ONTARIO UNIVERSITIES
COUNCIL on QUALITY ASSURANCE

REPORT ON THE PHASE 2 QUALITY ASSURANCE AUDIT OF BROCK UNIVERSITY

October 2026

Contents

Introduction to the Phase 2 Audit 1
Process used during the Second Phase 2
- Quality Assurance Activities 3
- Virtual Site Visit 3

Findings of the Phase 2 Audit 3
- Commendations 4
- Observations 4
  - Observation 1: Accreditation and QA Reviews 4
  - Observation 2: Monitoring of new programs 5
  - Observation 3: Schedule of Reviews 5
  - Observation 4: The number of stakeholders in a process step 6
  - Observation 5: Senate sub-committees contributing to internal responses 6
  - Observation 6: Selection of external reviewers using an at arm's length process 6
  - Observation 7: Documenting the involvement of faculty, staff and students in the preparation of a self-study 7
  - Observation 8: ARC's response to recommendations that deal with resources 7
  - Observation 9: Dean provides a timetable in their response to the external reviewers' report 8
  - Observation 10: Prioritizing actions in the Implementation Plan 8
  - Observation 11: Bundled programs for review 8
  - Observation 12: New Program Proposals 9

Conclusion 9
Appendix A: Auditor Bios 10
Appendix B: Terms of Reference 11
- Background 11
- Purpose and Scope 11
- Selection of Quality Assurance (QA) Activities 12
- Meeting(s) 12
- Phase 2 Audit Report 12

Appendix C: Acronyms 13

Introduction to the Phase 2 Audit

Brock University was founded in 1964 and is home to seven Faculties. Brock University reports approximately 19,000 students, 600 faculty members, and over 128,000 alumni. Quality assurance (QA) policy, practice and procedures at Brock University are governed by the University's Institutional Quality Assurance Processes (IQAP). Brock University was one of two universities to be audited in the first year of the Second Cycle and one of five universities in a Two-Phase Audit. Because the University had not yet implemented the re-ratified IQAP in 2022-2023, the Phase 1 Audit Team reviewed the quality assurance processes used under the 2016 IQAP to guide this phase of the Second Cycle Audit. This Phase 2 audit is based on the 2023 Brock IQAP that was updated to meet the requirements of the 2021 version of the Quality Assurance Framework (QAF).

Brock University prepared for the Phase 1 Audit by submitting a comprehensive Institutional Self-Study that highlighted key achievements and ongoing challenges related to its quality assurance activities. The self-study, submitted approximately four months before the site visit, helped frame the Phase 1 Audit Team's review. The auditors conducted a detailed desk audit that examined institutional documentation alongside a sample of six quality assurance activities selected from both the New Program Approval and Cyclical Program Review processes under Brock's IQAP. During the site visit, the Phase 1 Audit Team met with senior administrators, quality assurance personnel, and representatives from the academic programs included in the audit sample to gain further insight into institutional practices and processes.

The Phase 1 Audit Team commended Brock's engagement with the audit process. Two Causes for Concern were noted in the Phase 1 Report. The first Cause for Concern was that the University was using the accreditation review to replace the cyclical program review in every instance. In doing so, it was systemically inconsistent in conducting and documenting mapping of both accreditation and CPR requirements, accreditation reports being submitted to ARC, involving the library, and producing Final Assessment Reports and Implementation Plans. The second Cause for Concern involved the absence of monitoring reports for recently approved new programs. The Phase 1 Brock Audit Report (dated August 2023) also identified six Recommendations and 14 Suggestions.

Brock submitted a One-Year Follow-up Report in which it was noted that the Phase 1 Audit in 2022-23 informed the revisions the University subsequently made to its IQAP in 2023. The Phase 1 Audit Team was impressed with the progress and the attention given to quality assurance at Brock based on the one-year Follow-up Report. The Phase 1 Audit Team noted that Brock demonstrated a strong commitment to improvement and had made progress on addressing the concerns from Phase 1. The Phase 1 Audit Team found evidence about efforts around robust communication, continual refinement of templates, involving the library in CPRs, and ensuring units are directed to the appropriate supports that seem to have helped improve the culture of QA at Brock.

Process used during the Second Phase

The following comprised the Audit Team for the Brock University Phase 2 Audit (see brief biographical information in Appendix A):

- Dr. Michel Laurier, University of Ottawa
- Dr. Doug McDougall, University of Toronto
- Dr. Mary Wilson, Wilfrid Laurier University
- Dr. Chris Evans, Quality Council Secretariat support
- Ms. Cindy Robinson, Quality Council Secretariat support

Brock was informed in March 2025 that Phase 2 of the University's Cyclical Audit was scheduled to take place in 2025-26 and Terms of Reference (ToR), see Appendix B, were subsequently created to guide the Phase 2 audit and shared with the University in June 2025. The scope defined in these ToR was as follows:

- The findings of the Phase 1 Audit Report, including the Follow-up report.
- The University's Summary of Changes and Progress Report.
- Revised processes for cyclical program reviews and new program proposals as specified in the 2023 IQAP.
- Any initial steps taken to address the two Causes for Concern identified in the Phase 1 Audit Report.
- Steps taken by the University to address Recommendations 1 through 6.

The Phase 2 Audit Team reviewed the documents noted above and identified three Cyclical Program Reviews and one New Program for desk audit. The quality assurance activities selected for Phase 2 represented examples of quality assurance activities conducted under Brock's revised 2023 IQAP. After the desk audit, the Phase 2 Audit Team prepared a set of questions to be posed at the virtual site meeting.

During the virtual site meeting, Brock's QA team reported that a real cultural change had been observed, despite some pockets of resistance and some persistent concerns among faculty members that the process is onerous. The QA team recognized that there has been a positive change, with an understanding by almost all programs that quality assurance is useful to them for continuous program improvement and not just a bureaucratic exercise.

The Phase 2 Audit Team acknowledges that the two-phase audit is particularly complex and time-consuming for all sectors of the University, from staff and students to faculty and administration. The Audit Team appreciated that Brock University fully participated in the process and provided auditors with extensive and mostly complete documentation for the Phase 2 Audit well in advance of the virtual meeting with the University's QA team.

As Phase 2 had a limited amount of documentation and shorter site visit, this Report does

not reflect the findings through the usual categories of recommendations and suggestions. In their place, the Report provides a small number of observations from the Audit Team, along with some associated suggestions. The observations are intended to be helpful and provide some options for further development. Together, these reflect the Audit Team's findings on the University's progress in addressing the outcomes of the Phase 1 Audit and compliance with the 2021 QAF and Brock's revised IQAP, with some thoughts on how it might continue to build on the good work that it already has undertaken. As such, they are not obligatory for the University to respond to in any way.

Quality Assurance Activities

As this was a Phase 2 Audit, a smaller sample of Cyclical Program Reviews (CPRs) and new program developments were selected for audit. The Phase 2 Audit Team therefore identified three programs that had undergone a CPR and one new program as the focus of the Phase 2 Audit. The activities selected were:

- Master of Applied Gerontology, CPR, graduate
- Sociology, CPR, undergraduate
- Visual Arts, CPR, undergraduate
- Master of Professional Education, New Program, graduate

The documentation associated with these program reviews was submitted for desk audit. The virtual visit with the QA Team at Brock included questions about these activities and the actions that have been taken further to the Phase 1 Audit.

Virtual Site Visit

The half-day virtual site visit was held on Friday June 5, 2026. The purpose of the virtual site visit was to meet with university representatives responsible for quality assurance to ask questions about the current quality assurance processes conducted under the requirements of the 2021 QAF, and in follow-up to the findings of the desk audits of the QA activities selected for the Phase 2 Audit. The questions were submitted to Brock University prior to the virtual site visit.

The Audit Team met with Brock University's senior QA team consisting of:

- Dr. Arja Vainio-Mattila, Provost and Vice-President, Academic
- Dr. Brian Power, Deputy Provost, Vice-Provost and Associate Vice-President, Academic
- Ms. Christina Phillips, Manager, Quality Assurance
- Ms. Sarah Kaufmann, Project Coordinator, Office of the Provost

Findings of the Phase 2 Audit

The sample of QA activities and the virtual site visit provided additional information about the quality assurance processes and practices at Brock. These data provided the Audit Team

with observations that assured the Team that the University has met the requirements of the revised 2021 QAF and Brock's revised IQAP. In some cases, the observations include suggestions on how Brock could enhance its quality assurance practices and processes. There was not yet sufficient evidence available to confirm that the Causes for Concern have been addressed, therefore, there is no recommendation for reduced oversight.

Commendations

One of the Causes for Concern identified in the Phase 1 Audit Report was to "ensure that the Quality Assurance Framework requirements for Cyclical Program Reviews of accredited programs are met". While none had occurred between the two audit phases, the Audit Team observed early positive signs, based on the practices observed for the next scheduled accreditation review after the Phase 1 Audit for the Goodman School of Business (GSB). In recognition of the importance of early communication and the need to set clear expectations, a member of the QA team sits in the GSB's accreditation-related meetings to provide support and to flag gaps and/or issues that should be considered from a quality assurance perspective. This practice should ensure better alignment of the two processes and the University is therefore commended on this new practice. It would do well to repeat it for other accreditation committees, where feasible.

The support provided by the QA team continues to impress the Phase 2 Audit Team, as does the work of the Centre for Pedagogical Innovation (CPI). There are many supports available from the CPI team including using a team approach to curriculum development called the Curriculum Delivery Initiative. The QA team has also enhanced the orientation for CPRs at the outset of the process as well as starting earlier than in the past. The programs have more than one orientation meeting before they start writing the self-study. The QA team emphasizes the supports that are available.

The Phase 2 Audit Team recognizes the importance of having an accurate and comprehensive Schedule of Reviews. The QA team has developed a long-term Schedule of Reviews that includes monitoring of programs. The University is to be commended for taking this long-range approach to recording future activities.

Observations

Observation 1: Accreditation and QA Reviews

The Phase 2 Audit Team understands from Brock's Phase 1 one-year follow-up report that, in response to Cause for Concern 1, the University has met with three Faculties that offer accredited programs. The Faculties have subsequently agreed to conduct the QAF-required CPRs separately and within one year of an accreditation visit. This change has not previously been part of the culture at Brock and its introduction will improve the quality of their programs, as well as ensure that the University meets the QAF requirements. The QA team indicated in the virtual meeting that the key to engage the faculty in both processes is early communication.

As previously noted, Brock indicated in the virtual meeting that the Goodman School of Business is engaging in their Association to Advance Collegiate Schools of Business (AACSB) accreditation. The School has a committee to review the data and write the accreditation self-study. It also has several internal staff devoted to accreditation. The School invited a member of the QA team to join the committee. Therefore, a representative from the QA team sits on the committee to provide advice about QA processes, perform a gap analysis, if needed, and to provide additional support (see the related Commendation).

The Phase 2 Audit Team noted that the CPR/accreditation schedule meant that Brock has not yet put into practice its plan to conduct a CPR within one year of the accreditation review and so there was no relevant CPR available to audit as part of the Phase 2 Audit. It will be important to consider how well in practice the University has addressed this Cause for Concern during its next Cyclical Audit in the third cycle of audits.

Observation 2: Monitoring of new programs

In the Phase 1 Audit report, Brock received a Cause for Concern for not monitoring its new programs, once launched. The Phase 2 audit has shown that, while ARC has now seen a few monitoring reports, there were no positive or negative comments made on them by ARC. The QA team stated that that they will have a better understanding of how ARC engages with the monitoring reports after more experience monitoring new programs. The Phase 2 Audit Team suggests that the University prepare a template to assist ARC members with the review of the monitoring reports and/or that the Committee's Terms of Reference be updated to specify its role in receiving these reports. The University may also wish to consider providing ARC members with access to the approved new program documentation so that they are able to better assess the degree to which the recently launched program is adhering to what was originally approved. It will, however, be important to consider how well in practice the University has addressed this Cause for Concern during its next Cyclical Audit in the third cycle of audits.

Observation 3: Schedule of Reviews

The Phase 2 Audit Team reviewed the schedule of reviews for completeness and to identify any CPRs that were not conducted within eight years. In doing so, the Phase 2 Audit Team noticed that one program, Critical Criminology, a new program approved in 2019, was not yet on the Schedule of Reviews. During the virtual meetings, the University informed the Phase 2 Audit Team that this program was bundled with the Sociology CPR. While it was clear in the documentation that Critical Criminology was part of the bundle included in the material submitted for audit, it is suggested that the University be transparent on exactly which programs are to be reviewed in the Schedule of Reviews, including for "bundled" reviews. The Phase 2 Audit Team observed that having an accurate and comprehensive Schedule of Reviews helps to ensure that the units are clear on expectations and prepared well in advance. In addition, the Phase 2 Audit Team heard that a long-term Schedule of Reviews has been developed that includes the monitoring requirements of new program. The University may also wish to consider adding the monitoring requirements for CPRs to the Schedule of Reviews.

Observation 4: The number of stakeholders in a process step

The Phase 2 Audit Team heard that there were some people at Brock who felt that the quality assurance process can be overly extensive. Brock University could consider whether all current stakeholders need to engage with a process step. For example, in the selection of external reviewers, the unit, Dean, ARC, and VPA/Provost are all involved in the identification and approval process. Perhaps the unit and VPA/Provost could make the decision, thus reducing the time required to make the decision and provide flexibility in the process of seeking other external reviewers should a refusal be received by the University. In general, Brock could review each process step to see if the number of stakeholders who review and sign off on the process could be reduced, with a focus on those steps that exceed the requirements of the QAF.

Observation 5: Senate sub-committees contributing to internal responses

The Audit Team observed that there are currently three Senate sub-committees involved in reviewing internal responses, as appropriate: Academic Review Committee (ARC), Undergraduate Program Committee (UPC), and Senate Graduate Studies Committee (SGSC). ARC oversees, monitors and reports on all aspects of Cyclical Program Reviews, new programs, major modifications, program closures, Final Assessment Reports, Annual Reports at the undergraduate and graduate levels, and review of both internal and external responses to the CPRs and New Program Reviews. The undergraduate and graduate committees focus on workflow assessment, calendar entries, and review of both internal and external responses to the CPRs and New Program Reviews. In doing so, the members give feedback on how a response to a QA-related recommendation might affect or alter workload. These Committees act as a guide to the units on the amount of work they will have to do if they proceed with their plans provided in the responses. However, it seems that other stakeholders – unit, Dean, VPA – could also provide this information. The Phase 2 Audit Team was not sure that the value provided by these sub-committees warrants the additional time that is presumably added to the process. The University may therefore wish to reconsider this aspect of the internal response stage of its CPR process.

The New Program process is also subject to review by at least two of these three committees. However, by the time new program proposals reach these committees, the proposals have already gone through a Statement of Intent stage which allows for extensive consultation and socializing across the University. In addition, ARC collects feedback from across the University and considers the feedback before the proposal goes out for external review. Consultative processes are beneficial, but there may be an opportunity to maintain adherence to the QAF standards and achieve the nature of input desired while streamlining the collection and consideration of internal feedback.

Observation 6: Selection of external reviewers using an at arm’s length process

In the Phase 1 Audit Report, Recommendation 5 said: “There should also be a record of this process being completed to ensure that the University has confidence in the selection of external examiners”. The Phase 2 Audit Team was unable to determine if such a record now exists as it was not part of the submitted documentation. The University is encouraged to

maintain a record of the process for selecting external reviewers, with some form of notation of the decision for each proposal and a verification of the reviewers being at arm's length from the program(s) under review.

Observation 7: Documenting the involvement of faculty, staff and students in the preparation of a self-study

There was a recommendation in the Phase 1 Audit about the need for the University to ensure student involvement in the development of self-study reports (Recommendation 6). Despite real efforts to improve the engagement of students, the Phase 2 audit documentation did not show how students and staff were involved in the preparation of self-study reports across the University. The impression based on the recent reviews considered during this Phase of the audit is that units are being more thoughtful about the need for broader involvement, including students; however, documentation of the nature of student engagement in self-study preparation across units was not in common evidence. The Phase 2 Audit Team was told that some programs actively engage students through focus groups while other programs have students involved in the self-study committee. In some programs, the Chair or a designate write the self-study report with unclear degrees of access to the unique insights of students regarding learning experiences in the program. It is best practice to have a self-study committee comprised of faculty, staff and students to ensure compliance with the IQAP. There could also be a standing item on the standing committee on program curriculum to review and discuss the self-study. The University is also encouraged to review the self-study template to ensure the expectation to engage with faculty, staff and students is clear, as well as that the unit needs to document this engagement when writing the self-study.

Observation 8: ARC's response to recommendations that deal with resources

As required by the QAF, Brock's IQAP indicates that all external reviewer recommendations should be discussed in the FAR. In some of the CPRs selected for the Phase 2 audit, the resource recommendations were not included in the FAR or, as appropriate, the IP or, if they were, they were not accepted at ARC. If a recommendation is solely resource-based, ARC understands that it is outside the purview of the ARC committee and Senate to decide whether it should be accepted. Therefore, in the past, ARC did not accept these resource recommendations. This process was changed in response to a finding of the Phase 1 audit and ARC now phrases the language differently – it acknowledges that there is an identified need for resources and advises on the other channels that are available to consider the recommendation. This stage of the CPR process is also an important opportunity to think about other types of programmatic changes that might address the root cause of the external reviewers' recommendations. Both the unit and ARC might therefore be encouraged to think differently about such recommendations rather than, as often happens, only focusing on hiring more faculty as the solution to address certain recommendations. The University has also modified the templates to encourage related comments.

Observation 9: Dean provides a timetable in their response to the external reviewers' report

In the Phase 1 Audit Report, there was a recommendation that the Dean provides a timetable in their response to the external reviewer's report for related CPRs, as required by the University's IQAP (Recommendation 3). In a letter to Brock University in December 2025, the Quality Council wrote: "that the timeline identified in the Implementation Plan for most recommendations was in fact the timeline for the Dean to report on the action, rather than an estimated timeline to complete the action associated with the recommendation". The University is therefore encouraged it ensure the Dean's response provide a timeline in their response indicating when the action will be completed.

Observation 10: Prioritizing actions in the Implementation Plan

The Phase 2 Audit Team noticed that the recommendations in the Implementation Plan were not prioritized and that the associated actions are frequently assigned as "first priority." It appears as if the recommendations were listed in the FAR/IP in the order that the external reviewers wrote the recommendations. As already suggested by the Quality Council, the University may wish to consider ordering the recommendations according to priority in the IP, and/or to reconsider the classification of "first priority" to the selected recommendations for action or develop a more discriminatory and realistic classification system. This would allow the programs to move forward on actions in a more efficient and effective manner rather than attempting to accomplish many actions within a short timeframe. The University may wish to consider assigning each action to an individual or a role rather than designated to the "Program".

Observation 11: Bundled programs for review

Brock frequently bundles programs for review purposes, and this presents a possible challenge. Bundling related academic programs for review may create a risk that the team of external reviewers does not possess sufficient disciplinary expertise across all programs in the bundle. Although the programs may share a broad disciplinary affiliation, they may differ substantially in their key areas of inquiry, methodologies, curricular focus, and research activity. As a result, external reviewers may be able to comment meaningfully on some programs, but not others, limiting the specificity depth and usefulness of the feedback provided through the external review process.

Brock indicated that they have a discussion with the external reviewers during the initial meeting to ensure that the external reviewers are aware of what is in the bundle and on which of the questions within their report template they will need to make program-specific comments.

The Phase 2 Audit Team encourages the University to reflect on opportunities to review its criteria for bundling and to further formalize the processes that are used to ensure that the recruitment, selection, and orientation of external reviewers for the review of bundled programs function well.

Observation 12: New Program Proposals

The program proponents and the Dean's offices generally approach the QA office for advice on specific stages of their program development on an ad hoc basis. It might be more effective for the University if the QA team was invited to early program meetings to discuss the best way to write the proposal. The QA team could use these meetings as an opportunity to initiate a referral process leading to CPI engagement. The CPI could assist the Dean in organizing and documenting Faculty-level engagement in the early program development process by conducting workshops, mapping PLO's and curriculum, and providing technology supports. A standing agenda item in the Deans' meetings in included to discuss upcoming plans for New Programs.

The Phase 2 Audit Team noted that there does not appear to be any opportunities for Faculty-level discussions of new program proposals. Deans could invite faculty members to a meeting to discuss new program proposals to get feedback, discuss resources, space, and curriculum development. These meetings could assist the Dean in forming their response to the new program proposal and to give feedback to the new program planning committee. It appears that Senate is the first formal discussion about a new program, and that is probably too late in the process to have some important conversations.

Conclusion

The Phase 2 audit of the quality assurance activities undertaken by Brock University has revealed significant increased efforts to meet the expectations of the Quality Assurance Framework, especially in recent years. The institution now has the capacity to develop further a culture of understanding and commitment to program quality improvement.

Given the progress observed during this Phase 2 Audit, the Audit Team would recommend to the Quality Council that no further audit-related action is required by the University at this time. The University's next full Cyclical Audit will provide a good opportunity to observe the ongoing progress being made to respond to the both the Phase 1 and Phase 2 audit findings, particularly for the two Causes for Concern that are still in the early stages of being addressed by the University.

Appendix A: Auditor Bios

Dr. Michel Laurier, *Past Interim Provost, Adjunct Professor, Faculty of Education, University of Ottawa*

Michel Laurier is an Emeritus Professor in the Faculty of Education at the University of Ottawa and was Dean of the Faculty from 2012 until 2015. He was then appointed Interim Vice-President Academic and Provost till May 2017. Before arriving at the University of Ottawa, he had been at the Faculty of Education of the University of Montreal where he worked as professor in Measurement and Evaluation and served as Dean for two terms. He holds an MA in Applied Linguistics from the University of Ottawa and a Ph.D. degree in Curriculum from the University of Toronto (OISE). His research focuses on testing and evaluation with a particular interest in the assessment of language competencies and the development of computerized testing instruments. He is also interested in program evaluation. He conducted several program evaluations at the national and the international level. He also has been involved in the development of educational policies about assessment and evaluation.

Dr. Douglas McDougall, *Professor Emeritus, Department of Curriculum, Teaching and Learning, University of Toronto*

Doug McDougall is a Professor Emeritus of Mathematics Education and former Chair of the Department of Curriculum, Teaching and Learning at the Ontario Institute for Studies in Education at the University of Toronto. He was an eight-year member of the Governing Council of the University of Toronto and served as chair and vice chair of the Academic Board. Dr. McDougall was the Associate Dean, Programs from 2015-2019 and Chair of the department from 2010-2015 and 2023-2024. Dr. McDougall has supervised to completion over 65 doctoral students and 25 MA students over the past 25 years. He is the Editor-in-Chief of the *Canadian Journal of Science, Mathematics and Technology Education*. Dr. McDougall has been involved with conducting research on school improvement, professional learning groups, student and teacher needs around students at risk, and peer coaching at both the elementary and secondary level.

Dr. Mary Wilson, Associate *Professor, Faculty of Education, Wilfrid Laurier University*

Mary Wilson is an Associate Professor in the Faculty of Education at Wilfrid Laurier University and former Vice-Provost, Teaching and Learning at Laurier. She has previously held the roles of Director of the Centre for Academic Excellence at Niagara College, Director of the Centre for Innovation in Art and Design Education at OCAD University, Educational Developer in Teaching Support Services at the University of Guelph, and a student affairs professional in the Learning Commons at the University of Guelph. Dr. Wilson has previously served on the management board of the Ontario College Quality Assurance Service and has also been significantly involved in the Learning Outcomes Symposium over the years. Dr. Wilson holds an EdD in Theory and Policy Studies from the Ontario Institute for Studies in Education at the University of Toronto. Her research interests focus on the study of disciplinary, professional, and occupational postsecondary education and the intersections of system, institution, curriculum, and faculty and student development efforts that function to enable and disable change.

Appendix B: Terms of Reference

Background

The Quality Council completed its first cycle of audits of Ontario's publicly assisted universities in 2019-2020. The same schedule of audits as the first cycle is being followed for the second.

Due to the timing of the initiation of the second cycle of audits, it was recognized that the universities whose audits occurred in the first two years of the cycle would not have had time to complete any New Program proposals and Cyclical Program Reviews based on the requirements of the 2021 version of the Quality Assurance Framework (QAF) and associated updated versions of their IQAPs. In order to provide sufficient feedback in the second cycle of audits that is not entirely related to work conducted under the prior IQAPs, these five universities are therefore undergoing a two-phase process. These Terms of Reference, customized for Brock University, are intended to clarify the scope and process for the Phase 2 Audit.

The Phase 1 Audit for Brock University took place in 2022-2023. It focused on quality assurance activities completed under the University's IQAP that was based on the 2010 Quality Assurance Framework. The Audit Team conducted an on-site visit with Brock University from February 8 – 10, 2023, and the Phase 1 Audit Report was provided to the University in August 2023. The Follow-up report from Brock University was submitted to the Quality Council on October 9, 2024 and the University received the Quality Council's approval of the auditors' response on December 20, 2024.

Purpose and Scope

Brock's 2023 IQAP was re-ratified by the Quality Council on June 21, 2023 confirming it meets the requirements of the 2021 Quality Assurance Framework. The Phase 2 Audit aims to verify the implementation of this revised 2023 IQAP and validate and/or update the findings of the Phase 1 Audit that are relevant to the revised IQAP and the 2021 QAF. In so doing, particular attention will be paid to the following, as appropriate:

- The findings of the Phase 1 Audit Report, including the Follow-up report.
- The University's Summary of Changes and Progress Report

Specifically, the Phase 2 Audit will consider:

- Revised processes for cyclical program reviews and new program proposals as specified in the 2023 IQAP.
- Any initial steps taken to address the two Causes for Concern identified in the Phase 1 Audit Report.
- Steps taken by the University to address Recommendations 1 through 6, as described in the Summary of Changes, Question #3 (page 1).

Should Brock University wish to clarify the expectations regarding these Terms of Reference, a virtual meeting could be organized with the Secretariat and a member of the Audit Team within two weeks of the receipt of these Terms of Reference by the University.

Selection of Quality Assurance (QA) Activities

The selection of sample QA activities by the Phase 2 Audit Team was informed by the Summary of Changes and Progress Report provided by the University. Only the QA activities associated with CPRs or the creation of new programs that have been conducted under the revised IQAP are eligible for consideration as part of the Phase 2 Audit.

The selection of samples QA activities is as follows:

New programs

- Master of Professional Education, Faculty of Education: Approved by QC April 25, 2025

Cyclical Program Reviews

- Master of Applied Gerontology, Graduate, Faculty of Applied Health Sciences, 2024-2025
- Sociology, Bundled UG/G, Faculty of Social Sciences, 2023-2024
- Visual Arts, Undergraduate, Faculty of Humanities, 2023-2024

Documentation for each of the QA activities selected for audit should include all of the elements indicated in Appendix 1.

The University has six months to prepare and submit the documentation associated with the selected sample of QA activities, which is therefore due on January 5, 2026.

Meeting(s)

Unless the University requests an in-person meeting, the Audit Team will hold the Phase 2 audit meeting virtually, minimally with the Senior QA Team. The Secretariat will work with the University and auditors to find a suitable date and time for this meeting. One month in advance of the visit, the Audit Team will also send the audit questions to Brock University to allow the University time to prepare for the visit. It is noted that the provision of questions prior to the virtual meeting is for Phase 2 Audits only and is not a practice in the Cyclical Audit Protocol. Depending on the scope of the questions, the University may wish to invite other University stakeholders to the meeting, in addition to the Senior QA Team. The University is asked to provide the QA Secretariat with a draft schedule of the meeting(s) two weeks prior to the visit.

Phase 2 Audit Report

The draft of the Phase 2 Audit Report will be sent to Brock University for fact-checking within six months following the virtual meeting(s). The final version should be available within eight months of the visit. This Report may include recommendations for adjusted oversight.

Appendix C: Acronyms

ARC – Senate Academic Review Committee

CPI – Centre for Pedagogical Innovations

CPR – Cyclical Program Reviews

IQAP – Institutional Quality Assurance Processes

IP – Implementation Plan

QA – Quality assurance

QAF – Quality Assurance Framework

Quality Council – Ontario Universities Council on Quality Assurance