APPENDIX 1

Policy for Approval and Review of Academic Programs

February 10, 2005
Draft revisions – March 30, 2010

The University of Toronto is committed to excellence in all our academic programs. Accordingly, we are committed to assessing and improving our programs and the academic units in which programs reside. Quality assurance through assessment of new program proposals and review of academic programs and units is a priority for the University of Toronto.

This Policy outlines university-wide principles for the approval of proposed new academic programs and the review of existing academic programs. The Policy aligns the University's quality assurance processes and the provincial context.

The purpose of the Policy is to establish consistency at the University so that:

- Proposals for new undergraduate and graduate degree and diploma programs undergo thorough review in order to ensure that they are of high academic quality and merit.
- Existing programs are externally reviewed on a cyclical basis in order to assess their academic quality and merit.
- Major modifications to existing programs are reviewed and undergo internal assessment in order to ensure that they are of high academic quality and merit.
- The processes of assessment and review provides governance the wherewithal to make approvals or recommendations. The review processes must address the quality of programs, and how the program and the unit in which it resides compares to the best in its field among international peer institutions. For the University of Toronto as a whole, those peer institutions comprise the first rank of public research universities. For any given program, the relevant peers may be drawn from a top tier that includes private as well as public institutions.
- The quality of the scholarship of the professoriate and students, and the degree to which that scholarship is brought to bear in teaching are the foundations of academic excellence. More generally, all of the factors that contribute to collegial and scholarly life —academic and administrative complement, research and scholarly activity, infrastructure, governance, etc.—bear on the quality of academic programs and the broad educational experience of students. Reviews are intended to help assess and then improve quality in all of these aspects.

Scope

This Policy applies to submissions for approval of new academic undergraduate and graduate programs, and the reviews of existing programs and academic units that offer programs. Reviews of existing programs are commissioned by academic administrators at the University of Toronto.

Deleted: Assessment
Deleted: and Units
Deleted: Whether for proposed or existing programs and units, internal assessments
Deleted: formalizes
Deleted: assessment
Deleted: and units within a standard framework
Deleted: New program and unit p
Deleted: internal assessment
Deleted: before submission to governance for approval
Deleted: their
Deleted: are fully developed and documented
Deleted: and units
Deleted: regular
Deleted: ensure
Deleted: <#> Whether for proposed or existing programs and units, internal assessments and reviews ensure that the programs and units are aligned with the objectives of the University as specified within the *Statement of Institutional Purpose* and thereby advance the mission of the University.¶
Deleted: hrough t
Deleted: internal
Deleted: , a sound basis of information is provided in order for approval decisions or recommendations for improvement to be made. Both processes
Deleted: questions of what is being done well, what is not being done well,
Deleted: or
Deleted: will compare or
Deleted: or unit
Deleted: The assessment or review of an academic program and/or unit entails a review of the academic unit(s), and *vice versa.*
Deleted: and units
Deleted: ensure
Deleted: 3) This policy incorporates (within Appendix A) and replaces the existing University Policy *Accountability Framework for Reviews of Academic Programs and Units.*¶
¶
Deleted: of internal assessments
Deleted: proposed
Deleted: and units and
Deleted: and units.

For the purpose of this Policy, a "program" is defined as an identified set and sequence of courses within an area of study, which is completed in full or partial fulfillment of the requirements for the granting of an undergraduate, second-entry or graduate degree. This Policy applies to all such programs to which resources are dedicated.

Procedures

1) Administrative procedures for the approval and review of academic programs will be set by the Office of the Vice-President and Provost, within the *University of Toronto Quality Assurance Process*, as ratified Quality Council and reported for information to Governing Council.

2) The *University of Toronto Quality Assurance Process* will include the protocols by which approvals and reviews will be conducted, the content of the required documents, as well as the circulation of proposals and reports to governance.

3) Authority for periodically revising and ensuring implementation of the *University of Toronto Quality Assurance Process* and associated manuals rests with the Office of the Vice-President and Provost. Changes to the process will be presented to Governing Council for information.

4) Reviews of academic programs by external bodies form part of collegial self-regulatory systems to ensure that mutually agreed-upon threshold standards of quality are maintained in proposed and existing programs. Such appraisals may serve different purposes than those commissioned by the University. In conducting a review of a program or unit, external reviewers should be presented, where appropriate, with any non-University commissioned reviews (for example, professional accreditation or Ontario Council on Graduate Studies) completed since the last review of the program or unit.

5) Where possible, the University process should aim to streamline the review process by aligning the scheduling of undergraduate and graduate program reviews offered by an academic unit and assessing the alignment of mandates of externally and internally commissioned reviews and supplementing documentation as necessary.

Accountability

1) New Programs

Assessment of proposed new programs is part of the procedure of submission to governance. Proposal assessment is a critical process that ensures the quality and merit of the proposal is fully developed before entering governance so that appropriate decisions can be made as to whether the program should be established.

2) Existing Programs and Units

Reviews are important mechanisms of accountability. Academic administrators are accountable for the discharge of their responsibilities through a line of accountability that reaches from chairs and directors to deans and principals to the Provost to the President and ultimately to University governance. As part of this structure of accountability, governors have a responsibility to ensure that appropriate mechanisms for reviewing academic programs with a view to ensuring and improving their quality are in place. The *Accountability Framework for Review of Academic Programs* is incorporated in Appendix A.

Deleted: ¶
3) For the purposes of this Policy, academic unit is defined by Section 1(l)(a) of the University of Toronto Act 1971, amended in 1978: an "academic unit" means University College and a college, faculty, school, institute, department or other academic division of the University so designated by the Governing Council.¶

Deleted: Administrative p

Deleted: application and process of the internal assessment of

Deleted: proposed new

Deleted: and units

Deleted: *document Guidelines for Assessment of Divisional Submissions*

Deleted: The Provostial Guidelines incorporate and replace Section III of the *Guidelines for Divisional Submissions* (approved by the Committee on Academic Policy and Programs on October 23, 2002).¶

Deleted: Administrative procedures for the application and process of reviews of existing academic programs and units will be set by the Office of the Provost, within the document *Guidelines for Review of Academic Programs and Units*, and reported for information to Governing Council.

Deleted: *Guidelines for Review*

Deleted: procedures for the application of the reviews, the process

Deleted: reviews and administrative response

Deleted: any

Deleted: and submission

Deleted: both

Deleted: procedural Guidelines is delegated to

Deleted: Any

Deleted: c

Deleted: Guidelines

Deleted: new

Deleted: reviews

Deleted: Internal a

Deleted: and units

Deleted: by Governing Council

Deleted: or unit

Deleted: and units

Deleted: *and Units* was approved by the Executive Committee of the ... [1]

Deleted: into the current document as

APPENDIX A

Accountability Framework for Cyclical Review of Academic Programs

Responsible Agent	Responsibilities	Mechanism
Governing Council:	Ensuring that University administration is monitoring the quality of academic programs and is taking the necessary steps to address problems and achieve improvements	Receive program review report (including summaries of all reviews) and record of AP&P and Executive Committee discussion
a) Executive Committee	Monitoring overall review audit process; identification of any changes required in process; discussion of any major unresolved issues with President and Provost	Receive program review report (including summaries of all reviews) and record of AP&P discussion
b) Agenda Committee of Academic Board	Identifying any specific academic issues raised by the overview of reviews that warrant discussion by the Academic Board	Receive program review report (including summaries of all reviews) and record of AP&P discussion
c) Committee on Academic Policy and Programs	Undertaking a comprehensive overview of review results and administrative responses	Receive program review report including summaries of all reviews, identifying key issues and administrative responses. Discuss annual report at dedicated program review meeting with relevant academic leadership; forward to Executive Committee
Provost	Monitoring quality of all academic programs and units in the University and taking necessary steps to address problems and achieve improvements	Ensure all programs, and the units in which they reside, are reviewed on a cyclical basis not to exceed eight years. Commission reviews of programs in single departmental faculties. Receive reviews of programs within multi-departmental faculties Prepare summaries of reviews of and request administrative response Forwarding to Governing Council
Dean of multi-departmental faculty	Monitoring quality of all academic programs and units in the Faculty and taking necessary steps to address problems and achieve improvements	Commission and respond to reviews of academic programs, and the units in which the programs reside, within the Faculty and programs that are offered jointly with external institutions.

Deleted: *s*

Deleted: *and Units*

Deleted: le for

Deleted: annual

Deleted: and units

Deleted: annual

Deleted: general

Deleted: annual

Deleted: annual

Deleted: Commission and respond to reviews of faculties and colleges¶ Prepare summaries of reviews of faculties and colleges, including administrative response¶

Deleted: units

Deleted: faculties

Deleted: colleges, including

Deleted: Prepare overall summary of all reviews, for f

Deleted: /Principal

Deleted: Prepare summaries of all reviews within the Faculty¶ Forward reviews and summaries, including administrative responses, to Provost

DRAFT

APPENDIX 2

UNIVERSITY OF TORONTO

OFFICE OF THE VICE PRESIDENT & PROVOST

University of Toronto Quality Assurance Process (UTQAP)

Draft March 30, 2010

draft

1. Quality Assurance Context

1.1 Overview

1.2 Institutional authority and Quality Council contacts

2 New Program Approval Protocol

2.1 Purpose and application

2.2 Overview of the approval process and submission timing

2.3 Evaluation criteria

- 2.3.1 Objectives
- 2.3.2 Admission requirements
- 2.3.3 Structure
- 2.3.4 Content
- 2.3.5 Mode of delivery
- 2.3.6 Assessment of teaching and learning
- 2.3.7 Resources for all programs
- 2.3.8 Resources for graduate programs only
- 2.3.9 Resources for undergraduate programs only
- 2.3.10 Quality and other indicators

2.4 Initial institutional process

- 2.4.1 Institutional Authority and Quality Council contact
- 2.4.2 New program proposal brief development and submission
- 2.4.3 Program proposal brief
- 2.4.4 External appraisal (new undergraduate degrees and new graduate programs)
- 2.4.5 Appraisal report
- 2.4.6 Administrative responses
- 2.4.7 Governance approval
- 2.4.8 Quality Council Secretariat notification
- 2.4.9 Announcement of new program

2.5 Initial Quality Council appraisal process

- 2.5.1 Secretariat check
- 2.5.2 Appraisal committee reviews and recommends

2.6 Quality Council appraisal process continuation

- 2.6.1 Institution may consult/appeal to Committee
- 2.6.2 Institution may appeal to Council. Council decides
- 2.6.3 Council reports decision
- 2.6.4 Waiting period before submission
- 2.6.5 Subsequent with report appraisal
- 2.6.6 Council hears with report appeal. Council decides

2.7 Subsequent University process
- 2.7.1 Ministry of Training, Colleges and Universities (MTCU) funding approval for new undergraduate degrees, and graduate programs and for-credit diplomas
- 2.7.2 Implementation window
- 2.7.3 First cyclical review

2.8 Quality Council audit process

3. Major Modifications to Existing Programs Protocol

3.1 Proposal brief

3.2 Institutional process and approval

3.3 Annual report to Quality Council

3.4 Subsequent University process

4. Cyclical Program Review Protocol

4.1 Purpose and application

4.2 Institutional authority and Quality Council contact

4.3 Review schedule and timing

4.4 Commissioning officer

4.5 Overview of the review process

4.6 Self-study: Internal program perspective
- 4.6.1 Unit of review
- 4.6.2 Terms of Reference
- 4.6.3 Announcement
- 4.6.4 Self-study contents
- 4.6.5 Core program evaluation criteria

4.7 External evaluation: Reviewer selection and review process
- 4.7.1 Selection of reviewers
- 4.6.2 Commissioning officer responsibilities
- 4.6.3 Review report scope – Terms of Reference
- 4.6.4 Documentation to be provided to review
- 4.7.5 Site visit
- 4.7.6 Review report

4.8 Institutional perspective and response
- 4.8.1 Institutional authority – administrative perspective
- 4.8.2 Circulation of the Review Committee report
- 4.8.3 Final Assessment Report and Implementation Plan
- 4.8.4 University accountability and reporting requirements
- 4.8.5 Quality Council reporting requirements

4.9 Quality Council audit process

draft

University of Toronto Quality Assurance Process (UTQAP)

1. Quality Assurance Context

1.1 Overview

The University of Toronto's Mission in its *Statement of Institution Purpose* is a commitment "to being an internationally significant research university, with undergraduate, graduate, and professional programs of excellent quality." The foundation of quality assurance at the University of Toronto follows from its Mission. It is built on two primary indicators of academic excellence: (1) the quality of the scholarship of the professoriate and students, and (2) the success with which that scholarship is brought to bear on the achievement of Degree Level Expectations. The key indicators in assessing quality are thus how our programs compare to those of our international peer institutions and how well our programs meet their Degree Level Expectations. They inform the University's policies and procedures for program assessment.

The *Policy for Approval and Review of Academic Program*s governs the overall framework for the approval of proposed new programs and the review of existing programs s at the University of Toronto. The *University of Toronto Quality Assurance Process* (UTQAP) outlines the protocols for the assessment and approval of new programs, major modifications, and the review of existing programs. Administrative Manuals provide detailed procedures, best practices, and standardized templates for program quality assurance processes.

The *Policy* and UTQAP are consistent with our own mission, Degree Level Expectations and quality assurance processes and with the protocols in the Ontario Council of Academic Vice-Presidents *Quality Assurance Framework* (QAF) applicable to all Ontario institutions.[1] The *Quality Assurance Framework* assigns the responsibility for academic standards, quality assurance and program improvement, in the first instance, to universities themselves. The *Policy for Approval and Review of Academic Programs* and UTQAP were approved by the Governing Council of the UofT on (DATE). The UTQAP was ratified by the Quality Council on (DATE).

Our responsibilities for quality assurance extend to new and continuing undergraduate and graduate degree and diploma programs whether offered in full or in part by the UofT, or conjointly with any institutions federated and affiliated with the University. These responsibilities also extend to programs offered in partnership, collaboration or other such arrangement with other postsecondary institutions including colleges, universities, and institutes.

- The **New Program Approval Protocol** applies to new undergraduate degrees, undergraduate specialists and majors (for which a similar specialist/major is not already approved), graduate programs and diplomas, and collaborative and combined programs, and new fields in a graduate program. Once approved by University governance, these proposals (with the exception of graduate collaborative and combined programs) will be assessed by the Appraisal Committee of the Quality Council. This Council has the authority to approve or decline all new program proposals. Universities have vested in the Quality Council the authority to make the final decision on whether, following the Council-mandated appraisal of any proposed new undergraduate or graduate program, such programs may commence. New programs and degrees must be externally reviewed as part of the process leading to approval by institutional governance.

- The **Major Modification Protocol** is used to assure program quality where major substantive changes are made to existing and previously approved programs, and where learning outcomes

[1] In 2010, the Ontario Council of Academic Vice-Presidents (OCAV) through the Ontario Universities Council on Quality Assurance (OUCQA or the "Quality Council") approved the Quality Assurance Framework for quality assurance of undergraduate and graduate programs in Ontario effective as of September 2010. The Council operates at arm's length from government to ensure its independence. *Include link to web QAF document when final*

are not changed in ways that denote a truly new program. Major modifications are reported annually to the Quality Council.

- The **Cyclical Program Review Protocol** applies to the academic standards of existing undergraduate and graduate programs, including graduate diplomas and collaborative programs, to assure their ongoing improvement. The review of an academic program may entail a review of the academic unit(s).

Templates associated with these processes are included in an associated UTQAP Manual.
To be included here: overview of what is included in the Manuals.

The work of the Quality Council ensures that Ontario continues to have a rigorous quality assurance framework. The Council is responsible for conducting an Audit Process of university processes through a panel of auditors that reports to a committee of the Council. The panel examines each institution's compliance with its own Quality Assurance Process, as ratified by the Quality Council. The Quality Council approves and monitors the audit reports.

1.2 Institutional authority

The Vice-President and Provost is the chief academic officer and chief budget officer at the University of Toronto. The Vice-Provost, Academic Programs is responsible for the oversight of the University of Toronto Quality Assurance Process and ensuring UTQAP is applied in a manner that conforms to our quality assurance principles and Quality Council requirements.

Within the office of the Vice-Provost, Academic Programs, the Director, Academic Programs and Policy is the authoritative contact between the institution and the Quality Council.

New Program Proposals: The Office of the Vice-Provost, Academic Programs responds to divisional queries and facilitates proposal development with regards to institutional academic, planning and budget, student life, governance and approval aspects of proposals.

Major Modifications to Existing Programs: The Office of the Vice-Provost, Academic Programs receives proposed program modifications. The Office compiles an annual report of all divisional modifications.

Cyclical Review Process: The Office of the Vice-Provost, Academic Programs is responsible for ensuring that cyclical reviews of academic programs and/or units are undertaken.

To be included: info on VPAP programs website and info available; info regarding database repository

draft

2 New Program Approval Protocol

The primary responsibility for the design and quality assurance of new undergraduate and graduate programs lies with the University and our governing bodies. Our academic faculties and schools and their academic units are responsible for curriculum design, the development of program objectives, the determination of learning outcomes, and generally for the assembly of human, instructional and physical resources. The approval protocol aims to ensure that programs are aligned with the objectives of the academic faculties and schools and of the University as specified within the *Statement of Institutional Purpose* and thereby advance the Mission of the University and the academic division.

2.1 Purpose and application

The *New Program Approval Protocol* sets out the steps to be taken at the University to assemble and provide the information required for new program proposals. The purpose of the *Protocol* is to ensure that the procedures followed for the assessment of proposed new academic programs is in accordance with the University *Policy for Approval and Review of Academic Programs* and the *Quality Council Quality Assurance Framework*.

The *New Program Approval Protocol* applies to the development of new undergraduate degrees, undergraduate specialists and majors (for which a similar specialist/major is not already approved) and for-credit graduate degrees and programs offered in full or in part by the UofT or jointly or conjointly by any institutions federated or affiliated with the University:

- Assessments of New Program Proposals are conducted within the division and by the Office of the Provost as part of program development prior to submission to University governance.
- Each program has an identified officer who is responsible for preparing the New Program Proposal Brief. The divisional dean is responsible for commissioning the initial external appraisal in multi-departmental faculties. Reviews of single-department faculties are commissioned by the Office of the Vice-President and Provost. Interdivisional programs and units that are inter- and multidisciplinary must have an identified permanent lead administrative division and identify a commissioning officer for the future review of the program.
- The core program proposal criteria must address the purpose, process, content and accountability of submissions.
- Programs that are inter-institutional and offered jointly, conjointly and/or in affiliation with other higher education institutions (colleges and universities) through formal agreements, are assessed as entities distinct from the larger institutions within which they are included. Program proposals specify how future reviews will be conducted.

2.2 Overview of the program approval process and submission timing

The steps required to develop and approve proposals for new undergraduate degrees, undergraduate specialists or majors (where no similar specialist/major has been approved), graduate programs, degrees and for-credit diplomas, collaborative programs, and graduate program fields are indicated in Figures 1a, b and c. Definition and approval processes for certificate programs are outlined in the University's *Policy on Diploma and Certificate Program*s.[2] Both the University and Quality Council processes are included..

Proposal submission timing: Proposals may be submitted to the Vice-Provost, Academic Programs at any time; however, in order for program proposals to take effect for the fall, they should be forwarded to the Quality Council no later than mid-December of the previous year. This entails co-ordination of the

[2] http://www.governingcouncil.utoronto.ca/Assets/Governing+Council+Digital+Assets/Policies/PDF/ppdec022003.pdf

divisional Dean/Director and the Vice-Provost, Academic Programs for timely brief completion and presentation to divisional and university governance.[3]

draft

[3] The schedule relating Governing Council Cycle meetings and Office of the Provost deadlines is available annually online: http://www.provost.utoronto.ca/Assets/Provost+Digital+Assets/Provost/policy/GCycle.pdf.pdf

Figure 1a: Process for approval of new undergraduate and graduate degrees and programs

1. INTERNAL UNIVERSITY PROCESS

Division: Proposal initiation

Provost's Office: Preliminary discussion

Academic- Undergraduate and Graduate:

- Program rationale including its fit with the unit's academic plan.
- Appropriateness of the name and designation.
- Program description, requirements, content and standards; program objectives; degree level expectations; degree requirements; faculty and teaching staff requirements and supervisory capacity.
- Impact on the nature and quality of the division's program of study and any impact that such major proposals may have on other divisions; coordination of consultation with other affected divisions.
- Inter-divisional and inter-institutional consultations and agreements/contracts.

Planning & Budget

- Resource implications, including, but not limited to, such areas as staffing, space, libraries and computing facilities, enrolment/admissions, revenue/costs, financial aid.
- Enrolment planning and revenue and expense projections.
- MTCU program approvals process and submission requirements and BIU eligibility with the Government and Institutional Relations.

Space & Facilities: Operating costs; space allocations; capital project approvals.
Students: Student affairs and services; registrarial & information systems; awards & admissions.

Division: Proposal development

Broad consultation: with faculty, students, other academic divisions (including School of Graduate Studies for graduate programs), external stakeholders

Provost's Office signoff

Faculty: External appraisal commissioned

Division and Provost's Office: Internal response to review appraisal

Divisional Governance Approval

Provost's Office: Submits proposal for University Governance Approval: AP&P, Academic Board

Provost's Office: Submits proposal to Quality Council

2. QUALITY COUNCIL APPROVAL PROCESS

Appraisal Committee Review and Recommendation
(normally within 45 days of receipt of the institution's submission)

Quality Council Approval to Commence

3. MTCU PROCESS

University: Submission to MTCU if new degree

4. FOLLOW-UP PROCESS

Ongoing program monitoring by the University
Cyclical Review within 8 years of first enrolment

draft

Figure 1b: Process for approval of new for-credit-graduate diplomas, collaborative programs, and new fields in a graduate program

1. INTERNAL UNIVERSITY PROCESS

Division: Proposal initiation

Provost's Office: Preliminary discussion

Academic- Graduate:

- Program rationale including its fit with the unit's academic plan.
- Appropriateness of the name and designation.
- Program description, requirements, content and standards; program objectives; degree level expectations; degree requirements; faculty and teaching staff requirements and supervisory capacity.
- Impact on the nature and quality of the division's program of study and any impact that such major proposals may have on other divisions; coordination of consultation with other affected divisions.
- Inter-divisional and inter-institutional consultations and agreements/contracts.

Planning & Budget

- Resource implications, including, but not limited to, such areas as staffing, space, libraries and computing facilities, enrolment/admissions, revenue/costs, financial aid.
- Enrolment planning and revenue and expense projections.
- MTCU program approvals process and submission requirements and BIU eligibility with the Government and Institutional Relations.

Space & Facilities: Operating costs; space allocations; capital project approvals.
Students: Student affairs and services; registrarial & information systems; awards & admissions.

Division: Proposal development

Broad consultation: with faculty, students, other academic divisions (including School of Graduate Studies), external stakeholders

Provost's Office signoff

Divisional Governance Approval

Provost's Office: Submits proposal to University Governance Approval: AP&P

Provost's Office: Submits proposal to Quality Council

2. QUALITY COUNCIL APPROVAL PROCESS

Expedited Approval Process: Appraisal Committee Review and Recommendation
(normally within 45 days of receipt of the institution's submission)

Quality Council Approval to Commence

3. MTCU PROCESS

University: Submission to MTCU if new diploma

4. FOLLOW-UP PROCESS

Ongoing program monitoring by the University
Cyclical Review within 8 years of first enrolment

draft

Figure 1c: Process for approval of new undergraduate specialists and majors (where a similar specialist /major is not already approved)

1. INTERNAL UNIVERSITY PROCESS

Division: Proposal initiation and development

Provost's Office: Preliminary discussion

Academic- Undergraduate:

- Program rationale including its fit with the unit's academic plan.
- Appropriateness of the name and designation.
- Program description, requirements, content and standards; program objectives; degree level expectations; degree requirements; faculty and teaching staff requirements and supervisory capacity.
- Impact on the nature and quality of the division's program of study and any impact that such major proposals may have on other divisions; coordination of consultation with other affected divisions.
- Inter-divisional and inter-institutional consultations and agreements/contracts.

Division: Proposal development

Broad consultation: with faculty, students, other academic divisions, external stakeholders

Provost's Office signoff

Faculty: External appraisal commissioned

Division and Provost's Office: Internal response to review appraisal

Divisional Governance Approval

Provost's Office: Submits proposal to University Governance Approval: AP&P

Provost's Office: Submits proposal to Quality Council
Divisional Governance Approval

2. QUALITY COUNCIL PROCESS

Appraisal Committee Review and Recommendation
(normally within 45 days of receipt of the institution's submission)

Quality Council Approval to Commence

4. FOLLOW-UP PROCESS

Ongoing program monitoring by the University
Cyclical Review within 8 years of first enrolment

draft

2.3 Evaluation Criteria

Proposals for new graduate or undergraduate programs are evaluated against the following criteria. Academic divisions are responsible for the development of a New Program Proposal Brief that addresses the evaluation criteria below together with any further divisional requirements which the academic division chooses to apply (see Templates in New Program Proposal Manual).

2.3.1 Objectives

a) Consistency of the program with the institution's mission and academic plans.
b) Clarity and appropriateness of the program's requirements and associated learning outcomes in addressing the institution's own undergraduate or graduate Degree Level Expectations.
c) Appropriateness of degree nomenclature.

2.3.2 Admission requirements

a) Appropriateness of the program's admission requirements for the learning outcomes established for completion of the program.
b) Sufficient explanation of additional requirements, if any, for admission into a graduate, second-entry or undergraduate program, such as minimum grade point average or additional languages or portfolios, along with how the program recognizes prior work or learning experience.

2.3.3 Structure

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

2.3.4 Program content

a) Ways in which the curriculum addresses the current state of the discipline or area of study.
b) Identification of any unique curriculum or program innovations or creative components.
c) For research-focused graduate programs, clear indication of the nature and suitability of the major research requirements for degree completion.
d) 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.

2.3.5 Mode of delivery

Appropriateness of the proposed mode(s) of delivery (distance learning, compressed part-time, online, mixed-mode or non-standard forms of delivery, flex-time options) to meet the intended program learning outcomes and Degree Level Expectations.

2.3.6 Assessment of teaching and learning

a) Appropriateness of the proposed methods for the assessment of student achievement of the intended program learning outcomes and Degree Level Expectations.
b) Completeness of plans for documenting and demonstrating the level of performance of students, consistent with the institution's statement of its Degree Level Expectations (see New Program Manual).

2.3.7 Resources for all programs

a) Adequacy of the administrative unit's planned utilization of existing human, physical and financial resources, and any institutional commitment to supplement those resources to support the program.
b) Participation of a sufficient number and quality of faculty who are competent to teach and/or supervise in the program.
c) Evidence that there are adequate resources to sustain the quality of scholarship and research activities of undergraduate and graduate students, including library support, information technology support, and laboratory access.

Draft

d) A budget outline including proposed enrolment, proposed tuition, and indication of whether the proposed program will be cost-recovery.

2.3.8 Resources for graduate programs only

a) Evidence that faculty have the recent research or professional/clinical expertise needed to sustain the program, promote innovation and foster an appropriate intellectual climate.
b) Where appropriate to the program, evidence that financial assistance for students will be sufficient to ensure adequate quality and numbers of students.
c) Evidence of how supervisory loads will be distributed, and the qualifications and appointment status of supervisors.

2.3.9 Resources for undergraduate programs only

a) Evidence of and planning for adequate numbers and quality of faculty and staff to achieve the goals of the program.
b) Planning and commitment to provide the necessary resources in step with the implementation of the program.
c) Planned/anticipated class sizes.
d) Provision of supervision of experiential learning opportunities (where required).
e) The role of adjunct and part-time faculty.

2.3.10 Quality and other indicators

a) Definition and use of indicators that provide evidence of quality of the faculty (e.g., qualifications, research, innovation and scholarly record; appropriateness of collective faculty expertise to contribute substantively to the proposed program).
b) Evidence of program structure and faculty research that will ensure the intellectual quality of the student experience.

2.4 Initial Institutional Process

2.4.1 Institutional authority and Quality Council contact

The Vice-Provost, Academic Programs is responsible for the oversight of the University of Toronto Quality Assurance Process and ensuring UTQAP is applied in a manner that conforms to our quality assurance principles and Quality Council requirements. The Office of the Vice-Provost, Academic Programs responds to divisional queries and facilitates proposal development with regards to institutional academic, planning and budget, student life, governance and approval aspects of proposals.

Within the office of the Vice-Provost, Academic Programs, the Director, Academic Programs and Policy is the authoritative contact between the institution and the Quality Council.

2.4.2 New Program Proposal Brief development and submission to the Vice-Provost, Academic Programs

New programs are initiated within Faculties. The Office of the Dean of the academic division submits the initial proposal outline to the Vice-Provost, Academic Programs who is responsible for providing feedback regarding the program that includes the input of the Provost and additional Vice-Provosts, as appropriate.

Once the program has been approved to be developed, the division works with the Office of the Provost to develop the New Program Brief.

The Office of the Dean is responsible for the development of a new program proposal brief and ensures co-ordination and consultation with the Office of the Vice-Provost, Academic Programs. Divisions must consult with the Office of the Vice-Provost early in the process of proposal development. The Dean ensures the appropriate consultations are conducted with faculty and students, other university divisions and external institutions. The Dean/Director commissions the external appraisal of a new program as required.

Draft

The Office of the Provost provides input and reviews draft undergraduate and graduate proposals:

Academic- Undergraduate and Graduate:

- Program rationale including its fit with the unit's academic plan.
- Appropriateness of the name and designation.
- Program description, requirements, content and standards; program objectives; Degree Level Expectations; degree requirements; faculty and teaching staff requirements and supervisory capacity.
- Impact on the nature and quality of the division's program of study and any impact that such major proposals may have on other divisions; coordination of consultation with other affected divisions.
- Inter-divisional and inter-institutional consultations and agreements.

Planning & Budget

- Resource implications, including, but not limited to, such areas as staffing, space, libraries and computing facilities, enrolment/admissions, revenue/costs, and financial aid.
- Enrolment planning and revenue and expense projections.
- MTCU program approvals process and submission requirements and BIU eligibility with the Government and Institutional Relations, as appropriate.

Space & Facilities: Operating costs; space allocations; capital project approvals.

Students: Student affairs and services; registrarial and information systems; awards and admissions, student exchanges.

2.4.3 Program Proposal Brief

The Vice-Provost, Academic Programs confirms that the New Program Proposal Brief is complete, and includes information on all the evaluation criteria (Section 2.3) so that the submission process can continue.

2.4.4 External Appraisals (new undergraduate degrees, new graduate programs)

i) External reviews are required for new undergraduate degree programs, new specialists and majors (where there is no similar existing specialist or major program), and graduate program proposals only.[4] The following process is required in the selection and appointment of external appraisers who will review the new program proposal.

- External reviews of new program proposals are commissioned by the Dean of the relevant academic division.
- There will be at least one reviewer for new undergraduate programs and two for new graduate programs. (See Manual for a model letter of invitation and sample instructions to reviewers.)
- The reviewers will normally be associate or full professors, or the equivalent, with program management experience, and will be at arm's length from the program under appraisal. (See Manual for a definition of arm's length and for suggestions on the selection of reviewers.)
- External appraisal of new graduate program proposals must incorporate an on-site visit. External appraisal of new undergraduate program proposals will normally be conducted on-site, but may be conducted by desk audit, video-conference or an equivalent method if the external reviewer is satisfied that the off-site option is acceptable.
- External appraisers provide a joint report that appraises the standards and quality of the proposed program.

ii) New for-credit graduate diplomas, collaborative programs, and graduate fields

Outline here the expedited process – no external appraisal – go to 2.4.6

[4] For credit-diplomas do not require external appraisal.

The Expedited Approvals process requires the submission to the Quality Council of a Proposal Brief (see Manual) of the proposed program. Only the applicable criteria outlined in Section ___will be applied to the proposal. The process is further expedited by not requiring the use of an external appraisal; hence Sections ___ through ___do not apply. The Quality Council's appraisal and approval processes are reduced.

ii) New undergraduate specialists, majors/options, minors

Outline here pending final process in QAF

2.4.5 Appraisal report

The reviewers will normally provide a joint report (see Manual template) that appraises the standards and quality of the proposed program and addresses the evaluation criteria, including the associated faculty and material resources (see Manual for exceptions). They will also be invited to acknowledge any clearly innovative aspects of the proposed program together with recommendations on any essential or otherwise desirable modifications to it.

2..4.6 Administrative responses

Administrative responses to the Proposal Brief and Appraisal Report are required from both the Dean of the proposing academic unit and Vice-Provost, Academic Programs.

2.4.6 University of Toronto approval

Based on the Proposal Brief, the Appraisal Report and the internal administrative responses to both, the proposal will proceed through the divisional and university governance processes.

Divisional governance

Each academic division is responsible for delineating governance approval processes for new undergraduate and graduate programs/diplomas. The Vice-Provost, Academic Programs is responsible for reviewing these processes and ensuring compliance with the University and UTQAP processes. Each division will outline this process on its own council web site. A summary of divisional governance processes is available on the website of the Vice-Provost, Academic Programs.

University-wide governance

Proposals are submitted to university governance through the Provost's Office, which recommends items to the Committee on Academic Policy and Programs and Academic Board through their Senior Assessors.[5]

Upon approval of a new program by divisional council, the Proposal Brief, External Appraisal, and Administrative Responses are submitted to the Committee on Academic Policy and Programs by the Vice-Provost, Academic Programs. Pending approval by the Committee on Academic Policy and Programs, a summarized brief is submitted to Academic Board for final program approval. The summarized brief captures the program and appraisal elements along with the proposal development checklist.

[5] The schedule relating Governing Cycle meetings and Office of the Provost deadlines is available annually online: http://www.provost.utoronto.ca/Assets/Provost+Digital+Assets/Provost/policy/GCycle.pdf.pdf *(need to rvw the link or change to VPAP web site)*

2.4.7 Quality Council Secretariat

Upon approval by Academic Board, the Office of the Vice-Provost, Academic Programs will submit the Proposal Brief, together with all required reports and documents, to the Quality Council Secretariat. The submission template will require information on whether or not the proposed program will be a cost-recovery program. The same standards and protocols apply regardless of the source of funding.

2.4.8 Announcement of new programs

Following its submission to the Quality Council, the academic unit may announce its intention to offer the program, provided that clear indication is given that approval by the Quality Council is pending and that no offers of admission will be made until and unless the program is approved by the Council.

2.5 Initial Quality Council Appraisal Process

2.5.1 Secretariat check

The Quality Council Secretariat will confirm that the Proposal Brief and associated reports and internal responses to them (as set out in Section ___ above) are complete. If there is missing information or defects of substance, the Secretariat will return the Proposal Brief for revision or amendment and resubmission. Otherwise the Proposal Brief and accompanying documents will be forwarded directly to the Quality Council Appraisal Committee.

2.5.2 Appraisal Committee reviews and recommends

The Quality Council's Appraisal Committee reviews and appraises the complete file. This committee may seek further information, in which case it provides reasons for its requests . In rare instances, the Appraisal Committee may invite further input from an external expert, either through a desk audit or site visit. If no further information is required, the Appraisal Committee, through the Quality Council, will propose its recommendation, including a brief explanation of its reasons. This assessment includes one of the following recommendations:

a) Approval to commence;
b) Approval to commence, with report (This typically refers to some provision or facility not currently in place but planned for later implementation, often two to three years in the future. The with report condition implies no lack of quality in the program, does not hold up the implementation of the new program, and is not subject to public reference, whether on the web or elsewhere.)
c) Deferral for up to one year during which time the university may address identified issues and report back; or
d) Against approval.

This step will normally be completed within forty-five days of receipt of the institution's submission, provided that the submission is complete and in good order, and that no further information or external expert advice is required. Where additional information is required by the Appraisal Committee, one of the four possible recommendations (see above) to the Council will be made within a further thirty days of its receipt.

2.6 Quality Council appraisal process continuation

2.6.1 Institution may consult/appeal to Committee

When the recommendation is one of b), c) or d) in 2.5.2 above, the University may, within sixty days, make an appeal to, or request a meeting with, the Appraisal Committee for reconsideration. Normally, the grounds for seeking reconsideration are that the University will be providing new information, or that there were errors of fact in the Appraisal Committee's commentary, or there were errors of process. Following such communication, the Appraisal Committee revisits and may revise its assessment. It will convey its final recommendation to the Quality Council.

2.6.2 Institution may appeal to Council. Council decides

Having received and considered the Appraisal Committee's final assessment and recommendation, any additional comments from the University on the assessment, and further, having heard any requested

appeal from the University on matters of fact or procedure, the Council makes one of the following decisions:

a) Approved to commence;
b) Approved to commence, with report;
c) Deferred for up to one year, affording the University an opportunity to amend and resubmit its proposal brief; or
d) That the program proposal is declined.

When the Quality Council chooses option c), then the Appraisal Committee suspends the assessment process until the University has resubmitted its Brief. After this, the Appraisal Committee reactivates its appraisal process (see Section 2.5.2 above). When the Appraisal Committee does not receive a response within the specified period, it considers the proposal to have been withdrawn.

2.6.3 Council reports decision
The Quality Council conveys its decision to the University through the designated institutional contact, and reports it for information to OCAV and to the Ministry of Training, Colleges and Universities (MTCU). Information about decisions on approval to commence for new programs, together with a brief description of the programs, are posted on the websites of the Quality Council and the Vice-Provost, Academic Programs. Only at this point may the University make offers of admission to the program.

2.6.4 Waiting period before resubmission
To allow time for revisions to proposals, any institution declined permission to proceed at this stage (Section ___ of the process, or following a denied appeal of the decision (Section ___, will normally wait until one year has elapsed from the date of the Quality Council's decision before resubmitting a revised version of its proposal. The same waiting period normally applies when a university does not resubmit a deferred program proposal within the specified period.

2.6.5 Subsequent appraisal with report
When the University has been given approval to commence a program with report, the Appraisal Committee reviews the subsequently submitted report, conducts whatever consultation it requires, and then makes one of the following recommendations to the Council. That:

a) The program be approved to continue without condition.
b) The program may continue accepting admissions, but the Council requires additional follow-up and a report within a specified period, prior to the conduct of the initial cyclical review. On the Council's receipt of that required report, the procedure returns to this same step in the appraisal process (i.e., Section ___.
c) The program be required to suspend admissions for a minimum of two years. The Quality Council will then specify the conditions to be met in the interim in order for admissions to the program to resume.
d) The University may appeal, to the Quality Council, the proposed recommendation of the Appraisal Committee to suspend admissions to the program (Section __, on the same terms as are set out in Section ___ above (i.e., the University will be providing new information; and/or there were errors of fact in the Appraisal Committee's commentary; and/or there were errors of process).

2.6.6 Council hears appeal based on report. Council decides
Having received and considered the Appraisal Committee's recommendation, and the University's appeal,
if any, the Quality Council may decide:

a) To approve the program without condition, or
b) To approve the program continuing admissions with a further report, or
c) To require the program to suspend admissions for a minimum of two years. This decision is final. The Quality Council conveys its decision to the University, and reports it to OCAV and to MTCU for information.

2.7 Subsequent University Process

2.7.1 Ministry of Training, Colleges and Universities (MTCU) Funding Approval for New Undergraduate Degrees and Graduate Degrees and Programs

The Minister approves funding (BIU) for new degree and diploma programs. The approval process occurs several times per year. MTCU groups programs into three basic categories:

> **'Core' Arts and Science Undergraduate Programs:** Programs that are in basic disciplines which might be expected to be offered at any university and are appropriate to the academic ethos and character of any university. 'Core' programs do *not* require review for funding approval by the Quality Council.
>
> **Group A 'Non-Core' Undergraduate Programs:** Programs which do require the Minister's approval of funding.
>
> **Group B *all* Graduate Programs**

Proposals will be submitted to MTCU by the University once Quality Council approval has been received.

2.7.2 Implementation window

After a new program is approved to commence, the program will begin within **36 months** of that date of approval; otherwise the approval will lapse.

2.7.3 First cyclical review

The first cyclical review for any new program must be conducted no more than **8 years** after the date of the program's initial enrolment and normally in accordance with the UofT program review schedule. The Dean is responsible for conveying to the Vice-Provost, Academic Programs the inclusion of the program in the University's review schedule.

2.8 Quality Council Audit Process

At least one of the undergraduate programs and one of the graduate programs selected for the sample for each institutional audit (See Quality Assurance Framework Section 5.2.2) will be a New Program or a Major Modification to an Existing Program approved within the period since the conduct of the previous audit. The audit cannot reverse the approval of a program to commence.

draft

3 Major Modifications to Existing Programs Protocol

The fundamental purpose of the identification of major modifications to existing programs, and their submission through a robust quality assurance process which does not require but may include the Quality Council, is to assure the University, and the public, of the ongoing quality of all of our academic programs.

Major modification encompass restructuring of a program, merger of existing programs and refreshing of programs in order to keep them current with their academic discipline. They include:

a) Requirements that differ substantially from those existing at the time of the previous cyclical program review;
b) Significant changes to the learning outcomes;
c) Significant changes to the faculty engaged in delivering the program and/or to the essential physical resources as may occur, for example, where there have been changes to the existing mode(s) of delivery (e.g., different campus, online delivery, inter-institutional collaboration);
d) New majors or specialists where a similar specialist/major currently exists at the undergraduate level.

3.1 Proposal Brief

Major Modifications
To be included: overview of divisional documentation for brief.

3.2 Institutional Process and Approvals

Major Modifications – Figure 3
Major Modifications to programs are approved by Divisional Councils. They are reported annually to the Quality Council by the Office of the Vice-Provost, Academic Programs.

To be included: overview of divisional process principles.

Figure 3a: Process for approval of Major Modifications of undergraduate and graduate programs

1. INTERNAL UNIVERSITY PROCESS	**Division: Proposal modification initiation and development** ↓ **Consultation:** with faculty, students, other academic divisions (and School of Graduate Studies for graduate modifications), and external stakeholders as appropriate ↓ **Provost's Office signoff on major modification** **Divisional Governance Approval** ↓ **Division: Reports approval to the Office of the Vice-Provost Academic** ↓ **Provost's Office: Submits proposal to Quality Council as part of Annual Report**
2. FOLLOW-UP PROCESS	**Ongoing program monitoring by the University through Cyclical Program Review**

draft

3.3 Annual Report to the Quality Council

The Vice-Provost, Academic Programs will file an annual report to the Quality Council which provides a summary of major program modifications that were approved through the university's internal approval process in the past year.

3.4 Subsequent University Process

Cyclical review of the program according to the pre-existing cycle within 8 Years.

draft

4 Cyclical Program Review Protocol

4.1 Purpose and application

The *Cyclical Program Review Protocol* is used to secure the academic standards of existing undergraduate and graduate programs, including graduate diplomas and collaborative programs, and to assure their ongoing improvement. It sets out the steps to be taken at the University to review academic programs and/or units that offer academic programs. Academic programs and units are reviewed on a regular basis in order to ensure their quality and merit as stated in the *Policy on Approval and Review of Academic Programs*. Academic quality improvement and planning relies heavily on the review process. The review of an academic program or unit may entail a review of the academic unit(s), and vice versa.

The *Protocol* ensures that the procedures followed for the review of academic programs are in accordance with the University *Policy* and the Quality Council *Quality Assurance Framework*. The Protocol specifies the core review criteria related to the purpose, process and content of reviews; institutional authority; and accountability and circulation of the review reports. The University's procedures for reviews rely on program self-assessment and the perspective of external reviewers, as well as the program's attainment of its degree objectives.

The *Cyclical Program Protocol* applies to all undergraduate and graduate programs offered by the University and programs that are offered by the University with other institutions.

4.2 Institutional authority

The Vice-Provost, Academic Programs is responsible for the oversight of the University of Toronto Quality Assurance Process and ensuring UTQAP is applied in a manner that conforms to our quality assurance principles and Quality Council requirements. The Office of the Vice-Provost, Academic Programs is responsible for ensuring the cyclical reviews of academic programs and/or units are undertaken.

Within the office of the Vice-Provost, Academic Programs, the Director, Academic Programs and Policy is the authoritative contact between the institution and the Quality Council.

4.3 Programs and review schedule

The University's full complement of undergraduate, graduate and diploma programs are reviewed on a planned cycle.[6] Reviews are conducted on a regular basis, frequent enough to ensure that the academic leadership is kept informed of developments in all academic units, but at sufficiently long intervals that the effects of given actions can be assessed and that the system is not over-burdened by the logistical demands of the process. The interval between program reviews must not exceed eight years.

Review of an academic program can be completed through review of the academic unit offering the program. Such reviews may be timed to coincide with the end of term of the unit's head, as the review then also provides a clear mandate for the next leadership of the unit. Reviews of the various programs, undergraduate and graduate, offered by a given academic unit may be synchronized. Reviews may also be conducted concurrently with professional accreditation. Divisions can elect to conduct quality reviews at the level of the degree or program. Regardless of the schedule, the quality of each academic program and the learning environment of the students in each program are explicitly addressed as set out in the evaluation criteria below.

University-commissioned reviews are not waived because an externally-commissioned review, such as an accreditation, has recently been conducted. Reviews of academic programs for professional accreditation bodies form part of collegial self-regulatory systems to ensure that mutually agreed-upon threshold standards of quality are maintained in new and existing programs. Such reviews may serve different purposes than those commissioned by the University. Academic administrators within the University have limited discretion over the conduct of these externally-commissioned reviews; and the Cyclical Review Protocol is not intended to apply to such reviews. In such cases, however, the University

[6] Include link to provost website that contains listing or reviews/schedule

process may be streamlined by assessing the alignment of mandates of externally and internally commissioned reviews and supplementing documentation as necessary.

Interdivisional programs that are offered by more than one unit may be reviewed as entities distinct from the larger academic units within which they are included. Such programs must have an identified commissioning division for the purpose of administering the *Protocol*.

Inter-institutional programs that are offered in partnership with other higher education institutions (colleges and universities) through affiliation, federation and other formal agreements, are reviewed as entities distinct from the larger institutions within which they may be included. Such programs must have an identified review process for administering the Protocol.

4.4 Commissioning officer

Reviews of academic units and/or the programs they offer are commissioned by the academic administrator to whom the head of the unit reports: the Dean in the case of multi-departmental divisions, and the Vice-Provost, Academic Programs in the case of programs in single-departmental divisions and for reviews of Faculties as a whole. Commissioning officers are responsible for maintaining a schedule of reviews of programs that are their responsibility and communicating changes to review schedules to the Vice-Provost, Academic Programs.

In the case of programs that involve more than one unit, the review is commissioned by the lead academic administrator of the program.

- Reviews of programs that are offered across departments within a division are commissioned by the Dean.
- Reviews of programs that are offered across divisions are commissioned by the Dean of the identified administrative home of the program.
- Reviews of programs that are offered in partnership with other higher education institutions (colleges and universities) through formal collaborative and/or affiliation agreements are commissioned jointly by agreed upon and identified senior commissioning officers at the institutions.

4.5 Overview of the review process

The UTQAP for the conduct of **Cyclical Program Reviews** has five principal components:

a) Self-study (see Section);
b) External evaluation (peer review) with report and recommendations on program quality improvement (see Section ;
c) University evaluation of the self-study and the external assessment report resulting in recommendations for program quality improvement (see Section);
d) Preparation and adoption of plans to implement the recommendations and to monitor their implementation (see Section); and
e) Follow-up reporting on the principal findings of the review and the implementation of the recommendations (see Section).

draft

Figure 2 Overview of the Protocol for Cyclical Program Reviews.

1. INTERNAL UNIVERSITY PROCESS	**Initiation of Review by Commissioning Officer** ↓ **Commissioning Officer announces Review, Terms of Reference and reviewers to faculty, staff, students, internal and external communities** ↓ ↑ **Division: Self-study development; site visit scheduling** ↓ **Commissioning Officer's sign off on Self-study** ↓ **External Review site visit and report** ↓ **Response from program and Commissioning Officer** ↓ **Institutional Response, Final Assessment Report and Implementation Plan** ↓ **University accountability and reporting requirements: Committee on Academic Policy and Programs (biannual presentation)** ↓ **Circulation of the report and associated documents; Executive Summary posted on program web site and Vice-Provost, Academic Programs Quality Assurance web site**
2. QUALITY COUNCIL APPROVAL PROCESS	↓ **Institutional Response, Final Assessment Report and Implementation Plan presented to Quality Council** ↓
3. INTERNAL FOLLOW-UP PROCESS	**Ongoing program monitoring by the University** **Vice-Provost Academic Programs may request a follow-up report from the Commissioning Officer that is presented to the Committee on Academic Policy and Programs**

draft

4.6 Self-study Requirements: Internal program perspective

4.6.1 Unit of review

The commissioning officer defines the unit of review (*e.g.*, undergraduate program) and formally initiates the review process.

4.6.2 Terms of Reference

To be inserted

4.6.3 Announcement

A review is publicly announced by the commissioning officer through appropriate unit and/or program channels and University and/or divisional media as appropriate. Submissions are invited from teaching and administrative staff, students, alumni and members of the program and/or unit community.

4.6.4 Self-study contents

A *self-study* is a broad-based, reflective report that includes critical analysis. It is an assessment of the appropriateness and strength of the areas of activity in a program and/or the administrative unit. The process of preparing a self-study involves faculty, students and staff and the self-study outlines the nature of this involvement. The self-study must address and document the terms of reference and program evaluation criteria that will be provided to the external reviewers. The UTQAP Manual provides templates that outline the core elements of a self-study.

The self-study should be broad-based, reflective, forward-looking and include critical analysis. It must address and document the following:

1. The consistency of the program's learning outcomes with the institution's mission and divisional Degree Level Expectations, and how its graduates achieve those outcomes;
2. Program-related data and measures of performance, including applicable provincial, national and professional standards (where available);
3. The integrity of the data;
4. Review criteria and quality indicators identified in Section __ below;
5. Concerns and recommendations raised in previous reviews;
6. Areas identified through the conduct of the self-study as requiring improvement;
7. Areas that hold promise for enhancement;
8. Academic services that directly contribute to the academic quality of each program under review;
9. Participation of program faculty, staff, and students in the self-study and how their views have been obtained and taken into account.

The input of others deemed to be relevant and useful, such as graduates of the program, representatives of industry, the professions, practical training programs, and employers may also be included.

The self-study is reviewed and approved by the commissioning officer to ensure that it meets the core elements of a self-study and program evaluation criteria.

4.6.5 Core program evaluation criteria

Reviews of undergraduate and graduate programs and graduate diplomas require, at minimum, the evaluation criteria set out below. Commissioning officers may enlarge or enhance the criteria to meet their own needs. *(See Manual for standardized data to be included, etc)*

i) Objectives

- Program is consistent with the institution's mission and academic plans.

- Program requirements and learning outcomes are clear, appropriate and align with the degree's undergraduate and/or graduate Degree Level Expectations.

ii) Admission requirements
Admission requirements are appropriately aligned with the learning outcomes established for completion of the program.

iii) Curriculum
- The curriculum reflects the current state of the discipline or area of study and is appropriate for the level of the program..
- Evidence of any significant innovation or creativity in the content and/or delivery of the program relative to other such programs.
- Mode(s) of delivery to meet the program's identified learning outcomes are appropriate and effective.

iv) Teaching and assessment
- Methods for assessing student achievement of the defined learning outcomes and degree learning expectations are appropriate and effective.
- Appropriateness and effectiveness of the means of assessment, especially in the students' final year of the program, in clearly demonstrating achievement of the program learning objectives and the program's Degree Level Expectations.

v) Resources
Appropriateness and effectiveness of the academic unit's use of existing human, physical and financial resources in delivering its program(s). In making this assessment, reviewers must recognize the institution's autonomy in determining priorities for funding, space, and faculty allocation.

vi) Quality indicators
Outcome measures of student performance and achievement are of particular interest, but there are also important input and process measures which are known to have a strong association with quality outcomes. It is expected that many of the following listed examples will be widely used. The Manual makes reference to further sources and measures that might be considered.
- **Faculty**: qualifications, research and scholarly record; class sizes; percentage of classes taught by permanent or non-permanent (contractual) faculty; numbers, assignments and qualifications of part-time or temporary faculty;
- **Students**: applications and registrations; attrition rates; time-to-completion; final-year academic achievement; graduation rates; academic awards; student in-course reports on teaching; and
- **Graduates**: rates of graduation, employment six months and two years after graduation, postgraduate study, "skills match" and alumni reports on program quality when available and when permitted by the Freedom of Information and Protection of Privacy Act (FIPPA). Auditors will be instructed that these items may not be available and applicable to all programs.[7]
- Assessment of the programs relative to the best of their kind offered in Canada, North America and internationally, including areas of strength and opportunities.

vii) Quality enhancement
Initiatives taken to enhance the quality of the program and the associated learning and teaching environment.

viii) Additional graduate program criteria
a) Evidence that students' time-to-completion is both monitored and managed in relation to the program's defined length and program requirements.
b) Quality and availability of graduate supervision.

[7] Not all of the items listed will be available or appropriate for all programs. The Council, nevertheless, does encourage institutions to support the identification, collection and use of relevant student performance and outcome data to the extent that is feasible, if only in the longer term.

c) Definition and application of indicators that provide evidence of faculty, student and program quality, for example:
   1. Faculty: funding, honours and awards, and commitment to student mentoring;
   2. Students: grade-level for admission, scholarly output, success rates in provincial and national scholarships, competitions, awards and commitment to professional and transferable skills;
   3. Program: evidence of a program structure and faculty research that will ensure the intellectual quality of the student experience;
   4. Sufficient graduate level courses that students will be able to meet the requirement that two thirds of their course requirements be met through courses at this level (see Manual.)

4.7 External evaluation: reviewer selection and review process

The selection of Review Committee members, like the commissioning of the review itself, is done on a "one-up" basis. The commissioning officer is responsible for the selection of the external review committee in consultation with the unit and/or program(s) to be reviewed.

4.7.1 Selection of reviewers

Normally the evaluation will be conducted by a Review Committee composed of at least:

1. Two external reviewers or one internal and one external reviewer for an undergraduate program qualified by discipline and experience to review the program(s);
2. Three external reviewers for a graduate program or two external and one internal reviewer qualified by discipline and experience to review the program(s);
3. Three external reviewers or two external and one internal reviewer for the concurrent review of an undergraduate and graduate program.

In cases of more than one program being considered by the Review Committee, reviewers should be selected to ensure the appropriate review of all the programs being considered In selecting reviewers, an appropriate balance needs to be struck between familiarity with the unit and/or program(s) under review and distance to allow for objective assessment. All members of the Review Committee must be at arm's length from the program under review, that is, they should not have a particular interest in the outcome of the review due to personal or professional relationships with members of the unit.

The external and institutional reviewers will be active and respected in their field, and normally associate or full professors with program management experience. They will be representatives of peer institutions offering high quality programs in the field under review.

4.7.2 Commissioning Officer responsibilities

To be included: Describe how the members of the Review Committee are selected as well as any additional reviewers who might be included in the site visits.

The Commissioning officer is responsible in ensuring that all members of the Review Committee will:

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

4.7.3 Review report scope – Terms of Reference

To be included – terms of reference

The commissioning officer may expand the terms of reference to address issues of particular relevance to a given unit and/or program.

4.7.4 Documentation to be provided to review

The commissioning officer identifies what reports and information are to be provided to the Review Committee in advance of the site visit. Core documents include the:

- Terms of Reference
- Self-study
- Previous review report including the administrative response
- Any non-University commissioned reviews (for example, for professional accreditation or Ontario Council on Graduate Studies) completed since the last review of the unit and/or program.

External reviewers should be provided with access to all course descriptions and the *curricula vitae* of faculty (through course calendars, web links, etc.).

In the case of professional programs, the views of employers and professional associations may be solicited and made available to the Review Committee.

4.7.5 Site Visit

The commissioning officer provides the site visit schedule to reviewers. Reviewers should visit together. During their visit, provision must be made for reviewers to meet with faculty, students, administrative staff and senior program administrators as well as members of relevant cognate units as determined by the commissioning officer. In the case of professional programs, the views of employers and professional associates should be made available to the reviewers. *(Manual to contain sample site visit template)*

4.7.6 Review Report

The Review Committee submits one joint report normally within two months of the site visit. The Review Committee's report should address the substance of both the self-study and the evaluation criteria set out in Section __ above. A template for the review report will be provided to reviewers to ensure that all elements of the program appraisal are addressed. Before accepting the report as final, the Commissioning Officer will bring to the attention of the reviewers any clear factual errors that can be corrected in the report. The Commissioning Officer then formally accepts the final report and submits it to the Office of the Vice-Provost, Academic Programs.

draft

4.8 Institutional perspective and response

The Review Committee normally submits its report within 2 months to the Commissioning Officer.

4.8.1 Institutional authority – Administrative perspective

The Office of the Vice-Provost, Academic Programs, as the identified institutional authority, assesses the Review Committee report and requests a formal administrative response from the Commissioning Officer to the Review Committee report within a specified time frame. In the case of a single-departmental faculty, an administrative response is also requested from the Faculty Dean.
(Outline here review within Office of the Provost, cognate deans).

The Vice-Provost, Academic Programs identifies specific matters that will need to be addressed in the administrative response. The Commissioning Officer responsible for the program then provides his/her response to the Vice-Provost to each of the following:

1. The plans and recommendations proposed in the self-study
2. The recommendations advanced by the Review Committee;
3. The program's response to the Review Committee's report(s).

The Commissioning Officer will also describe:

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

A timeline will be specified by the Office of the Vice-Provost, Academic Programs, outlining when the Review Committee report and administrative response will be brought forward to divisional and university governance.

4.8.2 Circulation of the Review Committee report

The review report is a public document and is circulated within the unit reviewed along with the administrative response from the Commissioning Officer and the Vice-Provost, Academic Programs.

4.8.3 Final Assessment Report and Implementation Plan

The Vice-Provost, Academic Programs compiles the *Final Assessment Report* that provides the institutional synthesis of the external evaluation and internal responses and assessments, which:

1. Identifies significant strengths of the program;
2. Identifies opportunities for program improvement and enhancement;
3. Sets out and prioritizes recommendations that are selected for implementation;
4. May include a confidential section (where personnel issues are required to be addressed); and
5. Includes an institutional Executive Summary, exclusive of any such confidential information, and suitable for publication on the web.

The *Implementation Plan* identifies

1. Who will be responsible for approving the recommendations set out in the Final Assessment Report);
2. Who will be responsible for providing any resources made necessary by those recommendations;
3. Who will be responsible for acting on those recommendations; and
4. Timelines for acting on and monitoring the implementation of those recommendations
5. Whether a follow-up one-year report is required from the Commissioning Officer.

4.8.4 University accountability and reporting requirements

Reviews are important mechanisms of quality assurance accountability. The *Accountability Framework for Review of Academic Programs and Units* is contained within the *Policy for Approval and Review of Academic Programs and Units*. The Framework outlines the following responsibilities and mechanisms:

Program and unit reviews are considered by governance in order to allow governors to ensure that academic administrators are reviewing programs and units on a regular basis and are responding to these reviews in a manner that achieves the purpose of maintaining and improving program quality.

The Office of the Vice-Provost, Academic Programs ensures that reviews are performed on a regular basis, that they are conducted appropriately and that the issues identified in the self-study and by reviewers are dealt with appropriately by the administration.

The Office of the Vice-Provost, Academic Programs submits the Final Assessment Reports (excluding all confidential information) and implementation reports to governance through the Committee on Academic Policy and Programs of the Academic Board (AP&P) for information on a biannual basis. The compendium of summaries of review reports is submitted annually to AP&P, along with the Final Assessment Report and Implementation Plan, and is discussed at a dedicated AP&P meeting. [8]

Occasionally, concerns are raised in an external review report requires a longer timeframe to address. In order to ensure that improvements are made, the Vice-Provost, Academic Programs may request a follow-up one-year report from commissioning officers to bring forward to AP&P.

In rare circumstances a program may have a review or series of reviews that indicate such significant problems or deficiencies that admissions to the program should be discontinued until modifications are made. In these situations, the Faculty Dean or the Vice-Provost, Academic Programs may halt program admissions until there is evidence that changes have been made to address quality concerns.

The compendium of summaries is considered by the Agenda Planning Committee of the Academic Board to determine whether they raise any overall academic issues warranting discussion by the Board. As well, the record of the discussion at AP&P is forwarded to the Executive Committee of Governing Council. *(current practice)*

The Executive Summary of the outcomes of the review and the subsequent implementation reports are posted on the web site of the Vice-Provost, Academic Programs.

4.8.5 Quality Council reporting requirements

The Quality Council is provided copies of the summaries and reports by the Director, Academic Programs and Policy on an annual basis.

4.9 Quality Council Audit Process

Auditors independently select programs for audit, typically four undergraduate and four graduate cyclical program reviews.

[8] AP&P and other governance bodies agendas, agenda documents and meeting minutes are available online on the Governing Council website: www.governingcouncil.utoronto.ca

Quality Assurance Framework

Ontario Universities Council on Quality Assurance

Approved by OCAV on February 8, 2010

Subject to approval by Executive Heads

For more information contact:
Donna Woolcott
Executive Director, Quality Assurance
416.979.2165 x 235
dwoolcott@cou.on.ca

The Quality Assurance Framework was prepared by the Quality Assurance Transition/Implementation Task Force and the Ontario Council of Academic Vice-Presidents' Executive Committee.

The members of the Quality Assurance Transition/Implementation Task Force were:

- **From the Ontario Council of Academic Vice-Presidents (OCAV)**:

Professor Neil Gold (Chair), Provost and Vice-President Academic, University of Windsor
Dr. Fred Longstaffe, Provost and Vice-President, Academic, University of Western Ontario
Dr. Susan Silverton, Vice-President, Academic (Anglophone Affairs), Laurentian University

- **From the Ontario Council on Graduate Studies (OCGS)**:

Dr. Douglas Peers, Dean and Associate Vice-President Graduate, York University
Dr. Marilyn Rose, Dean, Graduate Studies, Brock University

- **From the Academic Colleagues**:

Dr. Daniel Lang, Professor, Department of Theory and Policy, University of Toronto
Dr. Antoni Lewkowicz, Professor, Department of Geography, University of Ottawa

- **From the Undergraduate Program Review Audit Committee** (**UPRAC)**:

Dr. Richard Barham, University of Guelph

The members of the OCAV Executive Committee were:

Dr. Patrick Deane (Chair), Vice-President Academic, Queen's University
Dr. Ilene Busch-Vishniac, Provost and Vice-President, Academic, McMaster University
Dr. Laurie Hayes, Vice-President (Academic) and Provost, Lakehead University
Dr. Fred Longstaffe (Vice-Chair), Provost and Vice-President, Academic, University of Western Ontario
Dr. Alan Shepard, Provost and Vice-President, Academic, Ryerson University

COU Secretariat Support:

Dr. John ApSimon, past Executive Director, OCGS
Mr. Roy Fischer, Coordinator, UPRAC
Ms. Barb Hauser, Secretary to Council, Senior Policy Advisor
Mr. Jamie Mackay, past Vice-President, Policy and Analysis
Ms. Jennie Piekos, past Research Associate
Ms. Cindy Robinson, Manager, OCGS
Dr. Erica Simmons, Senior Policy Analyst
Dr. Donna Woolcott, Executive Director, Quality Assurance

CONTENTS

1. Introduction 1
1.1 Quality assurance: The international context 1
1.2 Quality assurance in Ontario 1
1.3 Quality Assurance Framework 2
1.4 Scope of application of the Institutional Quality Assurance Processes 3
1.5 Ratification of the Institutional Quality Assurance Processes 3
1.6 Definitions 3
1.7 Acronyms 7
2. Protocol for New Program Approvals 8
2.1 Evaluation Criteria 8
Flow Chart 1: Overview of Protocol for Undergraduate and Graduate New Program Approvals. 9
2.2 Initial institutional process 11
2.3 Initial appraisal process 12
2.4 Subsequent institutional process 14
2.5 Final process 14
3. Protocol for Expedited Approvals 15
3.1 Proposal brief 15
3.2 Expedited approval process 15
Flow Chart 2: Overview of Protocol for Expedited Approvals 16
3.3 Institutional identification of major modifications to existing programs 17
3.4 Annual report to the Quality Council 17
4. Protocol for Cyclical Program Reviews 18
4.1 Schedule of reviews 18
Flow Chart 3: Protocol for the Cyclical Review of Existing Programs 19
4.2 Institutional Quality Assurance Process requirements 20
4.3 Evaluation criteria 23
5. Audit Process 25
5.1 Quality Council Audit Panel: Selection of the Auditors 25
5.2 Steps in the audit process 25
6. Review of the Quality Assurance Framework 29
6.1 Amendment of the Quality Assurance Framework 29
6.2 Audit of the Quality Council and Quality Assurance Framework 29

Appendix 1: Ontario Council of Academic Vice-Presidents' Undergraduate and Graduate Degree Level Expectations 30

Undergraduate 30

Graduate 33

Appendix 2: Ontario Universities Council on Quality Assurance 35

Mission 35

Mandate 35

Operating principles 35

Authority 36

Membership of the Quality Council 36

Appraisal and Audit Committees 36

1. INTRODUCTION

1.1 QUALITY ASSURANCE: THE INTERNATIONAL CONTEXT

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

In developing the new Quality Assurance Framework for postsecondary education, Ontario universities have shown significant leadership and a firm commitment to cultivating a culture of quality in education. This new quality assurance process is more streamlined, more effective, more transparent, and more publicly accountable. By bringing Ontario's universities into line with international quality assurance standards, the Framework will also facilitate greater international acceptance of our degrees and improve our graduates' access to university programs and employment worldwide. With the implementation of the Framework, Ontario universities place themselves in the mainstream of quality assurance both nationally and internationally.

Care has been taken in developing the new Quality Assurance Framework for Ontario universities to balance the need for accountability with the need to encourage normal curricular evolution. In particular, if quality assurance measures become too onerous or restrictive, they can become impediments rather than facilitators of continuous program improvements. Ontario universities have kept this issue in mind in order to produce a Quality Assurance Framework that supports innovation and improvement while cultivating a culture of transparency and accountability – i.e. quality *assurance* that produces quality *enhancement*.

1.2 QUALITY ASSURANCE IN ONTARIO

Rigorous quality assurance has long been a priority for Ontario's publicly assisted universities. As early as 1968, Ontario conducted external appraisals of new graduate programs. In 1982, Ontario initiated periodic external appraisal of approved graduate programs through the Ontario Council on Graduate Studies (OCGS). By submitting all new and continuing graduate programs to external quality appraisal, Ontario universities were trailblazers in the area of systematic and system-wide quality assurance in higher education.

Ontario remained among the leaders in quality assurance by regularly reviewing its quality assurance programs and procedures. In 1999, the Council of Ontario Universities (COU) commissioned a former chair, Dr. George Connell, a former president of the University of Toronto, to do an external review of the operations of OCGS, which subsequently implemented a number of the recommendations.

In 1996, COU adopted procedures for external auditing of university processes for reviewing undergraduate programs. The audits were to be conducted by the Undergraduate Program Review Audit Committee (UPRAC) and managed by the executive director of OCGS, under the direction of the Ontario Council of Academic Vice-Presidents (OCAV). Much of the impetus for this initiative was the publication of the report of the Task Force on University Accountability (the Broadhurst Report)*,* which also re-affirmed the central role of boards of governors in accountability and the assurance of quality.

OCGS adopted its statement of Graduate University Degree Level Expectations in January 2005. This was followed in December 2005 by COU endorsing the Guidelines for University Undergraduate Degree Level Expectations (UUDLES) developed by OCAV (see Appendix 1). The Ontario Council of Academic Vice-Presidents subsequently incorporated UUDLES into its UPRAC Review and Audit Guidelines with an

implementation date of June 2008. OCAV's adoption of the Degree Level Expectations set out the academic standards of Ontario's universities. Each university is expected to develop its own institutional expression of the undergraduate and graduate Degree Level Expectations and to have them applied to each academic program

In 2006–07, the Council of Ontario Universities commissioned a former chair, Dr. Richard Van Loon, a former president of Carleton University, to do a comprehensive analysis of the long-established OCGS procedures. The recommendations in Van Loon's 2007 report included establishing a new quality assurance body under the direction of OCAV and aligning the quality assurance processes for undergraduate and graduate programs.

The new quality assurance body is called the Ontario Universities Council on Quality Assurance (the Quality Council). The Quality Council was established by OCAV in 2010 and its work is supported by an Appraisal Committee and Audit Committee. Its operations are managed by a secretariat, headed by the Executive Director of Quality Assurance. (See Appendix 2 for more information on this organization's Mission, Mandate and Operating Principles.)

Building on well-tested processes, the work of the Quality Council ensures that Ontario continues to have a rigorous quality assurance framework. This Council operates at arm's length from universities and the government to ensure its independence. Moreover, in establishing the Quality Council, OCAV fully acknowledges that academic standards, quality assurance and program improvement are, in the first instance, the responsibility of universities themselves. This Framework recognizes the institution's autonomy to determine priorities for funding, space, and faculty allocation.

1.3 QUALITY ASSURANCE FRAMEWORK

Over a period of two years, during which there was extensive consultation, OCAV developed this Framework for quality assurance of all graduate and undergraduate programs offered by Ontario's publicly assisted universities. Under this Framework, these institutions have undertaken to design and implement their own **Institutional Quality Assurance Process (IQAP)** that is consistent not just with their own mission statements and their university Degree Level Expectations, but also with the protocols of this Framework. The IQAPs are at the core of the quality assurance process. Furthermore, the universities have vested in the Quality Council the authority to make the final decision on whether, following the Council-mandated appraisal of any proposed new undergraduate or graduate program, such programs may commence.

This Quality Assurance Framework comprises four distinct components.
The **Protocol for New Program Approvals** applies to both new undergraduate and graduate programs. Universities use the protocol when developing new for-credit programs, which are then reviewed by the Appraisal Committee of the Quality Council. This Council has the authority to approve or decline new program proposals.

In accordance with the **Protocol for Expedited Approvals** each institution will be responsible in its IQAP to assure program quality where major substantive changes are made to existing and previously approved programs, and where learning outcomes are not changed in ways that denote a truly new program. Institutions will set out their own procedures for the identification and approval of Major Modifications in their IQAP which will, itself, be subject to initial Quality Council ratification. Institutions will report annually to the Quality Council on the Major Modifications approved that year. Institutions have the option of requesting the Quality Council to review a proposal for Major Modifications, in which case an **Expedited Approval** process would apply.

The **Protocol for the Cyclical Review of Existing Programs** is used to secure the academic standards of existing undergraduate and graduate programs, including for-credit graduate Diplomas, and

to assure their ongoing improvement. Undergraduate and graduate program reviews may be conducted concurrently and in conjunction with departmental reviews, when institutions so choose.

The **Audit Process** is conducted through a panel of auditors that reports to the Audit Committee of the Quality Council. The panel examines each institution's compliance with its own **Institutional Quality Assurance Process** for the **Cyclical Review of Existing Programs**, as ratified by the Quality Council. The Quality Council has the authority to approve or not approve the auditors' report.

The subsequent four sections of this document outline these four components. The **Definitions** Section (Framework Section 1.6, below) contains definitions of some of the specialized vocabulary used throughout. Readers are encouraged to review this document in conjunction with the **Guide to the Quality Assurance Framework** (the Guide) which includes information, guidance and templates designed to assist institutions in implementing the protocols and audit process.

1.4 SCOPE OF APPLICATION OF THE INSTITUTIONAL QUALITY ASSURANCE PROCESSES

Every publicly assisted Ontario university that grants degrees and diplomas is responsible for ensuring the quality of all of its programs of study, including modes of delivering programs and those academic and student services that affect the quality of the respective programs under review, whether or not the program is eligible for government funding.

Institutional responsibility for quality assurance extends to new and continuing undergraduate and graduate degree/diploma programs whether offered in full, in part, or conjointly by any institutions federated and affiliated with the university. These responsibilities also extend to programs offered in partnership, collaboration or other such arrangement with other postsecondary institutions including colleges, universities, or institutes, including Institutes of Technology and Advanced Learning (ITALs). For definitions of the inter-institutional arrangements see the Definitions Section.

1.5 RATIFICATION OF THE INSTITUTIONAL QUALITY ASSURANCE PROCESSES

Before implementing its IQAP for **New Program Approvals**, **Expedited Approvals**, and **Cyclical Program Reviews**, each university must first submit it to the Quality Council for ratification. The Council will test their consistency with the substance and principles set out in the respective Quality Council protocols. The same process will apply whenever an institution implements any substantive change to its own quality assurance processes. The Quality Council will conduct its subsequent audit of institutional compliance with its ratified Institutional Quality Assurance Process for cyclical program reviews.

1.6 DEFINITIONS

Academic Services: Academic Services are defined as those services integral to a student's ability to achieve the learning outcomes expected from a program. 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 program, and internship, co-operative education and practicum placement services – where these experiential components are a required part of a program. Excluded from academic services are items such as intramural and extramural activities, residence services, food services, health and wellness services, psychological services, financial aid services and career services, except where any of these services are specifically identified to be an integral part of the academic program.

Collaborative Program: A collaborative program is an intra-university graduate program that provides an additional multidisciplinary experience for students enrolled in and completing the degree requirements for one of a number of approved programs. Students meet the admission requirements of and register in the participating (or "home") program but complete, in addition to the degree requirements of that program, the additional requirements specified by the collaborative program. The degree conferred is that of the home program, and the completion of the collaborative program is indicated by a transcript notation indicating the additional specialization that has been attained (*e.g.,* "MA in Political Science with specialization in American Studies"). Proposals for new Collaborative programs will follow the **Protocol for Expedited Approvals** and thereafter will require cyclical review.

Degree: An academic credential awarded on successful completion of a prescribed set and sequence of requirements at a specified standard of performance consistent with the OCAV's Degree Level Expectations and the institution's own expression of those Expectations (see Appendix 1).

Degree Level Expectations: The Degree Level Expectations established by OCAV serve as Ontario universities' academic standards and identify the knowledge and skill outcome competencies that reflect progressive levels of intellectual and creative development. They 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 institution. Likewise, academic units will describe their institution's expectations in terms appropriate to its academic program(s). Further information, together with examples for successive degree levels, is provided in the Guide.

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 of a particular degree.

Diploma Programs: Universities may grant diplomas in acknowledgement of students' participation in either **for-credit** or **not-for-credit** activities at the undergraduate and graduate level. **Not-for-credit** and **for-credit** undergraduate diploma programs are not subject to approval or audit by the Quality Council.

The Quality Council recognizes only three types or categories of **Graduate Diploma** and has specific appraisal conditions (and an associated submission template) applying to each. In each case, when proposing a new graduate diploma, a university may request an **Expedited Approval** process (see definition below).

Type 1: Awarded when a candidate admitted to a master's program leaves the program after completing a certain proportion of the requirements. Students are not admitted directly to these programs.

When new, these programs require submission to the Quality Council for an **Expedited Approval** (no external reviewers required) prior to their adoption. Once approved, they will be incorporated into the institution'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 reviewers required) prior to their adoption. Once approved, they will

be incorporated into the institution's schedule for cyclical reviews as part of the parent program.

Type 3[1]: A stand-alone, direct-entry program, generally developed by a unit already offering a related master's (and sometimes 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 institution will use the **Expedited Approval** (see below).

All such programs, once approved, will be subject to the normal institutional cycle of program reviews, typically in conjunction with the related degree program.

Emphasis, Option, Minor Program (or similar): An identified set and sequence of courses, and/or other units of study, research and practice within an area of disciplinary or interdisciplinary study, which is completed on an optional basis in partial fulfillment of the requirements for the awarding of a degree, and 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**.

Expedited Approvals: The Quality Council will normally require only an **Expedited Approval** process where:

a) an institution requests endorsement of the Quality Council to **declare a new Field in a graduate program**. (Note that institutions are not required to declare fields in either master's or doctoral programs.); or
b) there is a proposal for a **new Collaborative Program**; or
c) there are proposals for **new for-credit graduate diplomas;** or
d) an institution requests it, there are **Major Modifications to Existing Programs**, as already defined through the **IQAP**, proposed for a degree program or program of specialization.

The Expedited Approval Process requires the submission to the Quality Council of a Proposal Brief (see template) of the proposed program change/new program (as detailed above) and the rationale for it. Only the applicable criteria outlined in Framework Section 2.1 will be applied to the proposal. The process is further expedited by not requiring the use of external reviewers; hence Framework Sections 2.2.6 through 2.2.8 (inclusive) do not apply. Furthermore, the Council's appraisal and approval processes are reduced. (See Framework Section 3)

The outcomes of these expedited approval processes will be conveyed to the proposing institution directly by the Executive Director and reported to the Quality Council.

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

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.

[1] "Type 3" Graduate Diplomas now incorporate both types 3 and 4 which had existed in the previous OCGS procedures.

Inter-Institutional Program Categories:

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

2. **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 programs are upheld, but the student working with supervisors at each institution prepares a single thesis which 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 transcripts indicating that the student completed his or her thesis under cotutelle arrangements.

3. **Dual Credential Program:** A program of study offered by two or more universities or by a university and a college or institute, including Institutes of Technology and Advanced Learning, 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.

4. **Joint Degree Program:** A program of study offered by two or more universities or by a university and a college or institute, including an Institute of Technology and Advanced Learning, in which successful completion of the requirements is confirmed by a single degree document.

In the case of the **Cotutelle**, since this arrangement relates to an existing, approved program, no separate appraisal or review processes will apply.

For all inter-institutional programs in which all partners are institutions within Ontario, the Quality Council's standard New Program Approval and Cyclical Program Review Processes will apply to all elements of programs regardless of which partner offers them, including Ontario Colleges of Applied Arts and Technology and Institutes of Technology and Advanced Learning. For joint and collaborative programs in which some partners are institutions outside Ontario, the elements of the programs contributed by the out-of-province partner will be subject to the quality assurance processes in their respective jurisdictions. The Quality Council will maintain a directory of bodies whose post-secondary assurance processes are recognized and accepted as being comparable to our own. In cases where such recognition is not available, the Quality Council will determine, on a case-by-case basis, the appropriate action to be taken on quality assurance if the collaboration is to be permitted to proceed.

Major Modifications to Existing Programs: As part of the ratification step, institutions will be required to define, for the Quality Council, within their IQAP, their internal definition of what constitutes a "significant change" in the requirements, intended learning outcomes or human and other resources associated with a degree program or program of specialization.

Major modifications include the following program changes:

a) Requirements that differ significantly from those existing at the time of the previous cyclical program review;
b) Significant changes to the learning outcomes;
c) Significant changes to the faculty engaged in delivering the program and/or to the essential physical resources as may occur, for example, where there have been changes to the existing mode(s) of delivery (*e.g.*, different campus, online delivery, inter-institutional collaboration);
d) The addition of a new field to an existing graduate program. This modification is subject to an **Expedited Approval**. Note that institutions are not required to declare fields for either master's or doctoral programs.

Institutions will be responsible for approvals of categories a), b) and c) of Major Modifications using their internal quality assurance processes and for reporting annually to the Quality Council on the programs that have been modified in the past year.

If institutions request a Quality Council review of a Major Modification to an Existing Program, the **Expedited Approval** process will apply.

Mode of Delivery: The means or medium used in delivering a program (*e.g.*, lecture format, distance, on-line, problem-based, compressed part-time, different campus, inter-institutional collaboration or other non-standard form of delivery).

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

The approval process for the introduction of new undergraduate and graduate programs follows the **New Program Approval Protocol** in Framework, Section Two. All Proposal Briefs submitted to the Quality Council will report whether the program is a professional program and/or a full cost recovery program.

Program of Specialization (*e.g.,* a **major**, **honours program**, **concentration** or similar): An identified set and sequence of courses, and/or other units of study, research and practice within an area of disciplinary or interdisciplinary study, which is completed in full or partial fulfillment of the requirements for the awarding of a degree, and is recorded on the graduate's academic record.

It should be noted that:
a) A program constitutes "full" fulfillment of the requirements for the awarding of a degree when the program and degree program are one and the same;
b) 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.

1.7 ACRONYMS

COU ..... Council of Ontario Universities

FIPPA ..... Freedom of Information and Protection of Privacy Act

GDLES ..... Graduate Degree Level Expectations

IQAP ..... Institutional Quality Assurance Process (See Framework Section 1.3)

ITAL ..... Institute of Technology and Advanced Learning

MTCU ..... Ministry of Training, Colleges and Universities

OCAV ..... Ontario Council of Academic Vice-Presidents

UPRAC ..... Undergraduate Program Review Audit Committee

UUDLES ..... University Undergraduate Degree Level Expectations

2. PROTOCOL FOR NEW PROGRAM APPROVALS

The primary responsibility for the design and quality assurance of new programs lies with institutions, and their governing bodies**.** The institution is responsible for curriculum design, the development of program objectives, the determination of learning outcomes, and generally for the assembly of human, instructional and physical resources needed.

Each institution will establish an IQAP (see Framework Section 1.3) that sets out the steps to be taken internally to assemble and provide the information required for New Program Proposals. This proposed IQAP will be submitted to the Quality Council for initial ratification (see Framework Section 1.5) before it may be implemented.

Flow Chart 1: Overview of the Protocol for New Program Approvals shows the major steps, within the institution and through the Quality Council, required for the approval of new programs by this protocol.

Institutions will submit all new undergraduate and graduate degree programs, program of specialization and for-credit graduate diploma program proposals to the Quality Council. Each proposal will be appraised by the Council's Appraisal Committee. On the basis of their appraisal, the Council will decide whether to approve or reject the proposals. This requirement applies to all New Program Proposals regardless of whether or not the institution will be applying for provincial funding.

Proposals for new for-credit graduate diploma programs require no external review, and are subject only to an **Expedited Approval**. The **Proposal Brief** for new for-credit graduate diplomas will be subject to inclusion, where applicable, of Framework steps 2.2.1 to 2.2.5, as described below. Since no external review is required, these Proposal Briefs are exempt from inclusion of steps 2.2.6 to 2.2.8. The Council's appraisal process will also be substantially abbreviated.

2.1 EVALUATION CRITERIA

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

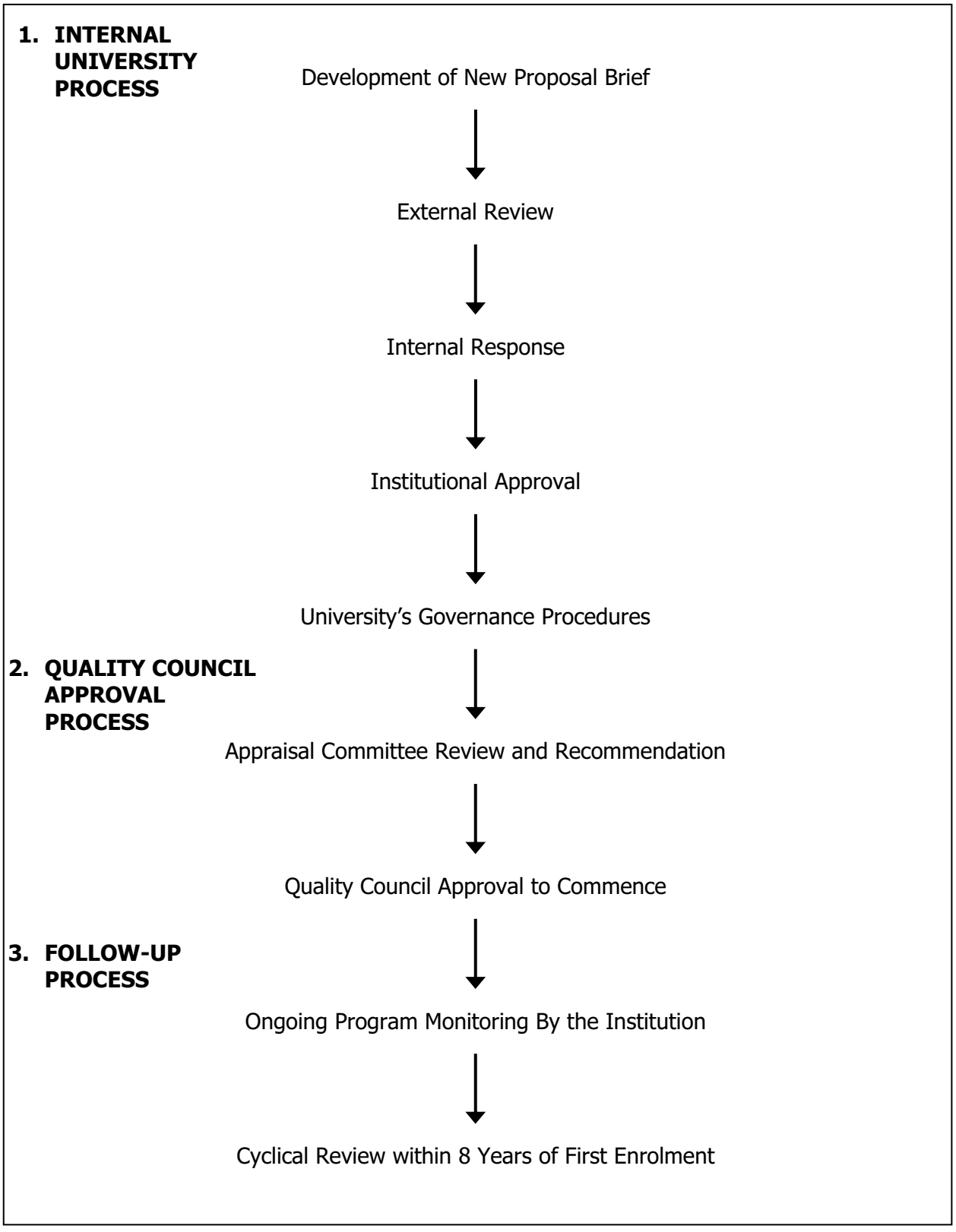
2.1.1 Objectives

a) Consistency of the program with the institution's mission and academic plans.
b) Clarity and appropriateness of the program's requirements and associated learning outcomes in addressing the institution's own undergraduate or graduate Degree Level Expectations.
c) Appropriateness of degree nomenclature.

2.1.2 Admission requirements

a) Appropriateness of the program's admission requirements for the learning outcomes established for completion of the program.
b) Sufficient explanation of alternative requirements, if any, for admission into a graduate, second-entry or undergraduate program, such as minimum grade point average, additional

FLOW CHART 1: OVERVIEW OF PROTOCOL FOR UNDERGRADUATE AND GRADUATE NEW PROGRAM APPROVALS (STEPS SHOWN FOR PROGRAMS APPROVED TO COMMENCE. NEW GRADUATE DIPLOMAS FOLLOW THE PROTOCOL FOR EXPEDITED APPROVALS SEE FLOW CHART 2).



languages or portfolios, along with how the program recognizes prior work or learning experience.

2.1.3 Structure

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

2.1.4 Program content

a) Ways in which the curriculum addresses the current state of the discipline or area of study.
b) Identification of any unique curriculum or program innovations or creative components.
c) For research-focused graduate programs, clear indication of the nature and suitability of the major research requirements for degree completion.
d) 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.

2.1.5 Mode of delivery

Appropriateness of the proposed mode(s) of delivery (see Definitions) to meet the intended program learning outcomes and Degree Level Expectations.

2.1.6 Assessment of teaching and learning

a) Appropriateness of the proposed methods for the assessment of student achievement of the intended program learning outcomes and Degree Level Expectations.
b) Completeness of plans for documenting and demonstrating the level of performance of students, consistent with the institution's statement of its Degree Level Expectations (see Guide).

2.1.7 Resources for all programs

a) Adequacy of the administrative unit's planned utilization of existing human, physical and financial resources, and any institutional commitment to supplement those resources, to support the program.
b) Participation of a sufficient number and quality of faculty who are competent to teach and/or supervise in the program.
c) Evidence that there are adequate resources to sustain the quality of scholarship produced by undergraduate students as well as graduate students' scholarship and research activities, including library support, information technology support, and laboratory access.

2.1.8 Resources for graduate programs only

a) Evidence that faculty have the recent research or professional/clinical expertise needed to sustain the program, promote innovation and foster an appropriate intellectual climate.
b) Where appropriate to the program, evidence that financial assistance for students will be sufficient to ensure adequate quality and numbers of students.
c) Evidence of how supervisory loads will be distributed, and the qualifications and appointment status of faculty who will provide instruction and supervision.

2.1.9 Resources for undergraduate programs only

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

2.1.10 Quality and other indicators

a) Definition and use of indicators that provide evidence of quality of the faculty (*e.g.*, qualifications, research, innovation and scholarly record; appropriateness of collective faculty expertise to contribute substantively to the proposed program).
b) Evidence of a program structure and faculty research that will ensure the intellectual quality of the student experience.

2.2 INITIAL INSTITUTIONAL PROCESS

The process the institution follows to approve new undergraduate and graduate programs will, at a minimum[1]:

2.2.1 Identify authorities

Identify the authority or authorities responsible for the IQAP and its application.

2.2.2 Identify contact

Identify the authoritative contact between the institution and the Quality Council. This will be the sole contact for communication between the institution and the Quality Council about the approval process.

2.2.3 Identify steps

Identify the institutional steps required to develop and approve new programs. The IQAP will also set out the intra-institutional steps that will apply to the quality assurance of other new programs (for example, a new **Emphasis, Option, Minor Program or similar)** which do *not* require Quality Council appraisal and approval.

2.2.4 Evaluation criteria

Require, at a minimum, the evaluation criteria specified in Framework Section 2.1 above.

2.2.5 Program Proposal Brief

Require the preparation of a **Program Proposal Brief** that addresses the above criteria and meets the requirements of this Quality Assurance Framework together with any further institutional requirements which it chooses to apply (see template and Guide). For proposals for new for-credit graduate diplomas, apply only the applicable components of the Evaluation Criteria (see 2.1). Since no external reviewers are required, steps 2.2.6 through 2.2.9, inclusive, in the Initial Institutional Process will not apply.

2.2.6 External reviewers

Establish and describe a process for the selection and appointment of external reviewers and any others who will review the new program proposal. There will be at least one reviewer for new undergraduate programs and two for new graduate programs. External review of new graduate program proposals must incorporate an on-site visit. External review of new undergraduate program proposals will normally be conducted on-site, but may be conducted by desk audit, video-conference or an equivalent method if the external reviewer is satisfied that the off-site option is acceptable. The reviewers will normally be associate or full professors, or the equivalent, with program management experience, and will be at arm's length from the program under review. (See Guide for a definition of *arm's length* and for suggestions on the selection of reviewers.)

2.2.7 Reviewers' report

Excepting occasions when two languages are used or when contrary circumstances apply, the reviewers will normally provide a joint report (see template) that appraises the standards and quality of the

[1] Institutions are free to add to this list of required components of the new program approval process.

proposed program and addresses the criteria set out in Section 2.1, including the associated faculty and material resources. They will also be invited to acknowledge any clearly innovative aspects of the proposed program together with recommendations on any essential or otherwise desirable modifications to it.

2.2.8 Internal response

Require, in response to the Reviewers' Report(s) and recommendations, responses from both the proposing academic unit and the relevant deans or their delegates.

2.2.9 Institutional approval

Based on the Proposal Brief, the Reviewers' Report(s) and the internal responses to both, and in accordance with the IQAP, the institution will determine whether or not the proposal meets its quality assurance standards and is thus acceptable or needs further modification. The institution may stop the whole process at this or any subsequent point.

2.2.10 Quality Council Secretariat

After completion of any other requirements of its IQAP, the institution will submit the Proposal Brief, together with all required reports and documents, to the Quality Council Secretariat. The submission template will require information on whether or not the proposed program will be a cost-recovery program. The same standards and protocols apply regardless of the source of funding.

2.2.11 Announcement of new programs

Following its submission to the Quality Council, the institution may announce its intention to offer the program, provided that clear indication is given that approval by the Quality Council is pending and that no offers of admission will be made until and unless the program is approved by the Council.

2.3 INITIAL APPRAISAL PROCESS

2.3.1 Secretariat check

The Quality Council Secretariat will confirm that the Proposal Brief and associated reports and internal responses to them (as set out in Framework Section 2.2 above) are complete. If there is missing information or defects of substance, the Secretariat will return the Proposal Brief to the institution for revision or amendment and resubmission. Otherwise the Proposal Brief and accompanying documents will be forwarded directly to the Quality Council Appraisal Committee.

2.3.2 Appraisal Committee reviews and recommends

The Quality Council's Appraisal Committee reviews and appraises the complete file. This committee may seek further information from the institution, in which case it provides reasons for its requests to the institution. In rare instances, the Appraisal Committee may invite further input from an external expert, either through desk audit or site visit. If no further information is required, the Appraisal Committee, through the Quality Council, will advise the institution of its proposed recommendation, including a brief explanation of its reasons. This assessment includes one of the following recommendations:

a) Approval to commence;
b) Approval to commence, with report (see Guide);[1]
c) Deferral for up to one year during which time the university may address identified issues and report back; or
d) Against approval.

[1] This typically refers to some provision or facility not currently in place but planned for later implementation, often two to three years in the future. The *with report* condition implies no lack of quality in the program at this point, does not hold up the implementation of the new program, and is not subject to public reference, whether on the web or elsewhere.

This step will normally be completed within forty-five days of receipt of the institution's submission, provided that the submission is complete and in good order, and that no further information or external expert advice is required. Where additional information is required by the Appraisal Committee, one of the four possible recommendations (see above) to the Council will be made within a further thirty days of its receipt.

2.3.3 Institution may consult/appeal to Committee

When the recommendation is one of b), c) or d) in 2.3.2 above, the proposing university may, within sixty days, make an appeal to, or request a meeting with, the Appraisal Committee for reconsideration. Normally, the grounds for seeking reconsideration are that the institution will be providing new information, or that there were errors of fact in the Appraisal Committee's commentary, or there were errors of process. Following such communication, the Appraisal Committee revisits and may revise its assessment. It will convey its final recommendation to the Quality Council.

2.3.4 Institution may appeal to Council. Council decides

Having received and considered the Appraisal Committee's final assessment and recommendation, any additional comments from the institution on the assessment, and further, having heard any requested appeal from the institution on matters of fact or procedure, the Council makes one of the following decisions:

a) Approved to commence;
b) Approved to commence, with report;
c) Deferred for up to one year, affording the institution an opportunity to amend and resubmit its proposal brief; or
d) That the program proposal is declined.

When the Quality Council chooses option c), then the Appraisal Committee suspends the assessment process until the institution has resubmitted its Brief. After this, the Appraisal Committee reactivates its appraisal process (see Framework Section 2.3.2 above). When the Appraisal Committee does not receive a response within the specified period, it considers the proposal to have been withdrawn.

2.3.5 Council reports decision

The Quality Council conveys its decision to the institution through the designated institutional contact, and reports it for information to OCAV and to the Ministry of Training, Colleges and Universities (MTCU). The Quality Council and the institution post information about decisions on approval to commence new programs on their respective websites, together with a brief description of the program. Only at this point may institutions make offers of admission to the program.

2.3.6 Waiting period before resubmission

To allow time for revisions to proposals, any institution declined permission to proceed at this stage (2.3.4) of the process, or following a denied appeal of the decision (2.3.8), will normally wait until one year has elapsed from the date of the Quality Council's decision before resubmitting a revised version of its proposal. The same waiting period normally applies when a university does not resubmit a deferred program proposal within the specified period.

2.3.7 Subsequent *with report* appraisal

When an institution has been given approval to commence a program *with report,* the Appraisal Committee reviews the subsequently submitted report, conducts whatever consultation it requires, and then makes one of the following recommendations to the Council. That:

a) The program be approved to continue without condition;
b) The program may continue accepting admissions but the Council requires additional follow-up and report within a specified period, prior to the conduct of the initial cyclical review. On the Council's

receipt of that required report, the procedure returns to this same step in the appraisal process (*i.e.*, 2.3.8).

c) The program be required to suspend admissions for a minimum of two years. The Quality Council will then specify the conditions to be met in the interim in order for admissions to the program to resume.
d) The institution may appeal, to the Quality Council, the proposed recommendation of the Appraisal Committee to suspend admissions to the program (2.3.7 c), on the same terms as are set out in Framework Section 2.3.3 above (*i.e.*, the institution will be providing new information; and/or there were errors of fact in the Appraisal Committee's commentary; and/or there were errors of process).

2.3.8 Council hears *with report* appeal. Council decides

Having received and considered the Appraisal Committee's recommendation, and the institution's appeal, if any, the Quality Council may decide either:

a) To approve the program without condition, or
b) To approve the program continuing admissions with a further report, or
c) To require the program to suspend admissions for a minimum of two years. This decision is final. The Quality Council conveys its decision to the institution, and reports it to OCAV and to MTCU for information.

2.4 SUBSEQUENT INSTITUTIONAL PROCESS

2.4.1 First cyclical review

The first cyclical review for any new program must be conducted no more than eight years after the date of the program's initial enrolment and normally in accordance with the university's program review schedule.

2.4.2 Implementation window

After a new program is approved to commence, the program will begin within thirty-six months of that date of approval; otherwise the approval will lapse.

2.4.3 Monitoring

The IQAP will ensure monitoring of new programs.

2.5 FINAL PROCESS

At least one of the undergraduate programs and one of the graduate programs selected for the sample for each institutional audit (See Framework Section 5.2.2) will be a New Program or a Major Modification to an Existing Program approved within the period since the conduct of the previous audit. The audit cannot reverse the approval of a program to commence.

3. PROTOCOL FOR EXPEDITED APPROVALS

The Protocol for **Expedited Approvals** applies when:

a) an institution requests endorsement of the Quality Council to **declare a new Field in a graduate program**. (Note that institutions are not required to declare fields in either master's or doctoral programs.); or
b) there is a proposal for a **new Collaborative Program**; or
c) there are proposals for **new for-credit graduate diplomas;** or
d) an institution requests it, there are **Major Modifications to Existing Programs**, as already defined through the IQAP, proposed for degree program or program of specialization.

The **Expedited Approvals** process requires the submission to the Quality Council of a **Proposal Brief** (see template) of the proposed program change/new program (as detailed above) and the rationale for it. Only the applicable criteria outlined in Framework Section 2.1 will be applied to the proposal. The process is further expedited by not requiring the use of external reviewers; hence Framework Sections 2.2.6 through 2.2.8 (inclusive) do not apply. Furthermore, the Council's appraisal and approval processes are reduced. (See Framework Section 3.2)

Flow Chart 2: Overview of the Protocol for Expedited Approvals shows the major steps, within the institution and through the Quality Council.

3.1 PROPOSAL BRIEF

The **Proposal Brief** will describe the new program or the significant changes being proposed (including, as appropriate, reference to learning outcomes, faculty and resources), provide a brief account of the rationale for the changes, and address the Evaluation Criteria (see Framework Section 2.1) where they apply. A template will be used for submission of the Brief.

3.2 EXPEDITED APPROVAL PROCESS

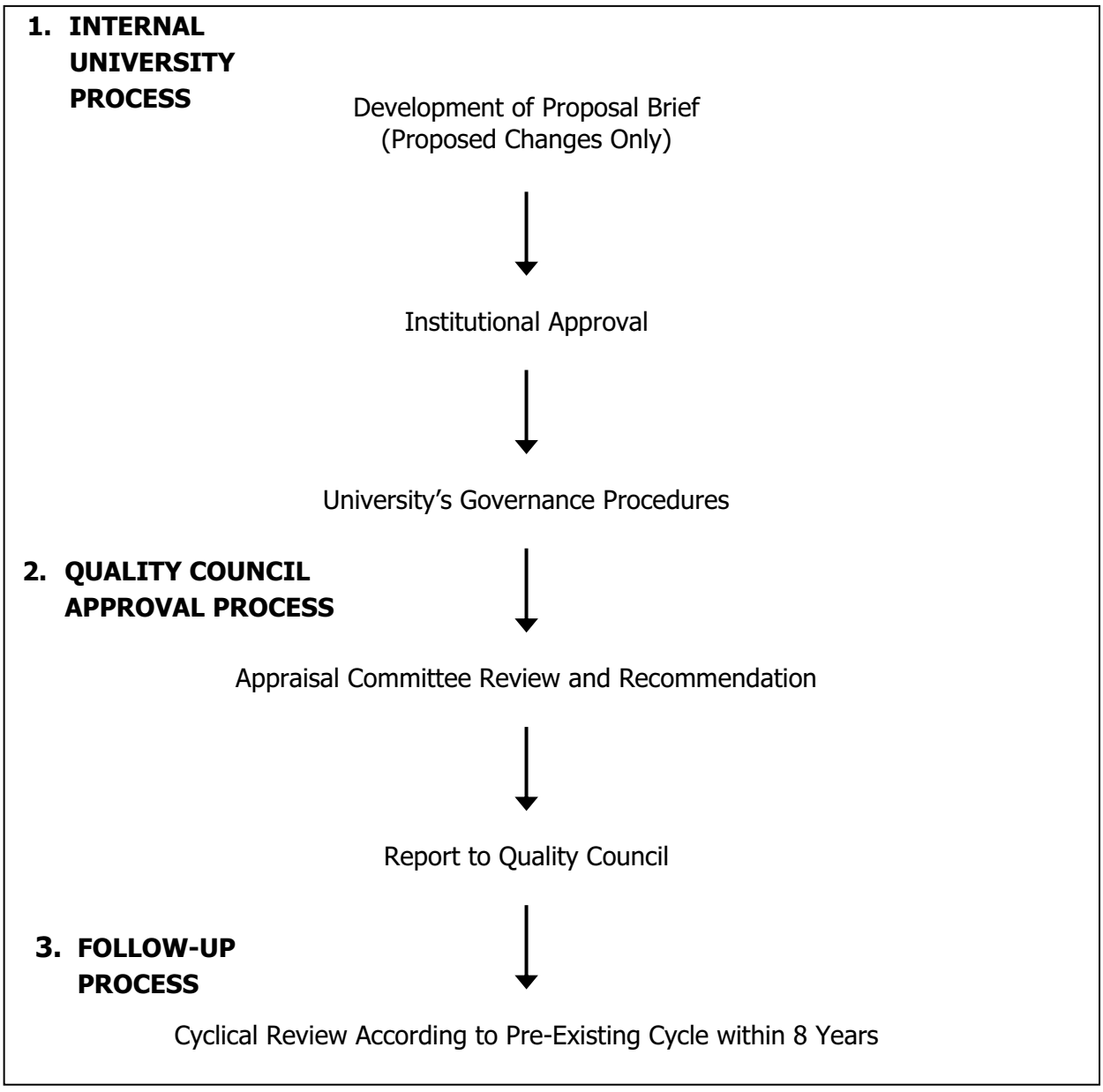
After reviewing the submission, conferring with the proposing institution, and receiving further information as needed, the Council's Appraisal Committee will come to its decision:

a) That the institution proceed with the proposed changes/new programs;
b) That it consult further with the institution, over details of interest or concern, regarding the proposed changes/new programs. It can be anticipated that these subsequent consultations will normally be brief and affirmative in their outcome.

The outcomes of these **Expedited Approvals** will be conveyed to the proposing institution, through the identified authoritative contact, directly by the Executive Director and reported to the Quality Council.

The final decision of the Appraisal Committee will be conveyed to the proposing institution, by the Quality Council, within forty-five days of receipt of a final and complete submission.

FLOW CHART 2: OVERVIEW OF PROTOCOL FOR EXPEDITED APPROVALS



3.3 INSTITUTIONAL IDENTIFICATION OF MAJOR MODIFICATIONS TO EXISTING PROGRAMS

The fundamental purpose of the identification of major modifications to existing programs, and their submission through a robust quality assurance process which does not require but may include the Quality Council, is to assure the institution, and the public, of the ongoing quality of all of the institution's academic programs. The institutions themselves are best placed to determine when a major change is being proposed.

Major modifications typically include one or more of the following program changes:

a) Requirements for the program that differ significantly from those existing at the time of the previous cyclical program review;
b) Significant changes to the learning outcomes;
c) Significant changes to the faculty engaged in delivering the program and/or to the essential physical resources as may occur, for example, where there have been changes to the existing mode(s) of delivery.

Institutions are required, within their IQAP, to provide their internal definition of what constitutes a "significant change" in the requirements, intended learning outcomes or human and other resources associated with the program.

The IQAP will also set out the intra-institutional steps that will apply to the quality assurance of other program changes (for example, changes to an existing Emphasis, Option, Minor Program, or similar which do not require Quality Council appraisal and approval.

Major modifications to existing programs, except when an institution requests endorsement of the Quality Council for the addition of fields to graduate programs, do not require submission of a **Proposal Brief** to the Quality Council. An institution may, at its discretion, request that the Quality Council review a major modification proposal and normally that will occur through an Expedited Approval Process. Each institution will set out, within its IQAP (see Framework Section 1.3), the information required and steps to be taken internally for its own approval process for such major modifications. The IQAP will also provide for the preparation of the **Proposal Brief** to be submitted to the Quality Council for those cases when the institution may request a Quality Council Review. For a Quality Council review, this Brief requires:

a) A description of, and rationale for, the proposed changes; and
b) Application of the relevant criteria outlined in Framework Section 2.1, to the proposed changes.

The institutional process is abbreviated by not requiring the use of external reviewers; hence Framework Sections 2.2.6 to 2.2.8 do not apply.

3.4 ANNUAL REPORT TO THE QUALITY COUNCIL

Each institution will file an annual report (see Guide) to the Quality Council which provides a summary of major program modifications that were approved through the university's internal approval process in the past year.

4. PROTOCOL FOR CYCLICAL PROGRAM REVIEWS

The Quality Council's Protocol for the conduct of **Cyclical Program Reviews** has five principal components:

a) Self-study (see Framework Section 4.2.3);
b) External evaluation (peer review) with report and recommendations on program quality improvement (see Framework Section 4.2.4);
c) Institutional evaluation of the self-study and the external assessment report resulting in recommendations for program quality improvement (see Framework Section 4.2.5);
d) Preparation and adoption of plans to implement the recommendations and to monitor their implementation (see Framework Section 4.2.5); and
e) Follow-up reporting on the principal findings of the review and the implementation of the recommendations (see Framework Section 4.2.6).

Degree Level Expectations, combined with the expert judgment of external disciplinary scholars, provide the benchmarks for assessing a program's standards and quality.

Below are the minimum process requirements for the cyclical review of undergraduate and graduate programs whether or not those programs are supported by government funds (see Flow Chart 3: Overview of the Protocol for Cyclical Program Reviews).

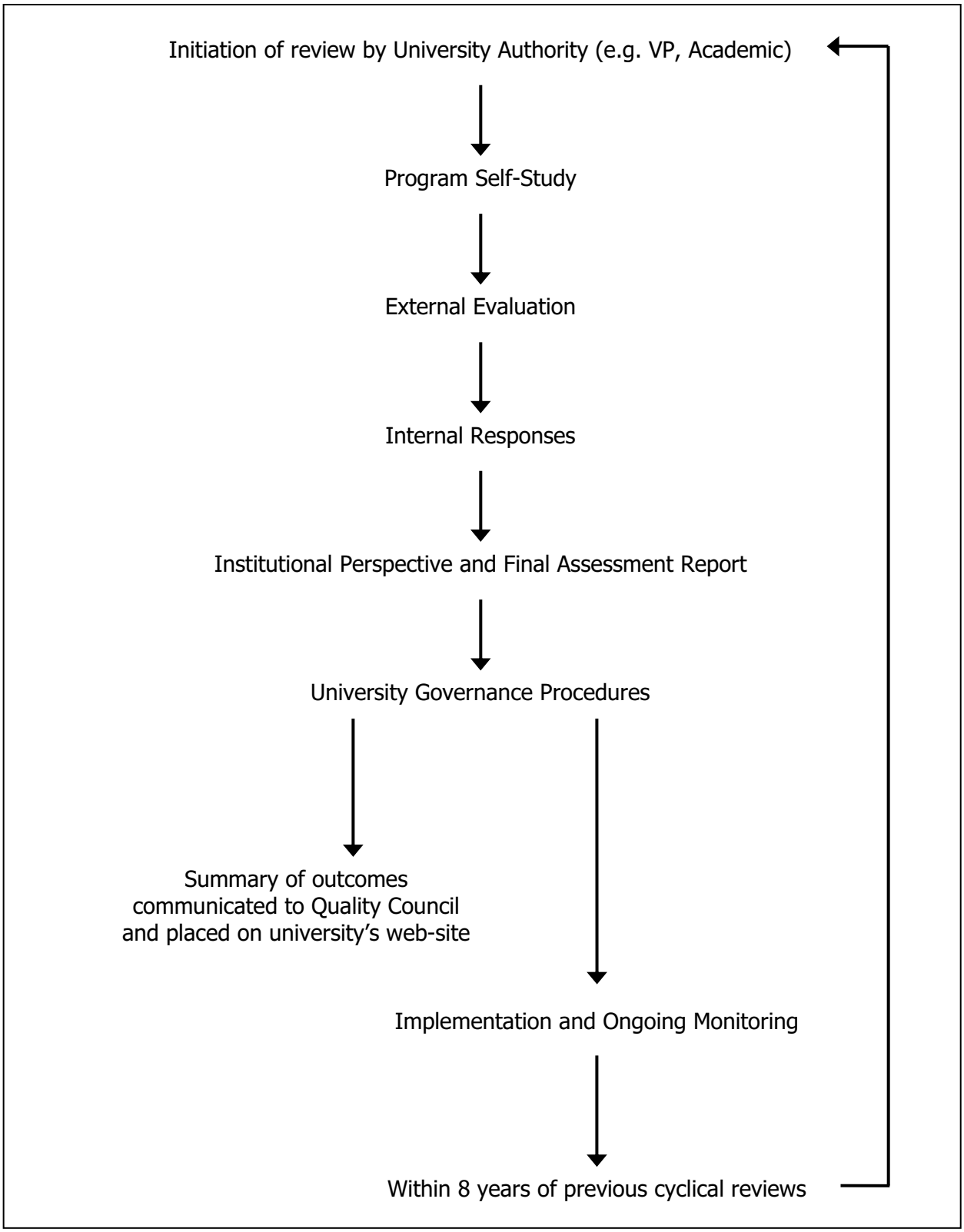
4.1 SCHEDULE OF REVIEWS

Establish a cycle, not to exceed eight years, for the review of the institution's full complement of undergraduate and graduate degree (including programs of specialization), and graduate diploma programs, and indicate how the cycle may coincide with any other internal reviews and professional accreditation. This review cycle should record all independent offerings (different faculty, resources, learning outcomes, delivery mode) of each program.

Institutions have considerable flexibility in scheduling their program reviews. Cyclical program reviews of undergraduate programs may be conducted either independently from, or concurrently with, reviews of graduate programs, and/or departments and other academic units. Nevertheless, it is essential that the quality of each academic program and the learning environment of the students in each program will be explicitly addressed in the reviewers' report(s) as set out in these protocols. The review cycle will include all joint, multi-disciplinary, interdisciplinary, multi-sited and inter-institutional programs, and all modes of delivery.

When an institution chooses to review different program levels (for example, graduate and undergraduate), program modes, or programs offered at different locations, institutions may, in accordance with their respective IQAPs, prepare separate reports for each discrete program or address each program within a single omnibus report provided that the distinctive attributes of each discrete program are reviewed and reported on by the reviewers.

FLOW CHART 3: PROTOCOL FOR THE CYCLICAL REVIEW OF EXISTING PROGRAMS



4.2 INSTITUTIONAL QUALITY ASSURANCE PROCESS REQUIREMENTS

Institutions may enlarge or enhance the quality assurance process requirements set out below to meet their own needs. While accommodating the institution's own culture and practice, the IQAP for cyclical program reviews will:

4.2.1 Authority

a) Identify the authority or authorities responsible for the IQAP and its application.
b) Identify the authoritative contact between the institution and the Quality Council.

4.2.2 The Program or programs

Identify the specific program or programs that will be reviewed and identify, where there is more than one mode or site involved in delivering a specific program, the distinct versions of each program that are to be reviewed.

4.2.3 Self-study: Internal program perspective

a) Include the submission of a self-study document that is broad-based, reflective, forward-looking and includes critical analysis.

b) Identify any pertinent information which the institution deems appropriate for inclusion.

c) Ensure that the self-study will address and document the:
   1. Consistency of the program's learning outcomes with the institution's mission and Degree Level Expectations, and how its graduates achieve those outcomes;
   2. Program-related data and measures of performance, including applicable provincial, national and professional standards (where available);
   3. Integrity of the data;
   4. Review criteria and quality indicators identified in Framework Section 4.3;
   5. Concerns and recommendations raised in previous reviews;
   6. Areas identified through the conduct of the self-study as requiring improvement;
   7. Areas that hold promise for enhancement;
   8. Academic services that directly contribute to the academic quality of each program under review (see Guide);
   9. Participation of program faculty, staff, and students in the self-study and how their views will be obtained and taken into account.

   The input of others deemed to be relevant and useful, such as graduates of the program, representatives of industry, the professions, practical training programs, and employers may also be included.

d) Identify the authority or authorities who will review and approve the self-study report (see Framework Section 4.2.1) to ensure that it meets the above.

4.2.4 External evaluation: External perspective

a) Provide for an external evaluation. Normally the evaluation will be conducted by a Review Committee composed of at least:
   1. One external reviewer for an undergraduate program;
   2. Two such reviewers for a graduate program qualified by discipline and experience to review the program(s);
   3. Two such reviewers for the concurrent review of an undergraduate and graduate program;
   4. One further reviewer, either from within the university but from outside the discipline (or interdisciplinary group) engaged in the program, or external to the university.

All members of the Review Committee will be at arm's length from the program under review. The external and institutional reviewers will be active and respected in their field, and normally associate or full professors with program management experience.

Additional discretionary members may be assigned to the Review Committee where the IQAP so provides. Such additional members might be appropriately qualified and experienced people selected from industry or the professions, and/or, where consistent with the institution's own policies and practices, student members.

b) Describe how the members of the Review Committee are selected as well as any additional reviewers who might be included in the site visits.

c) Describe the steps to be taken to ensure that all members of the Review Committee will:
   1. Understand their role and obligations;
   2. Identify and commend the program's notably strong and creative attributes;
   3. Describe the program's respective strengths, areas for improvement, and opportunities for enhancement;
   4. Recommend specific steps to be taken to improve the program, distinguishing between those the program can itself take and those that require external action;
   5. Recognize the institution's autonomy to determine priorities for funding, space, and faculty allocation.
   6. Respect the confidentiality required for all aspects of the review process.

   The Review Committee's evaluation and report(s) (preferably one joint report, where circumstances permit) should address the substance of both the self-study report and the evaluation criteria set out in Framework Section 4.3 (below).

d) Identify what reports and information the Review Committee will receive in addition to the self-study. Describe how site visits will be conducted, including how reviewers will meet with faculty, students, staff, and senior program administrators. In the case of professional programs, describe how the views of employers and professional associations will be solicited and made available to the Review Committee.

e) Identify to whom the Review Committee submits its report(s) and specify a time frame for its submission (see Report template).

f) Require those who produced the self-study to provide a brief written response to the report(s) of the Review Committee.

g) Identify the relevant dean(s) or academic administrator(s) responsible for the program, who will provide their responses to each of the following:
   1. The plans and recommendations proposed in the self-study report;
   2. The recommendations advanced by the Review Committee;
   3. The program's response to the Review Committee's report(s);

   and will describe:

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

4.2.5 Institutional perspective and report

a) Describe how the self-study and the plans and recommendations issuing from it, and the reviewers' report and responses to it, will be assessed by institutional peers. Most universities have an existing (standing) committee that undertakes this function. The description should identify the participants and how they are selected.

b) Describe how a **Final Assessment Report**, providing the institutional synthesis of the external evaluation and internal responses and assessments, will be drafted which:
   1. Identifies any significant strengths of the program;
   2. Identifies opportunities for program improvement and enhancement;
   3. Sets out and prioritizes the recommendations that are selected for implementation;
   4. May include a confidential section (where personnel issues require to be addressed); and
   5. Includes an institutional **Executive Summary**, exclusive of any such confidential information, and suitable for publication on the web.

c) Unless already specified elsewhere in the IQAP, the Final Assessment Report will include an **Implementation Plan** that identifies:
   1. Who will be responsible for approving the recommendations set out in the Final Assessment Report (4.2.5 [b]3);
   2. Who will be responsible for providing any resources made necessary by those recommendations;
   3. Who will be responsible for acting on those recommendations; and
   4. Timelines for acting on and monitoring the implementation of those recommendations.

4.2.6 Reporting requirements

a) Provide for the distribution of the Final Assessment Report (excluding all confidential information) and the associated Implementation Plan, to the program, Senate (or equivalent authority, as identified in Framework Section 4.2.1, above) and the Quality Council.

b) Require that the institutional Executive Summary (provided for in Framework Section 4.2.5 [b] 5 above) of the outcomes of the review, and the associated Implementation Plan (Framework Section 4.2.5 [c]) be posted on the institution's website and copies provided to both the Quality Council and the institution's governing body.

c) Provide for the timely monitoring of the implementation of the recommendations, and the appropriate distribution, including web postings, of the scheduled monitoring reports.

d) Establish the extent of public access to the:
   1. Information made available for the self-study;
   2. Self-study report;
   3. Report of the Review Committee; and
   4. Specified responses to the report of the Review Committee.

   It is expected that the report from the Review Committee will be afforded an appropriate level of confidentiality.

4.2.7 Use of accreditation and other external reviews in the Institutional Quality Assurance Process

The IQAP may allow for and specify the substitution or addition of documentation or processes associated with the accreditation of a program, for components of the institutional program review process, when it is fully consistent with the requirements established in this Framework. A record of substitution or addition, and the grounds on which it was made, will be eligible for audit by the Quality Council.

4.2.8 Institutional Manual

Provide for the preparation and systematic maintenance of an institutional manual that describes the cyclical program review and supports such reviews. Among other items, this manual should do the following:

a) Provide guidance on the conduct of rigorous, objective and searching self-studies, and describe the potential benefits that can accrue from them;
b) Establish the criteria for the nomination and selection of arm's length external peer reviewers;
c) Identify responsibilities for the collection, aggregation and distribution of institutional data and outcome measures required for self-studies;
d) Specify the format required for the self-study and external reviewers' reports; and
e) Set out the institution's cycle for the conduct of undergraduate and graduate program reviews.

4.3 EVALUATION CRITERIA

The IQAP for review of existing undergraduate and graduate programs shall require, and may where it chooses extend the evaluation criteria set out below.

4.3.1 Objectives

a) Program is consistent with the institution's mission and academic plans.
b) Program requirements and learning outcomes are clear, appropriate and align with the institution's statement of the undergraduate and/or graduate Degree Level Expectations.

4.3.2 Admission requirements

Admission requirements are appropriately aligned with the learning outcomes established for completion of the program.

4.3.3 Curriculum

a) The curriculum reflects the current state of the discipline or area of study.
b) Evidence of any significant innovation or creativity in the content and/or delivery of the program relative to other such programs.
c) Mode(s) of delivery to meet the program's identified learning outcomes are appropriate and effective.

4.3.4 Teaching and assessment

a) Methods for assessing student achievement of the defined learning outcomes and degree learning expectations are appropriate and effective.
b) Appropriateness and effectiveness of the means of assessment, especially in the students' final year of the program, in clearly demonstrating achievement of the program learning objectives and the institution's (or the Program's own) statement of Degree Level Expectations.

4.3.5 Resources

Appropriateness and effectiveness of the academic unit's use of *existing* human, physical and financial resources in delivering its program(s). In making this assessment, reviewers must recognize the institution's autonomy to determine priorities for funding, space, and faculty allocation.

4.3.6 Quality indicators

While there are several widely used quality indicators or proxies for reflecting program quality, institutions are encouraged to include available measures of their own which they see as best achieving that goal. Outcome measures of student performance and achievement are of particular interest, but there are also important input and process measures which are known to have a strong association with quality

outcomes. It is expected that many of the following listed examples will be widely used. The Guide makes reference to further sources and measures that might be considered.

a) **Faculty**: qualifications, research and scholarly record; class sizes; percentage of classes taught by permanent or non-permanent (contractual) faculty; numbers, assignments and qualifications of part-time or temporary faculty;
b) **Students**: applications and registrations; attrition rates; time-to-completion; final-year academic achievement; graduation rates; academic awards; student in-course reports on teaching; and
c) **Graduates**: rates of graduation, employment six months and two years after graduation, post-graduate study, "skills match" and alumni reports on program quality when available and when permitted by the Freedom of Information and Protection of Privacy Act (FIPPA). Auditors will be instructed that these items may not be available and applicable to all programs.

4.3.7 Quality enhancement

Initiatives taken to enhance the quality of the program and the associated learning and teaching environment.

4.3.8 Additional graduate program criteria

a) Evidence that students' time-to-completion is both monitored and managed in relation to the program's defined length and program requirements.
b) Quality and availability of graduate supervision.
c) Definition and application of indicators that provide evidence of faculty, student and program quality, for example:
    1. Faculty: funding, honours and awards, and commitment to student mentoring;
    2. Students: grade-level for admission, scholarly output, success rates in provincial and national scholarships, competitions, awards and commitment to professional and transferable skills;
    3. Program: evidence of a program structure and faculty research that will ensure the intellectual quality of the student experience;
    4. Sufficient graduate level courses that students will be able to meet the requirement that two-thirds of their course requirements be met through courses at this level (see Guide.)

5. AUDIT PROCESS

The objective of the audit is to determine whether or not the institution, since the last review, has acted in compliance with the provisions of its IQAP for Cyclical Program Reviews as ratified by the Quality Council.

All publicly assisted universities in Ontario associated with the Quality Council have committed to participating in this audit process once every eight years. Additional audits for specific institutions may take place within any cycle, as described below. The Quality Council consults with OCAV in establishing the schedule of institutional participation in the audit process within the eight-year cycle and publishes the agreed schedule on its website.

5.1 QUALITY COUNCIL AUDIT PANEL: SELECTION OF THE AUDITORS

The selection of auditors follows a four-step process:
a) The Quality Council solicits nominations of auditors;
b) The Quality Council generates a long list of potential auditors and submits the list to OCAV;
c) OCAV selects a roster of auditors from the list; and
d) The Quality Council appoints the required number of auditors from the OCAV-selected list.

The slate of appointees will include present and past faculty members, not currently holding an administrative appointment in an Ontario university but having had senior administrative experience at the faculty or university level. They are selected for their recognized strength in the development and operation of undergraduate and/or graduate programs and their experience, typically, in one or more Ontario universities. Some will be bilingual. From time to time, one or two auditors may be required to have had senior administrative experience in an academic services area, such as operating student academic support functions. The full complement of auditors is known as the Quality Council Audit Panel.

5.2 STEPS IN THE AUDIT PROCESS

5.2.1 Assignment of auditors for the conduct of the audit

Normally, no fewer than three auditors, selected by the Executive Director of the Quality Council, conduct an institutional audit. These auditors will be at arm's length from the institution undergoing the audit. The Executive Director and a member of the Secretariat normally accompany the auditors on their site visit.

5.2.2 Selection of the sample of programs for audit

Auditors independently select programs for audit, typically four undergraduate and four graduate cyclical program reviews. At least one of the undergraduate programs and one of the graduate programs will be a New Program or Major Modifications to an Existing Program approved within the period since the previous audit. The Executive Director authorizes the proposed selection, assuring, for example, a reasonable program mix.

Specific programs may be added to the sample when an immediately previous audit has documented causes for concern, and when so directed in accordance with Framework Section 5.2.5 (b). When the institution itself so requests, specific programs may also be audited.

The auditors may consider, in addition to the required documentation, any additional elements and related documentation stipulated by the institution in its IQAP.

5.2.3 Desk audit[1] of the institutional quality assurance practices

Once every eight years, and in preparation for a scheduled on-site visit, the auditors participate in a desk audit of the institution's quality assurance practices. Using the institution's records of the sampled cyclical program reviews, together with associated documents, this audit tests whether the institution's practice conforms to its own IQAP, as ratified by the Quality Council.[2]

It is essential that the auditors have access to all relevant documents and information to ensure they have a clear understanding of the institution's practices. The desk audit serves to raise specific issues and questions to be pursued during the on-site visit and to facilitate the conduct of an effective and efficient on-site visit.

The documentation to be submitted for the programs selected for audit will include:

a) All the documents and other information associated with each step of the institution's IQAP, as ratified by the Quality Council.
b) The record of any revisions of the institution's IQAP, as ratified by the Quality Council.

Institutions may provide any additional documents at their discretion.

During the desk audit, the auditors will also determine whether or not the institution's web-based publication of the Executive Summaries, and subsequent reports on the implementation of the review recommendations for the programs included in the current audit, meet the requirements of Framework Section 4.2.6.

The auditors undertake to preserve the confidentiality required for all documentation and communications and meet all applicable requirements of the Freedom of Information and Protection of Privacy Act (FIPPA).

5.2.4 On-site interaction with the institution

After the desk audit, auditors normally visit the institution over two or three days. The principal purpose of the on-site visit is to answer questions and address information gaps that arose during the desk audit. Ultimately, the purpose of the on-site visit is for the auditors to get a sufficiently complete and accurate understanding of the institution's application of its IQAP so that they can meet their audit responsibilities.

In the course of the site visit, the auditors will speak with those identified by the IQAP as participants and in particular those accountable for various steps, responsibilities, and obligations in the process. The institution, in consultation with the auditors, will establish the program and schedule for these interviews prior to the site visit.

5.2.5 Audit report

a) Following the conduct of an institutional audit, the auditors prepare a report, which:
    1. Describes the audit methodology and the verification steps used;
    2. Provides a status report on the program reviews carried out by the institution;
    3. On the basis of the programs audited, describes the institution's compliance with its IQAP as ratified by the Quality Council;
    4. Identifies and records any notably effective policies or practices revealed in the course of the audit of the sampled programs; and
    5. Where appropriate, makes suggestions and recommendations and identifies causes for concern.

[1] A desk audit is a limited-scope, off-site examination of the relevant documents and records by the auditors.
[2] Changes to the institution's process and practices within the eight-year cycle are to be expected. The test of the conformity of practice with process will always be made against the ratified Institutional Quality Assurance Process applying at the time of the conduct of the review.

Suggestions will be forward-looking, and are made by auditors when they identify opportunities for the institution to strengthen its quality assurance practices. Suggestions do not convey any mandatory obligations and sometimes are the means for conveying the auditors' province-wide experience in identifying good, and even on occasion, best practices. Institutions are under no obligation to implement or otherwise respond to the auditors' suggestions, though they are encouraged to do so.

Recommendations are recorded in the auditors' report when they have identified failures to comply with the IQAP. These failures indicate discrepancies that weaken the integrity of academic standards or are necessary for effective quality assurance. The institution must address these recommendations.

Causes for concern In some cases the auditors may identify that there is cause for concern. These may be potential structural weaknesses in quality assurance practices (for example, when, in two or more instances, the auditors identify inadequate follow-up monitoring (as called for in Framework Section 4.2.5[c]); a failure to make the relevant implementation reports to the appropriate statutory authorities (as called for in Framework Section 4.2.6.), or the absence of the Manual (as called for in Framework Section 4.2.8).

b) When the auditors have identified, with supporting reason and evidence, cause for concern, it will be reported to the Audit Committee and the institution. Following deliberation, including possible discussion with the institution, the Committee may then recommend that the Quality Council investigate by taking one of the following steps:
   1. Directing specific attention by the auditors to the issue within the subsequent audit as provided for in Framework Section 5.2.2;
   2. Scheduling a larger selection of programs for the institution's next audit; and/or
   3. Requiring an immediate and expanded institutional audit (further sample) of the respective process(es).

The decision of the Quality Council will be reported to the institution by the Executive Director.

5.2.6 Disposition of the audit report and summary

The auditors prepare a **draft report**, together with a **summary of the principal findings** suitable for subsequent publication. The Secretariat provides a copy of these to the institution's "authoritative contact" identified in Framework Section 4.2.1(b), for comment. This consultation is intended to ensure that the report and associated summary do not contain errors or omissions of fact.

That authority submits a response to the draft report and summary within sixty days. This response becomes part of the official record, and the auditors may use it to revise their report and/or associated summary prior to their submission to the Audit Committee.

The Executive Director submits the final audit report and associated summary, together with the institutional response, to the Audit Committee for consideration and, when necessary, for consultation with the auditors. When satisfied that the auditors followed the required audit procedures correctly and that the university had an appropriate opportunity to respond, the Audit Committee recommends to the Quality Council approval of the report and associated summary. When a report or associated summary is rejected, the Council determines the actions to be taken.

5.2.7 Submission of the audit report to the institution

The Secretariat sends the approved report and associated summary to the institution and to the Ontario Council of Academic Vice-Presidents (OCAV), the Council of Ontario Universities (COU) and the Ministry of Training, Colleges and Universities (MTCU) for information.

5.2.8 Publication of main audit findings

The Secretariat publishes the approved summary of the overall findings, together with a record of the recommendations on the Quality Council's website, and sends a copy of both to the institution for publication on its website.

5.2.9 Institutional one-year follow-up

Within a year of the publication of the final audit report, the institution will inform the auditors, through the Secretariat, of the steps it has taken to address the recommendations. The auditors will draft an accompanying commentary on the scope and adequacy of the institution's response, together with a draft summary of their commentary, suitable for publication. The auditors' response and summary are then submitted to the Audit Committee for consideration. The Audit Committee will submit a recommendation to the Quality Council on whether or not to accept the institutional one-year follow-up response. When the Audit Committee is not satisfied with the reported institutional response, it recommends to the Quality Council the course of action to be taken.

5.2.10 Web publication of one-year follow-up report

The Secretariat publishes the auditors' summary of the scope and adequacy of the institution's response on the Quality Council website and sends a copy to the institution for publication on its web site and to OCAV, COU and MTCU for information.

6. REVIEW OF THE QUALITY ASSURANCE FRAMEWORK

6.1 AMENDMENT OF THE QUALITY ASSURANCE FRAMEWORK

The Quality Council or OCAV may request changes at any time, subject to approval of both the Quality Council and OCAV.

6.2 AUDIT OF THE QUALITY COUNCIL AND QUALITY ASSURANCE FRAMEWORK

The Quality Assurance Framework and the Quality Council will be reviewed periodically and independently (every eight years) using a methodology agreed to by the Quality Council and OCAV.

APPENDIX 1:

ONTARIO COUNCIL OF ACADEMIC VICE-PRESIDENTS' UNDERGRADUATE AND GRADUATE DEGREE LEVEL EXPECTATIONS

UNDERGRADUATE

	Baccalaureate/bachelor's degree This degree is awarded to students who have demonstrated the following:	**Baccalaureate/bachelor's degree: honours** This degree is awarded to students who have demonstrated the following:
1. Depth and breadth of knowledge	a) General knowledge and understanding of many key concepts, methodologies, theoretical approaches and assumptions in a discipline	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) 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	b) 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) Ability to gather, review, evaluate and interpret information relevant to one or more of the major fields in a discipline	c) Developed ability to: i) gather, review, evaluate and interpret information; and ii) compare the merits of alternate hypotheses or creative options, relevant to one or more of the major fields in a discipline
	d) Some detailed knowledge in an area of the discipline	d) Developed, detailed knowledge of and experience in research in an area of the discipline
	e) Critical thinking and analytical skills inside and outside the discipline f) Ability to apply learning from one or more areas outside the discipline	e) Developed critical thinking and analytical skills inside and outside the discipline f) 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:	An understanding of methods of enquiry or creative activity, or both, in their primary area of study that enables the student to:

	Baccalaureate/bachelor's degree This degree is awarded to students who have demonstrated the following:	**Baccalaureate/bachelor's degree: honours** This degree is awarded to students who have demonstrated the following:
	a) evaluate the appropriateness of different approaches to solving problems using well established ideas and techniques; and b) devise and sustain arguments or solve problems using these methods.	a) evaluate the appropriateness of different approaches to solving problems using well established ideas and techniques; b) devise and sustain arguments or solve problems using these methods; and c) describe and comment upon particular aspects of current research or equivalent advanced scholarship.
3. Application of knowledge	The ability to review, present, and interpret quantitative and qualitative information to: a) develop lines of argument; b) make sound judgments in accordance with the major theories, concepts and methods of the subject(s) of study; and The ability to use a basic range of established techniques to: a) analyze information; b) evaluate the appropriateness of different approaches to solving problems related to their area(s) of study; c) propose solutions; and d) make use of scholarly reviews and primary sources.	The ability to review, present and critically evaluate qualitative and quantitative information to: a) develop lines of argument; b) make sound judgments in accordance with the major theories, concepts and methods of the subject(s) of study; c) apply underlying concepts, principles, and techniques of analysis, both within and outside the discipline; d) where appropriate use this knowledge in the creative process; and The ability to use a range of established techniques to: a) initiate and undertake critical evaluation of arguments, assumptions, abstract concepts and information; b) propose solutions; c) frame appropriate questions for the purpose of solving a problem; d) solve a problem or create a new work; and

	Baccalaureate/bachelor's degree This degree is awarded to students who have demonstrated the following:	**Baccalaureate/bachelor's degree: honours** This degree is awarded to students who have demonstrated the following:
		e) to make critical use of scholarly reviews and primary sources.
4. Communication 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	Qualities and transferable skills necessary for further study, employment, community involvement and other activities requiring: a) the exercise of personal responsibility and decision-making; b) working effectively with others; c) the ability to identify and address their own learning needs in changing circumstances and to select an appropriate program of further study; and d) behaviour consistent with academic integrity and social responsibility.	Qualities and transferable skills necessary for further study, employment, community involvement and other activities requiring: a) the exercise of initiative, personal responsibility and accountability in both personal and group contexts; b) working effectively with others; c) decision-making in complex contexts; d) 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; e) and behaviour consistent with academic integrity and social responsibility.

GRADUATE

	Master's degree This degree is awarded to students who have demonstrated the following:	**Doctoral degree** This degree extends the skills associated with the Master's degree and is awarded to students who have demonstrated the following:
1. Depth and breadth of knowledge	A systematic understanding of knowledge, including, where appropriate, relevant knowledge outside the field and/or discipline, 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 including, where appropriate, relevant knowledge outside the field and/or discipline.
2. Research and scholarship	A conceptual understanding and methodological competence that a) Enables a working comprehension of how established techniques of research and inquiry are used to create and interpret knowledge in the discipline; b) Enables a critical evaluation of current research and advanced research and scholarship in the discipline or area of professional competence; and c) 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: a) The development and support of a sustained argument in written form; or b) 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	The capacity to a) Undertake pure and/or applied research at an advanced level; and

	Master's degree This degree is awarded to students who have demonstrated the following:	**Doctoral degree** This degree extends the skills associated with the Master's degree and is awarded to students who have demonstrated the following:
	new setting.	b) 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: i) The exercise of initiative and of personal responsibility and accountability; and ii) Decision-making in complex situations; 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; and d) 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 communications 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.

APPENDIX 2:

ONTARIO UNIVERSITIES COUNCIL ON QUALITY ASSURANCE

The Ontario Universities Council on Quality Assurance (the Quality Council) was established by the Council of Ontario Universities to oversee quality assurance processes for all levels of programs in its publicly assisted universities, as of March 1, 2010.

MISSION

The Ontario Universities Council on Quality Assurance is the provincial body responsible for assuring the quality of all programs leading to degrees and graduate diplomas granted by Ontario's publicly assisted universities and the integrity of the universities' quality assurance processes. Through these practices, the Quality Council also assists institutions to improve and enhance their programs. In fulfilling its mission, the Quality Council operates in a fair, accountable and transparent manner with clear and openly accessible guidelines and decision-making processes, and through reasoned results and evidenced-based decisions.

MANDATE

The roles and responsibilities of the Quality Council, while respecting the autonomy and diversity of the individual institutions, are the following:

- to guide Ontario's publicly assisted universities in the ongoing quality assurance of their academic programs;
- to review and approve proposals for new graduate and undergraduate programs;
- to ensure through regular audits that Ontario's publicly assisted universities comply with quality assurance guidelines, policies and regulations for graduate and undergraduate programs;
- to communicate final decisions to the Ministry of Training, Colleges and Universities;
- to review and revise, from time to time for future application, the Council of Ontario University's quality assurance protocols in light of its own experiences and developments in the field of quality assurance;
- to liaise with other quality assurance agencies, both provincially and elsewhere; and
- to undergo regular independent review and audit at intervals of no longer than eight years.

OPERATING PRINCIPLES

1. The Quality Council and its processes express the commitment of Ontario's publicly assisted universities to quality assurance and will be the provincial body responsible for ensuring the academic accountability of the Ontario publicly assisted universities both individually and as a system.

2. The Quality Council will operate in accordance with publicly communicated principles, policies and procedures that respect the individual autonomy of Ontario's publicly assisted universities and the role of senates and other internal bodies in ensuring the quality of academic programs.

3. Both the Quality Council's assessment process and the internal quality assurance process of individual universities will be open and transparent, except as limited by constraints of laws and regulations for the protection of individuals.

4. The quality assurance processes for both graduate and undergraduate programs will as far as possible mirror each other so that quality assurance program reviews will take place contemporaneously for both undergraduate and graduate programs whenever feasible.

5. Proposals for both new undergraduate and new graduate programs shall include the report of an initial review, conducted by external reviewers identified by the university.

6. The Quality Council shall undergo a regular periodic quality assessment review by a review committee that includes, equally, reviewers who are external to the system and to the province, and reviewers who are internal to the system and to the province.

7. The Quality Council or OCAV may request changes to the Quality Assurance Framework at any time, subject to approval of both the Quality Council and OCAV.

8. The Chair of the Quality Council will make periodic reports to the Ontario Ministry of Training, Colleges and Universities.

AUTHORITY

The Quality Council has final authority for decisions concerning recommendations for approval of new programs and compliance with audit guidelines. In all other respects, the Quality Council is responsible to OCAV and COU.

MEMBERSHIP OF THE QUALITY COUNCIL

There are nine voting members of the Quality Council as follows:

- One member, who shall serve as Chair, external to OCAV but chosen by OCAV[1]
- Two OCAV members, one from a medical/doctoral university and one from a non-medical/doctoral university
- One graduate[2] dean or equivalent from a COU member institution
- One undergraduate[3] dean or equivalent from a COU member institution
- Two Academic Colleagues from the Council of Ontario Universities, excluding those member institutions represented by the graduate or undergraduate deans or their equivalents listed above.
- One member from outside Ontario with significant experience involving a post-secondary quality assurance organization
- One citizen member appointed by the Council of Ontario Universities through its Executive Committee

The Executive Director of Quality Assurance will serve as Secretary, non-voting.

Members (except for the Executive Director) shall be appointed by OCAV following an open nominations process for three year terms, renewable once. Initially, to ensure continuity, there will be staggered two and three year terms.

The inaugural selection and appointment of the Quality Council will be conducted by OCAV. A process for subsequent selection and appointment of members to the Quality Council shall be established by OCAV.

APPRAISAL AND AUDIT COMMITTEES

The quality assurance process will be undertaken by an Appraisal Committee and an Audit Committee with responsibility for making recommendations to the Quality Council on the approval of new programs and on the audits of existing programs.

Members of these committees shall be senior academics with experience in the development, delivery and quality assessment of both graduate and undergraduate programs and shall not be members of the Quality Council. The Executive Director will be an *ex officio* member of these committees and will convene meetings and maintain records.

_____

[1] Candidate pools may include former OCAV members, former Deans or Vice-Provosts with experience in QA, former Executive Heads and other with significant experience in QA at the university level

[2] 'Graduate' dean means towards those individuals who have principal responsibilities for the overall direction of graduate programs at their institution

[3] 'Undergraduate' dean means those individuals who have overall responsibility for undergraduate programming within a Faculty, or – as may be the case – across the institution