



ONTARIO UNIVERSITIES
COUNCIL on QUALITY ASSURANCE

**SUMMARY OF AUDITORS' REPORT ON THE
SCOPE OF WILFRID LAURIER UNIVERSITY'S
RESPONSE TO THE QUALITY ASSURANCE
AUDIT**

OCTOBER 2020

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AUDITORS' REPORT ON THE SCOPE OF WILFRID LAURIER UNIVERSITY'S RESPONSE TO THE QUALITY ASSURANCE AUDIT

SUMMARY

INTRODUCTION

The Ontario Universities Council on Quality Assurance (Quality Council) undertook an Audit of Quality Assurance at Wilfrid Laurier University in 2018-19. As with all such audits, the purpose was to assess the extent to which Wilfrid Laurier University complies with its own Institutional Quality Assurance Processes (outlined in the Wilfrid Laurier University IQAP) and to affirm that institutional practices are consistent with the Quality Assurance Framework that governs quality assurance activities at publically assisted Ontario Universities.

A team of three Quality Council auditors prepared a report based on a desk audit of documents submitted by Wilfrid Laurier University and a three-day site visit to the institution on February 4 – 6, 2019. The Report on the Quality Assurance Audit of Wilfrid Laurier University was approved by the Quality Council on August 23, 2019.

The Quality Assurance Framework requires that each institution submit a one-year follow-up response to the Quality Council in which it describes the steps it has taken to address the recommendations in the Audit Report. This response is reviewed by the auditors who, in turn, prepare a report and a summary of that report for consideration by the Audit Committee and, ultimately, by the Quality Council. Upon approval of the Institutional One-Year Response, the Auditor's Report and its Summary, the Institutional One-Year Response and the Auditor's Summary Report on the response are published on the Quality Council website.

The 2019 Audit Report for Wilfrid Laurier University contained seven recommendations and five suggestions. Under the Quality Assurance Framework, universities must satisfy audit recommendations, as they identify institutional practices that are not compliant with the institution's IQAP. Suggestions are proposed by the auditors in the spirit of encouraging reflection on how practice might be improved. Compliance with suggestions is not mandatory and discussion of action related to suggestions is not a required component of the University's One-Year Response.

The University's One-year Response, submitted on July 30, 2020, serves as the basis for this report.

RECOMMENDATIONS

RECOMMENDATION 1: Ensure that the explanation for including or excluding external reviewers' recommendations for the FAR and IP is well documented.

RECOMMENDATION 2: Ensure that there is a clear and transparent system for implementing and monitoring CPR recommendations that are to be acted on.

RECOMMENDATION 3: Retain complete and accurate documentation for each stage of all quality assurance processes.

RECOMMENDATION 4: Ensure that the articulation of learning outcomes assessment are adequately addressed in each self-study for Cyclical Program Reviews.

RECOMMENDATION 5: Revise the relevant sections in Policy 2.1. and 2.2. of the University's IQAP to clarify that distinct internal responses to external reviews are required from both the academic unit and the relevant Dean in New Program Proposals and Cyclical Program Reviews (QAF 2.2.8 and 4.2.4 f)).

RECOMMENDATION 6: Ensure that students and staff are explicitly engaged in specific ways in the process of New Program Proposals and Cyclical Program Reviews.

RECOMMENDATION 7: Ensure that when multiple programs are reviewed concurrently, the quality of each academic program is addressed explicitly, as set out in the evaluation criteria (QAF 4.2.2).

CONCLUSION

After careful review of Wilfrid Laurier University's One-Year Follow-Up Response, the Auditors are of the view that the University's One-Year Response demonstrates its commitment to ensuring and improving its quality assurance processes and practices.

The Auditors found that the proposed changes to the University's IQAP and to relevant templates and practices that have been or will be introduced in response to the audit satisfactorily address the related recommendations contained in the Audit report. The Auditors commend Wilfrid Laurier University for making or proposing the changes cited in its One-Year Follow-Up Response. The Auditors are of the view that, when a revised IQAP is ratified by the Quality Council and the appropriate changes to practice are made, the quality assurance policies and practices at Wilfrid Laurier University will be enhanced.

July 30, 2020

Dear Dr. Orchard:

Please find enclosed Wilfrid Laurier's One Year Follow-Up Report to its institutional audit that took place in February 2019, and in response to the Audit Report received in August 2019. Below we have provided a response to each recommendation and suggestion included in the Audit Report, outlining the steps that the university has made during the past year to strengthen its quality assurance processes as a result of the audit recommendations and suggestions.

Following receipt of the final version of the university's Audit Report, the report was shared with relevant stakeholders across the university. The report was reviewed and discussed with all of the faculty deans through the Vice-President: Academic's Advisory Council (VPAC), where it was accompanied by an Audit Implementation Plan that identified the timelines and actions steps for implementing the recommendations made in the report. The summary version of the Audit Report was shared and discussed with the Program Review Sub-Committee and the Senate Academic Planning Committee at meetings in the fall of 2019. Finally, the Summary Report was posted to the [quality assurance page](#) of the university's Public Accountability website.

RESPONSES TO RECOMMENDATIONS MADE BY AUDIT COMMITTEE

RECOMMENDATION 1: Ensure that the explanation for including or excluding external reviewers' recommendations for the FAR and IP is well documented.

It was clear to us during the Audit that increased transparency in our Final Assessment Reports and Implementation Plans would be a significant recommendation to come out of the review. We understand the importance that is placed on the external reviewers' recommendations and the need for clarity in all institutional responses to them. As most of the cyclical reviews included in the Audit were from several cycles past (2014-2015, with the exception of the PhD in Global Governance which was from 2017-2018), we believe that the transparency in whether or not reviewers' recommendations are prioritized for implementation has already been addressed through specific communication to the deans in advance of preparing them, through feedback provided by the Quality Assurance Office, and through the oversight of the Program Review Sub-Committee, which reviews the Final Assessment Reports for completion and adherence to the requirements outlined in our IQAP. It was noted in a letter from the Quality Council in April 2020 that our last set of submitted Final Assessment Reports, from the 2018-2019 review cycle, met the requirements and that "Overall, the Council agreed that the

reports were comprehensive, transparent, and thorough, and the academic unit and Deans' responses appeared to engage with the external reviewers' recommendations in a thoughtful manner."

The university has always empowered its faculty deans to determine which recommendations made by the external review committee should be prioritized for implementation, as well as which of these may be outside of the scope or purview of the cyclical review process. We recognize, however, that there should be a clear and transparent process for documenting this: both why recommendations are deemed to be a priority for implementation, as well as why select recommendations may not be feasible. In addition to the implementation of these steps in practice, outlined above, we have also addressed this recommendation via changes to our cyclical review policy (Policy 2.1). A revised, Senate-approved version of this policy is being submitted in conjunction with this report for re-ratification. A new section of the policy pertinent to this recommendation includes the following explanation of the role of the dean in prioritizing the recommendations to be implemented:

"Following completion of the Unit Response, the dean(s) of the relevant Faculties will prepare a decanal response that responds to the recommendations made by the review committee as well as the unit's response to those recommendations. The dean(s) will also prepare the Implementation Plan, which identifies those recommendations prioritized for implementation and who is responsible for implementing the recommendation. The decanal response will also provide an explanation for any recommendations that are not prioritized for implementation in the Plan. This Implementation Plan will form part of the Final Assessment Report (Policy 2.1, p. 7)."

We believe that this recommendation, previously implemented in practice, is additionally satisfied by the codification of it in our IQAP. The acknowledgement of the comprehensive and transparent nature of our most recently submitted cycle of Final Assessment Reports by the Quality Council provides additional support for the completion of this recommendation.

RECOMMENDATION 2: Ensure that there is a clear and transparent system for implementing and monitoring CPR recommendations that are to be acted on.

We interpreted a relationship between this recommendation and the previous one, insofar as the actions taken to address recommendation #1 also partially fulfill this recommendation as well. In re-reading the narrative that contextualizes this recommendation, we also believe that there may have been some lack of clarity over our process for assigning responsibility for the implementation of recommendations, based on this statement: "In terms of the monitoring of recommendations that have been agreed require action, auditors found that sometimes the University assigns responsibility for a recommendation to an office other than the unit, such as to the Dean or central administration. When this occurs, the recommendation does not appear in the IP and the auditors could not find evidence – in the IQAP or elsewhere – of a process to monitor how such recommendations might be acted upon" (Audit Report, p. 10). It has never been the university's practice to exclude a recommendation from the Implementation Plan if the responsibility had been assigned to an area other than the academic unit being reviewed. The only reason a recommendation would be excluded

from the Implementation Plan is if the dean(s) have determined that it is not feasible to implement post-review, or if it is outside the scope of the review, as explained in response to Recommendation #1. The primary responsibility for the implementation of the majority of the recommendations is the academic unit that is being reviewed; occasionally, however, successful implementation of the recommendation involves the collaboration or support of another academic or administrative unit at the university. For example, a recent recommendation prioritized for implementation from the 2019-2020 cyclical review of the Digital Media and Journalism program was to “Work with the Development Office to secure an endowed teaching chair in Indigenous Journalism, with a scholarship component for Indigenous students.” The Dean of Liberal Arts assigned responsibility for this recommendation to the program, in consultation with the Office of Indigenous Initiatives and Development Office.

The university’s current process for monitoring the recommendations prioritized for implementation in the Implementation Plan is outlined in Policy 2.1, which states:

“Two years following the submission of the Final Assessment Report to Senate, the unit will be asked to prepare an Implementation Report describing progress made on the implementation of the recommendations prioritized. The unit will propose a revised implementation date, as appropriate, and identify any significant developments or initiatives since the cyclical review that have impacted the implementation of recommendations. The report will be submitted to the relevant dean(s) for comment, then to the Program Review Sub-Committee for review and approval, and to the Senate Academic Planning Committee for information. The Program Review Sub-Committee will determine if and when a subsequent report is necessary and communicate that decision back to the unit. All implementation reports will be made public on the university’s Cyclical Review Public Accountability website” (Policy 2.1, p.8).

The Quality Assurance Office prepares a template for the Implementation Report that includes all recommendations prioritized for implementation in the Implementation Plan that accompanies the Final Assessment Report. This ensures that the academic unit provides an update on all recommendations prioritized in the Implementation Plan. It is common practice for academic units to submit a draft of this report to the Quality Assurance Office for review, before it is sent to the relevant dean(s) for review and comment. The collegial culture around quality assurance at the university is such that deans usually ask if their comments are sufficient before the Implementation Report moves on to the Program Review Sub-Committee. As noted in the passage from Policy 2.1 above, if the committee does not believe that they have sufficient information to determine if a recommendation has been implemented, they will request a follow-up report from the unit.

Whether Recommendation #2 stems from a misunderstanding about how or why recommendations may not appear in the Implementation Plan, or reflect a less mature system in the 2014-2015 cyclical reviews that were selected for the Audit, we hope that the above mentioned policy and process steps provide evidence that the university has in place a “clear and transparent system for implementing and monitoring CPR recommendations that are to be acted on.” Our system includes multiple levels of

review and oversight to ensure that no recommendations that have been prioritized for implementation are neglected or omitted during the implementation phase of the review.

RECOMMENDATION 3: Retain complete and accurate documentation for each stage of all quality assurance processes.

Our interpretation of this Audit recommendation is that it is closely connected to recommendations #1 and #2, related specifically to clarity and transparency around why reviewers' recommendations may not be included in an implementation plan, based on the deans' assessment of their relevancy and feasibility for implementation. This interpretation is based on the following statement provided in the Audit Report: "While most documentation was provided, there were a few instances where not all documents were available. For example, supporting documentation was missing with regards to the determination of which external reviewers' recommendations were to be used to develop the FAR and IPs" (p. 8). We acknowledge that when some this decision-making transpires through conversations or meetings, a clear record of why these recommendations have not been included may not be evident to external readers of the subsequent documents, and that it should be for purposes of historical record-keeping and transparency.

The university has taken great care to ensure that it maintains a comprehensive record of all documents related to its quality assurance processes that can be understood and maintained should there be transitions in staffing. As this was the only example provided of missing documentation based on the programs audited, we think the steps that we have outlined to address recommendations #1 and #2 will satisfy this recommendation as well.

RECOMMENDATION 4: Ensure that the articulation of learning outcomes assessment are adequately addressed in each self-study for Cyclical Program Reviews.

As with most institutions across the province and country, the transition to a culture and practice of learning outcomes based program design and review is taking place, albeit gradually. The commendations section of our Audit Report notes that, "Auditors also commend Laurier on the extent to which learning outcomes have been embraced by faculty and academic units. Generally, these were well defined in the documentation and well understood by faculty." This engagement with the identification and mapping of program learning outcomes across the curriculum is not something that the university takes for granted in its faculty or academic units, as it is an engagement that has taken nearly a decade to build. During the last report to the Ontario government on our second Strategic Mandate Agreement, an internal audit was performed to quantify the percentage of programs at the university that had clearly articulated learning outcomes for its programs, and could display some evidence of these outcomes being mapped across their program curriculum. As of early 2019, 95.7% of the university's programs had articulated learning outcomes and 80.3% had either matrix-based or narrative-based evidence of a program curriculum map. These statistics are encouraging, but we

recognize that without evidence of assessment of these learning outcomes, the assessment cycle is not completed and this data is not be used, as it should be, to improve program curriculum for students.

Over the past decade, the university has embarked on several projects to advances its learning outcomes assessment practices by providing faculty and units with the tools and resources that they need to do so efficiently and effectively. In 2014-2016, the university participated in a Productivity and Innovation Fund (PIF) project with several other institutions that aimed to embed program level outcomes assessment into our Desire2Learn Brightspace learning management system. The university was able to find several programs across faculties to volunteer for this pilot project, which unfortunately was cancelled due to an inability of the system to provide the necessary data in an efficient or user-friendly way.

More recently, under Dr. Mancuso's leadership, Laurier has been participating in a multi-institutional pilot project within the province that uses the Association of American Colleges & Universities (AACU) [VALUE rubrics](#) to assess learning outcomes. This project, which involves institutional colleagues such as Queen's, Ryerson, and Ottawa, began in early 2020 with the goal of identifying and piloting the use of rubrics in select programs during the 2020-2021 academic year. The COVID-19 pandemic has delayed the progress of this project, but Laurier is still committed to its involvement in it. The university's new Vice-Provost: Teaching and Learning, Mary Wilson, who begins her tenure in August 2020, will be the lead representative for Laurier on this project, which has potential to provide our academic units with an accessible and proven mechanism for assessing competencies and learning outcomes. Similar to the development of learning outcomes themselves, being able to provide units with an accessible entry point to outcomes assessment that is accompanied by examples of good practice is key to procuring engagement in these processes.

As a way of gathering and using indirect learning outcomes assessment data for cyclical reviews, the Quality Assurance Office has been supporting academic units in surveying both current and former students on their perceptions of learning outcomes assessment. The office works with units in developing these questions, and a frequently used survey question related to outcomes assessment would be to present students with each program learning outcomes, followed by three questions related to the degree to which the outcome was taught within the program, assessed within the program, and the confidence they have in their ability to demonstrate the knowledge or skills associated with this outcome. A sample question from a survey conducted this past year has been provided below for illustrative purposes.

Below you will find a list of the Christian Studies and Global Citizenship program learning outcomes. For each outcome, please respond on a scale of 1-5 (1= Strongly Agree / 5=Strongly Disagree) how well, based on your opinion:

a) the outcome was taught within the program;

b) you were evaluated or assessed on the outcome; and

c) you are confident that you have achieved this outcome.

Following each set of questions, the student has an opportunity to provide additional (anonymous) comments to qualify or support their response. In 2019, Laurier acquired a university-wide license to the Qualtrics survey tool, which is used as the platform to administer all of these surveys and provides rich back-end data back to the units using both visualizations and quantitative formats. We believe that the user-friendly presentation of this data encourages units to engage with this student feedback on their experience with the program's learning outcomes.

In addition to the methods described above, there are also several examples of direct and embedded outcomes assessment projects across the institution, such as the use of undergraduate capstone projects, or a master's level thesis or major research project, as indicators of outcomes assessment. These examples have relied upon the willingness and enthusiasm of specific program coordinators or department chairs to engage their faculty in this work. While examples such as these are not yet systematic, they can be pointed to in supporting faculty and units in engaging with and broadening this work across the institution.

Information about ways to assess program learning outcomes is included in the university's cyclical review handbook, with an invitation to work with the Quality Assurance Office and/or Teaching and Learning in developing these mechanisms. Recognizing that one of the ways to achieve progress in the area of learning outcomes assessment is to also leverage the expertise of our external reviewers, a reference to learning outcomes assessment has also been added to the Cyclical Review Process Guide for External Review Committees (Appendix A) requesting that this is a specific area for the reviewers to pay attention to and one where the university welcomes related recommendations. The following statement appears in this resource:

"The university is interested in continuing to develop and improve upon its culture of learning outcomes assessment; recommendations on appropriate and/or improved methods for assessing student learning and/or for collecting evidence to demonstrate student achievement of program learning outcomes are helpful for both the unit and the institution in advancing this culture."

We recognize that there is still much work to be done across the university with regard to moving our widespread engagement with learning outcomes and curriculum mapping into the assessment stage. Programs at the university that are subject to accreditation, such as Business, Education, and Social Work, have made greater progress in these areas than our non-accredited programs. We believe that there is much that our non-accredited programs could learn from these areas, even if the purposes of accreditation differ from those of a cyclical program review. During the coming academic year, the Quality Assurance Office will work with these programs to see if a workshop or other form of learning opportunity could be created and offered for all faculties.

The university feels strongly about the value of an outcomes based program design and evaluation framework. This Audit recommendation reinforces that the university needs to continue to advance its work in this area of learning outcomes assessment. As noted in our opening to this recommendation, moving to this model requires a culture shift that does not occur swiftly in a university environment. We are strongly encouraged, however, by the progress that Laurier has made in the area of learning outcomes and assessment over the past decade, and are confident that momentum in this area will continue to be made in advance of the university's next audit. Key to the success of further implementing this recommendation will be leveraging the expertise of the university's new Vice-Provost: Teaching and Learning in developing more systematic and sustainable strategies for learning outcomes assessment across the institution.

RECOMMENDATION 5: Revise the relevant sections in Policy 2.1. and 2.2. of the University's IQAP to clarify that distinct internal responses to external reviews are required from both the academic unit and the relevant Dean in New Program Proposals and Cyclical Program Reviews (QAF 2.2.8 and 4.2.4 f))

During the 2019-2020 academic year, revisions were made to Policy 2.1 and 2.2, which constitute Laurier's IQAP, to address this recommendation. Specifically, a step was added into each policy to clarify that the decanal response to the external reviewers' report for cyclical program reviews and new programs would be a distinct document and not integrated into the Internal Response, as was done previously for new programs, or into the Final Assessment Report, as has been practice since 2011. This revision was made in consultation with the faculty deans through the Vice-President: Academic's Advisory Council.

As part of this One Year Follow-Up Report, the university is also submitting a revised version of its IQAP, comprised of Policy 2.1 and 2.2 that identifies where these changes have been made in each policy to address this recommendation.

These changes have been implemented into the new program development process, as can be seen in our recent submission to the Quality Council for the proposed Master of Supply Chain Management program, which included a separate decanal response to the external reviewers' report and internal response. For cyclical reviews, this change has been implemented as part of the 2019-2020 review cycle, in which deans were provided with a template for a separate decanal response following completion of the unit's response.

RECOMMENDATION 6: Ensure that students and staff are explicitly engaged in specific ways in the process of New Program Proposals and Cyclical Program Reviews.

Students and staff have always been engaged in both new program development and cyclical review processes. The university appreciates, however, that this involvement may not always be explicit or

apparent to readers of the new program proposal and self-study documents. The following changes have been made to address this recommendation, which we interpret to focus on the explicitness of this involvement.

During the 2019-2020 review cycle, the templates for which were prepared prior to the Audit Report being received, units were encouraged to be more transparent about the involvement of students and staff in their self-studies through feedback provided on draft self-studies through the Quality Assurance Office.

In the 2020-2021 cyclical review self-study template, the following section was added to the beginning of the template to ensure that this information was being formally documented:

CONSULTATION PROCESS AND SELF-STUDY ASSEMBLY

Outline how the information and data for the Self-Study was collected and compiled. Explain who prepared the document, how faculty members were consulted and involved, what contributions were made by administrative staff, and in what ways students were invited to participate.

The draft self-studies for this review cycle are in the process of being finalized, but we believe that this prompt will make the involvement of students and staff in the cyclical review and self-study process more transparent and explicit to readers of the document.

Our new program proposal template already includes the following section:

CONSULTATION PROCESS AND PROPOSAL PREPARATION

Describe the method used for preparing the proposal and all groups or individuals who have contributed in any way to its completion (faculty members, staff members, potential students). Include details on any consultations done with other academic units (internal to Laurier or external) during the preparation of the proposal in Appendix D.

The corresponding sections of our new program proposal handbook and cyclical review handbook provide further guidance as to why it is important to document this information. We believe that embedding these prompts into the new program proposal and self-study templates will help to make the involvement of program stakeholders such as students and staff more transparent and explicit.

From a practice perspective, there are several other ways that the Quality Assurance Office actively promotes the engagement of students and staff in its quality assurance processes. When meeting with department chairs or program coordinators, the unit's administrative staff is always encouraged to attend the meetings as well, so that they are familiar with and understand the timelines and workflow associated with the cyclical review process. Several years ago, new resource documents were prepared by the Quality Assurance Office to provide a sample work breakdown for the work involved in the self-study preparation and cyclical review process. Administrative staff across several units were consulted on this document based on their recent experiences with their unit's cyclical reviews. Throughout the

review cycle, the Quality Assurance Office makes it a practice to include the unit's administrative staff on any correspondence relevant to the review. Administrative staff are also included in the site visit planning process, and are a key actor in organizing the meetings with faculty and students during the site visit. The Quality Assurance Office recognizes the valuable role that administrative staff play in the cyclical review and new program processes, and makes every relevant effort to keep them both informed and engaged through the process.

Deepening student engagement in quality assurance processes has been an area of focus for the university over the past several years. The Quality Assurance Office promotes the use of surveys and focus groups during the self-study preparation phase in order to support units in collecting feedback from current students and alumni, and units are asked to identify and document the feedback that has been collected from students in their self-study. Support is available for survey design, approval through the Office of Research Services, and administration through the university's Qualtrics survey platform. Staff trained in using this system will prepare and send the academic unit a report of their survey results, thus reducing the burden on the unit itself. Focus group facilitation is also available through the Quality Assurance Office, where trained facilitators will meet with students and discuss questions developed by the unit, then prepare a thematic report for the unit on the student feedback. During the 2018-2019 review cycle, 80% of the units conducting reviews engaged their current and/or former students through surveys and focus groups specific to their programming, and in the 2019-2020 review cycle, 100% of the units did so.

It is recognized, however, that survey and focus group participation represents only one form of student engagement in these processes, and there are other opportunities for deeper and more meaningful engagement. During the 2019-2020 academic year, the Quality Assurance Office worked with the Career Development Centre to identify opportunities for students to obtain paid positions working with academic units through quality assurance processes via the Laurier Work-Study and Laurier Work-Study Student Floater Pool programs. These Work-Study positions can either be term length or focused on short-term projects of up to 15 hours. For example, during the 2019-2020 review cycle, this opportunity was shared with academic units undertaking reviews and one department had a student employed to analyze focus group data. A copy of the position profile is listed below.

Position / Task: Focus Group Data Analysis

Description: The purpose of this project position is to assist the Department of X with their upcoming cyclical review by cleaning and analyzing previously collected focus group data. The project is estimated to take 15 hours and will entail reviewing focus group transcripts for accuracy and producing a written thematic analysis from the transcripts. This ideal candidate would have some experience and interest in qualitative data analysis.

Skills Required: Senior student, ideally with some experience in social science qualitative data analysis (e.g. completed a Methods course in a social science discipline).

Students have also been engaged in our quality assurance processes conducting research on new program ideas. For example, during the summer of 2017, the Faculty of Arts hired interns whose work included collecting information for a new program Statement of Intent, and conducting environmental scans of comparable programs.

It is hoped that providing students with paid opportunities to assist a program or department with their new program idea or cyclical review is an initiative that can be expanded over the coming years, and we are actively working to identify projects that students could work on. Opportunities could include collecting or analyzing data, conducting environmental scans or market analyses on new programming opportunities, having a student as a reader of a self-study, or assisting with the collation and formatting of new program and self-study documents.

Students are an integral part of the cyclical review site visit meetings, and during the 2019-2020 review cycle, additional outreach was made by the Quality Assurance Office to students who had agreed to attend these meetings to ensure they felt prepared and comfortable in participating. Emails were sent to the students who had RSVP'ed to site visit meetings to invite questions or conversations ahead of time. To help support the development of knowledge of the curriculum change processes, all members of the Senate Academic Planning Committee, including student representatives, were invited to curriculum change workshops held in July 2020 so that they feel more confident understanding and asking questions about the documents as they come through governance.

Wilfrid Laurier is engaged in a multi-institutional research project on the topic of engaging students in quality assurance processes through a research project that originated within the Council of Ontario Educational Developers (COED). This project includes partners from Ryerson University, Niagara College, and the University of Ottawa, and involved the creation and dissemination of a survey to all Ontario colleges and universities on the ways in which students are currently being engaged in quality assurance processes, with the goal of answering the following research questions:

- In what ways are institutions currently engaging students and alumni in their quality assurance practices? Which of these methods are perceived to be most effective, and why?
- What strong institution-specific practices have been developed that could be shared and emulated or replicated?
- How do institutions attempt to capture a diversity of student voices?
- How is student feedback provided through these processes responded to or followed up on?

After collection of survey data, follow-up interviews were conducted with interested participants to learn more about strong practices that promote students as partners in quality assurance processes. Preliminary project results were presented at the Student Voices in Quality Assurance Symposium held in November 2019, as well as in French at the 3e Journée D'échanges sur L'évaluation de Programmes held at the University of Ottawa in October of 2019. A research project proposal was also prepared and accepted at the Society for Teaching and Learning in Higher Education's annual conference, scheduled to be held in June 2020, but cancelled due to COVID-19. Project partners are now working

on a resource guide that positions research results within the context of the literature on this topic with a goal of completing and sharing this guide back to the COED and Ontario communities within the next year.

Over the past several years, the university has seen a greater interest from academic units in engaging students in quality assurance processes in meaningful and authentic ways that go beyond survey or focus group participation. We hope that the above mentioned examples provide evidence of a growing institutional commitment and culture in both research and practice to further exploring and deepening the valuable role that students can play in our quality assurance processes.

RECOMMENDATION 7: Ensure that when multiple programs are reviewed concurrently, the quality of each academic program is addressed explicitly, as set out in the evaluation criteria (QAF 4.2.2).

We recognize the importance of this recommendation and acknowledge that in this specific review in question, the cyclical review of the Health Studies programs in 2014-2015, this was not particularly well done. While we believe that this concern and subsequent recommendation related to it represent an anomaly in the approach taken to our cyclical reviews of academic units of multiple programs, it is an issue that we want to prevent happening in the future.

The implementation of this recommendation has and will continue to take place through practice. At the beginning of each review cycle, the Quality Assurance Office sends a letter to each academic unit starting a review on behalf of the Vice-Provost: Teaching and Learning. In addition to providing an overview of the process, these letters itemize all of the unit's programs that are included in the review, so that it is clear that it is the individual programs, rather than the unit itself, that is the subject of the review. This message is reinforced in cyclical review orientation meetings held at the beginning of each review cycle.

Language has been built into the cyclical review self-study template and handbook to ensure that academic units understand that each program should be reviewed as a separate entity. Below, for example, are several excerpts from the prompts in our self-study template that aim to clarify and reinforce this.

“Provide a brief background of the program(s) under review and explain its purpose within the institution. Include a list of all programs offered, including major, combined degree, collaborative or joint programs, specializations, minors, options, diploma, or certificate programs.”

“Identify the learning outcomes for each program under review.”

“Outline the structure of each program (e.g. required courses, sequencing of courses, streams or fields a student might select) and explain the rationale for curriculum organization: how courses are

structured and sequenced in such a way that students build on prior learning in order to meet program learning outcomes.”

In addition to these prompts in the self-study template, the handbook that has been created as a resource for units working through the cyclical review process also uses language throughout that stresses the importance of reviewing each program separately.

Oversight to ensure that each program is being discussed and reviewed separately is also provided through the feedback stage on the draft self-study that the university has built into its cyclical review process. Once an academic unit has completed a draft of its self-study, it is submitted to the Quality Assurance Office for feedback, and is subsequently also reviewed by the relevant faculty deans. This recommendation coming out of the Audit has reinforced the need for all readers of the draft self-study to pay attention to areas where programs are not being discussed separately, which can be addressed through revisions made into the final draft.

We believe that the aforementioned process steps satisfy this recommendation. Although we consider that this recommendation does not relate to a systemic issue across the institution, it was an excellent reminder to ensure that it is clear to academic units and to the readers and reviewers of the self-study that each program should be treated as a distinct entity throughout the review process.

RESPONSE TO SUGGESTIONS MADE BY AUDIT COMMITTEE

SUGGESTION 1: Consider ensuring that the IP and subsequent monitoring reports be provided to incoming Chairs and Deans, with appropriate orientation added regarding this aspect of their role, to ensure continuity of action.

This is an excellent suggestion which has partially already been fulfilled through existing practice, but could also be strengthened. At present, when a new faculty dean is hired, the Quality Assurance Office arranges an orientation meeting with them early in their tenure. Resource documents on “Decanal Roles in Cyclical Review” and “Decanal Roles in New Program Development” have been created that identify at what stages of each process there is formal involvement from the dean in that role. These documents have been refined over the years based on changes to process or feedback, and with a fairly high turnover in our decanal roles, have been utilized many times.

We have found that most academic units, through the diligence of their support staff, have maintained excellent records for their previous cyclical reviews. As part of the preparation process for an upcoming review, the Quality Assurance Office has established a practice of putting all previous review documents into a zip file and sending them to the current program coordinator or department chair, approximately 18 months prior to the self-study due date. A useful extension of this practice could be to invite new program or department leaders to an orientation meeting when these roles change to explain where their unit is within the review cycle (e.g. how many years out, what work could be done

early) and answer any questions about the previous review documents or upcoming reports. This has already taken place on an ad hoc basis at the request of a new program coordinator or department chair. The collegial culture that has been established around quality assurance at the institution suggests that a more formal and systematic approach to these orientation meetings would be welcomed, and this idea will be piloted during the 2020-2021 academic year.

SUGGESTION 2: Consider reviewing the practices of the Program Review Sub- Committee in determining the appropriateness of the FAR and IP in order to ensure consistency of approach to the outcome of all CPRs.

The Program Review Sub-Committee, a sub-committee of the university's Senate Academic Planning Committee, was created at the time of IQAP implementation in 2011-2012 in order to develop a group of faculty and administrators with expertise specific to quality assurance. This group was identified in the Best Practice section of our Audit Report, where it was noted:

“The Sub-Committee, tasked with reviewing in detail the documentation from the units and with appointing the external reviewers, obviously takes its work seriously, and acts with commitment and dedication. In bringing together a large group of faculty and staff from across the institution, its function is not only one of providing guidance and approval at a critical stage in the process, but also one of educating the institution about quality assurance (p.9)”.

Faculty and decanal representatives for this committee are identified through the Provost's Office and Quality Assurance Office; those considered have existing expertise in quality assurance processes, an affinity for collaborative work, and strong reputations at the institution. Given this criteria for nomination, it is not surprising, therefore, that those who serve on the Program Review Sub-Committee do so with commitment and dedication. Members can serve two three-year terms on the committee, with many choosing to complete a second term, which means that the committee always has members with foundational expertise. New members are provided with an orientation by the Vice-Provost: Teaching and Learning and the Manager: Academic Program Development and Review, and the first meeting of each academic year includes a review of the committee's roles in the university's quality assurance processes.

Suggestion #2 relates to the documentation provided for the 2017-2018 cyclical review of the PhD in Global Governance, in which the committee sent back the Final Assessment Report to the Dean of the Faculty of Graduate and Postdoctoral Studies because there was inconsistency between the decanal responses to the reviewers' recommendations and those that appeared in the Implementation Plan. The narrative that accompanies this suggestion in the Audit Report notes that, “it was not clear if this Committee regularly applied this rigorous oversight in all cases” (p.10). We feel confident in saying that this level of rigour and oversight is applied consistently to the review of all Final Assessment Reports by the Program Review Sub-Committee. The return of the PhD in Global Governance is not an isolated

example of circumstances in which the committee asked the deans who authored the report to add additional information or detail to their responses to the reviewers' recommendations.

A revision was made to our IQAP (Policy 2.1) as part of the follow-up to the Audit aimed at clarifying the role of the Program Review Sub-Committee in reviewing the Final Assessment Reports. The new language (bolded, below) in this section of Policy 2.1 reads:

“The Program Review Sub-Committee will review the Final Assessment Report to ensure it meets and includes all criteria outlined in Section I, then submit the Final Assessment Report to the Senate Academic Planning Committee for approval or further modification, as necessary (p. 8).”

As included in our response to Recommendation #1, the Program Review Sub-Committee is an important level of oversight in our cyclical review process for ensuring that there is clarity and transparency provided in the Final Assessment Reports for why recommendations are included or excluded from the Implementation Plan. As noted by the auditors, this group has consistently performed this function with commitment and dedication, and the university has no concerns about their ability to continue to do so in the future.

SUGGESTION 3: Consider developing a sign-off element within the current tracking system for written documentation to ensure all sign-offs occur at each step of the relevant process.

This is an element of our new program development and cyclical review processes that has evolved over the past decade. The majority of our key quality assurance documents, such as External Reviewers' Reports, Decanal Responses, and Final Assessment Reports now include electronic signatures of all those who contributed to the documents, as evidence of formal sign-off on it.

For a five-year period, the university invested in an online tracking system for its quality assurance processes created by an external provider that proved too complex and onerous, as well as financially viable, to maintain. This system pre-dates the inclusion of signatures on key quality assurance documents, and the goal was to use this system to “push” documents and processes forward through the use of electronic approval and sign-off procedures. Significant time and effort was invested in designing this system, but user uptake outside of the Quality Assurance Office was challenging. Simply put, if a dean or senior administrator can confirm their approval of a document through email and/or signature, asking them to sign on to a different system that they may have only occasional use to visit (e.g. if a particular dean only had one review within their faculty in that cycle) was not deemed to be an efficient use of their time. The university eventually discontinued its contract for this system and maintained its previous system instead, which involves the use of a shared drive accessible to those who need access to key documents.

In addition to using electronic signatures as sign-off on necessary documents, relevant email communication is also saved in the respective program and review cycle folder. This system proved

effective leading up to the Audit as there were relatively few instances where an email communication could not be provided to the auditors. We gained additional insight through the Audit process about what types of communication should be saved for future use, and have enhanced this practice since the Audit took place.

SUGGESTION 4: Consider providing more detail and/or training on the role of the Internal Reviewer.

We appreciate this suggestion and believe that there is more that we can be doing to ensure that the internal reviewer understands their role in the review process. We have started to address this through the creation of a “Cyclical Review Process Guide for External Review Committees” (see Appendix A), which is described in detail below. One of the points made in this guide is to clarify the role of the internal reviewer in the writing of the report, as this had been a question that several internal reviewers had asked over the past several years.

We maintain open and frequent communication with our review committees in the weeks leading up to the site visit, always inviting questions and discussion if anything is unclear. We believe that Suggestion #4 could be incorporated further by setting up a required (or encouraged) meeting between the Vice-Provost: Teaching and Learning and/or Quality Assurance Office and the internal reviewer close to the review as a more formal opportunity to discuss their role and answer any questions that they might have about it or the review process. This idea will be piloted during the upcoming 2021-2022 review cycle external reviews.

SUGGESTION 5: Consider putting a protocol in place for dealing with Reviewers’ Reports that are incomplete and/or do not satisfactorily address all of the evaluation criteria for a review.

We recognize the importance of this suggestion and of ensuring that external reviewers’ reports satisfactorily address all of the evaluation criteria included in the report template. We feel that we are fortunate in that this has rarely been an issue over the past decade, and believe that this is because of the proactive steps that the university takes to ensure that it does not.

When external review committee’s receive the review documents, one of the resources provided to them in advance of the site visit is a “Cyclical Review Process Guide for External Review Committees” (see Appendix A). This resource was developed to address common questions such as the role of the internal reviewer, the importance of ensuring that comments are provided in all sections of the report, and information about the subsequent stages following submission of their report. Included in this resource is an invitation to submit a draft of the report to the Quality Assurance Office for review in advance of final submission. Many review committees take advantage of this offer, so there is an opportunity to review the report for completeness prior to official submission.

All external review committee reports are submitted to the Quality Assurance Office. When a report is submitted, it is reviewed for completion. If there are evaluation criteria have not been addressed, the Quality Assurance Office returns it to the committee with an explanation of where additional information is needed. There has never been an instance where a review committee has not demonstrated a collegial willingness to add to or revise their report in response to this request.

The above mentioned steps in practice and process are the ways in which that the university is currently ensuring that reviewers' reports satisfactorily address all required evaluation criteria in the report template provided to them. An additional mechanism for upholding our existing practices would be to add a statement into our quality assurance policies that identifies what steps would be taken if a report was determined to be incomplete. We believe that there is value in codifying practice into policy, and will therefore consider this addition during the next set of revisions to our IQAP.

We hope that this report demonstrates that the university has engaged authentically with the valuable recommendations and suggestions made by the Audit Committee, and we believe that the changes described herein will result in clearer and more robust quality assurance policies and practices. The university takes great pride in our quality assurance processes and the insights of the Audit Committee were useful in both reinforcing the strong practices that should be continued, as well as drawing attention to areas that could benefit from additional clarity and transparency.

Sincerely,

A handwritten signature in black ink, appearing to read "Maureen Mancuso". The signature is fluid and cursive, with a small flourish at the end.

Dr. Maureen Mancuso
Interim Provost and Vice-President: Academic

Cyclical Review Process Guide for External Review Committees

INTRODUCTION

This document has been prepared by Laurier's Quality Assurance Office to assist external reviewers who are coming to Laurier to understand their role in the cyclical review process and how their recommendations and report are followed up on by the academic unit and the university.

EXTERNAL REVIEWERS' REPORT TEMPLATE

The template that external review committees are asked to complete is based on a model provided by the Ontario Universities Council on Quality Assurance (Quality Council). The sections correspond to both the required [provincial evaluation criteria](#) and Laurier's self-study sections. It is important to the university that the review committee provide **feedback** on all sections of the report, although **recommendations** for each section are only necessary where relevant (i.e. it is not required to have recommendations for each section).

FOLLOW-UP PROCESSES

Once the External Reviewers' Report has been submitted, the academic unit will prepare a Unit Response that outlines any clarifications or corrections to the report, and provides a response to each recommendation made by the review committee. The unit will identify whether they agree or disagree with each recommendation (and why), and outline any actions that already have or can/will be taken toward its implementation. The unit will also indicate when a recommendation (e.g. additional faculty members) is outside the scope of their own decision-making or the cyclical review process.

Following the Unit Response, a Decanal Response to the Reviewers' Report and Unit Response are prepared by all of the deans involved in the unit's programming. A decanal response to each recommendation is written by the relevant dean(s), along with an identification of the strengths of the unit and opportunities for enhancement. It is also the dean's role to prioritize the recommendations in an Implementation Plan that accompanies their report. This Implementation Plan will prioritize the recommendations to be implemented, identify the individuals or groups responsible for implementation, and the target timelines for completion.

Lastly, a Final Assessment Report (FAR) is prepared by the Quality Assurance Office. This public report summarizes the review process, includes the executive response and recommendations the Reviewers' Report, along with a full or summarized version of the Unit Response and Decanal Response(s) to the Reviewers' Report, and the Implementation Plan prepared by the dean(s). Once completed, the Final Assessment Report is approved by the Program Review Sub-Committee and Senate Academic Planning Committee, as well as submitted to Senate and the Quality Council for information. The FAR, and subsequent Implementation Reports are posted to the university's Cyclical Review [Public Accountability](#) webpage.

IMPLEMENTATION OF RECOMMENDATIONS

The unit will submit an Implementation Report, outlining progress made on the implementation of recommendations prioritized, to the dean(s) and Program Review Sub-Committee two years following submission of the FAR to Senate. The Program Review Sub-Committee will review and comment on the Implementation Report, and will determine if further reports are required.

TIPS FOR COMPLETING THE REPORT

- It is expected that the external reviewers write the majority of the report, with the internal reviewer playing more of a review/feedback role than a primary author. This is, of course, at the discretion of each review committee.
- It is helpful, and preferred, if recommendations are numbered sequentially rather than according to section (i.e. 2, 3, 4 rather than 2c1, 2G2). This assists with the completion of the Unit and Decanal Response. Recommendations listed at the end of the report (which are extracted for the Unit and Decanal Response) should be worded and numbered consistently with those found throughout the document.
- It is respectfully requested that the review committee refrain from making any adjustments to the report template, so that all reports can be formatted consistently.
- Although recommendations may span multiple categories or evaluation criteria (e.g. Student Quality Indicators and Resources for all Programs), if the recommendation is the same in its intent, it is helpful to include it only once rather than multiple times, as the unit, and dean(s), are asked to respond to each recommendation.
- Review committees should keep in mind that hiring and staffing decisions are not made based on the cyclical review process. Recommendations related to additional resources may not be prioritized by the dean(s) in their response or in the Implementation Plan.
- The university is interested in continuing to develop and improve upon its culture of learning outcomes assessment; recommendations on appropriate and/or improved methods for assessing student learning and/or for collecting evidence to demonstrate student achievement of program learning outcomes are helpful for both the unit and the institution in advancing this culture.
- Review committees are welcome to submit a draft of their report to the Quality Assurance Office for feedback before submission, if they wish to do so.
- Report submissions are preferred in Word (rather than PDF format) whenever possible, so that minor formatting may be done prior to sending out the report in PDF.

CONCLUSION

We hope that this document is helpful to external review committees in understanding the role of their report in the overall cyclical review process, as well as the steps that will take place following the report. Any suggestions for additions or revisions to this document, and/or questions about the report or process, may be directed to the Quality Assurance Office.



2.1 Cyclical Review of Undergraduate and Graduate Academic Programs

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Approving Authority:	Senate
Original Approval Date:	April 1, 1997
Date of Most Recent Review/Revision:	February 13, 2018 (Senate approval) March 16, 2018 (OUCQA re-ratification)
Office of Accountability:	Vice-President: Academic and Provost
Administrative Responsibility:	Quality Assurance Office

I. Objectives

A rigorous and transparent system of academic program review ensures quality and demonstrates accountability to the public and to current and prospective students. It also provides a sound basis for program enhancement and improvement. Within the university's commitment to the principle of academic freedom, reviews should be objective, analytical and constructive. Components of the review process have been mandated by the Ontario Universities Council on Quality Assurance Council (Quality Council) of the Council of Ontario Universities. Wilfrid Laurier University's Institutional Quality Assurance Procedures (IQAP), comprising this policy and [policy 2.2](#), were ratified by the Quality Council on June 20, 2011. The Institutional Quality Assurance Procedures are subject to approval upon revision and will be audited by the Quality Council on an eight-year cycle.

As set out in the [Quality Assurance Framework](#), the review process is designed to evaluate the program's objectives, requirements, structure, content, and resources as described in Section C of this policy. This policy pertains to the review of the following programs at Wilfrid Laurier University and its federated and affiliated colleges:

1. undergraduate degree, general and honours
2. graduate degree and diploma
3. collaborative and joint programs

II. Institutional Quality Assurance Procedures

A. Responsibilities

- The administration of the review process for all graduate and undergraduate degree programs and diploma programs is the responsibility of the [Provost and Vice-President: Academic](#), who is the sole contact between the institution and the Quality Council.
- The development of review documents for all undergraduate and graduate programs is overseen by the [Quality Assurance Office](#) in conjunction with the ~~associate vice-president: teaching and learning~~ [Vice-Provost: Teaching and Learning](#).
- The [Program Review Sub-Committee](#) of the [Senate Academic Planning Committee](#), supported by the Quality Assurance Office, is responsible for managing the review process.
- The Senate Academic Planning Committee is responsible for approving the recommendations of the Program Review Sub-Committee and presenting them to Senate.

Wherever possible, programs that exist at the graduate and undergraduate level in the same discipline, department, or unit will be reviewed together. Similarly, programs that are offered at more than one campus will be reviewed together. The review schedule for all programs can be found at on the Quality Assurance Office [website](#) and is reviewed and updated annually. All programs must be reviewed within eight years of their initial approval or last review.



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Accredited Programs

In the case of programs which must also receive review by a professional accreditation body (e.g., programs in Business, Education, Music Therapy, Social Work, and Theology), these review documents may replace those prescribed by this policy if all information required by the policy is contained or appended. The Program Review Sub-Committee will make a determination of the suitability of accreditation documents for the purposes of program review.

Joint Programs with other Institutions

In the case of joint programs with other postsecondary institutions, the participating institutions will agree on a common review schedule. Cyclical reviews will be conducted according to the IQAPs of the institution administering the review (usually the institution at which the current director holds appointment).

The following principles shall apply to reviews of joint programs:

- The Self-Study will clearly explain how input was received from faculty, staff and students at each partner institution. There will be a single Self-Study.
- The site visit will involve all partner institutions and preferably all sites. Reviewers will consult faculty, staff, and students at each partner institution, preferably in person.
- Feedback on the reviewers' report will be solicited from participating units at each partner institution, including the deans.
- One Final Assessment Report, with input and agreement from each partner, will be written and submitted through the appropriate governance processes at each institution.
- The Final Assessment Report will be posted on the university website of each partner.
- Partner institutions will agree on an appropriate monitoring process for the Implementation Plan.
- The Final Assessment Report will be submitted to the Quality Council by all partners.

In cases where degree and/or diploma programs are offered jointly or as dual credential programs with non-IQAP institutions (e.g., colleges of applied arts and technology or institutes of technology and advanced learning), Wilfrid Laurier University will take the lead in the review process; all criteria and principles described below shall pertain as relevant.

B. Steps in the Review Process for Undergraduate Degree and Graduate Degree and Diploma Programs (see also, Appendix A: Flow Chart for Cyclical Program Reviews)

1. A self-study will be prepared by [the academic unit, a program's curriculum committee or like body](#) and include consultation with students and other relevant communities. These communities may include academic departments or programs within the university, as well as stakeholders in the broader community, including employers and professional associations. One author whose responsibility it is to assemble all material must be identified and recorded on the document. Typically, this author will be a chair, program coordinator, or associate dean (in non-departmentalized faculties).
2. A draft of the Self-Study will be submitted for review and comment to the Quality Assurance Office and relevant Faculty dean(s), in the case of undergraduate programs. In the case of graduate programs, the Self-Study draft will be submitted to the Quality Assurance Office, Faculty dean and dean of Graduate and Postdoctoral Studies. Where both undergraduate and graduate degrees are being reviewed, the Quality Assurance Office and all relevant deans will receive the draft Self-Study.



3. After receiving feedback from the Quality Assurance Office and the dean(s), the program director, coordinator, chair, or associate dean will [revise the Self-Study in response to the feedback](#).

~~4. submit the Self-Study to T~~the Program Review Sub-Committee ~~who~~ will select a review committee (*in camera*) from the nominees recommended by the program.

54. The Quality Assurance Office will contact the review committee, schedule the site visit, and submit the Self-Study for appraisal.

65. Following its visit to the university, the review committee will write a report summarizing the strengths of the program(s) and note any concerns or recommendations for change.

76. The ~~academic unit program~~ will write a response to the report of the external review committee.

~~8. The relevant dean(s) will prepare a response to the reviewers' report and the unit's response, including an implementation plan that identifies which recommendations made by the review committee will be prioritized.~~

~~9. A Final Assessment Report, consisting of a summary of the review process and relevant documents (self-study, reviewers' report, unit response, decanal response), as well as the implementation plan, will be prepared by the Quality Assurance Office and reviewed and approved by the vice-president: academic and the associate vice-president: teaching and learning.~~

~~7. In consultation with the vice-president: academic and the associate vice-president: teaching and learning, the dean(s) will prepare a Final Assessment Report, consisting of a summary of the review documents (self-study, reviewers' report, unit response) as well as a decanal response and implementation plan, which identifies the recommendations made by the review committee that will be prioritized.~~

~~108. The Program Review Sub-Committee will review the Final Assessment Report for adherence to criteria outlined in Section I (below) and submit it to the Senate Academic Planning Committee with a recommendation for final approval.~~

119. The Final Assessment Report will then be submitted to Senate, ~~the Board of Governors~~, and the Quality Council for information.

Commented [SH1]: To respond to Audit: "RECOMMENDATION 5: Revise the relevant sections in Policy 2.1. and 2.2. of the University's IQAP to clarify that distinct internal responses to external reviews are required from both the academic unit and the relevant Dean in New Program Proposals and Cyclical Program Reviews (QAF 2.2.8 and 4.2.4 f)"

Commented [SH2]: To clarify the role of the PRS in reviewing the Final Assessment Report.

C. Criteria for Evaluating the Self-Study

1. Background

The Self-Study provides an opportunity for the unit to engage in serious self-reflection through the analysis of the strengths and areas for improvement of all aspects of the program(s) under review. As such, the report is intended to be contemplative and analytical, not defensive, evasive, or merely descriptive. The opportunity should be taken for a probing examination of the academic character of the program and for exploring innovative alternatives.

The Self-Study consists of three volumes: the Self-Study report, full faculty curricula vitae, and proposed external reviewers. The report should make clear how all data were collected, in what form, and by whom. Only data relating to the period under review should be included, i.e., normally the previous eight (8) years. Program faculty, staff, students, and (where applicable) external stakeholders and professional accrediting bodies should participate in the self-study process and have their contributions acknowledged. For professional programs, feedback from employers and professional associations should be included in the Self-Study as an appendix.



2.1 Cyclical Review of Undergraduate and Graduate Academic Programs

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1. Background

- a. Brief history and background of the program(s) under review and their purpose within the institution. Include a list of all programs offered, including those with majors, combined degrees, minors, options, diplomas, or certificates. For graduate reviews, identify any fields within the program.
- b. Actions that have been taken based on recommendations from the previous review.
- c. For professional programs, a summary of any recent accreditation reports.
- d. Questions or issues that the unit would like the review committee to provide feedback on to enhance the quality and viability of the program.

2. Objectives of the Program

Learning outcomes are foundational to making sound decisions about the quality and alignment of individual programs. More specifically, they provide the basis to communicate what the program is about; that is, the kinds of knowledge, experiences, and skills students will have ideally developed upon successful completion of the program. Program level learning outcomes also inform the identification and development of courses (core, restricted/open electives), as well as the feedback and assessment plan(s) used to evaluate the effectiveness of the program overall and the experience of students.

- a. Consistency with Wilfrid Laurier University's [mission, vision, and values](#) and [Strategic Academic Plan](#).
- b. Clarity and appropriateness of the program's requirements and associated program-level learning outcomes addressing Laurier's [undergraduate](#) (UDLEs) or [graduate](#) (GDLEs) degree level expectations.
- c. For professional programs, consistency of the program level outcomes with provincial, national and professional standards.

3. Admission Requirements

- a. Appropriateness of the program's admission requirements for the learning outcomes established for completion of the program, including adherence to the university's minimum requirements (consult the undergraduate and graduate [academic calendars](#) for minimum university requirements).
- b. Explanation of alternative requirements, if any, for admission into a graduate, second-entry or undergraduate program, including minimum grade point average, additional languages, portfolios or creative work, along with how the program recognizes prior work or learning experience.

4. Curriculum

- a. Appropriateness of the program's structure and curriculum to meet its learning outcomes, ^{and} whether all program courses listed in the calendar are necessary to meet curricular objectives, and whether any new courses are needed to reflect recent developments in the discipline/profession.
- b. How the curriculum reflects the current state of the discipline, area of study or field.
- c. Average class size. For graduate programs, (i) how the program meets the Quality Council requirements that two-thirds of required coursework consists of graduate-level courses; (ii) evidence that students' time to completion is both monitored and managed in relation to the program's defined length and program requirements.
- d. Modes of delivery used within the program and how these methods are appropriate and effective in meeting the program's learning outcomes.
- e. Amount of service teaching for other academic units and any advantages / disadvantages of this activity.
- f. Ways in which the unit incorporates High Impact Practices into its curriculum.
- g. Innovation or creativity in the content and/or delivery of the program relative or comparable to other such programs.
- h. For graduate programs, an explanation of the purpose of fields and how they are staffed and supported appropriately.
- i. For graduate programs, the inclusion of professional or transferable skills for students.
- j. Recent or ongoing significant curriculum changes that have been made, or will be made, to meet program- and course-level learning outcomes along with strategies and a proposed schedule for implementing any future changes.

5. Assessment Methodologies



2.1 Cyclical Review of Undergraduate and Graduate Academic Programs

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- a. Methods for assessing student achievement of the defined program- and course-level learning outcomes and degree level expectations.
- b. Appropriateness and effectiveness of the means of assessment, especially in the students' final year of the program, in clearly demonstrating achievement of the program-level learning outcomes and Laurier's Degree Level Expectations.

6. Resources

- a. Appropriateness and effectiveness of the academic unit's use of existing human, physical and financial resources in delivering the program.
- b. Description of the administrative and decision-making structure/process within the unit (e.g., titles of all standing or ad hoc committees, how members are appointed/elected, the frequency of meetings) and an assessment of the effectiveness of the current structure and process.
- c. Academic services that contribute directly to the academic quality of each program under review and to student success, including library support, information technology support, laboratory access, services offered through Centre for Student Success, Centre for Teaching Innovation and Excellence, Faculty of Graduate and Postdoctoral Studies, Co-operative Education, and academic advising.
- d. Faculty research funding.

7. Quality Indicators

- a. Faculty:
 - i) Appropriateness of collective faculty expertise to sustain the program, promote innovation, and foster an appropriate intellectual climate.
 - ii) The type and amount of professional service provided to the profession, discipline, or community.
 - iii) Quality and quantity of scholarly and creative activity within the program, including involvement by undergraduate students where applicable.
 - iv) Qualifications and appointment status of faculty who provided instruction and supervision, including the qualifications of part-time faculty. Numbers of full time, limited term appointment and contract academic staff members contributing to the program in each year. Evidence of how teaching and supervisory loads were distributed and the criteria used to determine this distribution.
 - v) For graduate programs, the numbers of faculty who have graduate faculty status by type of [status](#).
- b. Undergraduate Students:
 - i) Numbers of applications and registrations, compared to targets (if applicable).
 - ii) Average GPA of students entering from secondary school (for first undergraduate degree programs only) or from any previous post-secondary degrees (if applicable).
 - iii) Percentage of students obtaining the necessary GPA, or other requirements, to progress through the program and attrition rates per year.
 - iv) Number of students graduating from the program each year and their average GPA at program completion, as well as the percentage of graduating students who have completed the program within the normal number of years (e.g., four years for an honours program; one or two years for a second degree or master's program; four years for a doctoral program).
 - v) Average number of honours, general, and graduate students in the program per year, by level and any changes in unit enrolment patterns during the time period under review.
 - vi) Number of international students in the program per year and the resources available to support their academic success.
 - vii) Overview of academic awards available to students.
 - viii) Summary of course evaluations and exit surveys, where permitted by the Collective Agreement and the Freedom of Information and Protection of Privacy Act (FIPPA).
 - ix) Employment options and career successes 6 months and 2 years after graduation, an estimate of the numbers applying to graduate school and the rate of successful admissions, an estimate of number working in relevant "skills matched" fields.
 - x) Alumni reports of satisfaction with the program. (Programs should consult [Policy 8.2 Ethics Approval for Administrative Research Using Human Subjects](#) prior to surveying alumni.)
- c. Graduate Students:
 - i) Numbers of applications and registrations, compared to targets.



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- ii) Graduate student flowthrough data. How students' time to completion is both monitored and managed in relation to the program's defined length and program requirements.
- iii) Number of degrees granted.
- iv) Number of students completing a Master's degree by coursework, major research paper or thesis.
- v) Student enrolment patterns and predicted future trends.
- vi) Number of international students in the program per year and the resources available to support their academic success.
- vii) Evidence that financial assistance for students has been sufficient to ensure adequate quality and numbers of students.
- viii) Course evaluations and summarized exit surveys, where permitted by the Collective Agreement and the Freedom of Information and Protection of Privacy Act (FIPPA).
- ix) An estimate of the number of graduates working on a subsequent degree or postdoctoral fellowship; an estimate of the number employed in relevant "skills matched" fields.
- x) Alumni reports of satisfaction with the program. (Programs should consult [Policy 8.2 Ethics Approval for Administrative Research Using Human Subjects](#) prior to surveying alumni.

9. Conclusion

- a) Strategic plan for future directions and aspirations for the program, including barriers to reaching these objectives.
- b) Concerns or problems that the unit and/or university should address to enhance the quality or viability of the program, as well as recommendations for action to improve the quality of the program or its administration.
- c) Summary and conclusion to the Self-Study, articulating the unit's strengths and weaknesses as well as opportunities for enhancing the quality of the teaching and learning environment.

D. Manual for Conduct of Self-Study Handbook

The university will prepare a detailed [handbook manual](#) for the conduct of cyclical program reviews. The manual will provide templates for the self-study and reports, ~~and a schedule for review of all undergraduate and graduate programs~~. In addition, the manual will provide guidance on the benefits and conduct of rigorous, transparent, objective, analytical, and constructive self-studies; establish criteria for nomination and selection of arm's-length external peer reviewers; and identify responsibilities for the collection, aggregation and distribution of institutional data and outcome measures required for self-studies.

E. External Reviewers

The academic unit(s) responsible for the program under review will submit to the Quality Assurance Office the names and contact information of and rationale for those they wish to nominate as reviewers, as specified here:

- at least four tenured associate or full professors at Laurier from outside the academic unit who are recognized as excellent teachers and scholars, and who are known for their objectivity and judgment; and
- at least eight associate or full professors from other North American universities who are within the discipline. Normally, four of these will be from universities [within Ontario and four from outside Ontario](#). These nominees ~~should have academic administrative experience and also must be recognized as excellent teachers and scholars, and at least two of them must have academic administrative experience~~. These nominees must not have any past or current formal affiliation with the unit or with members of the unit (e.g., PhD supervisor, co-author) and must be in compliance with [the University's Policy 8.1 Conflict of Interest Policy](#). The nominees may be grouped into categories reflecting different areas or fields within the discipline, with the request that at least one member from each category be selected.
- if appropriate for the program being reviewed, a list of at least four representatives of industry, the professions, and practical training programs.



2.1 Cyclical Review of Undergraduate and Graduate Academic Programs

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In keeping with the requirement that reviewers must be at arm's-length, the academic unit(s) will not contact the reviewers directly but will submit the names of prospective reviewers to the Quality Assurance Office. The Quality Assurance Office will contact the nominees to determine their interest and availability and collect the information to complete the Volume III template.

For reviews of joint and collaborative programs, the university will consult with the office of the vice-president: academic or equivalent, at partner institutions.

From the lists of nominees, the Program Review Sub-Committee will select one internal reviewer from outside the program's academic unit(s) and one external reviewer for an undergraduate program or two such reviewers if the review is of a graduate program or of both a graduate and undergraduate program. If the Sub-Committee is not satisfied with the appropriateness of the nominees, they will request additional names from the academic unit. The Sub-Committee shall submit the list of reviewers to the Senate Academic Planning Committee for information. Following approval by the Program Review Sub-Committee, the [Quality Assurance Office associate vice-president: teaching and learning](#) will contact the nominees to confirm their role and to schedule the site visit.

It is the responsibility of the associate vice-president: teaching and learning to ensure that the reviewers:

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

These expectations will be conveyed to the reviewers in written instructions and face-to-face meetings with the relevant dean(s) and the provost and vice-president: academic or [associate vice-president vice-provost: teaching and learning](#). The provost and vice-president: academic or the [associate vice-provost/president: teaching and learning](#) will also be responsible for providing the reviewers with explicit instructions that the program is to be evaluated against the criteria listed in C above.

F. The Review and Report

The internal and external reviewers will consider the Self-Study and may request additional information (programs must inform the Quality Assurance Office of any additional information provided to the reviewers). The reviewers will spend one to two days visiting the academic unit(s) under review. They will meet with the provost and vice-president: academic; [associate vice-provost/president: teaching and learning](#); faculty, staff, and undergraduate and graduate students within the unit; the deans of the relevant Faculties; the chair/director/coordinator of the unit under review and of any collaborating units (for interdepartmental programs); the university librarian; and any other members of the university community who can provide needed information. The report [of the external review committee](#) must be submitted to the [Quality Assurance Office Program Review Sub-Committee](#) within four weeks of the site visit. In the written report, the reviewers should comment on compliance with all evaluation criteria and respond to any questions posed in the Self-Study. This report should also contain an executive summary suitable for inclusion in the Final Assessment Report and posting on the university's [Cyclical Review Public Accountability Quality Assurance Office website](#).

G. Response of the Unit to the Report of the Review Committee

Upon receipt of the reviewers' report, the [Quality Assurance Office chair of the Program Review Sub-Committee](#) will distribute copies to the provost and vice-president: academic, dean(s) and chairperson(s)/coordinator(s)/associate dean(s) of the academic unit(s) under review. Within one month of receiving the report, the unit(s) [will prepare must submit](#) a written response [to the Sub-Committee](#) which includes:

- clarifications or corrections of statements in the report;



b. answers to all questions and responses to all recommendations made by the reviewers.

H. Response of the Dean(s) to the External Reviewers' Report and Unit Response

Following completion of the Unit Response, the dean(s) of the relevant Faculties will prepare a decanal response that responds to the recommendations made by the review committee in their report as well as the unit's response to those recommendations. The dean(s) will also prepare the Implementation Plan, which identifies those recommendations prioritized for implementation and who is responsible for implementing the recommendation. The decanal response will also provide an explanation for any recommendations that are not prioritized for implementation in the Plan. This Implementation Plan will form part of the Final Assessment Report.

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Commented [SH3]: To respond to Audit: "RECOMMENDATION 5: Revise the relevant sections in Policy 2.1. and 2.2. of the University's IQAP to clarify that distinct internal responses to external reviews are required from both the academic unit and the relevant Dean in New Program Proposals and Cyclical Program Reviews (QAF 2.2.8 and 4.2.4 f))"

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I. Final Assessment Report

In consultation with the provost and vice-president: academic and the ~~associate~~ vice-provost/resident: teaching and learning, the dean(s) will prepare a [Final Assessment Report](#), to be reviewed by the Program Review Sub-Committee. The Final Assessment Report will:

- a. Include an executive summary of the review process;
- b. Identify significant strengths of the program;
- c. Identify opportunities for program improvement and enhancement;
- d. Explain which recommendations from the reviewers' report will be approved and why;
- e. Prioritize recommendations approved for implementation;
- f. If necessary, contain a confidential section where personnel issues may be addressed;
- g. Establish an implementation plan that identifies for each recommendation:
 - Who will be responsible for approving the recommendation;
 - Who will be responsible for acting on the recommendation;
 - Any changes in organization, policy or governance, at any level, that would be necessary to meet the recommendation;
 - The resources, financial and otherwise, that would be provided in supporting the implementation of recommendation;
 - Who will be responsible for providing resources made necessary by the recommendation;
 - A proposed timeline for the implementation of all recommendation.

Only recommendations made in the Reviewers' Report should be included in the Final Assessment Report.

J. Final Approval and Reporting Requirements

1. The Program Review Sub-Committee will [review the Final Assessment Report to ensure it meets and includes all criteria outlined in Section I, then](#) submit the Final Assessment Report to the Senate Academic Planning Committee for approval or further modification, as necessary.
2. The Final Assessment Report (excluding all confidential information) will be provided to the program and relevant deans and submitted for information to Senate, ~~the Board of Governors,~~ and the Quality Council.
3. The Final Assessment Report will be posted on the university's [Cyclical Review Public Accountability Quality Assurance Office website](#).
4. Only the Final Assessment Report will be publicly accessible. All other information will remain confidential.

Commented [SH4]: To clarify scope of PRS role in review of FAR.

K. Implementation Monitoring Reports

Two years following the submission of the Final Assessment Report to Senate, the unit will be asked to prepare an Implementation Report describing progress made on the implementation of [the](#) recommendations prioritized. The unit will propose a revised implementation date, as appropriate, and identify any significant developments or initiatives since the cyclical review that have impacted the implementation of recommendations. The report will be submitted to the relevant dean(s) for comment, then to the Program Review Sub-Committee for review and

Commented [SH5]: Audit: RECOMMENDATION 2: Ensure that there is a clear and transparent system for implementing and monitoring CPR recommendations that are to be acted on.



2.1 Cyclical Review of Undergraduate and Graduate Academic Programs

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approval, and to the Senate Academic Planning Committee for information. The Program Review Sub-Committee will determine if and when a subsequent report is necessary and communicate that decision back to the unit. All implementation reports will be made public on the [university's Cyclical Review Public Accountability website](#) ~~Quality Assurance Office website~~.



2.1 Cyclical Review of Undergraduate and Graduate Academic Programs

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Approving Authority:	Senate
Original Approval Date:	April 1, 1997
Date of Most Recent Review/Revision:	February 13, 2018 (Senate approval) March 16, 2018 (OUCQA re-ratification)
Office of Accountability:	Vice-President: Academic and Provost
Administrative Responsibility:	Quality Assurance Office

I. Objectives

A rigorous and transparent system of academic program review ensures quality and demonstrates accountability to the public and to current and prospective students. It also provides a sound basis for program enhancement and improvement. Within the university's commitment to the principle of academic freedom, reviews should be objective, analytical and constructive. Components of the review process have been mandated by the Ontario Universities Council on Quality Assurance Council (Quality Council) of the Council of Ontario Universities. Wilfrid Laurier University's Institutional Quality Assurance Procedures (IQAP), comprising this policy and [policy 2.2](#), were ratified by the Quality Council on June 20, 2011. The Institutional Quality Assurance Procedures are subject to approval upon revision and will be audited by the Quality Council on an eight-year cycle.

As set out in the [Quality Assurance Framework](#), the review process is designed to evaluate the program's objectives, requirements, structure, content, and resources as described in Section C of this policy. This policy pertains to the review of the following programs at Wilfrid Laurier University and its federated and affiliated colleges:

1. undergraduate degree, general and honours
2. graduate degree and diploma
3. collaborative and joint programs

II. Institutional Quality Assurance Procedures

A. Responsibilities

- The administration of the review process for all graduate and undergraduate degree programs and diploma programs is the responsibility of the [Provost and Vice-President: Academic](#) who is the sole contact between the institution and the Quality Council.
- The development of review documents for all undergraduate and graduate programs is overseen by the [Quality Assurance Office](#) in conjunction with the Vice-Provost: Teaching and Learning.
- The [Program Review Sub-Committee](#) of the [Senate Academic Planning Committee](#), supported by the Quality Assurance Office, is responsible for managing the review process.
- The Senate Academic Planning Committee is responsible for approving the recommendations of the Program Review Sub-Committee and presenting them to Senate.

Wherever possible, programs that exist at the graduate and undergraduate level in the same discipline, department, or unit will be reviewed together. Similarly, programs that are offered at more than one campus will be reviewed together. The review schedule for all programs can be found at on the Quality Assurance Office [website](#) and is reviewed and updated annually. All programs must be reviewed within eight years of their initial approval or last review.



2.1 Cyclical Review of Undergraduate and Graduate Academic Programs

Accredited Programs

In the case of programs which must also receive review by a professional accreditation body (e.g., programs in Business, Education, Music Therapy, Social Work, and Theology), these review documents may replace those prescribed by this policy if all information required by the policy is contained or appended. The Program Review Sub-Committee will make a determination of the suitability of accreditation documents for the purposes of program review.

Joint Programs with other Institutions

In the case of joint programs with other postsecondary institutions, the participating institutions will agree on a common review schedule. Cyclical reviews will be conducted according to the IQAPs of the institution administering the review (usually the institution at which the current director holds appointment).

The following principles shall apply to reviews of joint programs:

- The Self-Study will clearly explain how input was received from faculty, staff and students at each partner institution. There will be a single Self-Study.
- The site visit will involve all partner institutions and preferably all sites. Reviewers will consult faculty, staff, and students at each partner institution, preferably in person.
- Feedback on the reviewers' report will be solicited from participating units at each partner institution, including the deans.
- One Final Assessment Report, with input and agreement from each partner, will be written and submitted through the appropriate governance processes at each institution.
- The Final Assessment Report will be posted on the university website of each partner.
- Partner institutions will agree on an appropriate monitoring process for the Implementation Plan.
- The Final Assessment Report will be submitted to the Quality Council by all partners.

In cases where degree and/or diploma programs are offered jointly or as dual credential programs with non-IQAP institutions (e.g., colleges of applied arts and technology or institutes of technology and advanced learning), Wilfrid Laurier University will take the lead in the review process; all criteria and principles described below shall pertain as relevant.

B. Steps in the Review Process for Undergraduate Degree and Graduate Degree and Diploma Programs (see also, Appendix A: Flow Chart for Cyclical Program Reviews)

1. A self-study will be prepared by the academic unit and include consultation with students and other relevant communities. These communities may include academic departments or programs within the university, as well as stakeholders in the broader community, including employers and professional associations. One author whose responsibility it is to assemble all material must be identified and recorded on the document. Typically, this author will be a chair, program coordinator, or associate dean (in non-departmentalized faculties).
2. A draft of the Self-Study will be submitted for review and comment to the Quality Assurance Office and relevant Faculty dean(s), in the case of undergraduate programs. In the case of graduate programs, the Self-Study draft will be submitted to the Quality Assurance Office, Faculty dean and dean of Graduate and Postdoctoral Studies. Where both undergraduate and graduate degrees are being reviewed, the Quality Assurance Office and all relevant deans will receive the draft Self-Study.
3. After receiving feedback from the Quality Assurance Office and the dean(s), the program director, coordinator, chair, or associate dean will revise the Self-Study in response to the feedback.



2.1 Cyclical Review of Undergraduate and Graduate Academic Programs

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4. The Program Review Sub-Committee will select a review committee (*in camera*) from the nominees recommended by the program.
5. The Quality Assurance Office will contact the review committee, schedule the site visit, and submit the Self-Study for appraisal.
6. Following its visit to the university, the review committee will write a report summarizing the strengths of the program(s) and note any concerns or recommendations for change.
7. The academic unit will write a response to the report of the external review committee.
8. The relevant dean(s) will prepare a response to the reviewers' report and the unit's response, including an implementation plan that identifies which recommendations made by the review committee will be prioritized.
9. A Final Assessment Report, consisting of a summary of the review process and relevant documents (self-study, reviewers' report, unit response, decanal response), as well as the implementation plan, will be prepared by the Quality Assurance Office and reviewed and approved by the vice-president: academic and the vice-provost: teaching and learning.
10. The Program Review Sub-Committee will review the Final Assessment Report for adherence to criteria outlined in Section I (below) and submit it to the Senate Academic Planning Committee with a recommendation for final approval.
11. The Final Assessment Report will then be submitted to Senate and the Quality Council for information.

C. Criteria for Evaluating the Self-Study

1. Background

The Self-Study provides an opportunity for the unit to engage in serious self-reflection through the analysis of the strengths and areas for improvement of all aspects of the program(s) under review. As such, the report is intended to be contemplative and analytical, not defensive, evasive, or merely descriptive. The opportunity should be taken for a probing examination of the academic character of the program and for exploring innovative alternatives.

The Self-Study consists of three volumes: the Self-Study report, full faculty curricula vitae, and proposed external reviewers. The report should make clear how all data were collected, in what form, and by whom. Only data relating to the period under review should be included, i.e., normally the previous eight (8) years. Program faculty, staff, students, and (where applicable) external stakeholders and professional accrediting bodies should participate in the self-study process and have their contributions acknowledged. For professional programs, feedback from employers and professional associations should be included in the Self-Study as an appendix.

1. Background

- a. Brief history and background of the program(s) under review and their purpose within the institution. Include a list of all programs offered, including those with majors, combined degrees, minors, options, diplomas, or certificates. For graduate reviews, identify any fields within the program.
- b. Actions that have been taken based on recommendations from the previous review.
- c. For professional programs, a summary of any recent accreditation reports.
- d. Questions or issues that the unit would like the review committee to provide feedback on to enhance the quality and viability of the program.



2.1 Cyclical Review of Undergraduate and Graduate Academic Programs

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2. Objectives of the Program

Learning outcomes are foundational to making sound decisions about the quality and alignment of individual programs. More specifically, they provide the basis to communicate what the program is about; that is, the kinds of knowledge, experiences, and skills students will have ideally developed upon successful completion of the program. Program level learning outcomes also inform the identification and development of courses (core, restricted/open electives), as well as the feedback and assessment plan(s) used to evaluate the effectiveness of the program overall and the experience of students.

- a. Consistency with Wilfrid Laurier University's [mission, vision, and values](#) and [Strategic Academic Plan](#).
- b. Clarity and appropriateness of the program's requirements and associated program-level learning outcomes addressing Laurier's [undergraduate](#) (UDLEs) or [graduate](#) (GDLEs) degree level expectations.
- c. For professional programs, consistency of the program level outcomes with provincial, national and professional standards.

3. Admission Requirements

- a. Appropriateness of the program's admission requirements for the learning outcomes established for completion of the program, including adherence to the university's minimum requirements (consult the undergraduate and graduate [academic calendars](#) for minimum university requirements).
- b. Explanation of alternative requirements, if any, for admission into a graduate, second-entry or undergraduate program, including minimum grade point average, additional languages, portfolios or creative work, along with how the program recognizes prior work or learning experience.

4. Curriculum

- a. Appropriateness of the program's structure and curriculum to meet its learning outcomes, whether all program courses listed in the calendar are necessary to meet curricular objectives, and whether any new courses are needed to reflect recent developments in the discipline/profession.
- b. How the curriculum reflects the current state of the discipline, area of study or field.
- c. Average class size. For graduate programs, (i) how the program meets the Quality Council requirements that two-thirds of required coursework consists of graduate-level courses; (ii) evidence that students' time to completion is both monitored and managed in relation to the program's defined length and program requirements.
- d. Modes of delivery used within the program and how these methods are appropriate and effective in meeting the program's learning outcomes.
- e. Amount of service teaching for other academic units and any advantages / disadvantages of this activity.
- f. Ways in which the unit incorporates High Impact Practices into its curriculum.
- g. Innovation or creativity in the content and/or delivery of the program relative or comparable to other such programs.
- h. For graduate programs, an explanation of the purpose of fields and how they are staffed and supported appropriately.
- i. For graduate programs, the inclusion of professional or transferable skills for students.
- j. Recent or ongoing significant curriculum changes that have been made, or will be made, to meet program- and course-level learning outcomes along with strategies and a proposed schedule for implementing any future changes.

5. Assessment Methodologies

- a. Methods for assessing student achievement of the defined program- and course-level learning outcomes and degree level expectations.
- b. Appropriateness and effectiveness of the means of assessment, especially in the students' final year of the program, in clearly demonstrating achievement of the program-level learning outcomes and Laurier's Degree Level Expectations.

6. Resources

- a. Appropriateness and effectiveness of the academic unit's use of existing human, physical and financial resources in delivering the program.



2.1 Cyclical Review of Undergraduate and Graduate Academic Programs

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- b. Description of the administrative and decision-making structure/process within the unit (e.g., titles of all standing or ad hoc committees, how members are appointed/elected, the frequency of meetings) and an assessment of the effectiveness of the current structure and process.
- c. Academic services that contribute directly to the academic quality of each program under review and to student success, including library support, information technology support, laboratory access, services offered through Centre for Student Success, Centre for Teaching Innovation and Excellence, Faculty of Graduate and Postdoctoral Studies, Co-operative Education, and academic advising.
- d. Faculty research funding.

7. Quality Indicators

a. Faculty:

- i) Appropriateness of collective faculty expertise to sustain the program, promote innovation, and foster an appropriate intellectual climate.
- ii) The type and amount of professional service provided to the profession, discipline, or community.
- iii) Quality and quantity of scholarly and creative activity within the program, including involvement by undergraduate students where applicable.
- iv) Qualifications and appointment status of faculty who provided instruction and supervision, including the qualifications of part-time faculty. Numbers of full time, limited term appointment and contract academic staff members contributing to the program in each year. Evidence of how teaching and supervisory loads were distributed and the criteria used to determine this distribution.
- v) For graduate programs, the numbers of faculty who have graduate faculty status by type of [status](#).

b. Undergraduate Students:

- i) Numbers of applications and registrations, compared to targets (if applicable).
- ii) Average GPA of students entering from secondary school (for first undergraduate degree programs only) or from any previous post-secondary degrees (if applicable).
- iii) Percentage of students obtaining the necessary GPA, or other requirements, to progress through the program and attrition rates per year.
- iv) Number of students graduating from the program each year and their average GPA at program completion, as well as the percentage of graduating students who have completed the program within the normal number of years (e.g., four years for an honours program; one or two years for a second degree or master's program; four years for a doctoral program).
- v) Average number of honours, general, and graduate students in the program per year, by level and any changes in unit enrolment patterns during the time period under review.
- vi) Number of international students in the program per year and the resources available to support their academic success.
- vii) Overview of academic awards available to students.
- viii) Summary of course evaluations and exit surveys, where permitted by the Collective Agreement and the Freedom of Information and Protection of Privacy Act (FIPPA).
- ix) Employment options and career successes 6 months and 2 years after graduation, an estimate of the numbers applying to graduate school and the rate of successful admissions, an estimate of number working in relevant "skills matched" fields.
- x) Alumni reports of satisfaction with the program. (Programs should consult [Policy 8.2 Ethics Approval for Administrative Research Using Human Subjects](#) prior to surveying alumni.)

c. Graduate Students:

- i) Numbers of applications and registrations, compared to targets.
- ii) Graduate student flowthrough data. How students' time to completion is both monitored and managed in relation to the program's defined length and program requirements.
- iii) Number of degrees granted.
- iv) Number of students completing a Master's degree by coursework, major research paper or thesis.
- v) Student enrolment patterns and predicted future trends.
- vi) Number of international students in the program per year and the resources available to support their academic success.
- vii) Evidence that financial assistance for students has been sufficient to ensure adequate quality and numbers of students.



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- viii) Course evaluations and summarized exit surveys, where permitted by the Collective Agreement and the Freedom of Information and Protection of Privacy Act (FIPPA).
- ix) An estimate of the number of graduates working on a subsequent degree or postdoctoral fellowship; an estimate of the number employed in relevant "skills matched" fields.
- x) Alumni reports of satisfaction with the program. (Programs should consult [Policy 8.2 Ethics Approval for Administrative Research Using Human Subjects](#) prior to surveying alumni.

9. Conclusion

- a) Strategic plan for future directions and aspirations for the program, including barriers to reaching these objectives.
- b) Concerns or problems that the unit and/or university should address to enhance the quality or viability of the program, as well as recommendations for action to improve the quality of the program or its administration.
- c) Summary and conclusion to the Self-Study, articulating the unit's strengths and weaknesses as well as opportunities for enhancing the quality of the teaching and learning environment.

D. Self-Study Handbook

The university will prepare a detailed handbook for the conduct of cyclical program reviews. The manual will provide templates for the self-study and reports. In addition, the manual will provide guidance on the benefits and conduct of rigorous, transparent, objective, analytical, and constructive self-studies; establish criteria for nomination and selection of arm's-length external peer reviewers; and identify responsibilities for the collection, aggregation and distribution of institutional data and outcome measures required for self-studies.

E. External Reviewers

The academic unit(s) responsible for the program under review will submit to the Quality Assurance Office the names and contact information of and rationale for those they wish to nominate as reviewers, as specified here:

- at least four tenured associate or full professors at Laurier from outside the academic unit who are recognized as excellent teachers and scholars, and who are known for their objectivity and judgment; and
- at least eight associate or full professors from other North American universities who are within the discipline. Normally, four of these will be from universities within Ontario and four from outside Ontario. These nominees should have academic administrative experience and also be recognized as excellent teachers and scholars. . These nominees must not have any past or current formal affiliation with the unit or with members of the unit (e.g., PhD supervisor, co-author) and must be in compliance with [Policy 8.1 Conflict of Interest Policy](#). The nominees may be grouped into categories reflecting different areas or fields within the discipline, with the request that at least one member from each category be selected.
- if appropriate for the program being reviewed, a list of at least four representatives of industry, the professions, and practical training programs.

In keeping with the requirement that reviewers must be at arm's-length, the academic unit(s) will not contact the reviewers directly but will submit the names of prospective reviewers to the Quality Assurance Office. The Quality Assurance Office will contact the nominees to determine their interest and availability and collect the information to complete the Volume III template.

For reviews of joint and collaborative programs, the university will consult with the office of the vice-president: academic or equivalent, at partner institutions.

From the lists of nominees, the Program Review Sub-Committee will select one internal reviewer from outside the program's academic unit(s) and one external reviewer for an undergraduate program or two such reviewers if the review is of a graduate program or of both a graduate and undergraduate program. If the Sub-Committee is not satisfied with the appropriateness of the nominees, they will request additional names from the academic



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unit. The Sub-Committee shall submit the list of reviewers to the Senate Academic Planning Committee for information. Following approval by the Program Review Sub-Committee, the Quality Assurance Office will contact the nominees to confirm their role and to schedule the site visit.

It is the responsibility of the associate vice-president: teaching and learning to ensure that the reviewers:

- 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 University's autonomy to determine priorities for funding, space, and faculty allocation;
- f. Respect the confidentiality required for all aspects of the review process;

These expectations will be conveyed to the reviewers in written instructions and face-to-face meetings with the relevant dean(s) and the provost and vice-president: academic or vice-provost: teaching and learning. The provost and vice-president: academic or the vice-provost: teaching and learning will also be responsible for providing the reviewers with explicit instructions that the program is to be evaluated against the criteria listed in C above.

F. The Review and Report

The internal and external reviewers will consider the Self-Study and may request additional information (programs must inform the Quality Assurance Office of any additional information provided to the reviewers). The reviewers will spend one to two days visiting the academic unit(s) under review. They will meet with the provost and vice-president: academic; vice-provost: teaching and learning; faculty, staff, and undergraduate and graduate students within the unit; the deans of the relevant Faculties; the chair/director/coordinator of the unit under review and of any collaborating units (for interdepartmental programs); the university librarian; and any other members of the university community who can provide needed information. The report of the external review committee must be submitted to the Quality Assurance Office within four weeks of the site visit. In the written report, the reviewers should comment on compliance with all evaluation criteria and respond to any questions posed in the Self-Study. This report should also contain an executive summary suitable for inclusion in the Final Assessment Report and posting on the university's Cyclical Review Public Accountability [website](#).

G. Response of the Unit to the Report of the Review Committee

Upon receipt of the reviewers' report, the Quality Assurance Office will distribute copies to the provost and vice-president: academic, dean(s) and chairperson(s)/co-ordinator(s)/associate dean(s) of the academic unit(s) under review. Within one month of receiving the report, the unit(s) will prepare a written response which includes:

- a. clarifications or corrections of statements in the report;
- b. answers to all questions and responses to all recommendations made by the reviewers.

H. Response of the Dean(s) to the External Reviewers' Report and Unit Response

Following completion of the Unit Response, the dean(s) of the relevant Faculties will prepare a decanal response that responds to the recommendations made by the review committee as well as the unit's response to those recommendations. The dean(s) will also prepare the Implementation Plan, which identifies those recommendations prioritized for implementation and who is responsible for implementing the recommendation. The decanal response will also provide an explanation for any recommendations that are not prioritized for implementation in the Plan. This Implementation Plan will form part of the Final Assessment Report.



2.1 Cyclical Review of Undergraduate and Graduate Academic Programs

I. Final Assessment Report

In consultation with the provost and vice-president: academic and the vice-provost: teaching and learning, the dean(s) will prepare a Final Assessment Report, to be reviewed by the Program Review Sub-Committee. The Final Assessment Report will:

- a. Include an executive summary of the review process;
- b. Identify significant strengths of the program;
- c. Identify opportunities for program improvement and enhancement;
- d. Explain which recommendations from the reviewers' report will be approved and why;
- e. Prioritize recommendations approved for implementation;
- f. If necessary, contain a confidential section where personnel issues may be addressed;
- g. Establish an implementation plan that identifies for each recommendation:
 - Who will be responsible for approving the recommendation;
 - Who will be responsible for acting on the recommendation;
 - Any changes in organization, policy or governance, at any level, that would be necessary to meet the recommendation;
 - The resources, financial and otherwise, that would be provided in supporting the implementation of recommendation;
 - Who will be responsible for providing resources made necessary by the recommendation;
 - A proposed timeline for the implementation of all recommendation.

Only recommendations made in the Reviewers' Report should be included in the Final Assessment Report.

J. Final Approval and Reporting Requirements

1. The Program Review Sub-Committee will review the Final Assessment Report to ensure it meets and includes all criteria outlined in Section I, then submit the Final Assessment Report to the Senate Academic Planning Committee for approval or further modification, as necessary.
2. The Final Assessment Report (excluding all confidential information) will be provided to the program and relevant deans and submitted for information to Senate and the Quality Council.
3. The Final Assessment Report will be posted on the university's Cyclical Review Public Accountability [website](#).
4. Only the Final Assessment Report will be publicly accessible. All other information will remain confidential.

K. Implementation Reports

Two years following the submission of the Final Assessment Report to Senate, the unit will be asked to prepare an Implementation Report describing progress made on the implementation of the recommendations prioritized. The unit will propose a revised implementation date, as appropriate, and identify any significant developments or initiatives since the cyclical review that have impacted the implementation of recommendations. The report will be submitted to the relevant dean(s) for comment, then to the Program Review Sub-Committee for review and approval, and to the Senate Academic Planning Committee for information. The Program Review Sub-Committee will determine if and when a subsequent report is necessary and communicate that decision back to the unit. All implementation reports will be made public on the university's Cyclical Review Public Accountability website.

RELATED POLICIES, PROCEDURES, AND DOCUMENTS

[Policy 2.2: Approval of New Undergraduate and Graduate Programs and Major and Minor Modifications to Existing Programs](#)

[Quality Assurance Framework](#)



2.2 Approval of New Undergraduate and Graduate Programs and Major and Minor Modifications to Existing Programs

WILFRID LAURIER UNIVERSITY
Waterloo | Brantford | Kitchener | Toronto

Approving Authority:	Senate
Original Approval Date:	November 18, 2004
Date of Most Recent Review/Revision:	March 3, 2014 (Senate approval) June 23, 2017 (OUCQA re-ratification)
Office of Accountability:	Provost and Vice-President: Academic
Administrative Responsibility:	Quality Assurance Office

I. Objectives

A rigorous and transparent system for approving new undergraduate and graduate academic programs demonstrates accountability to the public and to current and prospective students. Within the university's commitment to the principle of academic freedom, the approval process should be open, objective, analytical, and constructive. The components of the program approval process have been mandated by the Ontario Universities Council on Quality Assurance (Quality Council) of the Council of Ontario Universities. Wilfrid Laurier University's Institutional Quality Assurance Procedures, comprising this policy and [policy 2.1](#), were ratified by the Quality Council on June 20, 2011 (with re-ratification on November 15, 2012, March 13, 2014 and March 20, 2017). The Institutional Quality Assurance Procedures are subject to approval upon revision and will be audited by the Quality Council on an eight-year cycle.

As set out in the [Quality Assurance Framework](#) the approval process is designed to evaluate the proposed program's objectives, requirements, structure, content, and resources as described in Section C below. Policy 2.2 pertains to the approval of the following categories of proposal at Wilfrid Laurier University and its affiliated and federated colleges:

1. New undergraduate degree programs
2. New graduate degree programs
3. New joint programs
4. New major(s) in a undergraduate program
5. New for-credit graduate diplomas of one of three types:
 - a. Type 1: awarded when a candidate admitted to a master's program leaves that program after completing a defined proportion of the requirements
 - b. Type 2: offered in conjunction with a graduate degree
 - c. Type 3: a stand-alone, direct entry program
6. Major modifications to existing graduate and undergraduate programs
7. Minor curriculum changes (both substantive and editorial)

II. Institutional Quality Assurance Procedures

A. Responsibilities

- The administration of the approval process for new degree programs, new for-credit graduate diplomas, and major modifications to existing programs is the responsibility of the [Provost and Vice-President: Academic](#) (the "Provost") who is the sole contact between the university and the Quality Council.
- The development of proposal documents for all undergraduate and graduate programs is overseen by the [Quality Assurance Office](#) in conjunction with the [Associate Vice-Provost: Teaching and Learning](#), the [Associate Vice-President and Dean, of Faculty of Graduate and Postdoctoral Studies](#) (for graduate programs), and the appropriate Faculty dean (for undergraduate programs).
- The [Program Review Sub-Committee](#) of the [Senate Academic Planning Committee](#), supported by the Quality Assurance Office, is responsible for managing the program approval process.
- ~~The [Senate Finance Committee](#) is responsible for considering the business plan and financial implications of new programs, and major modifications, as applicable.~~
- The [Senate Academic Planning Committee](#) is responsible for the final recommendation of approval of a new program to Senate.

B. Steps in the Approval Process for New Degree Programs and New Majors in Undergraduate Programs

(See also, Appendix A: Flow Chart for New Program Approvals)

1. The first step in the new program development process is to prepare a [Statement of Intent](#) and present it to the Divisional/Faculty Council for approval (as an embargoed¹ document). The Statement of Intent (accompanied by a letter of support from the relevant dean(s)) should then be submitted to the Faculty / Divisional Council and to the Senate Academic Planning Committee for approval (as an embargoed document). The Statement of Intent shall be submitted to Senate for information.
2. Subject to approval of the Statement of Intent and in accordance with Section D below, new program proposals shall be prepared by a program curriculum committee or like body after consultation with students and other relevant communities. These communities may include academic departments or programs within the university, as well as stakeholders in the broader community. [The involvement of these groups in the program development process should be documented in the proposal.](#) One author whose responsibility it is to assemble all material and shepherd a proposal through the various approval bodies must be identified and recorded on the document. This author may be a chair or program coordinator or other designated lead person. In the case of joint programs involving other institutions, one proposal may be prepared for all participating institutions' review bodies as long as the information required by this policy is included. Program curriculum committees may be developed *de novo* in order to prepare proposals for new programs without a pre-existing home in an academic unit.
4. Once completed, the proposal shall be reviewed and recommended (as an embargoed document) in accordance with usual department/program/faculty procedures for curriculum, and then approved by the Faculty, school, or federated college. A proposal for a graduate program must also be reviewed and approved by Graduate Faculty Council (as an embargoed document). Program proposals will be brought forward by the dean of the Faculty responsible. Graduate program proposals shall be presented by the [Associate Vice-President and Dean, of the](#) Faculty of Graduate and Postdoctoral Studies.
5. A full proposal shall be submitted to the Program Review Sub-Committee to assess its completeness and appropriateness relative to the university's mission, strategic academic plan, and standards of quality. This sub-committee shall decide if the proposal is ready for external review and communicate its decision to the Senate Academic Planning Committee.
6. The Program Review Sub-Committee shall review the program's suggestions for external reviewers (*in camera*) and select a review committee from the names supplied or request additional nominees. Reviewers must meet the qualifications and requirements specified in section E below.
7. After external review and [a responses](#) to the External Reviewers' Report by the [university program and the relevant dean\(s\)](#), the Senate Academic Planning Committee shall review the complete program proposal package (as an embargoed document) and make a recommendation to Senate.
- ~~8. The Senate Finance Committee shall assess the resource implications of the proposed program, and make a recommendation to Senate.~~
- ~~89.~~ Senate is responsible for approving the program proposal, following which the proposal ceases to be embargoed.
- ~~910.~~ Following Senate approval, a complete program proposal package shall be submitted by the Quality Assurance Office to the Quality Council of the Council of Ontario Universities for approval and to the Ministry of [Colleges and Universities, Advanced Education and Skills Development \(MCUAESD\)](#) for funding approval (as applicable).

¹ As per the [Senate By-Laws & Regulations](#) (Article 4.11), materials that impact the strategic or competitive position of the University are considered embargoed, and access will be restricted to members of the university community. Additionally, material pertaining to cyclical reviews and new programs may be automatically embargoed, and the embargo will end upon a final decision by Senate.

Commented [SH1]: Added to address Audit: RECOMMENDATION 6: Ensure that students and staff are explicitly engaged in specific ways in the process of New Program Proposals and Cyclical Program Reviews.

Commented [SH2]: To respond to Audit: "RECOMMENDATION 5: Revise the relevant sections in Policy 2.1. and 2.2. of the University's IQAP to clarify that distinct internal responses to external reviews are required from both the academic unit and the relevant Dean in New Program Proposals and Cyclical Program Reviews (QAF 2.2.8 and 4.2.4 f)"

Subject to approval by the Provost, the university may announce its intention to offer a new undergraduate or graduate program in advance of approval by the Quality Council and/or [MCU AESD](#) (where [MCU AESD](#) approval is required). When such announcements are made in advance of Quality Council and/or [MCU AESD](#) 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 [and/or the Ministry of [Colleges and Universities Advanced Education and Skills Development](#) as applicable] has [have] approved the program."

10±. The chair or co-ordinator of a new program shall submit brief update report(s) to the Program Review Sub-Committee at the end of the second and fourth year of an undergraduate program or at the end of the first two years for a master's program and three years for a doctoral program. This report shall include enrolment numbers by year and a comment on the adherence to the goals of the program as set out in the initial proposal. Once the program enrolls students, it will also be entered into the schedule of cyclical program reviews. All programs must be reviewed within eight years of their initial approval or last review.

C. Evaluation Criteria

Prior to submitting a Proposal Brief to the Quality Council for appraisal, the university will evaluate any new programs against the following criteria:

1. Objectives of the program

- a. Consistency with Wilfrid Laurier University's [Vision, Mission, Values](#) and [Strategic Academic Plan](#).
- b. Clarity and appropriateness of the program's requirements and program-level learning outcomes addressing Laurier's [undergraduate \(UDLEs\) or graduate \(GDLEs\) degree level expectations](#).
- c. Consistency with provincial, national, international and professional standards (if applicable).
- d. Appropriateness of degree nomenclature considering disciplinary traditions and requirements.

2. Admission requirements

- a. Appropriateness of the program's admission requirements for the learning outcomes established for completion of the program.
- b. Sufficient explanation of alternative requirements, if any, for admission into a graduate, second-entry, or undergraduate program, including minimum grade point average, additional languages, portfolios or creative work, along with how the program recognizes prior work or learning experience (consult the [undergraduate and graduate academic calendars](#) for minimum university requirements).

3. Structure

- a. Appropriateness of the program's structure and regulations to meet specified program-level learning outcomes and [degree level expectations](#).
- b. For graduate programs, a clear rationale for program length that ensures the program requirements can be reasonably completed within the proposed time period.

4. Curriculum

- a. Ways in which the curriculum addresses the current state of the discipline or area of study.
- b. Employment of unique curriculum or program innovations or creative components.
- c. For research-focused graduate programs, clear indication of the nature and suitability of the major research requirements for degree completion. These include thesis and major research paper options and also course components designed for the development of critical and analytical skills.
- d. For graduate programs, course offerings designed to ensure that each student in the program is able to meet the Quality Council requirement that a minimum of two-thirds of required coursework consist of graduate-level courses.

5. Mode(s) of delivery

Appropriateness of the proposed mode(s) of delivery to meet the intended program-level learning outcomes and degree level expectations: e.g., classroom format, online, blended, community service, problem-based, compressed part-time, multi-campus, inter-institutional.

6. *Assessment methodologies*

- a. Description of the assessment methodologies that will be used to evaluate student learning within the program.
- b. Explanation of the alignment between these assessment methodologies and the intended program-level learning outcomes and degree level expectations.
- c. Explanation of how the program will measure and document successful achievement of program-level learning outcomes and degree level expectations.

7. *Resources for all programs*

- a. Adequacy of the administrative unit's planned utilization of existing human, physical and financial resources (indicating, where appropriate, if the program will be cost recovery) and any institutional commitment to supplement those resources, to support the program.
- b. Participation of a sufficient number of faculty who are competent to teach and/or supervise in the program. Faculty participating in graduate programs must be appointed to the [Faculty of Graduate and Postdoctoral Studies](#).
- c. Evidence that there are adequate resources to sustain the quality of students' scholarship and research activities, including library support, information technology support, and laboratory access.

8. *Resources specific to graduate programs*

- a. Evidence that faculty have the recent research or creative/professional/clinical expertise needed to sustain the program, promote innovation and foster an appropriate intellectual climate.
- b. Where appropriate to the program, evidence that financial assistance for students will be sufficient to ensure adequate quality and numbers of students.
- c. Evidence of how supervisory loads will be distributed, and the qualifications and appointment status of faculty who will provide instruction and supervision. Faculty participating in a graduate program must be appointed to the [Faculty of Graduate and Postdoctoral Studies](#).

9. *Resources specific to undergraduate programs*

Evidence of and planning for:

- a. adequate numbers and quality of faculty and staff to achieve the goals of the program or the commitment to provide the necessary resources in step with the implementation of the program;
- b. the role of adjunct and part-time faculty;
- c. anticipated class sizes;
- d. provision of supervision of experiential learning opportunities (if applicable).

10. *Quality and other indicators*

- a. 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.
- b. Evidence of a program structure and faculty research that will ensure the intellectual quality of the student experience.

D. Program Proposal Brief

The [template](#) for new program proposals must be used to prepare the brief. Proposals for new degree programs (categories 1, 2, and 4 in section I, Objectives) follow **all** of the following procedures. ~~For~~ proposals for new ~~collaborative programs and new~~ graduate diplomas (categories ~~3, 5 and 6~~) follow the [unit and faculty level curriculum approval procedures](#) and then proceed to step H below ([Senate Academic Planning Committee](#)

[Recommendation](#)) (Program Review Sub-Committee Recommendation to the Senate Academic Planning Committee).

E. External Reviewers

External review is required *only* for new graduate and undergraduate program proposals (including new undergraduate majors).

The academic unit(s) responsible for the proposed program shall submit to the Quality Assurance Office the names and contact information of and rationale for those they wish to nominate as reviewers, as specified here:

- at least four tenured associate or full professors at Laurier from outside the academic unit who are recognized as excellent teachers and scholars, and who are known for their objectivity and judgment;
- at least eight associate or full professors from other North American universities who are within the discipline. Normally, four of these will be from universities [within outside Ontario and four from outside Ontario](#). These nominees [should have academic administrative experience and also must be recognized as excellent teachers and scholars, and at least two of them must have academic administrative experience](#). These nominees must not have any past or current formal affiliation with the unit or with members of the unit (e.g., PhD supervisor, co-author) and must be in compliance with [the university's Policy 8.1 Conflict of Interest policy](#). The nominees may be grouped into categories reflecting different areas or fields within the discipline, with the request that at least one member from each category be selected: and
- if appropriate for the program being reviewed, a list of at least four representatives of industry, the professions, and/or practical training programs.

In keeping with the requirement that reviewers must be at arm's-length, the academic unit(s) shall not contact the reviewers directly but shall submit the names of prospective reviewers to the Quality Assurance Office. The Quality Assurance Office shall contact the nominees to determine their interest and availability and collect the information to complete the required Volume III template.

For joint programs, the university shall consult with the office of the Provost, or equivalent, at partner institutions.

From the lists of nominees, the Program Review Sub-Committee shall select at least one internal reviewer from outside the academic unit(s) proposing the program and one external reviewer for undergraduate programs, and two external reviewers for graduate programs. If the Sub-Committee is not satisfied with the appropriateness of the nominees, they may request additional names from the academic unit. The Sub-Committee shall submit the list of reviewers to the Senate Academic Planning Committee for information.

The Quality Assurance Office shall contact the nominees to confirm their role and to schedule the site visit. It is the responsibility of the [Associate-Vice-Provost](#): Teaching and Learning to ensure that the reviewers:

- ~~U~~nderstand their role and obligations;
- ~~I~~dentify and commend the proposal's notably strong and creative attributes;
- ~~D~~escribe the proposal's respective strengths, areas for improvement, and opportunities for enhancement;
- ~~R~~ecommend specific steps to be taken to improve the proposal, distinguishing between those the program can itself take and those that require external action;
- ~~R~~ecognize the University's autonomy to determine priorities for funding, space, and faculty allocation;
- ~~R~~espect the confidentiality required for all aspects of the review process.

These expectations shall be conveyed to the reviewers in written instructions and face-to-face meetings with the relevant dean(s) and the Provost (or [Associate-Vice-Provost](#): Teaching and Learning). The Provost or the [Associate-Vice-Provost](#): Teaching and Learning shall also be responsible for providing the reviewers with explicit instructions that the program is to be evaluated against the criteria listed in C above.

F. The Review and Report

The internal and external reviewers shall evaluate the Program Proposal Brief and may request additional information (programs must inform the Quality Assurance Office of any additional information provided to the reviewers). They shall spend one to two days visiting the academic unit(s) proposing the program. The reviewers shall meet with the Provost; ~~Associate Vice-Provost~~ Vice-Provost: Teaching and Learning; faculty, staff, and undergraduate and graduate students within the unit (where applicable); the deans of the relevant Faculties; the chair/director of the unit proposing the program and of any collaborating units (for interdepartmental programs); the University Librarian; and any other members of the university community who can provide needed information. The reviewers shall prepare a final report, which must be submitted to the Quality Assurance Office within four weeks following the site visit. In the written report, the reviewers should comment on compliance with all evaluation criteria, note any clearly innovative aspects of the proposed program, and make recommendations on essential and desirable modifications to the proposal.

G. Responses to the Report of the Review Committee

Upon receipt of the reviewers' report, the Quality Assurance Office shall distribute copies to the Provost, dean(s) and chairperson(s)/co-ordinator(s) of the academic unit(s) proposing the program, and the author of the program proposal. Within four weeks of receiving the report, the unit(s) and the relevant dean(s) shall each prepare an ~~an internal~~ response that includes:

- ~~a.~~ clarifications or corrections of statements in the report; and
- a.
- b. answers to all questions and responses to all recommendations and suggestions raised by the reviewers.

At this time, the program shall make any necessary revisions to the program proposal and forward them to the Quality Assurance Office.

H. Senate Academic Planning Committee Recommendation

The Quality Assurance Office will submit the proposal package to the Senate Academic Planning Committee, who shall review all materials and make one of the following decisions:

- a. Approve the proposal;
- b. Return it to the unit for further revisions;
- c. Not approve the proposal.

The author of the proposal brief shall be invited to attend the meeting to present the proposal and answer any questions. If the Senate Academic Planning Committee recommends approval of the proposal, and the provost concurs, the proposal will move forward to the Senate ~~for final approval. Finance Committee for consideration. The recommendation of the Senate Academic Planning Committee shall be communicated to Senate.~~

~~I. Senate Finance Committee Recommendation~~

~~A meeting of the Senate Finance Committee shall be held to consider the financial implications of a new program proposal, and major modifications, as applicable. The author of the proposal brief shall be invited to attend the meeting to present the proposal and answer questions from the committee. The recommendation of the Senate Finance Committee shall be communicated to Senate.~~

~~IJ. Senate Approval~~

The new program proposal shall be presented for approval by the dean(s) responsible for the units proposing a new undergraduate program, and by the Associate Vice-President and Dean ~~of the~~ Faculty of Graduate and Postdoctoral Studies, in the case of graduate programs.

~~JK. Quality Council Approval~~

Following Senate approval, the complete program proposal package will be forwarded by the Quality Assurance Office to the Ontario Universities Council on Quality Assurance for approval. If approved, programs must commence within 36 months of Quality Council approval, or the approval will lapse.

Subject to approval by the Provost, 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."

KL. Application for funding to the Ministry of ~~Colleges and Universities~~ Advanced Education and Skills Development (MCUAESD)

All new program proposals (for non-core undergraduate programs or for graduate programs) which require operating grant funding must be submitted to the MCUAESD for funding approval. The required information will be provided by the relevant chair/coordinator/dean to the Quality Assurance Office who will prepare the submission for the MCUAESD.

M. Report to the Board of Governors

The Provost will present an annual report to the Board of Governors, detailing all new programs approved by Senate and the Quality Council.

LN. Monitoring of New Programs

The chair or co-ordinator of a new program shall submit brief update report(s) to the Program Review Sub-Committee at the end of the second and fourth year of an undergraduate program, or at the end of the first two years for a master's program, and three years for a doctoral program. This report shall include enrolment numbers by year and a comment on the adherence to the goals of the program as set out in the initial proposal. Once the program enrolls students, it will also be entered into the schedule of cyclical program reviews.

ME. Approval Process for Major Modifications to Existing Programs

All changes to existing programs, as well as proposals for new joint or collaborative programs, and diplomas, shall be approved by Senate according to the procedures outlined below. The types of major modifications listed below in **a. Program Changes** do not require approval by the Quality Council. Those outlined in **b. Expedited Review** do require submission to the Quality Council for approval. All major modifications are reported annually to the Quality Council.

Major modifications will be discussed and approved on the basis of its rationale, alignment with the university's Strategic Academic Plan, impact on the program's learning outcomes, and the impact on resources.

Major modifications can be characterized as significant changes that have program-wide impact through either major changes to the courses offered and/or program requirements. The following list is not exhaustive and units are encouraged to consult with the Quality Assurance Office if they have any questions about how to classify curriculum changes for which examples are not given.

a. Program Changes. These include:

- (i) Requirements that differ significantly from those existing at the time of the previous cyclical program review
 - the academic merger of two or more programs
 - the closure of a program (please refer to Article 23 of the [WLUFA Collective Agreement](#))
 - the introduction or deletion of graduate program fields
 - the introduction of a Collaborative Specialization in a graduate program
 - the addition of a college certificate into an undergraduate program
 - the addition of new bridging options for college diploma graduates
 - significant changes to the laboratory component of an undergraduate program
 - the introduction or deletion of an undergraduate thesis or capstone project
 - the introduction or deletion of a work experience, co-operative education placement, internship or practicum, or portfolio

- at the master's level, the introduction or deletion of a research project, research essay or thesis, course-only, co-op, internship or practicum option
 - any change to the requirements for graduate program comprehensive or other examination requirements, field studies or residence requirements
 - major changes to courses comprising a significant proportion of the program (typically, one-third or more)
 - the addition of a new minor, option, concentration or specialization
 - major changes to an existing minor, option, concentration or specialization
 - [the creation of a new undergraduate certificate, post-baccalaureate certificate, or diploma](#)
- (ii) Significant changes to the learning outcomes
- changes to program content, other than those listed in (i) above, that affect the learning outcomes, but do not meet the threshold for a 'new program'
- (iii) Significant changes to the faculty engaged in delivering the program and/or to the essential resources as may occur, for example, when there have been changes to the existing mode(s) of delivery (e.g. different campus, online delivery, inter-institutional collaboration)
- changes to the faculty delivering the program: e.g. a large proportion of the faculty retires; new hires alter the areas of research and teaching interests
 - a change in the language of program delivery
 - the establishment of an existing degree program at another institution or location
 - the offering of an existing program substantially online where it had previously been offered in face-to-face mode, or vice versa
 - change to full- or part-time program options, or vice versa
 - changes to the essential resources, where these changes impair the delivery of the approved program

b. Expedited Reviews. These include:

- a proposal for a new joint program;
- proposals for new for-credit graduate diplomas;
- if the university requests it, Quality Council approval of any of the program changes listed above (for the process, see steps 5 and 6 below).

Steps in the review and approval process of major modifications:

1. [Proposals for major modifications](#) of any type must be prepared by a program or academic unit's curriculum committee or like body after consultation with other relevant communities. These communities may include academic departments or programs within the university, as well as stakeholders in the broader community such as partners in joint programs.
2. When appropriate, the proposal shall be reviewed and approved by the department or equivalent curriculum committee. Proposals shall be approved by department or equivalent councils prior to being forwarded to divisional curriculum committees.
3. Proposals shall be reviewed by the divisional curriculum committee, and then approved by the Faculty, school, or federated college divisional council. Changes to graduate programs must also be reviewed and approved by Graduate Faculty Council.
4. Proposals shall then be submitted to the Senate Academic Planning Committee by the responsible Faculty for review and approval. Proposals for changes to graduate programs shall be presented by the Faculty of Graduate and Postdoctoral Studies regardless of the program's home. [Proposals with significant resource implications shall also be reviewed by the Senate Finance Committee.](#)
5. The Provost, on the recommendation of the Senate Academic Planning Committee, will determine which curriculum changes are major modifications and, of those major modifications, which ones should be submitted to the Quality Council for expedited review. When expedited review is deemed necessary, the department or equivalent shall prepare a proposal brief which addresses the relevant evaluation criteria as outlined in II(C) above.

6. Approved proposals for major modifications, along with the Provost's recommendation on expedited review, will be brought forward to Senate and presented by the Faculty responsible.
7. Major modifications are reported annually to the Quality Council.

NP. Approval Process for Minor Curriculum Changes to Existing Programs

Minor curriculum changes (either substantive or editorial) must be approved by the university, but Quality Council approval is not required.

For the purposes of approval and review, changes should be divided into:

Substantive:

Substantive minor changes are changes to degree programs, minors, options, concentrations, and specializations which are less significant in scope than major modifications. These include:

- a. renaming of programs or graduate fields;
- b. changes in admission or progression requirements;
- c. course additions or deletions which effectively reorganize a program, impact another faculty, or result in significant additional or reduced resource requirements;
- d. changes in program regulations with broad implications;
- e. changes that run counter to the university's [Strategic Academic Plan](#);
- f. other changes which may result in additional or reduced resource requirements.

Editorial: all other minor curriculum changes (e.g. course addition, change to course element, course deletion), including editorial changes to curriculum material.

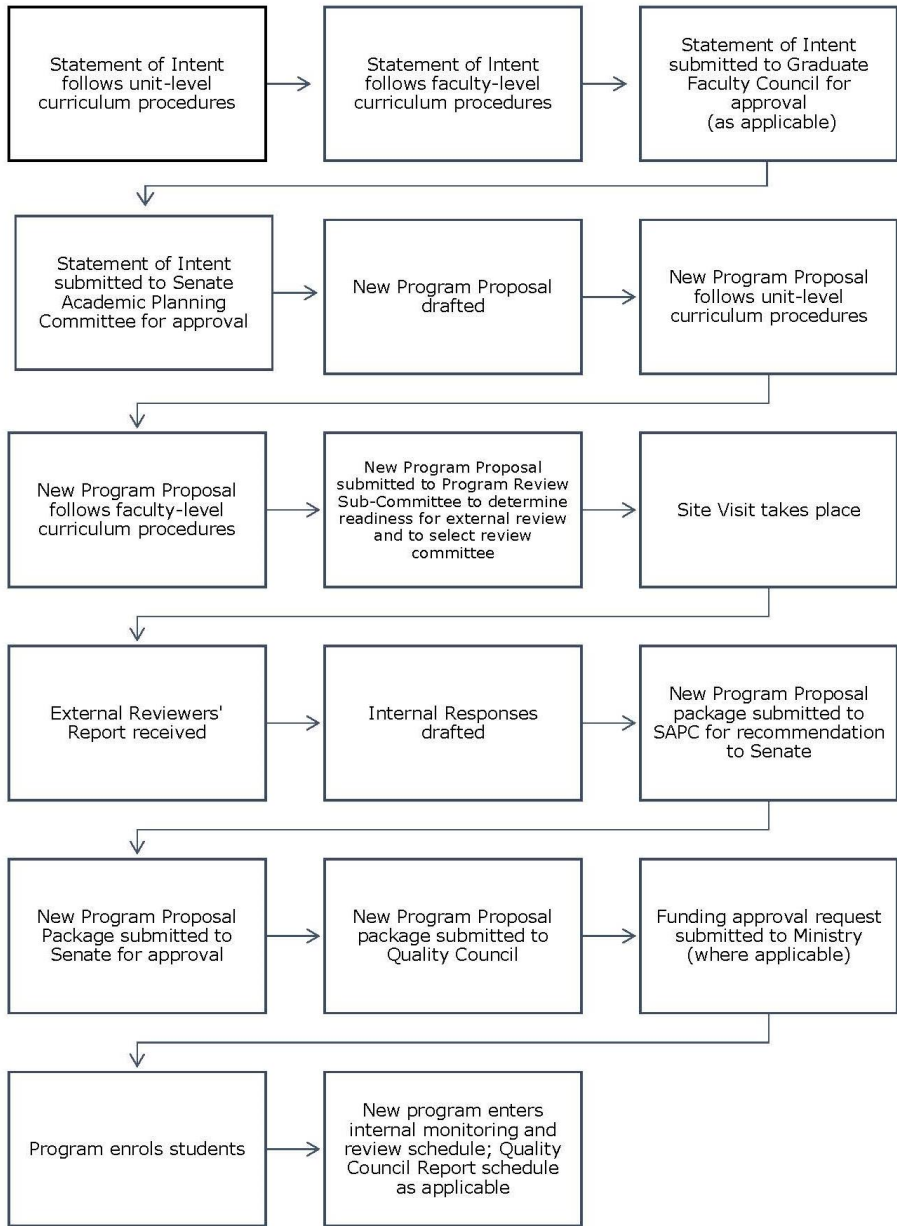
Steps in the Review and Approval Process for Minor Curriculum Changes

1. The process for the approval of substantive minor changes is the same as for major modifications, except that reporting to the Quality Council is not required.
2. The process for the approval of editorial minor curriculum changes follows the same processes as above, except that they are approved by the Senate Academic Planning Committee under delegated authority. Reporting to the Quality Council is not required.

RELATED POLICIES, PROCEDURES, & DOCUMENTS

[Policy 2.1 Cyclical Review of Undergraduate and Graduate Academic Programs](#)
[Quality Assurance Framework](#)

Appendix A: Flow Chart for New Program Approvals





2.2 Approval of New Undergraduate and Graduate Programs and Major and Minor Modifications to Existing Programs

WILFRID LAURIER UNIVERSITY

Waterloo | Brantford | Kitchener | Toronto

Approving Authority:	Senate
Original Approval Date:	November 18, 2004
Date of Most Recent Review/Revision:	March 3, 2014 (Senate approval) June 23, 2017 (OUCQA re-ratification)
Office of Accountability:	Provost and Vice-President: Academic
Administrative Responsibility:	Quality Assurance Office

I. Objectives

A rigorous and transparent system for approving new undergraduate and graduate academic programs demonstrates accountability to the public and to current and prospective students. Within the university's commitment to the principle of academic freedom, the approval process should be open, objective, analytical, and constructive. The components of the program approval process have been mandated by the Ontario Universities Council on Quality Assurance (Quality Council) of the Council of Ontario Universities. Wilfrid Laurier University's Institutional Quality Assurance Procedures, comprising this policy and [policy 2.1](#), were ratified by the Quality Council on June 20, 2011 (with re-ratification on November 15, 2012, March 13, 2014 and March 20, 2017). The Institutional Quality Assurance Procedures are subject to approval upon revision and will be audited by the Quality Council on an eight-year cycle.

As set out in the [Quality Assurance Framework](#) the approval process is designed to evaluate the proposed program's objectives, requirements, structure, content, and resources as described in Section C below. Policy 2.2 pertains to the approval of the following categories of proposal at Wilfrid Laurier University and its affiliated and federated colleges:

1. New undergraduate degree programs
2. New graduate degree programs
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4. New major(s) in a undergraduate program
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 - a. Type 1: awarded when a candidate admitted to a master's program leaves that program after completing a defined proportion of the requirements
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 - c. Type 3: a stand-alone, direct entry program
6. Major modifications to existing graduate and undergraduate programs
7. Minor curriculum changes (both substantive and editorial)

II. Institutional Quality Assurance Procedures

A. Responsibilities

- The administration of the approval process for new degree programs, new for-credit graduate diplomas, and major modifications to existing programs is the responsibility of the [Provost and Vice-President: Academic](#) (the "Provost") who is the sole contact between the university and the Quality Council.
- The development of proposal documents for all undergraduate and graduate programs is overseen by the [Quality Assurance Office](#) in conjunction with the Vice-Provost: Teaching and Learning, the Associate Vice-President and Dean, Faculty of Graduate and Postdoctoral Studies (for graduate programs), and the appropriate Faculty dean (for undergraduate programs).
- The [Program Review Sub-Committee](#) of the [Senate Academic Planning Committee](#), supported by the Quality Assurance Office, is responsible for managing the program approval process.
- The [Senate Academic Planning Committee](#) is responsible for the final recommendation of approval of a new program to Senate.



2.2 Approval of New Undergraduate and Graduate Programs and Major and Minor Modifications to Existing Programs

WILFRID LAURIER UNIVERSITY

Waterloo | Brantford | Kitchener | Toronto

B. Steps in the Approval Process for New Degree Programs and New Majors in Undergraduate Programs

(See also, Appendix A: Flow Chart for New Program Approvals)

1. The first step in the new program development process is to prepare a Statement of Intent and present it to the Divisional/Faculty Council for approval (as an embargoed¹ document). The Statement of Intent (accompanied by a letter of support from the relevant dean(s)) should then be submitted to the Faculty / Divisional Council and to the Senate Academic Planning Committee for approval (as an embargoed document). The Statement of Intent shall be submitted to Senate for information.
2. Subject to approval of the Statement of Intent and in accordance with Section D below, new program proposals shall be prepared by a program curriculum committee or like body after consultation with students and other relevant communities. These communities may include academic departments or programs within the university, as well as stakeholders in the broader community. The involvement of these groups in the program development process should be documented in the proposal. One author whose responsibility it is to assemble all material and shepherd a proposal through the various approval bodies must be identified and recorded on the document. This author may be a chair or program coordinator or other designated lead person. In the case of joint programs involving other institutions, one proposal may be prepared for all participating institutions' review bodies as long as the information required by this policy is included. Program curriculum committees may be developed *de novo* in order to prepare proposals for new programs without a pre-existing home in an academic unit.
4. Once completed, the proposal shall be reviewed and recommended (as an embargoed document) in accordance with usual department/program/faculty procedures for curriculum, and then approved by the Faculty, school, or federated college. A proposal for a graduate program must also be reviewed and approved by Graduate Faculty Council (as an embargoed document). Program proposals will be brought forward by the dean of the Faculty responsible. Graduate program proposals shall be presented by the Associate Vice-President and Dean, Faculty of Graduate and Postdoctoral Studies.
5. A full proposal shall be submitted to the Program Review Sub-Committee to assess its completeness and appropriateness relative to the university's mission, strategic academic plan, and standards of quality. This sub-committee shall decide if the proposal is ready for external review and communicate its decision to the Senate Academic Planning Committee.
6. The Program Review Sub-Committee shall review the program's suggestions for external reviewers (*in camera*) and select a review committee from the names supplied or request additional nominees. Reviewers must meet the qualifications and requirements specified in section E below.
7. After external review and responses to the External Reviewers' Report by the program and the relevant dean(s), the Senate Academic Planning Committee shall review the complete program proposal package (as an embargoed document) and make a recommendation to Senate.
8. Senate is responsible for approving the program proposal, following which the proposal ceases to be embargoed.

¹ As per the [Senate By-Laws & Regulations](#) (Article 4.11), materials that impact the strategic or competitive position of the University are considered embargoed, and access will be restricted to members of the university community. Additionally, material pertaining to cyclical reviews and new programs may be automatically embargoed, and the embargo will end upon a final decision by Senate.



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9. Following Senate approval, a complete program proposal package shall be submitted by the Quality Assurance Office to the Quality Council of the Council of Ontario Universities for approval and to the Ministry of Colleges and Universities (MCU) for funding approval (as applicable).

Subject to approval by the Provost, the university may announce its intention to offer a new undergraduate or graduate program in advance of approval by the Quality Council and/or MCU (where MCU approval is required). When such announcements are made in advance of Quality Council and/or MCU 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 [and/or the Ministry of Colleges and Universities as applicable] has [have] approved the program."

10. The chair or co-ordinator of a new program shall submit brief update report(s) to the Program Review Sub-Committee at the end of the second and fourth year of an undergraduate program or at the end of the first two years for a master's program and three years for a doctoral program. This report shall include enrolment numbers by year and a comment on the adherence to the goals of the program as set out in the initial proposal. Once the program enrolls students, it will also be entered into the schedule of cyclical program reviews. All programs must be reviewed within eight years of their initial approval or last review.

C. Evaluation Criteria

Prior to submitting a Proposal Brief to the Quality Council for appraisal, the university will evaluate any new programs against the following criteria:

1. Objectives of the program

- a. Consistency with Wilfrid Laurier University's [Vision, Mission, Values](#) and [Strategic Academic Plan](#).
- b. Clarity and appropriateness of the program's requirements and program-level learning outcomes addressing Laurier's undergraduate (UDLEs) or graduate (GDLEs) degree level expectations.
- c. Consistency with provincial, national, international and professional standards (if applicable).
- d. Appropriateness of degree nomenclature considering disciplinary traditions and requirements.

2. Admission requirements

- a. Appropriateness of the program's admission requirements for the learning outcomes established for completion of the program.
- b. Sufficient explanation of alternative requirements, if any, for admission into a graduate, second-entry, or undergraduate program, including minimum grade point average, additional languages, portfolios or creative work, along with how the program recognizes prior work or learning experience (consult the [undergraduate and graduate academic calendars](#) for minimum university requirements).

3. Structure

- a. Appropriateness of the program's structure and regulations to meet specified program-level learning outcomes and degree level expectations.
- b. For graduate programs, a clear rationale for program length that ensures the program requirements can be reasonably completed within the proposed time period.

4. Curriculum

- a. Ways in which the curriculum addresses the current state of the discipline or area of study.
- b. Employment of unique curriculum or program innovations or creative components.
- c. For research-focused graduate programs, clear indication of the nature and suitability of the major research requirements for degree completion. These include thesis and major research paper options and also course components designed for the development of critical and analytical skills.



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- d. For graduate programs, course offerings designed to ensure that each student in the program is able to meet the Quality Council requirement that a minimum of two-thirds of required coursework consist of graduate-level courses.

5. *Mode(s) of delivery*

Appropriateness of the proposed mode(s) of delivery to meet the intended program-level learning outcomes and degree level expectations: e.g., classroom format, online, blended, community service, problem-based, compressed part-time, multi-campus, inter-institutional.

6. *Assessment methodologies*

- a. Description of the assessment methodologies that will be used to evaluate student learning within the program.
- b. Explanation of the alignment between these assessment methodologies and the intended program-level learning outcomes and degree level expectations.
- c. Explanation of how the program will measure and document successful achievement of program-level learning outcomes and degree level expectations.

7. *Resources for all programs*

- a. Adequacy of the administrative unit's planned utilization of existing human, physical and financial resources (indicating, where appropriate, if the program will be cost recovery) and any institutional commitment to supplement those resources, to support the program.
- b. Participation of a sufficient number of faculty who are competent to teach and/or supervise in the program. Faculty participating in graduate programs must be appointed to the [Faculty of Graduate and Postdoctoral Studies](#).
- c. Evidence that there are adequate resources to sustain the quality of students' scholarship and research activities, including library support, information technology support, and laboratory access.

8. *Resources specific to graduate programs*

- a. Evidence that faculty have the recent research or creative/professional/clinical expertise needed to sustain the program, promote innovation and foster an appropriate intellectual climate.
- b. Where appropriate to the program, evidence that financial assistance for students will be sufficient to ensure adequate quality and numbers of students.
- c. Evidence of how supervisory loads will be distributed, and the qualifications and appointment status of faculty who will provide instruction and supervision. Faculty participating in a graduate program must be appointed to the [Faculty of Graduate and Postdoctoral Studies](#).

9. *Resources specific to undergraduate programs*

Evidence of and planning for:

- a. adequate numbers and quality of faculty and staff to achieve the goals of the program or the commitment to provide the necessary resources in step with the implementation of the program;
- b. the role of adjunct and part-time faculty;
- c. anticipated class sizes;
- d. provision of supervision of experiential learning opportunities (if applicable).

10. *Quality and other indicators*

- a. 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.
- b. Evidence of a program structure and faculty research that will ensure the intellectual quality of the student experience.



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D. Program Proposal Brief

The template for new program proposals must be used to prepare the brief. Proposals for new degree programs (categories 1, 2, and 4 in section I, Objectives) follow **all** of the following procedures. Proposals for new graduate diplomas (category 5) follow the unit and faculty level curriculum approval procedures and then proceed to step H below (Senate Academic Planning Committee Recommendation).

E. External Reviewers

External review is required *only* for new graduate and undergraduate program proposals (including new undergraduate majors).

The academic unit(s) responsible for the proposed program shall submit to the Quality Assurance Office the names and contact information of and rationale for those they wish to nominate as reviewers, as specified here:

- at least four tenured associate or full professors at Laurier from outside the academic unit who are recognized as excellent teachers and scholars, and who are known for their objectivity and judgment;
- at least eight associate or full professors from other North American universities who are within the discipline. Normally, four of these will be from universities within Ontario and four from outside Ontario. These nominees should have academic administrative experience and also be recognized as excellent teachers and scholars. These nominees must not have any past or current formal affiliation with the unit or with members of the unit (e.g., PhD supervisor, co-author) and must be in compliance with [Policy 8.1 Conflict of Interest Policy](#). The nominees may be grouped into categories reflecting different areas or fields within the discipline, with the request that at least one member from each category be selected: and
- if appropriate for the program being reviewed, a list of at least four representatives of industry, the professions, and/or practical training programs.

In keeping with the requirement that reviewers must be at arm's-length, the academic unit(s) shall not contact the reviewers directly but shall submit the names of prospective reviewers to the Quality Assurance Office. The Quality Assurance Office shall contact the nominees to determine their interest and availability and collect the information to complete the required Volume III template.

For joint programs, the university shall consult with the office of the Provost, or equivalent, at partner institutions.

From the lists of nominees, the Program Review Sub-Committee shall select at least one internal reviewer from outside the academic unit(s) proposing the program and one external reviewer for undergraduate programs, and two external reviewers for graduate programs. If the Sub-Committee is not satisfied with the appropriateness of the nominees, they may request additional names from the academic unit. The Sub-Committee shall submit the list of reviewers to the Senate Academic Planning Committee for information.

The Quality Assurance Office shall contact the nominees to confirm their role and to schedule the site visit. It is the responsibility of the Vice-Provost: Teaching and Learning to ensure that the reviewers:

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



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These expectations shall be conveyed to the reviewers in written instructions and face-to-face meetings with the relevant dean(s) and the Provost (or Vice-Provost: Teaching and Learning). The Provost or the Vice-Provost: Teaching and Learning shall also be responsible for providing the reviewers with explicit instructions that the program is to be evaluated against the criteria listed in C above.

F. The Review and Report

The internal and external reviewers shall evaluate the Program Proposal Brief and may request additional information (programs must inform the Quality Assurance Office of any additional information provided to the reviewers). They shall spend one to two days visiting the academic unit(s) proposing the program. The reviewers shall meet with the Provost; Vice-Provost: Teaching and Learning; faculty, staff, and undergraduate and graduate students within the unit (where applicable); the deans of the relevant Faculties; the chair/director of the unit proposing the program and of any collaborating units (for interdepartmental programs); the University Librarian; and any other members of the university community who can provide needed information. The reviewers shall prepare a final report, which must be submitted to the Quality Assurance Office within four weeks following the site visit. In the written report, the reviewers should comment on compliance with all evaluation criteria, note any clearly innovative aspects of the proposed program, and make recommendations on essential and desirable modifications to the proposal.

G. Responses to the Report of the Review Committee

Upon receipt of the reviewers' report, the Quality Assurance Office shall distribute copies to the Provost, dean(s) and chairperson(s)/co-ordinator(s) of the academic unit(s) proposing the program, and the author of the program proposal. Within four weeks of receiving the report, the unit(s) and the relevant dean(s) shall each prepare a response that includes:

- a. clarifications or corrections of statements in the report; and
- b. answers to all questions and responses to all recommendations and suggestions raised by the reviewers.

At this time, the program shall make any necessary revisions to the program proposal and forward them to the Quality Assurance Office.

H. Senate Academic Planning Committee Recommendation

The Quality Assurance Office will submit the proposal package to the Senate Academic Planning Committee, who shall review all materials and make one of the following decisions:

- a. Approve the proposal;
- b. Return it to the unit for further revisions;
- c. Not approve the proposal.

The author of the proposal brief shall be invited to attend the meeting to present the proposal and answer any questions. If the Senate Academic Planning Committee recommends approval of the proposal, and the provost concurs, the proposal will move forward to the Senate for final approval.

I. Senate Approval

The new program proposal shall be presented for approval by the dean(s) responsible for the units proposing a new undergraduate program, and by the Associate Vice-President and Dean, Faculty of Graduate and Postdoctoral Studies, in the case of graduate programs.



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J. Quality Council Approval

Following Senate approval, the complete program proposal package will be forwarded by the Quality Assurance Office to the Ontario Universities Council on Quality Assurance for approval. If approved, programs must commence within 36 months of Quality Council approval, or the approval will lapse.

Subject to approval by the Provost, 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."

K. Application for funding to the Ministry of Colleges and Universities (MCU)

All new program proposals (for non-core undergraduate programs or for graduate programs) which require operating grant funding must be submitted to the MCU for funding approval. The required information will be provided by the relevant chair/coordinator/dean to the Quality Assurance Office who will prepare the submission for the MCU.

L. Monitoring of New Programs

The chair or co-ordinator of a new program shall submit brief update report(s) to the Program Review Sub-Committee at the end of the second and fourth year of an undergraduate program, or at the end of the first two years for a master's program, and three years for a doctoral program. This report shall include enrolment numbers by year and a comment on the adherence to the goals of the program as set out in the initial proposal. Once the program enrolls students, it will also be entered into the schedule of cyclical program reviews.

M. Approval Process for Major Modifications to Existing Programs

All changes to existing programs, as well as proposals for new joint or collaborative programs, and diplomas, shall be approved by Senate according to the procedures outlined below. The types of major modifications listed below in **a. Program Changes** do not require approval by the Quality Council. Those outlined in **b. Expedited Review** do require submission to the Quality Council for approval. All major modifications are reported annually to the Quality Council.

Major modifications will be discussed and approved on the basis of its rationale, alignment with the university's Strategic Academic Plan, impact on the program's learning outcomes, and the impact on resources.

Major modifications can be characterized as significant changes that have program-wide impact through either major changes to the courses offered and/or program requirements. The following list is not exhaustive and units are encouraged to consult with the Quality Assurance Office if they have any questions about how to classify curriculum changes for which examples are not given.

a. Program Changes. These include:

- (i) Requirements that differ significantly from those existing at the time of the previous cyclical program review
 - the academic merger of two or more programs
 - the closure of a program (please refer to Article 23 of the [WLUFA Collective Agreement](#))
 - the introduction or deletion of graduate program fields
 - the introduction of a Collaborative Specialization in a graduate program



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- the addition of a college certificate into an undergraduate program
 - the addition of new bridging options for college diploma graduates
 - significant changes to the laboratory component of an undergraduate program
 - the introduction or deletion of an undergraduate thesis or capstone project
 - the introduction or deletion of a work experience, co-operative education placement, internship or practicum, or portfolio
 - at the master's level, the introduction or deletion of a research project, research essay or thesis, course-only, co-op, internship or practicum option
 - any change to the requirements for graduate program comprehensive or other examination requirements, field studies or residence requirements
 - major changes to courses comprising a significant proportion of the program (typically, one-third or more)
 - the addition of a new minor, option, concentration or specialization
 - major changes to an existing minor, option, concentration or specialization
 - the creation of a new undergraduate certificate, post-baccalaureate certificate, or diploma
- (ii) Significant changes to the learning outcomes
- changes to program content, other than those listed in (i) above, that affect the learning outcomes, but do not meet the threshold for a 'new program'
- (iii) Significant changes to the faculty engaged in delivering the program and/or to the essential resources as may occur, for example, when there have been changes to the existing mode(s) of delivery (e.g. different campus, online delivery, inter-institutional collaboration)
- changes to the faculty delivering the program: e.g. a large proportion of the faculty retires; new hires alter the areas of research and teaching interests
 - a change in the language of program delivery
 - the establishment of an existing degree program at another institution or location
 - the offering of an existing program substantially online where it had previously been offered in face-to-face mode, or vice versa
 - change to full- or part-time program options, or vice versa
 - changes to the essential resources, where these changes impair the delivery of the approved program

b. Expedited Reviews. These include:

- a proposal for a new joint program;
- proposals for new for-credit graduate diplomas;
- if the university requests it, Quality Council approval of any of the program changes listed above (for the process, see steps 5 and 6 below).

Steps in the review and approval process of major modifications:

1. Proposals for major modifications of any type must be prepared by a program or academic unit's curriculum committee or like body after consultation with other relevant communities. These communities may include academic departments or programs within the university, as well as stakeholders in the broader community such as partners in joint programs.
2. When appropriate, the proposal shall be reviewed and approved by the department or equivalent curriculum committee. Proposals shall be approved by department or equivalent councils prior to being forwarded to divisional curriculum committees.



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3. Proposals shall be reviewed by the divisional curriculum committee, and then approved by the Faculty, school, or federated college divisional council. Changes to graduate programs must also be reviewed and approved by Graduate Faculty Council.
4. Proposals shall then be submitted to the Senate Academic Planning Committee by the responsible Faculty for review and approval. Proposals for changes to graduate programs shall be presented by the Faculty of Graduate and Postdoctoral Studies regardless of the program's home.
5. The Provost, on the recommendation of the Senate Academic Planning Committee, will determine which curriculum changes are major modifications and, of those major modifications, which ones should be submitted to the Quality Council for expedited review. When expedited review is deemed necessary, the department or equivalent shall prepare a proposal brief which addresses the relevant evaluation criteria as outlined in II(C) above.
6. Approved proposals for major modifications, along with the Provost's recommendation on expedited review, will be brought forward to Senate and presented by the Faculty responsible.
7. Major modifications are reported annually to the Quality Council.

O. Approval Process for Minor Curriculum Changes to Existing Programs

Minor curriculum changes (either substantive or editorial) must be approved by the university, but Quality Council approval is not required.

For the purposes of approval and review, changes should be divided into:

Substantive:

Substantive minor changes are changes to degree programs, minors, options, concentrations, and specializations which are less significant in scope than major modifications. These include:

- a. renaming of programs or graduate fields;
- b. changes in admission or progression requirements;
- c. course additions or deletions which effectively reorganize a program, impact another faculty, or result in significant additional or reduced resource requirements;
- d. changes in program regulations with broad implications;
- e. changes that run counter to the university's [Strategic Academic Plan](#);
- f. other changes which may result in additional or reduced resource requirements.

Editorial: all other minor curriculum changes (e.g. course addition, change to course element, course deletion), including editorial changes to curriculum material.

Steps in the Review and Approval Process for Minor Curriculum Changes

1. The process for the approval of substantive minor changes is the same as for major modifications, except that reporting to the Quality Council is not required.
2. The process for the approval of editorial minor curriculum changes follows the same processes as above, except that they are approved by the Senate Academic Planning Committee under delegated authority. Reporting to the Quality Council is not required.



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RELATED POLICIES, PROCEDURES, & DOCUMENTS

[Policy 2.1 Cyclical Review of Undergraduate and Graduate Academic Programs Quality Assurance Framework](#)