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# Institutional Quality Assurance Policy (IQAP)

**Category**: Academic

**Approval:** Senate (internal)

Ontario Universities Council on Quality Assurance (external)

**Responsibility:** Provost and Vice President Academic

**Primary Contact:** Manager, Office of Provost and Vice President Academic

**Effective Date of Policy:** Sept 1, 2022; Sept 1, 2019; Sept 1, 2015; initial Sept 1, 2011

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**Quality Council Approval:** Mar 15, 2023; Aug 26, 2019; Dec 18, 2014; initial approval Mar 31, 2011

Policies superseded by this Policy include:

* Policy on Undergraduate Program Review (February 2003)
* Procedures for New Degree Programs (May 2003)
* Procedure for Approval of New Graduate Programs (April 2005)

## Purpose of Policy

Trent’s Institutional Quality Assurance Policy (IQAP) governs the development of new programs and the review and revision of existing programs. The Policy and its associated Procedures establish the requirements and criteria for each of the Protocols, are in compliance with the Quality Assurance Framework (QAF) as developed by the Ontario Council of Academic Vice Presidents (OCAV) and have been adopted by the Council of Ontario Universities (COU).

Protocols governed by the IQAP Policy include:

1. [**Cyclical Program Review**](#Section1_CyclicalReview) **Protocol**
2. [**New Program Protocol**](#Section2_NewDegrePrograms)
3. [**Expedited Approval Protocol**](#Section3_ExpeditedApprov_GradDip)
4. [**Major Modification Protocol** (Program Renewal and Significant Change)](#Section4_MajorMod)
5. **Audit Protocol**

Quality assurance is a shared responsibility between the Ontario Universities Council on Quality Assurance (the Quality Council) and Ontario’s universities. This collaboration ensures a culture of continuous improvement and supports a vision of a student-centred education. Quality assurance processes result in an educational system that is open, accountable and transparent. Bringing Ontario’s universities quality assurance practices into line with the latest international quality assurance standards facilitates greater international acceptance of an institutes’ degrees and improves graduate access to university programs and employment worldwide.

The Quality Council is the provincial body responsible for assuring the quality of degree programs/diploma programs and the integrity of the universities’ quality assurance processes as set by the Quality Assurance Framework. Every publicly assisted Ontario University that grants degrees and diplomas is responsible for ensuring the quality of its programs and is responsible for developing a policy that minimally meets the requirements of this Framework.

Based on the Quality Assurance Framework, Trent University has created both a holistic and integrated approach to quality assurance, one that is built on the Guiding Principles that inform every aspect of quality assurance and provide broad terms of best practices. The most relevant Principles (4 of the 15) have been included here, as they best reflect the quality assurance processes at the university level, and support Trent’s approach to continuous improvement.

* **Principle 1 – Experience of the Student**

The best interest of students is at the core of quality assurance activities. Quality assurance is ultimately about the centrality of the student experience in Ontario. It is about student achievement in programs that lead to a degree or diploma; about ensuring the value of the university degree in Ontario, and of ensuring that our highly qualified graduates continue to be strong and innovative contributors to the well-being of Ontario’s economy and society.

* **Principle 9 – Transparency**

The Quality Council operates in accordance with publicly communicated principles, policies and procedures. Both the Quality Council’s assessment process and the internal quality assurance process of individual institutions is open, transparent, and accountable, except as limited by constraints of laws and regulations for the protection of individuals.

* **Principle 13 – Continuous Monitoring and Quality Improvement**

Quality is not static, and continuous improvement should be a driver of quality assurance and be measurable. An important goal for quality assurance is to reach beyond merely demonstrating quality at a moment in time and to demonstrate ongoing and continuous quality improvement. The Quality Council is committed to sharing effective best practices in quality assurance to assist institutions in their quality improvement work.

* **Principle 14 – Expert Independent Peer Review**

Whether for new programs or cyclical review of existing programs, expert independent peer review is foundational to quality assurance.

The full set of Principles guide and inform all aspects of quality assurance while each Protocol includes a set of specific and detailed procedures that aligns with the Principles and best practices to ensure the ongoing improvement and enhancement of program offerings, specifically:

* To ensure that educational experiences of students are engaging and rigorous
* To actively monitor and review curriculum, to identify opportunities and develop plans for change, as necessary, to improve the student experience
* To meet evolving standards and measures of quality in the program and in response to the ongoing evolution of the discipline
* To focus on the continuous improvement of those facets of education that most directly impact academic experiences of students
* To ensure the continuing quality and relevance of programs to stakeholders, including the university, students, the public and the government.

Trent University has developed a robust quality assurance process that incorporates a model of multi-level assessment and an evidence-based approach that ensures a culture of ongoing and continuous improvement of its programs that prioritizes student-centre learning and experiences.

**Purpose and Scope of Each Protocol**

This policy will apply to all academic programs. For purposes of this section, ‘Program’ will be defined as all undergraduate and graduate degree programs, and for-credit graduate diploma programs offered in full or in part, or conjointly by Trent University in partnership with another post-secondary institution.

**IQAP Ratification**

This policy and its procedures are subject to ratification by the Quality Council, both initially and following each revision.

1. **Cyclical Program Review Protocol**

The purpose of this protocol is to assess the quality of existing academic programs and identify ongoing improvements, resulting in Final Assessment Plan and an Implementation Plan that will become the basis of a continuous improvement process through the monitoring of key performance indicators.

All existing undergraduate degree programs, graduate degree programs, and for-credit graduate diploma programs will be subject to periodic cyclical review conducted at a minimum once every eight years. Programs which have been closed or for which admission has been suspended are out of the scope of this review. Cyclical program review is a self-regulatory process subject to periodic audit by the Quality Council.

1. **New Program Protocol**

The purpose of this policy is to ensure that new academic programs are developed using internationally accepted practices and are based on the Degree Level Expectations that identify expectations of performance by graduates at a specified level of learning, e.g., Bachelor, Master and Doctoral. New programs will also incorporate a plan to ensure high quality and continuous improvement from the program’s inception.

The scope of this protocol applies to new undergraduate and new graduate programs whether offered by one institution or jointly with another institution. New degree programs require approval by the Quality Council.

1. **Expedited Approval Protocol**

The purpose of this protocol is to enable universities to secure approvals more efficiently for changes that are considered less wide-ranging than new programs and do not require an external review. The Protocol enables the evolution of programming in a timelier manner.

The scope of this protocol will apply to new for-credit graduate diplomas (Types 2 and 3), major modifications the university wishes to expedite, as well as the creation of a new standalone degree from an existing field in a graduate program. Final approval for this protocol rests with the Appraisal Committee.

1. **Major Modification Protocol**

The purpose of this protocol is to allow for timely program renewal of existing programs, on an ongoing and continuous basis. Academic units are encouraged to actively evaluate and identify revisions and modifications to curriculum and experiences that can be implemented at the University level, and will be reported annually to Quality Council.

The scope of this protocol will include significant changes made to existing programs that are considered less than a new program and greater than a minor modification. The Provost will be the final arbiter in determining if a major modification should be considered a new program. Major modifications will be reported annually to Quality Council.

1. **Audit Protocol**

The purpose of the Audit, to be conducted once every eight (8) years, is: to ensure transparency and accountability in the development and review of academic programs and to assure stakeholders (students, citizens, and the government) of the international standards of Trent’s quality assurance processes. This Protocol will monitor the extent to which the University has: improved/enhanced its quality assurance processes and practices; created an ethos of continuous improvement; and developed a culture that supports program-level learning outcomes and student-centered learning.

The University will be subject to a Cyclical Audit at least once every eight years. The scope of this protocol will include an evaluation of past and current practices; review of institutional changes made in policy, procedures, and practices in response to recommendations from the previous audit; confirmation that university’s practices comply with its ratified IQAP; and review of the university’s approach to continuous improvement.

## Acronyms

AP&B Academic Planning & Budget Committee

COU Council of Ontario Universities

CPRC Cyclical Program Review Committee

DLEs University Degree Level Expectations

FAR Final Assessment Report

GDLEs Graduate Degree Level Expectations

GSC Graduate Studies Committee

IQAP Institutional Quality Assurance Policy

OCAV Ontario Council of Academic Vice Presidents

OIPA Office of Institutional Planning and Analysis

PPG Provost’s Planning Group

QAF Quality Assurance Framework

USC Undergraduate Studies Committee

UDLEs Undergraduate Degree Level Expectations

## Definitions

### Academic Services

Those services integral to a student’s ability to achieve the program-level learning outcomes. Such services would typically include, but are not limited to, academic advising and counselling appropriate to the program; information technology, library and laboratory resources directed towards the programs; and internship, cooperative education and practicum placement services, where these experiential components are a required part of a program.

**Adjusted Oversight**

A guiding Principle of the Quality Assurance Framework is that the ‘Quality Council recognizes past performance of institutions and adjusts oversight accordingly.’ Adjusted oversight refers to the practice of decreasing or increasing the degree of oversight by the Quality Council depending upon the university’s compliance across the spectrum of its quality assurance practices. Oversight may also be increased in one area and decreased in another. Examples of adjusted oversight include a reduction or increase in the number of programs selected for a Cyclical Audit, a Focused Audit, adjusted requirements for documentation, and adjusted reporting requirements.

### Collaborative Specialization

An intra-university graduate field of study that provides an additional multidisciplinary experience for students enrolled in and completing the degree requirements for one of a number of approved master’s and/or PhD programs within the collaborative specialization. Students meet the admission requirements of and register in the participating (or ‘home’) program but complete, in addition to the degree requirements of that program, the additional requirements specified by the Collaborative Specialization. The degree conferred is that of the home program, and the completion of the Collaborative Specialization is indicated by a transcript notation indicating the additional specialization that has been attained (e.g., MA in Political Science with specialization in American Studies). A Collaborative Specialization must have:

* At least one core one-semester course that is foundational to the specialization and does not form part of the course offerings of any of the partner programs. This course must be completed by all students from partner programs registered in the specialization and provides an opportunity for students to appreciate the different disciplinary perspectives that can be brought to bear on the area of specialization. This course may serve as an elective in the student’s home program.
* Clear and explicit requirements for each Collaborative Specialization. In programs requiring a major research paper, essay, or thesis, the topic must be in the area of the collaborative specialization. In course-only master’s programs, at least 30% of the courses must be in the area of specialization including the core course described above. Courses in the area of specialization may be considered electives in the home program.
* Only core faculty that are those faculty members in the participating home programs who have an interest and expertise in the area of the collaborative specialization (this may include faculty primarily appointed to an interdisciplinary academic unit – for example, an Institute of American Studies – that provides the anchor for the specialization).
* Appropriate administrative and academic oversight/governance to ensure requirements associated with the specialization are being met.

### Combined Programs

A program of study that combines two existing degree programs of different types. The combination may, for example, consist of two existing graduate programs, or a graduate and an undergraduate program. In most cases, the combination will involve at least one professionally oriented program. As students normally pursue one degree program at a time, and if two qualifications are sought, the degree programs would best be pursued consecutively. However, there are cases where the combination of two programs may be advantageous from a student’s point of view.

If a combined program is proposed, there must be a demonstration that it provides advantages to students through time efficiency, benefits to scholarship, professional development, or other considerations. Students must be made fully aware of the requirements and the schedule for completion of both programs, before embarking upon the combined degree.

### Degree

An academic credential awarded on successful completion of a prescribed set and sequence of requirements at a specified standard of performance consistent with OCAV’s Degree Level Expectations and the university’s own expression of those Expectations and achievement of the degree’s associated learning outcomes.

### Degree Level Expectations

Academic standards that identify the knowledge and skill outcome competencies and reflect progressive levels of intellectual and creative development, as established by OCAV. The Degree Level Expectations (as detailed in the Appendices) are the Quality Assurance Framework’s link to the [Ontario Qualifications Framework (OQF)](http://www.tcu.gov.on.ca/pepg/audiences/colleges/oqf.html). Degree Level Expectations may be expressed in subject-specific or in generic terms. Graduates at specified degree levels (e.g., BA, MSc) are expected to demonstrate these competencies. Each university has undertaken to adapt and describe the degree level expectations that will apply within its own institutions. Likewise, academic units will describe their university’s expectations in terms appropriate to their academic programs.

### Degree Program

The complete set and sequence of courses, combinations of courses and/or other units of study, research and practice prescribed by an institution for the fulfillment of the requirements for each particular degree.

### Desk Audit

The process associated with the Audit Team’s auditing of documents that have been submitted for a university’s audit, as required as a preliminary step of the Cyclical Audit. A desk audit is one part of the process to determine an institution’s compliance with its own IQAP and/or the Quality Assurance Framework.

### Desk Review

A review of a New Program Proposal or Self-Study conducted by external reviewers that is conducted independently of the university (i.e., does not typically include interviews or in-person or virtual site visits). Such a review may, with the agreement of both the external reviewers and the Provost, replace the external reviewers’ in-person or virtual site visit in the New Program Approval process and Cyclical Program Review process for certain undergraduate and master’s program reviews.

### Diploma Program

The complete set and sequence of courses, combinations of courses and/or other units of study prescribed by a university for the fulfillment of the requirements for each particular for-credit or not-for-credit undergraduate and graduate diploma. Not-for-credit and for-credit undergraduate or post-graduate diploma programs are not subject to approval or audit by the Quality Council. The Quality Council recognizes three types of Graduate Diplomas, with specific appraisal conditions applying to each. In each case, when proposing a new graduate diploma, a university may request an Expedited Approval process. All such programs, once approved, will be subject to the normal cycle of program reviews, typically in conjunction with the related degree program.

* **Type 1** – Awarded when a candidate admitted to a master’s program leaves the program after completing a prescribed proportion of the requirements. Students are not admitted directly to these programs. When new, these programs require approval through the university’s Protocol for Major Modification (Program Renewal and Significant Change) prior to their adoption. Once approved, they will be incorporated into the university’s schedule for cyclical reviews as part of the parent program.
* **Type 2** – Offered in conjunction with a master’s or doctoral degree, the admission to which requires that the candidate be already admitted to the master’s or doctoral program. This represents an additional, usually interdisciplinary, qualification. When new, these programs require submission to the Quality Council for an Expedited Approval (no external review required) prior to their adoption. Once approved, they will be incorporated into the university’s schedule for cyclical reviews as part of the parent program.
* **Type 3** – A stand-alone, direct-entry program, generally developed by a unit already offering a related master’s or doctoral degree and designed to meet the needs of a particular clientele or market.Where the program has been conceived and developed as a distinct and original entity, the university will use the Expedited Approval. Although the Expedited Approval protocol does not involve an external review, new Type 3 GDips are to be included in the Schedule for Cyclical Reviews and will be subject to external review during the CPR process.

### Expedited Approval

Generally, approvals granted in a shorter time span with less required documentation. The Expedited Protocol requires submission to Quality Council of the proposed program change/new program and the rationale for it. This process does not require the use of external reviewers. Trent University recognizes two types of expedited approvals: new graduate diplomas and major modifications, as applicable.

### Field

### In graduate programs, an area of specialization or concentration that is related to the demonstrable and collective strengths of the program’s faculty and to a new or existing program. Universities are not required to declare fields at either the master’s or doctoral level.

### Focused Audit

### A close examination of a specific aspect of an institution’s quality assurance processes and practices that have not met the standards/requirements set out by the Quality Council in the QAF or in the institution’s IQAP. A Focused Audit does not replace a Cyclical Audit.

### Graduate Level Course

A course offered by a graduate program and taught by institutionally approved graduate faculty, where the learning outcomes are aligned with the Graduate Degree Level Expectations and the majority of students are registered as graduate students.

### Inter-Institutional Program Categories

For the following categories, the Protocol for New Program Approvals or the Protocol for Major Modifications will be used, as appropriate, and Quality Council’s Cyclical Program Review Processes will apply to all elements of those programs as offered by all partner institutions involved.

### Conjoint Degree Program – A program of study, offered by a postsecondary institution that is affiliated, federated or collaborating with a university that is approved by the University’s Senate or equivalent body, and for which a single degree document signed by both institutions is awarded.

### Cotutelle – A customized program of doctoral study developed jointly by two institutions for an individual student in which the requirements of each university’s doctoral program are upheld, but the student working with supervisors at each institution prepares a single thesis that is then examined by a committee whose members are drawn from both institutions. The student is awarded two degree documents, though there is a notation on the transcript indicating that the student completed their thesis under Cotutelle arrangements.

### Dual Credential/Degree Program – A program of study offered by two or more universities or by a university and a college or institute, in which successful completion of the requirements is confirmed by a separate and different degree/diploma document being awarded by each of the participating institutions.

### Joint Degree Program – A program of study offered by two or more universities or by a university and a college or institute in which successful completion of the requirements is confirmed by a single degree document.

### Major Modification

A ‘significant change’ in the program requirements, intended learning outcomes and/or human and other resources associated with a degree program or program of specialization as defined by the university. Major modifications include:

* Significant changes to a program’s requirements
* Significant changes to the learning outcomes
* Significant changes in modes of delivery and/or to essential resources
* Change to the name of a program
* Termination of a degree program

### Microcredentials

A designation of achievement of a coherent set of skills and knowledge, specified by a statement of purpose, learning outcomes, and strong evidence of need by industry, employers, and/or the community. They have fewer requirements and are of shorter duration than a qualification and focus on learning outcomes that are distinct from diploma/degree programs. While requiring recognition in the IQAP, proposals for the introduction or modification of a microcredential do not require reference to the Quality Council unless they are part of a New Program.

### Mode of Delivery

The means or medium used in delivering a program (e.g., lecture format, distance, online, synchronous/asynchronous, problem-based, compressed part-time, multi-campus, inter-institutional collaboration or other non-standard forms of delivery).

### New Program

Any degree credential or degree program (within an existing degree credential), currently approved by Senate or equivalent governing body that has not been previously approved for that institution by the Quality Council, its predecessors, or any intra-institutional approval processes that previously applied. A change of name, only, does not constitute a new program; nor does the inclusion of a new program of specialization where another with the same designation already exists (e.g., a new honours program where a major with the same designation already exists). For the purposes of the Quality Assurance Framework, a ‘new program’ is brand-new; the program has substantially different program objectives, program requirements and program-level learning outcomes from those of any existing approved programs offered by the institution.

### Options, Minor, Specialization, and Streams

An identified set and sequence of courses and/or other units of study, as well as research and practice within an area of disciplinary or interdisciplinary study that are completed on an optional basis in partial fulfillment of the requirements for the awarding of a degree, and that may be recorded on the graduate’s academic record. While requiring recognition in the IQAP, proposals for their introduction or modification do not require reference to the Quality Council unless they are part of a New Program.

Professional Master’s Program

Typically, a professional master’s degree is a terminal degree that does not lead to entry into a doctoral program. Such programs are designed to help students to prepare for a career in specific fields such as occupational therapy, physical therapy, finance or business among others. A professional master’s degree often puts a great deal of focus on real-world application, with many requiring students to complete internships or projects in their field of study before graduation. In contrast, a research master’s degree provides experience in research and scholarship, and may be either the final degree or a step toward entry into a doctoral program.

Program

For purposes of this policy, ‘Program’ will refer to all undergraduate and graduate degree programs, as well as for-credit graduate diploma programs.

Program-Level Student Learning Outcomes

Clear and concise statements that describe what successful students should have achieved and the knowledge, skills and abilities that they should have acquired by the end of the program, however an institution defines ‘program’ in its IQAP. Program-level student learning outcomes emphasize the application and integration of knowledge – both in the context of the program and more broadly – rather than coverage of material; make explicit the expectations for student success; are measurable and thus form the criteria for assessment/evaluation; and are written in greater detail than program objectives. Clear and concise program-level learning outcomes also help to create shared expectations between students and instructors.

Program Objectives

Clear and concise statements that describe the goals of the program, however an institution defines ‘program’ in its IQAP. Program objectives explain the potential applications of the knowledge and skills acquired in the program; seek to help students connect learning across various contexts; situate the particular program in the context of the discipline as a whole; and are often broader in scope than the program-level learning outcomes that they help to generate.

Program of Specialization (e.g., a Major, Honours Program, Concentration)

An identified set and sequence of courses, and/or other units of study, research and practice within an area of disciplinary or interdisciplinary study, completed in full or partial fulfillment of the requirements for the awarding of a degree and is recorded on the graduate’s academic record.

* A program constitutes complete fulfillment of the requirements for the awarding of a degree when the program and degree program are one and the same.
* A program constitutes ‘partial’ fulfillment of the requirements for the awarding of a degree when the program is a subset of the degree program. Typically, a bachelor’s degree requires the completion of a program of specialization, often referred to as a major, an honours program, a concentration or similar designation.

**Undergraduate Certificate**

A short form credential that forms a coherent program of study organized around a clear set of learning outcomes. Undergraduate certificates are comprised of undergraduate level academic content normally equivalent to a minimum of half a year of full-time study. While requiring recognition in the IQAP, proposals for the introduction or modification to an undergraduate certificate do not require reference to the Quality Council unless they are part of a New Program.

**Virtual Site Visit**

The practice of conducting all required elements of the external reviewers’ site visit using videoconferencing software and/or other suitable platforms. A virtual site visit will still include elements such as virtual meetings with students, faculty and other stakeholders. It may also include remote attendance at performances or events, and virtual facility tours. A virtual site visit may replace an in-person site visit for certain undergraduate and master’s program, with agreement from both the external reviewers and the Provost.

## Responsibilities

### Provost and Vice President Academic (Provost)

The Provost and Vice President Academic (from here on in referred to as Provost) is the administrative authority responsible for the University’s quality assurance policy and procedures and serves as Trent’s authoritative contact with the Quality Council. The Provost is the arbiter in deciding whether a proposal constitutes a new program or a major modification. The Office of the Provost supports the day-to-day workings of the processes governed by the IQAP.

### Deans

The Deans are responsible for the following:

* **For Cyclical Review** – ensures that Chairs/Directors or academic units, scheduled to undergo cyclical program review, understand their roles and responsibilities; sign off Self-Study and Appendices; consult with the Office of Provost on the ranking of external reviewers; nominate and invite internal representatives to participate in site visit; provide a Decanal Response to the External Reviewers’ Report and Departmental Response; consult on the Implementation Plan; and, ensure academic units are considering and acting on the recommendations requiring action. The Dean will be responsible for ensuring that the academic unit submits the follow-up Implementation Report to CPRC in accordance with the deadline provided in the Final Assessment Report. The Dean will normally attend CPRC when the Self-Study and FAR for programs under their responsibility are being discussed.
* **For New Programs** – provide guidance and support for the development of new program proposals; develop Initial Proposals for approval by PPG; ensure broad consultation (with interested parties including faculty, academic units and decanal councils); approval of budgets and proposed resources, review and sign-off on the Program Proposal and Appendices; consult with the Office of the Provost on the ranking of external reviewers; and completion and submission of Monitoring Reports to AP&B. The relevant Dean(s) will normally attend AP&B when new program proposals are being discussed.

### Academic Units

Academic Unit refers to a department or a school. Reference to a ‘Chair of a department’ in this policy is taken to include a Chair or Director of an undergraduate or graduate program, department or a school. Academic units will be responsible for the following:

* **For Cyclical Review** – Academic Units will be responsible for: writing the Self-Study and Appendices for degree programs/diplomas under their responsibility for cyclical program; nominating external reviewers, drafting and organizing the site visit schedule for the review, participating in the site visit; responding to the External Reviewers’ Report; implementing and reporting on recommendations identified for action in the Implementation Plan of the Final Assessment Report; and, providing an Implementation Report to CPRC.
* **For New Programs** – Academic units are often the proponents of new academic programming and are significantly involved in the development and consultation processes for new program proposals.

### Provost’s Planning Group (PPG) – [Terms of Reference and Membership](https://www.trentu.ca/vpacademic/committees-policies/provosts-planning-group)

PPG is the senior administrative committee that reviews and approves initial proposals for new programs.

### Senate – [Terms of Reference and Membership for all Senate Committees](https://www.trentu.ca/governance/sites/trentu.ca.governance/files/documents/Senate%20Committees%20ToR%20-%20May%207%202019.pdf)

Senate is responsible for approving the Institutional Quality Assurance Policy and any subsequent revisions. Senate is also responsible for approving new degree programs, new graduate diplomas, major modifications and some minor modifications to existing programs. Senate receives for information Final Assessment Reports on Cyclical Program Reviews, notification that the cyclical review process is completed following the CPRC’s approval of Implementation Reports, notification that Monitoring Reports for new programs have been reviewed and accepted by AP&B, and notice of minor modifications to existing programs.

Academic Planning & Budget Committee (AP&B)

AP&B, a standing committee of Senate, is responsible for reviewing and recommending for approval to Senate all new degree programs and graduate diplomas. AP&B – (1) initial review of program proposals prior to external review; (2) final review and approval of program documentation following external review and makes recommendations to Senate; and (3) review of Monitoring Reports. AP&B is also responsible for recommending to Senate the termination of an existing degree program.

Cyclical Program Review Committee (CPRC)

CPRC, a standing committee of Senate, is responsible for overseeing cyclical program reviews. CPRC reviews Self-Studies, External Reviewers’ Reports, Academic Unit, and Decanal Responses. CPRC drafts Final Assessment Reports (and Implementation Plans) for approval by the Provost. CPRC approves Implementation Reports and notifies Senate that the cyclical review process is completed.

Graduate Studies Committee (GSC)

GSC, a standing committee of Senate, is responsible for reviewing and recommending for approval to Senate modifications to existing graduate degree programs and diplomas. In consultation with the Provost, the Chair of GSC is the arbiter on whether a proposed change to an existing graduate program constitutes a major or a minor modification. GSC also makes recommendations to AP&B on proposed new academic programs, including degree requirements, curriculum and new courses.

Undergraduate Studies Committee (USC)

USC, a standing committee of Senate, is responsible for reviewing and recommending for approval to Senate modifications to existing undergraduate degree programs. In consultation with the Provost, the Chair of USC is the arbiter on whether a proposed change to an existing undergraduate program constitutes a major or a minor modification. USC also makes recommendations to AP&B on the proposed new academic programs, including degree requirements, curriculum and new courses.

# Institutional Quality Assurance Procedures

**Associated Policy:** Institutional Quality Assurance Policy

**Responsibility:** Provost and Vice President Academic

**Primary Contact:** Manager, Office of Provost and Vice President Academic

**Effective Date of Policy:** Sept 1, 2022; Sept 1, 2019; Sept 1, 2015; initial Sept 1, 2011

**Date for Next Review:** Fall 2027

**Senate Approval:** Mar 22, 2022; Apr 16, 2019; Dec 2, 2014; initial approval May 10, 2011

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## Purpose of Procedures

These procedures set out the steps and actions that will be undertaken to implement the Institutional Quality Assurance Policy for the cyclical review of existing programs, new program proposals, graduate diplomas requiring expedited approval, major modifications to existing programs and cyclical audit. These procedures are enacted further to the University’s Institutional Quality Assurance Policy.

## Provision of Support

Centre for Teaching & Learning (CTL)

CTL provides workshops and consultations to academic units to assist in the articulation of program objectives, program-level learning outcomes and mapping of curricula against degree level expectations.

Deans

The Deans are responsible for the following:

* **For Cyclical Review** – provides guidance and support to academic units undergoing a cyclical review; consults with academic units on recommendations identified for action and ensures that recommendations are being carried out prior to submission of the Implementation Plan.
* **For New Programs** – provides guidance and support for the development of new programs.

Finance Office

For New Programs: At the request of the Working Group for new programs, the Manager, Budgeting Services and/or the Associate Vice President Finance will review and consult on budgets for new program proposals.

Library

The Library will provide a Statement of Support for new degree programs and for degree programs undergoing cyclical review. The Office of the Provost will provide the University Librarian with a list of programs coming up for cyclical review; reports are provided to academic units in May. For new programs, the Working Group will contact the University Librarian directly to request a Statement of Support.

### Office of Institutional Planning and Analysis (OIPA)

* **For Cyclical Review**: OIPA collects, aggregates and distributes institutional data to assist undergraduate academic units in writing their Self-Studies, including but not limited to enrolment and retention data. This ensures data being used for the Self-Studies are both accurate and consistent across university degree programs. Programs are responsible for providing an analysis of the data. OIPA will aim to provide data by the beginning of May of the spring that academic units are preparing their Self-Studies. The Office of the Provost will notify OIPA of upcoming reviews.
* **For New Programs:** At the request of the Working Group for new programs, OIPA will review and consult on budgets for new program proposals.

**Research Office**

At the request of the Office of the Provost or the Working Group, the Office of Research will provide information on faculty and related research funding.

**School of Graduate Studies**

* **For Cyclical Review**: the School of Graduate Studies will provide relevant graduate data, including but not limited to enrolment and retention, for graduate programs coming up for cyclical program review. This ensures data being used for the Self-Studies are both accurate and consistent across university degree programs. Programs will be responsible for providing an analysis of the data. Data will be provided in early May to assist academic units in preparing their Self-Studies. The Office of the Provost will notify the School of upcoming reviews.

Templates

The Office of the Provost develops and posts [**templates**](https://www.trentu.ca/vpacademic/quality-assurance/templates) that, where appropriate, clearly reflect the Evaluation Criteria outlined in the QAF. Available templates will include the following:

* **For Cyclical Reviews**: Self-Study, Nomination of External Reviewers, External Reviewers’ Report, Student Surveys.
* **For New Degree Programs**: Program Proposal, Nomination of External Reviewers, External Reviewers’ Report.

Workshop

Each fall, the Office of the Provost holds a workshop(s) for academic units who will undergo a cyclical review in the following year. Normally chairs/directors and academic administrative assistants will attend the workshop(s). Deans and members of CPRC may also attend the workshop(s). The workshop(s) provides an overview of the cyclical review process and guidance in completing the self-study and appendices.

# Section 1 – Cyclical Program Review Protocol

**1.1 Prelude**

Periodic cyclical reviews will be conducted of all programs, undergraduate and graduate degree programs, as well as for-credit graduate diploma programs. Programs that have been closed or have had admissions suspended will not be part of the cyclical review process.

The Review will look closely at the key performance indicators including expectations of performance by graduates at specified levels of learning (DLEs); clearly identified program objectives, articulation of program-level learning outcomes and student achievement of the learning outcomes. Specifically, the cyclical review process will look at the program’s approach and plans for continuous improvement of the program to ensure that educational experiences offered to students are engaging and rigorous and plans for monitoring the program are sufficient to ensure continuous improvement.

Continuous improvement factors significantly in the Protocol for Cyclical Program Review, therefore those facets of education that most directly impact the academic experiences of students will be considered.

* The Self-Study and external assessment will provide internal and external perspectives on the program’s objectives, program-level learning outcomes and graduate outcomes.
* Degree level expectations, combined with the expert judgment of external disciplinary scholars, will provide the benchmarks for assessing a program’s standards and quality.
* The internal response to the external report will identify changes required to maintain the quality of the academic programs, and will be identified through the Final Assessment Report and associated Implementation Plan.

Broad Outcomes of the Review will include recommendations:

To ensure the continuous improvement of the program

To provide information to help make decisions for improvements or enhancements

To provide benchmarks for assessing program’s standards and quality

To ensure that curriculum remains relevant, current and effective

To provide assurance of quality to students, partners and government

More specifically, the key outcomes in this process will be the Final Assessment Report and the associated Implementation Plan, both of which will become the basis of a continuous improvement process through the monitoring of key performance indicators. The FAR provides an institutional synthesis of the cyclical review process and the Implementation Plan provides a plan for the program, identifying specific recommendations to improve or enhance the quality of the program.

1.2 Schedule of Reviews

The Office of the Provost establishes and maintains a [Schedule of Cyclical Reviews](https://www.trentu.ca/vpacademic/sites/trentu.ca.vpacademic/files/documents/AODA%20Current%20Roster%20-%20Alpha%20-%20Round%202%20QA%20-%20July%202018.pdf) that consists of the university’s full complement of undergraduate and graduate degree programs, as well as graduate diplomas. Each program must be reviewed every eight years and new programs will be scheduled for review no more than eight years after the date of the program’s first enrolment.

The Schedule includes campus location and mode of delivery if applicable (e.g., online), and identifies the academic unit responsible for each degree program, year of next review and year of previous review (if applicable).

**Note**: The Schedule of Reviews indicates the year in which the site visit will take place and academic units are expected to begin preparing review documentation in the academic year prior to the site visit.

Related Degree Programs. Related degree programs will be reviewed concurrently. The Manager will determine, in consultation with the Deans, Program Chairs and Directors, which programs will be reviewed concurrently. In cases where more than one degree is being reviewed, the quality of each degree program and the learning environment of the students in each degree program will be independently evaluated.

Multiple Locations and/or Modes of Delivery. In cases where a degree program is delivered in more than one location with different faculty and resources or is offered through more than one mode of delivery, each distinct offering will occur on the master list of degree programs, though reviews of related degree programs will normally occur concurrently.

**Joint Programs with Other Institutions**. The University will work with other Quality Assurance offices to identify the date for review where a program is offered in partnership with another university and/or college.

1.3 Timeline, Phases and Principal Components

The review process takes place over a three to four-year period and occurs in five distinct phases comprised of five principal components.

1. **Phases**
* Phase 1 – Preparation of Self-Study and Appendices (in academic year prior to site visit)
* Phase 2 – Site Visit (takes place in academic year indicated on Schedule of Reviews) and External Reviewers’ Report submission
* Phase 3 – Program and Decanal Responses (prepared in response to External Reviewers’ Report)
* Phase 4 – Final Assessment Report and Implementation Plan (CPRC reviews documentation and prepares Final Assessment Report with Implementation Plan)
* Phase 5 – Implementation Report and Notification of Review Completion (academic unit will follow up on recommendations identified for action in Implementation Plan)
1. **Principal Components**
* **Self-Study** – a critical self-appraisal of the strengths and weaknesses and a plan for continuous improvement for the degree program from the perspective of members of the academic unit responsible for delivery of the degree program
* **External Reviewers’ Report** – external evaluation of program quality by disciplinary/interdisciplinary experts including recommendations for the improvement of the degree program
* **Internal Responses by both the Program and Dean(s)** – provides internal perspective in response to External Reviewers’ Report
* **Final Assessment Report** **and Implementation Plan** – institutional evaluation by CPRC based on the review of the Self-Study, the External Reviewers’ Report, and the Responses by the academic unit(s) and the Dean(s); will include a Summary and an Implementation Plan.
* **Implementation Report** – follow-up reporting on the principal findings of the review and the implementation of the recommendations. The academic unit will provide detailed reporting on each recommendation identified as requiring action.

1.4 Relationship with Accreditation Processes

The Office of the Provost may consult with accredited programs in setting the schedule; however, cyclical reviews are not normally scheduled to coincide with professional accreditation. The Cyclical Program Review process does not currently allow for elements of an accreditation to replace parallel/related requirements in the cyclical program review process.

## 1.5 Joint Degree Programs

In cases where a Trent degree program is offered jointly or in partnership with another institution, the Office of the Provost will work with the partner institution’s counterpart office to ensure that the requirements of both institutions’ quality assurance policies and procedures will be met in a way that avoids duplication and streamlines the process as much as possible. In cases where Trent’s processes are different from the partner institution, all efforts will be made to comply with the QAF.

Specifically:

* There will be a single Self-Study that will explain how input was received from faculty, staff and students at each partner institution.
* Each partner institution will be involved in nominating, selecting and ranking of external reviewers.
* Each partner institution may include an internal representative that will participate in the site visit with the external reviewers.
* Site visits will include all partner universities and, at least where partners are institutions in Ontario, will include all sites.
* There will be a single Response to the External Reviewers’ Report, prepared jointly by members of the academic units of each partner institution. There will be a single Decanal Response prepared jointly by the Deans of each partner institution.
* There will be a single Final Assessment Report that will include a Summary and an Implementation Plan. The FAR will be subject to the governance processes at each partner institution and will require approval by both institutions. Partner institutions will agree on an appropriate monitoring process for the Implementation Plan.
* There will be a single Implementation Plan prepared jointly by the academic units in consultation with the Deans.
* The FAR (with executive summary and Implementation Plan) will be posted on the websites of affiliated institutions.

Any potential disputes or issues arising with partner institutions will be handled by the Office of the Provost, initially by the Manager and, if required, escalated to the Provost.

1.6 Steps in the Cyclical Program Review Process

| **Steps** | **Description** | **Documentation Required for Auditing Purposes** |
| --- | --- | --- |
| Step 1 | Notification of Cyclical Program Review | * Notification Memo
 |
| Step 2 | Workshop/Orientation Session | * Agenda or PowerPoint
 |
| Step 3 | Preparation and Collection of Data for Self-Study & Appendices* Review/revision of Program Objectives, Program-Level Learning Outcomes, Curriculum Mapping
* Conduct surveys of current students and alum
* Collect and compile Course Syllabuses and Curriculum Vitae
* Receive Data from OIPA/Grad Ofce/Research Ofce and Library Statement of Support
* Analyse Data
 | * No Documentation
 |
| Step 4 | Nomination, Ranking and Selection of External Reviewers* Nomination and Ranking
* Fall or Winter Site Visit
* Letters of Invitation
* Declaration of Arm’s Length
 | * Nomination Form
* Letters of Invitation
* Declaration of Arm’s Length
 |
| Step 5 | Role and Selection of Internal Representative (optional) | * No Documentation
 |
| Step 6 | Writing and Completion of Self-Study using Template | * Self-Study and Appendices
 |
| Step 7 | Dean Sign-Off on Self-Study and Appendices | * Signature on Self-Study

(included with Step 6 documentation) |
| Step 8 | CPRC Reviews Self-Study and Appendices | * CPRC Minutes
 |
| Step 9 | Site Visit and Instructions | * Site Visit Schedule
* Reviewer Instructions
 |
| Step 10 | External Reviewers’ Report  | * External Reviewers’ Report
 |
| Step 11 | Program Response to External Reviewers’ Report | * Program Response
 |
| Step 12 | Decanal Response to External Reviewers’ Report | * Decanal Response
 |
| Step 13 | CPRC Development of Final Assessment Report, Executive Summary and Implementation Plan | * CPRC Minutes
 |
| Step 14 | FAR Approval and Distribution | * FAR with Provost’s Signature
* QC Letter of Review
 |
| Step 15 | Implementation Report by Academic Units | * Implementation Report
 |
| Step 16 | Dean Signs Off Implementation Report | * Signature on Implementation Report (included with Step 15 documentation)
 |
| Step 17 | CPRC Reviews Implementation Report | * CPRC Minutes
 |
| Step 18 | Notification that Review is Complete | * Letter of Completion
 |

1.7 Process

### Step 1 – Notification of Cyclical Program Review

**Timing:** In the academic year prior to site visit, timing of notification will vary between summer and fall.

The Office of Provost notifies the academic units that degree programs for which each is responsible will be reviewed in the following year. This notification will specifically indicate distinct offerings for each program, i.e., campus location, online offering.

###

### Step 2 – Workshop/Orientation Session

**Timing:** Fall of the academic year prior to site visit

Office of Provost organizes workshop(s) for academic units to review cyclical review process and required steps to complete self-study and appendices.

### Step 3 – Preparation & Collection of Data for Self-Study & Appendices

**Timing**: During the academic year prior to site visit

A number of supports are available to assist academic units in the preparation and completion of cyclical review documentation. See [**Provision of Support**](#Prov_of_Support).

In the academic year prior to the site visit, the academic unit will:

* Develop/review/revise Program Objectives, Program-Level Learning Outcomes, Curriculum Mapping
* Conduct surveys of current students and alum – [**see sample templates**](https://www.trentu.ca/vpacademic/quality-assurance/templates)
* Collect and compile Course Syllabuses and Curriculum Vitae
* Receive Data from OIPA, Grad Studies, Office of Research (normally provided in May)
* Receive Library Statement of Support (May)
* Begin/complete Analysis of Data

### Step 4 – Nomination, Ranking and Selection of External Reviewers

**Timing:** Normally in May preceding academic year of site visit

1. **Site Visit Date** – Academic unit selects Fall or Winter Site Visit
2. **Number of Reviewers Required**

|  |  |
| --- | --- |
| Degree Program | External Reviewers |
| Undergraduate | 2 reviewers |
| Graduate  | 2 reviewers |
| Concurrent Undergraduate and Graduate | 2-3 reviewers |

1. **Qualifications of External Reviewers** – will normally:
* Be Associate or Full Professors
* Have suitable disciplinary expertise, qualifications and experience in developing, assessing and/or managing degree programs
* Have combined professional experience to cover the majority areas of study and/or fields of expertise
* At least one of the reviewers will have expertise in teaching and learning – content and program delivery, assessment/evaluation, curriculum mapping, and learning outcomes
* In the case of graduate degree programs, have experience with graduate teaching and supervision
* Be at arm’s length.
1. **Arm’s Length Requirement.** External reviewers must be at arm’s length from members of the academic unit whose program(s) is being reviewed. Upon accepting an invitation to review a degree program, reviewers will be required to declare in writing that they are at arm’s length. To avoid conflict of interest and the appearance of conflict of interest, reviewers will not
* Be a close friend or relative of a member of the academic unit whose degree program(s) is under review;
* Have been a supervisor within the past ten years of a member of the academic unit whose degree program(s) is under review;
* Have been a regular or repeated external examiner of students in the academic unit whose degree program(s) is under review;
* Have collaborated (i.e., significantly contributed to intellectual work with another) within the past ten years with a member of the academic unit whose degree program(s) is under review, or have plans to collaborate with a member in the immediate future;
* Have been an instructor or a visiting scholar within the past ten years in the academic unit whose degree program(s) is under review;
* Have been a student within the past ten years in the academic unit whose degree program(s) is under review; or
* Have received an undergraduate or a graduate degree from Trent in the past ten years.
1. **Process**. The Office of the Provost will notify academic units of the deadline for submission of Nominations of External Reviewers. Members of the academic unit are not to contact possible external reviewers for any reason. The academic unit will complete the [Nomination of External Reviewers’ template](https://www.trentu.ca/vpacademic/quality-assurance/templates) that includes the names and required information of no fewer than six qualified persons who they are nominating to serve as external reviewers, all of whom are to be at arm’s length.
* If there are **two or more distinct areas of study** within the degree program(s) to be reviewed, all efforts will be made to ensure a balance of external reviewers with the required expertise. Areas of expertise should be clearly identified for each nominated external reviewer.
* In the case of a **concurrent review of an undergraduate degree program(s) and a related graduate degree program(s)**, nominated external reviewers should be qualified by discipline and experience to review both program levels.
* In the case of **joint programs**, the list of External Reviewers will be developed jointly with the partner institution(s).

The completed [**Nomination of External Reviewers’ form**](https://www.trentu.ca/vpacademic/quality-assurance/templates) will be sent to the Dean(s). On behalf of the Academic Unit, the Dean(s) will submit the Nominations of External Reviewers to the Office of the Provost.

1. **Declaration of Arm’s Length**. The Office of the Provost will review the nominations and determine that the external reviewers are at arm’s length from the degree program(s) being reviewed. External reviewers will also be expected to declare that they are at arm’s length from the degree program(s) being reviewed.
2. **Ranking of External Reviewers**. The Office of the Provost, in consultation with the Deans, will develop a ranked list of nominated external reviewers. In the case of degree programs to be offered jointly with another institution, the Office of the Provost will develop a ranked list of External Reviewer(s) in consultation with the partner institution.
3. **Invitation to External Reviewers.** The Office of the Provost will contact the proposed reviewers in ranked order.

### Step 5 – Role and Selection of Internal Representative (optional)

The inclusion of an internal representative will be optional and whether to have an internal will be determined by the Office of the Provost in consultation with the Dean(s).

1. **Role of Internal Representative.** Using his/her knowledge of institutional practices and culture, the internal faculty representative facilitates the work of the External Reviewers during the site visit. The internal representative accompanies the external reviewers throughout the site visit and attends meetings with the Dean(s), Chair(s) and/or Director(s), faculty, students, and staff. The internal representative does not participate in the writing of the External Reviewer Report, except to answer questions, as appropriate.
2. **Process**. The Dean(s) under whose authority the degree program(s) is being delivered will provide a list of potential faculty members from within the appropriate division. Based on previous experience and past practice, the University has determined that the internal should be from within the same decanal division and not from the academic unit whose program is being reviewed. Normally the faculty member will have 10+ years of experience, and when a graduate program is being reviewed, the internal representative should be an individual experienced in graduate teaching and supervision. The Office of the Provost will consult with the Dean to rank the internal nominees, and the Dean will invite faculty, according to the ranked list, to participate in the site visit.
3. **Joint Program.** The selection of an internal faculty member requires joint input and may include one internal member from each partner institution, or preference may be given to an internal member from another academic unit offering a joint program, preferably with the same partner institution.
4. An additional member, appropriately qualified and experienced, may be assigned from industry or the professions at the discretion of the Provost, in consultation with the Dean.

###

### Step 6 – Writing and Completion of Self-Study Using Template

The academic unit(s) responsible for a program(s) under review will prepare a Self-Study using the Self-Study template and data collected in Step 3. The template is designed to incorporate all Evaluation Criteria as outlined in [**Appendix A**](#Appendix_A).

1. **Writing of Self-Study – Participation and Involvement**

The Self-Study will describe the extent of participation of faculty, staff and students, and indicate how the Self-Study was written, including how the views of faculty, staff, and students were obtained. All faculty in the program(s) being reviewed should be involved in the writing and/or review of the Self-Study and Appendices; this includes partnering institutions; academic units that share responsibility for the program, and faculty from all degree programs where multiple degree programs are being reviewed. The Self-Study will include the views of others deemed to be relevant, including staff, students, graduates of the program(s), representatives of industry, related professions, and practical training programs, professional associations, and employers.

1. **Components of Self-Study**

The Self-Study will:

* Be broad-based, reflective, forward-looking
* Address how continuous improvement has been incorporated into processes and practices to improve/enhance student experience and program quality
* Be a critical analysis of each degree program being reviewed; an assessment of program strengths; and opportunities to improve and enhance the program
* For the first Cyclical Review of a new program, include steps taken to address any issues/items flagged in the Implementation Report for follow-up and items identified for follow-up by the Quality Council during the approval process
* Describe how concerns and recommendations raised in previous reviews have since been addressed, specifically those marked for follow-up in the FAR, Implementation Plan and subsequent Implementation Reports.
* Address each of the required Evaluation Criteria as outlined in **Appendix A**
* Include program-related data and measures of performance, including applicable provincial, national and professional standards (where available)
* Identify any unique curriculum or program innovations, creative components or significant high impact practices.
* Describe areas that the program’s faculty, staff and /or students have identified as requiring improvement, or as holding promise for enhancement and/or opportunities for curricular change
* Assess the adequacy of all relevant services and supports that directly contribute to the academic quality of each program under review

###

1. **University Priorities**

Academic units may reflect on University priorities, commenting on the following initiatives and how each is integrated into or reflected in the offering of the program: through program objectives, program-level learning outcomes, curriculum, program delivery, instruction and/or student recruitment:

* Indigenization
* Equity, Diversity and Inclusion
* Anti-Racism

Commenting on these initiatives is not a requirement however the Self-Study template includes a section on University Priorities and will recommend consideration during the writing of the Self-Study. Academic Units will be encouraged to discuss these initiatives under evaluation criterion 1.a) Consistency of the program’s objectives with the institution’s mission and academic plans.

1. **Multiple Programs Being Reviewed**

In cases where multiple programs are being reviewed, academic units will discuss with the Office of the Provost whether one or more self-studies should be developed. In cases where multiple programs are being presented in one self-study, the self-study will:

* Review and clearly identify and discuss each distinctive offering (e.g., campus location, mode of delivery) of the program throughout the self-study template
* Explicitly address quality of each program and learning environment of students in each program
* Identify the program objectives, program-level learning outcomes, and complete curriculum mapping for each degree program.

### Step 7 – Dean Sign-Off on Self-Study and Appendices

The Self-Study and Appendices will be submitted to the Dean(s) for review. Where the head of an academic unit whose program(s) is being reviewed is a Dean, the Self-Study and Appendices will be submitted directly to the Office of the Provost.

The Dean(s) will provide feedback and facilitate improvements. When the Dean(s) is satisfied that the documentation is complete and accurate, they will sign off on the document and submit it to the Office of the Provost for distribution to CPRC.

### Step 8 – CPRC Reviews Self-Study and Appendices

The Cyclical Program Review Committee (CPRC) will review the Self-Study and Appendices prior to distribution to the External Reviewers. The applicable Dean(s) typically attend the CPRC meeting. CPRC will either approve the documentation or advise the unit and the Dean(s) of revisions to be made. Once revisions are completed, the documentation is ready to be distributed to the External Reviewers.

###

### Step 9 – Site Visit and Instructions

Once the Self-Study has been approved by CPRC, it is ready for external review.

1. **On-Site or Virtual Site Visit** –The external review will normally be conducted in-person. On-site visits will be required for doctoral and thesis-based masters’ programs. The Provost, or relevant Dean, with clear justification for the decision, may propose a virtual site visit for undergraduate and professional masters’ programs. The External Reviewers must be satisfied that a virtual site visit is acceptable.
2. **Site Visit Schedule** – The Office of the Provost will oversee the arrangements for the in-person or virtual site visit. An in-person site visit will normally be scheduled for two consecutive days, though a review of multiple degree programs may require three (3) days, particularly if a visit to more than one campus is necessary. A virtual site visit may be scheduled over a longer period of time. The Office of the Provost will assist with travel and accommodation plans.

The academic unit responsible for the degree program under review will draft the schedule for the site visit in consultation with the Office of the Provost. The Office of the Provost will provide a sample itinerary to the academic unit to use as a guide when scheduling the site visit. External reviewers will typically meet with the Provost, relevant Dean(s), Chair(s)/Directors(s), faculty, and students. The site visit may also include meetings with program graduates, representatives of industry, professional advisory committees (e.g., in Education, Nursing, Social Work), community partners, support positions (i.e., Nursing preceptors, faculty advisors, associate teachers), and employers. An in-person site visit may include a tour of facilities and the library.

The Office of the Provost has final approval of the schedule to ensure that all necessary consultations take place.

1. **Documentation to Share with External Reviewers** – The Office of the Provost will provide External Reviewers and the internal representative with review documentation.

Documentation will include:

* Instructions
* Trent’s Institutional Program Quality Assurance Policy and Procedures (IQAP) – that will include Evaluation Criteria and Degree Level Expectations
* Self-Study and Appendices (course syllabuses, faculty CVs, data, student surveys, library statement of support)
* Template for External Reviewers’ Report. The template includes all Evaluation Criteria set by the Quality Council (see **Appendix A**)
* Site Visit Schedule
1. **Pre-Meeting** - For both in-person and virtual site visits

A pre-meeting of the external reviewers and the internal representative (optional) will be scheduled to provide guidance and direction. The Office of the Provost will review the instructions with the external reviewers, explain their roles and obligations, and respond to any questions related to documentation, process, and the final report.

Reviewers will be asked to recognize the University’s autonomy to determine priorities for funding, space, and faculty allocation and respect the confidentiality of all aspects of the review process. The external reviewer(s) will also be invited to contact the Office of the Provost should any questions arise during the review process.

### Step 10 – External Reviewers’ Report

**Timing:** One month following site visit

The External Reviewers will submit one joint report, where possible, using the Template provided. The preference is for one report with a distinct set of recommendations for each program under review. There may be situations, as determined by the Office of the Provost, where separate reports may be submitted.

1. **Preliminary Feedback**. The External Reviewers will provide preliminary oral feedback to the Provost (or designate) before the conclusion of the site visit.
2. **Substance of Report**. The Report will:
* Address the substance (clarity and completeness) of the Self-Study.
* Address all required Evaluation Criteria as specified in **Appendix A**.
* Address the quality of each academic program and the learning environment of the students for each distinct program being reviewed in the Self-Study.
* Describe the program’s strengths. Identify and commend distinctive attributes of each discrete program (i.e., multiple campuses, online), identify any notable strong and creative and/or clearly innovative aspects. Provide evidence of any significant innovation or creativity in the content and/or delivery of the program relative to other such programs.
* Describe areas for improvement and opportunities for enhancement – include at least three (3) recommendations for specific steps that will lead to the continuous improvement of the program, distinguishing between those the program can act upon and those that require external action.
* Respect the confidentiality required for all aspects of the review process.
* Recognize the university’s autonomy to determine priorities for funding, space and faculty allocation. Recommendations related to resources, specifically faculty and space requirements must be directly linked to issues of program quality and/or sustainability.
1. **Special Instructions**. In addition, External Reviewers may be asked to respond to any additional questions from the Provost/Dean(s) and/or CPRC in their final report. Such instruction may include a request to respond to:
* Issues of special concern identified for the degree program(s) under review, for example, appropriateness of the curriculum, breadth of the curriculum, enrolment levels, recruitment, quality of the permanent or limited-term faculty, adequacy of staffing, space or equipment, program-specific library resources, etc.; and/or
* Concerns and/or recommendations raised in previous external reviews
* For initial reviews, issues identified in the ‘Notes’ from the Quality Council’s approval letter

1. **Submission of Report**. The Report(s) should be submitted electronically to the Provost no later than one month after receiving the documents in the case of a desk audit, or one month from the date of the site visit. The Report should be complete and comprehensive (see Step 10b), and specifically include three (3) distinct recommendations for specific steps that will lead to the continuous improvement of each distinct program under review.

Upon receipt of the External Reviewers’ Report, the Report will be reviewed by the Office of the Provost to ensure that it provides a comprehensive assessment of the degree program(s). If the Report is not satisfactory, the Office of the Provost, in consultation with the Dean(s) and Provost will identify any gaps and request additional information from the External Reviewers.

1. **Distribution of Report**

Once the Report is deemed satisfactory, the Office of the Provost will distribute the External Reviewers’ Report to the Chair/Director of the academic unit. The External Reviewers’ Report is considered a confidential document and will be distributed to TUFA faculty within the academic unit, and the departmental committee that oversees curriculum that may include part-time faculty members and students. Where appropriate, any confidential and/or sensitive information will be redacted prior to distribution. Confidential/sensitive information will be discussed with the Dean, and any action taken will be determined in consultation with the Office of the Provost.

### Step 11 – Program Response to External Reviewers’ Report

**Timing**: One month from date of request from Office of Provost

The Office of the Provost will ask the Chair/Director to provide a Response from their academic unit to the External Reviewers’ Report and specifically to the Report’s recommendations. The Chair/Director will consult with members of the academic unit in finalizing a Response. The Response will be submitted to their Dean and to the Office of the Provost within one month of the request.

###

### Step 12 – Decanal Response to External Reviewers’ Report and Program Response

**Timing:** One month from receiving response from academic unit

After receipt of the Response by the academic unit, the Dean(s) will provide a written Response within one month, responding to the Self Study, plans/recommendations proposed in the External Reviewers’ Report, and the Program’s Response. The Dean will respond to each of the recommendations identified in the External Reviewers’ Report, specifically addressing:

* Any changes in curriculum, program organization, policy or governance necessary to meet the recommendations
* Any resources, financial and otherwise, that will be provided to support the implementation of those recommendations requiring resources; and
* A proposed timeline for the implementation of any recommendations.

**Exception to Decanal Response**: In cases where the Dean is the Divisional Head (e.g., Nursing, Education), a joint response will be prepared by the faculty and the Dean.

### Step 13 – CPRC Development of Final Assessment Report (FAR), Executive Summary & Implementation Plan

**Timing:** Normally in the academic year following site visit (for fall site visits – this step may take place sooner)

The Cyclical Program Review Committee will review the Self Study, External Reviewers’ Report, Program and Decanal Responses and will develop and finalize the FAR based on Committee discussion which will be drafted by the Office of the Provost. The applicable Dean(s) will typically attend the CPRC meeting. CPRC, in consultation with the Dean(s) will select those recommendations for action.

The **Final Assessment Report** will include the following:

1. An **Executive Summary** that identifies:
* Timelines of key review elements
* Summary of people/groups included in the site visit
* Outcomes of the review and recommendations.
* Significant strengths of the degree program(s)
* Opportunities to enhance program quality with a view towards continuous improvement and a focus on student experiences and learning – for each degree program reviewed

 The Executive Summary will not include any confidential information.

1. **Recommendations with Program and Decanal Responses**
* A list of all recommendations and the associated separate internal responses and assessments from the academic unit and the Dean.
* Any additional recommendations that the academic unit, the Dean, and/or University may have identified as requiring action as a result of the program’s review
1. An **Implementation Plan** that will:
* Identify those recommendations needed to maintain the quality of the programs, and promotes the ongoing and continuous improvement of the program; this process will require looking at key performance indicators of the program
* Set out and prioritize the recommendations that are selected for implementation and/or action
* Identify appropriate timelines for acting on and monitoring the implementation of the recommendations
* Identify and explain the circumstances related to any recommendations that will not be implemented
* Identify who will be responsible for the timely implementation and monitoring of the recommendations (e.g., Dean(s), University Librarian, Chair of a department, Director of a graduate degree program)
* If applicable, identify the source(s) of any additional resources required to implement the recommendations (e.g., Provost, Dean)

Confidential information will be excluded from the FAR, will be documented separately, and handled by the Office of the Provost in consultation with the appropriate Dean(s).

**Step 14 – Approval and Distribution**

The Provost will approve the Final Assessment Report and the Office of the Provost will be responsible for the timely distribution of documentation.

1. The FAR will be distributed to:
	* Relevant Dean(s)
	* Academic Unit (chairs/directors) to take responsibility and act on as appropriate (with confidential information removed)
2. The Executive Summary and Implementation Plan will be:
* Shared with Senate - for information
* Posted to the University’s website. Academic units are not required to post the Executive Summary and Implementation Plan to their websites.
1. The FAR will be submitted to Quality Council as they are approved.

### Step 15 – Implementation Report

**Timing:** Normally, 12 months following approval of Final Assessment Report; a shorter or longer time may be recommended based on complexity of recommendations marked for action.

The Chair/Director will be responsible for executing the identified recommendations in consultation with the Dean(s). The Dean(s) will be responsible for ensuring that the academic unit implements the recommendations and submits the follow-up Implementation Report in a timely manner. The Office of the Provost will remind academic units and Deans of upcoming deadlines.

###

### Step 16 – Dean signs off Implementation Report

The Dean will review Implementation Report and sign off.

###

### Step 17 – CPRC reviews Implementation Report

CPRC reviews the Implementation Report to ensure that the program has satisfactorily addressed the recommendations identified for action in the Implementation Plan. CPRC may request additional information, and in some cases may require a follow-up report from the academic unit.

**Step 18 – Notification that Review is Complete**

Once CPRC accepts the Implementation Report, the cyclical review for that degree program is completed, and is reported to: Chairs/Directors of reviewed degree programs, Dean(s) under whose authority the degree program(s) being reviewed is offered; and Senate (for information)**.**

**1.8 Publication of Documentation**

1. **Documents Subject to ‘Public Access’**

The following documents will be posted publicly on the university’s website:

* Schedule of Reviews
* Executive Summary and Implementation Plan
* Implementation Reports

## Documents Not Subject to ‘Public Access’

Given the highly sensitive nature of the documentation used in the cyclical program review process, in which academic units and external reviewers are asked to be critical in their evaluations, the documents produced will be deemed confidential. Institutional failure to protect the confidentiality of the documents reviewed by CPRC could seriously impair frank appraisal, discourage free flow of analytical information, and compromise the efficacy of the review process.

The following documents will be deemed to be confidential and therefore not subject to ‘public access’:

* Information made available in preparation for the Self-Study
* Specialized instructions to the External Reviewers
* Self-Study and Appendices
* External Reviewers’ Reports
* Final Assessment Report in its entirety.

# Section 2 – New Program Approval Protocol

2.1 Prelude

The development of new undergraduate and graduate programs will ensure that educational experiences are both engaging and rigorous. New programs will meet the degree level expectations, which are the academic standards of Ontario universities that identify expectations of performance by graduates at a specified level of learning, e.g., Honours, Master, and Doctoral.

The process will look closely at the key performance indicators including degree level expectations, program objectives, program-level learning outcomes, student achievement of learning outcomes, as well as the instructional and physical resources needed to achieve the program-level learning outcomes.

The monitoring of a new program is an essential element of continuous improvement, not only in the development of the program but also for the monitoring and continuous improvement of the program once the new program is running. The program proposal will include a plan for the continuous improvement of the program, and the interim monitoring report will review and evaluate the program’s success in realizing its objectives.

## 2.2 Approval Requirements and Timelines

New degree programs and graduate diplomas must be approved by Trent University’s Senate and by the Ontario Universities Council on Quality Assurance (Quality Council). The Office of the Provost manages the approval process for new program development and will direct and facilitate the process through the approval stages.

**Approval by Senate** – Following the internal procedures laid out below, the Chair of the Academic Planning & Budget Committee (AP&B) will submit a new program proposal to Senate for approval.

**Approval by the Quality Council** – The Office of the Provost will send Senate-approved proposals to the Quality Council for approval. Decisions on a proposed new degree program are normally received within 45 days of submission. When the Appraisal Committee of the Quality Council requires additional information, decisions will normally be made within a further 30 days of the Committee receiving a satisfactory response to its request. The Appraisal Committee will make a decision on Graduate Diplomas whereas new programs require the approval of Quality Council.

## 2.3 Intention to Offer New Programs and Offers of Admission

**Intention to Offer New Program** – Subject to approval by the Provost, the University may publicly announce its intention to offer a new undergraduate or graduate degree program in advance of having received 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 the program is subject to formal approval’ as per QAF 2.7 Public announcement of new programs.

**Offers of Admission** – to a new degree program may not be made until approval of the degree program has been received by the Quality Council.

## 2.4 Joint Degree Programs

In cases where a proposed new degree program will be offered jointly or in partnership with another institution, the Office of the Provost will work with the partner institution’s counterpart office to streamline the process to meet requirements of both institutions’ quality assurance policies and procedures and avoid duplication. In cases where Trent’s processes are different from the partner institution, all efforts will be made to comply with the QAF.

Specifically:

* Representatives from each institution will be members of the Working Group.
* Each institution will be involved in the consultation and development of the Program Proposal.
* Each partner institution will be involved in nominating, selecting and ranking of external reviewers.
* Site visits will include all partner institutions, at least where partners are institutions in Ontario.
* There will be a coordinated single internal response by the Working Group to the External Reviewers’ Report.

Any potential disputes or issues arising with partner institutions will be handled by the Office of the Provost, initially by the Manager and, if required, escalated to the Provost.

## 2.5 Steps in the Approval Process for New Programs

| **Steps** | **Description** | **Documentation Required for Auditing Purposes** |
| --- | --- | --- |
| Step 1 | In-Principle Approval by PPG and Working Group  | * PPG Minutes
* Initial Proposal
 |
| Step 2 | Development of Full Program Proposal and Appendices using Template* Consultation – faculty, academic units, Decanal Councils
* Budget – in consultation with Dean(s) and Finance Office
* Program Objectives, Program-Level Learning Outcomes and Curriculum Mapping
* New Course Development and Course Syllabuses Collection
* CVs – Collection of Faculty CVs
* Library – Statement of Support – requested from University Librarian
 | * Program Proposal and Appendices
 |
| Step 3 | Dean Sign-Off on Program Proposal and Appendices | * Dean Signature on Proposal
 |
| Step 4 | Nomination, Ranking and Selection of External Reviewers * Nomination and Ranking
* Declaration of Arm’s Length
* Letter of Invitation
 | * Nomination Form
* Declaration of Arm’s Length
* Letters of Invitation
 |
| Step 5 | USC/GSC Review – of Program Proposal and Appendices | * USC or GSC Minutes
 |
| Step 6 | AP&B Initial Review – of Program Proposal and Appendices | * AP&B Minutes
 |
| Step 7 | Site Visit and Instructions | * Site Visit Schedule
* Reviewer Instructions
 |
| Step 8 | External Reviewers’ Report | * External Reviewers’ Report
 |
| Step 9 | Working Group’s Response to External Reviewers’ Report | * Working Group’s Response
 |
| Step 10 | Dean’s Response to External Reviewers’ Report | * Dean’s Response
 |
| Step 11 | AP&B Final Review – of Program Proposal, External Reviewers’ Report, Working Group’s Response, Dean’s Response; AP&B recommends program to Senate | * AP&B Minutes
 |
| Step 12 | Senate for Approval and Faculty Board for Information | * Senate Minutes
* Faculty Board Minutes
 |
| Step 13 | Submission and Approval by Quality Council | * Quality Council Approval Letter
 |
| Step 14 | Follow-Up and Reporting* Post Program Description to Website
* Verbal Update to Senate
* Report to Board of Governors (BoG)
* Add to Schedule of Reviews
 | * Link to program description
* BoG Annual Report
* Year of First Cyclical Review
 |
| Step 15 | Implementation Window and Monitoring Report to AP&B  | * AP&B Minutes
* Monitoring Report
 |

## Process

**Graduate Diploma Note**

The approval process for proposing a new graduate diploma will follow an abbreviated process of the new program approval as diplomas are not subject to external assessment. Steps 1 through 6 will be required as will Steps 12 through 15.

###

### Step 1 – Initial In-Principle Approval and Working Group

The initial idea for a new degree program may come from a number of different sources, including groups of faculty members or students, one or more academic units, administration, collaborations with other institutions, or groups external to the University. The initial idea for a new degree program will be discussed with the Dean(s) under whose authority the degree program would be delivered.

The Dean, in consultation with the proponents of the new degree program, will develop an Initial Proposal for the new degree program (template available upon request). The Dean(s) will take the Initial Proposal to PPG for discussion and in-principle approval. Should PPG grant in-principle approval, the Dean(s) will strike a Working Group tasked with developing a Full Program Proposal. If PPG does not think that the proposal merits further development, it will direct feedback to the proponents through the Dean(s). An amended Initial Proposal may be reconsidered by PPG at a later date.

The Dean(s) will establish a Working Group to fully develop the program. The Working Group will normally be comprised of Chairs/Directors or delegates of all academic units deemed to have a potential interest in the degree program under consideration. The Working Group will be chaired by the Dean or his/her appointee.

### Step 2 – Development of Full Program Proposal and Appendices

A number of supports are available to assist academic units in the preparation of the new program proposal and appendices. See [**Provision of Support**](#Prov_of_Support).

1. **Template and Evaluation Criteria**

 The Working Group will prepare, and complete in full, a proposal for a new degree program for approval, using the [**Program Proposal Template**](https://www.trentu.ca/vpacademic/quality-assurance/templates)that:

* Includes required Evaluation Criteria as specified in [**Appendix B** (as defined in QAF)](#Appendix_B)
* Indicates if the program is a ‘professional’ or ‘cost-recovery’ program
* Highlights unique curriculum or program innovations, creative components, or significant high impact practices
1. **University Priorities**

Academic units may reflect on University priorities, commenting on the following initiatives and how each is integrated into or reflected in the offering of the program: through program objectives, program-level learning outcomes, curriculum, program delivery, instruction and/or student recruitment:

* Indigenization
* Equity, Diversity and Inclusion
* Anti-Racism

Commenting on these initiatives is not a requirement however the template for new programs will include a section on University Priorities and will recommend consideration during the writing of the New Program Proposal. Academic Units will also be encouraged to discuss these initiatives under evaluation criterion 1.c) Consistency of the program’s objectives with the institution’s mission and academic plans.

1. **Consultation**. The Working Group is encouraged to begin early consultations and continue consulting throughout the entire process of the new degree program development to allow for feedback and comment. Recommended consultation should include affected/interested parties, including:
* Members of academic units who may be affected by the proposed degree program or who have expertise relevant to the proposal
* Decanal Councils - Deans will announce at their decanal councils that a proposal for a new degree program is being developed; Chairs/Directors will convey this information to their academic units as appropriate
* Where applicable, include input and perspectives of potential employers and professional associations
* Where possible, consultation should include students.
1. **Proposed Budget**. The Working Group will work closely with their Dean to develop a proposed budget for the new program. The budget is for internal use only; it will be submitted to AP&B and Senate. The proposed budget is an estimate of proposed resources; actual resources will be dependent upon a number of factors including enrolment. Proposed budgets should be shared with OIPA and the Manager of Budgeting Services in the Finance Office for review and comment.
2. **Program Objectives, Program-Level Learning Outcomes and Curriculum Mapping.** The Center for Teaching and Learning is available to assist with the development of program objectives, program-level learning outcomes, course-level learning outcomes and curriculum mapping.
3. **New Course Development and Course Syllabuses Collection.** New courses should be developed and submitted to USC and GSC respectively for approval and recommendation to Senate. The Appendices should include a sampling of course syllabuses – new and existing course syllabuses.
4. **Curriculum Vitae.** CVs for faculty involved with the degree program should be collected and compiled into an Appendix.
5. **Library Statement of Support**. The Working Group should request from the University Librarian a report showing the extent to which the library resources can support the new degree program.
6. **Office of Research**. Graduate programs should include information on research funding and grants. Working Group should request this information from the Office of Research.

### Step 3 – Dean Sign-Off on Program Proposal and Appendices

The Dean will review the Program Proposal and Appendices and recommend revisions as appropriate. The Dean will be reviewing the document for accuracy and clarity and will be responsible for ensuring resources are acceptable and reasonable as presented in the proposed budget. Once the Dean(s) has signed off on the completed Program Proposal, the proposal will be forwarded to USC or GSC, as appropriate.

###

### Step 4 – Nomination, Ranking and Selection of External Reviewers

1. **Number of Reviewers Required**

|  |  |
| --- | --- |
| Degree Program | External Reviewers |
| Undergraduate | 2 reviewers |
| Graduate  | 2 reviewers |
| Joint Undergraduate and Graduate | 2 reviewers |

1. **Qualifications of External Reviewers** – will normally:
* Be Associate or Full Professors
* Have suitable disciplinary expertise, qualifications and experience in developing, assessing and/or managing degree programs
* Have combined professional experience to cover the majority areas of study and/or fields of expertise.
* At least one of the reviewers will have expertise in teaching and learning – content and program delivery, assessment/evaluation, curriculum mapping, and learning outcomes
* In the case of graduate degree programs, have experience with graduate teaching and supervision
* Be at arm’s length.
1. **Arm’s Length Requirement.** External reviewers must be at arm’s length from those associated with the development of the proposal for a new degree program. Upon accepting an invitation to review a proposal for a new degree program, reviewers will be required to declare in writing that they are at arm’s length. To avoid conflict of interest and the appearance of conflict of interest, reviewers will not:
* Be a close friend or relative of a member of the Working Group or of someone with whom the Working Group has consulted
* Have been a supervisor within the past ten years of a member of any academic unit involved in the development of the proposal for a new degree program
* Have been a regular or repeated external examiner of students in any academic unit involved in the development of the proposal for a new degree program
* Have collaborated (i.e., significantly contributed to intellectual work with another) within the past ten years with a member of any academic unit involved in the development of the proposal for a new degree program, or have plans to collaborate with a member in the immediate future
* Have been an instructor or a visiting scholar within the past ten years in any academic unit involved in the development of the proposal for a new degree program
* Have been a student within the past ten years in any academic unit involved in the development of the proposal for a new degree program, or
* Have received an undergraduate or a graduate degree from Trent in the past ten years.
1. **Process.** The Nomination of External Reviewers should be submitted to the Office of the Provost as soon as the Dean(s) has signed off on the Program Proposal. This enables the Office of the Provost time to confirm the availability of the external reviewer(s).Members of the Working Group are not to contact possible external reviewers for any reason.

The Working Group will complete the [Nomination of External Reviewers’ template](https://www.trentu.ca/vpacademic/quality-assurance/templates)that includes the names and required information of at least six qualified persons who they are nominating to serve as external reviewers of the proposed degree program, all of whom are to be at arm’s length.

* If there are two or more distinct areas of study within the proposed degree program, all efforts will be made to ensure a balance of external reviewers with the required expertise. Areas of expertise should be clearly identified for each nominated external reviewer.
* In the case of joint programs, the list of External Reviewers will be developed jointly with the partner institution(s).

The completed [Nomination of External Reviewers’ form](https://www.trentu.ca/vpacademic/quality-assurance/templates) will be sent to the Dean(s). On behalf of the Working Group, the Dean(s) will submit the Nominations of External Reviewers to the Office of the Provost.

1. **Declaration of Arm’s Length**. The Office of the Provost will review the nominations and determine that the external reviewers are at arm’s length from the degree program being reviewed. External reviewers will also be expected to declare that they are at arm’s length from the degree program being reviewed.
2. **Ranking and Selection.** The Office of the Provost, in consultation with the Dean(s), will develop a ranked list of nominated external reviewers. In the case of a degree program to be offered jointly with another institution, the Office of the Provost will develop a ranked list of External Reviewer(s) in consultation with the partner institution. The Office of the Provost will contact the proposed reviewers in ranked order.

### Step 5 – USC/GSC Review

The Dean will forward the Program Proposal to the Undergraduate Studies Committee (USC) for undergraduate degree programs or to the Graduate Studies Committee (GSC) for graduate degree programs. USC/GSC will review the program proposal for consistency with university degree regulations. If any new courses are included in the proposal, USC/GSC will follow their normal procedures for reviewing and approving new courses. Feedback and comments from USC/GSC will be provided to the Working Group and Dean for consideration and/or inclusion in a revised proposal. The Working Group will respond to USC/GSC feedback as required.

### Step 6 – AP&B Initial Review

The Dean will forward the Program Proposal to the Office of the Provost, who will submit it to AP&B for review. The documentation will include the Program Proposal and Appendices, including the budget. AP&B will review the documentation and may approve the Program Proposal as submitted or ask for revisions prior to the Office of the Provost forwarding the Program Proposal for external assessment.

###

### Step 7 – Site Visit and Instructions

Once the Program Proposal for a new degree program has been approved by AP&B, it is ready for external review.

1. **On-Site or Virtual Site Visit**. The external review will normally be conducted in-person. On-site visits will be required for doctoral and thesis-based masters’ programs. The Provost (or relevant Dean), with clear justification for the decision, may propose a virtual site visit for undergraduate and professional masters’ programs. The external reviewers must be satisfied that a virtual site visit is acceptable.
2. **Site Visit Schedule**. The Office of the Provost will oversee the arrangements for the in-person or virtual site visit. An in-person visit will normally be scheduled for one day and may include a visit to the Durham campus, whereas a virtual site visit may be scheduled over a few days. The Office of the Provost will assist with travel and accommodation plans. The Working Group will be responsible for drafting the schedule for the site visit in consultation with the Office of the Provost. The Office of the Provost will provide a sample itinerary to the academic unit to use as a guide when scheduling the site visit. External reviewers will typically meet with the Provost, relevant Dean(s), Chair(s)/Directors(s) and faculty. An in-person site visit may include a tour of facilities and the library. The Office of the Provost has final approval of the schedule to ensure that all necessary consultations take place.
3. **Documentation to Share with Reviewers**. The Office of the Provost will provide external reviewers with review documentation normally no less than two weeks prior to the site visit.

Documentation will include:

* Instructions for External Reviewers
* Trent University’s IQAP Policy and Procedures, including Evaluation Criteria and Degree Level Expectations
* Program Proposal and Appendices, including Library Statement of Support, Course Syllabuses and Faculty CVs
* [Template for the External Reviewers’ Report](https://www.trentu.ca/vpacademic/quality-assurance/templates). The template includes all Evaluation Criteria set by the Quality Council (see [**Appendix B**](#Appendix_B))
* Site Visit Schedule.

1. **Pre-Meeting** – For both in-person and virtual site visits

A pre-meeting of the external reviewers will be scheduled to provide guidance and direction. The Office of the Provost will review the instructions with the external reviewers, explain their roles and obligations, and respond to any questions related to documentation, process, and the final report.

Reviewers will be asked to recognize the University’s autonomy to determine priorities for funding, space, and faculty allocation and respect the confidentiality of all aspects of the review process. The external reviewer(s) will also be invited to contact the Office of the Provost should any questions arise during the review process.

### Step 8 – External Reviewers’ Report

**Timing**: One month following site visit

External reviewers will submit one joint report using the Template provided.

1. **Substance of Report**. The Report will:
* Address the substance (clarity and completeness) of the New Program Proposal
* Address all required Evaluation Criteria as specified in [**Appendix B**](#APPENDIX_C)
* Address the quality and learning environment of the program
* Describe the program’s strengths. Identify, commend and provide evidence of any distinctive attributes of the program, identify any notable strong and creative and/or clearly innovative aspects, including significant innovation or creativity in the content and/or delivery of the program relative to other such programs.
* Describe areas for improvement and opportunities for enhancement.
* Include a Summary and a clearly defined list of recommendations that are clear, concise and actionable to improve and/or enhance the quality of the program
* Respect the confidentiality required for all aspects of the review process.

Recognize the university’s autonomy to determine priorities for funding, space and faculty allocation. Recommendations related to resources, specifically faculty requirements must be directly linked to issues of program quality and/or sustainability.

b) **Submission of Report**. The final report will be submitted electronically to the Provost no later than one month after receiving the documents for a desk audit, or one month from the date of the site visit.

 Upon receipt of the External Reviewers’ Report, the Report will be reviewed by the Office of the Provost to ensure that it provides a comprehensive assessment of the new program. If the Report is not satisfactory, the Office of the Provost, in consultation with the Dean(s) and Provost will identify any gaps and request additional information from the External Reviewers.

1. **Distribution of Report**. Once the Report is deemed satisfactory, the Office of the Provost will distribute the External Reviewers’ Report to the Working Group Chair. Where appropriate, any confidential and/or sensitive information will be redacted prior to distribution.

### Step 9 – Working Group’s Response

The Working Group will prepare a response to the External Reviewers’ Report that will address each of the recommendations; the response may include further explanation or details in response to the comments or recommendations.

* If minor revisions are required, it is expected that these will be detailed in the Working Group’s Response
* For substantial revisions, the Working Group will revise the Program Proposal using track changes. A detailed summary of these revisions will be included as part of the Working Group Response or in an appended document with the formal response. The Working Group will submit their response to the Dean(s).

### Step 10 – Dean’s Response

The Dean(s) will provide a response to the External Reviewers’ Report, responding to each of the recommendations. In cases where a Dean is the Working Chair for a new Program Proposal, members of the Working Group will prepare a response independently from the Dean; the Dean will provide a separate response.

**Exception to Decanal Response**: In cases where the Dean is the Divisional Head (e.g., Nursing, Education), a joint response will be prepared by the faculty and the Dean.

### Step 11 – Academic Planning & Budget Committee’s Final Review

AP&B will review the final Program Proposal, the External Reviewers’ Report, the Working Group’s Response and Dean’s Response. Relevant Dean(s) will be invited to attend AP&B. AP&B will assess whether the new degree program meets Trent’s quality assurance standards, and will make one of the following determinations:

* Recommends to Senate for approval
* Requests modifications
* Recommends that the proposal not be pursued further

Should AP&B request modifications or recommend that the proposal not be pursued further, the Dean or the Office of the Provost will convey the committee’s views to the Working Group.

###

### Step 12 – Senate for Approval and Faculty Board for Information

The Final Program Proposal and related documentation (with confidential and/or sensitive information removed) will be shared with Faculty Board for information and Senate for approval.

Documentation will include: Program Proposal, Budget, Executive Summary of the External Reviewers’ Report, Working Group’s Response, and Dean’s Response.

The Dean and/or a member of the Working Group will be called upon to speak to the proposal and/or to answer questions.

If Senate does not approve the recommendation from AP&B, the Provost, in consultation with the Dean, will determine the next step, which may include modification of the proposal or discontinuation of the initiative.

### Step 13 – Submission and Approval by Quality Council

Once Senate has approved a proposal for a new degree program, the Office of the Provost will submit the program to the Quality Assurance Secretariat.

1. **Documentation to Quality Council** will include:
* Program Proposal
* Appendices (excluding CVs and Budget)
* External Reviewers’ Report
* Working Group’s Response
* Dean’s Response
* Letter of Support from the Provost.

The submission will also include:

* A Checklist (with a summary of key changes as required)
* Date approved by Senate
* Whether the program is cost-recovery (incorporated into template)
* Bios for external reviewers specifically indicating qualifications in the following areas: sufficient expertise in content and program delivery; connections to industry (where appropriate); and expertise in teaching and learning.
1. **Quality Council Decision**. The Quality Council Appraisal Committee will review the proposal and may request clarification and/or additional information. Once satisfied, they will make a recommendation to Quality Council, who in turn will review the proposal and make one of the following recommendations:

1. Approved to Commence
2. Approved to Commence with Report – The University will be required to report on specified issues with a pre-determined deadline, e.g., one to three years from program commencement
3. Deferred for up to one year during which time the university may address identified issues and report back
4. Not Approved
5. Such other action as the Quality Council considers reasonable and appropriate in the circumstances.

The Quality Assurance Secretariat will convey the decision of the Quality Council to the university. Requests for clarification and follow-up reports will be managed and prepared by the Office of Provost in consultation with the Dean(s) and Working Group. Final reports will be approved by the Manager and/or Provost dependant upon the nature and extent of report requirements.

1. **Appeals and Resubmissions.** Should the Quality Council not grant approval to commence, the Provost, in consultation with the Dean(s), will reassess the proposal considering the Quality Council’s comments and will determine whether to amend and resubmit the brief, appeal the decision, or discontinue the proposal. When the recommendation is ii), iii) or iv), the University has 30 days to request a meeting with and/or reconsideration by the Appraisal Committee.

Should the decision be made to amend and resubmit, the Dean(s) will work with the Working Group to develop a revised proposal. The Provost can approve minor changes made to the original proposal; major changes will be reviewed and/or approved through Senate Committees (USC/GSC for changes to degree requirements or new courses, AP&B for approval of the revised Full Proposal). When AP&B deems that the revised Full Proposal for the new degree program addresses the issues highlighted by the Quality Council, it will be resubmitted to the Quality Council for approval.

### Step 14 – Follow Up and Reporting

1. [**Description of Program**](https://www.trentu.ca/vpacademic/quality-assurance/new-degree-program-development/approved-degree-programs) will be posted on the Office of the Provost’s website once the program is approved by the Quality Council.
2. **Senate**. Senate will be verbally informed of decisions of the Quality Council.
3. **Reports to Board of Governors**. The Provost will keep the Board of Governors regularly apprised of new degree program proposals, normally in an annual report.

### Step 15 – Implementation Window and Monitoring of a New Degree Program

1. **Implementation Window**

After a new degree program is approved to commence by the Quality Council, the degree program must begin within 36 months of the date of approval; otherwise, the approval from the Quality Council will lapse.

1. **Monitoring Report**

The purpose of the monitoring report is to ensure that the degree program has been successfully initiated and to identify early, and work to address, any unforeseen implementation issues. There is an element of continuous improvement that ensures a program that is recently launched is closely monitored to identify challenges and issues with the program and address them in a timely manner.

* The Dean, in consultation with the Chair, Director or Program Coordinator, will provide a monitoring report to AP&B on a new degree program, normally after the degree program has been operating for three years. In cases where enrolment is low in the first few years, the date for submitting a Monitoring Report may be delayed. The Monitoring Report will take place after the program’s launch and prior to the program’s first cyclical review.
* The Monitoring Report will address any issues identified in the ‘Notes’ provided by the Quality Assurance’s Appraisal Committee, and will include an evaluation of the program’s success in realizing its objectives, requirements and outcomes, as originally proposed and approved, as well as any changes that have occurred in the interim.
* AP&B will review the Report, and determine if it is sufficient or if additional information is required. Senate will be notified that AP&B has accepted the Monitoring Report.
* The ongoing monitoring process of the new program will continue to consider issues identified in the report, and the Office of the Provost will ensure that any concerns from the Monitoring Report are included in the first Cyclical Review.
	1. **Publication of Documentation**

The following documentation will be published to the website:

* Description of New Program – once approved by Quality Council
	1. **First Cyclical Program Review**

The first cyclical review for any new degree program must be conducted no more than eight years after the date of the degree program’s initial enrolment. The degree program will be added to the [**Schedule of Cyclical Reviews**](https://www.trentu.ca/vpacademic/sites/trentu.ca.vpacademic/files/documents/AODA%20Current%20Roster%20-%20Alpha%20-%20Round%202%20QA%20-%20July%202018.pdf).

Issues identified in the Monitoring Report and any ‘Notes’ from Quality Council’s approval letter will be addressed in the first Cyclical Review.

# Section 3 – Expedited Approval Protocol

3.1 Prelude

The nature of this protocol is designed to ensure that decisions can be provided quickly and efficiently in order to launch new graduate diploma programs or program changes in a timelier manner, e.g., to meet upcoming term application deadlines, support innovation.

The protocol for Expedited Approvals applies to:

* New Graduate Diploma – Types 2 and 3
* Expedited Major Modifications – as determined
* Creation of new standalone degree from an existing field in a graduate program

Expedited proposals are granted in a shorter time with less required documentation and do not require an external review. Proposals sent to the Appraisal Committee for Expedited Approval require Senate approval and will follow the processes set out in Section 2.6 Graduate Diploma Note for new Graduate Diplomas and Section 4 – for Major Modifications. Expedited proposals will be submitted to Quality Council for approval following Senate approval.

## 3.2 Graduate Diplomas – Types 2 and 3

The approval process for proposing a new graduate diploma will follow an abbreviated process of the New Program Approval Protocol and will not be subject to external assessment. Steps 1 through 6 and Steps 12 through 15 will be required, as per the required Evaluation Criteria (QAF 2.1.2).

In cases where a Graduate Diploma is not associated with a parent graduate program, it is recommended (not required) that an external Desk Review be conducted.

Once approved by Senate, the program will be submitted to Quality Council’s Appraisal Committee for approval.

## 3.3 Expedited Major Modifications

The Chairs of USC/GSC will consult with the Provost to determine if a Major Modification to an existing program should be sent to the Quality Council’s Appraisal Committee for expedited approval rather than reported to Quality Council in the Annual Report on Major Modifications. In such cases, these will be referred to as ‘expedited major modifications’.

The proposal will follow the internal approval processes as outlined in 4.4 Submission Process. Depending on the nature of the major modification, the submission may be submitted to the Academic Planning & Budget Committee following its review by the Undergraduate or Graduate Studies Committee.

3.4 Creation of new standalone degree from an existing field in a graduate program

A program may choose to create a standalone degree from a long-standing field provided it has undergone at least two Cyclical Program Reviews and has had at least two graduating cohorts.

The internal approval process will follow that of Graduate Diplomas (2 and 3), an abbreviated process of the New Program Approval Protocol, Steps 1 through 6 and Steps 12 through 15, as per the required Evaluation Criteria (QAF 2.1.2). Once approved by GSC, the recommendation will move forward to Senate for approval, followed by submission to Quality Council’s Appraisal Committee for approval.

3.5 Final Decision of Appraisal Committee

The Appraisal Committee will make one of the following decisions:

* Approved to Commence
* Approved to Commence with Report
* Not Approved.

# Section 4 – Major Modification Protocol (Program Renewal and Significant Change)

4.1 Prelude

The Major Modification Protocol encourages and reinforces the ongoing and continuous review and assessment of programs and associated curriculum. Academic units are encouraged to have a plan in place to actively monitor key performance indicators (i.e., program structure, requirements, objectives, learning outcomes, assessment and student achievement) that will help them identify modifications to the program that will improve and enhance the quality of the program. The University values the importance of this self-reflection and self-assessment to ensure the delivery of high-quality programming and student learning and experiences.

This Protocol facilitates timely program renewal and significant change in response to the following:

* Outcomes of cyclical program review
* Ongoing evolution of the discipline
* New developments in a particular field
* Improvements in teaching and learning strategies
* Changing needs of students, society and industry
* Improvements in technology

4.2 Definition and Examples of Major Modifications

Major modifications result in substantial changes to an existing program, usually creating significant new choices or experiences for students, but not as considerable as to qualify as a new program. Types of major modifications typically include, but are not limited to, one or more of the following:

1. **Requirements that differ significantly from those existing at the time of the previous cyclical program review**

Examples

* Introduction of new Field, deletion of, or renaming of a Field in an existing graduate program
* Merger of two or more degree programs
* New bridging options for college diploma graduates (e.g., Articulation Agreements)
* Significant changes in the laboratory time in an undergraduate degree program
* Introduction or deletion of an undergraduate thesis or capstone project
* Introduction or deletion of an experiential learning or work integrated learning opportunity, including co-op option, internship or practicum, study abroad opportunity, or portfolio
* Introduction or deletion of a Master-level research project, research essay or thesis, course-only pathway
* Changes to the requirements of graduate program candidacy examinations, field studies, or residency requirements
* Major changes to courses comprising a significant portion of the program, typically more than one third of the total program
* Introduction of new Type 1 – Graduate Diploma
* Introduction of new Collaborative Specialization to a graduate program
* New Minor, Option, Specialization in an undergraduate program
* Undergraduate and Postgraduate Certificates
1. **Significant Changes to Program-Level Learning Outcomes that do not meet the threshold of a new program**
2. **Significant Changes to Program Delivery, including faculty, resources, and/or delivery mode**

Examples

* Changes to the faculty delivering the program, such as when a large fraction of the faculty retire, and new hires alter the areas of research and teaching expertise
* The establishment of an existing degree program at another institution or location
* The offering of an existing program substantially online, where it has previously been offered in-person, or vice versa
* Change in program from primarily full-time to primarily part-time, or vice versa
* Change to essential resources
1. **Change in Program Name or Degree Nomenclature of a Degree Program,** specifically recognizingwhen this results in a change in learning outcomes
2. **Termination of a Degree Program**

Program Closure/Termination of a Degree Program. Decisions to terminate a degree program will follow the [**Policy on Terminating an Academic Program**](http://www.trentu.ca/dean/documents/PolicyonTerminatinganAcademicProgramAPPROVED011315.pdf).

4.3 Identifying Level of Change

1. **Expedited Major Modification**

The University can make a decision to expedite a Major Modification through the Expedited Approval Protocol, specifically 3.3 Expedited Major Modifications. The proposal will follow the internal approval processes as outlined in 4.4 Submission Process. Depending on the nature of the major modification, the proposal may be submitted to the Academic Planning & Budget Committee following its review by the Undergraduate or Graduate Studies Committee. The Office of the Provost will facilitate this decision that will involve the Provost and relevant Deans(s). Following approval by Senate, the proposal would be submitted to the Appraisal Committee for approval.

1. **Major Modification Versus New Program**
* Major Modifications will typically be less substantial than a new program, and will be determined on a case-by-case basis. If one element of the program undergoes a substantial modification it will be considered a major modification. If multiple elements in the program are undergoing substantial change, a decision will be made as to whether the changes meet the threshold of a new program.
* The Chairs of USC/GSC will consult with the Provost to determine if a Major Modification to an existing program should be sent to the Quality Council’s Appraisal Committee for Expedited Approval, or developed as a new program. The Provost will be the final arbiter, at the university level, in determining if the major modification should be considered a new program.
* Quality Council has the final authority to decide if a major modification constitutes a new program and, therefore, must follow the Protocol for New Program Approvals.
1. **Minor Versus Major Modification**
* Major Modifications will typically be more substantial changes than minor modifications, i.e., typically more than changes to one specific course
* In consultation with the Provost, the Chairs of the Undergraduate and Graduate Studies Committees will be the arbiters on whether a proposed change to an existing undergraduate or graduate program constitutes a major or a minor modification.

**4.4** Submission Process

An academic unit intending to propose a major modification to an existing program will submit a proposal to USC/GSC using the appropriate undergraduate or graduate [forms](https://www.trentu.ca/vpacademic/committees-policies/undergraduate-studies-committee). USC/GSC may consult the Deans or the Office of the Provost, and may recommend revisions. Once satisfied with the proposal, USC/GSC will approve or reject the proposal. Approved proposals will be forwarded to Senate for approval.

The proposal for a major modification to a program will include:

* A detailed description of the change to the program
* Proposed date for implementation
* Rationale for the changes to the program
* Revised calendar copy
* Details of any resource implications, specifically for mode of delivery, and address the following:
	+ adequacy of technological platform and tools
	+ sufficiency of support services and training for teaching staff
	+ sufficiency of types of support for students in new learning environment
* An indication of how the change aligns with the relevant program objectives and program-level learning outcome(s), or changes to the objectives and learning outcomes
* An assessment of how students will be impacted as well as a statement as to how the modification will improve the student experience
* Input from current students and recent graduates
* Evidence of consultation with all affected academic units
* Evidence that the Dean has been consulted.

4.5 Approval and Annual Reporting

Major modifications require internal approval, first by USC or GSC, and then by Senate. USC and GSC will maintain a list of major modifications approved by Senate that will be reported by the Office of the Provost in the Annual Report to the Quality Council. The Report will reflect the period from July to June and will include a summary of major program modifications, including program closures approved through the university’s internal approval process.

4.6 Minor Modifications

Modifications to a program that are less substantial than major modifications will be submitted to USC or GSC using the established templates. The templates include information on experiential learning, science designation, Indigenous Course Requirement, degree level expectations, rationale, resource information, calendar copy and consultation. Proposals approved by USC or GSC will be forwarded to Senate for information or approval.

Minor modifications will include new courses, changes to course titles, revisions to course descriptions or course content, cross-listing of courses, level changes (e.g., from 2000 level to 3000 level), minor changes to degree requirements, prerequisite changes, course deletions, change to experiential learning, revisions to admission requirements, splitting of full course credit into two half credits, course compression, placement of course to or from Reserve List or and designation of course as Indigenous Course Requirement (ICR).

**4.7 Special Programs Beyond the Scope of the IQAP**

The University offers Special Programs that fall outside the scope of the IQAP. In these cases, the approval processes for each are determined on a case-by-case basis by senior academic administrators, normally in consultation with the Provost’s Planning Group and/or any other relevant parties. Examples of special programs include microcredentials and stacking of post-graduate certificates.

Microcredentials are managed by the Office of Careerspace, Careers and Experience. A form for the development and approval of microcredentials must be completed and signed off by the Director, Careerspace, and the relevant Dean.

## Section 5 – Audit Protocol

**5.1 Prelude**

Cyclical Audit provides the necessary accountability to post-secondary education’s principal stakeholders, students, government, employers, and the public, by assessing the degree to which a university’s internally defined quality assurance processes, procedures, and practices align with and satisfy the internationally agreed upon standards, as set out in the Quality Assurance Framework.

The University will be subject to a Cyclical Audit at least once every eight years. The scope of this protocol will include an evaluation of past and current practices; review of institutional changes made in policy, procedures, and practices in response to recommendations from the previous audit; confirmation that university’s practices comply with its ratified IQAP; and review of the university’s approach to continuous improvement.

Specifically, the Audit will:

* Evaluate past and current practices
* Review institutional changes made in policy, procedures and practices in response to the recommendations from the previous audit
* Confirm that university’s practices comply with its IQAP as ratified by the Quality Council and note any misalignments of its IQAP with the QAF
* Review the university’s approach to continuous improvement.

**5.2 Outcomes of Audit Report**

The Audit Report describes the extent to which the institution is compliant with its quality assurance polices and achieves best practice. Based on the findings in its Report, the Audit Committee will make recommendations about future oversight by Quality Council and/or one or more of its Committees, and may include any of the following:

* Direct specific attention of issue(s) to auditors in the subsequent audit
* Schedule a larger selection of programs for the university’s next audit
* Require a Focused Audit. A Focused Audit may be required in cases where at least one Cause for Concern has been identified. The Audit will focus on specific areas of concern and follow similar steps to the Cyclical Audit. A Focused Audit does not replace the Cyclical Audit.
* Adjust the degree of oversight and any associated requirements for more or less oversight.

**5.3 Key Elements and Process for Cyclical Audit**

1. **Pre-Audit Orientation Briefing**

The University will participate in a pre-audit orientation/briefing with the Quality Council Secretariat and an Audit Team member approximately one year prior to the scheduled Cyclical Audit. The purpose of this briefing will be to outline the expectations of the cyclical audit.

1. **Selection of Sample Programs for Audit**

The Audit Team will select a sample of programs for audit that represent the New Program Approval Protocol and the Cyclical Program Review Protocol as described in the Quality Assurance Framework. New programs approved and existing programs that have undergone cyclical review since the previous Cyclical Audit will be eligible for selection in the University’s next Cyclical Audit. The audit process cannot reverse the approval of a program to commence.

A small sample of new programs or cyclical program reviews in progress may be selected, and in these cases, documentation will not be required. In these cases, auditors will meet with program representatives to gain a better understanding of current quality assurance practices in the institution.

Programs created or modified through the Protocols for Expedited Approvals and Major Modifications are not normally subject to the institution’s Cyclical Audit.

1. **Institutional Self-Study**

The university will prepare a self-study that presents and assesses its quality assurance processes, including challenges and opportunities, within its own institutional context. The self-study will include the process undertaken to prepare the self-study, flag any issues from the previous audit, and most importantly, reflect on current policies and practices that demonstrate the university’s focus on continuous improvement. The self-study will be submitted to the Quality Assurance Secretariat in advance of the desk audit and will form the foundation of the Cyclical Audit.

1. **Process and Documentation**

In its preparation, the Provost, Deans, and relevant committees will be consulted and requested to provide input. The Office of the Provost will be responsible for the preparation of the self-study and for submission of Audit documentation to the Quality Assurance Secretariat, including:

* Relevant documents and other information related to the programs selected for audit, as requested by the Audit Team
* Record of any revisions of the university’s IQAP, as ratified by the Quality Council
* Annual Report of any minor revisions of the University’s IQAP that did not require Quality Council re-ratification.
1. **Desk Audit and Site Visit**

The Audit Team will review documentation prior to a 2-3 day site visit. During the site visit, the Audit Team will meet with the university’s senior academic leadership, quality assurance staff, and representatives from programs selected for audit. The purpose of the visit will be to gain a sufficiently complete and accurate understanding of the university’s application of its IQAP, and to specifically address any information gaps that may arise during the desk audit and to assess the degree to which the institutions’ quality assurance practices contribute to continuous improvement of its programs.

1. **Audit Report and Summary**

The Audit Report includes an assessment of the overall performance of the university and includes recommendations to the Quality Council, based on their assessment. The Audit Report will focus on compliancy with the University’s IQAP; misalignment of the IQAP with the Quality Assurance Framework; identifying and recording notable effective policies or practices; and the university’s approach to ensuring continuous improvement in quality assurance through the implementation of the outcomes of cyclical program reviews and the monitoring of new programs. The Report will include findings in the form of:

* Recommendations that will require an institutional response
* Causes for Concern that are potential structural and /or systemic weaknesses
* Suggestions to strengthen quality assurance practices
1. **Focused Audit**

When an Audit Report identifies at least one Cause for Concern, the University will participate in a Focused Audit as recommend by the Audit Committee. This Audit will require closer scrutiny and further support to address the specific area(s) of concern.

1. **Follow-up Response by University and Auditors’ Report on the University’s Response**
* Follow-up. The University may be required to respond to the Audit Report, within the recommended timeframe for submission, by detailing the steps taken to address the recommendation and/or any Causes for Concern.
* Associated Auditors’ Report. The Audit Team will report on the institution’s sufficiency of response. Once satisfied, the Audit Committee will submit a recommendation to the Quality Council to accept the university’s follow-up response and associated auditors’ report.

**5.4 Publication of Documentation**

The following documentation will be publicly posted to the University’s website, absent any confidential information:

* Audit Report (excluding addendum)
* Follow-Up Response Report (to Audit Report)
* Auditors’ Response Report
* Focused Audit Report

## Appendix A – Evaluation Criteria for Cyclical Review

Existing undergraduate and graduate programs will be evaluated against the following criteria as set out in the Quality Assurance Framework (5.1.3.1)

**1. Objectives**

1. Consistency of the program’s objectives with the institution’s mission and academic plans.

**2.** **Program Requirements**

1. Appropriateness of the program’s structure and the requirements to meet its objectives and the program-level learning outcomes.
2. Appropriateness of the program’s structure, requirements and program-level learning outcomes in meeting the institution’s own undergraduate or graduate Degree Level Expectations
3. Appropriateness and effectiveness of the mode(s) of delivery to facilitate students’ successful completion of the program-level learning outcomes
4. Ways in which the curriculum addresses the current state of the discipline or area of study

**3. Program Requirements for Graduate Programs Only**

1. Clear rationale for program length that ensures that students can complete the program-level learning outcomes and requirements within the time required
2. Evidence that each graduate student in the program is required to take a minimum of two-thirds of the course requirements from among graduate level courses
3. For research-focused graduate programs, clear indication of the nature and suitability of the major research requirements for degree completion.

**4. Assessment of Teaching and Assessment**

1. Appropriateness and effectiveness of the methods for assessing student achievement of the program-level learning objectives and degree level expectations.
2. Appropriateness and effectiveness of the plans to monitor and assess:
3. The overall quality of the program
4. Whether the program continues to achieve in practice its objectives
5. Whether its students are achieving the program-level learning outcomes
6. How the resulting information will be documented and subsequently used to inform continuous program improvement

**5. Admission Requirements**

1. Appropriateness of the program’s admission requirements given the program’s objectives and program-level learning outcomes
2. Sufficient explanation of alternative requirements, if applicable, for admission into graduate, second-entry or undergraduate program, e.g., minimum grade point average, additional languages or portfolios, and how the program recognizes prior work or learning experience

**6.** **Resources**

Given the program’s class sizes and cohorts as well as its program-level learning outcomes:

1. Participation of a sufficient number of qualified core faculty who are competent to teach and/or supervise in and achieve the goals of the program and foster the appropriate academic environment
2. If applicable, discussion/explanation of the role and approximate percentage of adjunct and part-time faculty/limited term appointments used in the delivery of the program and the associated plans to ensure the sustainability of the program and quality of the student experience
3. If required, provision of supervision of experiential learning opportunities
4. Adequacy of the administrative unit’s utilization of existing human, physical and financial resources
5. Evidence that there are adequate resources to sustain the quality of scholarship and research activities produced by students, including library support, information technology support, and laboratory access.

**7.** **Resources for Graduate Programs Only**

Given the program’s class sizes and cohorts, as well as its program-level learning outcomes:

1. Evidence that faculty have the recent research or professional/clinical expertise needed to foster an appropriate intellectual climate, sustain the program, and promote innovation
2. Where appropriate to the program, evidence that financial assistance for students is sufficient to ensure adequate quality and numbers of students
3. Evidence of how supervisory loads are distributed, in light of qualifications and appointment status of the faculty

**8.** **Quality and Other Indicators**

1. Evidence of the quality of the faculty (e.g., qualifications, funding, honours, awards, research, innovation and scholarly record, appropriateness of collective faculty expertise to contribute substantively to the program and commitment to student mentoring)
2. Any other evidence that the program and faculty ensure the intellectual quality of the student experience
3. For students: grade-level for admission, scholarly output, success rates in provincial and national scholarships, competitions, awards and commitment to professional and transferable skills, and times-to-completion and retention rates.

## Appendix B – Evaluation Criteria for New Program Approvals

New undergraduate and graduate programs will be evaluated against the following criteria as set out in the Quality Assurance Framework (2.1.2)

* + 1. **Program Objectives**
1. Clarity of the program’s objectives
2. Appropriateness of degree nomenclature given the program’s objectives
3. Consistency of the program’s objectives with the institution’s mission and academic plans
	* 1. **Program Requirements**
4. Appropriateness of the program’s structure and the requirements to meet its objectives and program-level learning outcomes
5. Appropriateness of the program’s structure, requirements and program-level learning outcomes in meeting the institution’s undergraduate or graduate Degree Level Expectations
6. Appropriateness of the proposed mode(s) of delivery to facilitate students’ successful completion of the program-level learning outcomes
7. Ways in which the curriculum addresses the current state of the discipline or area of study
	* 1. **Program Requirements for Graduate Programs Only**
8. Clear rationale for program length that ensures that students can complete the program-level learning outcomes and requirements within the proposed time
9. Evidence that each graduate student in the program is required to take a minimum of two-thirds of the course requirements from among graduate-level courses
10. For research-focused graduate programs, clear indication of the nature and suitability of the major research requirements for degree completion
	* 1. **Assessment of Teaching and Learning**
11. Appropriateness of the methods for assessing student achievement of the program-level learning outcomes and degree level expectations
12. Appropriateness of the plans to monitor and assess:
	1. The overall quality of the program
	2. Whether the program is achieving in practice its proposed objectives
	3. Whether its students are achieving the program-level learning outcomes
	4. How the resulting information will be documented and subsequently used to inform continuous program improvement
		1. **Admission Requirements**
13. Appropriateness of the program’s admission requirements given the program’s objectives and program-level learning outcomes
14. Sufficient explanation of alternative requirements, if applicable, for admission into a graduate, second-entry or undergraduate program, e.g., minimum grade point average, additional languages or portfolios, and how the program recognizes prior work or learning experience
	* 1. **Resources**

Given the program’s planned/anticipated class sizes and cohorts as well as its program-level learning outcomes:

1. Participation of a sufficient number and quality of core faculty who are competent to teach and/or supervise in and achieve the goals of the program and foster the appropriate academic environment
2. If applicable, discussion/explanation of the role and approximate percentage of adjunct and part-time faculty/limited term appointments used in the delivery of the program and the associated plans to ensure the sustainability of the program and quality of the student experience
3. If required, provision of supervision of experiential learning opportunities
4. Adequacy of the administrative unit’s planned utilization of existing human, physical and financial resources including implications for the impact on other existing programs at the university
5. Evidence that there are adequate resources to sustain the quality of scholarship and research activities produced by students, including library support, information technology support, and laboratory access
6. If necessary, additional institutional resource commitments to support the program in step with its ongoing implementation
	* 1. **Resources for Graduate Programs Only**

Given the program’s planned/anticipated class sizes and cohorts as well as its program-level learning outcomes:

1. Evidence that faculty have the recent research or professional/clinic expertise needed to sustain the program, promote innovation, and foster an appropriate intellectual climate
2. Where appropriate to the program, evidence that financial assistance for students will be sufficient to ensure adequate quality and number of students
3. Evidence of how supervisory loads will be distributed, in light of qualifications and appointment status of the faculty
	* 1. **Quality and Other Indicators**
4. Evidence of the quality of the faculty (e.g., qualifications, funding, honours, awards, research, innovation and scholarly record; appropriateness of collective faculty expertise to contribute substantively to the program and commitment to student mentoring)
5. Any other evidence that the program and faculty will ensure the intellectual quality of the student experience

## Appendix C – Undergraduate Degree Level Expectations (UDLEs)

Formulated by the Ontario Council of Academic Vice Presidents (OCAV) and affirmed by Trent University Senate February 15, 2011

| **Expectations** | **General Bachelor’s Degree**This degree is awarded to students who have demonstrated the following | **Honours Bachelor’s Degree**This degree is awarded to students who have demonstrated the following |
| --- | --- | --- |
| 1. Depth and Breadth of Knowledge | a) a general knowledge and understanding of many key concepts, methodologies, theoretical approaches and assumptions in a discipline; b) a broad understanding of some of the major fields in a discipline, including, where appropriate, from an interdisciplinary perspective, and how the fields may intersect with fields in related disciplines; c) an ability to gather, review, evaluate and interpret information relevant to one or more of the major fields in a discipline; d) some detailed knowledge in an area of the discipline; e) critical thinking and analytical skills inside and outside the discipline; andf) the ability to apply learning from one or more areas outside the discipline. | a) a developed knowledge and critical understanding of the key concepts, methodologies, current advances, theoretical approaches and assumptions in a discipline overall, as well as in a specialized area of a discipline; b) a developed understanding of many of the major fields in a discipline, including, where appropriate, from an interdisciplinary perspective, and how the fields may intersect with fields in related disciplines; c) a developed ability to: gather, review, evaluate and interpret information; and compare the merits of alternate hypotheses or creative options, relevant to one or more of the major fields in a discipline;d) a developed, detailed knowledge of and experience in research in an area of the discipline; e) developed critical thinking and analytical skills inside and outside the discipline; andf) the ability to apply learning from one or more areas outside the discipline. |
| 2. Knowledge of Methodologies | … an understanding of methods of enquiry or creative activity, or both, in their primary area of study that enables the student to:* evaluate the appropriateness of different approaches to solving problems using well established ideas and techniques; and
* devise and sustain arguments or solve problems using these methods.
 | … an understanding of methods of enquiry or creative activity, or both, in their primary area of study that enables the student to:* evaluate the appropriateness of different approaches to solving problems using well established ideas and techniques;
* devise and sustain arguments or solve problems using these methods; and
* describe and comment upon particular aspects of current research or equivalent advanced scholarship.
 |
| 3. Application of Knowledge | a) the ability to review, present, and interpret quantitative and qualitative information to: * develop lines of argument; and
* make sound judgments in accordance with the major theories, concepts and methods of the subject(s) of study;

b) the ability to use a basic range of established techniques to:* analyze information;
* evaluate the appropriateness of different approaches to solving problems related to their area(s) of study; and
* propose solutions; and

 c) the ability to make use of scholarly reviews and primary sources. | a) the ability to review, present and critically evaluate qualitative and quantitative information to: * develop lines of argument;
* make sound judgments in accordance with the major theories, concepts and methods of the subject(s) of study;
* apply underlying concepts, principles, and techniques of analysis, both within and outside the discipline; and
* where appropriate use this knowledge in the creative process;

b) the ability to use a range of established techniques to:* initiate and undertake critical evaluation of arguments, assumptions, abstract concepts and information;
* propose solutions;
* frame appropriate questions for the purpose of solving a problem;
* solve a problem or create a new work; and

c) the ability to make critical use of scholarly reviews and primary sources. |
| 4. Communica-tion Skills | … the ability to communicate accurately and reliably, orally and in writing to a range of audiences. | … the ability to communicate information, arguments, and analyses accurately and reliably, orally and in writing to a range of audiences. |
| 5. Awareness of Limits of Knowledge | … an understanding of the limits to their own knowledge and how this might influence their analyses and interpretations. | … an understanding of the limits to their own knowledge and ability, and an appreciation of the uncertainty, ambiguity and limits to knowledge and how this might influence analyses and interpretations. |
| 6. Autonomy and Professional Capacity | a) qualities and transferable skills necessary for further study, employment, community involvement and other activities requiring:* the exercise of personal responsibility and decision-making; and
* working effectively with others;

b) the ability to identify and address their own learning needs in changing circumstances and to select an appropriate program of further study; and c) behaviour consistent with academic integrity and social responsibility. | a) qualities and transferable skills necessary for further study, employment, community involvement and other activities requiring: * the exercise of initiative, personal responsibility and accountability in both personal and group contexts;
* working effectively with others; decision-making in complex contexts;

b) the ability to manage their own learning in changing circumstances, both within and outside the discipline and to select an appropriate program of further study; and c) behaviour consistent with academic integrity and social responsibility. |

## Appendix D – Graduate Degree Level Expectations (GDLEs)

Formulated by the Ontario Council of Academic Vice Presidents (OCAV) and affirmed by Trent University Senate February 15, 2011

| **Expectations** | **Master’s Degree**This degree is awarded to students who have demonstrated the following | **Doctoral Degree**This degree is awarded to students who have demonstrated the following |
| --- | --- | --- |
| 1. Depth and Breadth of Knowledge | A systematic understanding of knowledge, and a critical awareness of current problems and/or new insights, much of which is at, or informed by, the forefront of their academic discipline, field of study, or area of professional practice; | A thorough understanding of a substantial body of knowledge that is at the forefront of their academic discipline or area of professional practice. |
| 2. Research and Scholarship | A conceptual understanding and methodological competence that* Enables a working comprehension of how established techniques of research and inquiry are used to create and interpret knowledge in the discipline;
* Enables a critical evaluation of current research and advanced research and scholarship in the discipline or area of professional competence; and
* Enables a treatment of complex issues and judgments based on established principles and techniques; and,

On the basis of that competence, has shown at least one of the following: * The development and support of a sustained argument in written form; or
* Originality in the application of knowledge.
 | a) The ability to conceptualize, design, and implement research for the generation of new knowledge, applications, or understanding at the forefront of the discipline, and to adjust the research design or methodology in the light of unforeseen problems; b) The ability to make informed judgments on complex issues in specialist fields, sometimes requiring new methods; and c) The ability to produce original research, or other advanced scholarship, of a quality to satisfy peer review, and to merit publication. |
| 3. Level of Application of Knowledge | Competence in the research process by applying an existing body of knowledge in the critical analysis of a new question or of a specific problem or issue in a new setting. | The capacity to:* Undertake pure and/or applied research at an advanced level; and
* Contribute to the development of academic or professional skills, techniques, tools, practices, ideas, theories, approaches, and/or materials.
 |
| 4. Professional Capacity/ Autonomy | a) The qualities and transferable skills necessary for employment requiring * The exercise of initiative and of personal responsibility and accountability;
* Decision-making in complex situations; and

b) The intellectual independence required for continuing professional development; c) The ethical behavior consistent with academic integrity and the use of appropriate guidelines and procedures for responsible conduct of research; andd) The ability to appreciate the broader implications of applying knowledge to particular contexts. | a) The qualities and transferable skills necessary for employment requiring the exercise of personal responsibility and largely autonomous initiative in complex situations; b) The intellectual independence to be academically and professionally engaged and current; c) The ethical behavior consistent with academic integrity and the use of appropriate guidelines and procedures for responsible conduct of research; and d) The ability to evaluate the broader implications of applying knowledge to particular contexts. |
| 5. Level of Communication Skills | The ability to communicate ideas, issues and conclusions clearly. | The ability to communicate complex and/or ambiguous ideas, issues and conclusions clearly and effectively. |
| 6. Awareness of Limits of Knowledge | Cognizance of the complexity of knowledge and of the potential contributions of other interpretations, methods, and disciplines. | An appreciation of the limitations of one’s own work and discipline, of the complexity of knowledge, and of the potential contributions of other interpretations, methods, and disciplines. |