# LAKEHEAD UNIVERSITY INSTITUTIONAL QUALITY ASSURANCE PROCESS (IQAP)

- 1.0 Ratified by the Quality Council April 28, 2011
- 2.0 Re-ratified by the Quality Council 20 January 2016
  - 2.1 Re-ratified by the Quality Council 20 April 2017
  - 2.2 Re-ratified by the Quality Council 20 April 2018 re new NOSM sections
- 3.0 Re-ratified by the Quality Council: 23 August 2019 re 2016 QC Audit

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#### 1. INTRODUCTION: THE QUALITY ASSURANCE FRAMEWORK (QAF)

"Quality assurance of university academic programs has been adopted around the world and is widely recognized as a vital component of every viable educational system. Considerable international experimentation in the development of quality assurance processes, along with increasing pressure for greater public accountability, has raised the bar for articulating Degree Level Expectations and learning outcomes in postsecondary education." (QAF 2019)

Over a period of two (2) years, during which there was extensive consultation, the Ontario Council of Academic Vice-Presidents (OCAV) developed the Quality Assurance Framework (QAF) for quality assurance of all graduate and undergraduate programs offered by Ontario's publicly assisted universities. The final version of the QAF was approved by the Council of Ontario Universities (COU) Executive Heads in April 2010.

Every publicly assisted Ontario university that grants degrees and diplomas is responsible for ensuring the quality of all of its programs of study, including modes of delivering programs and those academic and student services that affect the quality of the respective programs under review, whether or not the program is eligible for government funding. Under the QAF, institutions are required to design and implement their own **Institutional Quality Assurance Process (IQAP)** that is consistent not just with their own mission statements and their university Degree Level Expectations, but also with the protocols of the QAF. The **IQAP**'s are at the core of the quality assurance process.

The provincial quality assurance authority is called the <u>Ontario Universities Council on Quality Assurance</u> (the Quality Council or QC). The Quality Council was established by OCAV in 2010 and its work is supported by an Appraisal Committee and Audit Committee. Its operations are managed by a secretariat, and headed by the Executive Director of Quality Assurance. The universities have vested in the Quality Council the authority to make the final decision on whether, following the Council-mandated appraisal of any proposed new undergraduate or graduate program, such programs may commence.

The Quality Assurance Framework comprises four (4) distinct components:

- Protocol for New Program Approvals
- Protocol for Expedited Approvals
- Protocol for the Cyclical Review of Existing Programs, and
- Audit Process

The Guide to Quality Assurance Framework also provides additional examples that may be useful.

#### 2. INTRODUCTION TO THE LAKEHEAD UNIVERSITY INSTITUTIONAL QUALITY ASSURANCE PROCESS (IQAP)

The Policy for the **Review and Approval of Academic Programs** (herein referred to as "<u>the Policy</u>") governs the review and approval of proposed new programs and the review of existing programs at Lakehead University. The Policy and the IQAP were first approved by the Lakehead University Senate Academic Committee (SAC) on January 17, 2011 and March 4, 2011, respectively. The Policy for the Review and Approval of Academic Programs was approved by the Lakehead University Senate on March 18, 2011. The Policy was reviewed and revised in 2016, with final Senate approval on January 23, 2017.

The Policy outlines university-wide principles for the review and approval of academic programs. The Policy aligns the University's quality assurance processes detailed in the **IQAP** (originally ratified April 2011) and the provincially mandated QAF (April 2010).

The primary objective of Lakehead University's program review process is to support programs achieving and maintaining the highest possible standards of academic excellence through objective and constructive assessment and follow up. Program reviews are intended to both improve academic programs and to demonstrate accountability to the University community and other public stakeholders.

Program reviews at Lakehead University will:

- ensure rigorous standards for the development of new programs that align with the mission and academic directions of the University;
- ensure the academic standards of existing undergraduate and graduate programs, including for-credit graduate diplomas;
- ensure that programs are current with respect to developments in the discipline;
- ensure ongoing follow-up and development of programs;
- assist the faculties and Academic Units<sup>1</sup> in future planning by clarifying academic objectives and identifying areas of existing and emerging strengths and areas of weakness or concern; and
- evaluate the curricular and pedagogical policies and practices of the Academic Unit offering the program(s).

Lakehead University's IQAP documents processes that are consistent with the recommendations of the Ontario Universities Council on Quality Assurance (OUCQA). This process replaces the University Program Review Audit Committee (UPRAC) process for undergraduate program reviews outlined in Undergraduate Program Review Policy and Procedures (2005) and the Ontario Council for Graduate Studies (OCGS) quality reviews of graduate (Masters and PhD) programs. The Lakehead University Quality Assurance process is intended to be as streamlined as possible while still ensuring accessibility and transparency to the Lakehead University community. Any future substantive changes to the Lakehead University IQAP will be subject to Quality Council ratification.

<sup>&</sup>lt;sup>1</sup> In this document, Academic Unit is defined as the faculty members and administrators involved in providing the program(s) or proposed program(s) in questions. For interdisciplinary programs, the Academic Unit may have representatives from multiple Departments and Faculties.

The Office of the Provost and Vice-President (Academic) ("The Office of the Provost") Quality Assurance webpage provides information about best practices and standardized templates to assist in meeting the program quality assurance processes. The QA webpage is intended to serve as the Institutional Manual (as per Section 4.2.8 of the QAF) containing information and links to information that support the major modification, cyclical program review, expedited review and new program approval processes for undergraduate and graduate programs.

### 2.1 Scope of IQAP Application and Authority Responsible for The Application

Institutional responsibility for quality assurance extends to new and continuing undergraduate and graduate degree/diploma programs on both campuses whether offered in full, in part, or conjointly by any institutions federated and affiliated with Lakehead University. These responsibilities also extend to programs offered in partnership, collaboration or other such arrangement with other postsecondary institutions including colleges, universities, and institutes.

At Lakehead University, the authority for the application of the **IQAP** is the Provost and Vice-President Academic and the institutional contact is the Deputy Provost. In cases where there is uncertainty about the nature of a program approval (e.g. New vs. Expedited vs. Major Modification) and consultation with the Deputy Provost (primarily undergraduate) and/or Dean of the Faculty of Graduate Studies (primarily graduate) has not resolved the question, the Provost and Vice-President Academic shall be the final arbiter for both graduate and undergraduate programs.

Institutional approval of proposals addressing New Programs and Major Modifications to existing programs (see Sections 3, 4 and 5 for details) is the responsibility of the Senate. This includes approval of proposals for the development of transfer pathways between colleges or other universities and Lakehead University, as well as those involving international exchanges/agreements where the outcome is a Lakehead University degree. Such pathways also require the development of an Articulation Agreement; information provided as part of the Articulation Agreement overlaps with that required for the Major Modification and should therefore be developed to align with and support the Major Modification documentation. Faculties are responsible for carefully considering program proposals and for making recommendations to Senate for referral. Senate has delegated responsibility to the Senate Academic Quality Assurance Subcommittee (SAC-QA) to verify that Faculties have taken appropriate steps to ensure that programs are of high quality (i.e., robust, viable and deliverable) and in the interest of the University. The Senate Undergraduate Studies Committee (SUSC), Senate Budget Committee (SBC) and the Faculty of Graduate Studies Council (FGSC): Program/Regulations Committee are also involved in reviewing program proposals, in accordance with their terms of reference, prior to Senate approval.

The Vice-Provost Institutional Planning and Analysis (VP IPA) will provide the required institutional information and statistical data to support the reviews, including data summarized from the student survey of the programs under cyclical review. The University Librarian will provide reports related to the library collections and services as required. A report on the Technology available to support the program will be provided by Lakehead University's Technology Services Centre (TSC).

#### 3. PROTOCOL FOR NEW PROGRAM APPROVALS

The Protocol for New Program Approvals applies to all new undergraduate and graduate for-credit programs. The Protocol includes both internal and external review procedures that are followed by a review by the Appraisal Committee of the Quality Council (QC). The QC has the authority to approve or decline new program proposals. The QAF defines new programs as:

"Any degree, degree program, or program of specialization<sup>2</sup>, currently approved by Senate or equivalent governing body, which has not been previously approved for that institution by the Quality Council, its predecessors, or any intra-institutional approval processes that previously applied. A change of name, only, does not constitute a new program; nor does the inclusion of a new program of specialization where another with the same designation already exists (e.g., a new honours program where a major with the same designation already exists). To clarify, for the purposes of this Framework, a 'new program' is brand-new: that is to say, the program has substantially different program requirements and substantially different learning outcomes from those of any existing approved programs offered by the institution (QAF 2014)"

Examples of what constitutes a "new program" are provided in the OUCQA Guide.

Some examples of program changes that do <u>not</u> qualify as "new" programs would include; a. introducing a new Concentration (5 FCE's) for an existing 4-year Bachelors degree that already has a defined Major,

or

b. introducing a new honours degree with a double Major where the individual Majors with the same designations already exist. Program changes such as these would be considered Major Modifications (refer to Section 5 for information about Major Modifications).

Section 1.6 in The QAF includes a wide range of definitions that may be helpful.

Early consultation with both the Deputy Provost and the VP IPA is encouraged in order to determine if submission of the proposal to the Ministry of Training Colleges and Universities (MTCU) (formerly Ministry of Advanced Education and Skills Development (MAESD)) is necessary. If deemed necessary, the new program will need to meet both the Lakehead University **IQAP** requirements and the current MTCU requirements. Contact the Office of the VP IPA for the latest documentation.

Refer to Appendix 1 for a summary of Lakehead University program types and the requirements for external (i.e. Quality Council) involvement.

<sup>&</sup>lt;sup>2</sup> Note: the term "Specialization" is used differently in the QAF than at Lakehead University. Please see Lakehead University's regulations for the institutional definition.

#### 3.1 New Program Review and Appraisal Process

The new program review and appraisal process involves three (3) phases; each phase includes a number of steps. The first phase:

- a) Requires submission of a Proposal Brief that addresses the criteria listed in Section 3.2 of this document and includes, at a minimum, the evaluation criteria specified in <u>Section 2.1</u> of the QAF.
- b) Includes a checklist generated by the Academic Unit confirming (via signature) that all affected parties (e.g. Deputy Provost, Faculties, Departments, Academic Units, Student Success Centre (for co-op programs), University Librarian, Vice-President Research and Innovation, other Vice-Presidents if applicable) have been consulted with regard to the proposal, and
- c) Addresses the review and approval steps that must happen at Lakehead University and culminates in Senate approval.

The second phase involves submission of the Proposal Brief and supporting review documents to the Quality Council for review by the Appraisal Committee. Following approval by the QC, Lakehead University is responsible for ensuring that the third or Follow-up phase, focusing on the implementation of the program, is completed (see Figures 1 and 2 for undergraduate and graduate programs, respectively). It should be noted that program changes are not permitted between Quality Council approval and commencement of a program.

New programs may be eligible for Quality Council Expedited Approval under certain circumstances. Proponents of any New Program are encouraged to contact the Deputy Provost to discuss Expedited Approval according to current Quality Council guidelines. See Section 4 in this document for more information on Expedited Approvals.

Following the first phase, the University will prepare the submission of the documents as part of the required MTCU approval process. Submission will be based on work completed by the Academic Unit, Faculty Dean(s), Vice-Provost IPA and the Deputy Provost.

The Proposal Brief requires information that addresses the sustainability of the program. SAC-QA will review this information with respect to program quality; SBC will use its independent lens to consider budgetary implications. (See Section 3.2 for more detail; Microsoft Word document templates are provided on the Provost's QA webpage.)

Tables 1 and 2 detail the new program review and appraisal process related to new undergraduate and new graduate programs, respectively. In each case, individuals with primary responsibility for steps listed in the process have been identified.

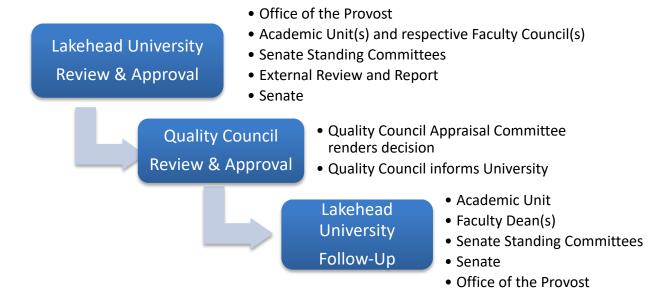


Figure 1. New Undergraduate Program Proposals – Review and Approval Process

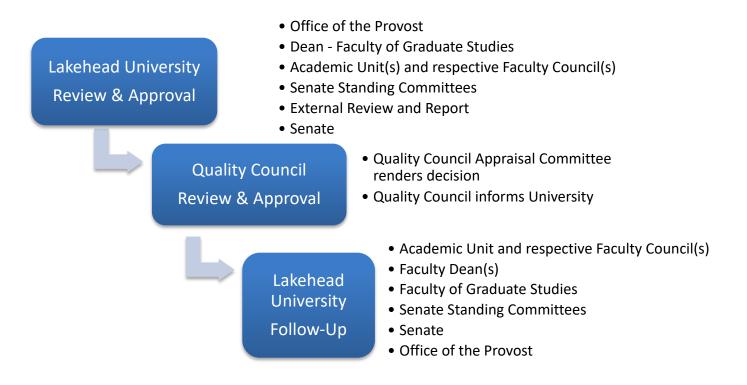


Figure 2. New Graduate Program Proposals - Review and Approval Process

Table 1. Review and Appraisal Process - New Undergraduate Program

1	INSTITUTIONAL REVIEW AND APPROVAL OF NEW UNDERGRADUATE PROGRAM PROPOSAL	RESPONSIBILITY FOR STEP IN PROCESS
i.	Academic Unit develops new Proposal Brief (see Section 3.2).  Full consultation with the Deputy Provost and any other affected	Chair/Director/ Coordinator
	Academic and/or Administrative Unit is necessary when developing the Proposal Brief.	
	Notes:	
	A completed checklist must accompany all Curriculum Navigator submissions.	
	2. Learning Outcomes are considered an essential component of any Proposal Brief.	
	3. Incomplete Proposal Briefs will be returned to the Academic Unit	
ii.	Program proposal submitted to Curriculum Navigator; Deputy Provost confirms appropriate workflow.	Initiator, Deputy Provost
iii.	Academic Unit presents new program to Faculty Council for discussion and approval.	Faculty Dean
iv.	Faculty Dean/Academic Unit consults additional Deans if changes affect programming/resources/etc. in another Faculty; if so, additional Dean(s) and Faculty council(s) approve the request in Curriculum Navigator	Faculty Dean/ Academic Unit, Additional Dean(s)
V.	Faculty Dean refers Proposal Brief to Senate for referral to appropriate Senate committees (i.e. SAC, SAC-QA and SBC).	Faculty Dean
vi.	SAC-QA reviews new program proposal; brings recommendation to approve to SAC ( $1^{\rm st}$ report to SAC).	Chair SAC-QA
vii.	SAC considers recommendation of SAC-QA; once approved, 1 <sup>st</sup> report to Senate	Chair SAC
viii.	SBC reviews program proposal in light of student demand, resources and sustainability; once approved, 1 <sup>st</sup> report to Senate	Chair SBC
ix.	If approved by SAC and SBC, the Office of the Provost makes arrangements for the External Review	Deputy Provost
X.	External Review conducted	Office of the Provost, Academic Unit, Faculty Dean

xi.	Review Team Report submitted to Deputy Provost, is reviewed for	Deputy Provost
	completion and forwarded to Academic Unit and Faculty Dean	
xii.	Academic Unit and Faculty Dean(s) develop separate responses;	Academic Unit,
	consultation with the Deputy Provost is encouraged.	Faculty Dean,
	<ul> <li>Academic Unit prepares Internal Response along with any required revisions to the Proposal Brief</li> </ul>	Deputy Provost
	<ul> <li>Submits Internal Response and revised Proposal Brief to the Deputy Provost</li> </ul>	
	<ul> <li>Faculty Dean(s) prepare Internal Response(s) and submit Response to the Deputy Provost</li> </ul>	
	<ul> <li>Deputy Provost either posts the Brief to the Curriculum Navigator request or relegates the request back to the appropriate stage.</li> </ul>	
xiii.	SAC-QA ensures that Review Team Report, Internal Responses (Academic Unit and Dean(s)) and revised Proposal Brief continue to align with the Institution's IQAP, Academic and Strategic plans; prepares 2 <sup>nd</sup> report to SAC.	Chair SAC-QA
xiv.	SAC prepares 2 <sup>nd</sup> report to Senate recommending approval for Quality Council review and forwards proposal to SBC.	Chair SAC
xv.	SBC ensures that Review Team Report, Internal Response and revised Proposal Brief continue to align with sustainability criteria; prepares 2 <sup>nd</sup> report to Senate recommending approval for Quality Council review.	Chair SBC
xvi.	Senate approves program subject to Quality Council approval (Phase 1 approval).	Senate
xvii.	Documentation forwarded to the Quality Council Appraisal Committee* (Final Proposal Brief, Review Team Report, Responses – Academic Unit and Dean, Letters of support – Office of the Provost (and, if appropriate, Faculty Dean, Academic Unit)).	Office of the Provost, Academic Unit, Faculty Dean
xviii.	Program proposal submitted to MTCU for their approval process. Separate application required.	Deputy Provost, VP IPA, Academic Unit, Faculty Dean

2	QUALITY COUNCIL APPROVAL PROCESS	RESPONSIBILITY FOR
		STEP IN PROCESS
i.	QC Appraisal Committee reviews and issues recommendations	Quality Council
ii.	Final decision of the Quality Council is conveyed to the Institution by the	Quality Council
	Quality Council's Secretariat within 45 days of receipt of final and	
	complete submission.	
	Note: University can appeal an unsatisfactory recommendation by the	
	Appraisal Committee to the Quality Council.	

iii.	QC decision reported as an item of information at Senate**; ensure	Office of the Provost
	approved version of the Proposal Brief is uploaded to Curriculum	
	Navigator.	

3	FOLLOW-UP PROCESS ONCE QUALITY COUNCIL APPROVAL HAS BEEN	RESPONSIBILITY FOR
	RECEIVED	STEP IN PROCESS
i.	Academic Unit ensures calendar submission is consistent with QC	Academic Unit
	approved program.	
	Note: Program changes are not permitted between Quality Council	
	approval and commencement of a program.	
ii.	Faculty Dean(s) and Council(s) review calendar submission (additional	Faculty Dean(s) and
	Deans/Councils necessary if changes affect programming/resources/etc.)	Council(s)
iii.	Review by SUSC; report to Senate.	Chair SUSC
iv.	Review by SBC; 3 <sup>rd</sup> report to Senate.	Chair SBC
٧.	Approval by Senate (Phase 3 approval)	Senate
		0.00
vi.	Ongoing program monitoring	Office of the Provost,
		Faculty Dean

Note: the Program Proposal (i.e. the "request" in Curriculum Navigator) may be relegated back to Faculty Council or another previous stage by the Deputy Provost or a committee Chair for additional review by previous committee(s). This must occur when any committee review results in substantial changes to the proposal.

<sup>\*</sup> Subject to the approval of the Provost and Vice-President Academic, the University may announce its intention to offer a new undergraduate or graduate program in advance of approval by the Quality Council. When such announcements are made in advance of Quality Council approval, they must contain the following statement; "Prospective students are advised that offers of admission to a new program may be made only after the University's own quality assurance processes have been completed and the Ontario Universities Council on Quality Assurance has approved the program."

<sup>\*\*</sup>If the recommendation from the Quality Council is to defer the program for one year while the Institution responds to specific issues, then the new program calendar submission will be forwarded to SBC following SUSC approval for a second review and approval.

Table 2. Review and Appraisal Process - New Graduate Program

1	INSTITUTIONAL REVIEW AND APPROVAL OF NEW GRADUATE PROGRAM PROPOSAL	RESPONSIBILITY FOR STEP IN PROCESS
i.	Academic Unit develops new Proposal Brief (see Section 3.2) with input from the Dean of Graduate Studies.	Chair/Director/ Coordinator
	Full consultation with the Deputy Provost and any other affected Academic and/or Administrative Unit is necessary when developing the Proposal Brief.	
	Notes:	
	A completed checklist must accompany all Curriculum Navigator submissions.	
	2. Learning Outcomes are considered an essential component of any Proposal Brief.	
	3. Incomplete Proposal Briefs will be returned to the Academic Unit.	
ii.	Program Proposal submitted to Curriculum Navigator; Deputy Provost confirms appropriate workflow.	Initiator, Deputy Provost
iii.	Academic Unit presents new program to Faculty Council for discussion and approval.	Faculty Dean
iv.	Faculty Dean/Academic Unit consults additional Deans if changes affect programming/resources/etc. in another Faculty; if so, additional Dean(s) and Faculty council(s) approve the request in Curriculum Navigator.	Faculty Dean/ Academic Unit, Additional Deans
V.	SAC-QA reviews new program proposal; brings recommendation to approve to SAC (1 <sup>st</sup> report to SAC).	Chair SAC-QA
vi.	SAC considers recommendation of SAC-QA; once approved, 1 <sup>st</sup> report to Senate	Chair SAC
vii.	SBC reviews program proposal in light of student demand, resources and sustainability; once approved, 1 <sup>st</sup> report to Senate	Chair SBC
viii.	If approved by SAC and SBC, the Office of the Provost makes arrangements for the External Review	Deputy Provost
ix.	External Review conducted	Office of the Provost, Academic Unit, Faculty Dean

х.	Review Team Report submitted to Deputy Provost, is reviewed for	Deputy Provost
	completion, and forwarded to Academic Unit and Faculty Dean	
xi.	Academic Unit and Faculty Dean(s) develop separate responses;	Academic Unit,
	consultation with the Deputy Provost is encouraged.	Faculty Dean(s), Deputy Provost
	<ul> <li>Academic Unit prepares Internal Response along with any required revisions to the Proposal Brief</li> </ul>	Deputy 110vost
	<ul> <li>Submits Internal Response and revised Proposal Brief to the Deputy Provost</li> </ul>	
	<ul> <li>Faculty Dean(s) prepare Internal Response(s) and submit Response to the Deputy Provost</li> </ul>	
	<ul> <li>Deputy Provost either posts the Proposal Brief to Curriculum Navigator request or relegates the request back to the appropriate stage.</li> </ul>	
xii.	SAC-QA ensures that Review Team Report, Internal Responses (Academic Unit and Dean(s)) and revised Proposal Brief continue to align with the Institution's IQAP, Academic and Strategic plans; prepares 2 <sup>nd</sup> report to SAC.	Chair SAC-QA
xiii.	SAC prepares 2 <sup>nd</sup> report to Senate recommending approval for Quality Council review and forwards proposal to SBC.	Chair SAC
xiv.	SBC ensures that Review Team Report, Internal Response and revised Proposal Brief continue to align with sustainability criteria; prepares 2 <sup>nd</sup> report to Senate recommending approval for Quality Council review.	Chair SBC
XV.	Senate approves program subject to Quality Council approval (Phase 1 approval).	Senate
xvi.	Documentation forwarded to the Quality Council Appraisal Committee* (Final Proposal Brief, Review Team Report, Responses – Academic Unit and Dean(s), Letters of support – Office of the Provost (and, if appropriate, Faculty Dean(s), Academic Unit)).	Office of the Provost, Academic Unit, Faculty Dean(s)
xvii.	Program Proposal submitted to MTCU for their approval process. Separate application required.	Deputy Provost, VP IPA, Academic Unit, Dean
2	QUALITY COUNCIL APPROVAL PROCESS	RESPONSIBILITY FOR STEP IN PROCESS
i.	QC Appraisal Committee reviews and issues recommendations	
ii.	Final decision of the Quality Council is conveyed to the Institution by the Quality Council's Secretariat within 45 days of receipt of final and complete submission.	
	Note: University can appeal an unsatisfactory recommendation by the Appraisal Committee to the Quality Council.	

iii.	QC decision reported as an item of information at Senate**; ensure	Office of the Provost
	approved version of the Proposal Brief is uploaded to Curriculum	
	Navigator.	
3	FOLLOW-UP PROCESS ONCE QUALITY COUNCIL APPROVAL HAS BEEN	RESPONSIBILITY FOR
	RECEIVED	STEP IN PROCESS
i.	Academic Unit ensures calendar submission is consistent with QC	Academic Unit
	approved program.	
	Note: Program changes are not permitted between Quality Council	
	approval and commencement of a program.	
ii.	Faculty Dean(s) and Council(s) review calendar submission (additional	Faculty Dean(s) and
	Deans/Councils necessary if changes affect programming/resources/etc.)	Council(s)
iii.	Review by FGSC; report to Senate.	FGS Dean
iv.	Review by SBC; 3 <sup>rd</sup> report to Senate.	Chair SBC
V.	Approval by Senate (Phase 3 approval)	Senate
vi.	Ongoing program monitoring	Office of the Provost,
		Faculty Dean

Note: the Program Proposal (i.e. the "request" in Curriculum Navigator) may be relegated back to Faculty Council or another previous stage by the Deputy Provost or a committee Chair for additional review by previous committee(s). This must occur when any committee review results in substantial changes to the proposal.

- \* Subject to the approval of the Provost and Vice-President Academic, the University may announce its intention to offer a new undergraduate or graduate program in advance of approval by the Quality Council. When such announcements are made in advance of Quality Council approval, they must contain the following statement; "Prospective students are advised that offers of admission to a new program may be made only after the University's own quality assurance processes have been completed and the Ontario Universities Council on Quality Assurance has approved the program."
- \*\* If the recommendation from the Quality Council is to defer the program for one year while the Institution responds to specific issues, then the new program calendar submission will be forwarded to SBC following Faculty of Graduate Studies Council (Regulation/Program Subcommittee) approval for a second review and approval.

#### 3.1.1 Implementation window

After a new program (undergraduate or graduate) is approved to commence, the program will begin within thirty-six (36) months of the date of approval; otherwise the approval will lapse.

### 3.1.2 Ongoing Monitoring and First Cyclical Review – Undergraduate and Graduate

It is the responsibility of the Dean, in consultation with the head of the relevant Academic Unit, to monitor student enrolment and success in the program, as well as resource allocation and program administration. During the program review process, SAC-QA and /or SBC may request that, following the initiation of the new program, a brief yearly progress report (template available from Office of the Provost) be submitted to the Committee. The first cyclical review for any new program will be scheduled for no more than eight (8) years after the date of the program's initial enrolment.

#### 3.2 New Program Proposal Brief

A Program Proposal Brief must be prepared for all new undergraduate and graduate degree programs (majors and fields, respectively), and for-credit graduate diploma programs. The Proposal Brief must provide, and will be evaluated based on, the following information. Lakehead University's guidelines for the Proposal Brief are based on the criteria set forth by the Quality Assurance Framework (Section 2.1). The Proposal Brief involves both a narrative and data to support that narrative. Templates for tables are available as Microsoft Word documents on the Provost's QA webpage and referred to by program type (i.e. UG – undergraduate or G – Graduate) and number in the text below.

#### Notes:

- 1. New Program Proposal Briefs that are incomplete and/or do not address all criteria and requirements will be sent back to the Academic Unit proposing the program.
- 2. MTCU requirements differ and must be addressed prior to submission for MTCU approval. Consult with the Deputy Provost and the VP IPA for more information.
- 3. Be sure to include the name of the author and the date of the Proposal Brief, as well as dates of any updated version(s) for ease of reference.

#### 3.2.1 For New Undergraduate Programs

Please prepare a narrative, supported by documentation including the tables noted in each section, that addresses the following.

- 1. An Introduction and Rationale for the Proposed Program
- a) An overview of the history and development of the Academic Unit and the programs contained within the Unit.
- b) A brief description of the proposed program (i.e. refer to UG/G Table #1)
- c) A rationale for the development of the new program.
- d) A discussion related to demand for the proposed program, substantiated with data and/or research (e.g. Labour Market Information<sup>3</sup>, employment demand, etc.).

<sup>&</sup>lt;sup>3</sup> this information is especially important for the MTCU approval process.

e) A discussion on the appropriateness of the degree nomenclature (e.g. compare and contrast to similar programs throughout Canada, the USA and elsewhere).

#### 2. Program Learning Outcomes (PLO's)

- a) A set of program learning outcomes for the proposed program (UG/G Table #2).
- b) A description of the consonance of the program and its learning outcomes with the general framework of the University's Mission and Strategic, Academic and Research Plans as well as the University's Strategic Mandate Agreement.
- c) A discussion of the clarity and appropriateness of the program's requirements and learning outcomes in addressing Lakehead University's Undergraduate Degree Level Expectations (UG/G Table #3).

#### 3. Admission Requirements

- a) A detailed summary of the admission requirements for domestic and international students (UG/G Table #1).
- b) A discussion of the appropriateness of the program's admission requirements for the learning outcomes established for completion of the program.
- c) A sufficient explanation of alternative requirements, if any, for admission, as well as how the program recognizes prior work or learning experience. This might include a minimum grade point average and/or additional languages or portfolios.

### 4. Structure of Undergraduate Programs

- a) A detailed description of the program structure (including reference to regulations and requirements).
- b) An explanation of how the program's structure will result in students meeting the specified PLO's and DLE's (UG Table #4).
- c) Information about the planned/anticipated class sizes (UG Table #6 and any relationship to program quality/delivery (i.e. if course caps are necessary, provide the reasoning).

#### 5. Program Content

- a) A detailed description of the curriculum (UG/G Table #1) and how it addresses the current state of the discipline or area of study.
- b) Course descriptions for all courses (if extensive, these could be included as an Appendix).
- c) A table mapping the connections between course learning outcomes and PLO's (UG/G Table #5).
- d) Identification of any unique curriculum or program innovations or creative components.

#### 6. Mode of Delivery

- a) A description of all mode(s) of delivery to be employed.
- b) A discussion on the appropriateness of the proposed mode(s) of delivery to meet the intended PLO's and DLE's.
- c) Provide a few examples of the linkages between each mode of delivery and specific course or program learning outcomes.

#### 7. Assessment of Teaching and Learning

- a) A description of the way in which student learning assessment will be embedded in the curriculum.
- b) An analysis of the appropriateness of the proposed methods for the assessment of student achievement of the intended PLO's and DLE's. (see detailed description and examples in the Guide to Quality Assurance

### Processes re QAF criteria 2.1.6a) and 2.1.6b))

c) A description of the plans for demonstrating and documenting the level of performance of students, consistent with the DLE's. For example, feedback from employers, alumni surveys, etc.

#### 8. Resources for Undergraduate Programs (Existing and Planned)

- a) A description and analysis of the human resources (academic, administrative, etc.) required to support the program (i.e. UG Table #7). This could include existing and/or new resources.
- b) A description and analysis of the Academic Unit's planned utilization of existing human resources (UG Tables #8 and 9) and evidence of any institutional commitment to supplement those resources to support the program.
- c) A description and analysis of the Academic Unit's planned utilization of new physical and financial resources (UG Table #10) and evidence of any institutional commitment to supplement those resources to support the program.

The information presented in the Resources section should refer to the following, and may include additional appendices if deemed appropriate by the Academic Unit.

### 8.1 Faculty and Staff (UG Tables 8 and 9)

- I. Evidence of participation of a sufficient number and quality of faculty who are competent to teach and/or supervise in the program.
- II. Evidence of, and planning for, adequate numbers and quality of:
  - supervisors for the provision of experiential learning opportunities (if required)
  - staff to achieve the program outcomes
  - adjunct and part-time faculty (describe roles).

#### 8.2 Physical & Financial Resources

- I. Evidence of plans and commitment to provide the necessary resources in step with the implementation of the program
- II. Evidence that there are adequate resources to sustain the quality of scholarship produced by undergraduate students including (a) library support, (b) information technology support, (c) laboratory access, and (d) space for faculty and students.

### a) Library Resources:

At least three (3) months in advance of the anticipated date of the review, the Academic Unit will submit a request for this report to the University Librarian. The report (insert in proposal as an appendix) includes information on (a) unique resources available on site and (b) access, if any, that faculty and students have to other resources. The information in this section should normally consist of a summary statement by the University Librarian on the University holdings pertinent to the fields, the collection policy, and library expenditures for last seven (7) years. A qualitative analysis of the collections against existing standards for the discipline, where these standards exist, is most useful. Explain any special collections not listed in the library report. (Do not submit detailed documentation on library holdings. It may be appropriate for reviewers to meet with the University

Librarian and assess library holdings and access).

b) Computer Facilities and Information Technology Support:

At least three (3) months in advance of the anticipated date of the review, the Academic Unit will submit a request for this report to TSC (insert in the proposal as an appendix) on the University's computer facilities and technology support. All faculty and undergraduate students are provided with an account on the University mainframe computer. The proposal should include a statement to the effect that their University account gives them access to electronic mail facilities, internet, statistical software packages [provide a list of these if appropriate and/or relevant], scientific graphics, computer language compilers (provide list of these if appropriate and/or relevant), a rich mathematical software library, etc. State the number of microcomputers/other appropriate hardware currently available to the faculty and students associated with this proposal. Describe any anticipated developments that will support the proposed program.

- c) Classroom, Laboratory and Research Equipment and Facilities (UG Table #10):
  - List equipment rooms and common laboratory facilities.
  - List major equipment available for use and commitments/plans (if any) for the next seven (7) years.
- d) Space for Faculty and Students (UG Table #10):
  - Provide details for the current faculty and general office space, along with the commitments/plans (if any) for additional and/or different space over the next seven (7) years.
  - Indicate where and how much study space the undergraduate students will have access to.
  - Describe any future plans for relocation or space expansion.
- 9. Sustainability Plan for Undergraduate Programs
  - a) Include a 3 to 5-year plan for how the program will address financial viability and sustainability and ensure program quality (UG Table #11). Include evidence of planned/anticipated enrolment.
  - b) Indicate if the proposed program will be a cost-recovery program. If not, explain.
- 10. Quality and Other Indicators of Undergraduate Programs

This section is intended to provide evidence of program attributes that will ensure the intellectual quality of the student experience. Please highlight and/or summarize (depending on what has already been presented),

- a) program structure
- b) faculty expertise and research (e.g. Table 8 in the Undergraduate Templates, Tables 8, 10 and 11 in the Graduate Templates, or Tables 1, 2 and 3 in Appendix I of the Cyclical Program Self-Study Guide)
- c) other indicators and data (not presented/discussed elsewhere) that provide additional evidence of the quality of the proposed program. Some examples include
  - o strong partnerships with other institutions, professional organizations, etc.
  - o opportunities for students to pursue studies elsewhere

- international opportunities
- o experiential learning
- o access to unique facilities or equipment.

#### 3.2.2 For New Graduate Programs

Please note the following for New Program Proposal Briefs for Graduate Programs:

- 1. The Tables and some of the criteria (sections 4, 8, 9 and 10) for Graduate programs (see Provost's QA webpage) differ from those required for Undergraduate.
- 2. Although new for-credit Graduate diplomas do not require external review, a Proposal Brief is still necessary.
- 1. An Introduction and Rationale for the Proposed Program
  - a) An overview of the history and development of the Academic Unit and the programs contained within the Unit.
- b) A brief description of the proposed program (i.e. refer to UG/G Table #1)
- c) A rationale for the development of the new program.
- d) A discussion related to demand for the proposed program, substantiated with data and/or research (e.g. Labour Market Information<sup>4</sup>, employment demand, etc.).

A discussion on the appropriateness of the degree nomenclature (e.g. compare and contrast to similar programs throughout Canada, the USA and elsewhere).

- 2. Program Learning Outcomes (PLO's)
  - a) A set of program learning outcomes for the proposed program (UG/G Table #2).
  - b) A description of the consonance of the program and its learning outcomes with the general framework of the University's Mission and Strategic, Academic and Research Plans as well as the University's Strategic Mandate Agreement.
- c) A discussion of the clarity and appropriateness of the program's requirements and learning outcomes in addressing Lakehead University's <u>Graduate Degree Level Expectations</u> (UG/G Table #3).
- 3. Admission Requirements
  - a) A detailed summary of the admission requirements for domestic and international students (UG/G Table #1).
  - b) A discussion of the appropriateness of the program's admission requirements for the learning outcomes established for completion of the program.
  - c) A sufficient explanation of alternative requirements, if any, for admission, as well as how the program recognizes prior work or learning experience. This might include a minimum grade point average and/or additional languages or portfolios.
- 4. Structure of Graduate Programs
  - a) A detailed description of the program structure (including reference to regulations and requirements).

<sup>&</sup>lt;sup>4</sup> this information is especially important for the MTCU approval process.

- b) An explanation of how the program's structure will result in students meeting the specified PLO's and DLE's (G Table #4).
- c) Information about the planned/anticipated class sizes (G Table #6) and any relationship to program quality/delivery (i.e. if course caps are necessary, provide the reasoning).
- d) A clear rationale for program length that ensures that the program requirements can be reasonably completed within the proposed time period.
- e) For research-focused graduate programs, clear indication of the nature and suitability of the major research requirements for degree completion.
- f) Evidence that each graduate student in the program is required to take a minimum of two-thirds of the course requirements from among graduate level courses.

#### 5. Program Content

- a) A detailed description of the curriculum (UG/G Table #1) and how it addresses the current state of the discipline or area of study.
- b) Course descriptions for all courses (if extensive, these could be included as an Appendix).
- c) A table mapping the connections between course learning outcomes and PLO's (UG/G Table #5).
- d) Identification of any unique curriculum or program innovations or creative components.

#### 6. Mode of Delivery

- a) A description of all mode(s) of delivery to be employed.
- b) A discussion on the appropriateness of the proposed mode(s) of delivery to meet the intended PLO's and DLE's.
- c) Provide a few examples of the linkages between each mode of delivery and specific course or program learning outcome.

#### 7. Assessment of Teaching and Learning

- a) A description of the way in which student learning assessment will be embedded in the curriculum.
- b) An analysis of the appropriateness of the proposed methods for the assessment of student achievement of the intended PLO's and DLE's. (see detailed description and examples in the <u>Guide to Quality Assurance</u> Processes re QAF criteria 2.1.6a) and 2.1.6b))
- c) A description of the plans for demonstrating and documenting the level of performance of students, consistent with the DLE's. For example, feedback from employers, alumni surveys, etc.

### 8. Resources for Graduate Programs

- a) A description and analysis of the human resources (academic, administrative, etc.) required to support the program (G Table #7). This could include existing and/or new resources.
- b) A description and analysis of the Academic Unit's planned utilization of existing human resources (G Tables #8 and 9) and evidence of any institutional commitment to supplement those resources to support the program.
- c) A description and analysis of the Academic Unit's planned utilization of new physical and financial resources (G Table #13) and evidence of any institutional commitment to supplement those resources to support the program.

The information presented in the Resources section should refer to the following and may include additional appendices if deemed appropriate by the Academic Unit.

# 8.1 Faculty and Staff (G Tables #8, 9, 10, 11 and 12)

- I. Evidence of participation of a sufficient number and quality of faculty who are competent to teach and/or supervise in the program; include a discussion of the role that Faculty of Graduate Studies (FGS) will play in determining faculty responsibilities.
- II. Evidence that faculty have the recent research or professional/clinical expertise needed to sustain the program, promote innovation and foster an appropriate intellectual climate.
- III. Evidence of how supervisory loads will be distributed, and the qualifications and appointment status of faculty who will provide instruction and supervision.
- IV. Evidence of the quality of the faculty, with reference to qualifications, research, innovation and scholarly record; appropriateness of collective faculty expertise to contribute substantively to the proposed program structure.

### 8.2 Funding Support for Students (reference to G Table #11 may be appropriate)

- I. Where appropriate to the program, evidence that financial assistance for students will be sufficient to ensure adequate quality and numbers of students.
- II. Evidence of how supervisors will provide financial support to domestic and international students.

### 8.3 Physical & Financial Resources

- I. Evidence of plans and commitment to provide the necessary resources in step with the implementation of the program
- II. Evidence that there are adequate resources to sustain the quality of scholarship associated with graduate students and their research activities including (a) library resources, (b) computer facilities and information technology support, (c) classroom, laboratory and research equipment and facilities and (d) office space for faculty and graduate students.

#### a) Library Resources:

Include a report prepared by the University Librarian (insert in proposal as an appendix) that includes information on a) unique resources available on site and b) access, if any, that faculty and students have to other resources. The information in this section should normally consist of a summary statement by the University Librarian on the University holdings pertinent to the fields, the collection policy, and library expenditures for the last seven (7) years. A qualitative analysis of the collections against existing standards for the discipline, where these standards exist, is most useful. Explain any special collections not listed in the library report. (Do not submit detailed documentation on library holdings. It may be appropriate for reviewers to meet with the University Librarian and assess library holdings and access).

#### b) Computer Facilities and Information Technology Support:

- Include a report prepared by TSC on the University's computer facilities and technology support (insert in the proposal as an appendix).
- All faculty and graduate students are provided with an account on the University mainframe computer. The proposal should state that the University account gives them access to electronic mail facilities, internet, statistical software packages [provide a list of these if appropriate and/or relevant], scientific graphics, computer language compilers (provide list of

these if appropriate and/or relevant), a rich mathematical software library, etc. State the number of microcomputers currently available to the faculty and students, etc.

Describe any anticipated developments that will support the proposed program.

#### c) Classroom, Laboratory and Research Equipment and Facilities:

- Describe classroom and laboratory space available for graduate students.
- List major equipment available for use and commitments/plans (if any) for the next seven (7) years.
- State the total amount of space assigned to research and research support activities.
- List equipment rooms and common laboratory facilities.
- If applicable, provide the amount and location of adjunct and cross-appointed professors'
  access to research-designated space in affiliated institutions and indicate if it is available for
  graduate students working in these settings.

#### d) Office Space for Faculty and Graduate Students:

- Provide details for the current faculty, graduate student and general office space, along with the commitments/plans (if any) for additional and/or different space over the next seven (7) years.
- Indicate where and how much space the graduate students will have access to for office facilities and/or study space. If applicable, it should be noted if graduate students will have their office space within the research laboratory of their respective advisors.
- Describe any future plans for relocation or space expansion.

### 9. Sustainability Plan for Graduate Programs

- a) Include a 3 to 5-year plan for how the program will address financial viability and sustainability and ensure program quality (G Table #14). Include evidence of planned/anticipated enrolment (G Table #15).
- b) Indicate if the proposed program will be a cost-recovery program. If not, explain.

#### 10. Quality and Other Indicators of Graduate Programs

This section is intended to provide evidence of program attributes that will ensure the intellectual quality of the student experience. Please highlight and/or summarize (depending on what has already been presented),

- a) program structure
- b) faculty expertise and research (e.g. Tables 8, 10 and 11 in the Graduate Templates, or Tables 1, 2 and 3 in Appendix I of the Cyclical Program Self-Study Guide)
- c) other indicators and data (not presented/discussed elsewhere) that provide additional evidence of the quality of the proposed program. Some examples include;
  - o strong partnerships with other institutions, professional organizations, etc.,
  - o opportunities for students to pursue studies elsewhere,
  - international opportunities,
  - experiential learning, and/or
  - access to unique facilities or equipment.

#### 3.3 External Review Process

Following review and approval of the New Program Proposal Brief by SAC (including SAC-QA) and the SBC, an external review will be arranged. External review of new graduate program proposals must incorporate an on-site visit. External review of new undergraduate program proposals will normally be conducted as an on-site visit, but may be conducted by desk audit, video-conference or an equivalent method if the external reviewer is satisfied that the off-site option is acceptable. There will be at least one (1) external reviewer selected for new undergraduate program reviews and two (2) for new graduate program reviews.

The reviewers will normally be Associate or Full Professors, or the equivalent, with program management experience, will be qualified by discipline and experience to review the program(s) and will be at arm's length from the program under review. External reviewers should be active and respected in their field. (See the QAF Guide Choosing Arm's Length Reviewers for information and examples.)

In summary, "Arm's length does not mean that the reviewer must never have met or even heard of a single member of the program. It does mean that reviewers should not be chosen who are likely, or perceived to be likely, to be predisposed, positively or negatively, about the program" (QAF Guide 2019). Examples of arm's length include - reviewers must not be; close friends, current or recent collaborators, former supervisors, advisors or colleagues.

"External reviewers should have a strong track record as academic scholars and ideally should also have had academic administrative experience in such roles as undergraduate or graduate program coordinators, department chair, dean, graduate dean or associated positions. This combination of experience allows a reviewer to provide the most valuable feedback on program proposals and reviews" (QAF Guide 2019).

Below is additional guidance from the External Reviewer Nomination form (declaration to be signed electronically by the head of the Academic Unit):

All members of the Review Team must be at arm's length from the Academic Unit under review. This means that reviewers cannot be current or recent collaborators, former supervisors, advisors or colleagues of members of the Academic Unit. Arm's length does <u>not</u> mean that the reviewer must never have met or even heard of a member of the program. It does mean that reviewers should not be chosen who are likely, or perceived to be likely, to be predisposed to view the program or Academic Unit either positively or negatively.

The list of proposed reviewers must be circulated to the members of the Academic Unit to ensure compliance with these guidelines.

Reviewer/Faculty relationships that may violate the arm's length requirement:

- A previous member of the program or department under review (including being a visiting professor).
- Received a graduate degree from the program under review.

- A regular co-author and research collaborator with a member of the program, within the past seven (7) years, and especially if that collaboration is ongoing.
- Close friend or family relationship with a member of the program.
- A regular or repeated external examiner of dissertations by doctoral students in the program.
- The doctoral supervisor of one or more members of the program.

The Head of the proposing Academic Unit will submit to SAC-QA (via the Deputy Provost, Chair of SAC-QA), information relative to the proposed external reviewers using the External Reviewer Nomination Template (found on the Provost's QA webpage) who are Associate or Full Professors employed by other universities. SAC-QA will review the list of proposed reviewers and select the required external reviewer(s). All contact with the proposed reviewers will be through the Office of the Provost.

A record of communication with the reviewers and a record of all information and documentation made available to the reviewers will be tracked through the Office of the Provost.

### 3.4 Review Team Roles and Responsibilities

At the start of the Site Visit, the Review Team will be provided with a Report Guide (see the Provost's QA webpage) that has been developed based on the IQAP and the Quality Assurance Framework evaluation criteria (QAF 2010, Section 4.3) and presents a general framework for the report. The Report Guide questions may be supplemented by others deemed appropriate by the Review Team for the program under consideration. At the start of the Site Visit, the Deputy Provost will review the Report Guide with the Review Team to ensure that they:

- a) Understand their role and obligations;
- b) Identify and commend the program's notably strong and creative attributes;
- c) Describe the program's respective strengths, areas for improvement, and opportunities for enhancement;
- d) Recommend specific steps to be taken to improve the program, distinguishing between those the program can itself take and those that require external action;
- e) Recognize the Institution's autonomy to determine priorities for funding, space, and faculty allocation, and
- f) Respect the confidentiality required for all aspects of the review process.

The Review Team will normally spend two (2) days visiting the Academic Unit, and will meet with prospective students, faculty and staff within the Academic Unit (the length of the visit may be extended for reviews involving multiple programs). In addition, the Review Team will meet with the Dean and Chair/Director/Coordinator responsible for the program(s), the Chair/Director/Coordinator of any collateral Academic Units (for joint or inter-departmental programs), the Dean of Graduate Studies when a graduate program is involved, the Deputy Provost, and others as recommended by the Dean(s). Opportunities to visit teaching, learning and research facilities will be provided.

The Review Team shall normally submit one report to the Deputy Provost within six (6) weeks following the Site Visit or desk audit that appraises the standards and quality of the proposed program and addresses the evaluation criteria set out in the QAF (Section 2.1), including the associated faculty and material resources. The Review Team will also be invited to acknowledge any clearly innovative aspects of the proposed program along with recommendations on any essential or otherwise desirable modifications. The report will remain confidential to the Office of the Provost, the relevant Dean(s), and to the Academic Unit.

#### 3.5 Response to Report

Within four (4) weeks of receiving the Review Team Report on the New Program Proposal, the Academic Unit, and the relevant Dean(s) shall prepare separate Internal Responses to the Review Team Report consulting with the Deputy Provost, as necessary, addressing the Review Team's comments and recommendations along with any required revisions. Academic Units are required to discuss their Internal Response, first collaboratively within their Academic Unit, and then with the relevant Dean(s).

Internal Responses will be reviewed by the Office of the Provost and may be sent back if they are incomplete.

The Internal Responses and the final revised Proposal Brief shall be submitted and filed with the Deputy Provost and the revised proposal will be posted for Senate review.

Following approval by Senate, all required documentation is forwarded to the Quality Council Appraisal Committee by the Office of the Provost.

The Office of the Provost will keep a record of all communication and any approvals, requests for additional information, new deadlines, etc. related to the Internal Responses.

Note: Based on the Proposal Brief, The Review Team Report and the Internal Responses to both, and in accordance with Lakehead University's IQAP, the University will determine whether or not the proposal meets its quality assurance standards and is thus acceptable or needs further modification. The University may stop the approval process at this or any subsequent point.

### 3.6 Review of Other New Program Types

Other types of new programs including concentrations, minors, specializations and not-for-credit certificates do not require QC appraisal and approval but still require internal review and approval by Faculty Council(s), Senate Standing Committees (SAC, SAC-QA, SUSC or FGSC, and SBC as appropriate) and final Senate approval.

These types of proposals are normally considered to be Major Modifications and must follow the process outlined in Section 5 of this document.

# 3.7 Approval of New Joint Programs: Northern Ontario School of Medicine (NOSM)

The Northern Ontario School of Medicine (NOSM) serves as the Faculty of Medicine of Lakehead University, Thunder Bay, and Faculty of Medicine of Laurentian University, Sudbury. The review and approval of a new joint

NOSM graduate program is detailed in Table 2b.

The Dean of NOSM will be responsible for leading the development of the Proposal Brief and for managing aspects of the review process normally managed by the Head of an Academic Unit and/or the Dean of a Faculty. Roles and responsibilities for the Graduate Studies Committee, Academic Council and Joint Senate committee are described in Table 2b.

The roles and responsibilities of the Review Team for new NOSM programs are described in Section 3.3 External Review Process and 3.4 Review Team Roles and Responsibilities.

Should a new NOSM graduate program qualify for external professional accreditation, it is possible to align the cyclical program review with Professional Accreditation under certain circumstances (See Section 6.11).

Table 2b. Review and Appraisal Process - New Joint NOSM Graduate Program

Phase 1	INSTITUTIONAL REVIEW AND APPROVAL OF – NEW GRADUATE	RESPONSIBILITY FOR
	PROGRAM PROPOSAL NOSM	STEP IN THE PROCESS
i.	NOSM Graduate Studies Committee develops new Program based on	Dean NOSM
	the Evaluation Criteria (Section 2.1 Quality Assurance Framework) and	
	prepares the Program Proposal Brief (Section 2.2.5 Quality Assurance	
	Framework) with input from NOSM Academic Council and consultation	
	with the Deans of Graduate Studies and other relevant Academic Units	
	at Lakehead and Laurentian Universities	
ii.	Proposal Brief submitted by the Dean of NOSM to Provosts of	Provosts Lakehead and
	Lakehead and Laurentian Universities for approval	Laurentian Universities
iii.	Selection and appointment of Review Team for the Site Visit:	Dean NOSM, Provosts
	Selection:	Lakehead and Laurentian
	<ul> <li>Dean NOSM provides Provosts with a list of at least 4 qualified external reviewers</li> </ul>	Universities
	Qualified external reviewers are normally associate or full	
	professors, or the equivalent, that are at arm's length from the	
	program under review (Section 2.2.6, Quality Assurance	
	Framework)	
	<ul> <li>Provosts rank the external reviewers based on respective</li> </ul>	
	University process	
	<ul> <li>Dean NOSM, in consultation with the Provosts identifies a</li> </ul>	
	minimum of 2 external reviewers for the Site Visit.	
iv.	Site Visit itinerary arranged with input from the Provosts.	Dean NOSM, Provosts
	Note: The roles and responsibilities of the Review Team are detailed in	Lakehead and Laurentian
	Sections 3.3 and 3.4)	Universities
v.	Review Team Report received and reviewed for completion	Provosts Lakehead and
		Laurentian Universities

	Internal response to the Deview Team Depart prepared by NOCM	Doon NOCM
vi.	Internal response to the Review Team Report prepared by NOSM	Dean NOSM
	Graduate Studies Committee in consultation with NOSM Academic	
	Council, Deans of Graduate Studies at Lakehead and Laurentian and	
	submitted to the Dean NOSM	
vii.	Provosts review the Internal Response to Review Team Report and any	Provosts Lakehead and
	changes to the Proposal Brief and provide feedback to Dean NOSM	Laurentian Universities,
	onanges to the responsibilities and provide resolution to beautiful.	Dean NOSM
viii.	Proposal Brief brought to Academic Council NOSM for review and	Graduate Studies
VIII.	•	
	approval	Committee NOSM
ix.	Proposal Brief brought to Joint Senate Committee for review and	Academic Council NOSM
	approval	
х.	Proposal Brief brought to Senates of both Universities for approval	Chair Joint Senate
		Committee
xi.	Senates of both Universities approve Program Proposal subject to	Senates of Lakehead and
	Quality Council approval.	Laurentian Universities
xii.	New Program documentation submitted to the Quality Council	Provosts Lakehead and
	Appraisal Committee* (Final Proposal Brief, Reviewer Report, Letters	Laurentian Universities
	of support – Provosts and Dean NOSM)	Edul chician oniversities
	of support — Provosts and Dean Nosivij	
Dhasa 2	OLIALITY COLINCIL ADDDOVAL DDOCECC	
Phase 2	QUALITY COUNCIL APPROVAL PROCESS	2 110014 2
i.	Quality Council Appraisal Committee reviews documentation and may	Dean NOSM, Provosts
	seek further input/information from the Dean NOSM and Provosts.	Lakehead and Laurentian
		Universities
ii.	Final decision of the Quality Council is conveyed to the Institutions by	
	the Quality Council's Secretariat within 45 days of receipt of final and	
	complete submission.	
	Note: University can appeal an unsatisfactory recommendation by the	
	Appraisal Committee to the Quality Council.	
iii.	Quality Council approves motion as per Quality Assurance Framework	Provosts Lakehead and
"".	2.3.4.	Laurentian Universities
	2.3.4.	Laurentian Oniversities
	Desision is few yourded to both Universities who will notify the Deep	
	Decision is forwarded to both Universities who will notify the Dean	
	NOSM	
Dl	FOLLOWING PROCESS ONCE OTHER TAY COLUMNIA ARREST AND STATE OF THE STAT	
Phase 3	FOLLOW UP PROCESS ONCE QUALITY COUNCIL APPROVAL HAS BEEN	
	RECEIVED	
i	Final Program Proposal and Quality Council decision reported to	Dean NOSM
	Academic Council as an item of information	NOSM Graduate Studies
		Committee
		NOSM Academic Council
i i		NOSIVI ACAGEITIIC COGNETI
ii.	Final Program Proposal and Quality Council decision reported to Joint	Joint Senate Committee

iii.	Quality Council decision reported as an item of information to	Chair of Joint Senate
	Lakehead and Laurentian Universities Senates**	Committee
		Dean NOSM
iv.	Implementation - After a new program is approved to commence, the	Dean NOSM
	program will begin within thirty-six (36) months of the date of	
	approval; otherwise the approval will lapse.	
٧.	Ongoing program monitoring	Dean NOSM
vi.	Cyclical Program Review scheduled 8 years from program start	Office of the Provost

<sup>\*</sup> Subject to the approval of the Provosts and Vice-Presidents (Academic), the Universities may announce their intention to offer a new graduate program in advance of approval by the Quality Council. When such announcements are made in advance of Quality Council approval, they must contain the following statement; "Prospective students are advised that offers of admission to a new program may be made only after the Universities' own quality assurance processes have been completed and the Ontario Universities Council on Quality Assurance has approved the program."

#### 4. PROTOCOL FOR EXPEDITED APPROVALS

The QAF states that the Protocol for Expedited Approvals must be followed when:

- a. endorsement of the Quality Council to declare a new field in a graduate program is requested by the University; or
- b. there is a proposal for a new for-credit graduate diploma; or
- c. there is a request by the University for a proposal for a Major Modification (see Section 5) to be reviewed by the Quality Council.

The Expedited Approval Process requires the submission of a Proposal Brief (see Section 3.2) for the proposed program/program change and the rationale for it. The process is expedited by not requiring the use of external reviewers. Following the internal review and approval process described below, the Proposal Brief must be submitted to the QC for a final review and decision. In cases where it is unclear as to the fit between the proposed program/program change with the Expedited Review and Approval Process, the Office of the Provost will make the determination and may forward a recommendation to SAC to review the proposal under the Expedited Review and Approval Process.

Note: A Proposal Brief that is incomplete and does not address all criteria and requirements will be sent back to the Academic Unit proposing the program.

The Provost and Vice-President (Academic) also has the right to choose to send a particular Major Modification to the Quality Council for an expedited review, as per Section 3.3 of the Quality Assurance Framework, and the review will then follow the process outlined in Section 4.1 of this document.

<sup>\*\*</sup> If the recommendation from the Quality Council is to defer the program for one year while the Institutions respond to specific issues, then the new program calendar submission will be forwarded to NOSM Academic Council and Graduate Studies Committee for a second review and approval.

#### 4.1 Expedited Program Review and Appraisal Process

The expedited program review and appraisal process involves three (3) phases - each phase includes a number of steps for undergraduate (Figure 3)<sup>5</sup> or graduate (Figure 4) programs. The first phase addresses the review and approval steps that must happen at Lakehead University and culminates in Senate approval. The second phase involves submission of the Proposal Brief to the Quality Council, and review by the Quality Council Appraisal Committee.

Following approval by the Quality Council, Lakehead University is responsible for ensuring that the third Follow-Up phase occurs.



Figure 3. Expedited program review and approval process – Undergraduate programs

<sup>5</sup> The only time that the Expedited Approval process would apply at the Undergraduate level is for a Major Modification to an undergraduate program that Lakehead decides to submit to the Quality Council's Appraisal

Committee for expedited approval.

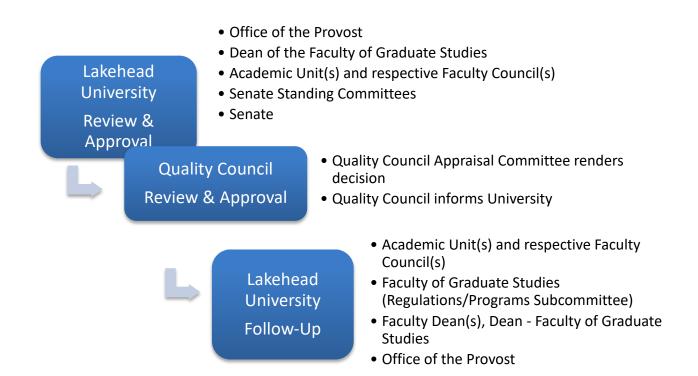


Figure 4. Expedited program review and approval process – Graduate programs.

Tables 3 and 4 outline the detailed steps involved in the Expedited Review and Approval Process related to undergraduate and graduate programs, respectively. In each of the tables the individuals with primary responsibility for steps listed in the process have been identified.

Table 3: Expedited Program Review and Approval Process – Undergraduate Programs (Note - only appropriate at the Undergraduate level if the University chooses to submit a Major Modification through this process)

	nacing addate level in the conversity and obes to subtime a major information.	
1	INSTITUTIONAL REVIEW AND APPROVAL OF EXPEDITED APPROVALS FOR	RESPONSIBILITY FOR
	MAJOR MODIFICATIONS TO UNDERGRADUATE PROGRAMS	STEP IN PROCESS
i.	Academic Unit develops Proposal Brief (see Section 3.2) with input from	Chair/Director/
	the Dean.	Coordinator
	Full consultation with the Deputy Provost and any other affected Academic and/or Administrative Unit is necessary when developing the Proposal Brief.	
	Notes:	
	A completed checklist must accompany all Curriculum Navigator submissions.	
	2. Learning Outcomes are considered an essential component of any Proposal Brief.	
	3. Incomplete Proposal Briefs will be returned to the Academic Unit.	

ii.	Program proposal submitted to Curriculum Navigator; Deputy Provost confirms appropriate workflow.	Initiator, Deputy Provost
iii.	Academic Unit presents program modification to Faculty Council for discussion and approval.	Faculty Dean
iv.	Faculty Dean/Academic Unit consults additional Deans if changes affect programming, resources, or other, in another Faculty; if so, additional Dean(s) and Faculty council(s) approve the request in Curriculum Navigator.	Faculty Dean/ Academic Unit, Additional Dean(s)
v.	Faculty Dean refers Proposal Brief to Senate for referral to appropriate Senate committees (i.e. SAC, SAC-QA and SBC).	Faculty Dean
vi.	SAC-QA reviews program proposal; brings recommendation to approve to SAC.	Chair SAC-QA
vii.	SAC considers recommendation of SAC-QA; once approved, report to Senate	Chair SAC
viii.	SBC reviews program proposal in light of student demand, resources and sustainability; once approved, 1 <sup>st</sup> report to Senate	Chair SBC
ix.	Senate reviews proposal and SAC and SBC reports: once approved, program subject to Quality Council approval (Phase 1 approval).	Senate
x.	Documentation forwarded to the Quality Council Appraisal Committee* (Final Proposal Brief, Letters of support - Faculty Dean, Academic Unit, Office of the Provost).	Office of the Provost

2	QUALITY COUNCIL APPROVAL PROCESS	RESPONSIBILITY FOR STEP IN PROCESS
i.	QC Appraisal Committee reviews and issues recommendations; QC receives for information.	Quality Council
ii.	Final decision of the Quality Council is conveyed to the Institution by the Quality Council's Secretariat within 45 days of receipt of final and complete submission.	Quality Council
iii.	QC decision reported as an item of information at Senate; ensure approved version of the Proposal Brief is uploaded to Curriculum Navigator.	Office of the Provost

3	FOLLOW-UP PROCESS ONCE QUALITY COUNCIL APPROVAL HAS BEEN	RESPONSIBILITY FOR
	RECEIVED	STEP IN PROCESS
i.	Academic Unit ensures calendar submission is consistent with QC	Academic Unit
	approved program.	

ii.	Faculty Dean and Council review calendar submission	Faculty Dean and Council
iii.	Additional Dean(s) review calendar submission	Additional Dean(s)
iv.	Review by SUSC; report to Senate.	Chair SUSC
V.	Review by SBC; 2 <sup>nd</sup> report to Senate.	Chair SBC
vi.	Approval by Senate (Phase 3 approval)	Senate
vii.	Calendar Officer ensures compliance with calendar protocol.	Calendar Officer
viii.	Ongoing program monitoring	Office of the Provost, Faculty Dean
ix.	If appropriate, update offering in Cyclical Program Review schedule.	Office of the Provost

Note: the Program Proposal (i.e. the Curriculum Navigator request) may be relegated back to Faculty Council or another previous stage by the Deputy Provost or a committee Chair for additional review by previous committee(s). This must occur when any committee review results in substantial changes to the proposal.

Table 4: Expedited Program Review and Approval Process – Graduate Programs

1	INSTITUTIONAL REVIEW AND APPROVAL OF EXPEDITED APPROVALS FOR	RESPONSIBILITY FOR
	GRADUATE PROGRAMS	STEP IN PROCESS
i.	Academic Unit develops new Proposal Brief (see Section 3.2) with input	Chair/Director/
	from the Dean of FGS.	Coordinator
	Full consultation with the Deputy Provost and any other affected Academic and/or Administrative Unit is necessary when developing the Proposal Brief.	
	Notes:	
	A completed checklist must accompany all Curriculum Navigator submissions.	
	2. Learning Outcomes are considered an essential component of any Proposal Brief.	
	3. Incomplete Proposal Briefs will be returned to the Academic Unit.	
ii.	Program proposal submitted to Curriculum Navigator; Deputy Provost	Initiator,
	confirms appropriate workflow.	Deputy Provost
iii.	Academic Unit presents new program to Faculty Council for discussion and approval.	Faculty Dean(s)
	l .	1

iv.	Faculty Dean/Academic Unit consults additional Deans if changes affect programming, resources, or other, in another Faculty; if so, additional Dean(s) and Faculty Council(s) approve the request in Curriculum Navigator.	Faculty Dean/ Academic Unit, Additional Dean(s)
V.	Faculty Dean refers Proposal Brief to Senate for referral to appropriate Senate committees (i.e. SAC, SAC-QA and SBC).	Faculty Dean
vi.	SAC-QA reviews new program proposal; brings recommendation to approve to SAC.	Chair SAC-QA
vii.	SAC considers recommendation of SAC-QA; once approved, report to Senate	Chair SAC
viii.	SBC reviews program proposal in light of student demand, resources and sustainability; once approved, 1 <sup>st</sup> report to Senate	Chair SBC
ix.	Senate reviews proposal and SAC and SBC reports: once approved, program subject to Quality Council approval (Phase 1 approval).	Senate
X.	Documentation forwarded to the Quality Council Appraisal Committee* (Final Proposal Brief, Letters of support - Faculty Dean, Academic Unit, Office of the Provost).	Office of the Provost
xi.	Where necessary, program proposal submitted to MTCU by VP IPA for their approval process. Separate application required.	Office of the Provost, VP IPA, Faculty Dean, Academic Unit
2	QUALITY COUNCIL APPROVAL PROCESS	RESPONSIBILITY FOR STEP IN PROCESS
i.	QC Appraisal Committee reviews proposal and issues decision; QC receives for information.	Quality Council
ii.	Final decision of the Quality Council is conveyed to the Institution by the Quality Council's Secretariat within 45 days of receipt of final and complete submission.	Quality Council
iii.	QC decision reported as an item of information at Senate**; ensure approved version of the Proposal Brief is uploaded to Curriculum Navigator.	Office of the Provost
	T	T
3	FOLLOW-UP PROCESS ONCE QUALITY COUNCIL APPROVAL HAS BEEN RECEIVED	RESPONSIBILITY FOR STEP IN PROCESS
1		1

Academic Unit ensures calendar submission is consistent with QC

Faculty Dean and Council review calendar submission

approved program.

ii.

Academic Unit

Council

Faculty Dean and

iii.	Additional Dean(s) review calendar submission	Additional Dean(s)
iv.	Review by SUSC; report to Senate.	Chair SUSC
V.	Review by SBC; 2 <sup>nd</sup> report to Senate.	Chair SBC
vi.	Approval by Senate (Phase 3 approval)	Senate
vii.	Calendar Officer ensures compliance with calendar protocol.	Calendar Officer
viii.	Ongoing program monitoring	Office of the Provost, Faculty Dean
ix.	If appropriate, include program offering in Cyclical Program Review schedule (e.g. new Graduate Diploma).	Office of the Provost

Note: the Program Proposal (i.e. the Curriculum Navigator request) may be relegated back to Faculty Council or another previous stage by the Deputy Provost or a committee Chair for additional review by previous committee(s). This must occur when any committee review results in substantial changes to the proposal.

\* Subject to the approval of the Provost and Vice-President Academic, the University may announce its intention to offer a new graduate diploma program in advance of approval by the Quality Council. When such announcements are made in advance of Quality Council approval, they must contain the following statement; "Prospective students are advised that offers of admission to a new program may be made only after the University's own quality assurance processes have been completed and the Ontario Universities Council on Quality Assurance has approved the program."

#### 4.2 Expedited Program Review Proposal Brief

The Proposal Brief required for Expedited Approvals will establish the reasons for treating the proposal using the Expedited process, describe the significant changes being proposed (including detailed reference to learning outcomes, faculty and resources), provide a brief account of the rationale for any changes, and address all relevant evaluation criteria for new program proposals outlined in Section 3.2.

#### 5. MAJOR MODIFICATIONS TO EXISTING PROGRAMS

The fundamental purpose of the identification of Major Modifications to existing programs, and their submission through a robust quality assurance process, is to assure the University Community and the public of the ongoing quality of all of Lakehead University's academic programs. Most major modifications to existing programs do not require submission to the QC for approval (see exceptions noted in Section 4. c). However, Lakehead University <u>is</u> required to submit an annual report to the QC listing all of the programs with Major Modifications approved over the past year; QC may request a review if conditions warrant it.

The QAF defines Major Modifications as changes to programs that include any of the following:

- a) requirements that differ significantly from those existing at the time of the previous cyclical program review;
- b) significant changes to the learning outcomes;
- c) significant changes to the faculty engaged in delivering the program and/or to the essential physical resources as may occur, for example, where there have been changes to the existing mode(s) of delivery (e.g., different campus, online delivery, inter-institutional collaboration);
- d) the addition of a graduate collaboration specialization;
- e) the addition of a new field to an existing graduate program. The University may request that the addition of a new field requires an expedited approval (i.e. QC review).

At Lakehead University, the definition for Major Modification will be addressed in the following way.

The designation of a program change as a Major Modification is related to program requirements that differ significantly from those existing at the time of the previous cyclical program review and will be based on:

Changes in Program Content - A major program content change that entails the addition, deletion, replacement, or major changes to courses comprising a substantial proportion of the program. Changes include modifications to existing core and/or elective courses or their replacement by new core and/or elective courses. For this purpose, a substantial proportion should be considered to mean at least 20% of the total program requirements, or at least 50% of the requirements in any single year of the program. For example, in a program that requires students to complete 20 full course equivalents (20 FCE), a change to more than 4 FCE in total, or changes to more than 2.5 FCE in a given year, would be considered to be substantial and would be defined as a Major Modification.

and/or

Changes in Program Structure - A major program structure change that entails a substantial shift of credits between components of the program. Program structure changes may include a substantial shift between theoretical courses and experiential components (for example; practicum, clinical placements, field experiences, laboratories), a substantial shift between core and elective courses, and/or a substantial shift between different core disciplines. For this purpose, a substantial shift should be considered to mean that at least 20% of the total program requirements, or at least 50% of the requirements in any single year of the program, are moved between different program components. This includes the development of transfer pathways between colleges or other universities and Lakehead as well as those involving international exchanges/agreements where the outcome is a Lakehead University degree.

**Learning outcomes** - Lakehead University expects that program learning outcomes will continue to be reviewed and refined as part of the ongoing development of programs. However, significant changes to the list of program learning outcomes will likely also be associated with significant changes to the requirements of a program as described above and would therefore constitute a Major Modification.

**Resources** - Significant changes to the faculty engaged in delivering the program and/or to the essential physical resources will only be considered to be a Major Modification when these changes prevent the

approved program from being delivered as developed and previously approved.

A list of examples that illustrate what will normally constitute a major modification in each of the areas outlined above are provided in the Quality Assurance Framework (section 3.3).

# 5.1 Internal Review and Approval Process for Major Modifications

Tables 5 and 6 outline the detailed steps involved in the Review and Approval Process for Major Modifications to undergraduate and graduate programs, respectively. In each of the tables, the individuals with primary responsibility for steps listed in the process have been identified.

Table 5. Major Modifications Review and Appraisal Process – Undergraduate Programs

		<del>,</del>
1	INSTITUTIONAL REVIEW AND APPROVAL OF UNDERGRADUATE	RESPONSIBILITY
	PROGRAM MAJOR MODIFICATIONS	FOR STEP IN
		PROCESS
i.	Academic Unit develops Proposal Brief (see Section 5.2).	Chair/Director/
	Full consultation with the Deputy Provest and any other offsets d	Coordinator
	Full consultation with the Deputy Provost and any other affected	
	Academic and/or Administrative Unit is necessary when developing	
	the Proposal Brief.	
	Notes:	
	1. A completed checklist (see Section 3.1) must accompany all	
	Curriculum Navigator submissions.	
	2. Learning Outcomes are considered an essential component of any	
	Proposal Brief.	
	3. Incomplete Proposal Briefs will be returned to the Academic Unit.	
ii.	Program proposal is submitted to Curriculum Navigator; appropriate	Initiator, Deputy
	workflow is confirmed by the Deputy Provost.	Provost
iii.	Academic Unit presents Proposal Brief to Faculty Council for review	Chair/Director/
	and approval.	Coordinator,
		Faculty Dean
iv.	Faculty Dean/Academic Unit consults additional Dean(s) if changes	Faculty Dean/
	affect programming, resources, or other, in another Faculty; if so,	Academic Unit,
	additional Dean(s) and Faculty Council(s) approve the request in	Additional Dean(s)
	Curriculum Navigator.	
V.	Faculty Dean refers Proposal Brief to Senate for referral to	Faculty Dean
	appropriate committees (i.e. SAC, SAC-QA, SUSC, SBC).	
vi.	SAC-QA reviews Proposal Brief (using criteria from Section 3.2; brings	Chair SAC-QA
	recommendation to approve to SAC).	
	Note: SAC-QA may coordinate a joint review with SBC members.	

vii.	SAC considers recommendation of SAC-QA; once approved, refers to SUSC.	Chair SAC
viii.	SUSC reviews the proposed calendar entry; once approved, SUSC refers to SBC.	Chair SUSC
ix.	SBC reviews Proposal in light of student demand, resources and sustainability; once approved, recommends approval by Senate.	Chair SBC
x.	Approval by Senate.	Senate
xi.	Reported annually to Quality Council	Office of the Provost

Note: the Program Proposal (i.e. the "request" in Curriculum Navigator) may be relegated back to Faculty Council or another previous stage by the Deputy Provost or a committee Chair for additional review by previous committee(s). This must occur when any committee review results in substantial changes to the proposal.

Table 6. Major Modifications Review and Appraisal Process – Graduate Programs

1	INSTITUTIONAL REVIEW AND APPROVAL OF GRADUATE PROGRAM	RESPONSIBILITY
	MAJOR MODIFICATIONS	FOR STEP IN
		PROCESS
i.	Academic Unit develops Proposal Brief (see Section 5.2).	Chair/Director/
		Coordinator
	Full consultation with the Deputy Provost and any other affected	
	Academic and/or Administrative Unit is necessary when developing the Proposal Brief.	
	Notes:	
	1. A completed checklist (see Section 3.1) must accompany all	
	Curriculum Navigator submissions.	
	2. Learning Outcomes are considered an essential component of any	
	Proposal Brief.	
	3. Incomplete Proposal Briefs will be returned to the Academic Unit.	
ii.	Program proposal is submitted to Curriculum Navigator; appropriate	Initiator, Deputy
	workflow is confirmed by Deputy Provost.	Provost
iii.	Academic Unit presents Proposal Brief to Faculty Council for review	Chair/Director/
	and approval.	Coordinator
iv.	Faculty Dean or Academic Unit consults additional Dean(s); additional	Faculty Dean/
	Dean(s) approve the request in Curriculum Navigator.	Academic Unit,
		Additional Dean(s)
V.	SAC-QA reviews Proposal Brief (using criteria from Section 3.2) and	Chair SAC-QA
	brings recommendation to approve to SAC.	
	<b>0</b>	

	Note: SAC-QA may coordinate a joint review with SBC members.	
vi.	SAC considers recommendation of SAC-QA; once approved, refers to SBC.	Chair SAC
vii.	SBC reviews Proposal in light of student demand, resources and sustainability; once approved, recommends approval by Senate.	Chair SBC
viii.	Approval by Senate.	Senate
ix.	Reported annually to Quality Council	Office of the Provost

Note: the Program Proposal (i.e. the Curriculum Navigator request) may be relegated back to Faculty Council or another previous stage by the Deputy Provost or a committee Chair for additional review by previous committee(s). This must occur when any committee review results in substantial changes to the proposal.

# 5.2 Major Modifications Proposal Brief

The Proposal Brief required for any Major Modification will;

- a) identify and explain the criteria being used to justify the category of Major Modification,
- b) describe in detail the changes being proposed,
- c) provide a brief account of the rationale for the changes, and
- d) address each of the applicable components of the New Program Proposal Brief outlined in Section 3.2.

Due to the variable, and at times complex, nature of Major Modifications, Major Modification-specific templates have not been developed. As the document requirements may overlap significantly with those required for new programs, Academic Units are encouraged to use the Microsoft Word document templates for new programs found on the Provost's QA webpage. Academic Units are strongly encouraged to contact the Office of the Deputy Provost prior to developing a Proposal Brief and prior to submitting a request to Curriculum Navigator.

Be sure to include the name of the author and the date of the Proposal Brief and dates of any updated versions for ease of reference.

A Proposal Brief that is incomplete and does not address all criteria and requirements will be sent back to the Academic Unit proposing the program.

The proponents must present both pedagogical and organizational grounds for the changes. For a Major Modification, Learning Outcomes for the modified program must be addressed. Depending on the nature of the proposal, Learning Outcomes for courses may also be required.

Note: Minor changes to curricula will continue to be submitted through Curriculum Navigator to Senate for referral to the appropriate Standing Committees using existing Lakehead University review and approval

# processes.

If there is uncertainty as to whether a particular change is minor, major, or is actually a new program, the Deputy Provost and the Dean of the Faculty of Graduate Studies will be the initial arbiter(s) for undergraduate and graduate programs, respectively.

#### 6. PROTOCOL FOR THE CYCLICAL REVIEW OF EXISTING PROGRAMS

The Protocol for the Cyclical Review of Existing Programs is used to secure the academic standards of existing undergraduate and graduate degree programs and for-credit graduate diploma programs, and to assure their ongoing improvement. Degree Level Expectations, combined with the expert judgment of external disciplinary scholars, provide the benchmarks for assessing a program's standards and quality (QAF 2010).

The cyclical review of existing programs involves two (2) phases; each phase includes a number of steps (see Figure 5). The first phase addresses the review, analysis, and approval steps that must happen at Lakehead University and culminates in the presentation of an Executive Summary as an item of information to Senate. The Executive Summary, Final Assessment Report (FAR) and Implementation Plan are forwarded to the Quality Council and placed on the University webpage. The Follow-up phase involves the implementation and ongoing monitoring of the Implementation Plan during the years leading up to the next program review.



Figure 5. Cyclical program review process – Undergraduate and Graduate programs

#### 6.1 Schedule of Reviews

A schedule for the review of Lakehead University's full complement of undergraduate and graduate degree and diploma programs is posted on the Provost's QA webpage. The review schedule includes all joint, multi-disciplinary, inter-disciplinary, and inter-institutional programs delivered on either the Thunder Bay and/or Orillia Campus.

The undergraduate and graduate program review schedule is based on an eight (8) year cycle and has been designed to place the undergraduate and graduate program reviews within the same academic year where possible and desirable. This has been achieved through consultation with the Faculty Deans, Chairs/Directors and Program Coordinators. Lakehead University encourages blended or concurrent reviews in Academic Units when they will result in more efficient use of resources and have academic merit. Frequently, there are interactions between the undergraduate and graduate programs that are well served by blending the review process.

Schedules for professional accreditation have also been considered in the review schedule planning stage. The Deputy Provost holds authority for updating the review schedule as necessary.

Subsequent program reviews will be scheduled within an interval that does not exceed eight (8) years.

The Academic Unit and Faculty Dean will be notified of the upcoming Cyclical Review by the Office of the Provost in the academic year prior to the scheduled review. This correspondence will include a timeline for submission of the Self-Study. The Self-Study is normally provided to the Review Team at least one (1) month in advance of the Site Visit.

### 6.2 Self-Study

The Self-Study is the heart of the review process and is intended to provide an opportunity for a reflective and analytical assessment of past achievements, present strengths and weaknesses, and future plans associated with the program(s). The Self-Study provides the opportunity to direct conscious attention to the expected Learning Outcomes of the program, the curriculum, the teaching and learning methodologies employed, and the relevance of testing and other assessments of student performance in determining whether students have achieved what was intended. Close coordination with the Deputy Provost and Dean(s), starting with the development of the Self-Study, helps to ensure the effectiveness of the entire cyclical review process.

All faculty members in the program shall be provided with the opportunity, and are encouraged to participate in the self-appraisal process, and to provide feedback on a final draft of the Self- Study. Employing meaningful ways to involve staff and students in the process is required. The input of others deemed to be relevant and useful, such as graduates of the program, representatives of industry, the associated professions, practical training programs, and employers may also be solicited and included. The involvement of program faculty, staff and students and the formal mechanism by which they are involved and participate in the review process and in the preparation of the Self-Study, must be described as part of the Self-Study (for more information, refer to the "Guide to the Quality Assurance Framework" (Section 15)).

The Self-Study must include three (3) Volumes and provide the internal program perspective including:

1. a discussion of the consistency of the program's learning outcomes with the University's mission and DLE's and how our graduates achieve those outcomes,

- 2. presentation of program-related data and measures of performance, including applicable provincial, national and professional standards (where available),
- 3. confirmation of the integrity of the data,
- 4. review of criteria and quality indicators identified in the QAF Section 4.3,
- 5. addressing concerns and recommendations raised in previous reviews,
- 6. identification of areas as requiring improvement,
- 7. identification of areas that hold promise for enhancement,
- 8. identification of academic services that directly contribute to the academic quality of each program under review, and
- 9. description of the participation of program faculty, staff and students in the production of the Self-Study and how their views were obtained and taken into account. The input of others deemed to be relevant and useful, such as graduates of the program, representatives of industry, the professions, practical training programs, and employers may also be included.

The information to be contained in each Volume is listed below.

# Volume One: Description and Analysis of the Program(s)

This Volume includes three (3) parts -

Part 1: Program Description and Outcomes,

Part 2. Analytical and Reflective Assessment of the Program, and

Part 3: Program Related Data (Appendices).

Detailed descriptions of the information required for the Self-Study (separate templates for Undergraduate and Graduate programs) can be found in Appendix 2 of this document and on the Provost's QA webpage for Cyclical Program Reviews. This information is based on Section 4.2 of the QAF that identifies the minimum requirements for a Self-Study and Section 4.3 - Evaluation Criteria; the **IQAP** is based on these.

The Review Team will use the same criteria in their assessment of the program(s).

In cases where the cyclical program review involves different program levels (for example, graduate and undergraduate), program modes, or programs offered at different locations, Volume One may include separate chapters for each discrete program.

#### **Volume Two: Course Outlines**

This Volume includes the most recent course outline for each of the courses listed in the calendar for each of the programs being reviewed. A summary table that indicates the last term in which each course was taught, the instructor and the enrolment should be included.

### **Volume Three: Curriculum Vitae (CV)**

This Volume includes a current CV for each full-time member of the Academic Unit, using the CV format found on Provost's QA webpage. The CVs of part-time faculty members and adjuncts who contribute to the teaching and/or thesis supervision in the Academic Unit should also be included.

### 6.2.1 Submission of the Self-Study

The completed Self-Study must be submitted to the Deputy Provost by the deadline provided to the Academic Unit. The Deputy Provost in consultation with the Dean will review and approve the Self-Study to ensure that it meets all requirements.

A Self-Study that is incomplete and/or does not address all criteria and requirements will be sent back to the Academic Unit.

# 6.3 External Evaluation with Report and Recommendations on Program Quality Improvement

All cyclical program reviews include a Site Visit with a Review Team comprised of both external and internal reviewers. There will be at least one external reviewer selected to participate in undergraduate program reviews, and at least two (2) external reviewers selected to participate in graduate program reviews or in a concurrent review of both undergraduate and graduate programs.

There will be one internal reviewer selected from within the University but from outside the Academic Unit's Faculty and interdisciplinary group (where applicable).

The external and internal reviewers will be qualified by discipline, be active and respected in their field and normally be Associate or Full Professors, or the equivalent, with program management experience.

All members of the Review Team will be at arm's length from the program under review (refer to Section 3.3 of IQAP, Section 2.2.6 of the Quality Assurance Framework and the QAF Guide on choosing arm's length reviewers). Those who nominate external and internal reviewers attest with an electronic signature on the nomination form that their nominees meet all requirements for reviewers including that each nominee is arm's length from the Academic Unit under review.

Additional discretionary members may be assigned to the Review Team where deemed appropriate and necessary. Such additional members might include relevant qualified and experienced people selected from industry or the professions and/or student members. Decisions to add members to the Review Team will be made by the Deputy Provost based on consultation with the appropriate Dean(s) and Head(s) of the Academic Unit(s) involved.

The Head of the Academic Unit or individual responsible for the program(s) being reviewed will submit to SAC-QA, via the Deputy Provost, the following:

- 1. External Reviewers The names and relevant background information (using the template provided on the Provost's QA webpage) for at least six (6) Associate or Full Professors employed in other Universities. The potential reviewers must not have any past or current formal affiliation with the Academic Unit or with members of the Academic Unit (supervisors/supervisees, co-authors, relatives, etc.).
- 2. Internal Reviewers The names and relevant background information (using the template provided on the Provost's QA webpage) for at least four (4) Associate or Full Professors employed at Lakehead University from outside the program review discipline (or interdisciplinary group).

SAC-QA will then select the reviewers to be invited to participate in the review. All contact with the proposed reviewers will be made by the Office of the Provost.

The Review Team will be provided with a copy of the Self-Study documentation along with the University's Strategic Plan, Academic Plan, and relevant sections of the Lakehead University Calendar. Additional information related to the Faculty or Academic Unit will be distributed as requested by the Dean(s) or the Review team.

At the start of the Site Visit, the Review Team will be provided with a Report Guide (see the Provost's QA webpage) that has been developed based on the IQAP and the Quality Assurance Framework evaluation criteria (QAF 2010, Section 4.3) and presents a general framework for the report. The Report Guide questions may be supplemented by others deemed appropriate by the Review Team for the program under consideration. At the start of the Site Visit, the Deputy Provost will review the Report Guide with the Review Team to ensure that they:

- a) Understand their role and obligations;
- b) Identify and commend the program's notably strong and creative attributes;
- c) Describe the program's respective strengths, areas for improvement, and opportunities for enhancement;
- d) Recommend specific steps to be taken to improve the program, distinguishing between those the program can itself take and those that require external action;
- e) Recognize the Institution's autonomy to determine priorities for funding, space, and faculty allocation, and
- f) Respect the confidentiality required for all aspects of the review process.

The Review Team will spend two (2) days visiting the Academic Unit, and will meet with students, faculty and staff within the Academic Unit (the length of the visit may be extended for reviews involving multiple programs). In addition, the Review Team will meet with the Dean and Chair/Director/Coordinator responsible for the program(s), the Chair/Director/Coordinator of any collateral Academic or Administrative Units (for joint or inter-departmental programs), the Dean of Graduate Studies when a graduate program is involved, the Deputy Provost, and others as recommended by the Dean(s). Opportunities to visit teaching, learning and research facilities will be provided.

Students who are asked to meet with the Review Team will be provided with information or directed to relevant information by the Academic Unit to prepare them for their meeting with the Review Team (templates available from the Office of the Provost). The students will also be provided with information or links to information on the outcome of the quality assurance process they have participated in.

The Review Team shall normally submit one report, where circumstances permit, to the Deputy Provost within six (6) weeks following the Site Visit. The report must address the substance of both the Self-Study and the evaluation criteria set out in the Quality Assurance Framework (Section 4.3).

Any Review Team Report that fails to address elements of the Self-Study and the evaluation criteria set out in the QAF (Section 4.3) will be discussed with the Review Team for modification or amendments.

The reports will remain confidential to the Office of the Provost, the relevant Dean(s), and to the associated Academic Unit. (Note: SAC-QA will have access to a copy of the Review Team Report along with the Final Assessment Report and Executive Summary as part of their final review.)

### 6.4 Cyclical Review of Existing Programs: Review and Appraisal Process

Table 7 details the Cyclical Review of Existing Programs and Appraisal Process related to both undergraduate and graduate programs. In each case, individuals with primary responsibility for steps listed in the process have been identified.

Table 7: Cyclical Review of Existing Undergraduate and Graduate Programs –Review and Appraisal Process

1.	CYCLICAL PROGRAM REVIEW AND APPRAISAL PROCESS	RESPONSIBILITY FOR STEP IN PROCESS
i.	Initiation of review by the Office of the Provost.  Academic Units and Faculty Dean(s) are normally advised one (1) year prior to the scheduled program review and provided with information on the process and the deadlines by which the Self-Study must be completed and submitted to the Deputy Provost.  Communication with the Academic Unit and Faculty Dean(s) and any other Academic and/or Administrative Unit associated with the review (including communication regarding preparation for the review) will be documented by the Office of the Provost.	Deputy Provost
ii.	Academic Unit completes Self-Study (in consultation with appropriate Dean(s) and the Deputy Provost).	Academic Unit Chair/Director/Program Coordinator/Faculty Dean(s)
iii.	External Evaluation – Site Visit arranged and conducted.	Deputy Provost

iv.	Review Team Report received, reviewed for completion, and forwarded to head of Academic Unit and to Dean(s).	Deputy Provost
V.	Academic Unit and Faculty Dean(s) develop separate responses to the Review Team Report; consultation with Deputy Provost is encouraged.  • Academic Unit prepares Internal Response in consultation with the Faculty Dean  • Submits Internal Response to the Deputy Provost  • Faculty Dean(s) prepare Internal Response(s) to Review Team Report and submit Response(s) to the Deputy Provost	Academic Unit Chair/Director/Program Coordinator/Faculty Dean(s)
vi.	Final Assessment Report and Implementation plan prepared by Deputy Provost, in consultation with Chair/Director/Coordinator and Dean(s).	Deputy Provost
vii.	Review of Final Assessment Report by SAC-QA (Head of Academic Unit and Dean(s) invited to participate in discussion).	Chair SAC-QA
viii.	SAC-QA brings recommendation to SAC.	Chair SAC-QA
ix.	Executive Summary prepared.	Deputy Provost
x.	SAC submits Executive Summary as an item of information to Senate.	Chair SAC
xi.	Dean FGS reports on graduate program review completion as an item of information at FGSC.	Dean FGS
xii.	Executive Summary, Final Assessment Report and Implementation Plan forwarded to QC and placed on University webpage.	Deputy Provost
2.	INSTITUTIONAL FOLLOW-UP PROCESS	RESPONSIBILITY FOR STEP IN PROCESS
i.	Implementation and ongoing monitoring.	Academic Unit/Dean(s)/Deputy Provost/Provost
ii.	Schedule next review within 8 years of previous cyclical review.	Deputy Provost

### 6.5 Institutional Evaluation of the Review Team Report (Internal Response)

Within two (2) months of receiving the Review Team Report, the Academic Unit that produced the Self-Study (Chair/Director/Coordinator in consultation with their faculty and staff colleagues) and the relevant Dean(s) will prepare separate Internal Responses to the Review Team Report.

Each of the Internal Responses (from the Academic Unit and the Dean(s)) are required to address the following:

- The plans and recommendations proposed in the Self-Study report;
- The recommendations advanced by the Review Team in its report;
- The program's response to the Review Team Report including clarifications or corrections of statements contained in the Review Team Report, and agreement and/or disagreement with specific comments made by the Review Team and/or with their recommendations.

In addition, the Internal Responses shall describe:

- Any changes in organization, policy or governance that would be necessary to meet the recommendations;
- The resources, financial and otherwise, that would be provided in supporting the implementation of selected recommendations; and
- A proposed timeline for the implementation of any of those recommendations. The response may also address how recommendations should be implemented.

Academic Units are required to discuss their response to the Review Team Report with the relevant Dean(s). The Academic Unit's Internal Response must be forwarded to the Office of the Deputy Provost and copied to the relevant Dean(s).

The Dean's Internal Response(s) are to be submitted directly to the Deputy Provost.

Internal Responses will be reviewed by the Deputy Provost and may be sent back if they are incomplete.

The Office of the Provost will keep a record of all communication and any approvals, requests for additional information, new deadlines, etc. related to the Internal Responses.

# **6.6 Final Assessment Report**

A Final Assessment Report (FAR), providing a synthesis of the external evaluation and internal responses and assessments, will be drafted by the Deputy Provost, with input and support from the Head of the Academic Unit responsible for the program(s) and the appropriate Dean(s).

The Final Assessment Report will:

- Identify any significant strengths of the program;
- Identify opportunities for program improvement and enhancement;
- Set out and prioritize the recommendations that are selected for implementation;
- May include a confidential section (e.g. where personnel issues are addressed); and

• Include an institutional Executive Summary, exclusive of any such confidential information, and suitable for publication on the Web.

The Final Assessment Report and Executive Summary will include an Implementation Plan that identifies:

- Who will be responsible for approving the recommendations set out in the FAR;
- Who will be responsible for providing any resources made necessary by those recommendations;
- Any changes in organization, policy or governance that would be necessary to meet the recommendations;
- Who will be responsible for acting on those recommendations; and
- Timelines for acting on and monitoring the implementation of those recommendations.

### 6.7 Institutional Review and Follow-up

SAC-QA is responsible for ensuring that the FAR and Implementation Plan (IP) reflect the Review Team Report, and the Department's Internal Response. The individual(s) responsible for the program(s), along with the Dean(s) who were involved with the review, will be invited to speak to SAC-QA regarding the FAR and IP. Upon acceptance, SAC-QA will forward the FAR, IP and Executive Summary (prepared by the Deputy Provost) to SAC along with a recommendation for approval. The Chair of SAC will then submit the Executive Summary and Implementation Plan as an item of information for Senate. The Dean of Graduate Studies will also report on the completion of graduate program reviews as an item of information at the Faculty of Graduate Studies Council. SAC will inform Senate that the FAR (excluding all confidential information) will be made available to the University Community through the Provost's QA webpage.

The Executive Summary, FAR and Implementation Plan will be forwarded by the Deputy Provost to the Quality Council.

The Executive Summary and Implementation Plan will be posted on the Provost's QA webpage for public access.

Note that other documents (Self-Study, Review Team Report and Response to the Review Team Report) are not publicly accessible.

The Dean of the Faculty, in consultation with the appropriate Chair/Director/Coordinator, in which the program(s) reside, shall be responsible for monitoring the Implementation Plan. Where a program straddles two (2) or more Faculties, the responsibility will be with the Deans of the Faculties involved.

The details of progress made will be presented in the Deans' Annual Reports and filed in the Office of the Provost.

### 6.8 Reviews of Multi or Inter-disciplinary Programs

All programs that have a multi or inter-disciplinary content, but that exist as an independent, free- standing entity within the University, usually with a core faculty devoted to the program, will be fully reviewed through the University's undergraduate and graduate program review process under the same arrangement as any single-disciplinary program. The Review Team will be composed to reflect the multi or inter-

disciplinary program content.

- All undergraduate inter-disciplinary and multi-disciplinary programs with double majors or double degrees will be reviewed as part of the core contributing programs.
- All undergraduate inter-disciplinary and multi-disciplinary programs that are made available to students by combining offerings from two (2) or more disciplines that do not have; a) dedicated core faculty and/or b) the status of a department or center will be affiliated with a "parent" Academic Unit with responsibility to ensure that the programs under its aegis undergo a periodic review.

# 6.9 Reviews of Joint Degree Programs

The QAF defines a Joint Degree Program as a program of study offered by two (2) or more universities, or by a university and a college or institute, including an Institute of Technology and Advanced Learning, in which successful completion of the requirements is confirmed by a single degree document.

The review of all Lakehead University Joint Degree Programs will be included in Lakehead University's Cyclical Review Schedule. Responsibility for leading the development of the Self-Study and for managing the subsequent review will be held by the university which houses the current Joint Degree Program Director or Lead. The Head of the Academic Unit, or individual designated with responsibility for the joint degree program at Lakehead University, will assist in the development of the single Self-Study in consultation with faculty, staff and students at each of the partner institutions (See requirements in Section 3.2, New Program Proposal Brief). The Self-Study brief will clearly explain how input was received from faculty, staff and students at each partner institution. Input related to the selection of reviewers will be provided by each partner institution. All members of the Review Team will visit the campus housing the current Joint Degree Program Director or Lead, and at least one member of the Review Team will visit each of the other program sites. The Review Team will consult with faculty, staff, and students at each partner institution.

Feedback on the Review Team Report will be solicited from participating Academic and Administrative Units at each partner institution. The Internal Responses to the review will be coordinated by the university housing the current Director or Lead, and will be completed in consultation with the appropriate Chairs/Director/Coordinator and the Deans at each of the participating institutions. The Internal Responses to the Review Team Report will be submitted through the regular Lakehead University approval process outlined in Section 6.5.

Preparation of a single FAR and Implementation Plan requires input from each partner institution and will be forwarded for approval and follow-up as described in Section 6.7. The FAR and Implementation Plan will be posted on the Provost's QA webpage. An appropriate monitoring process for the Implementation Plan will be developed through consultation with each of the partners. The Final Assessment Plan and Implementation Plan will be submitted to the Quality Council by each of the partners.

### 6.10 Cyclical Review of the Northern Ontario School of Medicine (NOSM) Programs

The Northern Ontario School of Medicine serves as the Faculty of Medicine of Lakehead University, Thunder Bay and Faculty of Medicine of Laurentian University, Sudbury. The review of the NOSM programs will be included in Lakehead University's Cyclical Review Schedule. Table 8 details the Cyclical Review and Appraisal Process for NOSM. The Dean of NOSM will be responsible for leading the development of a single Self-Study that addresses the criteria in the QAF Section 4.3 in consultation with faculty, staff and students at each of the partner institutions, and for managing aspects of the review process normally managed by the Head of an Academic Unit and the Dean of a Faculty. The Self-Study will clearly explain how input was received from faculty, staff and students at each partner institution. All members of the Review Team will have the opportunity to consult with faculty, staff, and students at each partner institution. The Site Visit need occur on only one campus.

Feedback on the Review Team Report will be solicited from participants at each partner institution. The final Internal Response to the review will be coordinated by the Office of the NOSM Dean and will ensure that each of the following are addressed:

- 1. The plans and recommendations proposed in the Self-Study report;
- 2. The recommendations advanced by the Review Team;
- 3. The program's response to the Review Team Report;

and will describe:

- 4. Any changes in organization, policy or governance that would be necessary to meet the recommendations;
- 5. The resources, financial and otherwise, that would be provided in supporting the implementation of selected recommendations; and
- 6. A proposed timeline for the implementation of any of those recommendations.

The response to the Review Team Report will be submitted to the Provost and Vice-President (Academic) at both of the partner institutions for review and approval. The development of a single Final Assessment Report, Implementation Plan and Executive Summary will be coordinated by the Provost and Vice-President (Academic) at both of the partner institutions and submitted to the NOSM Academic Council and the NOSM Joint Senate Committee for review and approval. The Executive Summary and Implementation Plan will be forwarded to the Lakehead University Senate as an item of information. The Executive Summary and Implementation Plan will be submitted by the Lakehead University Deputy Provost to the Quality Council.

The Dean of the Faculty shall be responsible for monitoring the Implementation Plan. The details of progress made will be presented in the Deans' Annual Report and filed with the Provost and Vice-President (Academic) for each campus. The Executive Summary and the Implementation Plan will be posted on the Provost's QA webpage.

Table 8: Cyclical Review of Existing Programs: NOSM Review and Appraisal Process

		DDIMADV
1	CVCLICAL DDOCDANA DEVIEWA DDOCECC NIOCNA	PRIMARY
1.	CYCLICAL PROGRAM REVIEW PROCESS - NOSM	RESPONSIBILITY FOR STEP IN PROCESS
i.	Initiation of review by University Contact/Authority.	Offices of the
	initiation of review by onliversity contactly facilities.	Provost at Lakehead
		University and
		Laurentian
<u></u>	NOCAA aa gaad ahaa Calf Charles	University
ii.	NOSM completes Self-Study.	NOSM Dean
iii.	External Evaluation - Site Visit arranged and	Offices of the
	conducted.	Provost at Lakehead
		University and
		Laurentian
		University, Office of
		the NOSM Dean
iv.	Review Team Report received and forwarded to	Offices of the Provost
	NOSM Dean.	at Lakehead University
		and Laurentian
		University
V.	NOSM Dean prepares Internal Response to Review	NOSM Dean
vi.	Team Report.	000000000000000000000000000000000000000
VI.	Development of a Single FAR, Implementation Plan,	Offices of the
	and Executive Summary coordinated by the Provost	Provost at Lakehead
	and Vice-President (Academic) at each of the	University and
	partner institutions.	Laurentian
		University, Office of
		the NOSM Dean
vii.	Review and approval of FAR and Implementation Plan by	Chair of NOSM
	NOSM Academic Council.	Academic Council
viii.	Chair of Academic Council forwards recommendation to	Chair of NOSM
	NOSM Joint Senate Committee.	Academic Council
ix.	Review and approval of FAR and Implementation Plan by	Chair of NOSM Joint
	NOSM Joint Senate Committee.	Senate Committee
х.	Joint Senate Committee forwards Executive Summary to the Lakehead University Senate as an item of information.	Chair of Joint Senate
	the Lakeneau Oniversity Senate as an item of information.	Committee

xi.	The Executive Summary and Implementation Plan will be forwarded to the Quality Council and placed on the Provost's QA and NOSM's webpages.	Deputy Provost, Office of the NOSM Dean
xii.	Annual Report to the Board of Governors and the NOSM Board of Directors on the programs reviewed during the previous academic year.	Office of the Provost at Lakehead University and Laurentian University

		PRIMARY
2.	FOLLOW-UP PROCESS	RESPONSIBILITY FOR
		STEP IN PROCESS
i.	Implementation and Ongoing Monitoring. Monitoring	NOSM Dean
	reports will be posted on the Provost's QA webpage.	Deputy Provost
ii.	Schedule next review within 8 years of previous cyclical	Deputy Provost
	review	

# 6.11 Reviews of Existing Academic Programs Relative to Professional Accreditation

The QAF indicates that the Lakehead University **IQAP** may allow for and specify the substitution or addition of documents or processes associated with the accreditation of a program, for components of the institutional program review process, when it is fully consistent with the requirements established in the QAF. A record of substitution (or addition) and the grounds on which it was made, will be eligible for audit by the QC.

In cases where the professional program accreditation standards mesh fairly well with the standards set out in the Lakehead University **IQAP**, components of the accreditation may be applied to the University's cyclical program review process for undergraduate and graduate programs, including NOSM.

Prior to the start of an accreditation review, the Deputy Provost will be provided with a copy of the accreditation review template to compare with the Lakehead University IQAP. The Deputy Provost, in consultation with SAC-QA where appropriate, will review the guidelines for the accreditation process and determine if, and how, the two (2) assessment processes should be integrated, ensuring compliance with the provisions of the IQAP. The Deputy Provost will then meet with the Dean(s) of the Faculty(s) to review and discuss the guidelines for the accreditation, the degree of alignment or overlap between the accreditation process and the undergraduate program review process, and to determine what additional materials or processes may be necessary. Such discussions should have occurred at the time when work begins by an Academic Unit to prepare for the accreditation process.

The outcome of comparison and discussion may be that:

- 1. The accreditation review will be accepted as meeting all the criteria for the cyclical program review. The final report of the accrediting body will be submitted directly to the Office of the Provost and a Final Assessment Report, which provides a synthesis of the external accreditation report and internal responses and assessments, will be drafted by the Deputy Provost with input and support from the Head of the Academic Unit responsible for the program(s) and the Dean(s); or
- 2. The accreditation review will be accepted as meeting most of the criteria of the cyclical program review. Some supplementary information will need to be submitted to the Deputy Provost along with the final report of the accrediting body. A FAR, which provides a synthesis of the external accreditation report, supplementary information, and internal responses and assessments, will be drafted by the Deputy Provost, with input and support from the Head of the Academic Unit responsible for the program(s) and the Dean(s); or
- 3. The accreditation review will not sufficiently meet the requirements of the cyclical program review and the process involved with the regular cyclical undergraduate program review will proceed as scheduled.

### 6.12 Reviews of For-Credit Diploma and Certificate Programs

Diplomas and certificates, where offered for credit, will be reviewed on the same cycle as other programs. They will normally be reviewed in conjunction with a related degree program, or concurrently with programs reviewed from the same Academic Unit.

# 7. THE AUDIT PROCESS

All publicly assisted universities in Ontario have committed to participating in an audit process. The objective of the audit is to determine whether or not the institution has acted in compliance with the provisions of its IQAP as ratified by the QC for the review and approval of academic programs. Details of the audit process are outlined in Section 5 of the QAF.

Appendices

APPENDIX 1: LAKEHEAD UNIVERSITY PROGRAM TYPOLOGY AND QUALITY COUNCIL INVOLVEMENT

Program Type	IQAP (Section)	Requires Approval Through QAF New Program Review and Approval Process	Requires Approval Through Expedited Approval Process	Requires Approval Through Cyclical Program Review	Documentation Required For Quality Council Audit Protocol
a. Undergraduate Programs					
New <sup>6</sup> Degree Program <sup>7</sup>	Yes (Section 3)	Yes	No	Yes	Yes
Major Modification	Yes (Section 5)	No	No - unless requested by Lakehead University	Yes	Yes
Existing program with a new Concentration, new Specialization, new Minor, etc. (I.e Major/Special Modification)	Yes (Section 5)	No	No – unless requested by Lakehead University	No	Yes
Undergraduate Certificate and Diploma <sup>8</sup> Programs	Yes (Section 5)	No	No	Yes	No

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<sup>&</sup>lt;sup>6</sup> Any degree, degree program, or program of specialization, currently approved by Senate or equivalent governing body, which has not been previously approved for that institution by the Quality Council, its predecessors, or any intra-institutional approval processes that previously applied. A change of name, only, does not constitute a new program; nor does the inclusion of a new program of specialization where another with the same designation already exists (e.g. a new honours program where a major with the same designation already exists).

<sup>&</sup>lt;sup>7</sup> The complete set and sequence of courses, combination of courses and/or other units of study, research and practice prescribed by an institution for the fulfillment of the requirements of a particular degree.

<sup>&</sup>lt;sup>8</sup> Not-for-credit and for-credit undergraduate diploma programs are not subject to approval or audit by the Quality Council.

Program Type	IQAP (Section)	Requires Approval Through QAF New Program Review and Approval Process	Requires Approval Through Expedited Approval Process	Requires Approval Through Cyclical Program Review	Documentation Required For Quality Council Audit Protocol
b. Graduate Programs			-		
Diploma – Graduate for-credit <sup>9</sup>	Yes (Section 4)	No	Yes	Yes	Yes
New Degree	Yes (Section 3)	Yes	No	Yes	Yes
New Field Addition <sup>10</sup>	Yes (Section 5)	No	Yes	Yes	Yes
Major Modification - including new Collaborative Programs <sup>11</sup> - not including the addition of a new Field	Yes (Section 5)	No	No – unless requested by Lakehead University	Yes	Yes

<sup>&</sup>lt;sup>9</sup> See Quality Assurance Framework for full definition

<sup>&</sup>lt;sup>10</sup> In graduate programs, field refers to an area of specialization or concentration (in multi/interdisciplinary programs a clustered area of specialization) that is related to the demonstrable and collective strengths of the program's faculty. Institutions are not required to declare fields at either the master's or doctoral level. Institutions may wish, through an expedited approval process, to seek the endorsement of the Quality Council.

<sup>&</sup>lt;sup>11</sup> A collaborative program is an intra-university graduate program that provides an additional multidisciplinary experience for students enrolled in and completing the degree requirements for one of a number of approved programs. Students meet the admission requirements of and register in the participating (or "home") program but complete, in addition to the degree requirements of that program, the additional requirements specified by the collaborative program. The degree conferred is that of the home program, and the completion of the collaborative program is indicated by a transcript notation indicating the additional specialization that has been attained (e.g., "MA in Political Science with specialization in American Studies").

### **APPENDIX 2A: UNDERGRADUATE SELF-STUDY REQUIREMENTS**

The Self-Study must include three volumes and provide the internal program perspective in that it:

- 1. discusses the consistency of the program's Learning Outcomes with the University's mission and DLE's and how our graduates achieve those outcomes,
- 2. presents program-related data and measures of performance, including applicable provincial, national and professional standards (where available),
- 3. confirms the integrity of the data,
- 4. reviews criteria and quality indicators identified in the QAF Section 4.3,
- 5. addresses concerns and recommendations raised in previous reviews,
- 6. identifies areas as requiring improvement,
- 7. identifies areas that hold promise for enhancement,
- 8. identifies academic services that directly contribute to the academic quality of each program under review, and
- 9. describes the participation of program faculty, staff and students in the production of the Self-Study and how their views were obtained and taken into account.

# Volume One: Description and Analysis of the Program(s)

This volume includes three parts;

- Part 1: Program Description and Outcomes,
- Part 2. Analytical and Reflective Assessment of the Program, and
- Part 3: Program Related Data (Appendices).

#### **Volume Two: Course Outlines**

This volume includes the most recent course outline for each of the courses listed in the calendar for each of the programs being reviewed. A summary table that indicates the last term in which each course was taught, the instructor and the enrolment should be included.

There should be a Table of Contents and the course outlines should be presented sequentially by code and number.

### **Volume Three: Curriculum Vitae (CV)**

This volume includes a current CV for each full-time member of the academic unit, using the CV format found on Provost's QA webpage. The CVs of part-time faculty members and adjuncts who contribute to the teaching and/or thesis supervision in the academic unit should also be included.

There should be a Table of Contents (indicating the order of the CV's whether alphabetic or alphabetic by rank) and the pages should be sequentially numbered.

### **VOLUME ONE: DESCRIPTION AND ANALYSIS OF THE PROGRAM(S)**

### Part 1. Program Description and Outcomes

This section must include:

- 1.1. A brief history of the Academic Unit delivering the program(s) under review including the major academic achievements of the unit as they relate to program development and delivery.
- 1.2. A mission statement for the Academic Unit and program(s) being reviewed including a summary highlighting recent or proposed changes in the mission of the Academic Unit
- 1.3. A brief description of the degree program(s) under review. A summary table is often helpful here (contact the Office of the Deputy Provost for an example). When there are only a few programs under review (i.e. 3-5), it is appropriate to include the calendar entries in the main body of the text. If there are more programs, it is recommended that they be collated into an appendix to Volume 1.
- 1.4. A brief statement related to the appropriateness of degree nomenclature (i.e. compare and contrast to other similar programs elsewhere).
- 1.5. A set of learner outcomes for each academic degree program being reviewed (see Appendix Template Table 1).
- 1.6. A description of the consonance of each program and its learner outcomes with the general framework of the University's Mission and Strategic, Academic, and Research Plans.
- 1.7. A discussion of the clarity and appropriateness of the program requirements and associated learning outcomes in addressing Lakehead University's Undergraduate or Graduate Degree Level Expectations (see Appendix Template Table 2).
- 1.8. Although specific data is presented in Part 2 (under Resources) and Part 3 (Data pack), there is an opportunity in this section of Part 1 to highlight particularly appropriate evidence of the indicators that illustrate and confirm the quality of the program. Outcome measures of student performance and achievement are of particular interest, but there are also important input and process measures known to have a strong association with quality outcomes. These often include, but are not limited to, descriptors of faculty, students and graduates. The following are examples of indicators that **may** be included.
  - a) **Faculty**: qualifications, research and scholarly record; class sizes; percentage of classes taught by permanent or non-permanent (contractual) faculty; numbers, assignments and qualifications of part time or temporary faculty;
  - b) **Students**: applications and registrations; attrition rates; time-to-completion; final-year academic achievement; graduation rates; academic awards; student in-course reports on teaching; and
  - c) Graduates: rates of graduation, employment six months and two years after graduation, postgraduate study, "skills match" and alumni reports on program quality when available and when permitted by the Freedom of Information and Protection of Privacy Act (FIPPA).
    Note Auditors will be instructed that these items may not be available and applicable to all

programs.

- 1.9. A summary of the evidence of program structure and faculty research that ensures the intellectual quality of the student experience.
- 1.10. A summary of Reports of recent accreditation or professional reviews (if applicable or appropriate).
- 1.11. A description of the accomplishments and employment opportunities of past graduates.
- 1.12. A summary of the process used to prepare the **Self Study**, including the role of the faculty and staff (full-time and part-time), students, and alumni. The **Self Study** should be a team effort. Student perspectives could be included through focus groups and/or representation on the team preparing the self-study report. Alumni input could be obtained by means of a survey of past graduates. Where appropriate, input of others, such as representatives of industry, professional and practical training programs should be considered.
- 1.13. An <u>Overview</u> of Program Support (more detail is provided in Part 2 but this is an opportunity to highlight particular strengths or opportunities for the Academic Unit/program(s)):
  - a) Summary of number and type of full-time, part-time, and adjunct appointments
  - b)Listing of current faculty members and credentials (see Appendix Template Table 3).
  - c) Listing of support staff, and their roles and responsibilities (see Appendix Template Table 4).
  - d)Description of the availability and use of physical resources for teaching and research (see Appendix Template Table 5).
  - e) Description of the Administrative Organization Reporting structures/standing committees/student participation in governance, etc.

# Part 2. Analytical Assessment of the Program

This section must include:

### 2.1 Admission Requirements

- a) List the admission requirements.
- Discuss the appropriateness of the program's admission requirements for the learning outcomes established for completion of the program. Reference to the incoming admission average (as provided in the data pack) may be helpful here.
- Provide a sufficient explanation of alternative requirements, if any, for admission such as minimum grade point average, additional languages or portfolios, along with how the program recognizes prior work or learning experience.
- If available and for additional context, include information regarding typical feeder programs and/or institutions; proportion of domestic and international students; proportion of direct entry (i.e. high school), non-direct entry and/or transfer students; recognition of advanced standing for completion of specific college level credentials, or other related data.

#### 2.2 Program Structure

Describe the structure of the program(s). For example, number of years to complete, lab vs. lecture components, proportion of required vs. elective courses, additional requirements such as cooperative

- education, internships, field placements, practica, etc.
- Include the relevant program and Faculty regulations.
- Discuss the appropriateness of the program's structure and regulations to meet specified program learner outcomes and Degree Level Expectations (see Appendix Template Table 6).
- Demonstrate links between Course Learner Outcomes and Program Learner Outcomes (see Appendix Template Table 7).

### 2.3 Curriculum

- Describe ways in which the curriculum addresses the current state of the discipline or area of study.
- ldentify any unique curriculum or program innovations or creative components.
- d) Discuss any recent and/or possible future curriculum changes (including strategies and schedule for future changes)
- Describe any curricular links between undergraduate and graduate programs (if graduate programs exist within the unit)
- e Describe and discuss the mechanisms in place for curriculum review and revision

### 2.4 Mode of delivery

Discuss the appropriateness of the mode(s) of delivery to meet the program learning outcomes and Degree Level Expectations.

# 2.5 Assessment of teaching and learning

- Discuss the appropriateness and effectiveness of methods used in the assessment of student achievement of program learner outcomes and Lakehead University's Degree Level Expectations.
- Discuss the appropriateness and effectiveness of the means of assessment, especially in the students' final year of the program, in clearly demonstrating achievement of the program learner outcomes and Lakehead University's Degree Level Expectations.
- Provide evidence of the quality of teaching and advising in the Academic Unit
- Describe the response of the Unit to the Undergraduate/Graduate Program Review Student Survey (completed by the Office of Institutional Planning and Analysis)
- Discuss the use of innovative or unique teaching programs and techniques

# 2.6 Resources for undergraduate programs

Discuss the appropriateness and effectiveness of the use of existing human, physical and financial resources in delivering the academic program(s) and associated experiential learning opportunities. Include as many of the items below as are appropriate. Throughout this section, please refer to data provided in the Appendices and elsewhere in the document

### a) Faculty and Staff

- Analyze participation (number and quality) of full and part time faculty and adjunct professors who teach and/or supervise in the program.
- Provide an overview of service teaching provided for other academic units

- Provide an analysis of the roles and effectiveness of the staff in supporting the academic program(s) and learner outcomes
- b) Physical & Financial Resources
- Analyze the appropriateness of the resources in relation to the implementation of the program(s) and enrolment and class size
- Discuss how the resources sustain the quality of scholarship produced by students including library support,
   information technology support, and laboratory access (where appropriate refer to data provided in Part 3)

### 2.7 Overall Quality Assessment

- Address the question "How effectively has the Academic Unit addressed concerns and recommendations raised in previous program reviews?"
- Describe initiatives taken to enhance the quality of the programs and the associated learning and teaching environment.
- 2.8 Program Regulations and Courses
- a) Identify links to pertinent regulations
- Include a list of course offerings/calendar descriptions (Note Volume 2 includes full course outlines)

# Part 3. Program Related Data

The bulk of this information is provided by the Office of Institutional Planning and Analysis. Please use the information presented in this section to support the discussion and observations contained in Parts 1 and 2.

- 3.1. Summarized Results of the Undergraduate Program Review Student Survey

  (Note raw student survey data, including comments, is provided by IPA to the Academic Unit.)
- 3.2. Library Report the University Librarian provides a report on the relevant information resources for the programs under review.
- 3.3. Space Report additional information beyond what has been provided by Office of Institutional Planning and Analysis.
- 3.4. Undergraduate Program Data Pack
  - Full-time enrolment (headcount) by program for 7 years.
  - Full-time equivalent (FTE) enrolment for 7 years (FTE represents the total of all full- and part- time students in the fiscal year where the study load is converted to the "normal full-time study load" for each program).
  - Enrolment by gender and program as at November 1 reporting date for the University overall and for the department being reviewed.
  - Enrolment in Honours and Bachelors (3- and 4-year) programs over the past 7 years, by full- and part-time load.
  - Course registrations per FTE faculty member over the past 7 years.
  - Average class size data for each year of the program over the past 7 years.

- Number of courses with labs or tutorials by year level for the most recent academic year.
- Data on the average entering marks received by registered secondary school applicants.
- Average marks data for the past 7 years by department overall and by individual course.
- Data on internal and external scholarships awarded for past 7 years by department and institution.
- Degrees awarded (by calendar year) for 7 years.
- Data on time to completion for full-time students. Cohort includes full-time students registered for the first time in year one of the program.
- Data on physical space utilized by the department.
- Report on library resources as provided by the Library.
- Results of the student survey which includes data sets and comments by students.

#### **APPENDIX 2B: GRADUATE SELF-STUDY REQUIREMENTS**

The Self-Study must include three volumes and provides the internal program perspective in that it:

- 1. discusses the consistency of the program's learning outcomes with the University's mission and DLE's and how our graduates achieve those outcomes,
- 2. presents program-related data and measures of performance, including applicable provincial, national and professional standards (where available),
- 3. confirms the integrity of the data,
- 4. reviews criteria and quality indicators identified in the QAF Section 4.3,
- 5. addresses concerns and recommendations raised in previous reviews,
- 6. identifies areas as requiring improvement,
- 7. identifies areas that hold promise for enhancement,
- 8. identifies academic services that directly contribute to the academic quality of each program under review, and
- 9. describes the participation of program faculty, staff and students in the production of the Self-Study and how their views were obtained and taken into account.

# **Volume One: Description and Analysis of the Program(s)**

This volume includes three parts;

Part 1: Program Description and Outcomes,

Part 2. Analytical and Reflective Assessment of the Program, and

Part 3: Program Related Data.

#### **Volume Two: Course Outlines**

This volume includes the most recent course outline for each of the courses listed in the calendar for each of the programs being reviewed. A summary table that indicates the last term in which each course was taught, the instructor and the enrolment should be included.

There should be a Table of Contents and the course outlines should be presented sequentially by code and number.

### **Volume Three: Curriculum Vitae (CV)**

This volume includes a current CV for each full-time member of the academic unit, using the CV format found on Provost's QA webpage. The CVs of part-time faculty members and adjuncts who contribute to the teaching and/or thesis supervision in the academic unit should also be included.

There should be a Table of Contents (indicating the order of the CV's whether alphabetic or alphabetic by rank) and the pages should be sequentially numbered.

# **VOLUME ONE: DESCRIPTION AND ANALYSIS OF THE PROGRAM(S)**

### Part 1. Program Description and Outcomes

This section must include:

- 1.1. A brief history of the Academic Unit delivering the program(s) under review including the major academic achievements of the unit as they relate to program development and delivery.
- 1.2. A mission statement for the Academic Unit and program(s) being reviewed including a summary highlighting recent or proposed changes in the mission of the Academic Unit
- 1.3. A brief description of the degree program(s) under review. Include the calendar entry.
- 1.4. A brief statement related to the appropriateness of degree nomenclature (i.e. compare and contrast to other similar programs elsewhere).
- 1.5. A set of learner outcomes for each academic degree program being reviewed (see Appendix A, Table Template 1).
- 1.6. A description of the consonance of each program and its learner outcomes with the general framework of the University's Mission and Strategic, Academic, and Research Plans.
- 1.7. A discussion of the clarity and appropriateness of the program requirements and associated learning outcomes in addressing Lakehead University's Graduate Degree Level Expectations (see Appendix A, Table Template 2).
- 1.8. Although specific data is presented in Part 2 (especially under Resources) and Part 3, there is an opportunity in this section of Part 1 to highlight particularly appropriate evidence of the indicators that illustrate and confirm the quality of the program. Outcome measures of student performance and achievement are of particular interest, but there are also important input and process measures known to have a strong association with quality outcomes. These often include, but are not limited to, descriptors of faculty, students and graduates. The following are examples of indicators (from the QAF) that may be included.
  - a) **Faculty**: qualifications, research and scholarly record; class sizes; percentage of classes taught by permanent or non-permanent (contractual) faculty; numbers, assignments and qualifications of part time or temporary faculty;
  - Students: applications and registrations; attrition rates; time-to-completion; final-year academic achievement; graduation rates; academic awards; student in-course reports on teaching; scholarly output; success rates in provincial and national scholarship competitions; awards; commitment to professional and transferable skills;
  - c) **Graduates**: rates of graduation, employment six months and two years after graduation, postgraduate study, "skills match" and alumni reports on program quality when available and when permitted by the Freedom of Information and Protection of Privacy Act (FIPPA). Auditors will be instructed that these items may not be available and applicable to all programs.
- 1.9. A summary of the evidence of program structure and faculty research that ensures the intellectual quality of the student experience.
- 1.10. A summary of Reports of recent accreditation or professional reviews

(if applicable or appropriate).

- 1.11. A description of the accomplishments and employment opportunities of past graduates.
- 1.12. A summary of the process used to prepare the **Self Study**, including the role of the faculty and staff (full-time and part-time), students, and alumni. The **Self Study** should be a team effort. Student perspectives could be included through focus groups and/or representation on the team preparing the self-study report. Alumni input could be obtained by means of a survey of past graduates. Where appropriate, input of others, such as representatives of industry, professional and practical training programs should be considered.

# 1.13. An Overview of Program Support:

- a) Summary of number and type of full-time, part-time, and adjunct appointments
- b)Listing of current faculty members and credentials (see Appendix A, Table Template 3)
- c) Listing of support staff, their roles and responsibilities (see Appendix A, Table Template 4)
- d)Description of the availability and use of physical resources for teaching and research (see Appendix A, Table Template 5)
- e) Description of the administrative organization Reporting structures/standing committees/student participation in governance, etc.

### Part 2. Analytical Assessment of the Program

This section must include:

# 2.1 Admission Requirements

- e List the admission requirements.
- Discuss the appropriateness of the program's admission requirements for the learning outcomes established for completion of the program.
- Provide a sufficient explanation of alternative requirements, if any, for admission such as minimum grade point average, additional languages or portfolios, along with how the program recognizes prior work or learning experience.
- For additional context include a table of entry averages (domestic and international); typical feeder programs and/or institutions; percent Lakehead vs. students from other institutions, or other related data.

# 2.2 Program Structure

- Describe the structure of the program(s). For example, number of years to complete, lab vs. lecture components, proportion of required vs. elective courses, additional requirements such as cooperative education, internships, field placements, practica, etc.
- for Include the relevant program and Faculty regulations.
- Discuss the appropriateness of the program's structure and regulations to meet specified program learner outcomes and Degree Level Expectations (see Appendix A Template Table 6).
- Demonstrate links between Course Learner Outcomes and Program Learner Outcomes (see Appendix A Template Table 7).
- Demonstrate that there are sufficient graduate level courses to ensure that students will be able to meet

the requirement that two-thirds of their course requirements be met through courses at this level.

### 2.3 Curriculum

- Describe ways in which the curriculum addresses the current state of the discipline or area of study.
- Identify any unique curriculum or program innovations or creative components.
- h) Discuss any recent and/or possible future curriculum changes (including strategies and schedule for future changes)
- Describe any curricular links between undergraduate and graduate programs (if undergraduate programs exist within the unit)
- Describe and discuss the mechanisms in place for curriculum review and revision

### 2.4 Mode of delivery

Discuss the appropriateness of the mode(s) of delivery to meet the program learning outcomes and Degree Level Expectations.

### 2.5 Assessment of teaching and learning

- f) Discuss the appropriateness and effectiveness of methods used in the assessment of student achievement of program learner outcomes and Lakehead University's Degree Level Expectations.
- Discuss the appropriateness and effectiveness of the means of assessment, especially in the students' final year of the program, in clearly demonstrating achievement of the program learner outcomes and Lakehead University's Degree Level Expectations.
- Provide evidence of the quality of teaching and advising and commitment to student mentoring in the Academic Unit
- Describe the response of the Unit to any input from graduate students (e.g. from focus groups, surveys, student involvement in governance, etc.)
- Discuss the use of innovative or unique teaching programs and techniques

### 2.6 Resources for graduate programs

Discuss the appropriateness and effectiveness of the use of existing human, physical and financial resources in delivering the academic program(s) and associated experiential learning opportunities. Include as many of the items below as are appropriate. Throughout this section, please refer to data provided in the Appendices and elsewhere in the document

### a) Faculty and Staff

- <u>Analyze</u> the participation (number and quality) of full and part time faculty and adjunct professors who teach and/or supervise in the program.
- <u>Discuss</u> the appropriateness of the research and/or professional/clinical expertise for continuing to sustain the program, promote innovation and foster an appropriate intellectual climate
- <u>Describe</u> how supervisory loads are distributed and the qualifications and appointment status of faculty who provide instruction and supervision
- · Provide evidence that students' time to completion is both monitored and managed in relation to the

- program's defined length and requirements
- Analyze the roles and effectiveness of the staff in supporting the academic program(s) and learner outcomes
- b) Funding Support for Students
- <u>Discuss</u> the sufficiency of the financial assistance that is available to students for ensuring adequate quality and numbers of students
- Refer to data provided in Part 3 and elsewhere
- c) Physical & Financial Resources
- Analyze the appropriateness of the resources to sustain the quality of scholarship produced by graduate students including library support, information technology support, and laboratory access (where appropriate refer to data provided in Part 3)
- 2.7 Overall Quality Assessment
  - Address the question "How effectively have you addressed concerns and recommendations raised in previous program reviews?"
  - Describe initiatives taken to enhance the quality of the programs and the associated learning and teaching environment.
- 2.8 Program Regulations and Courses
  - Identify links to pertinent regulations
  - Include a list of course offerings/calendar descriptions(Note Volume 2 includes full course outlines)

### Part 3. Program Related Data (Appendices)

- 3.1. Summarized Results of any Graduate Program Review Student Input that has been collected.
- 3.2. Library Report The University Librarian provides a report on the relevant information resources for the programs under review.
- 3.3. Space Report additional information beyond what has been provided by Office of Institutional Planning and Analysis
- 3.4. Graduate Data Requirements (see list below and table Templates in the Self-Study Guide on the <a href="Provost's QA webpage">Provost's QA webpage</a>)
  - Table 1. Faculty participation in graduate programs and fields
  - Table 2. Funding pertinent to the program (last 7 years)
  - Table 3. Completed and current numbers of thesis supervision by faculty member
  - Table 4. Teaching assignments (last 3 years)
  - Table 5. Courses offered to graduate students in the past three years

Table 6 a. Financial support for Masters/PhD students

Table 6 b. Percent of Masters/PhD students receiving funding

Table 7. Cohort data (describes passage of students throughout the program – intake, progression, retention, completion)

### **APPENDIX 3: LIST OF ABBREVIATIONS**

COU Council of Ontario Universities

DLE Degree Level Expectations

FAR Final Assessment Report

FGSC Faculty of Graduate Studies Council: Program and Regulations Committee

FGS Faculty of Graduate Studies

IQAP Institutional Quality Assurance Process (this document)

MTCU Ministry of Training Colleges and Universities

OCGS Ontario Council of Graduate Studies

PLO Program learning outcomes

QA Quality Assurance

QAF Quality Assurance Framework

QC Quality Council

SAC Senate Academic Committee

SAC-QA Quality Assurance Subcommittee of SAC

SBC Senate Budget Committee

SUSC Senate Undergraduate Studies Committee

TSC Technology Services Centre

UPRAC Undergraduate Program Review Audit Committee

VP IPA Vice-Provost Institutional Planning and Analysis