Key Contact Annual Report

2023 – 2024

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Annual Report on Quality Assurance Key Contact Meetings
2023 – 2024

Executive Summary

Previously known as the Omnibus Report, this year sees a renaming of this Report to become the Key Contacts Annual Report. What has not changed is that it continues to capture the outcomes of the exchange forums and annual meeting that are organized by and for Ontario universities' Key Contacts for quality assurance matters. These events – individually and collectively – offer advantages to the universities' Key Contacts, as well as to the sector in that they create a platform for the exchange of ideas and system-wide trends, and the sharing of mutual support for any ongoing challenges experienced while quality assuring the universities' academic programs. Importantly, these meetings also facilitate discussions related to innovative approaches and best practices observed in the sector, drawing insights from the Appraisal and Audit Committees, as well as the Key Contacts themselves.

While many experiences are shared, each QA Key Contact brings a unique viewpoint to these meetings, reflecting the diversity of Ontario's publicly assisted universities. The perspectives and advice shared in the Key Contacts' events throughout the year are not, therefore, universally applicable, since each Key Contact operates in a different context and can face unique challenges. However, taken as a whole, the level of engagement in these meetings reflects the Key Contacts' ongoing commitment to improving quality assurance practices across the sector.

The first Exchange Forum for 2023-24 diverged from the norm and provided members of the Audit Committee with an opportunity to consult with the Key Contacts on issues related to "Determining the Thresholds for Significant Change". The session included a brief presentation from the Chair of the Audit Committee, which included an update on the Committee's work on this topic to date followed by a consultation exercise with the participants. Defining "significant change" to an academic program is a longstanding topic across Ontario's quality assurance community and among other outcomes, this Exchange Forum resulted in the creation of a working group, composed of volunteer Key Contacts, members of the Quality Council's Audit Committee, and the Quality Assurance Secretariat. Once finalized, the work of this group will be shared with all Key Contacts.

Picking up on a theme from last year's Annual Meeting, the second Exchange Forum was focused on "Data for Quality Assurance Activities" and included comparative presentations from several universities on their approaches to data gathering and dissemination mechanisms. The Forum resulted in a constructive exchange on best practices and varying approaches to this aspect of the Cyclical Program Review (CPR). It also provided participants with an opportunity to identify some ongoing related challenges and discuss possible solutions.

The 2024 QA Key Contact Annual Meeting began with a State of the Union address by the outgoing Chair of the Quality Council, Dr. Paul Gooch, during which he reflected on the history and the purpose of the Council and Quality Assurance activities in the province. Dr. Gooch commended the Key Contact community for its diligent and hard work, and reflected on themes

that might be considered during the next review of the Quality Assurance Framework, which is scheduled for 2025–26.

The subsequent concurrent sessions of the Annual Meeting focused on innovative approaches during CPRs, the ongoing issue of delays in CPRs and possible solutions, and conducting quality assurance in the face of significant financial constraints. Dr. Susan McCahan from the University of Toronto analyzed the rapidly growing popularity of Generative Artificial Intelligence – particularly Large Language Models subtypes – and their potential benefits and threats to post-secondary education, which was very well received by the meeting's participants. The day's program concluded with a brief overview of research and evidence-based practices related to wellness in academia by Dr. Klodiana Kolomitro from Queen's University. Participants were then offered an interactive opportunity to identify actions that can encourage a flourishing work environment and support their well-being. Overall, feedback from Key Contacts indicated that the Annual Meeting continues to provide an important platform for participants to network and exchange novel and ongoing challenges and opportunities within the universities' Quality Assurance sector.

Further details on the key findings from the following events can be found throughout this year's Report:

- Key Contact Exchange Forums
    - Determining Thresholds for Significant Change (February 26, 2024)
    - Data for Quality Assurance Activities (April 22, 2024)
- 2023-2024 Key Contact Annual Meeting (May 29, 2024)

In addition to this annual Report, notes and other materials from each Exchange Forum and Key Contact Annual Meeting sessions are available on a dedicated Key Contact website. This website provides a space for Key Contacts to connect with one another, by commenting on posted material or by engaging in discussion forums. It is password protected and available to Key Contacts only, to facilitate open and confidential discussion across the Key Contact community.

Overview of key themes arising from the 2023-24 Key Contact Exchange Forums and 2024 Key Contact Annual Meeting

In addition to the details provided in the full report below, presentations and materials shared during the meetings are available to Key Contacts on the Key Contacts' password protected [Discussion Forum website]().

Key Contact Exchange Forum 1 – Determining Thresholds for Significant Change, February 26, 2024

Participants: 40 participants representing all 23 universities

Key Theme: Defining Thresholds for Change

There are a variety of approaches used by the universities when making decisions about thresholds of change between a minor modification, a major modification, and a new program. Most Key Contacts felt that it is well understood in their institutions who to go to for support and interpretation of requirements. However, some challenges still exist with understanding when a change to a program might cross the threshold from one type of modification to another.

The following represent some of the approaches to decision-making that were shared by the Key Contacts during the Forum:

- In order to better understand what is being proposed and make decisions accordingly, many universities conduct consultations with internal curriculum committees, quality assurance offices, and senior quality assurance staff, as well as have discussions with the faculty that are proposing the program changes.

- Almost all universities routinely consult with the QA Secretariat and/or submit letters to the Quality Council seeking its opinion with regards to the appropriate QA process to be used for the proposed program changes.

- A small number of universities mentioned keeping a catalogue of past precedents and decisions from within the institution as a reference tool. Past correspondence from the Quality Council or its Secretariat can also be helpful, as well as the Institutional Quality Assurance Processes (IQAP), which typically closely mirrors the requirements of the Quality Assurance Framework and associated guidance.

- Some Key Contacts indicated that using quantitative thresholds to determine the level of change can be helpful.

- The majority use a named arbiter to make the final decision when more sophisticated interpretation is required.

Key Theme: Suggested Changes to the Quality Assurance Framework (QAF) and Guidance

While some Key Contacts appreciate the "grey areas" in the guidance that can allow for local context, some elements of the QAF and its guidance were noted as areas that could benefit from more context being added. These included:

- Currently, the QAF uses the term "significant change" in a variety of ways, which can lead to confusion. Consistency throughout would be helpful.

- Making a more explicit link between the preamble to the guidance and the examples provided.

- The inclusion of more practical and applied examples of major modifications.

- The development of a concrete definition or a reference point for "significant".

- Developing an anonymized database containing the Quality Council's previous decisions with regards to major modifications.

- Guidance on the threshold benchmarks that would draw clear lines between minor and major modifications being more clearly articulated.

- Specifying the expectations for relaunching a program that has had its admissions suspended.

- Provision of more practical examples and guidance that demonstrate when changes in program learning outcomes and the modes of delivery constitute a major modification.

- The potential review of the guidance examples (do they still meet the criteria for major modifications in all cases?).

Key Theme: Ongoing Challenges

The Key Contacts also identified a number of challenges, primarily related to the work of distinguishing between the different types of modifications, as well as the available guidance on making these distinctions. The most prominent challenges noted were as follows:

- QA requirements and the staff supporting these can, at times, be perceived by faculty members as stifling innovation. There can also be a lack of understanding of where the requirements are coming from (e.g., institutional versus provincial-level requirement).

- The Guidance tends to focus on examples of major modifications and new programs. Examples of minor modifications and the threshold of change from these to major modifications are less defined.

- Specific guidance on when a change to the program-level learning outcomes constitutes a major modification is lacking.

- Concentration of the decision-making expertise and experience within one role, with the practical experience of defining the threshold of change to the program resting with one person. It can be hard to substitute this knowledge or experience when a person leaves the role.

- While at least one university does not have any templates in place for quality assuring changes to its programs with another only having templates for some types of changes but not others, several universities indicated that they have a variety in place for each category of change.

- The ongoing fiscal constraints.

Key Theme: Some Solutions

- It can be helpful to have a committee (versus an individual) make such decisions. An additional benefit is that this can result in greater acceptance of the decision from the proponents of the modification in question.

- Key Contacts encouraged each other to consider using future Exchange Forums to share real challenges and ask one another, when in doubt.

- The Quality Council could consider issuing a survey to solicit additional feedback on this topic, with the inclusion of additional examples to the existing guidance.

Some Related Observations from the Cyclical Audits

- Ongoing and frequent engagement between the stakeholders engaged in various quality assurance mechanisms, including guiding academic units through the major modifications' process.

- Strong engagement in quality assurance processes by senior administrators, including with major modifications. This can serve as a safety mechanism to ensure the quality assurance activities are conducted in accordance with necessary standards, as well as assisting with buy-in.

Additional resources

- Notes and shared resources from the February 26, 2024 Key Contact Exchange Forum available here: February 26, 2024, Key Contact Exchange Forum – QA Key Contact Forums (oucqa.ca) (password protected)
- QAF Guidance: Distinguishing between Major Modifications and New Programs: Examples — Ontario Universities Council on Quality Assurance (oucqa.ca)
- Quality Council Resource: Approaches-to-Continuous-Improvement.pdf (oucqa.ca)

Key Contact Exchange Forum 2 – Data for Quality Assurance Activities, April 22, 2024

Participants: 44 Key Contacts representing all 23 universities

Key Theme: QA Related Data

Key Contacts agreed that the following information is typically considered when compiling data packages for a Cyclical Program Reviews (CPRs) self-study, and / or for a new program proposal:

- Applications and entering averages of perspective students
- Faculty composition
- Enrollment data

- Performance in courses through CGPA data
- Class sizes (student-faculty ratio)
- Unit's research activity and capacity
- Student satisfaction surveys
- Equity, Diversity and Inclusion (EDI) tools and statistics
- Information about library supports
- Types of financial support offered to students (scholarships)
- Labor market demand analysis

Key Theme: Approaches to Data Collection

- At Carleton University:
  - Data reports are custom built by the Office of Institutional and Research Planning and can be accessed from the Office of Academic Programs and Strategic Initiatives (OAPSI).
  - Units, which at Carleton are understood to be the degree programs, cannot access the data directly and rely on OAPSI to receive it.
  - Units are not limited to the data provided by the OAPSI and can use it to supplement their own data.
- At Toronto Metropolitan University:
  - The University is currently working on a system for data management, collection, and distribution.
  - The new system is interactive and filters out the information based on the unit's search requirements. 'Unit' at TMU is the curriculum program.
  - The University is exploring the possibility of storing faculty CVs in the new system.
  - The current data reports provided to the units are custom built.
- For a number of other universities, the Office of Institutional Planning and Analysis (or equivalent) gathers and disseminates QA-related data.

Key Theme: Mechanisms for Sharing Data

- At Nipissing University:
  - The data cycle starts with the call for the Cyclical Program Review (CPR).
  - The Institutional Planning and Analysis Office (IPAO) spends four weeks validating and sharing the data with the unit. During this period, IPAO meets with the unit's Internal Review Committee to give it a chance to review the data and ask for more information.
  - IPAO provides the data in tables utilizing the MS Power BI platform to visualize the data and MS Teams to redistribute the data to the units.

- IPAO's main goal is to make data approachable and easy to interpret and redistribute.

- The data for CPRs is locked in time. However, the data are usually updated annually, after each graduation period in June and can then be refreshed at any time.

- Other Key Contacts also noted:

  - At the University of Ottawa, the data are posted in a SharePoint folder.

  - At the University of Windsor, the data are provided directly to units by the QA Office.

  - At York University, the data are usually shared via MS Teams, except for the student survey data, which are provided as an emailed report.

Key Theme: Improvements in Sharing and Interpreting Data

- TMU integrates EDIA data in the packages provided for the CPRs. These data are gathered from the results of demographic survey on students and faculty within specific programs. It helps units to understand their future hiring and recruitment priorities and other relevant strategies. These data also assist programs that are currently implementing the EDII principles in their curriculum as it provides for the correct language that can be used to design the admission requirements.

- At Nipissing University, the use of Power BI allows for cross-filtering capabilities. For instance, as explained during the presentation, the unit can select a program and the system will show all the courses that the students are taking within this program. The units can also filter the data by a course and it will show all the programs depended on this course.

- Nipissing was also able to resolve a challenge with cohort tracking. The team found that some students start in one program and later transfer to a different program. This element was missed from the previous cohort-tracking approach, which provided for unmatching enrollment numbers. Now, Nipissing is looking at the admission and graduation data separately to have a broad view on the cohort-tracking and to calculate the precise enrollment data.

- Carleton University noted that over the last five years, it has drastically changed the way the data are provided to units. The main change is in the purpose of data – now the data are to support units' narratives and intentions, unlike in the past when units received large arrays of generalized data.

- Key Contacts also noted that their universities refined their approaches to presenting and interpreting data in the following ways:

  - At Wilfrid Laurier University, the team developed new reports and introduced more collaborative approaches to the development of student life cycle data.

  - At Algoma University, the team has minimum standard requirements for all data packages and collaborates with the departments to conduct careful reviews of the provided data.

Key Theme: Challenges and Opportunities in Data Gathering and Sharing

Data for small programs: Interpreting and defining trends for small programs is hard to do when the student numbers are small. However, the small numbers can allow a university to experiment and try new approaches towards data gathering and usage.

Conflicting data sources: Challenges can arise due to the discrepancies between the data provided centrally and the data collected by the units themselves. This discrepancy is typically due to the time period when the data are collected. One noted practice was that central services continue to work on the timing of data provision, making sure it aligns with the appropriate CPR stage for the program.

Outdated data: Another challenge identified was with respect to the timelines for the data provision. At one university, the data are provided to the units before the Fall that the unit needs to start their CPR. The data are based on the previous year's November 1st count. By the time the program reaches the peer-review stage, the data is now a few years old and potentially not as reflective as when first provided.

It was noted that updating data is important as it facilitates an understanding of post-pandemic trends. However, it was also noted that having outdated data does not prevent the units from conducting a CPR. In this case, units should be encouraged to work with the data they have as submitting a self-study based on slightly outdated data is better than not submitting a self-study at all. Adding an addendum with updated information is another solution to this issue.

Miscellaneous: Some Key Contacts observed that the responsibility for gathering data can, at times, be spread across several institutional systems/offices that do not necessarily have established collaborative channels. There is a risk that this can result in a cumbersome process for creating / accessing data packages.

Some Related Observations from the Cyclical Audits

- One university was commended for its use of student surveys to inquire about the program's quality and health from the students' perspective. It was noted that the student feedback proved to be extremely effective for academic units in reflecting on their programs' health and quality.

- Some universities supplied their units with the self-study report templates that contained pre-populated sections, which help to guide units in organizing their self-studies during scheduled CPRs.

- The use of a centralized quality assurance file depository has been acknowledged at more than one university as an effective means to consolidate and organize both files and data for quality assurance activities.

- The introduction of environmental scans as part of the data package for new program proposals can help an institution to understand the demand for new programs and hone the institution's vision of the particular niche that its new programs will play in the post-secondary marketplace.

Additional resources

- Notes and shared resources from the April 22, 2024 Key Contact Exchange Forum available here: [April 22, 2024 Key Contact Exchange Forum – QA Key Contact Forums (oucqa.ca)](#)

- Quality Council resource: [Collecting-and-Showing-Data-to-Support-CPRs.pdf (oucqa.ca)](#)

QA Key Contact Annual Meeting, May 29, 2024

Participants: 33 in-person and 25 virtual Key Contacts attended the day, representing all 23 universities

The 2024 Annual Meeting of the Key Contacts provided participants with the opportunity to discuss in-depth some of the ongoing challenges and opportunities in quality assurance. While discussing ways to ensure continuous improvement has been a theme of other recent Key Contact meetings, this year's included sessions that explored how to do so within the reality of the financial constraints being experienced by the post-secondary education sector. The day's discussions were framed through the opening State of the Union address by the outgoing Chair of the Quality Council, Dr. Paul Gooch. Plenary and concurrent sessions that allowed participants to explore innovative practices associated with the use of internal reviewers for CPRs, as well as exploring the causes and solutions for CPR delays – a common theme for the Key Contact meetings – were also part of the day's programming. The first of two plenary sessions presentations reflected on the potential benefits and harmful effects of utilizing Artificial Intelligence with quality assurance, which was very well received by the meeting participants. The closing plenary focused on strategies to maintain the well-being of the Quality Assurance community in challenging times. Throughout the day and in spite of the ongoing challenges, Key Contacts demonstrated that continuous improvement of their quality assurance processes is actively occurring. These included innovative ways of consulting key stakeholders to improve CPR processes, revised methods for monitoring and providing accountability, and changes to timelines, processes and enforcement measures to facilitate timely completion of program reviews.

The day was held in a hybrid format, to accommodate those for whom travel and meeting in-person was not feasible. While in-person attendees shared ideas at table discussions, remote attendees met with each other for breakout discussions on Zoom. As with past years utilizing this format, nearly all those who completed the feedback survey indicated that the meeting continues to be very helpful, providing a unique opportunity to connect with their quality assurance peers and share ideas, regardless of whether attendance was in-person or virtual.

The key themes and takeaways from the concurrent and plenary sessions are outlined in the respective sections below. Additional information and meeting material (such as sessions' video recordings and Padlet answers) are available to the Key Contacts on the password protected website: [QA Forum](#)

Concurrent Session 1 a - QA Innovation

Presenter: Dr. David Hornsby, Vice-Provost & Associate Vice-President (Academic), Carleton University.

During this session, Dr. David Hornsby, Vice-Provost and Associate Vice-President (Academic) at Carleton University, explored the theme of innovation in quality assurance and its importance to ensuring its continued relevance to our communities.

Key Theme: Internal Reviewers – Innovations, Challenges and Opportunities

Carleton University has recognized its internal reviewers as a useful source of information regarding the external review process. Internal reviewers are therefore asked to formally report back to the central administrative/decision-making body about the review process and suggest specific improvements and/or provide general feedback about the external reviewers' site visit.

- Internal reviewers typically come from a significantly different discipline and so may experience a disciplinary disconnect, which can lead the internal reviewer feeling unqualified for their role in the beginning of the review process.

- In cases of virtual site visits, internal reviewers reported experiencing a disconnect from the entire process and felt they were regarded as technical support rather than an information resource for the institutional mechanisms and processes as originally intended.

- In a majority of cases, internal reviewers have reported that in-person visits were more engaging and rewarding than virtual ones. During discussion, the Key Contacts agreed that participation in the virtual visits is more complex. It was suggested that the QA offices might consider creating some interactive points during virtual visits that would allow internal and external reviewers to engage in Q&A discussions with one another. The Key Contacts also noted that it might be beneficial to allocate some time prior to the formal commencement of the visit in order for the internal and external reviewers to establish a dialogue and a constructive communication bridge.

- The presence of an internal reviewer might impact on students feeling free to offer critical feedback. To address this at Carleton, the internal reviewers either leave the Zoom or in-person meeting with students. This allows students to speak freely with the external reviewers.

The QA Academy at Western University, which trains students to become internal reviewers, was also flagged during this session as an innovative initiative.

Key Theme: Monitoring Reports for CPRs – Addressing Program Learning Outcomes

Another innovative practice at Carleton is that of explicitly monitoring program responses to Learning Outcomes-related recommendations stemming from the CPR process. The practice in intended to ensure that such recommendations are being addressed by the unit in a timely manner and before the next CPR cycle.

- The monitoring process consists of two stages; a mid-way monitoring report and final monitoring report. The mid-way monitoring report ensures that the units are committing to the timelines of their Implementation Plans and meeting their objectives prior to the next CPR. This report is to be submitted in the middle of the seven-year period since the last CPR. The final monitoring reports have the same goal as the mid-way monitoring report and are to be submitted a few months before the next CPR cycle commences. The final reports require the units to articulate the work that has been done and connect the outcomes of their activity to the initial commitments made in the FAR/IP of the previous CPR.

- The mid-way and final reports are reviewed by the Senate Quality Assurance and Planning Committee, which has the authority to push the reports back to the unit for further work in a collaborative and constructive manner. Neither of the reports contain portions for decanal inputs. Generally, Deans are not included in the monitoring reports, unless there is a serious concern.

- Some questions in the monitoring reports include: Who is responsible for the assessment of program learning outcomes? Were any learning outcomes added, deleted or modified since your last CPR? Which learning outcomes (if any) are left to be assessed?

- While Carleton does not offer units training in how to complete these reports, the University's there are QA team members with PhDs in educational development who are actively support the units in the monitoring process, thereby creating a functional and effective system of support.

Some Related Observations from the Cyclical Audits

- Aspects of a CPR from one unit are shared across the whole Faculty of that unit. This practice allows other units within that Faculty to have a sneak-peek in the CPR activities and understand the process in preparation for their own CPR.

- One university has implemented an annual monitoring process, which helps to keep the academic units accountable and ensure the continuity of quality assurance in cases of leadership turnover. The reports usually capture the short-term urgent needs that are necessary for the program's success. This practice is particularly helpful during the transitions in senior administrative staffing, as it allows those new to their roles to be quickly introduced to the most urgent needs experienced by programs and demonstrate the pathways of addressing these needs.

- Another university was commended for the close involvement of the Senate committees that support the units undergoing CPRs. Among other responsibilities, the Committees review and finalize Implementation Plans compiled by the units and the Deans, ensuring adequacy and appropriateness of the documents.

Additional resources

- Notes and shared resources from the May 29, 2024 Key Contact Annual Meeting available here: 2024 Key Contact Annual Meeting – May 29, 2024 – QA Key Contact Forums (oucqa.ca)

- QAF Guidance: [Internal Members of the Review Committee: Role and Responsibilities (QAF 2.2.1 and 5.2.1) — Ontario Universities Council on Quality Assurance (oucqa.ca)](oucqa.ca)
- QAF Guidance: [Guidance on Monitoring Reports for New Programs and Cyclical Program Reviews — Ontario Universities Council on Quality Assurance (oucqa.ca)](oucqa.ca)
- Quality Council resource: [Managing-Changes-in-Leadership-from-one-CPR-to-the-Next.pdf (oucqa.ca)](oucqa.ca)

Concurrent Session 1b - Dealing with CPR Delays

Presenter: Claire O'Brien, Manager, Academic Initiatives, Queen's University

Key Theme: Reasons for Delays

There are quite a few factors that contribute to CPR delays. Although the following grounds were identified by the presenter from Queen's University, other universities have experienced the same, as well as other, reasons for prolonged CPRs. The most common grounds for the CPR delays noted during the session were:

- Heavy workloads that prevent consistent engagement in the CPR process;
- One person assigned to lead the CPR work without any additional support and lack of collaboration from other departments;
- Internal delays within the unit;
- CPR process is not a top priority for the unit; and
- Delays and missed deadlines in governance processes.

Key Theme: Units' Requests for Support

Units conducting the CPRs have signaled that dedicated project management support to assist with CPRs would be valuable. Program representatives have also indicated that streamlining the CPR-related administrative processes and templates would help to prevent potential delays.

Key Theme: Approaches to Avoiding CPR Delays

Steps taken and changes made by Queen's University to date to address CPR delays included:

- Shortening the CPR cycle to seven years;
- Drafting the curriculum alignment section in advance of the self-study completion and submitting this to the Centre for Teaching and Learning (CTL) for review;
- Sending draft self-studies for concurrent review by the Faculty's Dean, Dean of Graduate Studies, and by the Vice-Provost;
- Employing a permanent person in the Vice Provost Teaching and Learning team with the capacity to focus on CPRs;
- Using organizational software (Asana) to track CPRs;

- Obtaining supports from various units across campus (e.g., School of Graduate Studies, Institutional Research and Planning, Centre for Teaching and Learning, Equity, Culture and Inclusion Office);

- Units participate in check-in meetings and workshops provided by the Centre for Teaching and Learning, a step replicated at other universities with frequent meetings with units undergoing CPRs and maintains a tracking record for each unit. At Queen's, these meetings are mostly online and cancelled if there is nothing to discuss; and

- Key Contacts in the session agreed that providing units with orientation sessions that encourage units to treat CPRs as a chance to take a step back and reflect on the overall health of the program helps to promote buy-ins for CPRs.

Key Theme: Mechanisms for Compliance and Accountability

Queen's University has introduced measures to increase the level of compliance with CPR timelines and to increase accountability accordingly. These are as follows:

- The Vice-Provost, Teaching and Learning has established deadlines, as well as the required follow up mechanisms, to ensure that units comply with their commitment to the CPR process. The office works with the Associate Deans across different Faculties to involve them in the process of working with the unit.

The Key Contact from Toronto Metropolitan University provided the following additional enforcement mechanisms in place at their institution:

- A freeze on any curriculum changes, which is the most common incentive applied by the University;

- Inadmissibility of applications for the teaching grants from faculty in programs that are delinquent;

- Pausing the hiring process for a department not in compliance with the established deadlines;

- A financial penalty on the Faculty responsible for the out of compliance program; and

- Suspension of admission, which serves as the strongest incentive to comply with the CPR timeline.

Some Related Observations from the Cyclical Audits

- Notifying the academic units scheduled for CPRs about the self-study deadlines 18 months before the due date for their self-studies, providing units with an advance notice and giving them sufficient time to complete their self-studies.

- Strong involvement of a university's senior administration can have very positive effects, including in mitigating CPR delays.

- Clear roles for the Senate committee(s) responsible for quality assurance, including accountability, can help units avoid experiencing CPR delays.

- Notes and shared resources from the May 29, 2024 Key Contact Annual Meeting available here: 2024 Key Contact Annual Meeting – May 29, 2024 – QA Key Contact Forums (oucqa.ca)
- QAF Guidance: Schedule of Reviews: Not to Exceed Eight Years — Ontario Universities Council on Quality Assurance (oucqa.ca)
- QAF Guidance: Guidance on Timelines for Cyclical Program Reviews — Ontario Universities Council on Quality Assurance (oucqa.ca)
- QAF Guidance: Adjusted Oversight — Ontario Universities Council on Quality Assurance (oucqa.ca)
- Quality Council resource: Coping-with-CPR-Delays.pdf (oucqa.ca)
- Quality Council resource: Conducting-Cyclical-Program-Reviews-CPRS.pdf (oucqa.ca)

Plenary Session 1 – Artificial Intelligence and Quality Assurance

Presenter: Dr. Susan McCahan, Vice-Provost, Innovations in Undergraduate Education and Vice-Provost, Academic Programs, University of Toronto

During this session, Dr. McCahan explored how Large Language Models work, as well as some of the ways artificial intelligence may be useful in quality assurance processes to analyze curricula, consolidate feedback and identify trends. Some of the risks and pitfalls associated with AI, as it currently stands, were also examined.

A more detailed summary of this session has not been provided given the rapidly evolving nature of this area of work.

Additional resource

- Notes and shared resources from the May 29, 2024 Key Contact Annual Meeting available here: 2024 Key Contact Annual Meeting – May 29, 2024 – QA Key Contact Forums (oucqa.ca)
- Mollick, Ethan. *Co-intelligence* Penguin Publishing Group, 2024.
- Mitchell, Melanie. *Artificial Intelligence: A Guide for Thinking Humans* Farrar, Straus and Giroux, 2019.

Plenary 2 – Caring for our QA community: Making well-being a priority

Presenter: Dr. Klodiana Kolomitro, Special Advisor, Undergraduate Research/Vice Principal Research Portfolio, Queen's University

This session was offered in recognition of the significant burnout many staff in university QA offices are experiencing as a consequence of the pandemic, followed by significant financial restraints. Dr. Kolomitro therefore provided an overview of research and evidence-based

practices related to wellness in academia and then offered an interactive opportunity for participants to identify actions that can encourage a flourishing work environment and support their well-being.

Key Theme: Burnout – Reasons and Aggravating Factors

- There are five top reasons for burnout in professional environments: Unfair treatment at work; unmanageable workload; lack of role clarity; lack of communication and support from a manager; and unreasonable time pressure.

Key Theme: Optimizing Well-Being in Professional Environments

Workplace well-being can be promoted at the individual and organizational levels.

- At an Individual level, well-being is reinforced by practicing gratitude, developing resilience, and establishing boundaries.

- Well-being at an organizational level is promoted through strong leadership, shared team vision, and manageable workload.

- The following strategies were identified as having been proven to be useful in creating flourishing environments:

  o Implementing supportive administrative and institutional practice by introducing and encouraging positive behavior models and improving organizational policies to emphasize well-being;

  o Promoting effective leadership and management through transparent decision-making processes and supporting career progression and professional learning of staff;

  o Fostering attention to wellness by explicitly encouraging staff to use available wellness resources.

Key Theme: Additional Strategies for Well-being

Key Contacts noted that having an ability to work remotely and be flexible with one's schedule and business hours can play an important part in one's well-being. It was also noted that holding meetings in unconventional environments (e.g., meeting outdoors or at a café) helps to shift the focus of attention by having a break from the office environment and that this can be refreshing. Additional observations from the Key Contacts included:

- Receiving clear communication from the institutions' leadership plays an important role in sustaining staff's well-being.

- It is helpful when universities informed staff about new wellness opportunities available to them as it encourages staff to explore these opportunities.

- Clear communication regarding current budgetary considerations is extremely beneficial as it allows staff to understand the real financial circumstances in their home institutions.

- Having clearly delineated roles is an important factor in wellness sustainability.

- Promoting a better understanding about the nature and the duties of the QA offices across the institution could offset unnecessary stresses and pressures experienced by QA staff.

- Mechanisms to promote and ensure student wellness have been developed by all universities. These strategies could helpfully be adopted to promote staff wellness in the future.

Additional resource

- Notes and shared resources from the May 29, 2024 Key Contact Annual Meeting available here: 2024 Key Contact Annual Meeting – May 29, 2024 – QA Key Contact Forums (oucqa.ca)

What's next?

The Quality Council will continue to hold virtual Exchange Forums throughout the year, in addition to the annual QA Key Contact meeting. These will continue to focus on key issues, as they arise, and provide time for the Key Contacts to connect. In the coming years, the next review of the Quality Assurance Framework will also feature significantly in these meetings. Finally, showcasing best practices across and within the system will continue to be an important goal for these meetings.

Thank you

Many thanks to the members of the QA Key Contact Exchange Forum Program Planning Committee and the QA Key Contact Meeting Program Planning Committee.

Program Planning Committee for the Key Contact Exchange Forums

Maysah Eid, Quality Enhancement Coordinator, New Programs and Research, University of Waterloo

Penny Kollar, IQAP Administrator, University of Windsor

Christina Noja, Manager, Office of the Vice-Provost and Associate Vice President, Carleton University

Martee Storms, Executive Assistant to the Provost and Vice-President Academic and Research, Nipissing University

Sean Kheraj, Vice – Provost Academic, Toronto Metropolitan University

Program Planning Committee for the Key Contact Annual Meeting

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