Quality Assurance in Ontario Schools of Nursing

Elise Guest

Thesis submitted to the University of Ottawa
in partial fulfillment of the requirements for the
degree of Doctor of Philosophy of Education

Faculty of Education
University of Ottawa

Abstract

This dissertation examines the quality assurance (QA) review processes in Ontario's Schools of Nursing (SoN), which undergo three distinct reviews: mandatory provincial and regulatory approvals and voluntary accreditation. Each review is intended to ensure program quality, but the overlapping requirements impose significant burdens on administrators, faculty and staff (known throughout as the interest holders). My study identifies redundancies, illustrates the human impact of the current system, and suggests improvements that could reduce burdens for SoN interest holders participating in the reviews. Through an explanatory, sequential two-part multimethod study, including document reviews, a survey, and interviews, my research highlights the benefits, barriers, and challenges of the current QA review requirements for interest holders in Ontario SoN.

The findings reveal that, while QA reviews ensure that all SoN are held to consistent standards in their administration and programming, they create significant challenges for interest holders due to their repetitive nature, excessive workload, and the perception that they are not relevant to the contextual realities of Nursing education in Ontario. Interest holders recognize the theoretical benefits of the system, but they expressed frustration at how they experience it. My findings suggest that streamlining QA processes by identifying commonalities across reviews, adopting change management and resistance to change techniques, and developing integrated strategies for QA activities in Ontario's SoN is required for the sustainability of this work.

My research contributes to the broader scholarship on QA in higher education (HE) and offers practical recommendations for the QA bodies and Ontario SoN. It emphasizes the need for improved collaboration between QA bodies and SoN to reduce inefficiencies, ensuring that QA remains sustainable in an era of resource constraints. Finally, it explores issues of resistance to change as a model for how interest holders resist QA activities and how to identify and counter the associated behaviours among them.

Keywords: quality assurance (QA), Nursing education, Ontario, schools of nursing (SoN), higher education (HE), accreditation, regulatory approval, multimethod research, culture of quality, resistance to change

Dedication

This work is dedicated to the passionate educators who are ensuring the next generation of nurses have the skills and competencies they need to succeed in their chosen career.

I hope you see yourselves in this work.

Acknowledgements

The completion of this dissertation marks the culmination of a challenging and rewarding journey. I am deeply grateful to the many people whose guidance, support, and encouragement contributed to both this work and my development as a scholar.

First and foremost, I would like to acknowledge and thank the individuals who participated in the surveys and interviews that informed this project. The irony is not lost on me that this dissertation examines a resourcing crisis within Ontario's Schools of Nursing, yet you generously gave your time to help me better understand your experiences and perspectives on this phenomenon. I am profoundly appreciative of your willingness to contribute to this work despite the many demands on your time.

I am especially grateful to Dr. Katherine Moreau for agreeing to supervise this work. I would also like to thank the internal members of my committee, Dr. Éliane Dulude, Dr. Ruth Kane, and Dr. Jean-Daniel Jacob, for their thoughtful feedback and guidance during the writing process. My sincere appreciation extends to Dr. Christina McMillan Boyles for serving as the external examiner; your lived experiences and insights added important depth to the completed work. Finally, thank you to Dr. Stephanie Arnott for chairing my thesis defence. In addition to those who supported the dissertation process directly, several faculty members contributed to my success at earlier stages of the program. I am grateful to Dr. David Trumpower for his careful review of my comprehensive examinations, Dr. Kaylee Eady for her contributions during the thesis proposal stage, and Dr. Timothy Wood for chairing my thesis proposal seminar.

I would also like to acknowledge my accreditation colleagues at Engineers Canada who listened to me discuss this project from its earliest conception through to its completion: Mya Warken, Aude Adnot-Serra, Johanne Lamarche, Roselyne Lampron, Lisa Luo, Alexander Olivias, and Adam Rodrigues. Not only did they patiently listen to countless discussions about my research, but they also assisted by piloting my survey and graciously tolerated my enthusiasm whenever a new finding sparked excitement. Thank you as well to Heidi Theelen for sharing her deep well of knowledge around the practical implementation of project management principles with me. Finally, a special thank you goes to Stephanie Price, former Vice President of Regulatory Affairs, who supported this work from our first meeting.

A PhD can be an isolating experience, and my friends played a critical role in keeping me connected, grounded, and moving forward. A special thank you to Mya, a fellow accreditor at heart, who provided a safe space for me to share my experiences and fiercely protected that space so I could complete this work. Thank you as well to Sarah McGinnis, my writing partner and friend, who blazed the trail before me and reached back a helping hand when I needed it most. To Hélène Longpré, who always says "yes" and somehow remains my friend after the revolving door incident. To Alma Paquette, who ensures I begin most mornings laughing by sending me an endless supply of reels and posts overnight to review, and who also generously assisted with piloting my survey. To Sarah Guenette, who has blind faith in my abilities, just like I have blind faith in hers; we all need a friend like Sarah. And to Rachel Peacock, who is now helping me reclaim parts of myself that were lost during this program.

Am I even an elder millennial if I do not acknowledge my mental health team? Thank you to Meaghan Mackler, RP, who stepped in during a genuine crisis point when I was uncertain I could continue in the program. Your calm presence amidst overwhelming emotion helped me navigate that period and was instrumental in my ability to complete this work. This dissertation would not have been possible, however, without the support of Katie Léger, MA, RP, CCC. From the outset of this journey, Katie helped me better understand myself and how I engage with the world around me; my success in this program rests in no small part on the personal growth you have helped me achieve and I will be forever grateful.

There are countless others whose contributions made this work possible. In particular, I would like to acknowledge the women with whom I intentionally surrounded myself to help keep life running while I completed this program: Dr. Tracy Burgess, Amanda Bradley (and her son Lincoln), Natalie Brundige and Krystal Miron, Holly Brown, Diana Delisle, and Meghann Lynch. In large and small ways, whether occasional or constant, each of you helped me maintain a sense of normalcy throughout this process.

Finally, I would like to acknowledge my own efforts. Throughout the program, I was working full time while consulting and being a teaching assistant. In retrospect, it was too much. I would do some things differently if I could go back to the outset, but this experience taught me the depth of my own perseverance and determination. This work took its toll on my mental health, but I believe it was worth it; I believe in the importance of quality Nursing programs, in

the importance of quality assurance in higher education, and the importance of doing something that will benefit the broader community you live in. I am glad I undertook this project, but I am also glad that it is now finished.

Table of Contents

List of Tables

List of Figures

List of Frequently Used Abbreviations

Abbreviation	**Explanation**
CASN	Canadian Association of Schools of Nursing
CNO	College of Nurses of Ontario
OUCQA	Ontario Universities Council on Quality Assurance
HE	Higher education
HEI	Higher education institution
PEQAB	Postsecondary Education Quality Assessment Board
SoN	School(s) of Nursing
QA	Quality assurance

Chapter 1: Introduction

Statement of Problem

University- and college-level Schools of Nursing (SoN) in Ontario undergo three separate quality assurance (QA) reviews of their programming and administrative practices: (1) a mandatory provincial approval, (2) a mandatory regulatory approval, and (3) a voluntary accreditation review. Each review requires the SoN to develop a self-study report based on criteria set by the QA body. A peer-review team validates the self-study (traditionally in person, but possibly virtually), and a body of experts in educational programming evaluates the SoN's program(s) and administrative practices against the criteria. These bodies then set terms for the programs to attain/maintain standing within that system, often requiring the SoN to take actions to address deficiencies surfaced during the reporting and peer-review stages.

The purposes of these reviews are similar in that the each seek to ensure SoN are delivering effective programming through its administrative unit. Provincial reviews by the Ontario University Council on Quality Assurance (OUCQA, for universities) and the Postsecondary Education Quality Assessment Board (PEQAB, for colleges) foster a culture of quality and accountability (PEQAB, 2022) and support "a vision of a student-centred education based on clearly articulated program learning outcomes" (OUCQA, 2022). The College of Nurses of Ontario (CNO) mandates regulatory approval of programs to ensure that "graduates are prepared to practice nursing safely, competently, and ethically for the nursing category and/or class for which they want to register" (CNO, 2022). Voluntary accreditation by the Canadian Association of Schools of Nursing (CASN) aims to "enhance the quality of baccalaureate programs of nursing by fostering continual quality improvement and providing quality assurance" (CASN, 2022).

All three reviews focus on program quality and its mechanisms. Provincial reviews ensure programs align with diploma and degree expectations and administrative functions are efficiently managed. Regulatory reviews ensure graduates meet the minimum level of knowledge and skills to practice safely. Accreditation reviews ensure programs prepare graduates to contribute as effective members of the healthcare team immediately upon entering the workforce. A challenge for each of these bodies is conceptualizing and identifying 'quality'. Though each body provides a series of indicators for what constitutes a quality program, none

have a clear definition of the concept, thereby leaving interest holders to conceptualize the concept through interpretation of said indicators (i.e., the approval/accreditation criteria).

This lack of clarity on what constitutes quality, compounded by similar requirements and processes for these reviews, mean that administrators, faculty members, and support staff (collectively known as the interest holders throughout) in SoN face significant administrative burdens in participating in the current QA system for Nursing education in Ontario. No one has yet conducted an analysis of the similarities and differences between these QA requirements, nor their impact on interest holders, so the identification of efficiencies that could reduce the administrative workload for SoN has not yet occurred.

Higher education (HE) faces resource constraints (Usher, 2025), raising concerns about the sustainability of conducting three separate QA reviews in Ontario's SoN. In the five years between 2018 and 2024, the Government of Ontario reduced provincial transfers to HE by 16%, and this reduction is long-standing; between 2013 and 2024, total transfer levels dropped by 14% (Usher, 2025). Usher's (2025) analysis shows that Ontario spends the third least per student of all provinces and territories (behind Alberta and Newfoundland) and spends less per student than the national average by 13%. This shortage of financial support affects SoN budgets, staffing, and the time available for QA activities.

Provinces with fewer SoN have found possible solutions to the challenges presented by the financial and resource constraints created by multiple QA reviews. CASN has had formal and informal agreements in the past with regulators to their staff to observe accreditation reviews and to use CASN's documentation and evidence for regulatory approval but does not currently (L. Bou Abdo, personal communication, January 9, 2026); Ontario had a similar system until 2019. No one has yet conducted a systematic assessment of Ontario SoN's current QA requirements. Such an assessment is needed to understand the requirements of each QA body, both independently and in relation to each other, as well as to understand the impacts, benefits, barriers, and risks of the current QA requirements for Ontario SoN on interest holders. My study aims to address this gap in the scholarship on QA in HE and, specifically, in Nursing in Ontario.

Contributions to the Field

This study contributes to the fields of QA and accreditation research for professional programs in HE. It identifies the challenges and benefits of QA cultures and activities, concurring with many of the themes identified by scholars in quality in HE (Harvey, 2024) and accreditation (de Paor, 2016). Within the area of quality in HE, my dissertation contributes specifically by exploring the culture of QA and how to effectively implement QA activities within that culture. Finally, my study considers the phenomenon of resistance to change in HE as a model for how to identify and overcome resistance to QA activities, and concurs with findings of scholars (Pundyke, 2020) working in this area. The literature cited above and throughout this dissertation often has broad applications and is not discipline specific. This dissertation adds to the fields by overlaying Nursing education on these findings, proving that the generalities are valid when applied to specific disciplines. By combining these fields within the literature, this dissertation suggests a holistic approach to explore how interest holders within Ontario SoN interact with the QA requirements, both procedurally and as individuals within the system.

In addition, my dissertation offers practical applications for Nursing education in Ontario by highlighting high-level similarities between criteria and the procedural commonalities among QA bodies to identify potential efficiencies. Moreover, the findings could impact Nursing education across Canada and other professional disciplines that rely on multiple QA reviews for professional programs in HE. While the study may be relevant internationally for Nursing and HE more broadly, differences in QA expectations across regions make global implications difficult to predict.

Overview of Study

This dissertation includes seven chapters. Following this introduction, Chapter 2 provides a detailed literature review, describes the concepts underpinning my study, introduces my research questions, and outlines my study's conceptual framework. The literature review covers quality in HE, common elements in QA reviews, and change management (including change fatigue and resistance to change) within HE as it relates to QA issues. Chapter 3 explains the methodology and assumptions that inform my study, including the research context, my positionality, epistemological stance, and the explanatory, sequential, two-part multimethod study methodology I employed.

Chapters 4 through 6 present the study's findings. Chapter 4 outlines the results of Part 1, which include a high-level assessment of the criteria and procedures each QA body uses to evaluate the quality of SoN administrative and curricular offerings through a review of QA bodies' policy and procedure documents. Chapter 5 presents the findings of Part 2, Phase 1, which was a survey of administrators, faculty members, and administrative support staff in Ontario's SoN to determine the scope and impact of the current QA system on them as individuals. Chapter 6 reports on Part 2, Phase 2, where I conducted individual interviews with interest holders to explore their perceptions of the benefits, barriers, risks, and opportunities of the current QA system for Ontario SoN.

Finally, Chapter 7 integrates and discusses the key findings across both parts of the study, connects them to existing research on quality in HE, QA activity commonalities, and addresses challenges related to resistance based on the findings. This chapter also presents an updated conceptual framework that is informed by my findings, identifies study limitations and future research areas, makes several recommendations for both QA bodies and SoN, and offers concluding remarks on the current QA requirements for Ontario SoN.

Summary

In this chapter, I outline the current state of QA requirements for SoN in Ontario and explain how my study contributes to the bodies of knowledge on QA of professional programs and resistance to change in HE. I also provide an overview of the study as presented in this dissertation.

Chapter 2: Literature Review and Conceptual Framework

In this chapter, I review several bodies of literature: I briefly cover the history of HE in Canada to provide a contextual understanding of the current structure of higher education institutions (HEIs) and Nursing education in Ontario. I examine QA in HE, focusing specifically on the culture of QA in HE and the implementation of QA in HE. I also explore the concept of change management and change fatigue to inform my review of the literature on resistance to change in HE as a model to understand resistance to QA in HE, all of which are factors that influence the current QA system in Ontario SoN. The literature discussed below focuses on HE as a workplace and HE in general as little has been written specifically on QA in Nursing education in Ontario. Since my study explores perceptions of QA requirements for SoN in Ontario, understanding these bodies of literature is crucial to the success of my study. I conclude this chapter with the research questions I explored in my study and a presentation of the conceptual framework that guides my analyses.

A Brief History of HE in Canada

Modern Canadian HE has its roots in Medieval Europe. Scholars generally recognize the University of Bologna, which has operated continuously since 1088, as the first Western university. The University of Oxford, founded in 1096, was the first British university in operation (Tucker, 2021). Harvard University, founded in 1636 by Massachusetts Puritans to provide trained clergy to the New World, was a direct descendant of the European university system. This first North American university set the pattern for those that followed and remained relatively unchanged for over 200 years (Boyer, 1990).

Religious orders founded the earliest universities in Canada and modelled them after European practices. The 1763 Treaty of Paris terms guaranteed the right of former French subjects in the new British colony of Lower Canada (formerly New France) to retain their government and religious structures (Lawson, 1989). This ensured that HE in Canada remained under the control of groups such as the Jesuits and Grey Nuns. This religious monopoly on universities persisted past Confederation in 1867, when only four of the 17 degree-granting institutions in Canada were non-denominational (Canadian Encyclopedia, n.d.).

The current Canadian HE system emerged from these early organizations and began to take shape in the early 19th century. George Ticknor and Edward Everett, the first documented

Americans to study abroad, imported the 'German-inspired American model' from Europe to America in 1815 which began influencing Harvard's practices shortly thereafter (Boyer, 1990). By the beginning of the 20th century, most HEIs in Canada had transitioned from theological centers of learning to providing training in more practical subjects, following the 'German model' (Canadian Encyclopedia, n.d.). The primary impact of the German model on North American universities was the transition from focusing on teaching and service activities to placing a premium on research activities by the professoriate (Boyer, 1990).

The First World War reaffirmed the German model as the main university system in North America. In 1916, the Canadian federal government recognized the value of research undertaken in European universities for the war effort and created the Advisory Committee for Scientific and Industrial Research (later the National Research Council). This body funded university researchers on industrial projects and supported graduate students engaged in the sciences (Jones, 2014). A similar movement occurred in the United States and Europe, transitioning universities from centers of teaching to research centers (Boyer, 1990).

With this transition, the administrative structure in universities began taking shape to protect their ongoing missions. The Flavelle Commission of 1906 examined the organizational structures of universities in the United States and Canada and concluded that HEIs should be divorced from state/provincial politics (Jones, 2014). This led to creating an administrative system composed of the Boards of Governors and University Senates in Canada. The Boards of Governors, drawn from the political networks of provincial governments, oversee finance and general administration of HEIs as a business entity, while the Senates, drawn from a university's community, oversee academic matters (Jones, 2014). This shift is significant within the Canadian context, as the 1950s saw a movement to remove the authority to grant tenure to faculty from Boards of Governors and vest that responsibility with the Senates, thereby entrenching the awarding of professional and academic recognition within the university community (Canadian Encyclopedia, n.d.).

By the 1970s, Boards of Governors and, consequently, provincial governments, had become disconnected from the academic operations of universities, fixing administration and faculty in their ways of operating; this led to the introduction of faculty unions in the 1980s (Jones, 2014). Collective bargaining emerged in the university system in response to perceived

threats to the tenure system, increasing part-time faculty hires, and changing expectations around faculty workload (Weinert et al, 2016). This was also the era of the emergence of colleges in Canada; while the intent was to provide technical education (Usher, 2018), they mirrored their university counterparts in many ways.

Provincial college systems emerged in the 1960s and 1970s, modelling themselves on the American system. They prioritized vocational training, expanded access to HE in remote communities (Usher, 2018), and facilitated student transfers into universities (Dennison & Gallagher, 1986). In analyzing how colleges developed in Canada, Skolnik and Jones (1993) argued that the similar missions, programming, and student populations between colleges and universities demanded intentional coordination to maintain a sustainable HE system. These overlaps suggest that both types of institutions share a similar culture, allowing discussions of HE in Canada to encompass both settings.

The passing of the *Post-secondary Education Choice and Excellence Act, 2000*, marked the most significant change in Ontario's college system since its inception, as it not only established the PEQAB but also extended to colleges the right to grant degrees (Colyar et al., 2022). To grant a degree, an Ontario college must meet provincial degree-level standards, and the program must be an applied degree (though it can impart theoretical knowledge and develop analytical skills); PEQAB ensures that these conditions are met for new programs (Panacci, 2014). This change has generated debate among scholars and interest holders in Ontario's higher education system. Supporters of the change cite the teaching-focused mandate of colleges as beneficial to students compared to universities' research mandate; they note that colleges attract a more diverse student body, encouraging greater participation in higher education; and support the workforce by preparing more individuals with higher-level skills (Skolnik, 2012). Detractors argue that college degrees are perceived as less valuable by students and employers, may not adequately prepare graduates for graduate studies, and may limit accessibility for those who primarily benefit from colleges due to changes in admission requirements and increased costs (Panacci, 2014). As discussed below, this policy shift has had implications for Nursing education in Ontario as it has been operationalized.

Following the emergence of institutional Senates in universities and the growth of colleges, the prevalence of faculty unions and their growing power within Canadian HE created

an environment of rigid stasis (Lenartowicz, 2015). Faculty autonomy, the prioritization of research, and professional development, all aspects of HE based on centuries-long traditions, are now entrenched in the operations of these HEIs. Lenartowicz (2015) characterizes the modern HE environment as an autopoietic system, that is to say, an organism that "consists of the continuous self-production of the system, according to a blueprint—its identity—that emerges instantly at the moment of the system's inception...The system–environment interaction takes place in a way and to a degree that allows just that: the system's recursive reproduction of its core pattern under ever-changing conditions" (p. 948).

Nursing education in Canada began with the religious orders of the colonial era. In 1639, the Grey Nuns established nursing training at the Hôtel-Dieu in Quebec City. By the mid 19th century, they had migrated as far as Fort Edmonton in present-day Alberta. During this period, hospitals were the centres of formal Nursing education. Lay hospitals opened in eastern Canada in the 1820s, and Florence Nightingale's Notes on Nursing (1860) spurred the formalization and secularization of the field. In 1874, Dr. Theophilus Mack opened Canada's first training hospital in St. Catharines, Ontario, institutionalizing the apprentice model in Nursing education. In the early 20th century, Nursing education moved into HE. In 1905, a group of nurses presented a plan to the University of Toronto to begin offering a program, but the University of British Columbia launched the first university-based Nursing program in Canada in 1919 (Baker et al., 2012).

When Canada established a national health care system in the 1950s, universities replaced hospitals as the primary providers of Nursing education. In 1982, the Canadian Nurses Association (CNA) Board resolved to make the Bachelor of Science in Nursing (BScN) the entry-to-practice requirement for Registered Nurses by 2000. Provinces followed different paths toward that goal, but today all except Quebec require a university degree for licensure. As Nursing schools transitioned from hospitals to universities, colleges that had delivered Nursing education needed a way to keep serving students in their regions while also granting university degrees. To address this, colleges partnered with universities in program delivery (Baker et al., 2012). This compromise shaped the SoN landscape in Ontario for two decades. As discussed above, the passing of the *Post-secondary Education Choice and Excellence Act, 2000*, expanded

colleges' mandate to include degree-granting, prompting several university/college partnerships to dissolve. The long-term impact of this shift remains uncertain.

Those within HE, including Nurse educators who have been part of the Canadian HE system for more than 150 years, create a system through the cognitive activity of self-observation and the external action of self-description to colleagues (Lenartowicz, 2015). These activities lead to an environment that is self-perpetuating because its existence is tied to and dependent upon itself and those operating within the system. I discuss the impact of this environment below in relation to the literature on QA in HE, change management, and resistance to change in HE.

QA in HE

The study of QA in HE originates in post-Second World War Japan with the emergence of the Total Quality Management (TQM) movement. In the 1950s, Japanese industry and government identified issues in workplace culture and shifting demographics that suggested a likely labour shortage was imminent. In response, the theory of kaizen, or 'continuous improvement,' was introduced to drive change (kai) for the better (zen). This philosophy ensures excellence in production outcomes and depends on everyone within an organization to contribute to improvements (Singh & Singh, 2009).

Masaaki Imai introduced the theory in *Kaizen: The Key to Japan's Competitive Success* (1986). Since then, practitioners and scholars have expanded the scope of Imai's original philosophy. Initially, the concept focused on production industries and their outcomes. However, it is now applied more broadly across various industries and organizations, encompassing culture, processes, and outcomes more holistically (Sahmi & El Abbadi, 2024). In their literature review, Suárez-Barraza et al. (2011) identified two understandings of kaizen:

1. Though less commonly featured in publications, the Japanese approach emphasizes individual actions to achieve outcome goals.
2. The Western approach, which scholars have come to understand over time as a set of 'continuous improvement' processes, aimed at achieving outcome goals.

The Western approach is evident in the literature discussed below in relation to change management.

By the 1960s and continuing through the 1980s, Western industries adopted kaizen as a business philosophy. They began referring to it as TQM, with Feigenbaum's 1961 work *Total Quality Control*[1] marking one of the earliest references to the concept (Nasim et al., 2020). Within a TQM framework, organizations understand 'quality' as:

- A systemic process that permeates all areas of the organization,
- A responsibility shared by all individuals within the organization,
- A concept defined solely by the end user of the organization's product or service,
- A cultural phenomenon, and
- A practice that depends on continuous efforts (Feigenbaum, 1989).

Wen et al. (2022) conducted a bibliometric analysis of quality management literature. They found that TQM became the primary focus of research in QA in the early 2000s and has remained so for the past two decades. This finding underscores the value of the literature review conducted by Permana et al. (2021), which examined studies across various industries, geographic settings, and periods. Their review found that organizations commonly adopt TQM when trying to improve product quality to enhance customer satisfaction.

Two key developments in the 1980s advanced the study of QA in HE regarding the management and business practices described above. First, HEIs began integrating the principles of TQM into their administrative structures (Nasim et al., 2020; Williams & Harvey, 2015). Second, governments that funded HEIs took a more active role in scrutinizing how public funds were used. This aligns with the development in Canadian HE of Boards of Governors and university Senates in the first half of the 20th century; Neave (1988) described this shift as the rise of an "evaluative state" (Cardoso et al., 2016). Although not all HEIs explicitly frame their QA efforts as part of a TQM strategy, because of its ascendancy within the business culture, the sector has come to understand QA as an evaluative process designed to ensure the quality of academic programs and their delivery (Schwarz & Westerheijden, 2004).

Beginning in the 1980s, scholars debated the impact of QA activities, particularly the system's oversight mechanisms and what Neave described as its "increasing all-pervasiveness" (1998, p. 271). As TQM gained prominence within broader management literature, Neave's

[1] The term Total Quality Control (TQC) is used to describe specific processes within an organization while TQM is used to describe an organization-wide philosophy for quality. In this case, both concepts are complementary as I am considering QA as a set of activities (TQC) and a culture (TQM).

evaluative paradigm also began to shift from the concept of an evaluative state to that of an evaluative society (Woelert & Stensaker, 2023). Schwarz and Westerheijden (2004) attribute this shift to governments increasingly delegating their quality oversight responsibilities to non-governmental or discipline-specific organizations, which is reflected in the current structure of QA requirements for Ontario SoN, where two discipline-specific bodies have mandates to examine publicly funded institutions. The timing of these developments suggests that the evolving view of continuous improvement and the redistribution of oversight responsibilities contributed to a broader paradigm than Neave initially proposed (1988, 1998).

Regardless of how researchers studied and monitored QA in HE, a central challenge persisted: defining and evaluating "quality." As academics in the 1980s began debating the nature and purpose of QA, a subfield emerged to examine what quality means in the context of HE. Harvey and Green's (1993) seminal work framed quality as a relative concept with two key dimensions: "First, quality is relative to the user of the term and the circumstances in which it is invoked… Second is the 'benchmark' relativism of quality" (p. 10). Building on this foundation, scholars have explored the defining characteristics of quality (Harvey & Green, 1993; Harvey, 2006b; Harvey & Stensaker, 2008), developed approaches to measure it (Hulpiau & Waeytens, 2003), and examined activities that foster a culture of quality assurance (Elken & Stensaker, 2018).

In their literature review of definitions of quality in HE, Schindler et al. (2015) identified two key trends in how scholars conceptualize quality. First, researchers tend to define quality broadly, emphasizing outcomes. Second, many definitions adopt a consumer-driven perspective, evaluating outcomes based on student and employer satisfaction. Harvey and Green (1993) proposed five conceptualizations of quality that collectively address these trends. First, they defined quality as an exceptional outcome or product: something distinctive, excellent, or meeting minimum standards. Second, they equated quality with perfection or consistency. Third, they described quality as 'fitness for purpose,' where a product qualifies as high quality only if it fulfills its intended function defined by the producer or the end user. Fourth, they introduced a 'value for money' perspective, where users assess quality based on whether the product's value matches its cost. Finally, they framed quality as transformative, suggesting that a product is high quality if it achieves the desired change or impact. When applied to HE, Harvey and Green's framework positions students and employers as the primary end users of the "product" or the

education delivered by academic programs. However, because quality is inherently relative, the interest holders and the products within HE shift depending on context. This relativity adds complexity to research and policymaking in this field.

Scholars continue to debate whether management and business frameworks such as kaizen and TQM are appropriate for evaluating educational quality, given the imprecise parallels between commercial products and education, or between end-users and students (Nicholson, 2011). Despite this, Prakash's (2018) literature review highlights a substantial overlap between management and education scholarship, as many studies on quality in HE appear in management- and TQM-focused journals. This overlap likely stems from the shared indicators both fields use to assess quality. For example, Schindler et al. (2015) found that research in HE often examines administrative, support, delivery, and user-based indicators, elements also emphasized in kaizen and TQM literature (e.g., Suárez-Barraza et al., 2011 and Feigenbaum, 1989, respectively).

A standard set of indicators appears across the literature on quality in HE, and these indicators benefit from being viewed through the lens of the framework created by considering the work of Hulpiau and Waeytens (2003) and Harvey (2006a) together, as it provides a robust basis for analysis. Hulpiau and Waeytens (2003) argue that quality assessment in HE serves two primary purposes. First, it aims to improve the quality of teaching and learning. Second, it provides accountability to interest holders regarding the quality of teaching activities and the use of resources. To better understand this dynamic, Harvey's framework (2006b) is helpful, as it identifies four distinct types of quality that HEIs are responsible for:

1. Academic quality: Students demonstrate that they have attained a specific level of academic proficiency.
2. Competency quality: Students develop a requisite set of technical abilities by graduation.
3. Organizational quality: The HEI's policies and procedures ensure an appropriate environment for teaching, learning, and research.
4. Service quality: The administrative unit provides high-quality services to its interest holders, including faculty, students, and the wider community.

These four categories offer a structure for conceptualizing quality indicators in HE, as illustrated in Table 1.

Table 1

Quality Indicators about the Purpose of QA Activities

	QA Purposes	
Quality indicators	Improve teaching and learning	Accountability
Academic	x	x
Competency	x	x
Organization		x
Services		x

Using these broad categories to classify quality indicators provides a valuable framework for understanding the motives behind QA bodies' scope and intentions. While accountability applies to all types of indicators, the goal of improving teaching and learning applies to only half. Given the focus on QA in HEI is generally understood to benefit students and employers, there appears to be a disconnect between what QA in HE does and what its focus should be. This perception of disassociation between goals and context is also present in Ontario SoN, as my data shows in later chapters.

Accountability consistently emerges as a central theme in the literature on quality in HE. Scholars generally agree that, beyond improving internal processes, QA serves a secondary but important function: it demonstrates to interest holders that an HEI is acting as a responsible steward of the public and private resources it receives. By doing so, QA can reduce the perceived need for excessive oversight by funding bodies (Harvey & Newton, 2004; Hildesheim & Sonntag, 2020; Kayyali, 2024; Romanowski, 2022). Hulpiau and Waeytens (2003) argue that the more rigorously a department or faculty engages in QA activities, the more autonomy it will likely gain from its funding or disciplinary oversight bodies. Stensaker and Leiber (2015) reinforce this idea, suggesting that effective bureaucratization of QA processes enhances an academic unit's reputation for legitimacy and professionalism.

QA Culture in HE

A recurring theme in the literature on quality in HE is discussions of the culture supporting these activities (Williams & Harvey, 2015). Scholars in this field commonly use the definition of a quality culture developed by the European University Association (2006), which states:

> Quality culture refers to an organisational culture that intends to enhance quality permanently and is characterised by two distinct elements: on the one hand, a cultural/psychological element of shared values, beliefs, expectations and commitment towards quality and, on the other hand, a structural/managerial element with defined processes that enhance quality and aim at coordinating individual efforts (p. 10).

Defining the specific quality culture of an HEI is challenging because culture, in general, is a co-created experience (Harvey & Stensaker, 2008); often, there is a sense of "you know it when you see it" (Jacobellis v. Ohio, 1964). As a result, broad definitions like the one provided above are standard. Many scholars, therefore, turn to indicators of QA activities to assess whether a quality culture exists within an institution (Elken & Stensaker, 2018; Williams & Harvey, 2015).

In their literature review on quality culture research in HE, Tutko (2019) identified common indicators highlighted by researchers, which can be grouped into governance structures and psychological considerations. These categories align with the dimensions of quality culture identified by Hildesheim and Sonntag (2020), which are recognized as core features of a quality culture in HE, as shown in Table 2.

Table 2

Quality Culture Indicators about Dimensions

Quality Culture Indicators	Dimensions
Commitment	Psychological considerations
Communication	Governance structures and psychological considerations
Information	Governance structures
Leadership	Governance structures
Participation	Psychological considerations
Quality objectives	Governance structures
Quality values	Psychological considerations
Trust	Psychological considerations

When mapped onto Hildesheim and Sonntag's (2020) dimensions, Tutko's (2019) indicators reinforce the idea that a robust quality culture relies not only on structural elements such as leadership, information flow, and defined quality objectives, but also on interpersonal components such as trust, participation, commitment, and shared values. The overlap across studies suggests that effective QA in HE requires an integrated approach that balances procedural governance with psychological engagement by interest holders, highlighting the

interdependence of organizational systems and human factors in sustaining a meaningful quality culture.

Regardless of the institution's location or size, HE shares standard cultural features that impact Nursing in Ontario. Whether professional or drawn from faculty, the administration balances many competing interests. Faculty, as academics, are protected by the principles of academic freedom, allowing them to publish and teach as they choose. Support staff function as professionals at the intersection of academia and administration, while the larger community of interest holders may or may not exert influence, depending on the circumstances. These groups view and interact with QA activities differently, shaped by their vested interests in the process and its outcomes. Together, these perspectives and interactions form the quality culture of an HEI (Harvey & Stensaker, 2008).

Implementing QA in HE

Implementing QA activities and culture in HE depends on the institution's general understanding of what quality means within its context and the strength of its quality culture. Most literature on the implementation of QA in HE draws from case studies of specific institutions or countries (e.g., Bougherira et al, 2024; Bowker, 2017; Burch et al., 2018; Newton, 2002; Salto, 2018). Table 3 below summarizes the findings of several studies on the implementation of QA in HE. Despite individual variations, common themes suggest that HE presents a relatively consistent landscape for implementing QA. This consistency implies that recommendations for successful QA implementation hold broad applicability across different contexts, including Nursing in Ontario.

When implementing a QA scheme, the culture of an institution and whether the individuals within the HEI have values and a vision that align with QA expectations are critical. Newton (2002) observes that "there is no blueprint for a quality system for universities and colleges" (p. 208). However, the commonalities in quality indicators and culture indicate that the detailed examples above demonstrate consistency in implementation efforts.

Regardless of the variables in HE, the literature highlights common elements that either enable or hinder the implementation of a QA scheme. These elements can be divided into two general categories: culture and process. The culture is characterized by a mindset that engages institutional performance indicators. This process helps institutions demonstrate, whenever

Table 3

Sample of Case Studies that Demonstrate Quality Indicators and Quality Culture Indicators

Study	Scope	Quality indicators	Quality culture indicators
Bougherira et al, 2024	National Commission for Accreditation and Assessment, Saudi Arabia	Academic Competency Services Organization	Commitment Communication Information Leadership Participation Quality objectives Quality values Trust
Bowker, 2017	Graduate programs in Occupational Therapy and Social Work, University of Ottawa	Services Organization	Commitment Communication Information Leadership Participation Quality objectives Quality values Trust
Burch et al, 2018	Business programs at a regional, public university in the south-western United States	Academic Competency Services Organization	Commitment Communication Information Leadership Participation Quality objectives Quality values Trust
Newton, 2002	Institutional quality projects at NewColl, a college within the UK university sector	Services Organization	Commitment Communication Information Leadership Participation Quality objectives Quality values Trust
Salto, 2018	Higher education system, Argentina	Academic Competency Services Organization	Commitment Communication Information Leadership Participation Quality objectives Quality values Trust

interest holders in the regular and thoughtful collection, selection, and use of relevant necessary, that they are performing well in institutional planning, decision-making, and quality. The goal is to improve learning and teaching outcomes (Vlăsceanu et al., 2007).

As the success or failure of a QA scheme depends entirely on the people in the system, the supporting culture is critical. The literature indicates that HEIs recognizing the effort of faculty and staff in the process (Burch et al., 2018; Dzimińska et al., 2018; Newton, 2002; Stensaker & Leiber, 2015), sharing ownership of the process (Burch et al., 2018; Dzimińska et al., 2018; Newton, 2002; Stensaker & Leiber, 2015), and collectively engaging in the development of goals (Dzimińska et al., 2018; Stensaker & Leiber, 2015; Newton, 2002) creates a culture that allows QA to thrive. Additionally, making QA part of the daily reality of the institution is important (Harvey, 2006a; Stensaker & Leiber, 2015).

Strong leadership (Dzimińska et al., 2018; Newton, 2002; Stensaker & Leiber, 2015), effective communication (Dzimińska et al., 2018; Stensaker & Leiber, 2015), and transparency (Dzimińska et al., 2018; Stensaker & Leiber, 2015) are also required. The role of a strong leader cannot be undervalued in this context; as with any environment where various interest holders have competing needs, strong leadership is key for QA, as leadership can create an effective and efficient QA strategy, remove barriers (Dzimińska et al., 2018), and guide any necessary culture changes (Burch et al., 2018; Newton, 2002). A common point in the literature is that successful QA environments rely on a bottom-up rather than a top-down approach (Dzimińska et al., 2018; Newton, 2002; Stensaker & Leiber, 2015). This means the culture supports the desire to ensure quality, rather than imposing the desire to ensure quality on those working in the system.

Regarding QA processes, a successful HEI will exhibit characteristics that build on the strong culture described above. This includes involving faculty and students in decision-making (Dzimińska et al., 2018; Stensaker & Leiber, 2015), sharing findings resulting from QA activities (Dzimińska et al., 2018), making QA a regular part of the institution's structure (i.e., dedicated staff and policies) (Harvey, 2006a; Stensaker & Leiber, 2015), and providing sufficient resources to support QA activities (Dzimińska et al., 2018; Harvey, 2004; Newton, 2002; Stensaker & Leiber, 2015).

Many of the barriers to implementing a successful QA scheme are described in the literature as the inverse of the abovementioned points. For example, there is a lack of strong leadership and transparency, and/or faculty and staff are alienated from the process. Those

engaged in this work view the over-bureaucratization of QA activities (Dzimińska et al., 2018; Harvey, 2006a; Newton, 2002; Stensaker & Leiber, 2015) as a hindrance. This means that excessive reporting becomes the focus of the exercise rather than making improvements (Harvey, 2006a). As a corollary to the alienation of faculty, there is also evidence that interest holder in HE view QA activities as devaluing teaching (Dzimińska et al., 2018) and that QA is not flexible, thereby inhibiting innovation and program updates (Dzimińska et al., 2018; Harvey, 2006a; Salto, 2018; Stensaker & Leiber, 2015).

The factors described above (both positive and negative) are based on individuals and their motives/actions. Salto (2018) takes a larger systemic view and describes factors that can force HEIs into adopting a QA scheme. These factors include:

- Economic (maximizing profits and ensuring revenue)
- Normative (meeting discipline/industry standards)
- Social (maintaining a good public image)
- Sanctions/incentives (rewards to consequences for meeting or not meeting targets)
- Enforcement (ensuring programs meet requirements)
- Monitoring (observing programs)

These factors can be external, internal, or both (depending on the HEI's context). However, the author found that program interest holders' responses "tend to be more declarative than factual. Programmes may game the system…" (Salto, 2018, p. 86). This finding fits with the literature cited above, which places a premium on the human component of a QA scheme to see it fail or succeed.

In summary, identifying the implementation of QA in HE, and by extension to Nursing in Ontario, can be challenging because it is difficult to pinpoint how an institution defines quality and how its culture supports those efforts. While large-scale studies on this topic are limited, a wealth of individual case studies in the literature provides valuable insights. Various indicators of quality and quality culture are identified by reviewing microcosms of activities (as illustrated in Table 3 above). The consistency of these indicators across different countries and contexts suggests a broadly shared set of experiences related to the implementation of QA in HE.

A common theme in the literature on QA implementation is the resistance often encountered from various interest holder groups. This dynamic will be explored further below. First, however, the following section provides a summary of the common elements of QA

reviews in HE to provide a foundational understanding of the processes Ontario SoN are subject to.

Common Elements of QA Reviews in HE

Accreditation is the formal process of recognizing quality (Vlăsceanu et al., 2007). In education, accreditation validates a program and/or the organization that delivers a program (such as a university or college) against predetermined standards and criteria (de Paor, 2016). The challenge with writing about 'accreditation' is that the term applies to various contexts. In Europe, the term often applies to a university-wide assessment of quality to ensure minimum standards are met (Harvey, 2004). In Canada, however, "accreditation" usually applies to individual programs striving to demonstrate discipline-based excellence (Weinrib & Johnes, 2014).

Throughout this dissertation, I take the term "accreditation" to mean the external review of an HEI and its program by the body identified by a profession to act as the assessor of quality education for that discipline (such as Nursing, Engineering, or Teaching). The type of 'accreditation' described by Harvey (2004) is generally understood as 'approval' in Canada, where assessment is required to allow a program to operate. Ontario SoN are subject to both approval (by the provincial government and the regulatory body), which is mandatory, and accreditation (by the profession), which is voluntary.

Regardless of whether a QA review is approval or accreditation, QA bodies follow a similar pattern in their activities. As detailed by the Ontario College Quality Assurance Service (2022), the process includes:

- a self-study carried out by the HEI,
- a site visit,
- an audit report written by the peer reviewers who participated in the visit,
- a review and/or response to the audit report by the HEI,
- adjudication of the HEI and its program against the predetermined criteria, and
- (possible) follow-up activities.

These broad categories of activities are evident across multiple disciplines and countries where QA activities occur.

A self-study report is generally the first stage for an HEI preparing for approval or accreditation. These reports require HEIs to observe how their program operates across various metrics, collect data on those operations, and respond to a QA body's criteria, detailing how the program complies with them (Accreditation Canada, 2024; CHEA, 2002). This stage of a QA review allows the HEI to reflect on their performance and consider/plan for quality improvements (Pushpakumara et al., 2023; Vlăsceanu et al., 2007). The self-study report (and its supporting materials) is used by both the peer reviewers and the adjudicating body in their assessment of the HEI and its programs (Vlăsceanu et al., 2007).

Following submission of a self-study report, a QA body arranges for peer reviewers to assess the report and visit the HEI to validate the contents of the self-study. Peer reviewers, who are academics practicing in the area (in this case, either Nursing or Nursing education), verify if programs meet the criteria set by the QA bodies (Pushpakumara et al., 2023; Vlăsceanu et al., 2007). Following a review of the documentation submitted through the self-study report, the peer reviewers conduct interviews with interest holders and tours of HEI facilities to validate the claims made in the self-study report (AAAC, 2024; CHEA, 2002). The opportunity to speak with interest holders can identify areas of concern, which helps the HEI in its continuous improvement efforts (CHEA, 2002).

After the visit, peer reviewers prepare a report that addresses the HEI's self-study report, identifies the methodology used for the visit, highlights areas of concern identified by the peer reviewers, and shares the observed strengths of the program (CHEA, 2002; Vlăsceanu et al., 2007). HEIs are allowed to review this report and comment. In some cases, the comments may clarify factual errors or provide evidence of efforts made since the visit to address areas of concern raised by the peer reviewers (SCC, 2024).

Following submission of the response report, the adjudication body reviews all documentation prepared for the assessment. The self-study report, the peer reviewers' report, and the HEI's response report are all considered by this decision-making body (Pushpakumara et al., 2023); their task is to determine if the HEI or its program meets the minimum standard of quality

set by the criteria (AAAC, 2024; Ryan, 2015). The final decision determines the HEI or its program's status and, if successful, the length of that status' term (CHEA, 2002).

QA bodies may set conditions on the terms of the awarded status. Common terms include the need to re-engage in the QA when the status' term ends (AAAC, 2024; CEHA, 2002; SCC, 2024). Others may require reporting at set times on criteria that were not met at the time of the visit or a general update on the state of the HEI or its program (Accreditation Canada, 2024; AAAC, 2024; CHEA, 2002; SCC, 2024).

In a review of QA literature in HE, Nicholson (2011) identified four prevalent approaches to QA activities across Canada: (1) external quality monitoring or review, (2) an assessment and outcomes-based approach, (3) TQM for continuous improvement and customer satisfaction, and (4) an accountability and performance-driven approach. Though Nasim et al. (2020) conducted a global literature review and found that TQM was a dominant framework in HE, they observed that institutions often applied TQM specifically to assess teaching and learning, aligning it closely with Nicholson's assessment/outcomes and accountability/performance categories. Gulden et al. (2020) further support this connection, noting that many HEIs had institutionalized QA practices in ways that reflect a TQM orientation. While Nicholson (2011) distinguishes between various QA approaches in theory, more recent literature suggests that, in practice, these categories exhibit significant overlap, with most QA efforts ultimately aligning under an overarching TQM framework.

In reviewing the literature on the history of HE in Canada, QA in HE, specifically the culture of QA in HE, the implementation of QA in HE, and the common elements of QA reviews in HE, a consistent set of experiences emerges for HEIs and the interest holders working within the system which apply to Nursing in Ontario. The following section provides a brief history of the current QA system in Ontario as it applies to HE generally and Nursing education specifically.

History of QA in Ontario SoN

The history of QA for Ontario SoN began in 1942 with the creation of Canadian Association of Schools of Nursing (CASN), then known as the Provisional Council of University Schools and Departments of Nursing (PCUSDN). PCUSDN's founding mission was to set

standards for university SoN, support the development of Nursing programs, and act as a community of practice both domestically and internationally. In 1952, PCUSDN achieved the goal set at its foundation and developed explicit standards for university SoN as a precursor to the modern accreditation program. These standards were published in 1957 under the title Desirable Standards for Canadian Schools of Nursing – Normes souhaitables pour les écoles de sciences infirmières canadiennes (CASN, 2026).

In 1974, PCUSDN (now the Canadian Association of University Schools of Nursing, CAUSN) established its first accreditation committee. The previously published standards were reviewed and updated to support and encourage excellence in Nursing programs while protecting innovation and the uniqueness of each program. This first committee on accreditation worked over the following decade and published, in 1983, CAUSN's first accreditation program. The first Nursing program in Canada to be accredited under this program was at Université de Montréal in 1987. Since then, CAUSN's accreditation program has undergone periodic review, beginning in 1995. CAUSN became CASN in 2002 as the baccalaureate degree became the entry-to-practice requirement for Nursing two years earlier, and colleges delivering Registered Nursing programs created partnerships with universities to continue delivering programs. The name change reflects the inclusion of all member schools. Between its early conceptualization in the 1950s and 2018, CASN accreditation applied solely to baccalaureate-level Nursing programs. More recently, CASN has expanded accreditation to include Internationally Educated Nurse bridging programs (2018), Nurse Practitioner programs (2020), and Practical Nursing programs (2022), in addition to undergraduate Nursing programs (CASN, 2026).

While CASN developed its accreditation philosophy and program, the Province of Ontario simultaneously explored mechanisms to ensure quality programming at Ontario HEIs, including Nursing programs. This movement began at the college level in 1965 with the passing of the *Ontario Colleges of Applied Arts and Technology Act*. This legislation granted the Minister of Education authority to regulate various program dimensions, including administrative functions, program length, admission and graduation requirements, and faculty qualifications, thereby establishing ministerial oversight for quality (Ontario Department of Education, 1967). The Act has undergone multiple revisions since its enactment and continues to provide provincial oversight of "the quality of the management and administration of the

college" and "the quality of education and training services provided to students" (*Ontario Colleges of Applied Arts and Technology Act, 2002*, S.O. 2002, c. 8). In 2000, the Province of Ontario passed the Post-secondary Education Choice and Excellence Act, which established the PEQAB to assist the Minister of Training, Colleges and Universities in determining program approval. PEQAB fulfills this mandate by undertaking QA reviews to determine whether new or ongoing consent (i.e., approval) is appropriate for a program (*Post-secondary Education Choice and Excellence Act, 2002*, S.O. 2000, c. 8).

Ontario universities began systematizing QA requirements during the same period. Beginning in 1968, and formalized in 1982, the provincial government collaborated with the Ontario Council on Graduate Studies to undertake periodic quality reviews of graduate programs at Ontario universities. In 2006, the Council of Ontario Universities commissioned a report to explore the QA process, which ultimately led to the creation of the OUCQA in 2010. OUCQA now undertakes QA reviews across all levels of programming at Ontario universities and operates as an independent body at arm's length from both HEIs and the provincial government (OUCQA, 2026a). Its authority derives from Ontario universities, which have vested the Council with the responsibility of conducting QA reviews and coordinating outcomes and requirements with the provincial government (OUCQA, 2026b).

At the regulatory level, CNO, originally established as the Registered Nurses Association of Ontario, was founded in 1951 through the *Nurses' Registration Act, 1951*. Early versions of the legislation addressed only licensure requirements for nurses. The current legislative framework, the *Nursing Act, 1991*, is much broader and assigns CNO the responsibility to ensure that each applicant for Nursing licensure graduates from "a program that was approved by Council or that was approved by a body approved by Council for that purpose" (*Nursing Act, 1991*, S.O. 1991, c. 32). In 2002, CNO entered into an agreement with CASN to accept CASN's accreditation findings as evidence for its approval review (CASN, 2002). This agreement remained in place until 2019, when CNO introduced its Nursing Education Program Approval Policy and launched the corresponding approval program (CNO, 2022).

More than eight decades of coordinated effort across multiple bodies have shaped the current QA landscape in Ontario SoN and established mechanisms intended to ensure sufficient oversight of Nursing education within the province. Although this layered system demonstrates a

longstanding dedication to QA, it has also introduced structural and cultural complexities that influence how interest holders engage with QA requirements. In the following sections, I examine key dimensions of change management literature, specifically change fatigue and resistance to change, to provide a foundational framework for understanding Ontario SoN interest holders' reactions to QA activities.

Change Management

Change management offers a useful paradigm for examining QA activities. Although QA reviews do not always require large-scale change, they follow patterns similar to change initiatives: interest holders engage in self-reflection, plan for the future, and undertake actions that bridge the current state and a desired future state. In this study, I examine change management (and related phenomena such as change fatigue and resistance to change) as processes that closely parallel, and in some cases mirror, QA projects. In this section, I explore the origins of change management as a practice and review key theories developed to support successful change initiatives; I later apply these theories to QA activities in the discussion chapter.

Change management is central in business and sociology research, spanning industry and academia. A common thread in the literature emphasizes the inevitability of change and the necessity for organizations to manage it deliberately to achieve success (Caruth & Caruth, 2013; Gilley et al., 2009; Prosci, n.d.-b). One of the earliest thought leaders in this area, Kurt Lewin, proposed a model that describes change management as a process unfolding in three distinct phases: unfreezing, change, and [re]freezing (Lewin, 1947). In the unfreezing phase, change agents actively dismantle the organizational status quo in thought and behaviour. After disrupting the existing ways of being, they identify areas for improvement and implement changes. Once the organization adopts the new practices and mindsets, change agents work to solidify these adjustments to establish a new status quo by 'freezing' the change in place.

Lewin's model, however, oversimplifies the complex nature of organizational change. Cummings et al. (2016), in their critique of Lewin's (1947) publication, retrace the historical development of the "change as three steps" model. They argue that the model offers a half-formed and overly simplistic framework, particularly for a scholar of Lewin's calibre, and suggest that Lewin might have expanded upon it had he not passed away shortly before its publication. Burnes (2004), through a review of criticisms of Lewin's model, identifies four

common critiques: it assumes that organizations remain static and stable; it applies only to small-scale change efforts; it misrepresents how people respond to change; and it depends on a top-down approach for implementation. These limitations have prompted subsequent scholars to pursue more nuanced strategies for managing change.

While Lewin offers a conceptual starting point, John Kotter provides a more detailed approach to managing the "change" phase (Hughes, 2016). Kotter (2012) outlines eight key factors for successful change management: creating a sense of urgency around the need for change; assembling a powerful guiding coalition; crafting and articulating a clear vision; communicating that vision frequently and effectively; removing barriers to implementation; planning for and achieving short-term wins; recognizing the extended timeframe needed for change to take root; and embedding new practices within the organizational culture. Since its original publication (1995), Kotter's eight factors have been prevalent in change management literature.

Despite its influence, Kotter's model has attracted criticism. Salman and Broten (2017) view it as a product of its time, emerging when TQM gained popularity and technological change accelerated. They argue that Kotter designed the model primarily for process-based change, rendering it too linear and rigid for the diverse contexts in which change occurs. Hughes (2016) similarly critiques the model's linear structure and highlights several additional shortcomings: it frames employees as default resisters, overlooks the role of actual or perceived power dynamics, it fails to account for institutional memory from past change efforts, it overemphasizes leadership and communication while underestimating the cultural factors essential to successful change, and it does not accommodate incremental success. Moreover, Kotter does not discuss the methodology or data sources used to develop his model, raising questions about its empirical foundation (Appelbaum et al., 2012).

Although Kotter's work is not a traditional academic study, and despite the criticisms it has received, scholars frequently reference the eight-stage model when analyzing change management principles (Hughes, 2016). Nonetheless, each framework component requires critical examination to assess whether research supports its nuanced application to QA activities in Ontario SoN. The following sections explore how these changes management principles can be applied to HE.

Leadership

Strong leadership is critical in ensuring the success of change management initiatives (Aamodt et al., 2018; Kadir et al., 2016; Caruth & Caruth, 2013; Kuipers et al., 2013). Kotter (2012) introduces the concept of a "guiding coalition" to describe the leadership structure required for practical change projects. This term deliberately avoids imposing a strict hierarchical structure on change management. Instead, successful change efforts draw upon individuals who hold real power, such as formal authority and accountability, and perceived control, including those who act as thought leaders regardless of their official roles. An effective guiding coalition blends individuals with real and perceived power, subject-matter expertise in change, and credibility within the broader organizational context (Kotter, 2012).

Mansaray's (2019) literature review on leadership in change management examines several leadership models, including those by Rensis Likert (1961) and Stephen Covey (1992). They conclude that transformational leadership most often correlates with successful change outcomes. The transformational leader models desired behaviours, inspires and motivates others, encourages diverse viewpoints to foster dialogue, and focuses on the professional growth of those around them (Deng et al., 2023). Stouten et al.'s literature review (2018) also notes that guiding coalitions frequently exhibit traits associated with transformational leadership. However, they observed a lack of empirical research comparing the effectiveness of a formal coalition versus the presence of transformational leadership characteristics in the change environment. Their findings suggest that the real/perceived power structural composition of Kotter's guiding coalition may suffice to facilitate successful change, regardless of the specific leadership style employed.

Although Kotter uses the term "coalition" as a shorthand, this group can consist of either formal or informal assemblies of individuals. Regardless of whether coalition members wield formal or informal authority, or whether they adopt a specific leadership model, the literature consistently emphasizes the indispensable role of leadership across all other components of Kotter's (2012) change management framework (Errida & Lotfi, 2021; Mansaray, 2019; Stouten et al., 2018).

Within HE, multiple layers of leadership naturally emerge. Formal leaders, such as administrators, hold responsibility for program operations, but institutions also rely on faculty who serve on committees that shape the operational and technical dimensions of an

administrative unit. For example, curriculum committees or promotion and tenure committees. Support staff likewise embody leadership activities by managing the day-to-day functions that keep units running, thereby creating the time and space faculty and administrators need to carry out their broader responsibilities. Within Kotter's (2012) paradigm, leadership can therefore arise from any interest holder in HE. Moreover, change efforts may be strengthened when support comes from individuals with less formal authority, such as faculty and support staff, whose involvement can broaden ownership and deepen commitment to the change process.

Vision

Effective leaders must demonstrate the ability to articulate and communicate a compelling organizational vision. Within Kotter's (2012) framework, a successful vision must be clear, future-oriented, and capable of motivating interest holders to engage with the change effort, regardless of their initial stance. This unifying vision encourages collaboration among diverse groups and enables the organization to allocate resources efficiently and strategically to support change initiatives.

Errida and Lotfi's (2021) literature review on determinants of success in change management highlights the central role that vision plays across various change models. Their findings suggest that gaining early buy-in from interest holders is critical to a project's success. O'Connell et al. (2011) identify seven essential attributes of compelling change visions found throughout the literature: "brevity, clarity, challenge, stability, abstractness, future orientation, and desirability, along with growth imagery, customer focus, and a focus on high quality" (p. 115). While the literature strongly supports the importance of vision in securing interest holder engagement, it remains unclear what specific content, beyond the high-level traits outlined by O'Connell et al. (2011), should appear in an effective vision statement (Stouten et al., 2018). Although individuals interpret and respond to visions differently, Kotter (2012) argues that cultivating a sense of urgency around the vision significantly enhances its uptake and effectiveness.

QA activities provide a natural vision around which interest holders in HE can coalesce. Although each administrative unit maintains its own goals and mission, encouraging interest holders to view quality (however defined within the institution) as a guiding influence for their work can create an effective, unifying vision. In addition, the cyclical nature of QA reviews in

HE generates regular and predictable urgency, which can help sustain momentum for ongoing QA efforts.

Urgency

Kotter (2012) observes that many organizations experience a pervasive sense of complacency, where individuals perceive no need to initiate or support change. To counter this inertia, leaders must cultivate a sense of urgency that motivates action. Stouten et al. (2018), in their review of seven prominent change models (including Kotter's) highlight the consistent emphasis across frameworks on establishing urgency early in the change process. Scholars have described this concept using various terms, such as "creating dissatisfaction" (Beckhard & Harris, 1987), "pain messages" (Connor, 1993), and an "awakening" (Taffinder, 1998), all of which reflect the need to disrupt the status quo and inspire momentum.

Fredberg and Pregmark (2022), in their literature review of the role of urgency in change management, find that it can both facilitate and hinder progress. In one regard, it can prompt individuals to act and engage with change efforts; on another, it may generate pressure, stress, and fear, ultimately reducing commitment. Stouten et al. (2018), in their critical comparison of practitioner and peer-reviewed literature, caution against relying too heavily on urgency. Their findings suggest that urgency should not replace a thorough, evidence-based analysis of the need for change. Artificially inflating urgency may provoke fear and resistance, which can undermine the success of a change initiative.

Although urgency remains critical in many change models, the literature advocates for a balanced approach, and this balance is particularly applicable to HE. Leaders must first conduct a contextual analysis of the proposed change and its environment to determine the appropriate level of urgency. They must then communicate the need for change carefully, ensuring that messaging avoids excessive pressure. The cyclical nature of QA can be used strategically to guide 'ramp-up' and 'cool-down' periods within the workflow, helping maintain momentum without overwhelming interest holders. Once leaders establish both a clear vision and a well-calibrated sense of urgency, they can begin addressing the practical steps required to implement change effectively.

Communication

The change management literature consistently identifies communication as critical in achieving successful outcomes and minimizing resistance. Within Kotter's (2012) framework, effective communication around change must be simple, illustrative, widespread, repetitive, demonstrated by leadership, transparent, and multi-directional. Subsequent research has affirmed these features, reinforcing the validity of Kotter's model (Caruth & Caruth, 2013; Gilley, Godek, & Gilley, 2009; Lane et al., 2015; Parker, 2002; Pundyke, 2020; Rannisto & Saloranta, 2019).

O'Connell et al. (2011), in their analysis of communication's role in change management, found that both the method and frequency of communication play a crucial role in facilitating vision adoption and, ultimately, in the success of change initiatives. Russ (2008) categorizes communication into two distinct types: programmatic (top-down) and participatory (interactive and inclusive of all interest holders). While each style presents unique strengths and limitations, the literature emphasizes that successful change efforts require both approaches (Russ, 2008). Stouten et al.'s (2018) literature review corroborate these findings, noting that transparency, trust, and employee efficacy correlate strongly with how leaders communicate the vision for change. Moreover, communication serves to disseminate the vision and identify obstacles and resistance among interest holders (Chandler, 2013). This feedback loop enables leadership to target areas requiring additional support, thus enhancing the organization's ability to manage change effectively.

Given the semi-independent nature of faculty members as practitioners of their discipline (as discussed above), establishing effective communication mechanisms is critical to ensuring that everyone in the administrative unit remains informed about activities that may necessitate change. A clear communication strategy not only supports convergence around a shared vision for change but also helps all interest holders see themselves within the process.

Facilitation

Kotter (2012) identifies three primary barriers to successful change initiatives: rigid formal structures, a lack of technical skills necessary to implement change, and resistance from interest holders, including leaders and non-leaders. To address these barriers, Errida and Lotfi (2021) highlight two recurring themes in the literature, which Kotter (2012) characterizes as 'facilitating' change. First, successful change efforts require proactive planning in communication, training, coaching, resistance mitigation, and leadership engagement. Second,

incorporating formal project management methodologies (such as those offered by PMI or PRINCE2) provides structured guidance that enhances the likelihood of successful change implementation.

A widely adopted strategy for addressing systemic barriers for change is Appreciative Inquiry (AI), developed by Cooperrider and Srivastva (1987). Rooted in a philosophy of positivity, AI emphasizes inquiry-driven processes that focus on identifying and building upon what already works well within an organization (Coghlan et al., 2003; Dunlap, 2008; Grant, 2006; Preskill & Catsambas, 2006; Stame, 2014). Rather than centring on deficiencies, AI encourages leaders to ask pragmatic questions to understand the needs of interest holders, the organization's internal structures, and the broader operational context (Cooperrider & Srivastva, 1987). The process begins by exploring existing strengths and then collaboratively identifying the changes needed to enhance organizational performance (Coghlan et al., 2003).

Stouten et al. (2018), in their review of change management strategies, note that leaders frequently use AI during the initial planning stages to co-create and communicate a compelling vision for change. However, the literature also indicates that AI and similar strategies are not limited to the planning phase. Instead, organizations often apply them iteratively throughout the change process to continuously engage interest holders, address emerging barriers, and reinforce commitment to the change effort.

AI can enhance QA activities in HE by encouraging interest holders to engage with the process in imaginative and innovative ways (Clouder & King, 2015; Dunlap, 2008). The approach also prompts individuals to reflect on their own experiences within the program (Coghlan et al., 2003), fosters relationship building through the sharing of those experiences (Preskill & Catsambas, 2006), and supports a positive and strengths-oriented mindset toward their involvement in the program (Cooperrider & Srivastva, 1987; Preskill & Catsambas, 2006).

Commitment

Kotter (2012) argues that change requires time and often encounters numerous barriers, such as leadership turnover and organizational fatigue. These challenges can diminish the initial sense of urgency, ultimately placing the change initiative's success at risk and increasing the likelihood of regression. To mitigate this risk, Kotter (2012) recommends several strategies:

- Celebrate short-term successes while maintaining momentum by ensuring these celebrations do not signal the completion of the change effort.

- Acknowledge the complexity of the organization's environments and proactively plan for the effects of change on all interdependent interest holders.
- Distribute responsibility for the change across the organization so that its success does not depend solely on the presence or influence of individual leaders, whether formal or informal.

By applying this approach, organizations can cultivate more substantial commitment among interest holders, thereby increasing the likelihood that the change initiative will be sustained through to completion.

Kayani et al. (2021) refer to this dynamic as an organization's "commitment to change" (C2C) philosophy. Their literature review highlights that, while leadership plays a crucial role in fostering commitment, individual interest holders must also recognize the need for change and exhibit attitudes and behaviours that support it. Similarly, Stouten et al. (2018) found that C2C must manifest within the organization and individual actors and in the collective spaces where individuals engage with organizational structures and processes. Errida and Lotfi (2021) further emphasize the importance of long-term C2C; their review of the literature indicates that organizations must institutionalize change by embedding it into systems, reinforcing new behaviours, and implementing strategies for long-term support. Contemporary scholarship thus supports Kotter's (2012) position that sustained commitment is essential to successful, enduring change.

In HE, a culture that supports QA is essential to an administrative unit's C2C. Fostering a culture that actively engages in quality improvement and assurance activities promotes a corresponding willingness to embrace change when needed.

Celebrating

To combat fatigue and resistance during a change initiative, Kotter (2012) recommends identifying and celebrating "small wins." For a milestone to qualify as a win worthy of celebration, it must be clearly visible, unambiguous, and directly tied to the broader change effort. Kotter (2012) outlines several benefits associated with recognizing such achievements:

- They provide evidence that sacrifices are serving a meaningful purpose.
- They motivate interest holders to remain engaged in the change process.
- They reinforce the communication of the change vision and strategy.
- They help counteract resistance.

- They signal progress to formal leadership.
- They generate momentum for continued action.

Crosby and Finlay (2021) emphasize that celebrating wins strengthens team connections and improves morale and resilience. Similarly, Errida and Lotfi (2021) interpret the celebration of small wins as a motivational tool that sustains interest holder engagement. While they reference Kotter, they do not explore the broader organizational and group-level dynamics he identifies.

Stouten et al. (2018) further highlight this gap in the literature. Among the seven change models they reviewed, only Kotter's (2012) explicitly incorporates the concept of "small wins" and acknowledges the importance of in-progress success metrics. Most models rely on long-term indicators to assess the effectiveness of change, making it challenging to define short-term successes that could support ongoing engagement. Nevertheless, Kotter (2012) and Crosby and Finlay (2021) stress the psychological importance of celebrating progress as a critical component of managing and sustaining change.

QA in HE supports the celebration of both small and large wins. Interest holders can identify "small wins" throughout the preparation stages for a report or external visit, while "big wins" naturally arise at each decision point made by the adjudicating QA body. In this way, change management practices can reinforce QA efforts by providing interest holders with clear, visible indicators of progress and success. Such celebrations contribute to a culture that values continuous improvement and strengthens the administrative unit's capacity to sustain a robust QA environment.

Culture

Kotter (2012) defines culture as a collection of behavioural norms and shared values held by interest holders. Behavioural norms reflect how individuals act within a group, shaping and being shaped by the collective. Shared values typically emerge from these behavioural patterns and persist independently of any individual. Contrary to the common misconception that culture must change first in a change initiative, Kotter asserts that culture develops organically over time through collective experiences. Within his framework, several key characteristics illustrate how change efforts influence culture:

- Successful change initiatives drive cultural transformation;
- Effective communication plays a central role in shaping behavioural norms and shared values;

- In some cases, altering culture requires the turnover of key individuals; and
- Sustaining cultural change necessitates systemic support structures.

Coyle (2018) characterizes culture as one of the "most powerful forces" (p. xviii) in society, noting its profound influence on individual behaviour, a perspective reinforced by Akpa et al.'s (2021) review of literature on organizational culture and performance.

Errida and Lotfi (2021) and Stouten et al. (2018) emphasize that embedding change within organizational culture is essential for achieving long-term success. They argue that change agents must lead the change initiative and guide the accompanying cultural shift. Although Stouten et al. (2018) did not find large-scale empirical studies on the institutionalization of change, their review of case studies reveals the importance of addressing process and interest holder interdependencies and implementing systemic change to support cultural transformation. These findings align with Kotter's emphasis on commitment and culture as foundational elements in sustaining change.

Kotter's (2012) model, when viewed alongside broader scholarship, illustrates how culture emerges through shared experiences, consistent communication, and collective engagement, which are elements that are central to QA processes. In the context of HE, where interest holders operate with varying degrees of autonomy and influence, embedding QA into the behavioural norms and shared values of the administrative unit ensures that quality is not treated as a periodic obligation but as a continuous, community-driven commitment. Ultimately, a strong QA culture enables institutions to move beyond compliance toward meaningful, sustained improvement, positioning them to respond adaptively to ongoing internal and external demands.

Change Management for Ontario SoN

Ontario SoN can benefit from applying Kotter's (2012) framework for successful change management to activities mandated by the QA bodies. The SoN administration already provides a natural hierarchy for leading QA projects, but assembling a guiding coalition from the wider administration, faculty, and support staff can foster transformational leadership within the QA project (Stouten et al., 2018). A strong guiding coalition of administration, faculty, and support staff can also create a vision that resonates with each of their respective groups, which increases the chance of buy-in to the work (Errida & Lotfi, 2021). The approval and accreditation mechanisms already create urgency, since they operate on a cycle of reporting and visits; this schedule sets deadlines that leaders can translate into urgency while avoiding artificial pressure,

stress, and fear (Stouten et al., 2018). With a guiding coalition, a shared vision, and a naturally urgent cycle of tasks, leaders must prioritize communication. Clear and consistent messaging about QA activities can increase transparency, trust, and efficacy among interest holders (Stouten et al., 2018).

The remaining elements of Kotter's (2012) model rely heavily on the individual cultures in Ontario SoN. Leaders can adopt the AI approach of positive inquiry to highlight the strengths and challenges facing a SoN, which supports the self-study/peer-review process and helps identify the needs of interest holders (Cooperrider & Srivastva, 1987). By embedding QA activities into daily operations through a strong C2C philosophy, leaders can support a QA culture and reduce resistance (Errida & Lotfi, 2021; Stouten et al., 2018). Leaders can also celebrate milestones in the QA process to motivate interest holders to remain engaged, generate momentum for future QA activities (Kotter, 2012), and improve morale and resilience (Crosby & Finlay, 2021). Taken together, these elements can shape the culture of a SoN by embedding QA activities into daily operations (Errida & Lotfi, 2021; Stouten et al., 2018).

These strategies can help leaders support interest holders in their QA work in Ontario SoN. However, change management literature highlights two barriers that also apply to QA activities: change fatigue and resistance to change. Because change fatigue often leads to resistance, leaders can consider the two either independently or as a continuum.

Change Fatigue

The scope of change in HE since the start of the millennium has been unprecedented. Expanding pressures related to technology, diversity, internationalization, financial systems, and globalization continue to transform the academic landscape, reshaping both operations and culture. Caruth and Caruth (2013) contend that institutional decision-making structures remain ill-prepared to manage such multifaceted and accelerating demands. Within this context, interest holders in HE frequently experience change fatigue, defined as a sense of exhaustion and cynicism resulting from repeated organizational transformations (Cox et al., 2022; Khaw et al., 2023). Unlike resistance to change, which involves active opposition, change fatigue often manifests through passive disengagement, stress, and burnout (Brown & Abuatiq, 2020). Nursing education is especially vulnerable, as it reflects not only the dynamics of HE but also the rapid pace of transformation in healthcare and society more broadly. Continuous curricular

revisions, the integration of new technologies, and societal changes amplify the risk of fatigue for faculty and administrators (Salto, 2018).

Drasin and Holiday (2024) address this challenge through the Energy Commitment Model (ECM), which integrates the workplace commitment framework (John & Herscovitch, 2021) with Hobfoll's (1989) conservation of resources theory. The model emphasizes three dimensions that shape the onset of change fatigue and provide insight into the cognitive and emotional load that change places on interest holders: resource availability, energy direction, and engagement. Resources extend beyond material considerations to include cognitive bandwidth, time, social support, and emotional capacity to absorb change. Energy direction highlights the type of commitment stakeholders bring to change processes: affective (voluntary alignment), continuance (driven by constraints or lack of alternatives), and normative (grounded in cultural or professional obligation). Engagement represents the tipping point at which individuals possess sufficient resources and commitment to contribute productively to organizational change (Drasin & Holiday, 2024). By foregrounding these dimensions, the ECM positions change fatigue as a deeply personal experience shaped by both institutional demands and individual capacities.

Importantly, Drasin and Holiday (2024) argue that strong leadership and intentional change management provide the most effective mechanisms to counteract fatigue. This claim aligns with broader scholarship, which underscores the need for guiding coalitions, transparent communication, and sustained leadership to support organizational change (Aamodt et al., 2018; Caruth & Caruth, 2013; Kadir et al., 2016; Kotter, 2012; Kuipers et al., 2013). Within Nursing education in Ontario, QA processes exemplify both the necessity and risks of change. Approval and accreditation requirements ensure accountability and educational standards, yet they are also repetitive and introduce new initiatives that can exacerbate fatigue among stakeholders. Centering the experiences of faculty and staff in QA processes, while recognizing the potential for overload, is therefore critical.

Although conceptually distinct from resistance, change fatigue carries comparable risks for the sustainability of QA efforts (Beaulieu et al., 2022). Both phenomena threaten to disrupt QA activities and compromise quality outcomes. Addressing them requires deliberate application of change management strategies that balance compliance with attention to the well-being and engagement of stakeholders. The following section will examine resistance to change as a more

overt barrier within QA contexts, contrasting it with the passive disengagement characteristic of fatigue.

Resistance to Change

Resistance to change is an emotional and psychological reaction experienced by individuals when they encounter uncertainty, perceived threats, or confusion (Prosci, n.d.-a). Adopting a constructivist worldview facilitates understanding this phenomenon, as individuals' perceptions and beliefs shape their unique reactions to change (Ford et al., 2002). The literature categorizes the root causes of resistance into cognitive, emotional, and logical/rational domains. Cognitive resistance reflects a negative mindset toward change; emotional resistance involves feelings, often negative, triggered by the prospect of change; logical or rational resistance occurs when individuals reject the necessity for change based on their interpretation of the initiating circumstances (Kuzhda, 2016).

The philosophy of Michel Foucault offers a useful lens through which to consider resistance. Within Foucault's framework, power can be found in every situation and every relationship (Foucault, 1976/1990); it is imminent and produces reality for those experiencing it (Foucault, 1975/1995). Because power is embedded in all aspects of a situation or phenomenon, resistance is not an anomaly but rather it is a constant balance to power. As such, resistance should be viewed as a structural element of power rather than a moral or behavioural failing.

The individual experiences resistance as a marker of freedom to express their beliefs within the power dynamic. In this way, resistance is not destructive, but rather creative as it enables people to find new ways to be and to govern themselves. Within the context of this study, resistance then is a set of behaviours from SoN interest holders in relation to the QA bodies' activities; the QA bodies hold a certain level of power to categorize the quality of a program against their pre-determined criteria, which interest holders react to as individuals and as a collective in both micro and macro ways. Specifically, within Nursing education, HEI authorities confer power upon SoN interest holders through their professional positions within the discipline and their roles as educators. Through this power, Nursing educators influence not only the individuals with whom they directly interact but also the broader professional collective through bio-power: the integration of disciplinary knowledge with deliberate efforts to shape population-level outcomes in pursuit of desired educational objectives (Perron et al., 2004). This bio-power may be expressed as resistance, but as highlighted by Choi and Ruona (2011) and

Ford and Ford (2009), resistance provides information to power, highlighting how change will impact a situation or phenomenon. This supports Foucault's position that power and resistance are necessarily balanced within the same issue. While QA bodies set expectations for how SoN and interest holders are to structure and deliver programs, resistance emerges from the tensions created by how to meet those expectations; QA bodies and SoN interest holders may have different perceptions on what is relevant in both a program and how to demonstrate its quality. It is the complexities of individual motives, and how they interact within larger systems, that make resistance a nuanced phenomenon.

The underlying causes for resistance materialize through various behavioural characteristics, including general cynicism (Caruth & Caruth, 2013), perceived threats to the status quo, personal security, and confidence in one's abilities, heightened fear and anxiety regarding real or imagined consequences, defensive reasoning, distrust and resentment toward change agents, disagreement over the need for change, and the desire to protect established social relationships (Ford et al., 2002). Resistance must be conceptualized at both the individual and organizational levels. At the individual level, resistance arises from habits, fear of job loss, economic concerns, fear of the unknown, selective information processing, expectations of increased workload, and threats to interpersonal relationships (Kuzhda, 2016). At the organizational level, resistance often stems from structural inertia to preserve stability, insufficient consideration of organizational change impacts, groupthink, perceived threats to expertise, established power relations, and resource allocation (Kuzhda, 2016).

Individuals express resistance both overtly and covertly. Overt resistance includes identifiable obstructionist behaviours such as spreading rumours, fomenting dissent, encouraging inertia, and forming coalitions opposing change (Kuzhda, 2016). These manifestations are more manageable, as they are visible and allow for direct intervention. Conversely, covert resistance is subtle and challenging to detect, often significantly impeding change efforts (Caruth & Caruth, 2013). Covert acts include refusal to communicate or participate, internalized fears without basis, and perpetuation of mistrust toward change and its agents (Kuzhda, 2016). The internalized and individualized nature of covert resistance complicates its identification and mitigation.

Organizational culture plays a crucial role in managing resistance. The change management firm Prosci emphasizes that "organizations do not change, people do" (Prosci, n.d.-b), underscoring that change management primarily involves guiding the individuals within the

system undergoing change. Effective change agents must consider individuals' experiences when designing and implementing change initiatives, as resistance remains one of the most common reactions (Prosci, n.d.-b).

In this study, I employ "resistance" as Foucault does, that is to say, as a neutral term to describe a spectrum of actions and behaviours exhibited by interest holders within Ontario's SoN. Resistance often carries a negative connotation; however, the literature reveals it as a multifaceted construct encompassing various motivations and outcomes (Lilja, 2022). My approach neither judges nor pathologizes those expressing resistance but recognizes its potential presence within the QA activities discussed throughout this dissertation. As per Ford and Ford (2010):

> A purely negative view of resistance is not found in other fields of study, e.g., mechanics, biology, and electronics, where resistance is an operational factor. In those fields, resistance is inherently neutral and only takes on a value of ''functional'' (e.g., in space heaters) or ''dysfunctional'' (e.g., excessive air drag) depending on what one is trying to accomplish. As a result, people in those fields are ambidextrous in working with resistance, capable of seeing it as both an asset and a liability. A more complete and balanced view of resistance can provide more flexibility in the field of managing change. (p. 24)

Resistance may manifest immediately or develop over time (Choi & Ruona, 2011), and can be constructive, surfacing critical concerns before implementation of changes (Ford & Ford, 2009).

The literature discusses overcoming resistance to ensure successful change implementation. Kuzhda (2016) offers a comprehensive framework, outlining six strategies for addressing resistance: education and communication, participation and involvement, facilitation and support, negotiation and agreement, manipulation and co-option, and explicit or implicit coercion. When paired with Kotter's (2012) elements of successful change management techniques, a framework emergers to understand how to overcome resistance. Change agents must strategically target cognitive, emotional, behavioural, and rational objections while addressing overt and covert resistance to facilitate effective change. The following sections outline strategies to overcome resistance and situate those strategies within HE.

Education and Communication

According to Kotter (2012), successful change management depends on establishing a sense of urgency and crafting a compelling vision, both of which educate interest holders about the necessity of the change. Kotter further emphasizes that communicating this vision urgently is essential to ensuring effective implementation. These ideas align with Kuzhda's (2016) literature review, which identifies education and communication as critical strategies for overcoming resistance to change. Effective communication reduces misinformation and rumours, creating psychological space for interest holders to adjust to evolving expectations.

Endrejat et al. (2021) conducted a three-part study involving working professionals, identifying specific communication strategies to employ or avoid when engaging interest holders in change processes. Their findings highlight the importance of fostering psychological safety, enabling interest holders to determine their own informational needs, and encouraging participation in dialogue, an approach they term "autonomy-supportive communication." This, combined with "reflective listening" by change agents, helps to mitigate resistance. Warrick's (2023) literature review corroborates these findings, emphasizing that resistance can be reduced by facilitating ongoing dialogue and transparently sharing progress updates. The literature supports the assertions of Kotter (2012) and Kuzhda (2016) that interest holder engagement, education, and clear, empathetic communication are indispensable for effective change management and overcoming resistance.

In HE, leaders can reduce resistance by drawing on their inherent pastoral power, which Foucault (1983) describes as a form of power concerned with both the collective community and the individuals within it, and one that can only be exercised through a clear understanding of the worldviews of those in their care. Exercising this form of leadership enables change initiatives to be grounded in transparent, ongoing communication that invites meaningful participation from all interest holders, including faculty and support staff. By educating interest holders and creating psychologically safe spaces for dialogue, institutions enable individuals to process change with greater clarity and confidence. When HE programs pair contextually relevant interest holder communication with a compelling vision for improvement as driven by QA, they create the conditions necessary for interest holders to move from resistance toward genuine engagement.

Participation and Involvement

Encouraging interest holder participation and involvement is critical for mitigating the negative psychological impacts associated with organizational change (Kuzhda, 2016). Kotter's (2012) emphasis on building a guiding coalition and empowering others to act reinforces this perspective. By fostering participation, change management projects can overcome resistance through cultivating a co-creation mentality, a collaborative approach that centers individuals within the change process (Vargas et al., 2022). Such co-creation fosters psychological safety among participants, thereby reducing resistance (Burnes, 2015).

Cheraghi et al.'s (2023) literature review, focused on resistance to change among clinical nurses, identifies multiple psychological drivers of resistance, including insecurity, doubt, low motivation, lack of trust, and unreadiness for change. These issues can be effectively addressed through meaningful participation and involvement in change projects. Supporting these findings, Khaw et al. (2023) characterize reactions to organizational change as occurring at both micro (individual) and macro (organizational) levels. While macro-level responses encompass systemic and network-wide reactions (as addressed by Kotter (2012) through facilitation and consolidation of change) micro-level reactions reflect individual perceptions and responses, ranging from advocacy and increased loyalty to disengagement and neglect. Based on their review, Warrick (2023) recommends implementing "change learning sessions" (p. 440) to engage interest holders and enhance participation in change efforts actively.

Taken together, the literature demonstrates that meaningful participation is one of the most effective mechanisms for reducing individual- and system-level resistance to change in HE. By centering interest holders as co-creators in the change process, institutions can cultivate the psychological safety necessary for sustained engagement and adaptive behaviour. Ultimately, HE environments that prioritize inclusive participation are better positioned to navigate the complexities of change and to foster lasting commitment to QA.

Facilitation and Support

Kuzhda's (2016) concept of 'facilitation and support' extends the theme of psychological safety by framing it within systemic organizational practices. In this context, facilitation and support include change leaders providing targeted training to address emerging needs resulting from the change and accommodating individual reactions through organizational policies such as offering time off or counselling services. Kotter's (2012) framework aligns with these ideas,

particularly in his discussion of organizational culture, emphasizing leadership's role in fostering a co-created culture where change is embraced.

Khaw et al. (2023) describe this dimension of overcoming resistance as "macro-level reactions," referring to the organization's collective response to change. Their review highlights emotional, cognitive, and behavioural organizational responses, the importance of clear, organization-wide communication, strong leadership, and cultivating an organizational attitude that is receptive and supportive of change. These findings are corroborated by Cheraghi et al.'s (2023) review of nurses' reactions to change, which identified parallel managerial, organizational, and systemic factors influencing change outcomes. Building on the work of Kuzhda (2016) and Kotter (2012), the literature suggests that a supportive organizational culture is crucial for facilitating how individuals engage with the change process, underscoring the necessity of systemic supports to maintain psychological safety during periods of change.

Overcoming resistance to change in HE requires more than individual-level strategies: it demands an organizational culture intentionally designed to foster psychological safety and collective engagement. When institutions provide meaningful systemic supports for activities such as those required by QA bodies, they create the conditions in which interest holders can respond constructively rather than defensively. Ultimately, embedding facilitation, support, and strong leadership within the cultural fabric of the organization enables HE to navigate change more effectively and sustain the long-term success of their QA efforts.

Negotiations and Agreement

Kuzhda's (2016) findings suggest that resistance can be mitigated through negotiations and agreements between employers and employees, particularly concerning compensation. While salary increases or enhanced benefits are one lever, Kotter's (2012) framework approaches this concept more broadly in building commitment to change and celebrating small wins. This broader approach encourages interest holders to develop systems and supports around individuals, facilitating smoother implementation of the change.

Cheraghi et al.'s (2023) literature review indicates that Kotter's perspective on negotiations and agreement is more widely reflected in practice than Kuzhda's narrower focus on compensation. Their (Cheraghi et al., 2023) review highlights that resistance is more effectively overcome when the organizational culture is responsive to the systemic needs of interest holders, adjusting resource allocation, budgets, job descriptions, and workspace that reflect how

individuals operate. Such organizational responsiveness is more likely to secure genuine agreement and buy-in from interest holders.

Khaw et al. (2023) emphasize the need for further empirical research on this topic. Their literature review notes that, although organizations often invest resources in training and developing employees during change initiatives, there remains a significant gap in understanding how interest holders adapt when not involved in negotiating change parameters or when their agreement is not actively secured beforehand. While both Kuzhda (2016) and Kotter (2012) recognize the importance of these elements in overcoming resistance, the literature is still developing, and a more focused investigation is needed to understand their impact better.

Effectively mitigating resistance requires more than transactional incentives, such as compensation; it depends on fostering genuine commitment through systemic supports and recognition of individual and organizational needs. Kotter's (2012) emphasis on celebrating small wins and building shared commitment highlights how organizations can create structures that enable interest holders to engage meaningfully in the change process. While the literature supports these approaches, further empirical research is needed to understand how securing agreements and fostering organizational responsiveness influences the long-term success of change initiatives for QA in HE.

Manipulations and Co-opting

As a corollary to negotiations and agreement, Kuzhda (2016) suggests that manipulation and co-opting can overcome resistance to change. While "manipulation" often carries a negative connotation, Kuzhda (2016) defines it here as "the very selective use of information and the conscious structuring of events" (p. 57). In this context, individuals may be co-opted to participate as the environment for change is deliberately shaped to encourage their engagement; this differs from genuine cooperation, which is freely given. Kotter (2012), however, frames this process more positively as "facilitating" change, emphasizing the removal or alteration of systemic barriers to empower interest holders to innovate and take risks without resorting to manipulation. Despite the differing terminology, the outcome is similar: systemic changes position the change project to enable and encourage participation, thereby reducing resistance.

Warrick's (2023) literature review aligns more closely with Kotter's (2012) stance, cautioning against manipulation and co-opting, as these tactics risk alienating interest holders and undermining the change effort. Similarly, Khaw et al. (2023) found that fostering genuine

cooperation is more effective in overcoming resistance to change. Therefore, while Kuzhda's (2016) identification of systemic approaches to address resistance remains relevant, the negative implications of manipulation suggest it should be reconsidered and reframed in line with Kotter's (2012) facilitation approach to emphasize ethical empowerment rather than coercion.

While systemic interventions can reduce resistance to change, framing these interventions as facilitation rather than manipulation is critical to maintaining trust and engagement among interest holders involved in QA activities. Kotter's (2012) approach emphasizes empowering faculty, staff, and administrators by removing barriers and creating opportunities for innovation, thereby fostering genuine participation in QA processes rather than coerced compliance. The literature suggests that ethical, facilitative strategies are most effective in HE, as they promote long-term commitment to QA, strengthen the institutional culture of quality, and ensure sustainable improvement outcomes.

Explicit and Implicit Coercion

The final technique Kuzhda (2016) identifies for overcoming resistance to change is coercion, which can be either explicit or implicit. Kuzhda's (2016) literature review notes that while coercion may effectively force compliance, it often leads to disruption among interest holders and alienates them from the organization. Kotter's (2012) framework does not explicitly advocate for coercion, though elements of it may appear in how changes are consolidated or how culture evolves following a change. Warrick's (2023) review further addresses coercion, concluding that this approach frequently generates additional resistance rather than mitigating it. Therefore, explicit and implicit coercion should generally be avoided as strategies for overcoming resistance, since they risk reinforcing the resistors' negative perceptions and undermining long-term change success.

Leadership

Kuzhda (2016) is largely silent on the role of leadership in overcoming resistance to change, whereas Kotter's (2012) framework places leadership at the core of the change process. Furthermore, recent literature reviews by Cheraghi et al. (2023), Khaw et al. (2023), and Warrick (2023) all emphasize the critical importance of leadership in managing and overcoming resistance. Kuzhda's framework, with its strong focus on individuals experiencing change, lacks a comprehensive consideration of leadership's influence in facilitating successful change.

Resistance to Change in HE

It is important to recognize that individuals within HEIs experience the same cognitive, emotional, behavioural, and sociological factors as interest holders in any other organization. However, HEIs face additional dynamics of tradition and stasis that significantly influence patterns of resistance to change. The literature identifies numerous reasons for this resistance, many of which stem from the unique culture in HE. Key factors include:

- Faculty autonomy: Faculty members often have significant control over how they allocate their research time and conduct their teaching (Aamodt et al., 2018; Kadir et al., 2016; Boyer, 1990; Caruth & Caruth, 2013; Chandler, 2013; Newton, 2000; Tagg, 2012). This autonomy, combined with their expertise, can make it challenging to convince them that change is necessary (Boyle & Bowden, 1997; Caruth & Caruth, 2013; Tagg, 2012).
- Perceptions of bureaucratization and workload: Interest holders may be disinclined to participate in change efforts due to heavy workloads and a perception that change initiatives increase bureaucratic demands (Burch et al., 2018; Ehlers, 2009; Harvey, 2004; Shawer, 2013).
- Deep-seated conservatism: A pervasive conservatism within HEIs further complicates change efforts (Caruth & Caruth, 2013; Chandler, 2013; Lane et al., 2015; Parker, 2002; Rosenberg, 2018; Salto, 2018).

While these three factors (faculty autonomy, perceptions of bureaucratization, and institutional conservatism) are foundational to understanding resistance to change in HEIs, they are not exhaustive. When combined with the unprecedented pace of change to technologically, societal norms, and funding structures (Caruth & Caruth, 2013), HEIs operate in unfamiliar and challenging contexts that can increase instances of resistance amongst interest holders.

Within the interest holder groups discussed in this study, faculty are often seen as the primary locum of resistance to change. As Caruth and Caruth (2013) explain:

> In institutions of higher learning, it is the highly educated and autonomous professorate, not administrators, who generally control the fundamental practices of the academy. Persuading professors to make significant changes in these fundamental practices is complicated. Professors have devoted vast amounts of time, effort, and thought into their professions. They are driven by well-established attitudes and ideals developed over years of study and preparation. (p. 13)

Engaged as subject experts, bound by collective agreements negotiated by their unions, and shaped by behaviour rooted in centuries of tradition, faculty members often exhibit resistance to embrace changes that do not align with their constructivist worldviews (Caruth & Caruth, 2013). As Foucault posits, resistance is not external to power but immanent within it: "Where there is power, there is resistance, and yet, or rather consequently, this resistance is never in a position of exteriority in relation to power" (Foucault, 1976/1990, p. 95). Thus, faculty resistance should not be read as a pathological reaction to change but as an expression of the same power relations that structure academic life. The professorate's authority, autonomy, and traditions are precisely what make them both holders of institutional power and potential sources of resistance. As viewed through a Foucauldian lens, that resistance is complimentary to the power driving change (Foucault, 1976/1990; Foucault, 1975/1995).

Rosenberg (2018) highlights this challenge by stating, "there is little about the governance structure or reward system in higher education that encourages substantial change" (p. 70). He further observes that "[h]igher education is also inclined to be inward rather than outward looking: that is, to focus on the priorities and preferences of internal audiences—administrators, faculty members, trustees—rather than external audiences like prospective students and their families" (p. 70). In his assessment, modern HEIs prefer to maintain the status quo and embrace a level of (small-'c') conservatism, which contradicts the expectation that HEIs serve as bastions of liberal thought. When faced with the imperative to change, HEIs operate within the autopoietic system described by Lenartowicz (2015), reinforcing self-preservation and leading to resistance. As such, interest holders expressing resistance to change do so from a position of ownership of the of the systems they work within. Nevertheless, common change management principles can still be effectively applied within HEIs to overcome such resistance.

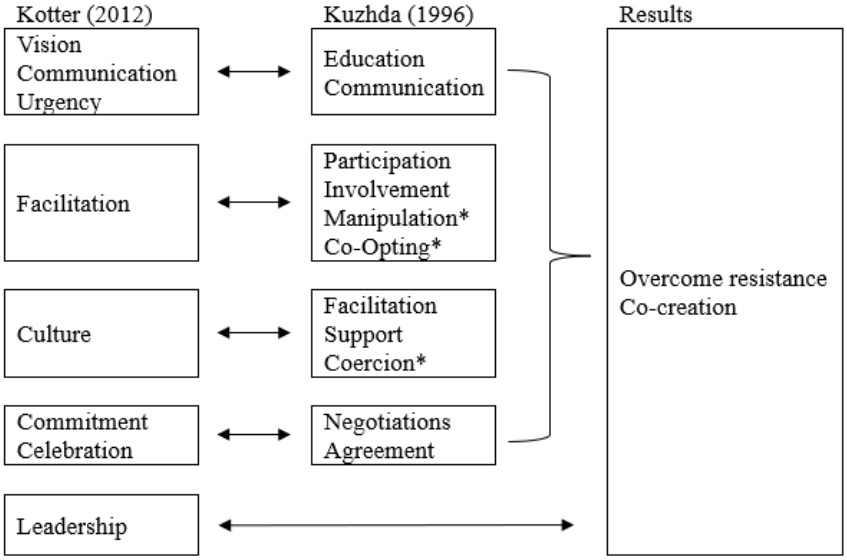
By combining Kotter's (2012) framework for successful change management with Kuzhda's (2016) strategies for overcoming resistance to change, a model emerges to identify challenges specific to change initiatives in HE and to develop targeted strategies to address resistance. This integrated approach is illustrated in Figure 1 below. The goal of change efforts is to overcome any resistance that may arise within interest groups and co-create a culture that supports and sustains change.

Overcoming Resistance to Change in HE

While HE presents a unique environment, the strategies to overcome resistance to change

Figure 1

Change Management Principles and Strategies to Overcome Resistance to Change



Note: For the reasons described above, the strategies marked with an asterisk should be avoided when trying to overcome resistance to change.

discussed above remain relevant. In their literature reviews, Caruth and Caruth (2013) and Palumbo and Manna (2019) identified many of the themes discussed above as present in HEIs concerning change management and resistance to change. This alignment underscores how general change management principles apply to the HE context, as multiple scholars have observed similar patterns within HEIs. At the same time, Foucault's (1982) conception of power and resistance suggests that these patterns should not be understood merely as obstacles to be managed but as inevitable dynamics that accompany any exercise of power. In HE, where QA authority is distributed between administration, faculty, support staff, and external bodies, resistance emerges as a natural and necessary response to governance.

McGrath et al. (2016) identified strategies to mitigate resistance to change by interest holders in a HE setting that resonate with the larger body of literature. At a fundamental level, the authors advocate establishing "a robust theory of change and an associated set of policies at the meso or departmental level" (McGrath et al., 2016, p. 2). The goal is to provide interest holders with a sense that their department can maintain its daily operations throughout the change process, limit changes in scope, and build capacity to make required changes in the

future. To accomplish this goal, HEIs should frame their change project and communicate on the process, invite interest holders' participation in the planning stages, pace and sequence the rate of change in a contextually aware way, and recruit participants to ensure change practices become routine (McGrath et al., 2016). Functionally, grounding the change exercise in the academic context using peer review, data-informed decisions, and environmental scans/literature reviews would make the change process more relevant to interest holders and engender confidence (Pundyke, 2020). By clarifying what changes require action, HEIs can reduce, if not wholly mitigate, anxiety, a significant contributing factor to resistance to change (Ford et al., 2002).

One strategy that proves effective in HE settings involves leaning into the resistance to change movement among the interest holders. Kuzhda (2016) identifies a threat to an individual's needs as an essential factor in psychological resistance to change. As such, HE administrators implementing changes that impact interest holders should communicate openly with them members to gauge resistance cues (Ford & Ford, 2010) and encourage targeted and focused interest in participation (Caruth & Caruth, 2013). Ford and Ford (2010) position resistance to change as a valuable tool for change managers in HE because it highlights a diversity of viewpoints, identifies weaknesses in the proposed change plan, and helps develop implementation strategies. Framing resistance to change this way for academics can engender support and participation for the project in general by calling on personal expertise and experiences in order to develop strong practices within the administrative unit.

Building on these insights, Foucault's perspective offers a deeper understanding of resistance within HE. For Foucault (1982), power is never exercised without the possibility of resistance; indeed, resistance is not external to power but exists as its necessary counterpart. This framing underscores why interest holder resistance should not be pathologized but instead recognized as an inherent dimension of academic governance and change. Resistance, in this sense, can be seen as generative: it creates spaces for dialogue, questions underlying assumptions, and ensures that change initiatives are subjected to critical scrutiny. In the context of HE, where interest holders' identity and autonomy are closely tied to disciplinary expertise, such resistance provides a means of preserving professional integrity while simultaneously shaping the direction of reform. Rather than being dismissed as an obstacle, resistance can thus be harnessed as a productive force in the co-construction of sustainable change.

Resistance to QA in HE

Resistance to QA requirements emerges from psychological and organizational conditions similar to those that underpin resistance to change more broadly within HEIs. Both general change initiatives and QA-related requirements can alter how interest holders perform their work, relate to colleagues, and engage with their institutions and external environments. Conceptualizing resistance to QA through established frameworks of resistance to change therefore provides a useful lens for understanding this phenomenon and for identifying strategies to mitigate it. This approach is well supported in the literature, where resistance to QA is frequently documented as a recurring feature of quality initiatives in HE.

A common issue that the literature identifies regarding the engagement of interest holders in QA activities is that it is perceived to be a bureaucratic process rather than a quality exercise. Faculty members either disagree that QA work is necessary (which they consider their prerogative as autonomous practitioners of their discipline) or feel that it is required only for bureaucratic reasons (Burch et al., 2018; Ehlers, 2009; Harvey, 2004). All interest holders in HE must embrace and help build a QA culture that welcomes this work. Achieving this buy-in would support QA requirements and reduce resistance. To this end, Hart (2019) recommends engaging faculty to determine what information they need to "arrive at their judgements about, and commitment to, the improvement" (p. 4) in question.

For many administrators and support staff, QA activities are a paradox. QA may attract better students (Harvey, 2004), enhance graduate employability (Harvey, 2006a), bring minimum standards of teaching quality into classrooms (Harvey, 2004), help develop and implement an institutional mission and support activities (Stensaker & Leiber, 2015; Newton, 2002), provide students with a voice in institution management (Stensaker & Leiber, 2015), and help secure resources (Stensaker & Leiber, 2015). However, QA also presents an equal number of challenges.

Primary among these challenges are issues of perception. Although QA reporting requirements often include gathering input from students and faculty, interest holders report that administration excludes these groups from decision-making and ignores their evolving needs to comply with the mandates of external bodies (Dzimińska et al., 2018; Stensaker & Leiber, 2015). The prevailing perception is that QA requirements follow a top-down approach that neither includes nor empowers faculty and staff (Dzimińska et al., 2018; Newton, 2002). Beyond

perception issues, administrators face practical challenges in QA schemes, including over-bureaucratization of QA processes (Dzimińska et al., 2018) and inflexible program structures, offerings, and change mechanisms (Harvey, 2004; Dzimińska et al., 2018).

The literature acknowledges that QA provides a beneficial external assessment of programs, fosters uniformity in disciplines (Harvey, 2004), and makes operational issues transparent (Stensaker & Leiber, 2015; Newton, 2002). However, interest holders' challenges in engaging with QA activities outweigh these theoretical benefits. Faculty experience the same inflexibility in program offerings and updates as administrators; they feel QA restricts their ability to innovate and imposes external influences in the classroom that are neither helpful nor welcomed (Harvey, 2004).

When asked about external influences in classrooms due to discipline-specific QA requirements, one academic told Harvey (2004): "I think it is a matter of particular concern when professional bodies try to overrule academic judgments on academic matters, for example, curriculum design and content and assessment of academic aspects of the course" (p. 215). This leads to a second challenge faculty identify with QA activities: how their expertise is perceived. Faculty sense that external program evaluations can be insulting when they are believed to question their ability and integrity (Newton, 2000). Therefore, faculty perceive that teaching receives little value in institutions engaged in QA activities (Newton, 2000; Dzimińska et al., 2018).

Beyond specific faculty issues with QA imposition in HE, the literature highlights philosophical concerns. Many interest holders perceive QA as a ritual disconnected from their daily activities. They believe the reports generated remain so detached from their day-to-day reality that they respond solely to QA mandates rather than reflect the institution's actual state (Newton, 2000). Interest holders also regard participation in QA as being about optics, that is to say, boasting compliance rather than driving genuine quality improvements; they view QA as imposed rather than adopted (Newton, 2000). Finally, interest holders struggle to distinguish improvements stemming from QA activities versus those generated by their own level of professionalism. This difficulty partly arises because interest holders report receiving no helpful feedback from QA on which to base changes (Dzimińska et al., 2018; Newton, 2000).

Two aspects of QA in HE warrant further exploration. The first concerns the routine nature of QA activities; the second involves assessing the impact of QA schemes. The literature

reflects interest holders' frustration with QA's 'onerous' requirements. Salto (2018) presents this issue as the difference between formal and substantive compliance; Burch et al. (2018) describe it as the "tail wagging the dog" (p. 58); but most strikingly, Newton (2000) asserts that faculty view compliance with QA data collection as little more than "feeding a beast." Salto (2018) argues that institutions, to satisfy mandating bodies, resort to over-compliance in reporting activities. This approach exacerbates interest holders' frustration over QA's perceived excessiveness.

QA bodies recognize this issue, as Harvey (2006a) reports in a summary of a round-table discussion he hosted with various accreditors. In that discussion, approval body representatives acknowledged two main difficulties in attributing changes or improvements in HEI programs or administration: 1) the sector and discipline context continually evolve, making it hard to determine whether a change responds to QA requirements or broader contextual factors; and 2) evaluation and improvement processes are iterative and nonlinear, requiring ongoing adjustments as changes roll out, are evaluated, and are modified. Given that QA bodies admit it themselves, it is hard not to recognize a serious flaw in the HE QA system: interest holders often find the process(es) neither relevant nor useful.

This leads to resistance to QA which mirrors the resistance to change, as conceptualized by Kotter (2012) and Kuzhda (1996). Although administration holds a vision and intent for QA activities, faculty and support staff often lack urgency or share the administration's belief that change is necessary to meet that vision. Even when forming a guiding coalition from all HEI interest groups, the faculty's autonomous nature can hinder administration and support staff's efforts to facilitate participation, and manipulation or co-opting usually fails to influence them. Celebrating QA progress only resonates with those engaged in the process; since facilitation may fail, so may celebrations. The unique HE culture requires genuine buy-in from interest holders to build a culture that is supportive of QA efforts. Such culture is crucial to foster commitment to change both philosophically and practically.

Rashidi et al.'s (2022) literature review validates the causes of resistance to QA discussed above and stresses the need to address both the individual interest holders resisting QA and the systemic settings inhibiting change. Cardoso et al.'s (2016) literature review identifies the same themes, highlighting psychological and structural elements supporting QA resistance in HE. Both reviews indicate that effective leadership, communication, systemic supports for QA

activities, and a strong culture are necessary to support QA requirements and overcome resistance among HEI interest holders.

Foucault's analysis of power and resistance provides another way of interpreting interest holder responses to QA. For Foucault (1978/1990), power and resistance are inseparable: "Where there is power, there is resistance" (p. 95). QA mechanisms can be understood as disciplinary practices that do more than ensure accountability; they create categories of evaluation, define what counts as "quality," and produce truths about academic programs and faculty performance. From this perspective, resistance to QA is not merely psychological reluctance or bureaucratic fatigue but a fundamental response to the ways in which external bodies seek to govern academic work through knowledge production. Resistance, then, is not a pathology to be overcome but an expression of agency within power relations; it is a reminder that those subjected to QA retain the capacity to contest, reinterpret, or redirect its effects. This framing positions interest holders not as obstacles to quality but as active participants in negotiating what "quality" should mean within HE.

Interest holders in Ontario SoN operate within the environment described in the literature above. As Lenartowicz (2015) notes, interest holders function within an autopoietic system; they remain human actors who experience the same emotional responses to change as those in other industries and who respond to change management practices. By applying change management strategies to address change fatigue and resistance, and by recognizing the constructivist worldview articulated by Foucault (1982, 1975/1995, 1976/1990) in his writings on power and resistance, Ontario SoN can better support its interest holders. This approach has the potential to cultivate a successful QA culture and strengthen the SoN's ability to meet its diverse QA requirements.

Summary of Research Questions

The purpose of my study is to examine the QA review requirements for Ontario SoN and to explore how the QA processes are understood and perceived by those that interact with them. Specifically, this study seeks to (1) provide a high-level mapping and comparison of the external QA review bodies and requirements to which Ontario SoN are subject, identifying similarities and differences in criteria, procedures, and overarching considerations; and (2) investigate the awareness, involvement, and perceptions of administrators, faculty members, and support staff regarding these QA requirements. Through a phased, multimethod study, my research aims to

identify the perceived benefits, barriers, risks, and opportunities for reform associated with the current QA review system. Ultimately, my goal is to generate evidence-informed insights to support more coherent, effective, and sustainable QA practices within Ontario Nursing education.

Given the context of my study, the need to combine several fields of literature, the gaps present in our understanding of QA and resistance in HE, and my own experience with QA in HE in general and with SoN in particular, I developed the following research questions for my explanatory, sequential two-part multimethod study:

Part 1:

1. What QA reviews are Ontario SoN subject to?
    a. What criteria, procedures, and general considerations do these QA reviews include?
    b. What elements of criteria, procedures, and general considerations are similar between the bodies, and what elements differ?

Part 2, Phase 1:

2. How aware are administrators, faculty members, and support staff of the QA requirements their schools face?
3. How involved are administrators, faculty members, and support staff in their schools' QA requirements?
4. What advantages and disadvantages do administrators, faculty members, and support staff identify regarding their schools' QA requirements?

Part 2, Phase 2:

5. What are the perceived benefits of the current QA reviews for Ontario SoN for administrators, faculty, and support staff?
6. What are the perceived barriers of the current QA reviews for Ontario SoN for administrators, faculty, and support staff?
7. What risks do administrators, faculty, and support staff see in the current QA reviews landscape for Ontario SoN?
8. What areas of possible reform do administrators, faculty, and support staff see in the current QA reviews for Ontario SoN?

Conceptual Framework

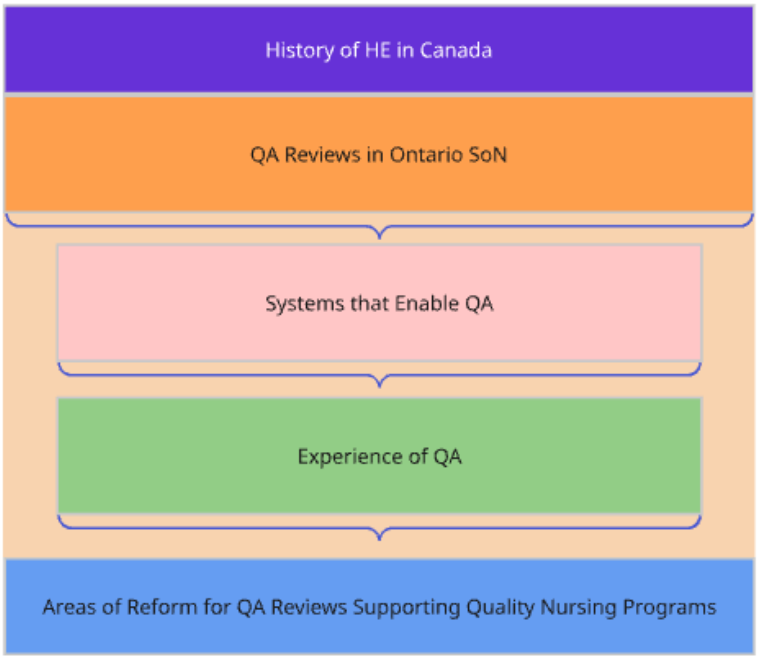
Conceptual frameworks help researchers demonstrate how they have incorporated various fields of study and theories to bring a holistic understanding of the phenomenon under consideration to their study (Tamene, 2016). Drawing on Thorne et al.'s (2004) concept of theoretical scaffolding, the researcher begins with a provisional analytic framework informed by existing theory, disciplinary knowledge, and contextual insight. Thorne et al. (2004) caution that while this initial structure supports early study design and coding, researchers must remain open to modifying it in response to emerging data, thereby avoiding the trap of merely confirming preconceptions or producing a superficial "topical survey." Complementing this, Jabareen (2009) emphasizes that a conceptual framework is not a rigid schematic but a flexible "plane" of linked concepts that can be reshaped as conceptual insights evolve. Jabareen (2009) suggests a method called conceptual framework analysis, which uses grounded theorizing to reconstruct a unified theoretical structure from multidisciplinary literature while preserving openness to novel relationships and interpretations. Together, Thorne's (2004) scaffolding metaphor and Jabareen's (2009) procedural guidance illustrate how the conceptual framework in a PhD dissertation is both foundational and adaptable; this anchored my early assumptions, help me explicitly explore the meaning ascribed to concepts relevant to the phenomenon understudy and their relationships, while remaining responsive to inductive discovery and iterative refinement.

The preliminary conceptual framework for this study (Figure 2, below) illustrates how the history and context of HE in Canada (particularly the existence of QA processes in professional programs) form the foundation for examining QA reviews in Ontario SoN. At the core of the framework is the systems that enable QA reviews, which serve as the primary mechanism through which program quality is assessed and validated. These systems the shape both the structure and function of QA reviews and influence how interest holders perceive and experience the system. These elements must be considered collectively when moving from the current state of the system toward an improved future state.

At the base of the framework lies my study's central contribution: the identification of areas for reform in QA reviews that can better support faculty, administrators, and other interest holders in delivering high-quality nursing programs. This structure demonstrates how historical context, system processes, and lived outcomes converge to inform actionable recommendations for strengthening QA systems.

Figure 2

Conceptual Framework on Quality Assurance and Change Management in Ontario Schools of Nursing



Summary

In this chapter, I summarized the literature that underpinned my study: QA in HE, common QA review elements, and change management to support efforts to overcome change fatigue, resistance to change, and resistance to QA activities. I then described the research questions that guided my study. I concluded by detailing the conceptual framework that I applied to my study.

Chapter 3: Study Design, Philosophical Assumptions and Methodology

In this chapter, I discuss the methodology I used in my study. I begin by discussing the design of my research and my position as someone who has built a career around the accreditation of professional programs. Next, I describe the explanatory, sequential, two-part multimethod research (MMR) design I employed in my study. Finally, I describe how I collected the data in each part and phase of my study. I conclude the chapter by explaining the ethical considerations of my research.

Study Design

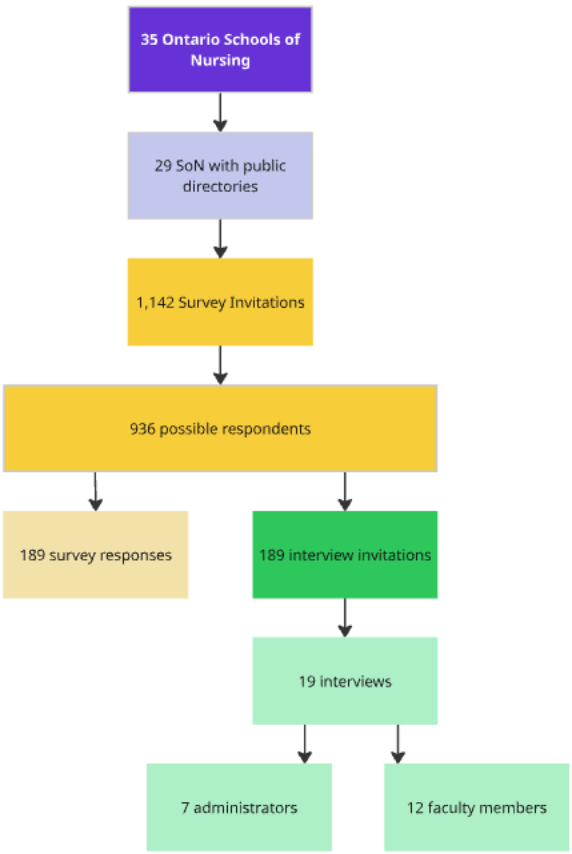
In the first part of my study, I reviewed publicly available criteria and procedure documents from the four bodies mandated to conduct QA reviews of Ontario SoN. These documents outlined the standards SoN must meet and detailed the procedures involved in the QA process. I obtained the criteria for OUCQA, PEQAB, CNO, and CASN from their respective public websites. While I could also access the procedure manuals for OUCQA, PEQAB, and CNO from their websites, the procedures for CASN are not publicly available. Thus, I used my own experiences and discussions with research participants in Part 2 of my study to further explain the procedures for CASN.

In Part 2, Phase 1, I surveyed interest holders to assess the scope and impact of the current QA system on Ontario SoN. I used the list of CASN member schools on their public website to identify 35 university and college SoN across the province. Of these 35 HEIs, 29 had publicly available faculty and staff directories, allowing me to identify SoN personnel. I invited 1,142 individuals to participate in this phase of my study. During the survey, I asked respondents if they would be willing to participate in interviews for Part 2, Phase 2. I interviewed seven administrators (ranging from program coordinators to deans) and 12 faculty members (from various career stages, including new and retired faculty) from university- and college-based SoN across Ontario. Figure 3 below illustrates the data collection statistics for Part 2, Phases 1 and 2.

My study is guided by pragmatism. By adopting a pragmatic worldview, I ensured that the knowledge derived from this study is specific to individual SoN while also representing a broad cross-section of Nursing education in Ontario. This knowledge is understood within the context of my experiences as a researcher and someone who has worked in this area for over a decade. The following section addresses my positionality.

Figure 3

Data collection statistics for Part 2, Phases 1 and 2



Positionality

Between 2012 and 2018, I worked as the Accreditation Program Officer and the Planning Coordinator for CASN, where I was responsible for the day-to-day elements of the accreditation system. I regularly interacted with interest holders at SoN across Canada in this role. When I joined CASN, CNO used CASN accreditation as the foundation for its approval process. During my tenure, I participated in discussions and projects related to CNO's decision to develop an approval mechanism independent of CASN's accreditation system. I also engaged in policy discussions with interest holders in the Nursing education system regarding the complexity, challenges, and opportunities presented by the QA system. These experiences provided me with a holistic understanding of the elements and impacts of the current QA system for Ontario's SoN.

After my time at CASN, I worked as the Manager of Quality Assurance for the Telfer School of Management at the University of Ottawa, where I experienced firsthand the process of undergoing multiple QA reviews. This deepened my understanding of Ontario SoN's realities when navigating various approval and accreditation reviews. Additionally, I have supported SoN across Canada in recent years as they prepared QA reports for provincial regulators, accreditors, and other bodies, further enriching my insight into this context. Moreover, I now oversee the day-to-day operations of Engineers Canada's accreditation visits, which has given me a broader appreciation of issues related to the accreditation of professional programs in HE. Finally, as a consumer of the Ontario healthcare system, I am interested in ensuring SoN provide high-quality programs and are subject to an effective and efficient QA system.

This study draws on my professional and personal experiences in QA systems, Nursing education, and HE.

Overview of Multimethod Research

I used a multimethod research (MMR) structure for this study. Scholars use MMR to apply two or more methods within a single study (Hunter & Brewer, 2015a; Morse, 2002). They can incorporate various techniques at any study stage, from formulating research questions to drawing conclusions. While a mixed-method study "focuses on collecting, analyzing, and mixing both quantitative and qualitative data in a single study or series of studies" (Creswell & Plano Clark, 2018, p. 5), an MMR study offers "rich opportunities for cross-validating and cross-fertilizing research procedures, findings, and theories" (Hunter & Brewer, 2006, p.1). In MMR, scholars do not rely on each project stage to generate meaning; they explore each stage independently to enrich the study's overall insight.

Researchers using MMR do not need to assign specific qualitative or quantitative labels to each study part. However, they must remain aware of how their chosen methods best serve the research objectives (Sammons & Davis, 2017). This flexibility enables them to operate within paradigms that reflect their subjects' realities. It empowers researchers to take a broad approach to their work (Hunter & Brewer, 2015b), applying techniques pragmatically to define scope, gather data, and analyze results (Hunter & Brewer, 2006).

Although scholars closely associate MMR with mixed-method research, they now typically regard it as a sub-set (Hunter & Brewer, 2015a), though often considering both together (Bryman, 2006; Hall & Preissle, 2015; Hesse-Biber, 2015; Sammons & Davis, 2017; Schwandt & Lichty, 2015). As a result, many of the strengths, challenges, and limitations of mixed-method research also apply to MMR. Greene et al. (1989) emphasized that mixed-method research promotes triangulation, multiplicity, development, initiation, and expansion which are features that enhance a study's validity, relevance, and depth and characterize MMR.

In his content analysis of more than 200 social science articles, Bryman (2006) identified standard MMR features, including:

- using triangulation to corroborate findings and analysis,
- presenting a comprehensive analysis of the phenomenon under study, and
- providing contextual clarity for distinct parts of a study.

While Tashakkori and Teddlie (1998) describe mixed-method research as "intuitively appealing" to pragmatic researchers, they highlight three key factors that align with my own MMR approach: MMR supports broad adoption of methods and designs, avoids "metaphysical concepts" (p. 30) that often sidetrack researchers, and embraces a practical philosophy aimed at producing positive change. I chose an MMR approach because it supports the pragmatic focus of this study, which I will elaborate on in the next section.

Philosophical Approach

I employed a pragmatic paradigm in my sequential, explanatory MMR study. Pragmatic researchers seek structures, tools, and solutions that work within the specific context of their research (Creswell, 2012). According to Davis (2004):

> To the pragmatist, truth is not ideal, eternal, or universal. It is rather what works—and hence practical, temporary, and contextually specific. In brief, practical consequences are seen to be the most important criteria for decisions around knowledge, values, and meaning (p. 208).

This approach enabled me to prioritize my research questions over a particular methodology or worldview (Creswell and Plano Clark, 2018; Johnson and Onwuegbuzie, 2004). Pragmatism and

MMR create a paradigm for researchers where scholars can seek out the best method(s) for answering their research questions and engage with their subject from many perspectives (Hesse-Bieber, 2015). Utilizing a pragmatic approach allows me to employ multiple methods, drawing on the inherent strengths of each one to provide clarity in my study (Johnson and Onwuegbuzie, 2004).

Constructivism serves as a complementary paradigm which also informed my study. Rooted in Kantian philosophy, constructivism emerged during the 1980s and 1990s as both a philosophical and educational approach. It asserts that individuals do not acquire knowledge in isolation but construct it through their engagement with context and experience. As a result, a person's worldview is inherently subjective, shaped by their unique accumulation of experiences (Liu & Matthews, 2005). Jean Piaget, drawing on the foundational work of Vygotsky, von Glasersfeld, and Dewey, developed a theory of cognitive development that advanced this constructivist understanding of knowledge formation:

> Fifty years of experience have taught us that knowledge does not result from a mere recording of observations without a structuring activity on the part of the subject. Nor do any a priori or innate cognitive structures exist in man; the functioning of intelligence alone is hereditary and creates structures only through an organization of successive actions performed on objects. Consequently, an epistemology conforming to the data of psychogenesis could be neither empiricist nor preformationist, but could consist only of a constructivism. (Piaget, 1980, p. 23)

In his critical analysis of constructivism's development, Phillips (1995) emphasizes that learning is a social process shaped and enriched by prior experiences. Educational researchers commonly apply constructivism to examine teaching and learning. However, because constructivism involves individuals building an understanding of their environment and comparing experience to theory (Allen, 2022), researchers can also use it to explore how participants in broader studies make sense of their relationship to the phenomenon under investigation.

A pragmatic worldview informs my use of constructivist theories throughout this research. I grounded this approach in the belief that "the 'subjects' being studied must at a minimum be considered knowing beings, and that this knowledge they possess has important consequences

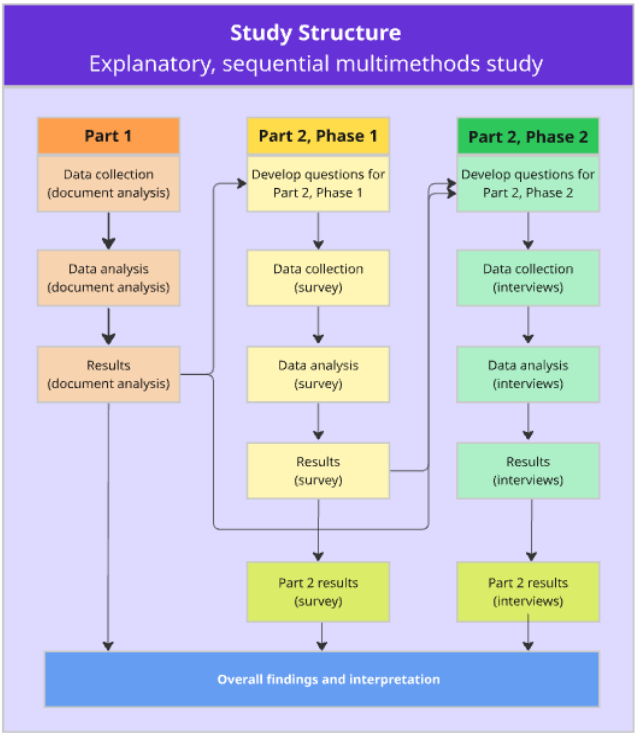
for how the [complex] behaviour or actions are interpreted" (Magoon, 1977, pp. 651–652). Pragmatism and constructivism complement each other in a study of this nature, as each supports the other in producing research that is "both descriptive and prescriptive, one that can offer some concrete guidance and recommendations for educators" (Gordon, 2009, p. 50). From a constructivist perspective, theory and practice interrelate (Gordon, 2009), and by applying a pragmatic lens, which draws on a variety of approaches to generate knowledge, I adopt a comprehensive strategy for conducting this study. Because my research concludes with recommendations to improve the QA review requirements for Ontario SoN, based on the lived experiences of relevant interest holders, both my conceptual framework and chosen epistemology align with and support my research methodology.

Study Design: Explanatory, Sequential Two-Part Multimethod Study

I used an explanatory, sequential, two-part multimethod research design for this study. Part 1 involved a document review, while Part 2 employed a two-phase, sequential design. Figure 4 provides a visual diagram of this research design.

Figure 4

Visual Representation of Research Design



Part 1: Document Analysis

In Part 1 of my study, I analyzed each QA body's criteria and procedures used to assess the quality of a SoN's administrative and curricular offerings. Documents serve as valuable resources for researchers because authors create them within socially organized contexts and reflect the perspectives of creators and users (Prior, 2003). According to Bowen (2009), document analysis:

1. Provides context for a study,
2. Identifies questions that researchers need to address,
3. Serves as a source of data, and
4. Helps researchers understand changes over time.

I used document analysis in this dissertation to achieve the first three purposes listed above. As such, this section answers the following research question and sub-questions:

1. What QA reviews do SoN in Ontario undergo?
    a. What criteria, procedures, and general considerations do these QA reviews include?
    b) What elements of criteria, procedures, and general considerations are similar between the bodies?

Within the explanatory MMR structure of my study, the data collected in response to these research questions informed how I approached the data collection in Part 2 of the study.

Sample. I answered my research questions for Part 1 by reviewing each QA body's criteria and procedures to assess the quality of a SoN's administrative and curricular offerings. OUCQA's Quality Assurance Framework (2022), PEQAB's Manual for Ontario Colleges Four Year Degrees (PEQAB, 2022), and CNO's Nursing Education: Program Approval Policy (2022) and Nursing Education: Program Approval Guide (2019) provided data on the processes and criteria for the mandatory approval reviews. CASN's Accreditation Standards and Framework (2020) provided data on the requirements for voluntary accreditation reviews. These five documents, representing the four QA bodies that work with Ontario SoN, made up the data set for this part of my study.

Instrument Development. I systematically organized the data to conduct the document review, following Bowen's (2009) methodology . Using my experiential knowledge and the literature reviewed as part of this study, I developed a data extraction sheet based on the common elements of a QA review. I created two categories: criteria and procedures (de Paor, 2016; Vlăsceanu et al., 2007), which I used to identify the elements each organization employs in their QA reviews. I created a third category ("open") for variables that did not fit within the criteria/procedure categories but could impact the workload for administrators, faculty members, and administrative support staff. This instrument allowed me to (a) identify and (b) cross-reference the types of criteria and procedures each organization uses in their QA reviews. The data extraction sheet (see Appendix A) enabled me to answer the research questions in Part 1.

Data Collection Procedures. I reviewed each document and created a unique entry in the data extraction sheet for each element related to a criterion or procedure. The scope for inclusion included aspects of a regular, cyclical review of BScN programs in an Ontario SoN. As such, I excluded any mechanisms (e.g., the composition of the decision-making body, appeals, etc.) that do not impact the resources of an SoN, elements directly related to new programs (based on the assumption that these programs are not at the same stage of development as established programs), elements directly related to graduate programs (as the BScN is the entry-to-practice degree in Ontario), and elements related to significant changes to programs (based on the assumption that these programs are not at the same stage of development as established programs).

Data Analysis Procedures. I used conventional content analysis (Berg, 2008) to inductively code the data and produce categories describing the criteria and procedures for QA reviews of Ontario SoN use. I undertook this coding by hand. I aimed to identify categories across all three bodies. To achieve this, I followed these steps:

1. I reviewed the contents of the data extraction sheet several times to understand each organization's criteria and procedures.
2. I iteratively coded the data based on common words and ideas in each line item.
3. I linked the codes to develop categories that allowed me to answer the research questions for Part 1 of this study.

I used a frequency count to identify commonalities among the criteria, procedures, and open findings.

Trustworthiness and Validation. In analysing my coding, I employed content analysis, which, as described by Krippendorff (2019) is a

> research technique for making replicable and valid inferences from texts (or other meaning matter) to the contexts of their use. It involves carefully examining the content to understand patterns, themes, and meanings, and then drawing conclusions about the context in which the content was created or used (p. 88).

In Krippendorff's (2019) model, content analysis includes several components:

- Unitizing: establish what the scope of the research will be.
- Sampling: establish the scope of the documentation to be analysed.
- Recording/coding: develop syntax and semantics of data language to help organize data to create records in text suitable for further analysis.
- Reducing data to manageable representations: build on the sampling and recording/coding stages to illustrate data, and to identify constants and distinguish between variables within the data.
- Inferring contextual phenomena: use the coded data to identify themes and make inferences.
- Narrating the answer to the research question: use of the data and analysis to respond to a project's research questions.

This approach allowed me to develop my codes and the final mapping of criteria and procedures.

Part 2: Surveys and Interviews

Part 2 of the study consisted of data collected sequentially from administrators, faculty, and support staff at Ontario SoN. In Part 2, Phase 1, I collected and analyzed survey data to gauge interest holders' understanding of Ontario SoN's current QA requirements, as well as the advantages and disadvantages of the system, and suggested improvements. I then used elements of the survey findings to inform Part 2, Phase 2 of my study, which is discussed below. In this phase, I conducted interviews to explore interest holders' perceptions of the QA system's benefits, challenges, risks, and opportunities. I used a triangulation strategy of using different

methods to collect data on a single phenomena to contextualize the findings from both phases (Polit & Beck, 2012). This approach allowed me to develop a comprehensive understanding of my findings (Patton, 1999) and to confirm validity through comparison (Carter, et al., 2014). This formed the basis of the discussion chapter in this dissertation (Creswell & Plano Clark, 2012; Doyle et al., 2009).

Part 2, Phase 1: Methodology. In Part 2, Phase 1 of my study, I surveyed administrators, faculty, and support staff to develop an understanding of the QA requirements for Ontario SoN. Surveys allow researchers to generate knowledge from a sample of the study's subjects and to create "a composite profile of the population" under consideration (Scheuren, 2004). This Phase of my study allowed me to address the following research questions:

2. How aware are administrators, faculty members, and support staff of the QA requirements their schools face?
3. How involved are administrators, faculty members, and support staff in their schools' QA requirements?
4. What advantages and disadvantages do administrators, faculty members, and support staff identify regarding their schools' QA requirements?

Part 2, Phase 1: Sample. I used a purposeful sampling strategy to identify participants knowledgeable about, and experienced with, the issues I am exploring and who were likely to be willing to participate (Palinkas et al., 2015). This strategy and the inclusion criteria I set (discussed below) ensured participants had the experience and knowledge to contribute to my research on the QA expectations in Ontario SoN.

I created an email distribution list of administrators, faculty, and support staff at Ontario SoN (university and college levels) working at institutions with public faculty and staff directories. I used the CASN member schools list from their public website to identify all university and college SoN in the province (n=35). I found that 29 HEIs had faculty and staff directories identifying SoN personnel. I identified 1,142 potential survey recipients, three-quarters of faculty and one-quarter of support staff through this method. I sent 1,142 unique emails and received 206 notifications that emails were either undeliverable or that recipients

were "out of office" for an extended period, leaving 936 eligible individuals who could participate in Part 2, Phase 1.

Part 2, Phase 1: Instrument Development. I developed the survey for this part of my study (Appendix B) based on my experiences with QA reviews in SoN, the literature review described above, the findings of Part 1, and Dillman's (2011) Tailored Design Method. Table 4 summarizes the research questions for Phase 1 and the corresponding survey dimensions and questions.

Table 4

Table of Relationship Between Research Questions and Research Tools for Part 2, Phase 1

Research Question	Dimension	Corresponding data collection action
2. To what extent are administrators, faculty members, and support staff aware of the QA requirements that their school are subject to?	• QA in HE • Implementation of QA in HE	• Questions 2 & 4 • Question 4
3. What is the involvement level of administrators, faculty members, and support staff in the QA requirements of their schools?	• QA in HE • QA culture in HE	• Question 3 • Question 4
4. What do administrators, faculty members, and support staff identify as the advantages and disadvantages of the QA requirements of their schools?	• QA in HE • Resistance of change for QA in HE	• Questions 5, 6 & 8 • Questions 5-8

The survey included eight questions, comprising a demographic question to determine which interest holder group the respondent belonged to and questions on future participation in my study. I included three closed-ended questions and five open-ended questions. Following Dillman's (2011) recommendations, I provided "none of the above"/"I don't know" options on closed-ended questions to minimize missing responses. I designed Questions 1 and 2 to confirm respondents' eligibility to participate in my study by verifying their membership in the identified

interest holder groups (i.e., administration, faculty, or support staff) and their participation in at least one QA review at their SoN in the past (either provincial, regulatory, or accreditation). I made the survey available in English and French, hosting it on SurveyMonkey, the University of Ottawa's preferred surveying tool. I piloted the survey with five colleagues who work in the accreditation of professional university/college programs, including one former Accreditation Officer for CASN.

Part 2, Phase 1: Data Collection Procedures. Using the distribution list described in the sample section above, I emailed the identified individuals an introductory letter (Appendix C) and the electronic survey link. The survey included general information about my project, how the survey fit within the broader context of my study, and details about my study's research ethics board (REB) approval. I sent reminder emails (Appendix D) approximately two and four weeks after the initial contact. I followed a modified Dillman (2011) method for my approach, as illustrated by Table 5.

Table 5

Survey Distribution Approach

Email	Contact time point	Procedure
Invitation to participate (Appendix C)	Day 1	Email the information letter and survey link to the distribution list described in the sample section above
Reminder email (Appendix D)	Day 14	
Reminder email (Appendix D)	Day 28	

Note. Adapted and modified from Mail and Internet Surveys: The Tailored Design Method (2nd ed.), by D. A. Dillman, 2011, p. 363. Copyright 2011 by John Wiley & Sons.

Survey respondents who indicated their SoN was not involved in any QA processes received a message thanking them for their time, informing them that their ongoing participation was outside the scope of the study. Since all SoN are required to undergo at least the OUCQA/PEQAB and CNO reviews, respondents unaware of these activities did not possess the requisite knowledge to participate in my study.

Part 2, Phase 1: Data Analysis Procedures. I assigned each survey respondent a unique, three-part alpha-numeric identifier to track responses across my analysis; the first letter of the identifier indicated if they were administration, faculty, or support staff (A, F, and S, respectively); the second letter of the identifier indicated that the data came from the survey ("S"); and the number is unique to each participant. I calculated descriptive statistics (i.e., frequencies and percentages) by hand. For open-ended data, I conducted a content analysis (Krippendorff, 2019). As described above, I began by reviewing all responses and identifying trends in the data. I then conducted a second review to develop overarching codes that could apply to all responses. In Chapter 5, I present the codes and their frequencies (Berg, 2008).

Part 2, Phase 2: Interviews. In Part 2, Phase 2 of my study, I interviewed administrators, faculty, and support staff to develop an understanding of the impact of the QA requirements for Ontario SoN on those working within the system. Interviews provide researchers with insight into the lived experiences of those impacted by the phenomena being studied (Kvale, 2012). This Phase of my study allowed me to address the following research questions:

5. What are the perceived benefits of the current QA reviews for Ontario SoN for administrators, faculty, and support staff?
6. What are the perceived barriers of the current QA reviews for Ontario SoN for administrators, faculty, and support staff?
7. What risks do administrators, faculty, and support staff see in the current QA reviews for Ontario SoN?
8. What areas of possible reform do administrators, faculty, and support staff see in the current QA reviews for Ontario SoN?

Part 2, Phase 2: Sample. In the first phase of this Part of my study, I asked survey participants to volunteer for individual follow-up interviews. I interviewed seven administrators (with positions ranging from program coordinator to dean) and 12 faculty members (from various career stages, ranging from new to retired faculty). No members of SoN support staff volunteered to be interviewed during Part 2, Phase 1. All interviews were conducted in English, based on the preference of participants. Subjects came from across Ontario and from a mix of universities and colleges. I emailed these individuals the invitation in Appendix E and included Appendix F as information.

Part 2, Phase 2: Instrument Development. I developed a semi-structured interview guide (Appendix G) for this part of my study based on my own experiences with QA reviews in SoN, the literature review described above, the results of Parts 2, Phase 1, and various best practices on interviewing for academic research (Dillman, 2011; Schaeffer and Presser, 2003; Stewart et al., 2007). Table 6 presents a summary of the research questions for Phase 1 and the associated survey dimensions and questions.

Table 6

Table of Relationship Between Research Questions and Research Tools for Part 2, Phase 2

Research Question	Dimension	Corresponding data collection action
5. What are the perceived benefits of the current QA reviews for Ontario SoN for administrators, faculty and support staff?	• QA in HE • QA culture in HE	• Question 2
6. What are the perceived barriers of the current QA reviews for Ontario SoN for administrators, faculty and support staff?	• QA in HE • QA culture in HE	• Question 3
7. What risks do administrators, faculty and support staff see in the current QA reviews for Ontario SoN?	• QA in HE • QA culture in HE	• Question 4
8. What areas of possible reform do administrators, faculty and support staff see in the current QA reviews for Ontario SoN?	• QA in HE • Resistance of change for QA in HE	• Question 5

Part 2, Phase 2: Data Collection Procedures. I asked participants to sign an informed consent form (Appendix H). I aimed to collect thick descriptions of the perceptions of interest holders of the QA system to illustrate the findings in the early parts and stages of the study. Because my research encompasses all of Ontario, I conducted interviews virtually, using the

University of Ottawa's Zoom or Microsoft Teams platform, depending on the participant's preference. I recorded each session to facilitate verbatim transcription.

Part 2, Phase 2: Data Analysis Procedures. I assigned each interview participant a unique, three-part alpha-numeric identifier to track responses across my analysis; the first letter of the identifier indicated if they were administration or faculty (A and F, respectively); the second letter of the identifier indicated that the data came from the interview ("I"); and the number is unique to each participant. I used the work of Miles et al. (2013) to guide my data analysis. I followed this process for my data analysis:

1. I reviewed the recordings and transcripts of each interview, in conjunction with the literature review and environmental scan from Part 1, to create a list of general deductive themes. I developed these themes iteratively as I reviewed the transcripts.
2. I carefully reviewed each transcript to develop a list of provisional, in vivo codes, using the literature review and mapping from Part 1; this step built on the themes identified in Step 1.
3. I undertook a memoing exercise to identify patterns in step 2.
4. I undertook a second review of the transcripts in light of the provisional codes. I assigned values-based subcodes that respond to my research questions related to interest holders' perceptions of current QA requirements.
5. I compiled themes, codes, memos, and select quotations into a data matrix to facilitate the analysis of findings (Miles et al., 2013).

Using a values coding system allowed me to identify participants' values, attitudes, and beliefs around the issues covered in my research questions. This type of coding respects study participants' worldviews (Miles et al., 2013).

Integration and Analysis of Parts/Phases

Using an MMR approach alongside a pragmatic ontology, I addressed my research question by collecting data and analyzing it through a constructivist lens. Approaching this phenomenon through the individual experiences of interest holders in Ontario SoN allows me to develop an understanding of the impact that the current QA requirements have. Part 1 provides a

factual basis on which the perceptions of individuals expressed in Part 2 can be grounded; this is an amalgamation of the theoretical and practical aspects of interest holders' experiences and perceptions, both of which are elements of constructivism. This approach produced results grounded in the lived experiences of individuals involved in QA activities within Ontario SoN.

I used a variety of data collection and analysis methods to triangulate my findings (Hall & Preissle, 2015), as discussed above. The data I gathered during the document analysis in Part 1 was validated by the data from the surveys conducted in Part 2, Phase 1. Likewise, the survey responses from Part 2, Phase 1 were further validated by the interview data collected in Part 2, Phase 2 as results from all three stages provided consistent results, as discussed in subsequent chapters. Finally, the findings collected in Part 2 on the perceptions and experiences of interest holders validated the findings of Part 1. These methods gave me a thorough understanding of the key elements of my study (Schwandt & Lichty, 2015).

Finally, the MMR approach I adopted provided rich contextual insight by enabling macro- and micro-level views of the research problem (Hunter & Brewer, 2015a). The document analysis offered insight into the overarching policies and procedures that apply to all interest holders in Ontario SoN. The interviews revealed individual experiences, while the survey bridged both contexts by capturing broad and personal perspectives. Figure 4 (above) visually represents these interdependencies within my research design.

Ethical Considerations

I obtained approval for this study from the University of Ottawa's Social Sciences and Humanities Research Ethics Board. I communicated the purpose of the research to SoN administrators, faculty, and support staff. I ensured all participants understood the confidentiality, anonymity, and their right to withdraw from the study at any time.

Summary

In this chapter, I provide an overview of the research design, methodology, and ethical considerations that guided my study. I discuss the context in which I conducted the research and reflect on my positionality as a researcher. I outline the explanatory two-part research design, which included a document review and a two-phase, sequential multimethod design. The following three chapters describe the associated findings.

Chapter 4: Part 1

This chapter describes the findings of Part 1 of my study. In Part 1, I reviewed the criteria and procedures that each QA body uses to assess the quality of a SoN's administrative and curricular offerings. This section answers the following research questions and sub-questions:

1. What QA reviews do SoN in Ontario undergo?
    a. What criteria, procedures, and general considerations do these QA reviews include?
    b. What elements of criteria, procedures, and general considerations are similar between the bodies?

Identifying these common elements provides foundational knowledge to inform the findings and analysis of subsequent phases of my study. Specifically, it helps identify the cause(s) of the perceptions, impacts, benefits, barriers, and risks of the current QA reviews for Ontario SoN, with the goal of pinpointing areas for reform.

Research Question 1: What QA Reviews do SoN in Ontario Undergo?

Ontario SoN undergo three QA reviews:

Provincial, Colleges (Mandatory)

The Post-secondary Education Choice and Excellence Act, 2000 (S.O. 2000, c. 8) established the PEQAB with the mandate to "establish review panels to assess the educational quality of proposed degree programs in Ontario". The Board is tasked with making recommendations to the provincial ministry to approve degree programs offered by Ontario colleges (PEQAB, 2022).

Provincial, Universities (Mandatory)

Building on quality assurance activities from the 1960s, the Council of Ontario Universities established the OUCQA in 2010 to ensure the implementation of the Quality Assurance Framework (OUCQA, 2023).

Regulatory (Mandatory)

The Nursing Act, 1991, authorizes CNO to approve all nursing education programs in the province. In 2014, CNO's governing body approved the Program Approval Framework to standardize the program approval process for all categories and classes of nurses (CNO, 2022).

Accreditation (Voluntary)

CASN represents Canadian SoN and has offered accreditation to its members since 1987 (CASN, 2023).

Research Question 1.a: What is Included in these QA Reviews?

My analysis identifies elements of the criteria, procedures, and other components included in the QA reviews. Criteria elements specify the requirements for program curriculum and delivery to succeed in a review. Procedure elements describe how QA reviews are organized and executed. Other elements address the underlying philosophies and mandates of the QA bodies.

Elements related to the criteria for the mandatory provincial reviews (PEQAB and OUCQA) include the existence of policies pertaining to accommodations, administration/governance, admissions, clinical placements, communications, government regulations, partnerships, program evaluation, and support services/resources for students. Moreover, the provincial criteria elements address the culture and environment in which the program is delivered, the quality of the faculty, the pedagogical practices of the faculty, and program learning outcomes.

Elements related to the criteria for the mandatory regulatory review (CNO) include the existence of policies pertaining to administration/governance, clinical placements, EDI/ethics, involvement of interest holders, licensing, partnerships, and program evaluation. In addition, the regulatory criteria elements address accountability, student attainment of the practice competencies, the structure of the curriculum, the quality of the faculty (both theoretical and clinical), program learning outcomes, and public safety.

Elements related to the criteria for the voluntary accreditation review (CASN) are split into two categories: administrative units and programs. The criteria related to the administrative units include the existence of policies pertaining to leadership, governance and administration, resources and the program environment, and teaching, learning, and scholarship. The accreditation criteria elements related to the programs address the program's framework and curriculum, program outcomes, and program quality improvement. Specifically, CASN criteria examine policies on admissions, clinical placements, communications, EDI/ethics, involvement of interest holders, licensing, partnerships, program evaluation, support services/resources for

students, accountability, attainment of the practice competencies, the contextual relevance of the program, the need for continuous improvement within programs, the culture and environment in which the program is delivered, the program's curriculum, the quality of the faculty (both theoretical and clinical), the value of lifelong learning, post-graduation employment, program learning outcomes, and considerations for public safety.

Elements related to procedures for the mandatory provincial reviews (PEQAB and OUCQA) include policies for adjudication practices, expectations for continuous improvement, defined cycle length, reporting and visit requirements, the need for peer-review, and the value of transparency. Elements related to procedures for the mandatory regulatory review (CNO) are similar to the mandatory provincial reviews, and also include consideration for training of interest holders within the QA system. Finally, the elements related to procedures for the voluntary accreditation review (CASN) are similar to the mandatory provincial reviews, and also include considerations for the contextual realities of the SoN and its programming.

General elements related to the mandatory provincial reviews (PEQAB and OUCQA) include statements on the bodies' authority, mandate, and mission; they touch on the audit-nature of the process, the need for consistency, the focus on the student in the system, the affirmation of HEI autonomy, the philosophies of being outcomes-based, non-burdensome, non-prescriptive, and sustainable, and the role of transparency in the system. General elements related to the mandatory regulatory review (CNO) include statements on the organization's authority, mandate, and objective, and speak to its philosophies of being evidence-based, outcomes-based, sustainable, and transparent. Finally, general elements related to the voluntary accreditation review (CASN) speak to its philosophies of confidentiality, fairness, integrity, respect, and transparency, all in support of quality assurance of both the SoN's administrative unit and program.

Research Question 1.b: What Elements are Similar Between the Bodies?

I found multiple similarities between the QA bodies. Table 7 maps the criteria examined by each QA body, highlighting commonalities. Similar elements include policies on administration/governance, clinical placement, partnerships, and program evaluation. All QA bodies share common criteria regarding the culture/environment in which a program is delivered,

Table 7

Mapping of Criteria, by Category, for Each QA Body

	OUCQA/ PEQAB	CNO	CASN
Accommodations	x		x
Accountability		x	x
Administration/Governance	x	x	x
Admissions	x		x
Clinical	x	x	x
Clinical faculty		x	x
Communication	x		x
Competencies		x	x
Contextual			x
Continuous improvement	x		x
Culture/environment	x	x	x
Curriculum		x	x
EDI/Ethics	x	x	x
Faculty	x	x	x
Government regulations	x		
Interest holders		x	x
Licencing		x	x
Life-long learning			x
Partnerships	x	x	x
Pedagogy	x		x
Post-grad employment	x		x
Program evaluation	x	x	x
Program learning outcomes	x	x	x
Public safety		x	x
Support services/resources	x		x

	OUCQA/ PEQAB	CNO	CASN
Total	16	15	24

Note: Appendix I includes definitions for how these terms are used in this study.

the quality of the faculty, and program learning outcomes. Other criteria elements appear in one or two QA bodies but not across all three review types.

Table 8 provides a mapping of the procedures of each QA body to demonstrate where commonalities exist. Areas of similarity include the existence of policies concerning review cycle length and reporting requirements, the underpinning use of peer review, and transparency. The other procedure elements are present in one or two of the QA bodies, but not across all three review types.

Table 8

Mapping of Procedures, by Category, for each QA Body

	OUCQA/ PEQAB	CNO	CASN
Adjudication	x	x	
Annual report		x	
Contextual			x
Continuous improvement	x		x
Cycle length	x	x	
Final report	x	x	
Follow-up report	x		
Informal review	x		
Peer review	x	x	x
Response to audit report	x		
Self-study	x	x	x
Training		x	

	OUCQA/ PEQAB	CNO	CASN
Transparency	x	x	x
Visit	x		x
Total	11	8	6

Note: Appendix I includes definitions for how these terms are used in this study.

Table 9 provides a mapping of each QA body's general elements to demonstrate where commonalities exist. The single area of commonality is that the processes are built on transparency. The other procedure elements are present in one or two of the QA bodies, but not across all three review types.

Table 9

Mapping of the General Category for each QA Body

	OUCQA/ PEQAB	CNO	CASN
Audit	x		
Authority	x	x	
Confidentiality			x
Consistency	x		
Evidence based		x	
Fairness			x
Focus on students	x		
HEI autonomy	x		
Integrity			x
Mandate	x	x	
Mission	x		
Non-burdensome	x		
Non-prescriptive	x		
Objective		x	
Outcomes based	x	x	

	OUCQA/ PEQAB	CNO	CASN
QA body autonomy	x		
Quality assurance	x		x
Respect			x
Sustainable	x	x	
Transparency	x	x	x
Unit review			x
Total	14	7	7

Note: Appendix I includes definitions for how these terms are used in this study.

Summary for Part 1

Ontario SoN undergo QA reviews by three distinct bodies: a provincial oversight body (one each for universities and colleges), the nursing regulatory body, and the accrediting body. The provincial and regulatory QA processes are mandatory, while the accreditation process is voluntary. Reviewing the criteria, procedures, and other elements among the QA bodies reveals a high level of similarity in the requirements across all three processes.

Chapter 5: Part 2, Phase 1

This chapter presents the results of Part 2, Phase 1 of my study. I collected data from interest holders in Ontario SoN to determine their perceptions of the current QA requirements. In this phase, I surveyed administrators, faculty, and support staff to address the following research questions:

2. How aware are administrators, faculty members, and support staff of the QA requirements their schools face?
3. How involved are administrators, faculty members, and support staff in their schools' QA requirements?
4. What advantages and disadvantages do administrators, faculty members, and support staff identify regarding their schools' QA requirements?

The terms "awareness," "involvement," and "perceptions" used in the research questions gauge the knowledge and beliefs that interest holders have developed as a result of their participation in QA reviews. Understanding these elements will inform the larger context and aim of this study, specifically the impact of the QA activities and the identification of areas for reform in QA reviews for Ontario SoN.

Characteristics of Respondents

A total of 189 out of 936 identified individuals completed the survey, resulting in a response rate of 20%. All respondents answered the first qualifying demographic question. Among them, 10.6% (n = 20) identified as administrators within an Ontario SoN (such as dean, head, associate dean, or director), 68.3% (n = 129) identified as faculty (full-time, part-time, sessional, or emeritus), 18.3% (n = 35) identified as support staff, and 2.7% (n = 5) identified as none of the above. I thanked the last group of participants for their time and informed them that their ongoing participation was outside the study's scope.

Research Question 2: How Aware are Administrators, Faculty Members, and Support Staff of the QA Requirements their Schools Face?

Table 10 below summarizes the extent to which administrators, faculty members, and support staff are aware of the QA requirements that their schools are subject to. Of the 14 participants who identified as administrators and responded to this question, 13 (92.9%) reported being very involved, while 1 (7.1%) indicated being involved only a little in their schools' QA

Table 10

Survey Respondents' Awareness of QA Reviews at their SoN (n = 158)

Review Type	n	%
Accreditation for the Canadian Association of Schools of Nursing (CASN)	136	86.1
Regulatory approval for the College of Nurses of Ontario (CNO)	126	79.8
Internal Quality Assurance Process (IQAP) for the Ontario Universities Council on Quality Assurance (OUCQA)	62	39.2
Postsecondary Education Quality Assessment Board (PEQAB) for Ontario colleges	21	13.3
None of the above	8	5.1

requirements.

Of the 78 participants who identified as faculty, 24 (30.7%) reported being very involved; 20 (25.6%) reported being involved; 6 (7.7%) reported being somewhat involved; 14 (18.0%) reported being involved a little; 13 (16.7%) reported not being involved at all; and 1 (1.2%) was unsure about their involvement. Of the 11 participants who identified as support staff, 1 (9.1%) reported being very involved; 1 (9.1%) reported being involved; 2 (18.2%) reported being somewhat involved; 3 (27.3%) reported being involved a little; 3 (27.3%) reported not being involved at all; and 1 (9.1%) was unsure about their involvement. Eighty-six participants (45.5%) did not answer this question.

Research Question 3: How Involved are Administrators, Faculty Members, and Support Staff in their Schools' QA Requirements?

Table 11 summarizes the areas of involvement of participants in the QA process (see Table 12 for other, less frequent responses):

Table 11

Survey Respondents' Involvement in QA Reviews at their SoN (N = 86)

QA Tasks	n (%)				
	N	Missing	OUCQA or PEQAB	CNO	CASN
Discussions with the quality assurance organization	62	24	15 (24.2)	52 (83.9)	53 (85.5)
Planning for self-study report-writing	61	25	28 (45.9)	53 (86.9)	49 (80.3)
Planning for on-site visit	54	32	13 (24.1)	29 (53.7)	50 (92.6)
Coordination of on-site visit	32	54	10 (31.3)	16 (50.0)	29 (90.6)
Data collection for self-study report	62	24	25 (40.3)	55 (88.7)	50 (80.7)
Data analysis for self-study report	38	48	16 (42.1)	34 (89.5)	31 (81.6)
Self-study report writing	47	39	17 (36.2)	38 (80.6)	41 (87.2)
Meeting with external reviewers	64	22	21 (32.8)	37 (57.8)	59 (92.3)
Data collection for response report	52	34	17 (32.7)	40 (76.9)	43 (82.7)
Data analysis for response report	36	50	14 (38.9)	30 (83.3)	30 (83.3)
Response report writing	37	49	11 (29.7)	31 (83.8)	31 (83.8)
Attending quality assurance decision-making meeting	53	33	18 (34.0)	46 (86.9)	48 (90.6)
Planning for follow-up action(s)	56	30	22 (39.3)	45 (80.4)	47 (83.9)
Implementing follow-up actions(s)	52	34	21 (40.4)	42 (80.8)	43 (82.7)

Note. QA activities are presented above in the order they typical unfold.

Table 12

Survey Respondents' Description of "Other" Areas of Involvement in Activities Related to QA Reviews at their SoN (N = 86)

QA Tasks	Missing	n	%
Participation in an internal QA committee	85	1	1.2
Mapping of curriculum to CNO competencies	85	1	1.2
Updating faculty on QA activities (including changes to competencies and standards, and sharing findings from external reviewers)	85	1	1.2
Preparing interest holders to receive external reviewers	84	2	2.4
Preparing document submission to external reviewers	85	1	1.2

Research Question 4: What do Administrators, Faculty Members, and Support Staff Identify as the Advantages and Disadvantages of the QA Requirements of their Schools?

Tables 13 and 14 summarize the themes that participants identified as the advantages and disadvantages of the QA requirements for their SoN. The survey included an "other" field, allowing respondents to identify areas of involvement with QA reviews not covered in the initial question. Common responses highlighted flaws in the processes (either internal to the SoN or with the QA body) (n=6, 14%), the need for additional supports from QA bodies (n=4, 9.3%), the overall benefits of the current QA processes (n=3, 7%), the need for an integrated approach (n=3, 7%), and the performative nature of the current QA processes (n=3, 7%).

Table 13

Advantages of the QA Requirements for SoN as Identified by Survey Respondents (N = 86)

	n	%
Continual improvement	32	37.2
Total "Benefits the curriculum" code	23	26.7
Regulator considerations	8	9.3
General improvement	8	9.3
Nursing discipline	7	8.1
Comprehensive view	22	25.6
Peer-review/validation	6	7.0
Accountability	4	4.7
Consistency	4	4.7
Prestige	4	4.7
Resource	4	4.7
Capacity building	3	3.5
High standards	2	2.3
No benefit	2	2.3
Patient safety	1	1.2
Planning	1	1.2

Note: Appendix J includes definitions for how these terms are used in this study.

Note: The n and percentage columns sum are greater than N/100 because participants provided responses that touched on multiple themes resulting in multiple codes being applied.

Table 14

Disadvantages of the QA Requirements for SoN as Identified by Survey Respondents (N = 86)

	n	%
Time consuming	47	55.2
Total "Flawed process" code	43	50.0
Draw on faculty time	21	24.4
Follow-up activities	13	15.1
Overlap	13	15.1
Resource consuming	12	14.0
Excessive costs	11	12.8
Draw on energy	9	10.5
Limited internal involvement	8	9.3
Not complimentary of each other	8	9.3
Redundant	7	8.1
QA body processes	6	7.0
QA requirements	6	7.0
Creates capacity constraints	5	5.8
Total "Irrelevant" code	5	5.8
Internal processes	4	4.7
Pedagogical	4	4.7
Bureaucratization	3	3.5
Excessive workload	3	3.5
Length	3	3.5
Limits innovation	3	3.5
Limits uniqueness	3	3.5
Performative	3	3.5
Repetitive	3	3.5
Limits academic freedom	2	2.3

	n	%
Frequency	1	1.2
Intrusive	1	1.2
Not collaborative	1	1.2
Not meaningful	1	1.2
Scope	1	1.2
None	2	2.3
Unsure	2	2.3

Note: Appendix J includes definitions for how these terms are used in this study.

Note: The n and percentage columns sum are greater than N/100 because participants provided responses that touched on multiple themes resulting in multiple codes being applied.

Summary for Part 2, Phase 1

One hundred and eighty-nine administrators, faculty, and support staff participated in Part 2, Phase 1 of my study. Their responses suggest that the current QA requirements for their SoN have advantages and disadvantages. Respondents identified general continual improvements, benefits to the curriculum, and the ability to develop a comprehensive view of their SoN/programs as the primary advantages of the current QA process in Ontario. They identified the time-consuming nature, flawed processes, and the draws on human and financial resources as the primary disadvantages of the current QA process.

Chapter 6: Part 2, Phase 2

This chapter describes the methods and findings of Part 2, Phase 2 of my study. In Part 2, Phase 1, I collected data from interest holders in Ontario SoN to explore individual perceptions about the benefits, barriers, and risks of the current QA system for Ontario SoN. In Phase 2, I interviewed administrators and faculty to answer the following research questions:

5. What are the perceived benefits of the current QA reviews for Ontario SoN for administrators, faculty, and support staff?
6. What are the perceived barriers of the current QA reviews for Ontario SoN for administrators, faculty, and support staff?
7. What risks do administrators, faculty, and support staff see in the current QA reviews for Ontario SoN?
8. What areas of possible reform do administrators, faculty, and support staff see in the current QA reviews for Ontario SoN?

The terms "benefits," "barriers," "risks," and "reform" used in the research questions gauge the perceptions that interest holders have about the current QA review requirements. Understanding these elements will inform the larger context of this study, specifically the impact of resistance to QA activities and the identification of areas for reform in QA reviews for Ontario SoN.

Characteristics of Respondents

A total of 19 individuals agreed to be interviewed for Part 2, Phase 2 of my study. I started each interview by asking, "Can you tell me a bit about yourself?" to build rapport with the interview subject. All subjects provided background on their professional history and current/recent job at a SoN. Seven individuals identified themselves as administrators (e.g., a program coordinator, dean, etc.), and 12 were faculty members (e.g., assistant, full, emeritus, retired, etc.). Two aspects of the faculty who participated should be noted. First, some current faculty members have held administrative roles in the past and vice versa. Second, emeritus/retired faculty were included because the structure of QA reviews is generally consistent over time and between QA bodies (as discussed in the literature review and the results of Part 1 of my study above), and participants were identified via the HEI websites, indicating that they are still actively involved in some capacity with the SoN.

Research Question 5: What are the perceived benefits of the current QA reviews for Ontario SoN for administrators, faculty and support staff?

In the following section, I describe the interest holders' perceived benefits of the current QA reviews for Ontario SoN administrators and faculty. Interviewees noted that the current QA reviews ensure quality, provide external validation of a SoN and its program, lead to program improvements, and bring various perspectives to a SoN and its programs.

Ensures Quality

Study participants noted that the current QA reviews ensure quality in Ontario SoN, particularly for program offerings. Faculty members noted that the QA reviews set a minimum standard of quality because "there has to be some way that we're being kept in check to make sure that what we're doing or what we're saying, to meet these competencies is actually happening" (FI10). In addition, the system identifies gaps in curriculum (FI7) which "really helps with keeping your curriculum updated, and to make sure that it's meeting all the requirements that it needs to meet" (FI11), which leads to a quality program. Finally, the current system requires SoN to engage in continuous improvement cycles because programs are always aware that "quality assurance is coming up, that you've been evaluating all along" (FI11); this mechanism is intended to ensure the on-going quality of a program. The sentiment is captured by a faculty member who said:

> I think the benefits are that it is forcing us to keep up to date to ensure that we're actually teaching some of the current things that are actually you know, being dealt with in our in our society and culture and the end nurses as well (FI10).

The benefits of the provincial QA reviews by either OUCQA or PEQAB include ensuring that Nursing programs and faculty are aligned with larger institutional goals and strategy as provincial reviews are "more obviously aligned with our university philosophy, values goals and then those undergraduate degree level expectations. So I think they help us look at our teaching approaches [and] resources structures" (FI7). A benefit to CNO's process is helping programs "make sure we're meeting all those entry to practice competencies" and having "a much greater focus on safety that way and making you know, students safe, preceptor safety, all that sort of stuff" (FI7). Finally, CASN is described as "elevating" nursing education by ensuring a balance between scholarship, teaching/learning, and leadership (FI6). CASN benefits programs by

encouraging continual improvement through identifying areas where changes to programing are critical (FI7).

External Validation

The QA processes provide the SoN with an external validation of their programs. The importance of engaging in the system for the reputation of the SoN and program was raised, particularly in relation to attracting students:

> Reputation wise, of course, if you don't see yourself reflected in the best of intention or the best of ability, then that certainly does impact reputation, because that then also impacts potential recruitment and retention of both faculty as well as students and the public. (AI1)

> … part of that is around the international market for students, which we know is the primary driver of Ontario's post secondary system at this point. So having an accredited programme is huge if you want to even consider having international students. (AI2)

> … students, parents, administrators all want to see that a school is accredited or programme approved or go through that quality assurance programme benchmark measure. So to see that it has been given the stamp of approval from governing bodies that it is meeting the standard. And a lot of students look for that, I think if they're looking to go on to medical school or grad school, or make a big switch and go into law or something like that, that they have to be graduating from an accredited institution. (FI2)

While external validation by OUCQA/PEQAB and CNO is required, the voluntary nature of CASN accreditation makes participation in one of these reviews a different value proposition for SoN. The value of external validation by CASN is such that not all HEIs view accreditation as a voluntary process (though formally it is), but rather as a critical reputational marker for attracting students (AI2).

More broadly, the value of external validation is also tied to pride in the profession: “Celebrating this achievement and being part of a broader conversation in ensuring quality and safety and outcome competencies, I think is of significance to the profession as a self-regulatory

profession as well" (AI1). The current QA requirements provide SoN with a "robust benchmark process" provincially (OUCQA/PEQAB and CNO) and nationally (CASN) (AI2).

Program Improvements

Program improvements are understood to be a benefit of the current QA requirements for Ontario SoN, specifically by highlighting the importance of self-reflection and maintaining or enhancing programs. As nursing education and practice rely on self-reflection (AI3),

> … it's actually a lovely mechanism to pause … and reflect and check in and map out where your programme curricular activities evaluation metric measures align with that of the entry to practice competencies as outlined within our current document. And also to look at ways in which we can identify and self identify areas of improvement or further development curriculum evolvement and to ensure that it does touch upon all of the entry to practice competencies. (AI1)

Self-reflection, separate from feedback provided by the QA bodies, allows programs to identify gaps in curriculum. The process highlights areas in the curriculum that have been "neglected" and identifies where changes are required to improve program quality (AI2). Self-reflection also allows for programs to examine what they are doing well (FI6), how Nursing fits into the larger educational and health care ecosystems (FI8), and how the curriculum and its delivery mechanisms work holistically (FI6).

Moreover, the current QA system helps programs identify shortcomings in pedagogy and program delivery. An external body can identify possible areas of improvement as it allows interest holders to spend their time "educating nurses for the future and educating in a really strong, meaningful way" (FI2). Finally, the system helps programs plan for future growth by forcing them to collect data and analyse where they can make improvements (AI3).

Having an external voice supports SoN as they plan to make improvements to their program by adding "power" to their message (FI9). Because education "isn't stagnant", program delivery is "always a work in progress, and changing with what's going on in the environment needs to happen. And so having this approval process, this accreditation process, does provide evidence, and the importance of the change" (FI9). Finally, a poor result following a review can be beneficial to programs as it keeps them accountable to discipline expectations and encourages

improvement as a result (FI8). While the process has been characterized by some as labour and resource intensive, the current QA requirements provide SoN with "a good opportunity to look closely" (FI6) at their curriculum and operations.

Various Perspectives

Interviewees acknowledge the different roles that each QA body plays in the nursing education reviews and felt that the variety of lenses brought to the programs' QA activities was a benefit:

> [OUCQA/PEQAB], versus CNO, and CASN, they all have a different approach, which some people, I know, find frustrating because they're like, 'Well, you know, the standards should be the standards. And if this matters to them, why doesn't it matter to them?' CNO and CASN, for example, have a very different mandate (FI3).

It was noted "they each brought different lenses. So I think the guts of the content translated quite well into all three, but it was a different lens. So you had to edit and reword" (FI8).

Though CASN is described as being the most complex of the three requirements, it is characterized as "the heart of what we're doing" (FI8). The other QA bodies also play an important role in Nursing education. CNO's focus on public safety ensure that "we're not letting kids go out there and kill somebody and I totally get that; I fully support them in that" (FI3). Finally, the OUCQA and PEQAB reviews are necessary to ensure programs are "a good citizen within the fold of the university" (FI8). The processes are seen as valuable: "I honestly think it's worth it every time and every different review brings a different lens" (FI3).

Research Question 6: What are the Perceived Barriers of the Current QA Reviews for Ontario SoN for Administrators, Faculty and Support Staff?

In the following section, I describe the perceived barriers of the current QA reviews for Ontario SoN administrators and faculty. Interviewees noted that the current QA reviews pose challenges due to the additional workload created by its repetitive nature, the availability of resources, the internal structure of their HEIs, and the QA bodies' operational and philosophical approaches.

Additional Workload and Repetitive Nature

The majority of those interviewed (n=10) noted that the current QA reviews in Ontario presents a barrier to Ontario SoN because of the additional workload it creates and, in a related aspect, its repetitive nature:

> …it's too much. It's straight up too much. And it's just like, it's so much work to do. There's some overlap, but everybody wants a different format. And everybody wants a different style of CV and the attachments are different. (AI5)

It is estimated that "CASN accreditation and College of Nursing accreditation increase our workload by 20 to 30%. Like it's a lot, especially if you're involved in those key courses" (FI10). It was noted that the process "so laborious, we all just wanted to smash our heads against the wall" (FI10).

While QA activities are one component of HEI employees' duties, it creates a barrier to the other duties they have. QA has been characterized as a "burden" for faculty who are busy teaching, researching, and providing service to their HEI and discipline; QA is seen as one additional component for which "maxed" faculty need to find time to complete (FI6). The issue was characterized as follows:

> We're so busy putting out fires, meeting with students, preparing exams, prepping for lectures, writing grant applications and it's just busy, and then you throw those big, big, big projects in the mix, I'm referring to them as projects. But as your cycle comes up and you're due, it's a lot of time and forward thinking that just doesn't usually exist probably in any workplace, but definitely not in these ones. And it's hard to catch up, and to get ahead of it enough to sail through it smoothly. (FI3)

While all QA bodies were mentioned by interviewees when discussing barriers, CNO's requirements specifically were seen to be extraneous:

> The curriculum indicator piece, I actually find to be really quite ridiculous, to be perfectly honest... I think it's an obscene amount of work. I think it is. I think it is actually almost insulting to say to faculty, 'you need to show us where you're teaching this. I need to see a PowerPoint that says you teach them that they have to introduce themselves, that you need somehow [to show] its taught, how it's applied, and how it's evaluated. For those

> 110 indicators.' It's an obscene amount of work… I don't see the value that it adds to my programme. I don't see any value to that whatsoever. (AI6)

Until 2017, CNO used CASN accreditation as the data source for its approval decision. The addition of a third QA process at that time added to HEI staff workload by creating another layer of administration, and the need to prepare another report that run into the "thousands of pages", supported by submission of faculty for supporting document, is seen extraneous (FI4). This change in process had a negative impact now that the CNO and CASN systems are distinct because "that's double the work, really" (FI9).

An element of the barriers presented by the increased workload is the fact that administrators and faculty of Ontario SoN find the three processes to be repetitive in nature (AI1; FI2): "We enter a lot of the same questions over and over and over again, for multiple different bodies at multiple different times. And it's a ton of work for us" (FI4). As a consequence, interest holders in the program are distracted from follow-up activities and growth (AI3). Specifically, the inability to reuse reports was cited as a repetitive workload barrier (FI10; FI2).

Drain on Resources

There are two types of resources that present barriers to the current QA system for Ontario SoN: financial and human. Both administrators and faculty expressed concerns that reductions in budgets and staffing are barriers to their current and future participation in the QA process (AI1; AI2; AI4; AI6; FI7; FI8; FI10) because "we're all sort of already working to our limits" (FI8).

Some HEIs views participation in accreditation as unnecessary since the return on investment for resources is low given the program is "already maxed for seats" and is "not competing for students" (AI7). Administrators estimated that each visit cycle costs their institution between $20,000 (AI6) and $100,000 (AI3) in expenses. While they are "not adverse to spending money on things that benefit … the improvement of a quality product… there are a lot of ways that that money could be spent that would have direct impact to either those that are teaching it or those that are being taught it" (AI7). Finally, the cost is characterized as "adding insult to injury" (AI6).

The result of the current QA system in Ontario SoN is that faculty members, who are assigned to work on QA activities, are no longer available to teach in programs, creating down-stream human resource constraints as additional faculty are hired to back-fill for course coverage (AI6). In addition to needing additional teaching staff, multiple institutions hire administrative support staff (internal or external) to support QA activities, which presents additional human resource costs for HEIs (FI10; AI6).

Internal Structures of HEIs

The requirements of the QA bodies encounter barriers when interacting with the internal structures of the HEIs that support Ontario SoN. As a result, resourcing, existing bureaucracy, and employment structures at HEIs create barriers to the QA process.

The primary resource identified as a barrier within the HEIs for Ontario SoN to participate in Ontario's QA requirements are the human resources. The task of preparing reports and organizing documentation often falls to a small group of, or single, individuals (AI7) with the result being "...when you work hard, I feel like the reward for that is more work" (FI10). Those administrators and faculty members who do participate in QA activities do so for little recognition or time protection (FI11). A substantial barrier is that there are some faculty member who do not consider QA activities to be part of their role in the SoN:

> …they sort of buck it a little bit, and that's very hard on the people that are stuck holding the bag. Makes it very stressful, I'm sure for them. And I think a lot of it probably falls on the shoulders of the chairs and directors and undergraduate coordinators, and they already have so much on their plate, that it's very hard for them, I'm sure to hold that up… Because every time I've watched it, I know they've been the ones stressed until the final hour of submitting those last documents more so than anybody else. So yeah, I feel for them for that (FI3).

While faculty members may be given teaching release times to work on QA activities, they rely on their colleagues to provide evidence and artifacts for reporting, thereby creating a resource draw across the SoN (FI6).

Barriers due to human resourcing is only one way that HEI internal structures can inhibit participation in QA processes. Another is the inherent bureaucratic nature of HEIs. Making

changes to a program in an HEI is subject to faculty and senate reviews, all of which are time-consuming processes (AI3). How faculty interacts with HEI bureaucracy was described as follows:

> But every time we have these meetings about okay, let's you know mobilise the faculty to give us all their information, I just kind of cringe and like good luck with that, because they have no real need. It's very hard to boss them around and tell them what to do. And yet they are the keepers of the precious information that is required to go into the big machine for the QA, self study report, and the programme approval evidence and all that stuff. So it's sometimes trying draw blood from a stone there… (FI3)

Finally, the nursing QA requirements are not well understood by their central administration which can make nursing "a little bit out of step with whatever's going on internally" at the HEI (AI2). The various levels of bureaucracy and accountability create barriers for QA activities in Ontario SoN.

Faculty at Ontario universities and colleges are generally members of employee unions and have collective agreements that can also present barriers to a SoN's participation in Ontario's QA structure. They are generally expected to dedicate 20 per cent of their time to 'service' to their profession, but QA activities are not always seen as part of their colleagues' jobs and if they are "going to do a splash of service on the side… it's easy to get that 20 per cent. And that's if you never touch this QA stuff" (FI3). Some collective agreements do allow for QA activity time, but "it would be like 15 minutes every week or something like that and it was unrealistic" (FI5).

QA Bodies

The QA bodies' underpinning philosophies and operations present barriers for Ontario SoN participation in the current system. While each of the QA bodies have a mandate, the relevance of how the QA process supports them in meeting those mandates is not clear. In general, "the criteria they use is so vague and so grey" (FI12). With regards to CNO specifically, it was noted: "You know what's not out there? The proof that some of the things that they do, actually improves patient safety… But where is the evidence that shows that what they're doing has any value?" (AI3). Further,

> …they exist to protect the public. So they have an obvious stake in making sure that we are preparing our students at the appropriate place at entry to practice. That's a must do. Does it help us with our professional development? Probably not. Does it contribute to the big Q quality? Probably not. It's just a framework by which we, it's the minimum standard at which we should educate our students. (AI5).

The "thou-shalt" language of CNO does not contribute to a valuable outcome for programs and the regulator approval requirement "needs some re-packaging, so that [SoN] also see it as a value add an exercise versus an unbelievable, ridiculous amount of work that does not add any value" (FI12).

QA bodies' staff also present barriers to the system, primarily around issues of qualifications to adjudicate on a program's quality. QA reviews are subjective in nature (AI6), and there is a perception that QA staff

> don't have a great understanding of curriculum and how curriculum drives learning. They don't necessarily take feedback well, so I would say that their process is not the most beneficial in terms of ensuring that you get a certain quality of nurse at the end. (AI7)

The type of feedback given to HEI interest holders and the QA bodies staff is also in question as "I don't think that CNO really cares about [giving feedback] at all", whereas CASN "did care genuinely about us as people" (FI10). For example:

> [CNO's] report on our place was absolute BS. So when you do that, then I can't believe what you're doing is credible, because our report should have been very specific with where they see us sitting. And I know, the College of Nurses did not do that. And I'm pretty damn sure CASN's report will tell us we're all lovely ladies working hard, committed to nursing. And they'll leave out the part that we're very ineffective in what we're doing. (FI12)

As a result, there is a perception that the process is a "rubber stamp" exercise (FI12).

Research Question 7: What Risks do Administrators, Faculty and Support Staff See in the Current QA Reviews for Ontario SoN?

In the section that follows, I describe the perceived risks of the current QA reviews for Ontario SoN administrators and faculty. Interviewees identified that the current QA reviews create risks in the areas of academic freedom, resourcing, and SoN reputation.

Academic Freedom

The current structure of QA reviews for Ontario SoN is perceived to be a risk to Nursing programs because it does not always allow for unique curriculum offerings (AI1). As in the case of CNO:

> they tell you exactly what they want, you go get it. And if you don't have it, you create it, and you give it to them. You know, it's one of those things, they just want you to meet their check mark. (AI3)

While CASN is seen as trying to understand how a program is structured, CNO is seen as "dictating curriculum" without providing sufficient support to the programs (AI3).

The outcome of limiting academic freedom in favour of QA body requirements has the potential to 'fracture' the profession:

> And nursing is an academic discipline, right? An academic discipline has thought leaders, and, you know, and we really have to think that through - how CASN and CNO, you know, to a certain degree, can position themselves to make sure the discipline doesn't end up fractured down the centre, because of lack of oversight of academic preparation and of students. (AI5)

Caution is advised against engaging in "legalistic checks" that change how programs are designed and delivered in order to protect the pluralism currently found in Ontario SoN (AI3).

Resourcing

The draw on human resources created by the current QA requirement in Ontario SoN was raised by every interviewee; every administrator and faculty member used the term "burnout" while discussing this issue. There is a perception that faculty members and support staff in SoN are being asked to take on additional work with regards to QA (AI3; FI10), but that no one wants to lead this work because "it's seen as a big monster of a thing" (AI3). As faculty retire, and are

not always replaced, the responsibility for QA falls to fewer SoN personnel until “sometimes we feel like all we're being asked to do is write reports” (FI1).

The fragility of the current health human resource context extends into HE (AI1), highlighting the limited capacity of people tasked with ensuring quality of programs in contrast to a government pushing to increase the number of nurses working in the healthcare system (FI3). The issues related to the health human resources is compounded by general human resource constraints that come with an aging workforce that is not being adequately replace: “a lot of times, it's left to maybe unqualified people to write these reports and engage in the process, or we outsource it, which isn't ideal because it's not really capturing the true essence of our school” (FI2). Because of human resource shortages, faculty members are already teaching larger classes, which risks the ability to effectively contribute to QA activities, which leads to “feel[ing] buried and people are really seriously burning out at the faculty level, and that's unfortunate, because we're going to take all this historical knowledge with us when we leave” (FI4).

In addition to a draw on human resources, the risk of the current QA system on the financial resources of Ontario SoN was noted. SoN often provide faculty members with teaching releases, and consequently contractual faculty must be hired “so the actual hands-on doing of the heavy lifting has a price tag on it for the organisation” (FI3). As a result, “[the] risk of participation is you're going to burn out your staff. And then they're not doing the things that they ought to be doing” (AI5).

Reputation

The reputational risk for Ontario SoN of both participating and not participating in the current QA structure was raised by multiple interviewees. Concerns included the validity of findings, the impact on student enrollment, and the impact on SoN personnel.

As discussed above, the QA bodies’ assessment staff are perceived to be a barrier to the SoN’s participation in the QA requirements, but they were also flagged as a risk. Because of the subjective nature of the process, SoN view the process as a “superficial kind of check” to which there is no benefit (FI9). A lack of clarity of expectations (AI3; AI7), compounded by QA

bodies' staff profiles (AI3), create a concern that there is not enough being done "to stop there being a degradation of the integrity of the learning" (AI7).

Multiple interviewees noted that the risk of participating, or not, with the QA process is dependent on which body is being considered given the mandatory (approval) and voluntary (accreditation) nature of the processes. A substantial risk was raised related to the mandatory/voluntary dynamic in the current QA reviews:

> I could see, again, with the CNO, being mandatory schools, you know, being like we can only afford or we only have the human resources, we only have the ability to do one, we have to do CNO, if we want to be a programme, and so I could see CASN being dropped. (FI6)

However, there is a sense that any review could be "potentially damaging to very good nursing program" if a recent finding does not align with the existing reputation of a SoN (AI3).

While accreditation is a voluntary process, the risks of not participating are clear:

> I think there would be major consequences [to opting out of accreditation], because you do want that golden standard. I find accreditation is recognised as a university programme that has met accreditation standards. And also it allows for students to be able to work in different areas within the country and outside of Canada also because our accreditation program is recognised internationally… (FI11)

To that end, not engaging in accreditation would eliminate a marketing tool for SoN (AI5; AI6). One interviewee likened the accreditation process to receiving a crowd-sourced customer review: "it's recognising the benefits of accreditation, that it is like a, you know, like a TripAdvisor giving so many stars or something" (FI9).

There is a risk resulting from the impact on QA activities on personnel in Ontario SoN. As discussed above, the human resources involved in the QA process are substantial and there is a sense that "we jump through the hoops and jump over all the hurdles and come out on the other side" (FI3). However, programs that chose not to pursue QA activities (in this case the voluntary accreditation process) may create the perception that their program is "less than" (FI6). The human experience and resource realties create a concerning dynamic:

> And there's always that fear. What if we don't get approval[/accreditation]? What if we don't get it? That's a shame factor. I mean, I know you could have extensions and you know, send more information, but it is kind of something you don't want to face. And did that mean the person who wrote the report was wrong? (FI9)

There is a perceived reputational risk for a program not receiving a positive outcome following QA reviews (FI10; AI5), so much so that one SoN only purses accreditation "because a number of schools within Ontario have decided to participate in CASN" (AI7).

Research Question 8: What Areas of Possible Reform do Administrators, Faculty and Support Staff See in the Current QA Reviews for Ontario SoN?

In the section that follows, I describe the possible areas of reform that SoN administrators and faculty identified for the current QA reviews for Ontario SoN. Interviewees identified additional areas of support that the QA bodies could provide, possible ways to align the process, the current scope(s) of reviews, and general process areas.

Additional Support from QA Bodies

As both CNO and CASN have a larger presence in the Nursing community than to just provide QA frameworks, that SoN would benefit from receiving direction and feedback from them on how to improve curriculum (FI3). Moreover, the QA bodies are well positioned to act as a resource for all SoN for best practices in Nursing education (FI3). Operationally, it was felt the QA bodies could provide more training and administrative support for SoN to complete their reviews. The creation of online videos or an app to answer questions (FI10) were cited as possible solutions to this issue. In addition, the document completion and submission processes were cited as an area where SoN need additional support from QA staff (FI7). Finally, it was suggested that the QA bodies assign "a dedicated point person" to each SoN to "pre-brief" personnel who are preparing for a review (FI10).

Alignment of the Processes

A majority of interviewees (n=13) suggested that some sort of alignment between the QA bodies was an area of possible reform they would like to see explored. As discussed above with regards to the repetitive nature and workload/resource requirements for the process, there is a perception that "all three levels need to come to certain agreements or agreements between them as to how to best respond to the current educational landscape…" (AI1). Rather than write three

distinct reports each cycle, it was suggested that the three QA bodies use some elements of each others' reports to satisfy requirements in their own system (AI1; AI2; AI5; AI6; FI1; FI2; FI4; FI6; FI7; FI8; FI9; FI10; FI11). This is not a novel solution:

> You know, at one time years back, our internal [OUCQA] committee decided that they could take our CASN accreditation report because it had just been completed and it met pretty well all the criteria. That's not happening anymore. I think that if there could be some collaboration and maybe integration, and I don't know some equivalencies of some of these reports, that would be great… that would certainly make things a little easier, I think for people and programmes. (FI1)

Given that Nursing is being reviewed by its own profession, there is a believe that the OUCQA/PEQAB reviews are unnecessary (AI5; FI10; FI1): "Why can't the university just be like, for programmes or faculties that have professional regulatory body, accreditation or approval, why can't they just be like, 'yep, you guys win,' …" (FI10).

The existence of processes that have been aligned were provided by several interviewees. Rather than require multiple layers of QA, the hospital system relies on a single accreditor (Accreditation Canada), which has reduced workload and confusion (AI7). Similarly, it was noted that a combined regulatory/accreditation process does exist for Nursing in other provinces (AI3; FI11).

There is also an ethical component with regards to possible improvements to the QA system:

> It cannot be a siloed approach anymore. It is irresponsible of governments to enable this type of siloed work. [It's] siloed work because when you look at it, [OUCQA] is, you know, Ministry of Education, for quality assurance of our programmes. CNO is also ministry, not of education. But it's also ministry asking for a review or evaluation. CASN is national, it's not ministry, but it's … an association of peers. Right? CASN is built from schools of nursing together, making standards across Canada. So you can get more professionally and discipline driven. So I would think it's irresponsible to think that the two ministerial level first cannot join, and [second] knowing that the seal of quality of programmes is a structure across Canada, [regulatory] colleges across Canada should feel

> the responsibility to engage in a discussion with our professional Canadian Association to limit duplication and work together. (AI3)

The commonalities across all three bodies are a recognized fact within the SoN: “I'm somebody who's done the three of them, [and] I can comfortably say that accreditation would meet all the other standards of the two others” (FI11). This overlap of work has created morale issues for SoN interest holders who participate: “Just one all combined into just one!! It[’s] exhausting, expensive and time consuming to have to do them all individually” (FS125).

Scope

Interviewees raised two areas of possible improvement around the scope of QA reviews for Ontario SoN: ensuring that scopes are reasonable and ensuring there is no overlap in scopes. In support of the discussion above regarding the repetitive nature and workload/resource requirements for the process, there is a sense that the scope of these reviews should be limited: “Drill it down, and make it make it a little bit more concise and realistic in certain settings… and kind of tease out the core components and go from there” (FI5). The complexity of the profession and the QA process are interrelated factors for SoN and QA bodies, and SoN interest holders would like to see “a less complex way to achieve what it is you're trying to achieve” (AI2) by keeping the scope of QA reviews “strategic” rather than a continuation of the current “micromanaging” approach (AI6). To that end, it was suggested that the QA requirements should be tied more clearly to quality to determine effective scope (AI6).

As per the discussion above about aligning the processes, there are several possible areas for improvement to ensure that the QA bodies’ scopes do not overlap. It was noted that “a little bit more communication and connection between… CASN and CNO” is required to determine which body is responsible for which area of Nursing education (AI2). By including the relevant provincial ministries, the Registered Nurses Association of Ontario (RNAO), and the Canadian Nurses Association (CNA) in QA activities, a single “robust quality assurance program” could be meaningfully developed so as not to overtax the SoN (FI2). Regardless, there is a perception that the current QA bodies need to engage in conversation to “figure out who's in which lane so that you aren't having to submit similar but not close enough that they're the exact same submission” (FI6).

Process

Interviewees made several recommendations on how QA body processes can be improved to benefit Ontario SoN. There is a perception that the current process allows for programs to 'hide' their reality (AI5), and several suggestions were made to ensure more QA effective reviews happens:

- Ensure that interviews that happen during visits are less scripted (FI4),
- Allow for more flexibility in how SoN demonstrate compliance with criteria (FI7), specifically by relying on interviews with interest holders rather than report submissions (AI5), and
- Ensure peer reviewers have an appreciation for the Ontario higher education context (FI2).

Finally, a continuous accreditation model (FI3) was suggested which, among other things, would allow for programs to integrate feedback from QA bodies following each review (AI3).

Summary for Part 2, Phase 2

Seven administrators and 12 faculty members agreed to be interviewed for Part 2, Phase 2 of my study. Of the 397 statements that I coded for this part of my study, 222 (56%) expressed negative opinions of the current QA reviews for Ontario SoN; 99 (25%) were positive; and 76 (19%) were neutral. Their responses suggest that the current QA requirements for Ontario SoN have benefits such as external validation and program improvements, but they also present barriers such as the increased workload and resource demands. Interviews identified sustainability and reputational risks inherent to the current system, and highlighted several areas where improvements could be made, including the reduction of work and reinforcing QA body scopes.

Chapter 7: Discussion and Conclusion

This chapter summarizes the findings of my study and connects these findings to the existing literature on QA in HE, common elements of QA activities, and change management, including change fatigue and resistance to change as models for resistance to QA. I next explore the contributions of my findings to existing policy and practice areas, along with the study's general limitations. I conclude by offering recommendations for interest holders based on the literature and study findings, potential areas for future research, and my final remarks.

Summary of My Study and Its Findings

For this dissertation, I conducted an explanatory sequential, two-part, multimethod study, which answered eight research questions over two phases. In Part 1, I reviewed documents to identify the various components of the QA reviews that Ontario SoN undertake. I sought to answer the research question "What QA reviews are Ontario SoN subject to?" by identifying the elements of criteria, procedures, and general considerations and distinguishing what high-level similarities, if any, exist. This foundation helped me identify specific topics to address in Part 2 of my study.

In Part 2, I focused on how administrators, faculty, and support staff from Ontario SoN perceive the current QA requirements. Part 2 was broken into two Phases. For Part 2, Phase 1, I set out to answer the research questions "How aware are administrators, faculty members, and support staff of the QA requirements their schools face?", "How involved are administrators, faculty members, and support staff in their schools' QA requirements?", and "What advantages and disadvantages do administrators, faculty members, and support staff identify regarding their schools' QA requirements?" In this Phase, I surveyed interest holders to gauge the impact of the current QA system. Most respondents acknowledged some advantages of the system, such as external validation of quality, self-reflection, and continuous improvement. However, they also noted significant disadvantages, including the time commitment, redundancies, and the drain on financial and human resources. While interest holders identified benefits, they focused more prominently on the disadvantages.

In Part 2, Phase 2, I interviewed interest holders to further explore their perceptions of the QA system in Ontario. I set out to answer a series of research questions regarding the benefits, barriers, risks, and potential improvements for QA reviews in Ontario SoN. These interviews

confirmed the Part 2, Phase 1 survey results. Interest holders acknowledged the QA system's benefits, including quality improvement, self-reflection, and improvements resulting from approval and accreditation reviews. However, they also pointed out barriers, such as the increased workload and resource strain, as well as philosophical and structural issues within the system. Once again, the barriers were more prominent in the responses provided by interviewees to the research questions.

The purpose of my study was to analyze the QA review processes affecting Ontario SoN and to examine how these processes are perceived and engaged with by interest holders. By comparing QA requirements across review bodies and exploring interest holders' awareness, involvement, and perceptions of these processes, my study identified key benefits, challenges, risks, and areas for improvement in the current QA landscape. The document review in Part 1 and both phases of Part 2 revealed a consistent narrative: interest holders view the current QA system as overly burdensome due to its redundancy, which ultimately hampers the work of SoN interest holders. While interest holders recognized the need for some form of QA, they unanimously emphasized that the current system's impact on participants is unsustainable, necessitating reform.

These outcomes have allowed me to make several recommendations to both the QA bodies and Ontario SoN, as described below. For the QA bodies, these recommendations call for a more coherent, flexible, and supportive QA system for Ontario SoN. Interest holders strongly advocated for greater alignment and potential integration of existing QA processes to reduce duplication and reporting burden, particularly by leveraging the comprehensiveness of CASN's review framework. My findings emphasize the need for flexible and context-sensitive QA requirements that recognize program diversity, encourage proactive integration of QA into daily academic work, and shift emphasis away from excessive documentation toward more meaningful engagement. Ensuring that QA expectations remain reasonable and tightly aligned with each QA body's mandate would further reduce over-bureaucratization and better support the development and execution of quality programing in Ontario's SoN.

The recommendations resulting from my research for Ontario's SoN emphasize the importance of institutional ownership and strategic leadership in strengthening QA within SoN. Developing a shared QA culture (which is grounded in awareness, accountability, and collective

responsibility) is foundational to the successful completion of QA activities, regardless of external system reforms. To support this culture, SoN should intentionally adopt change management and industry-informed quality frameworks to guide QA work in ways that are sustainable and aligned with institutional realities. HEIs and the QA bodies should also consider formally integrating and coordinating overlapping QA reviews, reducing bureaucratic burden and improving resource allocation across review cycles. Finally, ongoing advocacy and structured dialogue among SoN, HEIs, QA bodies, and regulators is essential to ensuring that QA systems remain meaningful, proportionate, and responsive to their cumulative impact on programs.

Taken together, the findings of my study highlight a fundamental tension between the intended purposes of QA and its current implementation within Ontario SoN. While QA processes are widely recognized as valuable mechanisms for accountability, legitimacy, and continuous improvement, their structure and implementation have produced unintended consequences that undermine their sustainability and effectiveness. The consistency of these findings across document analysis, survey data, and interviews underscores the systemic nature of these challenges and points to the need for both structural and cultural change. The following section situates these findings within the broader literature on QA, HE governance, and organizational change, critically examines their implications for policy and practice, and explores how a more coherent and collaborative QA system might better support the work of Ontario SoN.

Integration of My Findings with the Literature

My study supports the findings identified in the existing literature on QA in HE and fundamental change management (specifically the existence of resistance to change) principles. The similarities between change management activities and QA activities means that change management principles are a useful lens through which to analyse the perceptions and actions of interest holders. Adopting a change management approach to address change fatigue and resistance will help build a QA culture in Ontario SoN that better supports interest holders' efforts.

Quality in HE

Following my research, "quality" remains a challenging concept to define. Its meaning varies across individuals, is shaped by context, and is interpreted and operationalized differently by institutions and QA bodies. Defining quality in Nursing education in Ontario is particularly difficult because three of the four QA bodies have not explicitly articulated their interpretations[2], leaving interest holders to infer meaning by combining the criteria and processes required by each body. Individual experiences further shape how interest holders define quality, and as primary contributors to QA data and practitioners of Nursing education, each holds a unique perspective. Consequently, interest holders perceive the QA requirements for Ontario SoN as a self-contained system that does not fully reflect or respond to their needs.

Because the QA bodies have not clearly defined quality, interest holders must interpret it within the context of their programs and teaching practices. This situation fosters the perception among interest holders that the current QA system does not fully support its intended goals or the programs' efforts to ensure meaningful quality. As a result, interest holders often focus on the smaller elements they can control, whether in program delivery or in deciding how to engage with QA processes. Participants' experiences of QA as performative and bureaucratic align with Foucault's notion that modern institutions exercise power not primarily through coercion but through diffuse mechanisms of surveillance, normalization, and documentation. Power, according to Foucault, operates productively by shaping what professionals recognize as legitimate practice, yet it simultaneously constrains them through "techniques of discipline" that prioritize compliance over substantive improvement (Foucault, 1995). In this context, QA reporting functions as what Foucault calls a "procedure of examination," where documenting and demonstrating conformity can overshadow the transformative potential of the process itself (Foucault, 1980). When QA processes operate as instruments of surveillance rather than tools of empowerment, they risk producing "docile bodies", that is to say, professionals who comply with bureaucratic demands while disengaging from authentic quality enhancement. This dynamic

[2] The Postsecondary Education Quality Assessment Board (2025) *Policy 0* defines a quality postsecondary degree as "one that is fully 'fit for purpose'" and identifies four elements that make a degree fit for purpose: it imparts critical skills, leads to employment, provides a foundation for ongoing education, and supports personal and social development. Even in this definition, the Board does not explicitly define 'quality'; instead, it relies on a combination of characteristics, which require interpretation to determine whether a degree meets quality standards.

helps explain why interest holders may withdraw from meaningful participation: when power is experienced as enforcement rather than enabling, its legitimacy diminishes.

Survey and interview participants focused on how their SoN ensures quality within their programs and administrative units. Although defining "quality" in HE is challenging, Hämäläinen's (2003) definition aligns with my findings: "quality is not a sum of specific details but a meaning given... on the basis of reciprocal relations, which can be interpreted in relation to the sphere of activities" (p. 297). Quality, then, is a complex concept that can be identified and interpreted in a variety of ways. When combined with QA practices, it becomes recognizable and applies to aspects such as reputation, content, relevance, value, and outcomes (Harvey & Green, 1993).

Although each QA body and SoN must define quality within their own context, several frameworks exist in the literature that can be used as a starting point to determine how interest holders may already be interpreting 'quality'. Study participants, without prompting, identified elements of several frameworks in their survey and interview responses. Harvey and Green's (1993) framework conceptualizes quality in HE as comprising five characteristics: quality as an exceptional outcome or product, quality as perfection or consistency, quality as fitness for purpose, quality as value for money, and quality as transformative. Each characteristic depends on the context in which quality is assessed and interacts dynamically with both that context and the other characteristics. This framework acknowledges the inherent complexity of defining quality in HE while providing clear conceptual boundaries within which quality-related efforts can be examined. As such, Harvey and Green's (1993) work remains seminal in shaping scholarly discourse on quality in HE.

Interview participants spoke extensively about the QA bodies' standards, reflecting on the benchmarks used by both the approval and accreditation processes for Ontario SoN. What emerged was a perception that these standards do not adequately reflect the contextual realities of HE, are overly granular, and are often adjudicated by individuals who may not fully understand the programs they are evaluating, making them problematic for assessing the quality of a SoN's administrative unit and programming. In sum, the perception is that the standards are designed to be a checkbox exercise. Within the "quality as exceptional" category identified by Harvey and Green (1993) checking standards (where a benchmark represents the minimum

required to demonstrate quality) was prevalent in study participants' responses to survey and interview questions. What emerged was the clear perception that the current QA system as a self-perpetuating bureaucratic exercise. In this view, quality reflects only the adequacy of responses to a QA body's reporting requirements, rather than the actual quality of Nursing education programming within the SoN.

Interviewees spoke extensively about quality culture, emphasizing that everyone within a SoN should be responsible for quality, reflecting principles similar to the kaizen model and elements of Kotter's (2012) framework for successful change management. This position is reflective of the "quality as perfection" characteristic, within which Harvey and Green (1993) identified two subcategories: zero defects and quality culture. While participants acknowledged the importance of fostering a culture that embraces quality within their HEIs, they also recognized several barriers, with resource constraints (both financial and human) being the primary challenge to undertaking QA work. The current state of quality culture in Ontario's SoN is discussed further below.

The "zero defects" aspect of QA work in Ontario SoN was less frequently discussed, but it was still noted. According to Harvey and Green, "[Zero defects] subverts exclusivity; it transforms the traditional notion of quality into something everybody can have. Excellence can be redefined in terms of conformance to specification rather than exceeding high standards" (p. 15). Study participants who referenced this definition of quality generally viewed the QA process positively, highlighting the value of the various lenses applied to SoN and appreciating the consistency that these processes bring to their administrative units and programs. The challenge lies in identifying what constitutes 'perfection' in this context, since the QA bodies have not clearly defined quality and it does not present as a constant or easily identifiable standard across multiple SoN or Nursing programs.

The concept of quality as meeting customer specifications was prominent in my interviews, and reflected Harvey and Green (1993) conception of quality as "fitness for purpose," which can be summarized with two subcategories: customer specification and mission. In this context, however, participants viewed the "customer" as the province, the regulatory body, and the accreditor, rather than students, community partners, or the broader healthcare system. Consequently, study participants expressed that QA activities were often undertaken for

the benefit of QA bodies rather than the programs themselves. This perception reflects issues of over-bureaucratization within the process (Dzimińska et al., 2018; Harvey, 2006a; Newton, 2002; Stensaker & Leiber, 2015), which can foster resistance, as discussed further below. While CASN's process is generally viewed more positively than the others, it is still perceived as part of a burdensome system for interest holders.

Regarding the second subcategory (mission) when considering quality as being fit for purpose, participants highlighted inherent conflict tied to the customer specification issue. When considering the mission of a SoN, interest holders were uncertain whether their ultimate customers for their 'product' (i.e., programming and outcomes) were students, community partners and the broader healthcare system, or the QA bodies themselves. While participants identified their primary mission as serving the former, they recognized that their HEI and administrative unit structures often prioritize the latter. This tension complicates interest holder understanding around whether or not QA outcomes are truly fit for purpose, as interest holders struggle to identify the ultimate objectives of their work and the QA activities they undertake, raising doubts about whether fitness for purpose can serve as a reliable marker of quality in this context.

Harvey and Green's (1993) framework further posits that quality can be represented as value for money, with two subcategories: performance indicators and customer charters. Performance indicators serve as benchmarks of inputs required to achieve quality outputs. Although these indicators are present in provincial approval requirements and are indirectly embedded in both the regulatory and accreditation standards, interviewees did not discuss them. This omission may reflect that performance indicators primarily provide evidence of good stewardship to funding bodies (such as faculty-to-student ratios, revenues and expenditures, and application rates) and therefore remain largely peripheral to the daily experiences of interest holders.

In contrast, the issue of customer charters did emerge in interviews, though participants once again demonstrated some confusion as to whom their customers are. Consistent with the earlier discussion on fitness for purpose and mission, the identity of a program's "customer" remains ambiguous. Participants cited both students and QA bodies as the ultimate beneficiary of their services, yet the vastly different outcomes expected by each make it difficult to reconcile

how a customer charter can function as a quality indicator for Ontario SoN. This tension highlights the challenges in operationalizing value for money within the context of QA in higher education; interest holders do not understand how the QA bodies are linking value for money to quality and so are not engaging in a meaningful way with this dimension of quality in their SoN.

Finally, study participants consistently centered their perspectives on students, yet none discussed how the current QA system in Ontario SoN might support the personal growth of program participants, whether students, faculty, or QA bodies. Harvey and Green's (1993) framework presents quality as transformation, with two subcategories: enhancing the participant and empowering the participant. Consistent with previous discussions, ambiguity regarding who constitutes the "customer" and for whom the mission is enacted also emerges within this dimension. Only a few participants noted how QA processes enhance the participant, and in each case, the focus remained on students as the beneficiaries. For a profession fundamentally grounded in the collective care of individuals, this lack of consideration for how QA can empower or enhance all interest holders represents a critical gap in the current system.

Bridging theoretical conceptualizations of quality with how it is operationalized is challenging. Quality is not a self-contained concept; it is important to situate it within the systems that enact, define, and measure it. Understanding the purposes of QA activities and the multiple indicators of quality they encompass provides deeper insight into how quality is currently understood and evaluated in the SoN. Study participants frequently emphasized their responsibility to adequately prepare students for professional Nursing practice and occasionally mentioned research projects or pedagogical strategies they employed to improve their own teaching, learning, and overall program outcomes. By contrast, few participants reflected on how they contributed to the effective use of institutional resources. When resources were discussed, participants primarily highlighted insufficient levels to support QA work and, at times, to sustain program delivery (typically in relation to class size or faculty hiring). These concepts are reflective of Hulpiau and Waeytens' (2003) work, which argues that QA in HE serves two central functions: enhancing the teaching/learning process and demonstrating accountability to a broad range of interest holders for both educational outcomes and the use of institutional resources.

Complementary to Hulpiau and Waeytens (2003), Harvey's (2006b) framework outlines four interrelated forms of quality that, systemically, institutions must uphold. Academic quality refers to the level of scholarly and intellectual achievement students demonstrate; competency quality concerns the practical and professional skills students develop by graduation; organizational quality relates to the internal structures, governance, and processes that shape the institutional environment; and service quality emphasizes the effectiveness of administrative and support functions that enable teaching, learning, and research. Together, these dimensions reflect the multifaceted nature of quality in HE and underscore the dual developmental and accountability roles that QA systems must fulfil.

The QA bodies' standards and study participants' responses reflect Harvey's (2006b) framework of quality indicators in HE. Across the standards, and as a recurring theme in survey and interview responses, academic offerings and the competence of students must meet a defined threshold to be considered 'quality.' Provincial QA bodies explicitly set degree-level expectations that all university and college programs must satisfy; CNO's approval standards specify required curriculum content, including the incorporation of "entry-to-practice competencies and foundational practice standards" (CNO, 2022, p. 6); and CASN's (2020) accreditation standards emphasize entry-to-practice competencies but expand the definition of a quality program by requiring curriculum to follow a logical sequence, provide foundational health science knowledge, and include exposure to social sciences, humanities, and ethics. Study participants likewise discussed academic offerings and student competence, though primarily through a personalized lens, reflecting on their own practice and students within the context of their individual thresholds for what constitutes quality. Systemically, academic offerings and competence represent two areas where interest holders (including QA bodies) seek to define quality, though it is generally understood in broad terms.

Combining Hulpiau and Waeytens' (2003) and Harvey's (2006b) framework provides a comprehensive way to understand the systemic nature of quality. Following data collection however, I identified a gap in how Hulpiau and Waeytens (2003) understand the importance of the environment in which a program is offered on the quality of teaching and learning. A review of the QA bodies' standards indicates that they each have requirements for effective administration and governance, and all but CNO requires SoN to have adequate support services

and/or resources for students. Study participants also touched on issues of program environment when discussing the supports provided to students and the culture within their SoN. As a result, I updated Table 1 above and present it here as Table 15. What is lacking from Hulpiau and Waeytens' (2003) lens is represented by the asterisks in the table above.

Table 15

Revised Quality Indicators about the Purpose of QA Activities

	QA Purposes	
Quality Indicators	Improve teaching and learning	Accountability
Academic	x	x
Competency	x	x
Organization	*	x
Services	*	x

The current QA structure in Ontario SoN addresses each purpose and indicator. Study participants emphasized that the administrative unit delivering a program must maintain strong organizational structures and services to enhance teaching and learning. Indeed, CASN's accreditation criteria include multiple requirements related to the program environment, stating that a strong administrative unit

> is committed to continuous quality improvement; is accountable and takes responsibility for achieving the education program's mission, goals, and outcomes; and provides operational processes including partnerships that are aligned with the education program and relevant in the context of current sociocultural trends (CASN, 2022, p. 12).

The standards established by the QA bodies, along with the perceptions of interest holders who participated in my study, suggest that both program environment and program structure contribute to how quality is systemically understood, although because none of the QA bodies have expressly defined what 'quality' means with regards to these features, interest holders are left to interpret from the criteria what quality is expected to be. While the combined frameworks of Hulpiau and Waeytens (2003) and Harvey (2006b) are broadly applicable to HE, their application becomes more nuanced and comprehensive when viewed within the context of Ontario's SoN.

As demonstrated above, scholars define, understand, and contextualize quality in HE in multiple ways. In Ontario SoN, however, QA bodies have not provided a clear articulation of how they define quality. In the absence of explicit guidance, interest holders draw on their professionalism and disciplinary expertise to construct individual definitions and thresholds of quality in their delivery of a Nursing education program based on the criteria each QA body has identified as being required to demonstrate a program's quality. This situation conflates quality with compliance, as interest holders increasingly equate meeting QA requirements with achieving quality, rather than recognizing quality as a substantive educational outcome.

Interviews revealed widespread frustration among interest holders. Participants expressed frustration at being held to standards they did not clearly understand, at engaging in processes they perceived as bureaucratic exercises, and at their inability to connect QA indicators with broader conceptions of quality or their own educational practice. As a result, the QA culture that emerges rests on uncertainty rather than shared understanding, rendering it inherently fragile. This misalignment undermines the capacity of QA processes to support meaningful quality enhancement, an issue explored further below.

Quality in HE: Contribution to Practice and Policy. My study identifies several frameworks that could inform how the QA bodies and Ontario SoN define quality. Many elements of these frameworks emerged organically during data collection, suggesting that interest holders would welcome a more formalized definition of quality and a contextually informed systemic approach to QA work. In the absence of explicit definitions from QA bodies, SoN interest holders report feeling held to standards that neither reflect the realities of their work nor meaningfully support the discipline. Although quality remains an inherently complex and difficult concept to define, the proliferation of quality indicators within Ontario SoN has resulted in each interest holder within the SoN developing their own definition and threshold for quality. This individualization directly conflicts with the position of QA bodies, which assert authority to adjudicate program quality. As a result, interest holders feel disenfranchised, reject the power and authority of QA bodies, and lose opportunities to engage in meaningful dialogue about program quality.

Arguably, my findings suggest that developing a single, formal definition of quality applicable to all Ontario SoN is not practical, given the diversity of contexts, variables, and

interest holder needs involved. As each QA body has a different mandate, each view of quality is necessarily different. OUCQA/PEQAB seek to ensure HEIs act as responsible stewards of public funds and may therefore conceptualize quality as fitness for purpose or value for money (Harvey & Green, 1993). CNO has a clear mandate to protect the public and views Nursing education programs as the foundation new nurses require for licensure, which could be interpreted as either quality as checking standards or as transformation (Harvey & Green, 1993). Finally, CASN focuses on higher-order indicators of quality, which could align with all of the dimensions of Harvey and Green's (1993) conceptualizations of quality. Although overlap exists across these categories, each QA body interprets quality through the lens of its mandate, adding further complexity and nuance to developing a shared understanding of quality for Nursing education in Ontario and rendering a single definition impractical.

Nevertheless, the absence of a clearly articulated definition of quality among QA bodies (each asserting responsibility for assessing program quality) has created an environment in which quality remains difficult to identify. Programs may satisfy all criteria established by a QA body that purport to designate a program as high quality; however, without a clear conceptualization of quality, holistic evaluation remains limited. This study identifies a critical gap in current QA practices: the lack of an explicit definition of quality appears to contribute to diminished motivation among many interest holders to engage meaningfully in QA activities.

QA Culture in HE. The culture surrounding QA within Ontario SoN reflects the individuals involved in the system. My findings indicate that Ontario SoN's QA culture is unhealthy for several reasons. Participants consistently described the process as "time consuming" (AI1), draining their capacity for both QA-related work and other responsibilities. Faculty members tasked with QA projects may receive teaching releases, but many reported that this work occurs without formal recognition in their employment contracts or adjustments to other duties. Instead of appropriately acknowledging QA work, my study shows that it is assigned to a few individuals with minimal formal acknowledgment. This contrasts with the literature, which emphasizes the importance of recognizing faculty and staff efforts in a healthy QA culture (Burch et al., 2018; Dzimińska et al., 2018; Kotter, 2012; Newton, 2002; Stensaker & Leiber, 2015).

According to my study participants, the current QA culture in Ontario SoN is siloed. QA responsibilities often fall to a small group within the SoN, leaving many interest holders disconnected from the process. Administrators emphasized the importance of shared ownership, noting that distributing responsibility across colleagues both reduces individual burden and strengthens accountability to QA requirements. The literature consistently demonstrates that a healthy QA culture in higher education depends on a shared sense of ownership and collective engagement (Burch et al., 2018; Dzimińska et al., 2018; Kotter, 2012; Newton, 2002; Stensaker & Leiber, 2015).

In the absence of this collective approach, QA culture in Ontario SoN remains underdeveloped. Interviews revealed few examples of internal systems that meaningfully engaged a broad range of a SoN's colleagues in QA work. Instead, participants described a sense of burden among those directly involved in QA, with individuals feeling as though they were carrying the all the responsibilities for their SoN. This isolation drains individual human resources, limits transparency and open communication, and prevents QA expectations from permeating all levels of the program. Because each QA process for Ontario SoN begins with a self-study of the administrative unit and its program, this siloed approach represents a missed opportunity for interest holders to understand their institutional environment and contribute to its ongoing development.

Participants acknowledged that QA reviews aim to promote continuous improvement; however, they reported that goal-setting processes were often opaque and that QA activities did not consistently reflect the quality of education provided or program outcomes. They described the process as non-collaborative and dependent on a small group of individuals, a challenge further intensified by high staff turnover that disrupts continuity and undermines meaningful goal development. The literature consistently emphasizes the importance of involving interest holders in goal setting as a foundation for a healthy QA culture (Dzimińska et al., 2018; Kotter, 2012; Newton, 2002; Stensaker & Leiber, 2015).

The current structure of the QA system discourages interest holder engagement in goal setting by framing QA primarily as an externally driven process rather than a collectively owned one. As discussed earlier in relation to definitions of quality, identifying interest holders within QA activities is challenging. Within formal QA processes, the primary interest holder is often

implicitly positioned as the QA body itself; however, many study participants identified students and the broader health care system as the true primary interest holders. This lack of clarity complicates decisions about whose perspectives should inform QA goals. As a result, administrators, faculty, and support staff frequently experience QA as a set of prescriptive requirements that emphasize reporting, documentation, and demonstration of compliance. From this perspective, QA functions less as a mechanism for shared reflection and improvement and more as a regulatory exercise that subtly shapes professional behaviour and priorities (Foucault, 1980, 1995). When participation is oriented toward satisfying external expectations rather than contributing to internally meaningful objectives, interest holders are less likely to view themselves as legitimate contributors to goal setting, leading to disengagement.

The cyclical nature of QA further exacerbates this disengagement. Several study participants noted that, after participating in previous QA cycles, they chose not to engage in subsequent ones. This voluntary withdrawal compounds existing pressures associated with an aging workforce, as experienced interest holders who previously carried QA responsibilities retire without replacements that are experienced and knowledgeable enough to pick up that portion of their work. While meaningful QA requires broad participation in goal setting, Ontario SoN currently face a context in which few interest holders are either willing or available to engage in QA activities.

Another key feature of a healthy QA culture is the integration of QA activities into the daily work of interest holders (Harvey, 2006a; Stensaker & Leiber, 2015). However, study participants reported that QA tasks typically occur only in advance of an external review or are managed by a small subset of internal interest holders or are inhibited by internal HEI structures. My findings suggest that efforts to embed QA into routine academic and administrative practice in Ontario SoN remain limited. Closely related to this issue is the role of transparent and effective communication, which is also central to sustaining a quality culture (Dzimińska et al., 2018; Stensaker & Leiber, 2015), as it ensures that interest holders understand expectations and requirements. As discussed above, fewer staff are willing or able to engage in QA work, while SoN continue to silo QA responsibilities. A select few individuals often hold key information and do not consistently communicate it to all interest holders in a timely or effective manner. Internal structures within HEIs also create barriers: collective agreements that govern working

conditions generally do not allocate adequate time for QA work, leading interest holders to perceive it as outside their employment responsibilities; processes for making substantial changes to courses and programs are complex and lengthy, as they require approvals from multiple committees within the HEI; central authorities do not always understand the unique nature of Nursing education; and budget reductions limit the human resources available to support QA work. Together, these dynamics constrain Ontario SoN's ability to normalize QA as part of everyday practice.

The cyclical structure of the QA bodies' processes further exacerbates this challenge. With external reviews occurring only every five to seven years, and in some cases without interim reporting requirements, SoN have little incentive to engage consistently with QA expectations between cycles. Given the significant teaching and research pressures described by participants, disengagement from QA activities outside of review periods is understandable. In the absence of sustained activity, communication about QA expectations is often limited to reminders that a reporting or site-visit process is about to begin. The result is a QA culture characterized by limited participation and reactive involvement, rather than sustained, proactive engagement. Under these conditions, the development of a robust and effective quality culture within Ontario SoN remains constrained.

Finally, my findings highlight the challenges created by leadership instability across Ontario SoN. The literature consistently identifies strong leadership as a core characteristic of a healthy QA culture (Dzimińska et al., 2018; Kotter, 2012; Newton, 2002; Stensaker & Leiber, 2015), making this instability particularly concerning for the strength and sustainability of QA activities. Administrators already face heavy workloads, are retiring in increasing numbers, and are often difficult to replace due to their accumulated institutional knowledge and lived experience. Against this backdrop, participants described features of their SoN that suggest a weakened QA culture.

Although culture is difficult to build (Coyle, 2018), it typically requires a guiding vision articulated and reinforced by formal or informal leaders. In Ontario SoN, the siloed nature of QA activities often relies on formal leadership (such as dean and associate deans) to play a central role. Interviewees reflected on the importance of administrative leadership in successfully guiding QA activities and sustaining momentum but as leaders choose not to renew their

appointments or retire, SoN lose critical members of the internal teams that advocate for, coordinate, and legitimize QA work. Participants reported significant challenges in replacing these individuals, both in terms of leadership capacity and technical expertise. When these individuals withdraw from QA processes, the remaining interest holders often struggle to maintain continuity and identify a clear path forward. Together, these dynamics suggest that leadership instability not only weakens the operational capacity of QA processes in Ontario SoN, but also undermines the continuity, perceptions of legitimacy, and shared ownership required to sustain a robust quality culture over time.

QA Culture in HE: Contribution to Practice and Policy. My study makes visible how the everyday organization of QA work within Ontario Schools of Nursing actively shapes and constrains the development of a healthy quality culture. By foregrounding interest holders' experiences of fatigue, invisibility, and uneven workload distribution, this research demonstrates that QA culture is not simply a function of formal structures or external standards, but of how QA work is recognized, resourced, and embedded in academic labour. The findings highlight a critical disconnect between the expectations placed on interest holders and the institutional mechanisms used to support their engagement. In practice, QA responsibilities are frequently concentrated among a small group of individuals, undertaken without formal recognition in workload allocation or promotion criteria, and is perceived as secondary rather than integral to their work. This study extends existing literature by showing how such arrangements not only exhaust individual capacity but also undermine shared ownership of quality, reinforcing siloing, disengagement, and resistance in Ontario SoN. For practitioners and leaders within SoN, these findings underscore the need to reframe QA as collective, valued work that is structurally supported, explicitly acknowledged, and integrated into daily academic practice if quality cultures are to be sustained rather than merely performed.

My study demonstrates that the current QA system governing Ontario SoN is misaligned with the conditions necessary for effective implementation of a quality culture in HE. The findings suggest that QA policies (particularly those that rely on overlapping, externally imposed, and contextually irrelevant requirements) compound workload pressures, putting additional pressure on shrinking budgets, and contribute to disengagement among interest holders. The study therefore demonstrates that QA policy cannot be effective if it fails to account

for the human and organizational capacities required to enact it. Policies that prioritize compliance without being contextual aware of recognition, resourcing, and participation risk producing performative rather than sincere QA practices. This research supports the need for reform that aligns QA expectations with realistic workload models, encourages collaboration and alignment across QA bodies, and embeds recognition of QA work into the daily activities of interest holders. My study demonstrates the need to shift QA policy from a primarily bureaucratic mechanism toward one that actively enables sustainable quality culture within Nursing education in Ontario.

Implementation of QA in HE. Although participants in this study identified challenges within the current QA culture in Ontario SoN, they also highlighted aspects of their QA work that reflect both successes and possible areas for improvement. As discussed below, these findings align with the literature, which identifies several key characteristics (such as alignment, contextually informed practice, and collaboration) that are essential for fostering an effective QA culture to support the implementation of QA in HE. The data suggest that while some of these characteristics are present among the participants' practices, gaps remain, highlighting opportunities for targeted interventions to strengthen the QA environment.

Across both the survey and interviews, participants emphasized the need for alignment among curriculum developers, educators, OUCQA/PEQAB, CNO, and CASN. One administrator described the current siloed approach as unethical, noting that two provincial government ministries are involved in adjudicating the quality of a SoN's administrative units and programs but do not communicate effectively, despite requiring SoN to respond to overlapping and complementary requirements. Participants repeatedly expressed a desire for a collaborative approach between governmental bodies, regulatory organizations, and Nursing educators to establish standards that reflect each organization's mandate and are no more comprehensive than necessary; they raised concerns that the QA bodies include standards beyond their scope of authority, resulting in over-reporting and increased workload for SoN stakeholders.

There is also a sense that the existence of the approval reviews questions the trustworthiness of both the national education body (CASN) and the members of the profession themselves as represented by Nursing educators. A faculty member concluded that more

communication needs to happen between the SoN, QA bodies, and the wider nursing community; they advocated for groups such as OUCQA/PEQAB, CNO, CASN, the Registered Nurses' Association of Ontario, and the Canadian Nurses Association to engage in discussions to ensure the discipline has a robust QA system that allows all interest holders to engage in QA meaningfully.

The document review I conducted in Part 1 indicates a high-level overlap in the criteria set by each QA body, a perception confirmed by most study participants, who described the system as highly redundant across all three QA reviews. This redundancy highlights two key issues with the current QA system. First, it suggests that QA bodies are not contextually informed about how the system operates and do not fully appreciate the cumulative burden their requirements place on interest holders. Second, interviewees suggested that QA bodies lack insight into the practical realities of preparing students to enter the profession. Nurse educators feel they have limited/no opportunities with the QA bodies to provide input on the standards, the evidence required, or how that evidence is assessed. Consequently, there is a perception amongst SoN interest holders that adjudications are made by individuals who may not have recent exposure to clinical practice (in the case of Registered Nurses) or contemporary pedagogical approaches (in the case of educators).

Taken together, this lack of communication and contextual understanding undermines the system's ability to implement QA effectively, as interest holders perceive the requirements as disconnected from their practice. The literature emphasizes that successful QA implementation requires criteria to be informed by the contexts and experiences of interest holders (Harvey, 2004; Salto, 2018). Achieving this requires the province, the regulator, the accreditor, and the SoN to share knowledge and align expectations which requires a level of coordination that, according to my findings, is currently absent in Nursing education in Ontario, leaving QA processes inefficient and misaligned with the realities of practice.

The lack of contextual information among QA bodies contributes to a second key challenge in implementing a QA culture in HE: effective QA should be generated from a bottom-up approach rather than imposed top-down (Dzimińska et al., 2018; Newton, 2002; Stensaker & Leiber, 2015). Currently, the QA system in Ontario SoN relies on a top-down approach both from the QA bodies and within the SoN. The perception amongst interest holders that the QA

bodies undertake limited consultation on standards and procedural requirements has left them feeling disconnected from the process, creating the perception of a bureaucratic machine that simply requires SoN participation rather than engagement. In line with Harvey's (2004) observation that "accreditation is fundamentally about a shift of power from educators to managers and bureaucrats" (p. 222), some faculty participants in my study described Ontario SoN QA requirements as a performative paper exercise. This illustrates the risk of a top-down approach: interest holders do not genuinely engage with the process (Kotter, 2012).

Furthermore, given the scope of each QA body's review, the workload involved, and the consequences of failure, the SoN often enforces internal top-down participation. Notably, none of the interest holders I interviewed expressed enthusiasm for QA activities; they viewed them as necessary tasks whose barriers outweighed the benefits. The lack of enthusiasm suggests that a top-down approach dominates within the SoN, as few instances of a truly organic, comprehensive bottom-up approaches seem to currently exist. The quality culture in Ontario's SoN will remain constrained as long as both the QA bodies and the SoN continue to rely on top-down approaches rather than fostering collaborative, bottom-up engagement.

The lack of alignment between QA bodies, the absence of contextually informed requirements, and the top-down approach to QA in Ontario SoN indicate a culture that is ill-prepared to implement QA effectively. While study participants described these features of the current system, they also identified a critical internal barrier to QA work, with most highlighting the issue of limited resources. SoN are constrained with regards to both time and personnel, limiting their ability to participate in QA activities. The traditional HE structure, in which faculty are expected to dedicate roughly 40 per cent of their time to research, 40 per cent to teaching, and 20 per cent to service, does not reflect reality. Tenure and promotion decisions prioritize research output, and in professional programs like Nursing, teaching often dominates daily responsibilities. QA activities, categorized as service, rarely receive 20 per cent of a faculty member's attention, as teaching and research pressures occupy most of their schedule and other service duties may be more appealing. Consequently, even those willing to engage in QA work struggle to find the time, reinforcing the disincentive to participate and illustrating how traditional HE culture itself impedes the development of a quality culture in Ontario SoN.

Several participants noted that their SoN addressed this challenge by hiring additional faculty or support staff to create time for QA activities. Participants described instances were faculty received course release to dedicate time to QA, which necessitated the SoN to hire a part-time educator to cover the courses they were previously assigned. Participants emphasized that this redeployment of financial resources places pressure on the SoN's overall budget and can lead to decisions that are less than ideal for the administrative unit or program as a whole. They also noted that this issue has intensified in recent years due to static or declining budgets. As a result, SoN are expected to maintain the same level of QA work while managing fewer human and financial resources, further straining the system and impeding the development of a robust QA culture.

While funding for QA activities is an internal challenge, participants emphasized their perception that it is not the root problem; rather, the burdensome nature of the QA system itself was identified as the central issue, with resource constraints serving as a symptom. As discussed above, the QA bodies' lack of contextual consideration for the capacity of SoN is the source of the problem. However, the traditional structure of time allocation in HE also contributes to this issue and should not be overlooked.

Regardless of whether responsibility lies with the QA bodies, the HEIs, or both, all interest holders have contributed to the development of a system that does not adequately support a quality assurance culture in Ontario SoN. To strengthen the implementation of a QA culture, Ontario SoN may benefit from drawing on perspectives developed in industry, such as Feigenbaum's (1989) framework for implementing a TQC/TQM ethos. While conceptualizing HE as an industry may appear to conflict with traditional educational values (such as relational teaching and learning, disciplinary identity, and, for some, altruistic purposes) the contemporary reality is that HE increasingly operates within an industrialized context. As such, it stands to benefit from the careful adoption and contextual adaptation of TQM principles. Consistent with Nicholson's (2011) findings, the literature demonstrates substantial alignment between HE and TQM, suggesting that adopting TQM as an overarching philosophy could meaningfully strengthen QA efforts.

Feigenbaum (1989) conceptualizes TQC/TQM through five interrelated characteristics: it is a cultural phenomenon; a systemic process that permeates all areas of an organization; a

responsibility shared by all individuals; a practice dependent on continuous effort; and a concept defined by the end user of the organization's product or service. While Feigenbaum identifies TQC as a cultural phenomenon, all five characteristics rely on the presence of a supportive quality culture to enable QA efforts. My interview findings suggest that the first four elements of TQC/TQM are present within Ontario SoN, although they are neither formally articulated nor collectively recognized as such. Interest holders consistently expressed a desire to belong to a quality-oriented organization and to contribute to the delivery of high-quality Nursing programs. In this sense, QA activities are well positioned to function as a cultural phenomenon; however, as discussed earlier, systemic barriers currently inhibit the development of such a culture.

Interviewees included both individuals who comprised the small, siloed groups responsible for QA work and those who were not directly involved but were aware of colleagues undertaking these responsibilities. Across both groups, participants expressed a shared belief that broader participation in, and additional systemic supports for, QA activities was both necessary and desirable. They suggested that wider involvement would help alleviate human and financial resource constraints and produce more robust outcomes by incorporating a plurality of perspectives into program development and delivery. Those directly engaged in QA work tended to view it as a shared responsibility across the SoN, while those less involved often felt that their contributions were not critical enough to justify overcoming the systemic barriers to participation as outlined earlier. Although the cyclical nature of QA work is unavoidable (short of program closure or withdrawal from accreditation) participants identified a lack of urgency between review cycles as a key challenge to sustaining engagement. Heavy workloads and limited resources further compound this issue. Nonetheless, many interviewees acknowledged the value of cyclical reviews in supporting growth and development when programs actively engage in continuous improvement. At the same time, participants noted a common practice of deferring action on recommendations until the year preceding the next review, thereby undermining the potential benefits of a continuous improvement model.

Feigenbaum's (1989) final conception of TQC/TQM (defining quality according to the end user) also emerged in the interviews, primarily as a gap within current QA practices. As discussed above, interest holders experience significant ambiguity in identifying the ultimate end user of QA activities. The widespread perception of QA as a bureaucratic exercise with limited

practical value to program development and delivery suggests that interest holders often view QA bodies as the primary beneficiaries of these processes. In contrast, the faculty I interviewed frequently articulated the view that students and the broader health care system are the true end users of their efforts. This dissonance complicates the application of TQM principles to QA work, as uncertainty about who benefits from QA outcomes limits the ability to use those outcomes meaningfully to improve programs.

Taken together, TQC/TQM offers a promising framework for strengthening quality culture in HE. In the context of Ontario SoN, the conditions are conducive to such an approach; however, realizing its potential would require concurrent attention to the systemic barriers that currently constrain engagement, clarity, and sustained participation in QA activities.

A more HE-focused framework for considering how best to implement a quality culture can be found in the integrated findings of Tutko's (2019) literature review on quality culture research in HE and Hildesheim and Sonntag's (2020) dimensions of quality culture. Viewed through this combined lens, Ontario SoN do not currently appear to be structurally positioned to support Tutko's (2019) indicators (commitment, communication, information, leadership, participation, quality objectives, quality values, and trust) nor Hildesheim and Sonntag's (2020) two core dimensions of a quality culture: governance structures and psychological considerations. Internal barriers (such as resource constraints and limited engagement with QA activities) mean the culture is insufficient to support the scope and intensity of the current QA bodies' requirements for Ontario SoN.

These misalignments can be understood as the effects of QA operating as a technology of governance, in which QA body frameworks seek to shape institutional behaviour through externally imposed standards, metrics, and review cycles (Foucault, 1995). While such mechanisms are intended to ensure accountability, they also function as normalizing practices that privilege compliance over contextualized understandings of quality. In this environment, governance structures emphasize surveillance and reporting rather than shared responsibility and collective meaning-making, weakening the conditions necessary for a quality culture to emerge.

Moreover, while interest holders may express conceptual support for QA, the systemic barriers to participation discussed earlier undermine the psychological conditions required for

sustained engagement. The bureaucratic nature of QA processes, persistent time constraints, and the absence of contextually relevant requirements position interest holders primarily as subjects of assessment rather than as co-creators of quality. This dynamic reflects what Foucault describes as the disciplinary effects of power, whereby individuals internalize external expectations without developing a sense of ownership or agency (Foucault, 1995). As a result, participation becomes procedural rather than meaningful, and psychological investment in QA remains limited.

Similarly, the implementation of Tutko's (2019) quality culture appears to be inconsistent across Ontario SoN. Study participants acknowledged that their HEIs and administrative units routinely engage with all three QA reviews; however, they also described uneven levels of commitment and participation among colleagues, unclear or fragmented communication channels, inconsistent dissemination of information, leadership gaps or an over-reliance on a small group of individuals, and a perceived lack of validity in the metrics used to assess quality. Each of these factors shapes the degree of trust that interest holders place in the QA system, both in relation to the QA bodies and internally among colleagues.

Taken together, the combined frameworks of Tutko (2019) and Hildesheim and Sonntag (2020) reveal that the current QA system in Ontario SoN functions more as a regulatory and disciplinary apparatus than as a supportive infrastructure for cultivating a shared quality culture. Until governance structures and psychological conditions are realigned to redistribute authority, recognize contextual expertise, and foster genuine participation, the development of a robust quality culture within Ontario SoN will remain constrained.

Implementation of QA in HE: Contribution to Practice and Policy. My study has identified that the current quality culture in Ontario SoN is not effective in supporting the current requirements set out by the QA bodies. Interest holders described systemic barriers that limit their ability to engage meaningfully in QA activities, thereby undermining the intended purpose of QA: ensuring the delivery of high-quality academic programs. While elements of an effective quality culture and potential implementation strategies emerged organically through the survey and interviews, participants consistently conveyed that the structural and systemic barriers they encounter are too substantial to overcome within the current framework. Given that culture is produced and sustained through the individuals who participate in it, and that QA activities

cannot be meaningfully undertaken without their engagement, the perceptions expressed by study participants point to fundamental weaknesses in the existing system and raise concerns about the long-term sustainability of QA activities in Ontario SoN.

At the core of these sustainability concerns are constraints related to both financial and human resources. Participants emphasized that the repetitive and overlapping nature of QA bodies' requirements, combined with static or declining budgets within SoN, has created an environment in which interest holders are expected to do more with fewer resources. The lack of alignment among QA bodies further compounds these challenges and inhibits the development of a cohesive and enduring quality culture. Although those interviewed expressed strong commitment to their students, their SoN, and their academic programs, the systemic barriers described throughout this study significantly limit their capacity for sustained engagement in QA activities. As a result, while the current quality culture in Ontario SoN is demonstrably flawed, my findings also suggest that it retains the potential to more closely reflect the ideals articulated in the literature, provided that these systemic constraints are addressed.

Common Elements of QA Reviews in HE

While each QA body has its own criteria and processes, my study identified that Ontario SoN interest holders feel that the level of commonality is redundant and detrimental to their work as educators. This perception is supported by the document analysis I undertook in Part 1 of my study. There is a substantial, high-level overlap in the criteria set by each QA body as a marker of quality. In addition, procedurally, each body requires a self-study report, a site visit (with the exception of CNO as the regulatory review is a desk-top exercise), a response to the peer-review report of the visit, and usually some sort of follow-up activities. Interest holders feel the workload created by multiple processes is onerous, requiring repetition of tasks for each one.

In addition to similar processes, the QA bodies have similar standards, meaning SoN interest holders are not only duplicating processes but also duplicating reports that require slight variations in how information is presented. This is reflective of Harvey's (2004) claim that QA processes are viewed negatively by interest holders because of the perception that they are bureaucratic exercises. While none of the study participants questioned the need for QA reviews or the individual steps in the processes, the impact of the requirements on interest holders presents barriers and risks to Ontario SoN.

Common Elements of QA Reviews in HE: Contribution to Practice and Policy.

While each QA body operates under a distinct mandate, all pursue a common objective: to ensure that Nursing programs meet an acceptable standard of quality though, as discussed above, this standard is not explicitly defined but instead inferred through required criteria and processes. A central challenge within Ontario's QA system is the level of granularity at which each body articulates its understanding of quality. As demonstrated in the document review in Part 1, the criteria established by OUCQA/PEQAB are necessarily broad, as they must apply across all disciplines in Ontario's colleges and universities; CNO's standards are primarily oriented toward public safety and entry-to-practice requirements; and CASN's standards emphasize educational excellence within Nursing education. While these standards differ in focus, they overlap in ways that generate significant duplication and unnecessary administrative work for SoN. My study validated both the existence of overlapping QA requirements and the perceived burden these redundancies create for interest holders within Ontario SoN.

Several study participants suggested that greater alignment among QA bodies could reduce this redundancy by eliminating duplicative reporting and encouraging each body to adhere more closely to its core mandate. In this model, a single, comprehensive set of criteria (most commonly identified by participants as CASN's) could function as the highest common denominator. If a SoN can demonstrate compliance with the most rigorous and detailed criteria, it could reasonably be assumed that it would also meet the requirements of less comprehensive criteria. Such an approach would reduce the administrative burden on SoN while promoting greater consistency and coherence in the evaluation of Nursing education quality across Ontario.

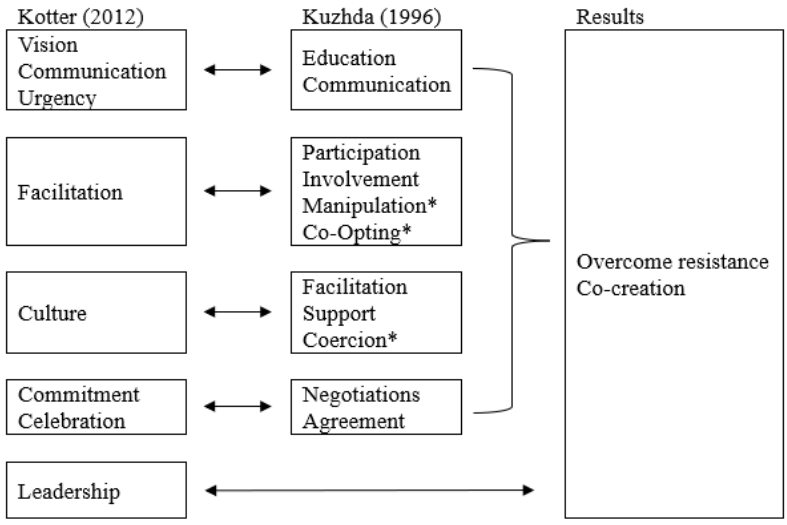
Change Management

Interest holders engage with QA work in ways that closely mirror their engagement in change management projects: they must reflect current practices, contribute to planning processes, and take action to move forward with improvements. Viewing QA work in Ontario SoN through a change management lens therefore provides a useful framework for analyzing study participants' perceptions of QA processes and their experiences within them. The analysis below uses a change management lens, positioning QA activities as analogous to change projects. While study participants did not speak directly to change management principles, those principles emerged organically throughout the interviews. Elements of Kotter's (2012) and

Kuzhda's (1996) combined frameworks for effective change implementation (Figure 5) surfaced repeatedly, suggesting that, much like the integration of TQM principles, change management concepts are already implicitly informing QA practices in Ontario's SoN.

Figure 5

Change Management Principles and Strategies to Overcome Resistance to Change



Note. This figure is reproduced from Chapter 2 to provide contextual information for the analysis presented in this chapter.

A central theme that emerged in Part 2 of my study was the absence of a clear and shared vision for QA activities within Ontario SoN. Persistent confusion about who constitutes the ultimate end-user of QA work (whether QA bodies, students, the health-care system, or some combination thereof) is compounded by the perception that QA processes are overly bureaucratic. This dynamic appears to shift attention away from enhancing program quality and toward demonstrating conformity with external requirements. As a result, interest holders are often unclear about both the purpose of QA activities and the audiences they are meant to serve. In the absence of a coherent and shared vision, QA is experienced less as a quality-enhancing endeavour and more as a recurring cycle of administrative compliance.

Kotter's (2012) framework for successful change management emphasizes that effective initiatives require a clearly articulated vision which is communicated consistently and accompanied by an appropriate level of urgency. When these foundational elements are weak or

absent, interest holders are less likely to engage meaningfully. Consistent with this, participants in my study reported diminished confidence in their SoN's capacity to carry out QA work effectively, reflecting the consequences of a system in which expectations are imposed but not collectively interpreted or owned.

The top-down approach discussed above further limits interest holders' ability to contribute to the development of a vision that resonates with their professional values and day-to-day practice. Rather than emerging through dialogue and collective interpretation, expectations for quality are largely established externally and reinforced internally through compliance requirements. As a result, QA activities are often experienced as regulatory obligations rather than as opportunities for shared learning or improvement, which discourages broader engagement.

The siloing of QA responsibilities within small groups of interest holders compounds this challenge. Concentrating QA knowledge and tasks within a limited group reduces transparency and restricts opportunities for wider participation. Over time, this arrangement normalizes QA as a specialized administrative function rather than a collective responsibility, limiting the development of a collaborative, co-creative approach to quality.

Interview data also revealed significant variation in how urgency around QA activities is communicated. In some cases, QA reviews were framed as high-pressure events requiring rapid action; in others, urgency was minimal or absent, particularly when QA work remained largely invisible to those not directly involved. Kotter (2012) emphasizes that urgency must be carefully balanced to motivate action without generating anxiety or disengagement. Study participants' accounts suggest that this balance is not consistently achieved within Ontario SoN.

These issues point to the importance of education and sense-making in the organization of QA activities, as emphasized by Kuzhda (2016). Those coordinating QA work must be aware of how QA is positioned within the broader quality culture of the SoN. Without a shared vision, appropriate urgency, and inclusive communication, QA activities risk remaining compliance-driven rather than serving as meaningful mechanisms for sustained program improvement.

Although most SoN provide formal opportunities for interest holders to participate in QA-related activities, few individuals choose to do so. Instead, interviewees consistently

described a pattern in which a small, dedicated group assumes responsibility for the majority of QA work. As Kuzhda (1996) cautions, such imbalances often give rise to subtle forms of manipulation, co-opting, or coercion, wherein individuals feel pressure (whether self-imposed, peer-driven, administratively encouraged, or systemically reinforced) to participate. As reported by interviewees, this dynamic contributes to a perception of QA work that it is burdensome and contextually irrelevant, leading some of those who engage in one cycle to withdraw from future involvement.

The result is a culture characterized more by compliance than commitment and by obligation rather than shared ownership, conditions that fundamentally undermine the development of a sustainable quality culture. In contrast, Kotter (2012) emphasizes facilitation as a core strategy for effective projects, arguing for the empowerment of interest holders through inclusion, clarity, and support. By addressing the systemic barriers identified above, providing education about QA requirements, and aligning QA activities with the SoN's broader vision, mission, and mandate, the siloing described by study participants could be reduced. Increasing meaningful participation and involvement (Kuzhda, 1996) is essential to shifting QA from a compliance-driven exercise to a co-created quality culture capable of realizing the intended benefits of Ontario's SoN QA requirements.

Kotter's (2012) framework also highlights the importance of commitment and the celebration of wins. Kuzhda (1996) similarly underscores the value of agreements that strengthen stakeholders' willingness to support change. Yet interviewees rarely identified opportunities for celebration or recognition within QA processes. Instead, what emerged was a profound individualized commitment of interest holders to their students and to the quality of their programs. Despite systemic barriers and frustrations, this commitment appears to be the primary driver that sustains engagement with a QA system that, when viewed through a change-management lens, presents significant challenges. It is this commitment, rather than the communication of a clear vision, or systemic incentives, that keeps interest holders re-engaging in QA activities cycle after cycle.

Underpinning these efforts is organizational culture. As Kotter (2012) argues, culture is powerful because it is pervasive, self-perpetuating, and enacted largely without conscious intent which are all qualities that make it resistant to change. Within Ontario's SoN, the quality culture

described above is not currently structured to support the scope and demands of QA activities. Although the pursuit of quality is pervasive (as evidenced by the requirement to engage in three distinct QA reviews and by the professional commitments articulated by study participants) the absence of a clear definition of quality, coupled with the perception of QA as a bureaucratic exercise, has contributed to interest holder disengagement.

This dynamic can be understood as the subtle exercise of power through normalized procedures. QA processes operate as routines of documentation, reporting, and compliance, producing a "disciplinary gaze" (Foucault, 1977) in which interest holders internalize expectations and self-regulate their participation, often prioritizing formal compliance over meaningful engagement with program quality. The cyclical nature of QA reviews reinforces this effect: the authority of QA bodies is reproduced through repeated review cycles, while interest holders' disengagement becomes performative. Without intentional mechanisms to involve SoN interest holders in shaping QA requirements, these normalized patterns of power and compliance further entrench resistance, making it difficult to cultivate a quality culture that supports proactive, meaningful participation and continuous improvement.

Change Management: Contribution to Practice and Policy. My study demonstrates that framing QA activities as change projects would allow interest holders to conceptualize how to strengthen engagement and participation in these activities within Ontario SoN. By applying Kotter's (2012) model, the research shows that the absence of a clear vision, limited communication, and inconsistent urgency contribute to disengagement and reinforce a top-down, bureaucratic QA culture. Practically, these insights suggest that leaders can improve QA outcomes by co-creating vision and goals with interest holders, distributing responsibility across more stakeholders, and embedding QA activities into daily routines. Additionally, the subtle dynamics of power and surveillance (Foucault, 1980, 1995) highlight the need to recognize how bureaucratic structures shape perceptions of legitimacy and constrain engagement. By acknowledging and addressing these dynamics, interest holders can create a culture of proactive participation, making QA work meaningful rather than perfunctory.

My study also underscores the need for frameworks and requirements that account for the human and organizational dimensions of QA, rather than solely focusing on compliance. Findings indicate that top-down mandates, misaligned standards, and resource constraints hinder

the effectiveness of QA systems and diminish interest holder engagement. Policy initiatives that incorporate change management principles (such as clear communication of purpose, distributed responsibility, and support for continuous engagement) could reduce resistance to QA work and enhance sustainability. Furthermore, explicitly identifying and considering the perspectives of end-users (i.e., QA bodies, students, healthcare system, etc.) in designing QA expectations would help align standards with practice realities. Such policies would not only improve the legitimacy of QA processes but also cultivate a quality culture that is adaptive, participatory, and resilient.

Change Fatigue. Nursing education faces a substantial threat of change fatigue. Rapid shifts in technology, evolving cultural expectations, and fluctuating financial patterns affect the health care system and HE, and Nursing education (situated at the intersection of these settings) absorbs the cumulative pressures of both. Although study participants did not explicitly name "change fatigue," the phenomenon was evident throughout their interviews. Drasin and Holiday's (2024) Energy Commitment Model (ECM) offers a useful lens for understanding how the current QA requirements contribute to this fatigue within Ontario SoN. According to the ECM, change fatigue arises from three interrelated factors: resource availability, energy direction, and engagement.

Interest holders most clearly expressed change fatigue through issues with resource availability. In the ECM, resources refer to cognitive bandwidth, available time, emotional reserves, and support networks (Drasin & Holiday, 2024). Interviews revealed a common thread: interest holders feel they lack time for the basic elements of their jobs (i.e., research and teaching), let alone for QA activities. With class sizes increasing, faculty hiring budgets decreasing, and growing pressures around teaching and research expectations, interest holders hesitate to engage in any activity not directly related to their immediate responsibilities. These conditions reduce their cognitive bandwidth across all dimensions of work and deplete their emotional reserves, and many interviewees openly expressed frustration with the current system. As a result, support networks remain limited, especially given the lack of willingness to (re)engage in QA processes (as discussed above) that has not been effectively managed by interest holders.

ECM's "energy direction" factor refers to the level of commitment that interest holders bring to a change process, which can take three forms:

- Affective commitment: when an interest holder personally identifies with the change.
- Continuance commitment: when an interest holder engages with the change because they see no alternative.
- Normative commitment: when an interest holder feels cultural pressure to engage with the change.

In Ontario SoN, interest holders exhibit low affective commitment. Interviews revealed that participants often feel that QA requirements do not reflect their contextual realities, leading them to reject engagement with, and changes stemming from, QA reviews. Continuance and normative commitments were more prominent. Small groups of interest holders who regularly engage with QA acknowledge that changes and actions are necessary and participate, albeit reluctantly. More commonly, participants described normative commitment, where the culture of the SoN prioritizes approval and accreditation, possibly reflecting a persistent, past-oriented construct in which the status quo prevails, rather than the current state of operations. The key issue lies not in the type of commitment but in its intensity, which can contribute to change fatigue. Despite deep commitment to students, study participants indicated that resource constraints and perceptions of QA requirements threaten their ability to sustain the desired level of engagement.

The final element in the ECM is the engagement threshold, or the "tipping point" at which an interest holder has sufficient energy and commitment to engage in a change. The more fatigued an interest holder becomes, the higher this tipping point rises, and the more intervention leaders must provide to get the initiative back on track. Interviews revealed an artificial engagement threshold exists in Ontario SoN for QA work: interest holders continue participating for the sake of their students and programs, but, if left to their own discretion, they would minimally engage with QA activities. While interest holders currently complete QA work, any loss of commitment to student outcomes would raise their engagement threshold to an extreme level, making further participation difficult. Targeted interventions, as discussed below, could help align the engagement threshold with interest holders' actual capacity to engage in QA work.

Change Fatigue: Contribution to Practice and Policy. My study highlights how change fatigue limits interest holders' engagement in QA activities within Ontario SoN,

revealing the practical implications of resource constraints, low affective commitment, and artificially high engagement thresholds. These insights emphasize the need for leaders to actively manage energy, resources, and motivation when implementing QA initiatives. By recognizing and addressing the factors that contribute to change fatigue, QA bodies and interest holders can co-design QA processes that are more engaging, sustainable, and aligned with interest holders' actual capacities.

My work also underscores the importance of designing QA systems that account for the human limits of interest holders. Policies should consider resource allocation, realistic workload expectations, and mechanisms to enhance commitment, ensuring that participation is both feasible and meaningful. Furthermore, policy frameworks could incorporate principles from the ECM (Drasin & Holiday, 2024) to explicitly measure and support engagement thresholds, rather than assuming uniform capacity across all staff. By embedding these considerations into QA policies, the QA bodies and SoN can reduce resistance, align expectations with operational realities, and promote a quality culture that sustains both program excellence and interest holder well-being.

Resistance to Change. As change fatigue persists, it can evolve into resistance to change. Resistance to change defines a wide range of human behavior that reacts to a change in a person's environment (Caruth & Caruth, 2013; Ford et al., 2002; Kuzhda, 2016). Resistance in HE takes on a unique profile compared to resistance in other settings for contextual reasons. While my findings identified some casual references to interest holders expressing resistance, my survey responses and interviews raised concerns about a culture that is actively resisting QA requirements. Thus, considerations of resistance to change provide a useful model for understanding resistance to QA activities. This dynamic is created by faculty autonomy and conservatism, perceptions that QA is a bureaucratic exercise, and perceptions that the existing QA system does not suit Ontario SoN's reality.

Engaging with QA in Ontario's SoN is often constrained by the very interest holders tasked with doing so. During interviews, participants noted that faculty frequently have little incentive to engage in QA activities, despite being the primary source of knowledge about specific program elements and their delivery. This creates a paradox: interest holders are essential to the success of QA initiatives but remain largely disengaged. The siloing of QA work

to a small subset of individuals exacerbates the problem, reinforcing the perception that most interest holders are not involved in QA processes. When broader participation is requested, resistance often emerges, fueled by the systemic barriers previously discussed.

Coupled with the faculty's sense of autonomy is the deep vein of conservatism that runs through HE. Due to competing priorities, resistance arises from the traditional structure and expectations set by HEIs; QA, which falls under the 'service' category of a faculty member's employment agreement, rarely benefits career advancement and is overlooked in favor of more traditional (read: conservative) activities such as teaching and research. As a result, Ontario SoN are primed to resist QA-required change because interest holders do not see the value in participation. Conservatism, as related to resistance, is a common theme in the literature (Caruth & Caruth, 2013; Chandler, 2013; Lane et al., 2015; Parker, 2002; Rosenberg, 2018; Salto, 2018) and was reflected in the survey responses and interviews in my study.

The over-bureaucratic nature of the current process is reflected in the points discussed above related to both the culture and implementation of QA in HE. Specifically, study participants reported their perceptions that the workload is burdensome, the processes are duplicative, and the process is valued over teaching and other duties in a SoN. As a result, interest holders who are part of the silos working on QA activities reported feeling as if their primary job during the lead-up to a review is to write QA reports. The literature indicates a disinclination to participate in QA in HE due to the increased workload and perceptions of bureaucratization (Burch et al., 2018; Ehlers, 2009; Harvey, 2004; Shawer, 2013). According to my study's findings, both of these elements are present in nursing education QA in Ontario, priming the QA culture for resistance.

As discussed above, power and resistance are complementary and mutually constitutive, a concept that applies not only to individuals but also to institutions. In the context of Ontario SoN and the QA requirements, participants described the bureaucratic nature of the approval process as "ridiculous [and] obscene" (AI6), expressing frustration at what they perceived as a systemic questioning of their professional expertise as both nurses and educators. Yet participants also acknowledged that the power exerted by the QA bodies can enhance program quality. Closer analysis suggests that, although the ultimate end-user of QA work remains unclear to interest holders, the primary benefit of engaging with the QA bodies arises not from

those external authorities but from the self-study phase, where the SoN engages in critical self-examination to identify areas for improvement. While the overt power of the QA system resides with the QA bodies, the covert power lies with the interest holders in SoN, who are positioned to extract the greatest benefit from QA activities. This dynamic illustrates how resistance functions as a form of speaking truth to power (Foucault, 1976/1990), signaling where QA expectations and processes may be misaligned with contextual realities or interest-holder needs. In this way, expressions of resistance, as described by Choi and Ruona (2011) and Ford and Ford (2009), provide critical feedback, highlighting areas for refinement in standards and processes, and offering opportunities to strengthen the QA system. When interpreted constructively, this power dynamic not only reveals system gaps but also supports more meaningful engagement by SoN interest holders.

A related theme that emerged from my discussions with interest holders was that QA reporting often takes precedence over actual quality improvement. Both survey and interview data suggest that QA work is perceived to prioritize completing a bureaucratic checklist rather than advancing program quality. This reflects how power in QA processes operates through surveillance, documentation, and normalization rather than direct coercion, shaping what is perceived as legitimate practice while constraining interest holders' ability to act autonomously (Foucault, 1976/1990; Ball, 2012). This perception, regardless of the peer-review processes and intended outcomes of QA reviews, raised concerns among participants about the true value of the QA system for Nursing education in Ontario. When a system is experienced as performative rather than enabling, interest holders are less likely to engage meaningfully, and compliance can replace critical reflection and improvement (Choi & Ruona, 2011; Ford & Ford, 2009). If over-bureaucratization persists, the authority and legitimacy of the QA system are at risk; coupled with competing priorities and static or declining resources, interest holders appear primed to disengage from elements of the process.

Given that CASN accreditation is the only voluntary component of the QA system, and, as noted in Part 1 of my study, also the most comprehensive, such disengagement could have serious consequences for the Nursing education landscape, limiting opportunities for tangible program improvements. To address this issue, strategies are needed to reduce the perception of bureaucracy, reinforce QA as a tool for improvement, and create conditions in which interest

holders can actively participate in shaping program quality (Dzimińska et al., 2018; Harvey, 2006a; Newton, 2002; Stensaker & Leiber, 2015).

A critical dynamic that emerged from my data is the perception that the current QA system does not align with the realities of Ontario SoN, particularly in its tendency to devalue teaching. This perception reflects a culture resistant to QA. Two key themes emerged from my interviews that illustrate how the system is perceived to devalue teaching. First, participants reported that QA activities consume time that could otherwise be devoted to teaching. With increased class sizes and evolving expectations for student engagement, and amid workforce shortages, interviewees noted that teaching has become more demanding in recent years. The addition of QA responsibilities forces faculty to make trade-offs between teaching and QA, creating a sense that QA is prioritized over one of the central purpose of their work (i.e., teaching).

Second, several participants expressed that CNO's prescriptive requirements for curriculum content constrain their academic freedom by telling them what to teach and by limiting their ability to teach in ways they deem most effective. The QA system operates as a mechanism of disciplinary power, shaping professional practices and subtly regulating what counts as legitimate teaching and program delivery (Foucault, 1976/1990; Ball, 2012). By imposing standardized requirements, QA bodies exert authority not only over what is taught but also how faculty understand their roles as educators. This produces a tension in which interest holders negotiate between compliance with external expectations while trying to maintain their professional autonomy, revealing a source of resistance that emerges whenever disciplinary power is perceived to challenge core aspects of identity (Foucault, 1980; Choi & Ruona, 2011). In this way, the tensions between the QA bodies and the SoN described by participants reflects both the regulatory power of QA bodies and the covert agency of educators, who navigate, reinterpret, or resist these demands to protect the integrity of their professional practice of teaching.

My study found that interest holders in Ontario SoN perceive the QA system as insufficiently flexible, with administrators and faculty reporting that the expectations set by QA bodies limit their ability to innovate or provide adaptable program offerings. Participants described a tension between the desire to implement unique pedagogical approaches, delivery

methods, or content areas and the need to comply with standardized QA requirements. Because some program features do not easily fit within the criteria of a QA body's standards, SoN often hesitate to deviate from traditional program structures, reinforcing conformity and reducing opportunities for experimentation. To mitigate resistance and support meaningful QA engagement, the system must be perceived as flexible and must explicitly recognize the value of teaching and pedagogical innovation (Dzimińska et al., 2018; Harvey, 2006a; Salto, 2018; Stensaker & Leiber, 2015).

This current dynamic is problematic as inflexibility generates resistance. Foucault (1980, 1995) emphasizes that modern institutions exercise power through "normalizing judgments" and "technologies of government," which shape what counts as acceptable practice and subtly constrain behaviour without issuing overt prohibitions. When QA bodies prioritize standardization and uniform criteria, they create a normative framework that programs must follow, even when pedagogical needs or creative approaches fall outside these norms. In this context, the hesitation of SoN to experiment with novel curricular designs or delivery methods can be understood as a rational response to a system that rewards conformity and penalizes deviation from the traditional. Over time, these regulatory pressures create a culture in which innovation feels risky, burdensome, and unrewarded, leading interest holders to disengage or comply minimally which are behaviours that, in turn, reinforce resistance to QA processes. Ensuring that QA bodies acknowledge contextual variation and support pedagogical diversity is therefore not only a practical necessity but also a means of rebalancing power relations that currently favour homogeneity and inhibit innovation.

Resistance to Change: Contribution to Practice and Policy. My study highlights how resistance within Ontario SoN manifests in response to QA activities, providing insight into how interest holders navigate competing priorities and limited resources. The findings underscore the need for strategies that acknowledge and address the underlying causes of resistance, including faculty autonomy, perceptions of bureaucratic QA processes, and misalignment between QA requirements and contextual program realities. By using a resistance to change model to explicitly address resistance as a response to QA requirements, SoN leaders can create mechanisms to support engagement, reduce change fatigue, and overcome said resistance, ultimately fostering a more collaborative and sustainable quality culture.

My findings also indicate a need for QA frameworks to consider the contextual realities of the institutions and professionals they regulate. Undertaking consultation with interest holders in the development of criteria and expectations would encourage flexibility in how QA requirements are met and provide clear definitions of quality that allow for contextual interpretation without compromising accountability. By recognizing and integrating the dynamics of resistance into QA policy design, QA bodies could create systems that promote compliance through meaningful engagement rather than coercion, thereby enhancing both the legitimacy and effectiveness of QA in Nursing education in Ontario.

Overcoming Resistance to Change in HE. Throughout my study, I have presented various frameworks and lenses for addressing resistance amongst interest holders. QA reviews face the same challenges as broader change initiatives, given their complexity and need for coordinated action, making the application of change management principles (specifically strategies to overcome resistance to change) a relevant approach in this context. Although few study participants explicitly discussed change management, change fatigue, or resistance to change, these themes emerged organically during interviews, indicating that interest holders in Ontario SoN are well-positioned to apply these strategies to enhance their QA work.

My study's participants consistently articulated a need for a clear and shared vision of QA activities, alongside an understanding of requirements that is contextually relevant to their programs. While administrative structures within HEIs and SoN may intend to support QA work, interest holders report persistent fatigue and demonstrate a pattern of disengagement. Systemic barriers (ranging from increasing workloads and resource constraints to accelerated institutional and cultural changes) permeate daily responsibilities, resulting in engagement with QA primarily driven by professional commitment to students rather than alignment with the expectations of QA bodies.

Leadership in Ontario SoN face the same pressures as faculty, compounded by the added responsibility for the overall success of their administrative units and programs. The complex environment in which administrators lead their interest holders has strained their capacity in all areas, including QA work, reducing their ability to communicate needs with appropriate urgency, facilitate QA work effectively, and celebrate successes. As a result, administrators and interest holders resort to informal and formal manipulation, co-opting, and coercion to complete QA

reviews as is evidenced by the small groups of siloed individuals who undertake QA activities, which undermines both commitment to QA and the culture needed to support it.

According to my study participants, interest holders in Ontario SoN are actively resisting QA activities. They do so for a range of personal and professional reasons, yet the effect is consistent: SoN forgo opportunities to engage in, and cultivate, a quality culture that could benefit all interest holders. The structures and expectations imposed by QA bodies contribute significantly to this resistance, shaping a system in which compliance often supersedes meaningful engagement. Applying strategies designed to address resistance to change could enable QA bodies and SoN to mitigate this disengagement. As consistently reflected in surveys and interviews, interest holders demonstrate deep commitment to program quality and student outcomes; although currently resistant, they are well-positioned to become co-creators of a QA system that is contextually relevant, effective, and efficient.

This resistance can be understood not as negativity, but as a productive response to power relations embedded within the QA system (Foucault, 1976/1990; 1980). The prescriptive structures of QA bodies operate as "technologies of government" (Foucault, 1995), shaping the norms and expectations for program delivery and evaluation, while simultaneously constraining autonomy and innovation. Interest holders' resistance thus signals misalignments between institutional expectations and contextual realities, highlighting areas in which systemic improvements are required (Choi & Ruona, 2011; Ford & Ford, 2009). Recognizing resistance as an indicator of structural rather than individual deficits allow QA bodies and SoN to foster a quality culture in which engagement is meaningful, sustainable, and aligned with the overarching goals of Nursing education.

Overcoming Resistance to Change in HE: Contribution to Practice and Policy. My study indicates that resistance to QA activities has become deeply embedded within the culture of Ontario SoN. Foucault's (1976/1990, 1980) concepts of power and resistance illuminate this dynamic: QA bodies exert normative power through prescriptive and bureaucratic standards, while interest holders exercise a form of covert agency in navigating, negotiating, or selectively engaging with these expectations. These acts of resistance, rather than representing opposition to quality itself, reveal misalignments between QA processes and the operational realities of SoN, providing critical feedback on where processes require refinement (Choi & Ruona, 2011; Ford &

Ford, 2009). Importantly, despite these expressions of resistance, interest holders remain deeply committed to program quality and student outcomes, highlighting the coexistence of professional dedication with critical engagement. This interplay underscores how power, agency, and professional responsibility shape the enactment of QA, and suggests that fostering a more contextually responsive and participatory QA system could transform resistance into a productive mechanism for improving quality culture.

Overcoming resistance to QA work in Ontario's SoN will require adequate resources, strong leadership, and a supportive culture. As HE adopts industry principles such as TQM to define and pursue quality, it should also integrate change management principles. While a QA review may not always necessitate large-scale change, it invariably requires self-evaluation and action. Applying change management principles to QA activities provides a practical strategy for mitigating resistance and enhancing engagement in the QA process in Ontario's SoN.

Summary of Contributions of My Findings

QA activities are an important element of Nursing education in Ontario, but my study found that the current requirements burden interest holders in SoN. By undertaking a high-level mapping of the criteria requirements and the process elements of each QA body in Part 1, I demonstrated overlap in the criteria, processes, and philosophies across the approval and accreditation reviews. This foundation then informed my discussions with interest holders in the system in Part 2, allowing me to surface their generally negative perceptions of the excessive requirements of the current system, although study participants understand the purpose is necessary. My study's findings highlight the need to reform the QA system for Ontario SoN.

Through collecting and analyzing both quantitative and qualitative data, this multimethod study provides all interest holders in the system (both within the SoN and the QA bodies) with information on the human impact of current QA requirements and which elements of the system could be reformed. The mapping of requirements I undertook in Part 1 of my study indicates two important findings: first, that the processes for QA reviews are similar across all QA bodies. Secondly, CASN accreditation covers the majority of criteria areas that all QA bodies cover (with the exception of an explicit requirement for policies around government regulations, though these areas would be covered under Educational Unit Standard 1, Key Element 7: "Clearly defined, transparent organizational structures, policies, and processes facilitate the

effective functioning of the baccalaureate nursing education program(s)" (CASN, 2022)). In light of this coverage, CASN could stand as an effective QA review for all QA bodies within the system.

To ensure adequate coverage and to accommodate the nuances of other bodies' mandates, CASN's criteria could be modified, or specialized criteria applicable specifically to Ontario SoN could be adopted. In fact, CASN and CNO employed this approach until 2015, when additional criteria for Ontario SoN addressed regulatory and public safety concerns directly. Under this arrangement, CNO relied on CASN's accreditation findings when adjudicating SoN approval, eliminating the need for a separate regulatory review and reducing the QA reporting burden for Ontario SoN. Other regulators have similarly leveraged CASN's processes. During my tenure at CASN, for example, the Association maintained an informal agreement with the College of Registered Nurses of Prince Edward Island: a staff member from the College could attend accreditation visits within their jurisdiction, observe the process, and access documentation, enabling the regulator to make independent approval decisions without imposing additional reporting requirements or administrative strain on the SoN.

Nursing's regulators are not the only professional bodies in Canada to incorporate accreditation findings into their approval mechanisms. Engineering employs a hybrid approval/accreditation system. Because there is no entry-to-practice examination for the profession, provincial engineering regulators rely on the Canadian Engineering Accreditation Board's (CEAB) accreditation of programs as evidence that graduates are academically prepared to pursue professional licensure (CEAB, 2025). While the system is classified as an accreditation process, the standards reflect a combination of approval and accreditation requirements. Similar to CNO's prescriptive standards dictating the content Nursing programs must include, Engineers Canada establishes minimum thresholds for specific curriculum components. The criteria also encompass more traditionally accreditation-focused areas, including the administrative processes of the academic unit, the overall program environment, and the qualifications of faculty members. The benefit of this system is that Engineering programs are only required to participate in two QA reviews (OUCQA/PEQAB and CEAB), eliminating the need for an independent review by the regulator and thereby reducing the workload of Engineering programs by one third.

My study demonstrates that both Ontario's Nursing education interest holders and the QA system as a whole would benefit from the adoption of a more collaborative approach, similar to those that have existed previously in Ontario and that exist in other professional disciplines. This approach would substantially reduce the workload for interest holders in Ontario SoN, thereby improving the experience and outcomes. Because CASN accreditation provides a more nuanced assessment of professional education programs, an accreditation review could effectively replace the provincial review, which applies generic criteria across all disciplines. If a SoN demonstrates compliance with CASN's higher-level standards, it is reasonable to assume it would also meet the requirements of the provincial approval processes. Eliminating the need for a third QA review (one that lacks the specificity to fully capture the context of Nursing education) would reduce instances of resistance to QA and support the development of a more robust and meaningful quality culture within Ontario SoN. As resistance arises when power is exercised in ways that constrain professional autonomy and prescribe rigid norms (Foucault, 1980; 1995), by allowing SoN to engage with a single, contextually relevant approval/accreditation process, QA bodies could reduce the experience of top-down coercion, shift the locum of power toward the programs themselves, and create space for interest holders to participate in shaping the processes that affect their work. As my research has shown, this alignment would not only mitigate resistance but also reinforces a culture in which quality is understood as a shared and contextually grounded practice rather than as compliance with bureaucratic mandates.

Both phases in Part 2 of my study illustrate the human impact of the current QA system for Ontario SoN; the tension is palpable. Quantitative data from the survey in Part 1 is reinforced by the qualitative data from surveys and interviews in Part 2. Interest holders reported that they struggle to engage with the QA requirements in a meaningful way because of its demands, which compete with other areas of their work. As a result, the culture of QA struggles, making it challenging to implement QA work in the daily operations of SoN. The current QA system has primed interest holders in Ontario's SoN to become resistant to QA activities. Faculty autonomy, coupled with a deep sense of conservatism at play in HE, already forms a common foundation for resistance in HEIs. The addition of the current QA system in Nursing in Ontario, perceived to be overly bureaucratic, prioritized over teaching, and a substantial resource draw for SoN, gives resistance space to flourish.

Resistance in this context can be seen as an important and productive force within the power relations of the QA system. Foucault (1990) emphasizes that where there is power, there is always resistance; power and resistance are co-constitutive, meaning that resistance is both a response to and a form of engaging with power. In the case of Ontario SoN, resistance to bureaucratic QA demands can be interpreted as a critical signal that the system is misaligned with the professional values and realities of faculty work. Rather than simply viewing resistance as a problem to be managed, it can serve as a mechanism for revealing the limits, tensions, and unintended effects of institutional power, including the ways in which QA processes may inadvertently undermine teaching or innovation (Choi & Ruona's, 2011; Ford and Ford, 2009; Foucault, 1995; Foucault, 1980). By examining and understanding this resistance, interest holders and the QA bodies have the opportunity to recalibrate the QA system to better support meaningful quality improvement, foster professional autonomy, and create conditions where compliance is aligned with intrinsic professional goals rather than experienced as an external imposition.

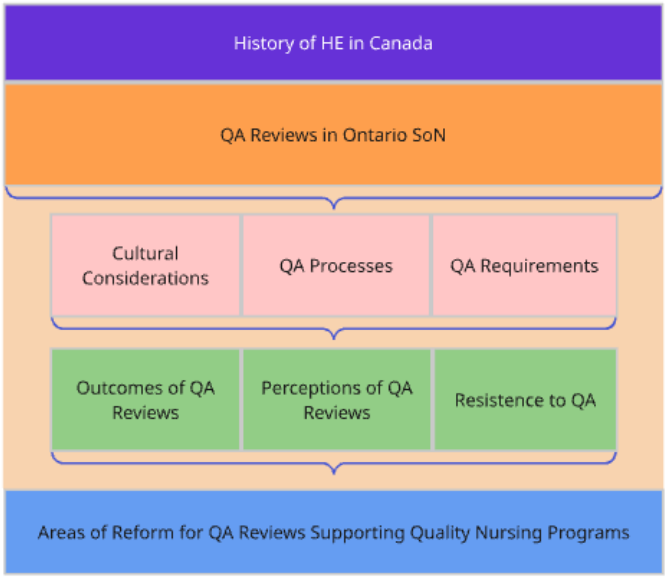
Revised Conceptual Framework

Following the analysis of my findings, I revised the conceptual framework for this study to reflect the additional layers of complexity that emerged from Parts 1 and 2. These revisions align with Jabareen's (2009) assertion that conceptual frameworks are inherently fluid and iterative, evolving in response to new empirical and analytical insights. In the updated framework (Figure 6, below), the historical development of HE in Canada remains the overarching contextual influence, while QA reviews in Ontario SoN continue to serve as the foundational mechanism under consideration. What has changed is the level of analytical granularity through which the systems and effects of the current QA requirements are understood. The systems shaping interest holders' experiences can now be conceptualized as comprising three interrelated features: culture, processes, and requirements. Together, these systems illustrate the experience of QA reviews, which this study identifies as operating across the observable outcomes, perceptions, and resistance experienced by interest holders, thereby capturing both the intended and unintended consequences of the QA system within Ontario SoN.

My study demonstrates that multiple, intersecting cultures comprise and interact within the QA system for Ontario's SoN, with each QA body, HEI, SoN, and interest holder functioning as a co-creator of the QA experience. Study participants consistently recognized that each QA

Figure 6

Revised Conceptual Framework



body brings a distinct interpretive lens to QA activities, reflecting the values, priorities, and assumptions embedded within its organizational culture. OUCQA/PEQAB operates within a predominantly bureaucratic culture; because its mandate spans all disciplines within the province, its standards are overly broad and insufficiently attuned to the contextual realities of Nursing education. As a result, interest holders reported that these requirements do not align with how quality is conceptualized within SoN, either at the level of administrative units or educational programs. Participants understood CNO's QA activities as reflecting a culture strongly oriented toward public protection and patient safety. While these priorities largely align with the professional values held by Nursing educators, tension emerged around how that culture interacts with academic freedom. Multiple participants expressed concern that CNO's granular review of teaching materials (intended to ensure the inclusion of specific content) was experienced as overly prescriptive and as an encroachment on educators' professional judgment. CASN's accreditation culture was described as the most closely aligned with the cultures of Ontario SoN. Given that CASN was founded by, and continues to be governed by, Nursing educators, this alignment was largely anticipated. CASN's accreditation framework emphasizes relevance, accountability, holistic approaches to Nursing education, and recognition of program uniqueness (CASN, 2022), offering guidance that supports quality improvement while avoiding prescriptive control over program design or delivery. Together, these findings illustrate how

cultural alignment or misalignment across QA bodies shapes interest holders' perception of, and engagement with, the QA system.

The culture within Ontario's SoN is shaped primarily by two interrelated forces: the historical positioning of Nursing within HE and the contemporary realities of Nursing practice. Nursing entered Canadian HE in 1919 at the University of British Columbia (Baker et al., 2012), situating Nursing educators within the broader academic traditions of the professoriate. As a result, faculty in SoN have inherited core features of HE culture, particularly autonomy and conservatism. Faculty members are academically prepared as experts in their areas of practice and are therefore positioned to design and deliver educational programming that reflects their disciplinary knowledge, professional judgment, and pedagogical expertise. When these faculty engage with the criteria and processes of external QA bodies, they may interpret prescriptive or standardized requirements as implicit challenges to their expertise. This perception can produce tension, particularly within an academic environment that is inherently self-perpetuating and protective of established norms and practices (Lenartowicz, 2015). What emerges within Ontario's SoN is a culture composed of highly skilled and committed educators who value quality, yet do not consistently view existing QA mechanisms as meaningful or relevant to their professional practice.

At the same time, the collective culture of a SoN consists of multiple, intersecting micro-cultures that form through everyday interactions among interest holders. One such micro-culture, which emerged prominently in both the survey data and interviews, is a quality culture that is flawed. Due to the systemic and resourcing constraints discussed earlier, QA work is typically concentrated among a small group of individuals, allowing a quality culture to develop within that group while limiting its diffusion across the broader academic unit. As a result, quality becomes associated with specific people rather than with shared values or collective responsibility. Interview participants reported awareness of this localized quality culture but frequently described deliberately avoiding or disengaging from it. Rather than fostering collective engagement, the siloing of QA reinforces distance, resistance, and disengagement, further constraining the emergence of a robust and shared quality culture within Ontario's SoN.

Culture is a complex phenomenon; it is co-created, perpetuates unconsciously, and becomes embedded in the behaviours of those within it, which makes it difficult to deliberately manipulate or counter (Kotter, 2012). Interest holders in Ontario's SoN participate in multiple

cultures, and in the context of QA, these cultures connect in complex ways. Each QA body operates with its own mandate and expectations, and interest holders must remain aware of and engaged with the culture of each. SoN interest holders also operate within the broader environment of HE, where they remain subject to established traditions and practices, while simultaneously functioning within an independent administrative collective focused on their discipline. Finally, interest holders bring their own interpersonal cultures into the SoN through their relationships with colleagues and the wider environment they work in. My research illustrates that understanding each of these cultures, and the ways they interact, is a critical component of the systems that support QA work in Ontario's SoN.

The second critical element in the QA system are the processes themselves. By comparing the OUCQA/PEQAB and CNO processes, drawing on my lived experience with CASN's accreditation system and the systems used by other professional disciplines in Canada, and integrating the global literature on accreditation processes (and as validated in the results from Part 2, Phase 1), I found that QA review processes for Ontario SoN are almost identical. QA reviews begin with a SoN authoring a self-study report that demonstrates how its administrative practices and curricular offerings meet the QA body's established standards; a group of peer reviewers validates the report; the adjudicating body renders a finding; and the QA body sets the terms of approval or accreditation. For OUCQA/PEQAB, reviewers validate the self-study on-site; for CASN, reviewers validate the self-study through either an on-site or virtual visit; and CNO validates the report solely through submitted supporting documentation.

The system in Ontario does not currently leverage this consistency across QA body processes. Although study participants reported occasional overlap, they more frequently observed that each process requires independent reporting and planning. From a systems perspective, this approach is inefficient and contributes to the resource constraints experienced by interest holders. As a result, interest holders expressed primarily negative perceptions of QA work. As the primary interface between SoN interest holders and the QA system, these processes generate resistance to participation, creating a cycle in which interest holders neither value nor use QA work effectively or efficiently.

Similarly to the QA processes, the QA criteria are also generally repetitive across the QA bodies. In Part 1 of my study, I identified 25 distinct themes across the QA bodies' criteria, and CASN includes 24 of them in its requirements. The only explicitly missing criterion from

CASN's list appears at the OUCQA/PEQAB level and requires HEIs to respect government regulations in their operations. As this condition represents a ministerial requirement for institutional operation, the discipline-specific bodies (i.e., CNO and CASN) can reasonably assume that HEIs meet it by the time they undertake their discipline-based reviews.

During data collection, participants rarely addressed OUCQA/PEQAB criteria; few mentioned it or demonstrated engagement with it. This finding reflects earlier discussion about how interest holders perceive the value of this QA body's requirements. Given that Nursing education is subject to two additional QA reviews, this lack of engagement is not surprising. SoN interest holders engage more closely with their discipline than with a governmental oversight body, making them more attuned to CNO and CASN processes. CNO addresses only 15 of the 25 themes identified in Part 1 of my study, the fewest of the three QA bodies. CNO focuses primarily on the Nursing program and addresses administrative unit features only insofar as they directly affect the program, such as faculty, partnerships, and clinical experiences. As discussed previously, interest holders perceive this focus as highly granular, which creates tension. Because CNO does not conduct an in-person visit, interviewees reported that this process feels less personal than the others, contributing to frustration that the requirements do not allow SoN to adequately explain or demonstrate how they meet the standards. Conversely, interviewees opined that the comprehensive nature of CASN's standards, combined with a lengthy site visit, requires a high level of human and financial resources to complete.

Taken as a whole, each QA body has created a set of requirements that places a burden on the QA system. Because OUCQA/PEQAB serves a broad range of participants, its requirements must apply to all disciplines and subjects taught in Ontario universities and colleges. As a result, SoN interest holders question the validity of these requirements when two additional sets of standards (developed by and supported within their discipline) also apply to their programs. Conversely, interest holders perceive CNO's requirements as overly prescriptive, infringing on Nursing educators' academic freedom, inhibiting innovation, and lacking contextual grounding in the SoN environment, particularly because CNO does not conduct on-site visits. CASN's requirements, while the most comprehensive and the most closely aligned with Ontario SoN interest holders, also present challenges related to scope and scale. The self-study report stage is lengthy, and peer-review visits can last up to five days; administrators

described the financial and human resource costs required to support these reviews as considerable.

Through data collection and analysis, I identified a complex set of interconnected system elements, which necessitated updating my conceptual framework to reflect the nuances of the current QA system for Ontario SoN. QA body requirements necessitate processes that enable consistent assessment of a SoN's administrative unit and programming. Together, these features produce cultures, countercultures, and negotiation points among QA bodies, HEIs, SoN, and individual interest holders. The QA system is therefore complex and must be considered holistically to understand outcomes and how interest holders perceive and experience it.

Just as multiple cultures influence this context, multiple desired outcomes motivate QA bodies, SoN, and interest holders to engage in QA work and shape how they experience it. The QA bodies aim to ensure that administrative units and programs meet the thresholds they have established; SoN seek a positive outcome from QA work that validates their legitimacy; and interest holders, while supporting the SoN's broader goals, pursue a range of outcomes specific to their roles and responsibilities. Because each organization and individual seeks distinct results from QA work, misalignment among these outcomes influences how interest holders experience the system.

OUCQA/PEQAB's goal is to recommend to the provincial minister of colleges and universities which programs meet the standards of a university degree in Ontario and should receive ministerial consent to operate (OUCQA, 2021; PEQAB, 2022). CNO ensures that "individuals who enter the nursing profession have the knowledge, skills and judgment to practice safely, ethically and competently" (CNO, 2022, p. 3), verifying that graduates come from programs "specifically designed to educate and train persons to be practising [nurses]" (*Nursing Act, 1991*, S.O. 1991, c. 32). CASN focuses on fostering continuous quality improvement and providing quality assurance to SoN through accreditation. While all three bodies assess Nursing programs, only CASN explicitly states that program quality as the desired outcome; the provincial processes primarily ensure compliance with legal and regulatory obligations.

With such a misalignment between the desired outcomes of OUCQA/PEQAB/CNO and the QA process, interest holders are declining to support QA efforts. Those I interviewed rarely spoke of the OUCQA/PEQAB processes and the high-level mapping of the criteria I undertook

in Part 1 suggests this could be because they do not see their professional reflected in the standards they are being asked to measure themselves against. While they are participating, it is not a valuable exercise for them to improve their practice as Nursing educators or their program. Though CNO is a discipline-specific organization, interest holders experience this type of review as a legalistic 'checkbox' exercise that the *Nursing Act, 1991*, has set for them to meet rather than a pursuit of quality. Though OUCQA/PEQAB and CNO do not explicitly state identifying quality is the primary objective of their reviews, it is implied by the requirements and processes that they use in their approval reviews. CASN, being a discipline-specific organization that clearly purports to seek to identify quality, was the most positively received of the QA bodies by interest holders; there appears to be support and the desire to engage with CASN as the standards and underpinning philosophy aligns closest with the ethos expressed by interest holders in my interviews.

Regardless, CASN has not clearly defined what constitutes 'quality.' Like OUCQA/PEQAB and CNO, CASN relies on its collective criteria to illustrate quality, but it does not provide a holistic definition within the QA system for Ontario SoN. This gap raises questions about the implicit desired outcomes of each QA body. As OUCQA/PEQAB, CNO, and CASN have not defined quality, they cannot be certain when they have identified a quality program, even if they can assure interest holders that a program meets each requirement. This dichotomy fosters uncertainty among Ontario SoN interest holders and reinforces their experiences that have shown them that QA work as a bureaucratic exercise rather than a process focused on quality.

My survey and interviews revealed two primary desired outcomes of QA work for Ontario SoN: recognition and quality improvement. Although OUCQA/PEQAB and CNO approval processes are mandatory for operation, interest holders recognize that receiving an approval term signals their programs' ability to meet the standards set by the provincial ministry and the regulatory body. Participants described CASN accreditation as more valuable, noting that it aligns with the profession's ethos, focuses on quality, and is contextually aware of the process of educating future nurses. This alignment allows interest holders to engage in CASN-specific QA activities in ways that connect more directly to their own practice and goals. While CASN accreditation provides positive recognition, it also offers practical benefits by helping SoN remain competitive, attract students, and make both micro- and macro-level program improvements. These improvements were cited by most study participants. As discussed above,

although the QA bodies hold overt power in awarding approval or accreditation terms, the SoN holds covert power through the self-study process. Even if a SoN were not awarded a term, interest holders could still identify areas of administrative or programmatic improvement through the reflection required to complete the self-study report. Consequently, the true value of the QA process lies in the experience itself rather than the award, which explains why SoN continue to engage despite the burdens imposed by the QA system.

How interest holders experience the outcomes of the QA system informs how they perceive it. As discussed above, interest holders experience the outcomes of QA bodies as being misaligned with their practice and the SoN's context. This misalignment generates a negative perception of QA reviews and leads interest holders to disengage from formal QA activities.

The experiences of QA bodies, SoN, and individual interest holders collectively shape how the system is perceived. In my study, I did not collect data directly from the QA bodies, instead relying on their documentation to analyze how they view their work. My document analysis in Part 1 revealed that none of the QA bodies formally account for the other bodies when operationalizing their QA processes. Evidence of this is apparent in the absence of cross-references and the overlapping requirements between bodies. Each QA body operates as though it represents the sole mechanism for QA in Ontario's SoN. While all three bodies are aware that multiple reviews exist, they have cultivated a perception among interest holders that they are unwilling to collaborate to reduce the reporting burden. My data does not clarify whether the QA bodies recognize the extent of this burden.

Ontario's SoN perceive their role in the QA system pragmatically: they must engage with it. Administrators I interviewed emphasized that their SoN cannot avoid OUCQA/PEQAB and CNO approval and would be disadvantaged in the market for prospective students if they did not pursue CASN accreditation. Consequently, SoN view participation in all three QA process as obligatory, even when it imposes a significant burden. This perception extends to individual interest holders, who, unlike the SoN as an entity, often respond by disengaging from QA activities. As discussed above, interest holders consistently describe the QA system as bureaucratic, misaligned with quality improvement, contextually irrelevant, and time- and resource-intensive. These perceptions drive disengagement, which functions as a form of resistance.

Interest holders constitute the primary source of resistance to QA in Ontario SoN. In this context, resistance should not be interpreted as a pathological response but as an expression of engagement with a system they perceive as flawed (Foucault, 1978/1990). As autonomous professionals, Nurse educators (and the administrators and staff who support them) revealed through surveys and interviews a pattern of disengaging from QA work when it fails to reflect their contextual realities or respect their expertise. Most commonly, interest holders resist by rarely volunteering for QA tasks, leaving those responsibilities to a small group of colleagues. Through this selective participation, they signal dissatisfaction with QA bodies while complying with procedural requirements, effectively exercising subtle, strategic resistance without openly rejecting the system.

Although SoN do not openly resist the QA system, they perpetuate systemic patterns that enable and reinforce resistance at the individual level. For example, research and teaching is prioritized over QA work in tenure and promotion discussions; administration allows small groups of individuals to undertake QA tasks, siloing the work away from the broader collective; and strategies such as TQM or formal change management approaches are not explicitly applied to develop a quality culture that could support QA work. While culture develops most sustainably through organic processes, systemic barriers must be addressed before a strong, shared quality culture can flourish within Ontario's SoN. These structural and procedural patterns operate as subtle mechanisms of governance, shaping behaviours and constraining engagement while producing compliance and resistance simultaneously (Foucault, 1980; 1978/1990).

Taken together, the experiences of QA bodies, SoN, and individual interest holders shape both the effectiveness of the QA system and the outcomes it produces. My study found that QA bodies, SoN, and interest holders all strive for the best possible outcomes for Nursing students, but they differ in how they believe those outcomes should be assessed. Study participants consistently described the current QA system as burdensome, producing primarily negative experiences, with only a few positive features or side effects. These findings illuminate the systemic and cultural challenges inherent in Ontario's QA system and provide a basis for targeted recommendations to improve both the structural elements of QA and the experience of those tasked with engaging in it.

Consequently, the final component of the conceptual framework (areas for QA reform) remains unchanged from my original framework, but gains depth and relevance through this more nuanced understanding. The updated framework strengthens the foundation for recommendations that can meaningfully enhance QA practices and foster a more constructive and sustainable quality culture in Ontario's SoN.

Recommendations for Interest Holders

Throughout, I have used the term interest holder to refer to administrators, faculty, and support staff. In this section, I broaden that definition to include the QA bodies: OUCQA/PEQAB, CNO, and CASN. The following recommendations are provided based on the literature and the findings of both Parts of my study.

QA Bodies

1. **Engage in Discussions to Merge the QA Processes.** The primary recommendation from SoN interest holders that emerged from my findings is to merge the existing QA processes. As demonstrated above, CASN's criteria and review process are the most comprehensive; therefore, QA bodies should collaborate to identify any gaps in CASN's criteria, determine which elements of their own systems CASN already addresses, and establish mechanisms to reduce the overall reporting burden on SoN. This recommendation is supported not only by the SoN interest holders who participated in this study but also by the literature, which emphasizes that the successful implementation of a QA culture in HE requires QA bodies to remain contextually informed about the full range of requirements programs face from oversight agencies and the discipline as a whole (Harvey, 2004; Salto, 2018). Moreover, if, as Hulpiau and Waeytens (2003) and Stensaker and Leiber (2015) argue, HEIs gain greater autonomy from funding bodies and enhanced legitimacy and professional reputation through rigorous QA engagement, then the current requirement for oversight by three separate bodies is excessive. In this context, CASN's review could reasonably serve as the comprehensive assessment, yet all three bodies continue to insist on independent oversight.

2. **Ensure QA Requirements and Processes are Flexible.** This recommendation involves several aspects. First, participants in my study noted that they find it hard to describe the unique features of their programs to QA bodies. QA bodies should remain open to all

approaches suggested by educators, as they are the experts in this area. Second, participants noted that a more proactive (and less reactive) system would ensure that QA integrates into the daily operations of the SoN. Third, the QA bodies should define what 'quality' means within their systems. Ideally, this definition would be collectively established between the QA bodies, the SoN, and other organizations within the Nursing profession, but even individual definitions would immediately help SoN interest holders to aligning their efforts with the QA system. Finally, participants suggested reducing paper reporting in favor of more in-person visits for QA bodies to understand program environments. This recommendation reflects the literature on shared ownership of the QA process in HE (Burch et al., 2018; Dzimińska et al., 2018; Harvey, 2006a; Newton, 2002; Stensaker & Leiber, 2015), over-bureaucratization of the QA system (Dzimińska et al., 2018; Harvey, 2006a; Newton, 2002; Stensaker & Leiber, 2015), and the perception that QA devalues teaching and other duties (Dzimińska et al., 2018; Harvey, 2006a; Salto, 2018; Stensaker & Leiber, 2015).

3. **Ensure QA Requirements and Processes are Reasonable.** SoN interest holders wish to see requirements and processes become more flexible and reasonable. QA bodies should only include criteria and requirements that directly speak to their mandate. Ensuring the scope is as small as possible would reduce the workload for SoN. This approach would address issues related to shared ownership (Burch et al., 2018; Dzimińska et al., 2018; Harvey, 2006a; Newton, 2002; Stensaker & Leiber, 2015), over-bureaucratization (Dzimińska et al., 2018; Harvey, 2006a; Newton, 2002; Stensaker & Leiber, 2015), and the devaluing of teaching and other duties (Dzimińska et al., 2018; Harvey, 2006a; Salto, 2018; Stensaker & Leiber, 2015).

4. **Increase Support to SoN.** Several interest holders within the SoN raised the need for additional support from the QA bodies, primarily in how to prepare for reviews and around the mechanics of participating in the process. Providing additional support would help SoN build their QA culture for successful implementation (Harvey, 2006a; Stensaker & Leiber, 2015) and help them counter possible resistance to changes by supporting effective communication and transparency (Dzimińska et al., 2018; Stensaker & Leiber, 2015).

SoN

1. **Develop a Culture of QA.** Developing a culture is a challenge, but the literature clearly indicates that successful QA activities depend on the people involved (Burch et al., 2018; Dzimińska et al., 2018; Newton, 2002; Stensaker & Leiber, 2015). Ensuring that interest holders across the entire SoN are aware of, and involved in, QA activities, thereby holding each other accountable to timelines and tasks, is critical for a QA culture. A culture that supports QA will facilitate the completion of necessary reviews, regardless of what reforms the QA bodies implement.

2. **Embrace Change Management Principles to Undertake QA Activities.** SoN should intentionally adopt and adapt established industry-based quality frameworks such as TQM (i.e., Feigenbaum, 1961) and related QA models (i.e., Harvey & Green, 1993, Hulpiau & Waeytens, 2003) to strengthen QA practices. The organic emergence of these principles in participant responses suggests that such approaches align naturally with the realities of Ontario's SoN. Given the consistency with which interest holders identified both shared definitions of quality and common structural barriers within current QA systems, institutions should look beyond discipline-specific solutions in Education or Nursing and draw on proven industry practices to develop more effective, sustainable, and contextually responsive QA processes.

3. **Seek Out Opportunities to Amalgamate QA Reviews.** Several study participants noted that their HEI has allowed, or currently allows, the SoN to conduct OUCQA/PEQAB mandatory approval reviews concurrently with CASN's voluntary accreditation review. HEIs should pursue and formally codify this alignment. Participants noted that their HEIs allowed this integration in some QA cycles but not in subsequent ones; this inconsistency makes it difficult to allocate adequate resources across QA cycles, thereby exacerbating existing challenges and contributing to resistance. By actively reducing the bureaucratization of QA processes, HEIs can strengthen the SoN's culture of quality assurance (Dzimińska et al., 2018) and mitigate the emergence of resistance (Ford et al., 2002; Kuzhda, 2016).

4. **Continue to Advocate for Yourselves.** The findings of this study are clear: the current QA system is seen as valuable but burdensome and presents multiple risks for Ontario

SoN. Maintaining open communications between the QA bodies and the SoN will help inform each group's processes to ensure QA provides value (Harvey, 2004; Salto, 2018). Regular dialogue should occur between the province, the regulator, the accreditor, and the SoN so that all interest holders understand the impact of their requirements.

Limitations of My Study

My findings support the existing literature around issues of QA and resistance to change in HE, but I also acknowledge that, as per Babbie (2008), no research study is without its limitations. I detail the limitations of my study in the sections below.

Part 1

While the criteria and procedures policies are publicly available online for OUCQA/PEQAB and CNO, only the criteria are publicly available for CASN. As such, my document analysis is limited. However, the consistency of the process (as described in the literature) and my own personal experience with CASN and other accreditors, as well as the validation provided through the survey of interest holders in Part 2, Phase 1, ensures that a comprehensive understanding of procedures was considered in my analysis.

Part 2: Explanatory Sequential Two-Part Multimethod Study

I considered the debates in the literature on the validity of MMR. Concerns range from the inherent incompatibility of the research and analysis methods required for the collection of qualitative and quantitative data (Guba, 1987) to philosophical considerations around weakening a study that does not ascribe to a single approach (Mertens, 2003). There are many possible limitations an MMR can impose on a study. Regardless of these considerations, using MMR in my study has allowed for triangulation and a comprehensive and effective approach to data collection and analysis, respecting my pragmatic and constructivist approach, allowing me to answer a variety of research questions (Doyle et al., 2009).

Part 2, Phase 1. Part 2, Phase 1 relied on distributing a survey to interest holders in Ontario SoN. While I used the CASN membership list to identify all SoN in Ontario, not all HEIs included staff directories online, or had staff directories that clearly identified nursing administrators, faculty, and/or support staff. As such, I may not have reached all eligible study participants. Moreover, though I sent follow-up emails, I deployed the survey during the academic year, which may have precluded participation for those busy with other duties.

Another issue related to the survey is the potential that individuals self-excluded themselves from the survey due to the title (i.e., self-selection bias) (Cook & Campbell, 1979). In addition, the response rate for the survey was 20%. Though the literature does not consistently identify an ideal survey response rate, Wu et al. (2022) found through a meta-analysis that 44% is the average online survey response rate in education-related fields. However, context clues in qualitative question responses allowed me to identify that respondents came from both universities and colleges, and from all three interest holder groups, ensuring I had a plurality of inputs. Finally, there was a high level of consistency in the themes of both qualitative and quantitative responses. As such, I feel the response rate, though low, provides a fair representation of interest holders' perceptions of the QA reviews for Ontario SoN.

Part 2, Phase 2. Part 2, Phase 2 of my study relied on participants from Part 2, Phase 1 volunteering to be interviewed. No support staff volunteered for Part 2, Phase 2 and, as a result, this interest group is absent from my analysis of this Phase. Moreover, my presence in the interviews may have influenced how study participants responded to my questions; individuals may have felt the need (consciously or unconsciously) to provide socially desirable answers and/or they may have felt the need to edit their responses to be seen in a more favorable light (Cook & Campbell, 1979).

Future Research

My study has a narrow focus which, if expanded, presents several pathways for future research. First, this study could expand to cover Nursing education across Canada. Each province has unique contexts that inform how the QA bodies interact with one another, so delving into the requirements and impact of the QA system for SoN in various jurisdictions would help interest holders develop a common understanding of the purpose and value of QA for the profession across the country. Such a study would also identify efficiencies other provinces have found to reduce the QA burdens for SoN.

Nursing is only one discipline subject to QA reviews in Canada. The Association of Accrediting Agencies of Canada (AAAC, an advocacy group of education accreditors in Canada) represents 23 distinct professions, including Nursing. In analyzing my findings, I was repeatedly surprised to see that the thoughts and language used by Nursing interest holders reflect my current lived experience as an accreditor of Engineering education programs and my experiences

with AAAC colleagues. I believe a similar study of other professions would highlight commonalities across QA in HE. As with expanding the study for Nursing across Canada, it would reinforce the role of QA in education and identify how other professions effectively and efficiently address QA requirements.

Finally, expanding this study to include all interest holders in Ontario SoN programming would provide a complete picture of the impact of the QA system within the SoN and its general outcomes. Understanding how students, employers, and consumers of the healthcare system interact with QA would highlight any existing gaps in criteria or processes. A tangential study examining how elements of the QA system's requirements impact interest holders external to the SoN would illustrate any issues of scope and highlight the critical elements of a QA review.

Conclusion

My dissertation explored the nuances of the various QA reviews SoN in Ontario are subject to, the perceptions of administration, faculty, and support staff in Ontario SoN towards the same, and identified possible areas of reform for the current QA system. Through an explanatory, sequential multimethod study, which included a document review, survey, and interviews, this study sought to understand the impact the current QA system has on interest holders. Overall, the findings show that the current system is perceived as valuable but burdensome and requires reform to support SoN's continued participation. This work has led to the collection of further empirical research on QA in HE, QA in Nursing, and resistance to QA activities in HE, using Nursing in Ontario to illustrate my findings.

Using the literature and findings of my study, I have made several recommendations to the QA bodies and the SoN for how the current QA system could be reformed to improve the experience of interest holders and overall outcomes of the process. I hope this work will help the QA bodies and SoN collaborate on future improvements to the QA system. Given the critical need for well-educated nurses in Ontario's healthcare system, the importance of my findings cannot be understated as they provide a clear indication of the need for improvement in Nursing education's QA system.

References

Aamodt, O., Frølich, N., & Stensaker, B. (2018). Learning outcomes – a useful tool in quality assurance? Views from academic staff. Studies in Higher Education, 43(4), 614-624. https://doi.org/10.1080/03075079.2016.1185776

Accreditation Canada. (2024, December 31). Qmentum Global™ for Canadian Accreditation. https://accreditation.ca/qmentum-global/qmentum-global-for-canadian-accreditation/

Akpa, V.O., Asikhia, O.U., & Nneji, N.E. (2021). Organizational culture and organizational performance: A review of literature. International Journal of Advances in Engineering and Management, 3(1), 361-372. http://dx.doi.org/10.35629/5252-0301361372

Allen, A. (2022). An introduction to constructivism: Its theoretical roots and impact on contemporary education. Journal of Learning Design and Leadership, 1(2), 1-11.

Appelbaum, S.H., Habashy, S., Malo, J., & Shafiq, H. (2012). Back to the future: Revisiting Kotter's 1996 change model. Journal of Management Development, 31(8), 764–782. https://doi.org/10.1108/02621711211253231

Association of Accrediting Agencies of Canada. (2024, March 22). Guidelines for good practice. https://www.aaac.ca/guidelines-for-good-practice

Babbie, E. (2008). The basics of social research (4th ed.). Thomson.

Baker, C., Guest, E., Jorgenson, L., Crosby, K., & Boyd, J. (2012). Ties that bind: The evolution of education for professional nursing in Canada from the 17th to the 21st century. Canadian Association of Schools of Nursing.

Ball, S. J. (2012). Global education Inc.: New policy networks and the neo-liberaI imaginary. Routledge.

Beaulieu, L., Seneviratne, C., & Nowell, L. (2022). Change fatigue in nursing: An integrative review. Change fatigue in nursing: An integrative review. Journal of Advanced Nursing, 79, 454-470. https://doi.org/10.1111/jan.15546

Beckhard, R. & Harris, R.T. (1987). Organizational Transitions: Managing Complex Change. Addison-Wesley.

Berg, B. (2008). Qualitative research methods for the social sciences (7th ed.). Pearson Education.

Bougherira, M.R., Elasmar, M.H., & Alrayes, N.S. (2024). An evaluation of the impact of academic accreditation on the quality of higher education: lessons learnt from the academics' perceptions. Journal of Further and Higher Education, 48(2), 226-241, https://doi.org/10.1080/0309877X.2024.2302026

Bowen, G. A. (2009). Document analysis as a qualitative research method. Qualitative Research Journal, 9(2), 27+. https://link.gale.com/apps/doc/A218450363/AONE?u=otta77973&sid=bookmark-AONE&xid=28f1bbe8

Bowker, L. (2017). Aligning accreditation and academic program reviews: A Canadian case study. Quality Assurance in Education, 25(3), 287-302. https://doi.org/10.1108/QAE-11-2016-0061

Boyer, E. L. (1990). Scholarship reconsidered: Priorities of the professoriate. Princeton University Press.

Boyle, P. & Bowden, J.A. (1997). Education quality assurance in universities: An enhanced model. Assessment & Evaluation in Higher Education, 22(2), 111-121. https://doi.org/10.1080/0260293970220202

British Columbia Public Service. (2024). Writing Guide for Indigenous Content. Government of British Columbia. https://www2.gov.bc.ca/gov/content/governments/services-for-government/service-experience-digital-delivery/web-content-development-guides/web-style-guide/writing-guide-for-indigenous-content

Brown, R. & Abuatiq, A. (2020). Resilience as a strategy to survive organizational change. Nursing Management, 51(2), 16-21. https://doi.org/10.1097/01.numa.0000651180.42231.ef

Burch, J.J., Batchelor, J.H., Bostwick, E., Gibson, S., Burch, G.F., Abston, K., & Ellenberg, G. (2018). Assessing higher education assessment policies and processes: A critical policy analysis approach. Journal of Academic Administration in Higher Education, 14(2), 47-63.

Bryman, A. (2006). Integrating quantitative and qualitative research: how is it done? Qualitative Research, 6(1), 97-113. https://doi.org/10.1177/1468794106058877

Burnes, B. (2004). Kurt Lewin and the planned approach to change: A re-appraisal. Journal of Management Studies, 41(6), 977-1002. https://doi.org/10.1111/j.1467-6486.2004.00463.x

Burnes, B. (2015). Understanding resistance to change – Building on Couch and French. Journal of Change Management, 15(2), 92-116. http://dx.doi.org/10.1080/14697017.2014.969755

Canadian Association of Schools of Nursing. (2002). National nursing education accreditation adopted by College of Nurses of Ontario. https://www.casn.ca/about-casn/news-releases/2002-2/national-nursing-education-accreditation-adopted-college-nurses-ontario/

Canadian Association of Schools of Nursing. (2020). CASN Accreditation Standards and Framework, December 2020. http://w6s7f2j9.stackpathcdn.com/content/user_files/2017/04/EN-CASN-Accreditation-Standards-Feb-4-2022-1.pdf

Canadian Association of Schools of Nursing. (2026, February 14). Our history. https://www.casn.ca/2023/05/our-history/

Canadian Engineering Accreditation Board. (2025). 2024 accreditation criteria and procedures. Engineers Canada. https://engineerscanada.ca/sites/default/files/2025-12/2025-Accreditation_Criteria_Procedures-EN.pdf

The Canadian Encyclopedia. Universities in Canada (Canadian Universities). https://www.thecanadianencyclopedia.ca/en/article/university

Cardoso, S., Rosa, M.J., Stensaker, B. (2016). Why is quality in higher education not achieved? The view of academics. Assessment & Evaluation in Higher Education, 41(6), 950-965. https://doi.org/10.1080/02602938.2015.1052775

Carter, N., Bryant-Lukosius, D., DiCenso, A., Blythe, J., & Neville, A.J. (2014). The use of triangulation in qualitative research. Oncology Nursing Forum, 41(5), 545-7. https://doi.org/10.1188/14.onf.545-547

Caruth, G. D., & Caruth, D. L. (2013). Understanding resistance to change: A challenge for universities. Turkish Online Journal of Distance Education 14(2), 12-21.

Chandler, N. (2013). Braced for turbulence: Understanding and managing resistance to change in the higher education sector. Management, 3(5), 243-251. http://article.sapub.org/10.5923.j.mm.20130305.01.html

Cheraghi, R., Ebrahimi, H., Kheibar, N., & Sahebihagh, M.H. (2023). Reasons for resistance to change in nursing: An integrative review. BMC Nursing, 11(1), 310. https://doi.org/10.1186/s12912-023-01460-0

Choi, M. & Ruona, W.E.A. (2011). Individual readiness for organizational change and its implications for human resource and organization development. Human Resource Development Review, 10(1), 46-73. https://doi.org/10.1177/153448431038495

College of Nurses of Ontario. (2019). Nursing Education Program Approval Guide. https://www.cno.org/Assets/CNO/Documents/Become-a-Nurse/nursing-education-program-approval-guide-vfinal2.pdf

College of Nurses of Ontario. (2022, June 28). Nursing Education Program Approval Policy. https://cno.org/Assets/CNO/Documents/Become-a-Nurse/nursing-education-program-approval-policy.pdf

Colyar, J., Tishcoff, R. & Deakin, J. (2022). *Who grants degrees? An overview of Ontario's evolving credential landscape.* The Higher Education Quality Council of Ontario. https://heqco.ca/wp-content/uploads/2022/04/Credentials-Who-Grants-Degrees.pdf

Clouder, L., & King, V. (2015). What works? A critique of appreciative inquiry as a research method/ology. In J. Huisman & M. Tight (Eds.), Theory and method in higher education research (Vol. 1, pp. 169–190). Emerald. https://doi.org/10.1108/S2056–375220150000001008

Coghlan, A. T., Preskill, H., & Tzavaras Catsambas, T. (2003). An overview of appreciative inquiry in evaluation. New Directions for Evaluation, 100, 5–22. https://doi.org/10.1002/ev.96

Conner, D. R. (1993). Managing at the speed of change: How resilient managers succeed and prosper where others fail. Random House.

Cook, T. D., & Campbell, D. T. (1979). The design and conduct of true experiments and quasi-experiments in field settings. In R. T. Mowday & R. M. Steers (Eds.), Reproduced in part in Research in Organizations: Issues and Controversies. Goodyear Publishing Company.

Cooperrider, D. L., & Srivastva, S. (1987). Appreciative inquiry in organizational life. In A. B. Shani & D. A. Noumair (Eds.), Research in organizational change and development (Vol. 1, pp. 129–169). Emerald Publishing.

Council of Higher Education Accreditation. (2002). The fundamentals of accreditation: What do you need to know? https://www.chea.org/sites/default/files/other-content/Fundamentals-of-Accreditation-What-Do-You-Need-to-Know.pdf

Covey, S. R. (1992). Principle-centered leadership (1st Fireside ed.). Simon & Schuster.

Cox, C.B., Gallegos, E., Pool, G.J., Gilley, K.M., & Haight, N. (2022). Mapping the nomological network of change fatigue: Identifying predictors, mediators and consequences. Journal of Organizational Change Management, 35(4/5), 718-733. https://doi.org/10.1108/JOCM-12-2021-0369

Coyle, D. (2018). The Culture Code: The Secrets of Highly Successful Groups. Random House Business.

Creswell, J. W. (2012). Educational research: Planning, conducting, and evaluating quantitative and qualitative research (4th ed.). Pearson Education.

Creswell, J. W. & Plano Clark, V. L. (2018). Designing and conducting mixed-methods research (3rd ed.). SAGE Publications.

Crosbey, L. & Finlay, F. (2021). Celebrating our wins. Archives of Disease in Childhood, 107(3), 161-161. https://doi.org/10.1136/archdischild-2021-322139

Cummings, S., Bridgman, T., & Brown, K. (2016). Unfreezing change as three steps: Rethinking Kurt Lewin's legacy for change management. Human Relations, 69, 33-60. https://doi.org/10.1177/0018726715577707

Davis, B. (2004). Inventions of teaching: A genealogy. Routledge.

Dennison, J.D. & Gallagher, P. (1986). Canada's Community Colleges: A Critical Analysis. University of British Columbia Press.

de Paor, C. (2016). The contributions of professional accreditation to quality assurance in higher education. Quality in Higher Education, 22(3), 228-241. http://dx.doi.org/10.1080/13538322.2016.1263925

Deng, C., Gulseren, D., Isola, C., Grocutt, K., & Turner, N. (2023). Transformational leadership effectiveness: An evidence-based primer. Human Resource Development International, 26(5), 627-641. https://doi.org/10.1080/13678868.2022.2135938

Dillman, D. A. (2011). Mail and internet surveys: The tailored design method (2nd ed.). John Wiley & Sons.

Doyle, L., Brady, A.-M., & Byrne, G. (2009). An overview of mixed methods research. Journal of Research in Nursing, 14(2),175-185. https://doi.org/10.1177/1744987108093962

Drasin, J., & Holliday, T. (2024). Navigating change fatigue: The Energy-Commitment Model for organizational change. EDUCAUSE Review (Online).

Dunlap, C. A. (2008). Effective evaluation through appreciative inquiry. Performance Improvement, 47(2), 23–29. https://doi.org/10.1002/pfi.181

Dzimińska, M., Fijałkowska, J., & Sułkowski. L. (2018). Trust-based quality culture conceptual model for higher education institutions. Sustainability, 10(2599). https://doi.org/10.1080/13538322.2018.15547

Ehlers, U.D. (2009). Understanding quality culture. Quality Assurance in Education,17(4), 343-363. https://doi.org/10.1108/09684880910992322

Elken, M. & Stensaker, B. (2018). Conceptualising 'quality work' in higher education. Quality in Higher Education, 24(3), 189-202, https://doi.org/10.1080/13538322.2018.1554782

Endrejat, P.C., Klonek, F.E., Müller-Formmeyer, L.C., & Kauffeld, S. (2021). Turning change resistance into readiness: How change agents' communication shapes recipient reactions. European Management Journal, 39, 595-604. https://doi.org/10.1016/j.emj.2020.11.004

Errida, A. & Lotfi, B. (2021). The determinants of organizational change management success: Literature review and case study. International Journal of Engineering Business Management, 13, 1-15. https://doi.org/10.1177/18479790211016273

European University Association (2006). Quality Culture in European Universities: A bottom-up approach. Report on the three rounds of the quality culture project 2002-2006. European University Association.

Feigenbaum, A.V. (1961). Total Quality Control: Engineering and Management. McGraw-Hill.

Feigenbaum, A. V. (1989). How To Implement Total Quality Control. Executive Excellence, 6(11), 15. https://login.proxy.bib.uottawa.ca/login?url=https://www.proquest.com/trade-journals/how-implement-total-quality-control/docview/204529755/se-2

Ford, J.D. & Ford, L.W. (2009). Decoding resistance to change. Harvard Business Review. https://hbr.org/2009/04/decoding-resistance-to-change

Ford, J. D., & Ford, L. W. (2010). Stop blaming resistance to change and start using it. Organizational Dynamics, 39, 24-36. https://doi.org/10.1016/j.orgdyn.2009.10.002

Ford, J. D., Ford, L. W., & McNamara, R. T. (2002). Resistance and the background conversation of change. Journal of Organizational Change Management, 15(2), 105-121. https://doi.org/10.1108/09534810210422991

Foucault, M. (1980). Power/Knowledge: Selected Interviews and Other Writings, 1972–1977. Pantheon Books.

Foucault, M. (1982). The subject and power. Critical Inquiry, 8(4), 777–795. https://doi.org/10.1086/448181

Foucault, M. (1983). The subject and power. In H. Dreyfus & P. Rabinow (Eds.), Beyond structuralism and hermeneutics (pp. 208–226). University of Chicago Press.

Foucault, M. (1990). The history of sexuality: An introduction, Volume 1 (R. Hurley, Trans.). Vintage Books. (Original work published 1976)

Foucault, M. (1995). Discipline and punish: The birth of the prison (A. Sheridan, Trans.). Vintage Books. (Original work published 1975)

Fredberg, T. & Pregmark, J.E. (2022). Organizational transformation: Handling the double-edged sword of urgency. Long Range Planning, 55, 102091. https://doi.org/10.1016/j.lrp.2021.102091

Gilley, A., Godek, M., & Gilley, J.W. (2009). The university immune system: Overcoming resistance to change. Contemporary Issues in Education Research, 2(3), 1-6. http://dx.doi.org/10.19030/cier.v2i3.1079

Gordon, M. (2009). Toward a pragmatic discourse on constructivism: Reflections on lessons from practice. Educational Studies, 45(1), 39-58. https://doi.org/10.1080/00131940802546894

Grant, S., & Humphries, M. (2006). Critical evaluation of appreciative inquiry: Bridging an apparent paradox. Action Research, 4(4), 401–418. https://doi.org/10.1177/1476750306070103

Greene, J. C., Caracelli, V. J., & Graham, W. F. (1989). Toward a Conceptual Framework for Mixed-Method Evaluation Designs. Educational Evaluation and Policy Analysis, 11(3), 255–274. https://doi.org/10.3102/01623737011003255

Guba, E. (1987). What have we learned about naturalistic evaluation. Evaluation Practice, 8(1), 23-43. https://doi.org/10.1016/S0886-1633(87)80037-5

Gulden, M., Saltanat, K., Raigul, D., Dauren, T., & Assel, A. (2020). Quality management of higher education : Innovation approach from perspectives of institutionalism. An exploratory literature review. Cogen Business & Management, 7(1), 1749217. https://doi.org/10.1080/23311975.2020.1749217

Hall, J. N., & Preissle, J. (2015). Multimethod and mixed-methods research in the fields of education and anthropology. In S. N. Hesse-Biber & R. B. Johnson (Eds.), The Oxford handbook of multimethod and mixed-methods research inquiry. Oxford University Press. https://doi.org/10.1093/oxfordhb/9780199933624.013.23

Hämäläinen, K. (2003). Common standards for programme evaluations and accreditation? European Journal of Education, 38(3), 291–300. https://doi.org/10.1111/1467-3435.00148

Hart, D. (2019). A systemic 'theories of change' approach for projects and change initiatives in the context of quality enhancement activity in higher education. In G. Bell, R. Pagano, J. Warwick, & C. Sato (Eds.), Problem structuring approaches for the management of projects (pp. 1-34). Springer. https://doi.org/10.1007/978-3-319-93263-7_1

Harvey, L. (2004). The power of accreditation: Views of academics. Journal of Higher Education Policy and Management, 26(2), 207–223. https://doi.org/10.1080/1360080042000218267

Harvey, L. (2006a). Impact of quality assurance: Overview of a discussion between representatives of external quality assurance agencies. Quality in Higher Education, 12(3), 287-290. https://doi.org/10.1080/13538320601051010

Harvey, L. (2006b) 'Understanding quality', Section B 4.1–1 of 'Introducing Bologna objectives and tools'. In Purser, L. (Ed.), EUA Bologna Handbook: Making Bologna Work. European University Association.

Harvey, L. & Green, D. (1993). Defining quality. Assessment & Evaluation in Higher Education, 18(3), 9-34. https://doi.org/10.1080/0260293930180102

Harvey, L. & Newton, J. (2004). Transforming quality evaluation. Quality in Higher Education, 10(2), 149-165, https://doi.org/10.1080/1353832042000230635

Harvey, L. & Stensaker, B. (2008). Quality culture: Understandings, boundaries and linkages. European Journal of Education, 43(4), 427-442. https://doi.org/10.1111/j.1465-3435.2008.00367.x

Hess-Biber, S. (2015). Navigating a turbulent research landscape: Working the boundaries, tensions, diversity, and contradictions of multimethod and mixed-method inquiry. In S. N. Hesse-Biber & R. B. Johnson (Eds.), The Oxford handbook of multimethod and mixed-methods research inquiry. Oxford Library of Psychology. Oxford University Press. https://doi.org/10.1093/oxfordhb/9780199933624.013.13

Hildesheim, C. & Sonntag, K. (2020). The Quality Culture Inventory: A comprehensive approach towards measure quality culture in higher education. Studies in Higher Education, 45(4), 892-908, https://doi.org/10.1080/03075079.2019.1672639

Hobfoll, S.E. (1989). Conservation of resources: A new attempt at conceptualizing stress. American Psychologist, 44(3), 513–524.

Hughes, M. (2016). Leading changes: Why transformation explanations fail. Leadership, 12(4), 449-469. https://doi-org.proxy.bib.uottawa.ca/10.1177/1742715015571393

Hulpiau, V. & Waeytens, K. (2003). Improving the quality of education: what makes it actually work? A case study. In C. Prichard & P. Trowler (Eds.), Realising Qualitative Research into Higher Education (145-161). Ashgate Publishing.

Hunter, A. & Brewer, J.D. (2006). Foundations of Multimethod Research. SAGE Publications.

Hunter, A., & Brewer, J. D. (2015a). Designing multimethod research. In S. N. Hesse-Biber & R. B. Johnson (Eds.), The Oxford handbook of multimethod and mixed-methods research inquiry. Oxford Library of Psychology. Oxford University Press. https://doi.org/10.1093/oxfordhb/9780199933624.013.13

Hunter, A., & Brewer, J. D. (2015b). Conundrums of multimethod research. In S. N. Hesse-Biber & R. B. Johnson (Eds.), The Oxford handbook of multimethod and mixed-methods research inquiry. Oxford Library of Psychology. Oxford University Press. https://doi.org/10.1093/oxfordhb/9780199933624.013.13

Imai, M. (1986). Kaizen: The key to Japan's Competitive Success. McGraw-Hill Education.

Jabareen, Y. (2009). Building a conceptual framework: Philosophy, definitions, and procedure. International Journal of Qualitative Methods, 8(4), 49–62. https://doi.org/10.1177/160940690900800406

Jacobellis v. Ohio, 378 U.S. 184 (1964).

John, P.M & Herscovitch, L. (2001). Commitment in the workplace: Toward a general model. Human Resource Management Review, 11(3), 299–326.

Johnson, R.B. & Onwuegbuzie, A.J. (2004). Mixed-methods research: A research paradigm whose time has come. Educational Researcher, 3:7, 14-26. https://doi.org/10.3102/0013189X033007014

Jones, G. A. (2014). An introduction to higher education in Canada. In K. M. Joshi and S. Paivandi (Eds.), Higher Education Across Nations (vol. 1, pp. 1-38). B. R. Publishing.

Kadir, K.A., Ahmad Arshad, D., & Johari, J. (2016). Resistance to change of academics towards accreditation. Journal of Business and Social Review in Emerging Economies, 2(2), 127-134. https://doi.org/10.26710/jbsee.v2i2.29

Kayani, M.B., Ali, M., & Javed, H. (2021). What literature has to say about commitment to change: Philosophy of commitment to change. Journal of Organizational Change Management, 35(4/5), 792-801. https://doi.org/10.1108/JOCM-10-2021-0296

Kayyali, M. (2024). Quality assurance and accreditation in higher education: Issues, models, and best practices. Palgrave Macmillan. https://doi.org/10.1007/978-3-031-66623-0_1

Khaw, K.W., Alnoor, A., AL-Abrrow, H., Tiberius, V., Ganesan, Y., & Atshan, N.A. (2023). Reactions towards organization change: A systematic literature review. Current Psychology, 42, 19137-19160. https://doi.org/10.1007/s12144-022-03070-6

Kotter, J. P. (1995, May–June). Leading change: Why transformation efforts fail. Harvard Business Review. https://hbr.org/1995/05/leading-change-why-transformation-efforts-fail-2

Kotter, J. P. (2012). Leading Change. Harvard Business Review Press.

Krippendorff, K. (2019). Content analysis. An introduction to its methodology. 4th Edition. University of Pennsylvania. SAGE Publications. https://doi.org/10.4135/9781071878781

Kuipers, B. S., Higgs, M., Kickert, W., Tummers, L., Grandia, J., & van der Voet, J. (2013). The management of change in public organizations: A literature review. Public Administration, 92(1), 1-20. https://doi.org/10.1111/padm.12040

Kuzhda, T. (2016). Diagnosing resistance to change in the change management process. Economics, Management and Sustainability, 1(1), 49-59. https://doi.org/10.14254/jems.2016.1-1.5

Kvale, S. (2012). Doing Interviews. SAGE Publications.

Lane, M. R., Lane, P. L., Rich, J., & Wheeling, B. (2015). Improving assessment: Creating a culture of assessment with a change management approach. Journal of Case Studies in Accreditation and Assessment, 4, 1-11. https://eric.ed.gov/?id=EJ1060620

Lawson, P. (1989). The Imperial Challenge. McGill-Queens University Press.

Lenartowicz, M. (2015). The nature of the university. Higher Education, 69, 947-961. https://doi.org/10.1007/s10734-014-9815-0

Lewin, K. (1947). Frontiers in group dynamics: Concept, method and reality in social science; social equilibria and social change. Human Relations, 1, 5–41. https://doi.org/10.1177/001872674700100103

Likert, R. New Patterns of Management. McGraw-Hill.

Lilja, M. (2022). The definition of resistance. Journal of Political Power, 15(2), 202-220. https://doi.org/10.1080/2158379X.2022.2061127

Liu, C.H., & Matthews, R. (2005). Vygotsky's philosophy: Constructivism and its criticisms examined. International Education Journal, 6(3), 386-399. https://eric.ed.gov/?id=EJ854992

Magoon, A.J. (1977). Constructivist approaches in educational research. Review of Educational Research, 47(4), 651-693.

Mansaray, H.E. (2019). The role of leadership style in organizational change management: A literature review. Journal of Human Resource Management, 7(1), 18-31. https://doi.org/10.11648/j.jhrm.20190701.13

McGrath, C., Barman, L., Stenfors-Hayes, T., Silén, C., & Laksov, K. B. (2016). The ebb and flow of education change: Change agents as negotiators of change. Teaching & Learning Inquiry: The ISSOTL Journal, 4(2), 1-14. https://doi.org/10.20343/teachlearninqu.4.2.9

Mertens, D.M. (2003). Mixed methods and the politics of human research: The transformative-emancipatory perspective. In: Tashakkori, A. & Teddlie, C. (eds). Handbook of Mixed Methods in Social and Behavioral Research. Thousand Oaks, CA: Sage. 135-164.

Miles, M. B., Huberman, A. M., & Saldaña, J. (2014). Qualitative data analysis: A method sourcebook. SAGE Publications.

Morse, J.M. (2003). Principles of mixed-methods and multimethod research design. In A. Tashakkori & C. Teddlie (Eds.), Handbook of Mixed-methods in Social & Behavioral Research. SAGE Publications.

Nasim, K., Sikander, A., & Tian, X. (2020). Twenty years of research on total quality management in Higher Education: A systematic literature review. Higher Education Quarterly, 74, 75-97. https://doi.org/10.1111/hequ.12227

Neave, G. (1988). On the cultivation of quality, efficiency and enterprise: An overview of recent trends in higher education in Western Europe, 1986–1988. European Journal of Education 23(1/2), 7–23. https://doi.org/10.2307/1502961

Neave, G. (1998). The evaluative state reconsidered. European Journal of Education, 33(3), 265-284. https://eric.ed.gov/?id=EJ572057

Newton, J. (2000). Feeding the beast or improving quality?: Academics' perception of quality assurance and quality monitoring. Quality in Higher Education, 6(2), 153-163. https://doi.org/10.1080/713692740

Newton, J. (2002). Barriers to effective quality management and leadership: Case study of two academic departments. Higher Education, 44, 185-212. https://doi.org/10.1023/A:1016385207071

Nicholson, K. (2011). Quality assurance in higher education: A review of the literature. Council of Ontario Universities Degree Level Expectations Project, McMaster University. https://cll.mcmaster.ca/COU/pdf/Quality%20Assurance%20Literature%20Review.pdf

Nursing Act, 1991, S.O. 1991, c. 32. (n.d.). e-Laws. Government of Ontario. https://www.ontario.ca/laws/statute/91n32

O'Connell, D., Hickerson, K., & Pillutla, A. (2011). Organizational visioning: An integrative review. Group & Organization Management, 36(1), 103-125. https://doi.org/10.1177/1059601110390999

Ontario Colleges of Applied Arts and Technology Act, 2002, S.O. 2002, c. 8. Retrieved February 14, 2026, from https://www.ontario.ca/laws/statute/02o08f#act-verion

Ontario College Quality Assurance Service. (2022). College quality assurance audit process (CQAAP): Guidelines and framework. https://oucqa.ca/wp-content/uploads/2022/11/Quality-Assurance-Framework-2021-1.pdf

Ontario Department of Education. (1967). Colleges of applied arts and technology: Basic Documents. Retrieved February 14, 2026, from https://www.fanshawelibrary.com/Upload/CAAT%20basic%20documents%201967.pdf

Ontario Universities Council on Quality Assurance. (2022, June 28). QA Framework – Introduction. https://oucqa.ca/framework/introduction/

Ontario Universities Council on Quality Assurance. (2026, February 14a). History of quality assurance in Ontario. https://oucqa.ca/resources-publications/history-of-quality-assurance-in-ontario/

Ontario Universities Council on Quality Assurance. (2026, February 14b). Responsibilities of the Quality Council. https://oucqa.ca/framework/responsibilities-of-the-quality-council/

Palinkas, L.A., Horwitz, S.M., Green, C.A. et al. Purposeful Sampling for Qualitative Data Collection and Analysis in Mixed-method Implementation Research. Administration and Policy in Mental Health, 42, 533–544 (2015). https://doi-org.proxy.bib.uottawa.ca/10.1007/s10488-013-0528-y

Palumbo, R. & Manna, R. (2018). Making educational organizations able to change: A literature review. The International Journal of Education Management, 33(4), 734-752. https://doi.org/10.1108/IJEM-02-2018-0051

Panacci, A. G. (2014). Baccalaureate degrees at Ontario colleges: Issues and implications. *College Quarterly, 17*(1). https://collegequarterly.ca/2014-vol17-num01-winter/panacci.html

Parker, L. D. (2002). It's been a pleasure doing business with you: A strategic analysis and critique of university change management. Critical Perspectives on Accounting, 13(5-6), 603-619. https://doi.org/10.1006/cpac.2002.0561

Patton M. Q. (1999). Enhancing the quality and credibility of qualitative analysis. Health services research, 34(5 Pt 2), 1189–1208.

Permana, A., Purba, H., & Rizkiyah, N. (2021). A systematic literature review of Total Quality Management (TQM) implementation in the organization. International Journal of Production Management and Engineering, 9(1), 25-36. https://doi.org/10.4995/ijpme.2021.13765

Perron, A., Fluet, C., & Homes, D. (2004). Agents of care and agents of the state: Bio-power and nursing practice. Journal of Advanced Nursing, 50(5), 536-544. https://doi.org/10.1111/j.1365-2648.2005.03432.x

Phillips, D.C. (1995). The good, the bad, and the ugly: The many faces of constructivism. Educational Researcher, 24(7), 5-12. https://doi.org/10.3102/0013189X024007005

Piaget, J. (1980). The psychogenesis of knowledge and its epistemo-logical significance. In M. Piattelli-Palmarini (Ed.), Language and learning: The Debate Between Jean Piaget and Noam Chomsky. Harvard University Press. pp. 1-23.

Polit, D.F., & Beck, C.T. (2012). Nursing research: Generating and assessing evidence for nursing practice. Lippincott Williams and Wilkins.

Post-secondary Education Choice and Excellence Act, 2000, S.O. 2000, c. 36. Retrieved January 6, 2026, from https://www.ontario.ca/laws/statute/00p36#BK9

Postsecondary Education Quality Assessment Board. (2022). Manual for Ontario Colleges: Four year degrees: Applying for ministerial consent under the Post-secondary Education Choice and Excellence Act, 2000 (June 2022 update). https://peqab.ca/wp-content/uploads/_docs/Publications/Handbooks%20Guidelines/MANUAL%20ONTARIO%20COLLEGES%204%20YEAR%20DEGREES_v2.pdf

Postsecondary Education Quality Assessment Board. (2024). PEQAB 101. Postsecondary Education Quality Assessment Board. https://view.officeapps.live.com/op/view.aspx?src=https%3A%2F%2Fpeqab.ca%2Fwp-content%2Fuploads%2F_docs%2FPublications%2FPEQAB%2520101%2520July%25202024%2520jbb_final.pptx&wdOrigin=BROWSELINK

Postsecondary Education Quality Assessment Board. (2025). PEQAB policy 0. Defining quality. Postsecondary Education Quality Assessment Board. https://peqab.ca/wp-content/uploads/_docs/Publications/Policies/0%20Defining%20Quality%20jbb.pdf

Prakash, G. (2018). Quality in higher education institutions: Insights from the literature. TQM Journal, 30(6), 732-748. https://doi.org/10.1108/TQM-04-2017-0043

Preskill, H., & Catsambas, T. T. (2006). Reframing evaluation through appreciative inquiry. SAGE.

Prior, L. (2003). Using documents in social research. SAGE Publications.

Prosci. (n.d.-a). The complete guide to managing change resistance. https://www.prosci.com/managing-change-resistance

Prosci. (n.d.-b). What is change management? Thought leadership articles. https://www.prosci.com/resources/articles/what-is-change-management

Pundyke, S. (2020). Change management in higher education: An introductory literature review. Perspectives: Policy and Practice in Higher education, 24(4), 115-120. https://doi.org/10.1080/13603108.2020.1809545

Pushpakumara, H.M.C., Jayaweera, P.M., & Wanniarachchige, M.K. (2023). Issues and challenges of quality assurance in higher education institutes: A systematic literature

review. Journal of Management Matters, 10(1), 49-65. https://doi.org/10.4038/jmm.v10i1.47

Rannisto, P-H., & Saloranta, A. (2019). Evaluation as a tool for leading change. In A. Kangas, J. Kujala, A. Heikkinen, A. Lönnqvist, H. Laihonen, & J. Bethwaite (Eds.), Leading Change in a Complex World: Transdisciplinary Perspectives (pp. 183-200). Tempere University Press.

Rashidi, E., Jingura, R.M., & Kamusoko, R. (2022). Resistance to quality assurance in higher education: Overcoming the challenge. Zimbabwe Journal of Applied Research, 2(4). https://ir.cut.ac.zw:8080/xmlui/handle/123456789/403

Romanowski, M.H. (2022). The idolatry of accreditation in higher education: Enhancing our understanding. Quality in Higher Education, 28(2), 153-167, https://doi.org/10.1080/13538322.2021.1948460

Rosenberg, B. (2018). The rigidness of academic routine. Liberal Education, Fall, 70-73. https://eric.ed.gov/?id=EJ1215814

Russ, T.L. (2008). Communicating change: A review and critical analysis of programmatic and participatory implementation approaches. Journal of Change Management, 8(3-4), 199-211. https://doi.org/10.1080/14697010802594604

Ryan, P. (2015). Quality assurance in higher education: A review of literature. Higher Learning Research Communications, 5(3). https://doi.org/10.18870/hlrc.v5i4.257

Sahmi, Z. & El Abbadi, L. (2024). The evolution of Kaizen in the industry: Systematic literature review. International Journal of Product Management and Engineering, 12(2), 169-179. https://doi.org/10.4995/ijpme.2024.21143

Salman, Y. & Broten, N. (2017). An Analysis of John P. Kotter's Leading Change. Taylor & Francis Group.

Salto, D. J. (2018). Quality assurance through accreditation: When resistance meets over-compliance. Higher Education Quarterly, 72(2), 78-89. https://doi.org/10.1111/hequ.12151

Sammons, P. & Davis, S. (2017). Mixed-methods Approaches and their Application. In D. Wyse, N. Selwyn, E. Smith, & L.E. Suter (Eds.), The BERA/Sage Handbook of Educational Research Volume 1. SAGE Publications.

Schaeffer, N.C. & Presser, S. (2003). The science of asking questions. Annual Review of Sociology, 29, 65-88. https://doi.org/10.1146/annurev.soc.29.110702.110112

Scheuren, F. (2004). What is a Survey? University of New Hampshire. https://www.unh.edu/institutional-research/sites/default/files/media/2022-05/what-is-a-survey.pdf

Schindler, L., Puls-Elvidge, S., Welzant, H., & Crawford, L. (2015). Definition of quality in higher education: A synthesis of the literature. Higher Learning Research Communication, 5(3), 3-13. https://doi.org/10.18870/hlrc.v5i3.244

Schwandt, T. A. & Lichty, L. (2015). What problem are we trying to solve? Practical and innovative uses of multimethod and mixed-methods research. In S. N. Hesse-Biber & R. B. Johnson (Eds.), The Oxford handbook of multimethod and mixed-methods research inquiry. Oxford Library of Psychology. Oxford University Press. https://doi.org/10.1093/oxfordhb/9780199933624.013.13

Schwarz, S., & Westerheijden, D. F. (2004). Preface. In Schwarz, S., & Westerheijden, D. F. (Eds.), Accreditation and Evaluation in the European Higher Education Area (pp. ix-xii). Springer.

Shawer, S. (2013). Accreditation and standards-driven program evaluation: Implications for program quality assurance and interest holder professional development. Quality and Quantity, 47(5), 2883-2913. https://doi.org/10.1007/s11135-012-9696-1

Singh, J., & Singh, H. (2009). Kaizen philosophy: a review of literature. IUP Journal of Operations Management, 8(2), 51. https://login.proxy.bib.uottawa.ca/login?url=https://www.proquest.com/scholarly-journals/kaizen-philosophy-review-literature/docview/200386686/se-2

Skolnik, M. (2012). College baccalaureate degrees and the diversification of baccalaureate production in Ontario [White paper]. http://hdl.handle.net/1807/32379

Skolnik, M.L. & Jones, G.A. (1993). Arrangements for coordination between university and college sectors in Canadian provinces. The Canadian Journal of Higher Education, 23(1), 56-73. https://doi.org/10.47678/cjhe.v23i1.183151

Stame, N. (2014). Positive thinking approaches to evaluation and program perspectives. Canadian Journal of Program Evaluation, 29(2), 67-86. https://doi.org/10.3138/cjpe.29.2.67

Standards Council of Canada. (2024, December 31). Steps to accreditation. https://scc-ccn.ca/accreditation/steps-to-accreditation

Stensaker, B. & Leiber, T. (2015). Assessing the organizational impact of external quality assurance: Hypothesising key dimensions and mechanisms. Quality in Higher Education, 21(3), 328-342. https://doi.org/10.1080/13538322.2015.1111009

Stewart, D.W., Shamdasani, P.N., & Rook, D.W. (2007). Focus groups: Theory and practice. SAGE Publications. https://dx.doi.org/10.4135/9781412991841

Stouten, J., Rousseau, D.M., & De Cremer, D. (2018). Successful organizational change: Integrating the management practice and scholarly literatures. Academy of Management Annals, 12(2), 752-788. https://doi.org/10.5465/annals.2016.0095

Suárez-Barraza, M.,F., Ramis-Pujol, J., & Kerbache, L. (2011). Thoughts on kaizen and its evolution. International Journal of Lean Six Sigma, 2(4), 288-308. https://doi.org/10.1108/20401461111189407

Taffinder, P. (1998). Big Change: A Route-Map for Corporate Transformation. Wiley.

Tagg, J. (2012). Why does the faculty resist change? Change, 44(1), 6–15. https://doi.org/10.1080/00091383.2012.635987

Tamene, E. H. (2016). Theorizing conceptual framework. Asian Journal of Educational Research, 4(2), 50-56.

Tashakkori, A., & Teddlie, C. (1998). Mixed-methodology: combining qualitative and quantitative approaches. SAGE Publications.

Thorne, S., Reimer Kirkham, S., & O'Flynn-Magee, K. (2004). The analytic challenge in interpretive description. International Journal of Qualitative Methods, 3(1), 1–11. https://doi.org/10.1177/160940690400300101

Tucker, L. (2021, March 25). 10 of the oldest universities in the world. QS Top Universities. https://www.topuniversities.com/blog/10-oldest-universities-world

Tutko, M. (2019). Quality culture research in higher education – literature review. Scientific Papers of Silesian University of Technology, Organization and Management Series, 136, 619-629. http://dx.doi.org/10.29119/1641-3466.2019.136.48

Usher, A. (2018, October 10). History of Canadian PSE Part IV (to 1974). Higher Education Strategy Associates. https://higheredstrategy.com/history-of-canadian-pse-part-iv-to-1974/

Usher, A. (2025). The State of Postsecondary Education in Canada, 2025. Higher Education Strategy Associates. https://higheredstrategy.com/wp-content/uploads/2025/10/SPEC-2025_web_v3.pdf

Vargas, C., Whelan, J., Brimblecombe, J., & Allender, S. (2022). Co-creation, co-design and co-production for public health: A perspective on definitions and distinctions. Public Health Research & Practice, 23(2), e3222211. https://doi.org/10.17061/phrp3222211

Vlăsceanu, L., Grünberg, L., & Pârlea, D. (2007). Quality assurance and accreditation: A glossary of basic terms and definitions (2nd ed.). UNESCO European Centre for Higher Education.

Warrick, D.D. (2023). Revisiting resistance to change and how to manage it: What has been learned and what organizations need to do. Business Horizons, 66(4), 433-441. https://doi.org/10.1016/j.bushor.2022.09.001

Weinert, D., Derby, D., & Paustian, K. (2016). Impact of unionization on faculty resistance to change, justice, trust, conflict, and climate for innovation. Chiropractic Journal of Australia, 44(3), 255-264.

Weinrib, J. & Jones, G.A. (2014). Largely a matter of degrees: Quality assurance and Canadian universities. Policy and Society, 33(3), 225-236. https://doi.org/10.1016/j.polsoc.2014.07.002

Wen, D., Sun, X., & Yan, D. (2022). The quality movement: where are we going? Past, present and future. Total Quality Management, 33(1), 92-112, https://doi.org/10.1080/14783363.2020.1801342

Williams, J. & Harvey, L. (2015). Quality Assurance in Higher Education. In Huisman, J., de Boer, H. F., & Souto-Otero, M. (Eds.), The Palgrave International Handbook of Higher Education Policy and Governance (pp. 506-525). Palgrave Macmillan.

Woelert, P. & Stensaker, B. (2023). The evaluative state, the evaluative society – and beyond. In Amaral, A & Magalhães, A. (Eds.), Handbook on Higher Education Management and Governance (pp. 233-244). Edward Elgar Publishing. https://doi.org/10.4337/9781800888074.00030

Wu, M.-J., Zhao, K., & Fils-Aime, F. (2022). Response rates of online surveys in published research: A meta analysis. Computers in Human Behavior Reports, 7. https://doi.org/10.1016/j.chbr.2022.100206

Appendix A: Data Extraction Sheet (Part 1)

OUCQA	
Criteria	Descriptive Code
Criteria description 1	
Criteria description 2	
Criteria description 3	
Criteria description etc…	
Procedures	
Procedure description 1	
Procedure description 2	
Procedure description 3	
Procedure description etc…	
Open	
Open description 1	
Open description 2	
Open description etc…	
PEQAB	
Criteria	
Criteria description 1	
Criteria description 2	
Criteria description 3	
Criteria description etc…	
Procedures	
Procedure description 1	
Procedure description 2	
Procedure description 3	
Procedure description etc…	
Open	
Open description 1	

Open description 2	
Open description etc…	

CNO	
Criteria	
Criteria description 1	
Criteria description 2	
Criteria description 3	
Criteria description etc…	
Procedures	
Procedure description 1	
Procedure description 2	
Procedure description 3	
Procedure description etc…	
Open	
Open description 1	
Open description 2	
Open description etc…	
CASN	
Criteria	
Criteria description 1	
Criteria description 2	
Criteria description 3	
Criteria description etc…	
Procedures	
Procedure description 1	
Procedure description 2	
Procedure description 3	
Procedure description etc…	
Open	

Open description 1	
Open description 2	
Open description etc…	

Mapping	**OUCQA**	**PEQAB**	**CNO**	**CASN**
Criteria				
Criteria code 1				
Criteria code 2				
Criteria code 3				
Criteria code etc…				
Procedures				
Procedure code 1				
Procedure code 2				
Procedure code 3				
Procedure code etc…				
Open				
Open code 1				
Open code 2				
Open code etc…				

Appendix B: Survey for School of Nursing Stakeholder[3]

Quality assurance in Ontario Schools of Nursing:
An explanatory, sequential mixed-methods study

We would like to understand and measure your experiences with the various quality assurance reviews that Ontario Schools of Nursing go through. In particular, we want to know which quality assurance reviews have occurred at your school, what your involvement was in the process, and what you see are the advantages and disadvantages of these reviews. This survey uses a number of keywords. Here are the definitions of those keywords:

Accreditation	In the context of education programs, accreditation is the formal process of recognizing program quality. Accreditation is an assessment of a program against predetermined standards and criteria. In Canada, the term is usually applied to individual programs striving to demonstrate excellence.
Canadian Association of Schools of Nursing (CASN)	CASN is the national voice for nursing education, research, and scholarship and represents baccalaureate and graduate nursing programs in Canada.
College of Registered Nurses of Ontario (CNO)	The College of Nurses of Ontario is the governing body for Registered Nurses (RNs), Registered Practical Nurses (RPNs) and Nurse Practitioners (NPs) in Ontario, Canada.
Postsecondary Education Quality Assessment Board	The Board is the provincial body responsible for assuring the quality of all programs leading to degrees granted by colleges.
Ontario Universities Council on Quality Assurance	The Council is the provincial body responsible for assuring the quality of all programs leading to degrees and graduate diplomas, including new undergraduate and graduate programs, and for overseeing the regular audit of each university's quality assurance processes.
Regulatory approval	Regulatory approval of education is a process intended to ensure that graduates of programs are safe, competent, and ethical practitioners of their profession.
Quality assurance	In higher education, quality assurance is about ensuring that there are mechanisms, procedures, and processes in place to ensure that the desired quality, however defined and measured, is delivered.
School of Nursing	The term 'School of Nursing' is used to describe the administrative unit of a university or college that is responsible for the

[3] Between deployment of the survey and interview materials and the authoring of this dissertation, the movement to decolonize language came to my attention with the regards to the use of "interest holder" rather than "stakeholder". I have retained the use of the term "stakeholder" in the Appendices to more accurately reflect the materials that were disseminated to study participants, though the term "interest holder" is used throughout. For more information, please view the Government of British Columbia's style guide for writing indigenous content (2024).

	development, delivery, and quality of a curriculum that leads to a degree in nursing.

1. What is your employment profile in your School of Nursing?

- ○ Administration (i.e. dean, head, associate dean, program director)
- ○ Faculty (i.e. FT/PT, sessional, emeritus)
- ○ Support staff
- ○ None of the above

If none of the above, survey ends with the following message: Thank you for your interest in participating in this study. At this time, your stakeholder group is not included in the study's scope. For more information, please contact Elise Guest at [email address].

2. Which quality assurance reviews has your School of Nursing participated in in the past?

- ○ Internal Quality Assurance Process (IQAP) for the Ontario Universities Council on Quality Assurance (OUCQA)
- ○ Postsecondary Education Quality Assessment Board (PEQAB) for Ontario colleges
- ○ Regulatory approval for the College of Nurses of Ontario (CNO)
- ○ Accreditation for the Canadian Association of Schools of Nursing (CASN)
- ○ None of the above

If none of the above, survey ends with the following message: Thank you for your interest in participating in this study. At this time, this study is seeking to understand stakeholder experiences with the quality assurance reviews identified above. For more information, please contact Elise Guest at [email address].

3. How involved have you been with the quality assurance requirements for your School of Nursing?

○	○	○	○	○	○
Not involved at all	Involved a little	Somewhat involved	Involved	Very involved	I don't know

4. If you indicated in question 2 that you had any involvement with QA reviews, please indicate all areas of your involvement:[4]

Areas of involvement	OUCQA **OR** PEQAB	CNO	CASN
Discussions with the quality assurance organization	○	○	○
Planning for self-study report-writing	○	○	○
Planning for on-site visit	○	○	○
Coordination of on-site visit	○	○	○
Data collection for self-study report	○	○	○
Data analysis for self-study report	○	○	○
Self-study report writing	○	○	○
Meeting with external reviewers	○	○	○
Data collection for response report	○	○	○
Data analysis for response report	○	○	○
Response report writing	○	○	○
Attending quality assurance decision-making meeting	○	○	○
Planning for follow-up action(s)	○	○	○
Implementing follow-up actions(s)	○	○	○
Other	○	○	○

(text box response if 'other' is selected)

[4] [The list of areas will be confirmed and/or augmented by the results of the findings of Part 1 of my study, as described above.]

5. Thinking of the quality assurance reviews your School of Nursing has participated in in the past, what advantages do you see in the process?

(text box response)

6. Thinking of the quality assurance reviews your School of Nursing has participated in in the past, what disadvantages do you see in the process?

(text box response)

7. What changes, if any, would you make to the current quality assurance landscape for Ontario Schools of Nursing?

(text box response)

8. Are there any other comments you would like to make on the quality assurance reviews your School of Nursing has participated in in the past?

(text box response)

9. Are you interested in participating in a follow-up interview for this study?

- ○ Yes, please email me additional information
- ○ Maybe, please email me additional information
- ○ No

Respondents who indicate ‘yes’ or ‘maybe’ will be asked to provide their email address.

10. Would you like to receive a summary of the survey results?

- ○ Yes
- ○ No

Respondents who indicate 'yes' will be asked to provide their email address.

11. I consent to have my responses included in this study.

- ○ Yes

To review information about this study, please click here.

Link will direct participants to a webpage that includes information about my project in general, how this stage fits within it, and information about REB approval.

Appendix C: Invitation to Participants for Part 2, Phase 1 of the Study

Université d'Ottawa / University of Ottawa

Quality assurance in Ontario Schools of Nursing:
An explanatory, sequential mixed-methods study

Research Team:	Elise Guest, PhD (candidate) Faculty of Education University of Ottawa Vanier Hall 5002 136, Jean-Jacques-Lussier Private Ottawa, Ontario K1N 6N5 [phone number] [email address]	Katherine Moreau, PhD (Supervisor) Faculty of Education University of Ottawa Vanier Hall 5083 136, Jean-Jacques-Lussier Private Ottawa, Ontario K1N 6N5 [phone number] [email address]

Hello,

You are invited to take part in the above-mentioned research study conducted by Elise Guest, PhD candidate from the University of Ottawa, under the supervision of Professor Katherine Moreau. You have been identified as a potential participant in this study because of your involvement in an Ontario School of Nursing.

The purpose of the study is to (a) understand the nuances of the various quality assurance reviews School of Nursing in Ontario are subject to, (b) understand the perceptions of administration, faculty, and support staff in Ontario Schools of Nursing towards the same, and (c) identify areas of improvement for the current quality assurance requirements. This phase of research to is explore the perceptions of the administration, faculty, and support staff of Ontario School of Nursing with regards to the current quality assurance requirements.

For Part 2, Phase 1 of the study, you are invited to complete the attached survey. The survey contains a range of questions about your experience with the provincial, regulatory, and discipline-specific QA activities that your School of Nursing has participated in in the past. In particular, it asks about **your** perceptions of and experiences with QA reviews. It also contains some demographic questions. The survey will take approximately **10 minutes** to complete. We ask that you complete the survey online using the following link [insert link] by **[insert date of completion]. By completing this survey you are consenting to participate in Part 2, Phase 1 of this study.**

There is little risk associated with your involvement in Part 2, Phase 1 of the study. Some of the items and questions on the survey may make you feel uncomfortable because they ask about your perceptions of, and experiences with, your employer and your profession's regulator. You do not have to respond to any items or answer questions that make you feel uncomfortable.

You may or may not benefit directly from Part 2, Phase 1 of the study. The study will generate awareness and reflections about the current perceptions of stakeholders within Ontario School of Nursing for the various quality assurance reviews they participate in. The study will also potentially improve the quality assurance landscape by informing provincial, regulatory, and discipline-specific quality assurance organizations about the impact of their reviews.

The survey is designed so that your identity will remain strictly confidential and anonymous. You will not be asked to state your name on the survey. Your survey responses will be combined with other responses so that you cannot be identified in published reports or presentations. Also, any written responses that could potentially reveal your identity (e.g., name, town, or region) will be blacked out from the survey and not included in the database.

Completed surveys will be stored on a password-protected cloud server. Only the members of the above-mentioned research team will have access to the survey's responses. Data will be conserved for five years after the publication of research findings. After this time, data will be deleted.

The completion of this survey is **voluntary**. You can withdraw from the study at any time and/or refuse to answer any questions without suffering any negative consequences. If you choose to withdraw, all data gathered until the time of withdrawal will be deleted, destroyed, and not included in any presentations or publications.

If you indicate you would like to participate in the study further, you will receive an email inviting you to participate in Part 2, Phase 2 of this study. Your participation in this second phase is **optional.** Part 2, Phase 2 involves a one-on-one interview with Elise Guest. The interview focuses on your perception of the benefits, barriers, risks, and possible areas of reform for the QA landscape for Ontario Schools of Nursing. Each interview will last approximately one hour and will be scheduled at a time that is convenient for you. **By completing the attached survey for Part 2, Phase 1, you are <u>not</u> consenting to participating in Part 2, Phase 2.** You will be asked at the end of the survey for Part 2, Phase 1 if you would like to participate in Part 2, Phase 2.

If you have any questions about the study, please contact Elise Guest or Katherine Moreau at the coordinates below. If you have any questions regarding the ethical conduct of this study, you may contact the Protocol Officer for Ethics in Research, University of Ottawa at:

Tabaret Hall
550 Cumberland Street, Room 159
Ottawa, Ontario K1N 6N5
(613) 562-5841

ethics@uottawa.ca

Sincerely,

Elise Guest, PhD (candidate) Faculty of Education University of Ottawa Vanier Hall 5002 136, Jean-Jacques-Lussier Private Ottawa, Ontario K1N 6N5 [phone number] [email address]	Katherine Moreau, PhD (Supervisor) Faculty of Education University of Ottawa Vanier Hall 5083 136, Jean-Jacques-Lussier Private Ottawa, Ontario K1N 6N5 [phone number] [email address]

Appendix D: Reminder Email to Participants for Part 2, Phase 1 of the Study

Université d'Ottawa / University of Ottawa

Quality assurance in Ontario Schools of Nursing:
An explanatory, sequential mixed-methods study

Research Team:	Elise Guest, PhD (candidate) Faculty of Education University of Ottawa Vanier Hall 5002 136, Jean-Jacques-Lussier Private Ottawa, Ontario K1N 6N5 [phone number] [email address]	Katherine Moreau, PhD (Supervisor) Faculty of Education University of Ottawa Vanier Hall 5083 136, Jean-Jacques-Lussier Private Ottawa, Ontario K1N 6N5 [phone number] [email address]

Hello,

Approximately [two/four] weeks ago, you were invited to take part in the above-mentioned research study conducted by Elise Guest, PhD candidate from the University of Ottawa under the supervision of Professor Katherine Moreau. The purpose of the study is to (a) understand the nuances of the various quality assurance reviews Schools of Nursing in Ontario are subject to, (b) understand the perceptions of administration, faculty, and support staff in Ontario Schools of Nursing towards the same, and (c) identify areas of improvement for the current quality assurance requirements. This phase of research to is explore the perceptions of the administration, faculty, and support staff of Ontario Schools of Nursing with regards to the current quality assurance requirements.

For the study, you were invited to complete a survey. The survey contains a range of questions about your experience with the provincial, regulatory, and discipline-specific QA activities that your School of Nursing has participated in in the past. In particular, it asks about your perceptions of and experiences with quality assurance reviews. It also contains some demographic questions. **If you have completed the survey –THANK YOU!**

The completion of this survey is **voluntary** but each response is valuable to us. If you have not yet completed the survey, we would appreciate if you would consider taking approximately 10

minutes to do so using the following link [insert link]. Please remember that your identity and responses will be kept confidential.

Sincerely,

Elise Guest, PhD (candidate) Faculty of Education University of Ottawa Vanier Hall 5002 136, Jean-Jacques-Lussier Private Ottawa, Ontario K1N 6N5 [phone number] [email address]	Katherine Moreau, PhD (Supervisor) Faculty of Education University of Ottawa Vanier Hall 5083 136, Jean-Jacques-Lussier Private Ottawa, Ontario K1N 6N5 [phone number] [email address]

Appendix E: Email Message to Possible Interviewees (Part 2, Phase 2)

Hello!

I am writing today to invite you to participate in an interview for a study that aims to (a) understand the nuances of the various quality assurance reviews schools of nursing in Ontario are subject to, (b) understand the perceptions of administration, faculty, and support staff in Ontario schools of nursing towards the same, and (c) identify areas of improvement for the current quality assurance requirements. As someone who works in an Ontario school of nursing, your opinions, perspectives, and thoughts on this topic are of great value to this study.

The findings from this study will generate awareness and reflection about the current perceptions of stakeholders within Ontario Schools of Nursing for the various quality assurance reviews they participate in. The study also has the potentially improve the quality assurance landscape by informing provincial, regulatory, and discipline-specific quality assurance organizations about the impact of their reviews. Please find attached an Information Letter that describes this study further. If you have any questions or would like to participate in an interview, please reply to Elise Guest at [email address] by [insert the date 2 weeks after email was sent].

Thank you in advance for your time.

Sincerely,

Elise Guest, MA, PhD(c)
Faculté d'éducation / Faculty of Education
Université d'Ottawa / University of Ottawa

Katherine Moreau, PhD (Supervisor)
Professeure agrégée/ Associate Professor
Faculté d'éducation / Faculty of Education
Université d'Ottawa / University of Ottawa

Appendix F: Information Letter to Interviewees (Part 2, Phase 2)

Université d'Ottawa / University of Ottawa

Quality assurance in Ontario Schools of Nursing:
An explanatory, sequential mixed-methods study

Research Team:	Elise Guest, PhD (candidate) Faculty of Education University of Ottawa Vanier Hall 5002 136, Jean-Jacques-Lussier Private Ottawa, Ontario K1N 6N5 [phone number] [email address]	Katherine Moreau, PhD (Supervisor) Faculty of Education University of Ottawa Vanier Hall 5083 136, Jean-Jacques-Lussier Private Ottawa, Ontario K1N 6N5 [phone number] [email address]

Invitation to Participate: You are invited to participate in an interview for the above-mentioned Doctoral Thesis study conducted by Elise Guest, PhD (Education) candidate, from the University of Ottawa under the supervision of Professor Katherine Moreau. It has been approved by the Research Ethics Board at the University of Ottawa.

Purpose of the Study: The purpose of the study is to (a) understand the nuances of the various QA reviews SoN in Ontario are subject to, (b) understand the perceptions of administration, faculty, and support staff in Ontario SoN towards the same, and (c) identify areas of improvement for the current QA requirements.

Participation: If you wish to participate in this study, please reply to the invitation email with your availability to participate in a one-on-one interview. The interview will be a semi-structured conversation-style session. You will be asked a few open-ended questions about your perceptions, opinions of the current quality assurance requirements for Ontario schools of nursing. The interview will take place via Zoom or Microsoft Teams at a time that is most convenient to you. We will ask that you select a location for the interview that is private and convenient for you. Elise Guest will conduct the interview with you from a private office. The interview will take approximately **one hour** to complete. With your consent, the interview will be audio-recorded and transcribed by Elise Guest or a professional transcriptionist for analysis.

Risks: There is little risk associated with your involvement in this study. However, because questions will ask for your personal opinions, perceptions or experiences involving your employer and your profession's regulator, you may feel uncomfortable sharing some of my personal insights on the topic. Thus, you do not have to respond to any question that make you feel uncomfortable, and you may refuse to participate

in the study at any time. Your responses, recordings and transcripts will only be shared with the researchers of this study and will remain confidential.

Benefits: You may or may not benefit directly from this study. The study will generate awareness and reflection about the current perceptions of stakeholders within Ontario Schools of Nursing for the various quality assurance reviews they participate in. The study will also potentially improve the quality assurance landscape by informing provincial, regulatory, and discipline-specific quality assurance organizations about the impact of their reviews.

Confidentiality and Anonymity: The information that you share in the interview will remain strictly confidential. The information you provide in the interview will only be used to explore the perceptions of stakeholders on the current quality assurance landscape for Ontario Schools of Nursing. Because the interview will be conducted by Zoom or Microsoft Teams with Elise Guest, your anonymity cannot be fully protected. Only Elise Guest and her supervisor (Dr. Katherine Moreau) will know your identity, and you will not be asked to state your name during the interview. Any information that could potentially reveal your identity (e.g., name, specific position in the organization, years of experience) will be erased from the video recording and transcript so that you cannot be identified in published reports or presentations.

The digital video-audio recording of the interview will be downloaded and erased from the audio-recorder immediately after the interview. All hard copy data (i.e. transcripts, consent forms, researchers' notes) will be stored on a password-protected cloud server accessible only to Elise Guest. All video-audio recordings and other electronic data (i.e. consent forms) will be stored on the same password-protected cloud server. Only the members of the above-mentioned research team will have access to the data. Data will be conserved for five years after the publication of research findings. After this time, data will be shredded and appropriately discarded.

Voluntary Participation: Your participation in the study is **voluntary**. You can withdraw from the study at any time and/or refuse to answer any questions without any negative consequences. If you choose to withdraw, all of your contributions up to the time of withdrawal will be deleted and excluded from the study.

If you are interested in receiving a summary of the study results, you will be given the option to indicate this interest on the consent form.

If you are interested in participating in an interview for this study, please contact Elise Guest ([email address]**) to obtain additional information about the interview.** As mentioned, the interview will be scheduled at a time that is convenient for you. We will email you a copy of the consent form to review, and your consent will be obtained prior to the interview.

If you have any questions regarding the ethical conduct of this study, you may contact the Office of Research Ethics and Integrity via email (ethics@uottawa.ca) or telephone (613-562-5387).
Thank you for taking the time to read this information letter and for considering your participation in this study.

Sincerely,

_____ Elise Guest, PhD (candidate) Faculty of Education University of Ottawa Vanier Hall 5002 136, Jean-Jacques-Lussier Private Ottawa, Ontario K1N 6N5 [phone number] [email address]	_____ Katherine Moreau, PhD (Supervisor) Faculty of Education University of Ottawa Vanier Hall 5083 136, Jean-Jacques-Lussier Private Ottawa, Ontario K1N 6N5 [phone number] [email address]

Appendix G: Interview Guide for Part 2, Phase 2

Hello,

Thank you for taking the time to talk to me about your perceptions of the quality assurance reviews for Schools of Nursing in Ontario. My name is Elise, and I will be conducting our interview today. This interview will last approximately thirty minutes, and, with your consent, it will be video/audio-recorded.

This interview is part of a larger study to (a) understand the nuances of the various quality assurance reviews School of Nursing in Ontario are subject to, (b) understand the perceptions of administration, faculty, and support staff in Ontario Schools of Nursing towards the same, and (c) identify areas of improvement for the current quality assurance requirements. This phase of research to is explore the perceptions of the administration, faculty, and support staff of Ontario School of Nursing with regards to the current quality assurance requirements.

The questions will focus on your perceptions and opinions about the various quality assurance reviews that your school goes through. The information gained from our discussion may help to inform the province, the regulators, and the discipline in general about the impact of the current quality assurance expectations.

Any comments that you make today will be kept confidential. Information that identifies you will not be included in any portion of the study. Only I and my supervisor (Dr. Katherine Moreau) will know your identity and have access to this recorded interview, and its data.

You are free to leave at any time, and please feel free to only answer the questions that you are comfortable answering. Before we begin, I would like to remind you that there are no right or wrong answers to the questions that I will be asking. You've reviewed and signed the consent form, but do you have any questions about it?

Do you have any other questions for me before we begin?

Can you tell me a bit about yourself?

Questions for Discussion:

1. As a level-setting question, which QA reviews have you been involved with at your SoN?

Probes:

   a) How would you characterize your level of involvement?
   b) How would you characterize your SoN's processes around preparing for, and executing, its QA reviews?

2. What benefits, if any, do you see with the current quality assurance requirements for Ontario Schools of Nursing?

   Probes

    a) The survey identified the following themes to ask about: continual improvement, benefits to the curriculum, validation of the program

3. What problems, if any, do you see with the current quality assurance requirements for Ontario Schools of Nursing?
   Probes

    a) The survey identified the following themes to ask about: draw on energy, capacity constraints, limitations to innovation, program uniqueness and academic freedom, flawed internal processes.

4. In your opinion, what risks, if any, does your School of Nursing face because of the current expectations around quality assurance reviews?
   Probes:

    a) Are there reputational risks?
    b) Are there financial risks?
    c) Are there human resource risks?
    d) Do the risks pertain to participating? Or not participating?

5. Do you have any suggestions on how the current quality assurance approach can be improved?
   Probes:
   With the understanding that each review looks at similar, but has slightly different elements:

    a) Should one (or more of the QA reviews) be eliminated?
    b) Could the processes be merged?
    c) Should some or all of the process be eliminated completely?

Closing Remarks:
Is there anything you would like to add about the current or possible future state of quality assurance reviews in Ontario Schools of Nursing?

Thank you very much for taking the time to participate in this interview with me. I've enjoyed learning about your perspective on this topic.

Appendix H: Consent Form for Part 2, Phase 2 of the Study

Université d'Ottawa / University of Ottawa

Consent Form

Quality assurance in Ontario Schools of Nursing:
An explanatory, sequential mixed-methods study

Research Team:	Elise Guest, PhD (candidate) Faculty of Education University of Ottawa Vanier Hall 5002 136, Jean-Jacques-Lussier Private Ottawa, Ontario K1N 6N5 [phone number] [email address]	Katherine Moreau, PhD (Supervisor) Faculty of Education University of Ottawa Vanier Hall 5083 136, Jean-Jacques-Lussier Private Ottawa, Ontario K1N 6N5 [phone number] [email address]

Invitation to Participate: I am invited to participate in an interview for the above-mentioned Doctoral Thesis study conducted by Elise Guest, PhD (Education) candidate, from the University of Ottawa under the supervision of Professor Katherine Moreau. It has been approved by the Research Ethics Board at the University of Ottawa.

Purpose of the Study: The purpose of the study is to (a) understand the nuances of the various QA reviews SoN in Ontario are subject to, (b) understand the perceptions of administration, faculty, and support staff in Ontario SoN towards the same, and (c) identify areas of improvement for the current QA requirements.

The interview will be a semi-structured conversation-style session. I will be asked a few open-ended questions about my perceptions and opinions on the various quality assurance reviews my School of Nursing participates in. The interview will take place via Zoom or Microsoft Teams (at my discretion) at a time that is most convenient to me. I acknowledge that the researcher asks that I select a location for the interview that is private and convenient for me. Elise Guest will conduct the interview with me from a private office. The interview will take approximately one hour to complete. With my consent, the interview will be audio-recorded and transcribed by Elise Guest or a professional transcriptionist for analysis.

Risks: There is little risk associated with my involvement in this study. However, because questions will ask for my personal opinions, perceptions or experiences involving my employer and my profession's

regulator, I may feel uncomfortable sharing some of my personal insights on the topic. Thus, I do not have to respond to any question that makes me feel uncomfortable, and I may refuse to participate in the study at any time. My responses, recordings and transcripts will only be shared with the researchers of this study and will remain confidential.

Benefits: I may or may not benefit directly from this study. The study will generate awareness and reflection about the current perceptions of stakeholders within Ontario Schools of Nursing for the various quality assurance reviews they participate in. The study will also potentially improve the quality assurance landscape by informing provincial, regulatory, and discipline-specific quality assurance organizations about the impact of their reviews.

Confidentiality and Anonymity: The information that I share in the interview will remain strictly confidential. The information I provide in the interview will only be used to explore the perceptions of stakeholders on the current quality assurance landscape for Ontario Schools of Nursing. Because the interview will be conducted by Zoom or Microsoft Teams with Elise Guest, my anonymity cannot be fully protected. Only Elise Guest and her supervisor (Dr. Katherine Moreau) will know my identity, and I will not be asked to state my name during the interview. Any information that could potentially reveal my identity (e.g., name, specific position in the organization, years of experience) will be erased from the interview transcript so that I cannot be identified in published reports or presentations.

The digital video-audio recording of the interview will be downloaded and erased from the audio-recorder immediately after the interview. All hard copy data (i.e. transcripts, consent forms, researchers' notes) will be stored on a password-protected cloud server accessible only to Elise Guest. All video-audio recordings and other electronic data (i.e. consent forms) will be stored on the same password-protected cloud server. Only the members of the above-mentioned research team will have access to the data. Data will be conserved for five years after the publication of research findings. After this time, data will be shredded and appropriately discarded.

Voluntary Participation: My participation in the study is voluntary. I can withdraw from the study at any time and/or refuse to answer any questions without any negative consequences. If I choose to withdraw, all of my contributions up to the time of withdrawal will be deleted and excluded from the study.

Acceptance: I _____, agree to participate in the above-mentioned research study conducted by Elise Guest, PhD candidate from the Faculty of Education, University of Ottawa, under the supervision of Professor Katherine Moreau.

By providing my email, I am providing consent to Elise Guest to send me a summary of findings from my interview, which I will review and provide feedback on: _____.

If I have any questions about the study, I may contact Elise Guest or Katherine Moreau at:

Elise Guest, PhD (candidate) Faculty of Education University of Ottawa Vanier Hall 5002 136, Jean-Jacques-Lussier Private	Katherine Moreau, PhD (Supervisor) Faculty of Education University of Ottawa Vanier Hall 5083

Ottawa, Ontario K1N 6N5 [phone number] [email address]	136, Jean-Jacques-Lussier Private Ottawa, Ontario K1N 6N5 [phone number] [email address]

If I have any questions regarding the ethical conduct of this study, I may contact the Office of Research Ethics and Integrity via email (ethics@uottawa.ca) or telephone (613-562-5387). It is recommended that I save a copy of this consent form for my records.

Appendix I: Definitions of Terms for Part 1 of the Study

Term	Definition
Accommodations	"Under the [Ontario Human Rights] Code, organizations are required to prevent and remove barriers and provide accommodation to the point of undue hardship. The principle of accommodation arises most frequently in the context of creed, family status, sex (pregnancy) and disability, as well as age, gender identity and gender expression... Note that some accommodations are very simple and straightforward, and do not require a formal or complex process. The way an accommodation is provided and how it is implemented are subject to human rights standards. The principles of dignity, individualization, inclusion and full participation apply both to the substance of an accommodation, and to the accommodation process. At the heart of the accommodation process is the responsibility, shared by all parties, to have a meaningful dialogue about accommodation, and to work together respectfully towards accommodation solutions. Everyone involved should co-operatively engage in the process, share information, and work towards potential accommodation solutions" (Ontario Human Rights Commission, 2024).
Accountability	"Measures undertaken by a higher education institution to ensure its administrative staff (other than those in international offices) are adequately prepared to perform tasks related to the internationalization of higher education and training administrative staff to become active players in the process" (Huisman, 2020, p. 80).
Adjudication	"The process by which a programme is judged to have met the requirements for an award by a relevant institution with degree-awarding powers (institutional self-evaluation) or by a relevant examining board (validation by an outside examining body)" (Vlăsceanu et al., 2007, p. 97).
Administration/Governance	As suggested by the criteria around "Leadership, Governance, and Administration" presented by CASN (2020), the administration of a SoN are those responsible for decision-making in issues related to human resources, finances, and policy. In addition, the governance of an SoN should ensures adequate policies and procedures are in place to support operations in a clear and transparent way (CASN, 2020) and that any partners are also subject to the same rules (CNO, 2019).
Admissions	"Admissions" refers here to the minimum pre-determined requirements that applicants to a nursing program must meet in order to be granted a place in the program. Depending on the program, these requirements can include prerequisite courses, previous grades, and/or previous experiences.
Annual report	An annual report may be required by a QA body to ensure they are aware of the overall state of a program (OUCQA) or to confirm on-going approval of the program (CNO).
Audit	The process of quality assessment by which an external body ensures that (i) the institution of programme quality assurance procedures or (ii) that the overall (internal and external) quality assurance procedures of the system are adequate and are actually being carried out… audits are undertaken to meet internal goals

	(internal audit) or external goals (external audit). The results of the audit must be documented (audit report)" (Vlăsceanu et al., 2007, p. 77).
Authority	"Authority" refers here to the right a body has to engage HE in QA activities. OUCQA and PEQAB authority comes through Ontario's Ministry of Colleges and Universities; CNO's authority comes through Ontario's Nursing Act (1991); and CASN's authority comes from its members who voluntarily engage in accreditation.
Clinical	As suggested by CNO's (2019) and CASN's (2020) criteria, "clinical" refers here to a primary, long-term, accute, and/or community setting where learners engage with patients and clients, and are exposed to such aspects of the nursing profession such as institutional policies, procedures and health record systems.
Clinical faculty	As suggested by CNO's (2019) and CASN's (2020) criteria, "clinical faculty" refers here to any individual engaged by the program to provide instruction to students in the clinical setting described above.
Communication	As suggested by CNO's (2019) and CASN's (2020) criteria, "communication" refers here to both the policies and procedures, and mechanisms, that a SoN uses to communicate with interest holders on various aspects of the program.
Competencies	"A specific and measurable pattern of behaviors and knowledge that generates or predicts a high performance level in a given position or context of responsibilities" (Vlăsceanu et al., 2007, p. 45).
Confidentiality	"Protection of identity, privacy rights, and anonymity of individuals and sources of information." (CASN, 2020, p. 4)
Consistency	"Consistency" here refers to the regular application of policies and procedures to all elements of a program. Moreover, consistency is used to describe the fair application of QA body policies and procedures to a SoN's assessment (OCQAS, 2022).
Contextual	"Contextual" here refers to a SoN's ability to create and offer programs that meet the unique needs to their interest holders (OUCQA, 2022; CASN, 2020).
Continuous improvement	"Continual improvement" refers here to the ongoing process of assessing, monitoring, guaranteeing, maintaining, and/or improving the quality of a SoN and/or its programs (Vlăsceanu et al, 2007). Continual improvements ensures not only the quality of a program, but when embraced as an element of a SoN's culture, it created an ethos of QA amongst interest holders which supports program-level learning outcomes and student-centered learning (OUCQA, 2022). Embracing a culture of continual improvements enables HEIs to demonstrate and ensure growth (OCQAS, 2022).
Culture/environment	"Culture/environment" as used here speaks to the "socio-cultural" (CASN, 2020, pg 14) setting of a SoN and its programs. It seeks to understand how the delivery of the program is supported by the people and culture of the SoN (OCQAS, 2022). While it can also refer to the physical space used by SoN, that definition is not applied to this study.
Curriculum	"The planned process for achieving a nursing education program's intended outcomes. For purposes of program approval, nursing curricula includes theoretical

	foundations, learning activities to foster theory application by students and evaluation of student learning" (CNO, 2022, pg 8).
Cycle length	Each QA body has a maximum length that a SoN can have between evaluations. OUCQA has a maximum of eight years between visits; PEQAB has a maximum of seven years; CNO (2022) has a maximum of seven years; and CASN (2020) has a maximum of seven years.
EDI/Ethics	Nursing in Ontario has governed by the professional code of conduct (CNO, 2024) which identifies six elements of ethical practice (which respects equity, diversity, and inclusion) for nurses in the province: 1. Nurses respect clients' dignity. 2. Nurses provide inclusive and culturally safe care by practicing cultural humility. 3. Nurses provide safe and competent care. 4. Nurses work respectfully with the health care team. 5. Nurses act with integrity in clients' best interest. 6. Nurses maintain public confidence in the nursing profession. The term "EDI/Ethics" is used here to encompass these six elements.
Evidence based	"An accumulation of evidence (record of achievement) about specific proficiencies and the characteristics of an institution in relation to a specific type of activity, especially to learning standards" (Vlăsceanu et al., 2007, p. 45).
Faculty	The term "Faculty" is used here to describe the individuals engaged by a SoN to teach elements of its programs to its students. Faculty members are characterized as being adequately qualified (in terms of degree-level preparation, licensure status, and area of knowledge) (OUCQA, 2022; CASN, 2020), supportive of program development and delivery (OCQAS, 2022), and being engaged in student mentoring (OUCQA, 2022) and research (OUCQA, 2022; CASN, 2020).
Fairness	"Openness to reason, freedom from bias, objective, and equitable" (CASN, 2020, p. 4).
Final report	"The document prepared following a quality assessment peer review team site visit that is generally focused on institutional quality, academic standards, learning infrastructure, and staffing. The report about an institution describes the quality assurance (QA) arrangements of the institution and the effects of these arrangements on the quality of its programmes. The audit report is made available to the institution, first in draft form for initial comments, and then in its final, official form. It contains, among other things, the description of the methodology of the audit, the findings, the conclusions of the auditors, and various appendices listing the questions asked" (Vlăsceanu et al., 2007, p. 32).
Focus on students	"Focus on students" is used here to describe the QA process that centre the student experience and outcome within its assessment requirements and processes. (OUCQA, 2022)
Follow-up report	"Follow-up report" is used here to describe the reporting requirement a QA body may set for a SoN following a visit (OUCQA, 2022). This report may require the SoN to provide updates on specific criteria or general operations of the unit and program.

Government regulations	"Government regulations" is used here to denote QA bodies that have language in their criteria or processes which require a SoN comply with specific government-identified standards (such as degree-level outcomes).
HEI autonomy	QA bodies (OUCQA, 2022; CASN, 2020) acknowledge that each institution operates within a unique context and their criteria is designed such to allow those institutions to demonstrate compliance without being too prescriptive on how programs should operate.
Informal review	QA bodies may offer support to institutions who are preparing for an assessment by either reviewing documentation before formal submission for an evaluation (OCQAS, 2022) or by providing guidance on how to meet criteria (CNO, 2019).
Integrity	"Honesty and adherence to moral and ethical principles" (CASN, 2020, p. 4).
Interest holders	"Interest holders" are "groups with legitimate interests in [an] issue under consideration. The interests arise and draw their legitimacy from the fact that people from these groups are responsible for or affected by... decisions..." (Alk et al, 2024). In this work, 'interest holders' is used to describe administration, faculty, and staff of Ontario SoN. While it could be said that SoN interest holders include students, clinical partners, and larger communities, these groups are not always directly involved with QA activities and so are not included in the considerations above.
Licencing	"The process by which a governmental agency grants official permission (i) to persons meeting pre-determined qualifications to engage in a given occupation and/or use of a particular title; (ii) to programmes, based on the evaluation of appropriate plans, to operate before obtaining accredited status, and (iii) to institutions to perform specified functions. Licensing (in the case of persons) is usually obtained through examination or graduation from an accredited institution" (Vlăsceanu et al., 2007, p. 63).
Life-long learning	The term "Lifelong learning" understood here to mean the "development of human potential through a continuously supportive process which stimulates and empowers individuals to acquire all the knowledge, values, skills, and understanding they will require throughout their lifetimes and to apply them with confidence, creativity and enjoyment in all roles, circumstances and environments" (Longworth, 2003, p. 22).
Mandate	"An order given to a person, organization, etc. to carry out a certain task" (Canadian Oxford Dictionary, n.d., Mandate).
Mission	"A particular task or goal assigned to a person or group" (Canadian Oxford Dictionary, n.d., Mission).
Non-burdensome	"Non-burdensome" is used here to describe the goal of reducing the work of QA to be bare minimum required for a QA body to make a decision (OUCQA, 2022).
Non-prescriptive	"Non-prescriptive" is used here to describe an approach to QA criteria that does not dictate how SoN operate or design/deliver programs. Rather, criteria is written in such a way to allow for SoN to demonstrate their contextual settings.
Objective	"Objective" is used here to mean the "fair, accountable and transparent manner" (OUCQA, 2022, p. 8) in which QA bodies make their decisions.

Outcomes based	"Outcomes based" is used here to described a QA system that relies on "assembling, analyzing, and using both quantitative and qualitative evidence of teaching and learning outcomes in order to examine their congruence with stated purposes and educational objectives and to provide meaningful feedback that will stimulate improvement" (Vlăsceanu et al., 2007, p. 63-64).
Partnerships	"Partnership" is used here to describe formal agreements between SoN and various interest holders. As suggested by the CASN (2020) and CNO (2022) criteria, this can include clinical settings and other SoN.
Pedagogy	"The art or science of teaching." The term is used here to describe a SoN's approach to the delivery of its programs (Canadian Oxford Dictionary, n.d., Pedagogy).
Peer review	"Assessment procedure regarding the quality and effectiveness of the academic programmes of an institution, its staffing, and/or its structure, carried out by external experts (peers). (Strictly speaking, peers are academics of the same discipline, but in practice, different types of external evaluators exist, even though all are meant to be specialists in the field reviewed and knowledgeable about higher education in general)" (Vlăsceanu et al., 2007, p. 66).
Post-grad employment	The term "Post-grad employment" is used to describe the process of tracking the ability of students of a program to find employment once they have graduated.
Program evaluation	Program evaluation is the act of assessing and judging a program (Mizikaci, 2006). Specifically, program evaluation is a systematic collection of information about the intentions, operations, and outcomes of a program (Shawer, 2013). Program evaluation yields information about a program and creates new knowledge about it (Yarbrough et al., 2010). The term "program evaluation" is used here to mean the systematic review of a program to determine if it is meeting set goals and intended outcomes; this process can (and often is) separate from the QA bodies' requirements, though it does support QA efforts.
Program learning outcomes	"Program learning outcomes" are "clear and concise statements that describe what successful students should have achieved and the knowledge, skills, and abilities that they should have acquired by the end of the program... Program-level student learning outcomes emphasize the application and integration of knowledge – both in the context of the program and more broadly – rather than coverage of material; make explicit the expectations for student success; are measurable and thus form the criteria for assessment/evaluation; and are written in greater detail than the program objectives. Clear and concise program-level learning outcomes also help to create shared expectations between students and instructors." (OUCQA, 2022, p. 61)
Public safety	"Safety: The reduction and mitigation of unsafe acts within the health care system. This refers to staff, student and client safety... Client, staff or student safety can only occur within a supportive and non-blaming environment that looks at systems issues rather than blames individuals. The health and well-being of all clients, staff and student is a priority in a culture of safety environment." (CN. 2022, p. 9)
QA body autonomy	QA bodies (OUCQA, 2022) state that they operate free from political influence. Specifically, QA body autonomy is understood here to mean that they are "a (non-) governmental or private educational association of national or regional scope that develops evaluation standards and criteria and conducts peer evaluations and

	expert visits to assess whether or not those criteria are met" (Vlăsceanu et al, g. 28).
Quality assurance	"An all -embracing term referring to an ongoing, continuous process of evaluating (assessing, monitoring, guaranteeing, maintaining, and improving) the quality of a higher education system, institutions, or programmes. As a regulatory mechanism, quality assurance focuses on both accountability and improvement, providing information and judgments (not ranking) through an agreed upon and consistent process and well -established criteria... Quality assurance activities depend on the existence of the necessary institutional mechanisms preferably sustained by a solid quality culture. Quality management, quality enhancement, quality control, and quality assessment are means through which quality assurance is ensured... Quality assurance is often considered as a part of the quality management of higher education, while sometimes the two terms are used synonymously" (Vlăsceanu et al, pp. 74-75).
Respect	"Respect" is used here to mean the acknowledgement of the position, beliefs, and independent operations of other organizations and people within the QA systems in Ontario SoN (OUCQA, 2-22).
Response to audit report	The "Response to audit report" is understood here to mean the SoN's response to the report written following the peer-review visit to their institution. This report is an opportunity for SoN to clarify factual misunderstandings within the audit report and provide additional information (as appropriate) to demonstrate compliance with criteria. General, the response report is considered by the QA's adjudicating body in conjunction with the SoN's self-study report and the audit report.
Self-study	"The process of self-evaluation consists of the systematic collection of administrative data, the questioning of students and graduates, and the holding of moderated interviews with lecturers and students, resulting in a self-study report. Self-evaluation is a collective institutional reflection and an opportunity for quality enhancement. The resulting report further serves to provide information for the review team in charge of the external evaluation" (Vlăsceanu et al, p. 56).
Support services/resources	"Support services/resources" is understood here to mean "Those services integral to a student's ability to achieve the program-level learning outcomes" (OUCQA, 2022, p. 55). These services can include, for example: - Information technology supports - Library resources - Academic advising - Psychological services - Financial aid
Sustainable	"Sustainable" is understood here to mean the ability of the QA system to be maintained and "affordable for the system as a whole and for the individual [SoN] in the system." (OCQAS, 2022, p. 4)
Training	"Training" is understood here to mean the process of preparing agents of the QA bodies (OCQAS, 2022) to undertake assessments of SoN against the pre-determined criteria.

Transparency	"The quality of transactions and activities in business, government, etc., being open to examination by the public" (Canadian Oxford Dictionary, n.d., Transparency)
Unit review	"Primary assessment occurs at the unit level where the program itself engages in the development of new programs and self-reflection and self-study of existing programs, calling upon those who participate to assess their contribution and experience (faculty, students, staff, and graduates)." (OUCQA, 2022, p. 5)
Visit	"A component of external evaluation that is normally part of an accreditation process. It may be initiated by the institution itself. It consists of external experts visiting a higher education institution to examine the self-study produced by the institution and to interview faculty members, students, and other staff in order to assess quality and effectiveness (and to put forward recommendations for improvement)" (Vlăsceanu et al, p. 88).

Appendix J: Definitions of Terms for Part 2, Phase 1 of the Study

Term	Definition
Accountability	"Measures undertaken by a higher education institution to ensure its administrative staff (other than those in international offices) are adequately prepared to perform tasks related to the internationalization of higher education and training administrative staff to become active players in the process" (Huisman, 2020, p. 80).
Benefits the curriculum	"Curriculum" is defined here as "The planned process for achieving a nursing education program's intended outcomes. For purposes of program approval, nursing curricula includes theoretical foundations, learning activities to foster theory application by students and evaluation of student learning" (CNO, 2022, p 8). "Benefits the curriculum" refers here to activities that benefit the plan for achieving a program's intended outcomes.
Bureaucratization	"Bureaucratization" is defined here as the negative perception that tasks being undertaken are "burdensome workloads and "unnecessary requirements" (Harvey, 2004, p. 216) for those engaged in the system.
Capacity building	"Capacity building" is meant here to describe any action that is taken by interest holders to support future participation in QA processes.
Comprehensive view	"Comprehensive view" is used here to describe a holistic approach to QA.
Consistency	"Consistency" here refers to the regular application of policies and procedures to all elements of a program. Moreover, consistency is used to describe the fair application of QA body policies and procedures to a SoN's assessment (OCQAS, 2022).
Continual improvement	"Continual improvement" refers here to the ongoing process of assessing, monitoring, guaranteeing, maintaining, and/or improving the quality of a SoN and/or its programs (Vlăsceanu et al, 2007). Continual improvements ensures not only the quality of a program, but when embraced as an element of a SoN's culture, it created an ethos of QA amongst interest holders which supports program-level learning outcomes and student-centered learning (OUCQA, 2022). Embracing a culture of continual improvements enables HEIs to demonstrate and ensure growth (OCQAS, 2022).
Creates capacity constraints	"Creates capacity constraints" is used here to describe the sense amongst interest holders that the QA system is impeding participation in the QA process, and in the delivering of programing to students.
Draw on energy	"Draw on energy" is used here to describe interest holders' sense that the QA process requires time and attention that could be used in delivering programing to students.
Draw on faculty time	Similarly, "draw on faculty time" is used here to describe interest holders' sense that the QA process requires time and attention from faculty members that could be used in delivering programing to students.
Excessive costs	"Excessive costs" refers to the expenses associated with the QA process.
Excessive workload	"Excessive workload" refers to the tasks associated with the QA process.
Flawed process	"Flawed process" refers to the perception that the current structure of three QA reviews is not appropriate.
Follow-up activities	"Follow-up activities" refers here to the requirements/recommendations set by QA bodies for SoN that are conditional to maintain the term of approval or accreditation.
Frequency	"Frequency" refers here to how often a SoN is required to engage in QA processes.
General improvement	"General improvement" refers here to the overall believe that the current QA process leads to improvements.
High standards	"High standards" refers here to the belief that QA results in high standards for nursing programs.
Internal processes	"Internal processes" refers here to the actions that SoN take in order to engage in QA activities.
Intrusive	"Intrusive" refers here to the perception that the current QA process is too involved in SoN operations either purposefully or inadvertently.

Irrelevant	"Irrelevant" refers here to the believe that the current QA system is immaterial to the work of stakeholders.
Length	"Length" refers here to how long it takes to complete a QA review.
Limited internal involvement	"Limited internal involvement" refers here to interest holders' perception of their participation in the process.
Limits academic freedom	"Limits academic freedom" refers here to interest holders' perception that the QA process, due to its complexity and criteria, prescribed what must be taught to students.
Limits innovation	"Limits innovation" refers here to interest holders' perception that the QA process, due to its complexity and criteria, does not allow for experimentation in curriculum content or delivery.
Limits uniqueness	"Limits uniqueness" refers here to interest holders' perception that the QA process, due to its complexity and criteria, does not allow for the development of programming that meets the contextual needs of a SoN's communities.
No benefit	"No benefit" refers here to interest holders' perception that the QA process does not lead to positive outcomes.
Not collaborative	"Not collaborative" refers here to interest holders' perception that QA bodies do not engage in adequate discussion with SoN to create relevant criteria or processes.
Not complimentary of each other	"Not complimentary of each other" refers here to the interest holders' perception that the three types of QA reviews are not adequately aligned.
Not meaningful	"Not meaningful" refers here to interest holders' perception that the QA process does not lead to relevant outcomes.
Nursing discipline	"Nursing discipline" refers here to the larger community of practice in nursing and encompasses clinical and educational practitioners of nursing science.
Overlap	"Overlap" refers here to interest holders' perception of redundancies in the QA requirements.
Patient safety	"Patient safety" refers here to the practice of working within the limits of a nurse's legal scope of practice, education, experience, knowledge, skill and judgment to ensure safe and competent nursing care. (CNO, 2023)
Pedagogical	"The art or science of teaching." The term is used here to describe a SoN's approach to the delivery of its programs (Canadian Oxford Dictionary, n.d., Pedagogy).
Peer-review/validation	"Assessment procedure regarding the quality and effectiveness of the academic programmes of an institution, its staffing, and/or its structure, carried out by external experts (peers). (Strictly speaking, peers are academics of the same discipline, but in practice, different types of external evaluators exist, even though all are meant to be specialists in the field reviewed and knowledgeable about higher education in general)" Vlăsceanu, et al, 2007, p. 66).
Performative	"Performative" refers here to interest holders' perception that QA activities do not lead to quality improvement but rather are undertaken for political reasons.
Prestige	"Prestige" refers here to interest holders' perception that QA is undertaken for reputational reasons and not with the goal of improving programming.
QA body processes	"QA body processes" refers here to the actions that QA bodies take to review a SoN.
QA requirements	"QA body requirements" refers here to the criteria and processes that QA bodies set for the review of a SoN or the follow-up activities SoN must undertake to maintain their term of approval/accreditation.
Redundant	"Redundant" refers here to interest holders' perception that multiple QA process are not required to ensure quality.
Regulator considerations	"Regulator considerations" refers here to interest holders' belief that SoN program is strengthened by the inclusion of materials, expectations, or outcomes set by the regulatory body.
Repetitive	"Repetitive" refers here to interest holders' perception that them must complete the same task multiple time to address elements of various QA processes.
Resource	"Resources" refers here to interest holders' perception that QA allows them to advocate for additional resources for program delivery within their HEI.
Resource consuming	"Resource consuming" refers here to interest holders' perception that QA requires a high-level of resourcing to complete.

Scope	"Scope" refers to the interest holders' perception that the scope of the current QA requirements is not appropriate.
Time consuming	"Time consuming" refers here to interest holders' perception that QA requires a high-level of time to complete.