional and programmatic quality and quality assurance are primarily the responsibility of the higher education institutions (HEIs) themselves, and respects the academic autonomy, identity and integrity of the institutions and programs.	Fully compliant
3.1.2	The EQAA promotes the development and appropriate implementation of IQA processes in accordance with the understanding that the primary responsibility for assuring quality resides with the institutions and its programs.	Fully compliant
3.1.3	The EQAA bears in mind the level of workload and cost that its procedures will place on institutions, and, strives to make them as time and cost effective as possible.	Fully compliant
3.2	**The definition of criteria for external quality review**	
3.2.1	The EQAA recognises and values institutional diversity and translates this valuation into criteria and procedures that take into account the identity and goals of higher education institutions.	Fully compliant

3.2.2	The standards or criteria developed by the EQAA have been subject to reasonable consultation with stakeholders and are revised at regular intervals to ensure relevance to the needs of the system.	Substantially compliant
3.2.3	Standards or criteria take into consideration the specific aspects related to different modes of provision, such as transnational education, distance or online programs or other non-traditional approaches to HE as relevant to the context in which they operate.	Substantially compliant
3.2.4	Standards or criteria explicitly address the areas of institutional activity that fall within the EQAA's scope, (e.g., institutional governance and management, program design and approval, teaching and learning, student admission, progression and certification, research, community engagement) and on the availability of necessary resources (e.g., finances, staff and learning resources).	Fully compliant
3.2.5	Criteria or standards and procedures take into account internal follow up mechanisms, and, provide for effective follow up of the outcomes of the external reviews.	Fully compliant
3.2.6	The EQAA procedures specify the way in which criteria will be applied and the types of evidence needed to demonstrate that they are met.	Fully compliant
3.3	**The external review process**	
3.3.1	The EQAA carries out an external review process that is reliable and based on published criteria and procedures. It follows a self-assessment or equivalent, and, includes an external review (normally including a site visit or visits), and a consistent follow up of the recommendations resulting from the external review.	Fully compliant
3.3.2	The EQAA has published documents, which clearly state what it expects from higher education institutions, in the form of quality criteria, or standards and procedures, for self-assessment and external review.	Fully compliant
3.3.3	The external review process is carried out by teams of experts consistent with the characteristics of the institution/program being reviewed. Experts can provide input from various perspectives, including those of institutions, academics, students, employers or professional practitioners.	Substantially compliant
3.3.4	The EQAA has clear specifications on the characteristics and selection of external Reviewers, who must be supported by appropriate training and good supporting materials such as handbooks or manuals.	Fully compliant
3.3.5	External review procedures include effective and comprehensive mechanisms for the prevention of conflicts of interest, and, ensure that any judgments resulting from external reviews are based on explicit and published criteria.	Fully compliant
3.3.6	The EQAA's system ensures that each institution or program will be evaluated in a consistent way, even if the external Panels, teams, or committees are different.	Substantially compliant

3.3.7	The EQAA carries out the external review within a reasonable timeframe after the completion of a self-assessment report, to ensure that information is current and updated.	Fully compliant
3.3.8	The EQAA provides the higher education institutions with an opportunity to correct any factual errors that may appear in the external review report	Fully compliant
3.4	**The requirements for self-evaluation**	
3.4.1	The EQAA provides clear guidance to the institution or program in the application of the procedures for self-evaluation, the solicitation of assessment/feedback from the public, students, and other constituents, or the preparation for external review as necessary and appropriate.	Fully compliant
4	**THE EQA AND ITS RELATIONSHIP TO THE PUBLIC**	**FULLY COMPLIANT**
4.1	**Public reports on EQAA policies and decisions**	
4.1.1	The EQAA provides full and clear disclosure of its relevant documentation such as policies, procedures and criteria.	Fully compliant
4.1.2	The EQAA reports its decisions about higher education institutions and programs. The content and extent of reporting may vary with cultural context and applicable legal and other requirements.	Fully compliant
4.1.3	The EQAA has mechanisms to facilitate the public a fair understanding of the reasons supporting decisions taken.	Fully compliant
4.2	Other public reports	
4.2.1	The EQAA discloses to the public the decisions about the EQAA resulting from any external review of its own performance.	Fully compliant
4.2.2	The EQAA prepares and disseminates periodically integrated reports on the overall outcomes of QA processes and of any other relevant activities.	Fully compliant
5	**DECISION MAKING**	**SUBSTANTIALLY COMPLIANT**
5.1	**The decision-making process**	
5.1.1	The EQAA decisions take into consideration the outcomes of both the institution's self-assessment process and the external review; they may also consider any other relevant information, provided this has been communicated to the HEIs.	Fully compliant
5.1.2	The EQAA decisions are impartial, rigorous, and consistent even when they are based on the reports of other quality assurance bodies.	Fully compliant
5.1.3	The EQAA decisions are based on published criteria and procedures, and, can be justified only with reference to those criteria and procedures.	Fully compliant
5.1.4	Consistency in decision-making includes consistency and transparency in processes and actions for imposing recommendations for follow-up action.	Fully compliant

5.1.5	The EQAA's reported decisions are clear and precise.	Fully compliant
5.2	**The EQAA's process for appeals and complaints**	
5.2.1	The EQAA has procedures in place to deal in a consistent way with complaints about its procedures or operation.	Not compliant
5.2.2	The EQAA has clear, published procedures for handling appeals related to its external review and decision-making processes.	Fully compliant
5.2.3	Appeals are conducted by a Panel that was not responsible for the original decision and has no conflict of interest; appeals need not necessarily be conducted outside the EQAA.	Fully compliant
6	**THE QAA OF CROSS-BORDER HIGHER EDUCATION**	**SUBSTANTIALLY COMPLIANT**
6.1	Criteria for cross-border higher education	
6.1.1	The EQAA in a sending country makes clear that the awarding institution is responsible for ensuring the equivalent quality of the education offered, that the institution understands the regulatory frameworks of the receiving countries, and that the institution provides clear information on the programs offered and their characteristics.	Fully compliant
6.1.2	Students and other stakeholders receive clear and complete information about the awards delivered.	Fully compliant
6.1.3	The rights and obligations of the parties involved in transnational education are clearly established and well known by the parties.	Fully compliant
6.2	Collaboration between agencies	
6.2.1	The EQAA cooperates with appropriate local agencies in the exporting and importing countries and with international networks. This cooperation is oriented to improve mutual understanding, to have a clear and comprehensive account of the regulatory framework and to share good practices.	Partially compliant
6.2.2	The EQAA seeks ways to cooperate in the external quality assurance in transnational education provision, for example through mutual recognition.	Partially compliant

ACKNOWLEDGEMENT

The Review Panel thanks OCQAS – its Management Board, Executive Director and staff – as well as internal and external stakeholders, including OCQAS auditors, colleges' representatives, the Ministry, PEQAB, and students, for the constructive spirit in which they have engaged with the Panel during the virtual review visit. The Panel also thanks the Executive Director for the quality of the Self-Review Portfolio, and the prompt attention to the requests made by the Review Panel for further information.