7. PROTOCOL FOR CYCLICAL PROGRAM REVIEW

7.1 Definition
The Protocol for the Cyclical Program Reviews assesses the academic standards of existing undergraduate and graduate programs, including credit graduate diploma programs and ensures that programs maintain the highest academic quality.

All undergraduate and graduate degree programs, certificate programs and diplomas approved by the Senate of York University including those offered in full or in part by its federated and affiliated institutions (colleges and universities) through collaborative or other affiliation agreements are required to complete a review every eight years, in accordance with the protocol, guidelines and schedule set out in the YUQAP, the Policy on the Approval and Cyclical Review of Programs and other Curriculum, and the Quality Assurance Framework.

7.2 Administration and Authority for Cyclical Reviews
The Office of the Vice Provost Academic shall have administrative responsibility for the cyclical review process and shall have responsibility for establishing a Rota of reviews, which shall be submitted annually to the Joint Sub-Committee. The Vice Provost Academic will commission the external reviewers in consultation with the relevant faculties/schools and ensure that the reviewers receive all relevant materials prior to the site visit. The Vice Provost Academic in consultation with the AVP Graduate/FGS Dean shall provide advice to proponents and facilitate processes covered by this policy.

The Joint Sub-Committee shall have authority for ensuring that cyclical reviews adhere to the protocol and shall monitor the timely implementation of improvements. The Joint Sub-Committee receives the reviewers’ report – along with all relevant documentation including the plans, follow-up reports and summary reports – and transmits to the Committee of Academic Standards, Curriculum and Pedagogy.

Responsibility for local coordination resides in administrative units directing the program(s) under review.

Cyclical reviews shall be provided to the Academic Resources Committee of the Board of Governors which shall submit them to the full Board.

7.3 Programs and review schedule
The University’s full complement of undergraduate and certificate programs, graduate and diploma programs are reviewed on a planned cycle called the Rota A "program" is a Senate approved sequence of courses or other components of study prescribed for the fulfillment of the requirements of a particular degree, certificate or diploma and is considered to be the comprehensive body of studies required to graduate with a degree, certificate or diploma in a particular discipline or interdisciplinary field of study. Units that administer more than one program must conduct a full review of each.

Programs are reviewed on a regular basis but the interval between programs must not exceed eight years. Cyclical program reviews of undergraduate programs may be conducted either independently from, or concurrently with, reviews of graduate programs. While undergraduate programs reside in one or more academic units, the organizational structure for graduate programs varies. Interdisciplinary and multidisciplinary graduate programs, as well as cognate programs offered at both Keele and Glendon, may involve faculty members from several different academic units. In anticipation that undergraduate and graduate reviews will be synchronized, to the extent possible, there is an expectation that there will be a senior academic (typically a Chairperson/Director) who will act as the lead contact and be responsible for the local coordination, in consultation with the relevant undergraduate and graduate program directors.

When the reviews are synchronized, the relevant Chair(s)/Director(s), Undergraduate Program Director(s) and Graduate

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6 The term “unit” should be taken to include departments, schools and Faculties (i.e., those bodies responsible for administering academic programs) and/or the members of a specific graduate program.

7 A full review includes all of the elements included in the YUQAP and quality assurance policy.

8 The Vice Provost Academic may authorize a one year extension of a cyclical review due to specific academic and logistical challenges including the application of the new YUQAP and efforts to align related undergraduate and graduate programs.
Program Director(s) will collaborate on the preparation of the cyclical review to produce a single omnibus report even if the documentation has separate sections addressing the undergraduate and graduate programs. 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 the Protocol.

Reviews may also be aligned with professional accreditation. Note that university reviews are not waived because an externally-commissioned review, such as an accreditation, has recently been conducted. In some cases, the University process may be streamlined by aligning the requirements of the internally and externally commissioned reviews and supplementing documentation as necessary.

The review cycle will include all dual or joint programs, multi-disciplinary, interdisciplinary, second-entry, multi-sited and inter-institutional programs, and all modes of delivery. Inter-institutional programs offered in partnership with other postsecondary institutions through affiliation, federation and other formal agreements are reviewed as entities distinct from the institutions within which they may reside. Such programs must specify a review process for administering the Protocol.

7.4 Commissioning officer
Reviews of academic programs are commissioned by the Vice Provost Academic in consultation with the relevant Dean(s)/Principal. A database containing the full schedule of all program reviews is maintained in the Office of the Vice Provost Academic. The Vice Provost Academic will seek input from the partner institution(s) regarding the commissioning of the review in cases where the program is offered with other postsecondary education institutions through formal collaborative and/or affiliation agreements.

7.5 Process overview
Degree Level Expectations, combined with the expert judgment of external disciplinary scholars, provide the benchmarks for assessing a program’s standards and quality. The YUQAP for the conduct of Cyclical Program Reviews has five principal components as laid out in Flow Chart 7.5:

a) Self-study (see Section 7.6);
b) External evaluation (peer review) with report and recommendations on program quality improvement (see Section 7.7);
c) Institutional evaluation of the self-study and the external assessment report resulting in recommendations for program quality improvement (see Section 7.7);
d) Preparation and adoption of plans to implement the recommendations and to monitor their implementation (see Section 7.8); and

e) Follow-up reporting on the principal findings of the review and the implementation of the recommendations (see Section 7.9).

7.6 Self-study: Internal program perspective

7.6.1 Program under review
The Vice Provost Academic defines the program(s) under review and formally initiates the review process by giving notice to the senior academic officer affiliated with the program.

7.6.2 Terms of reference
The terms of reference refer to the evaluation criteria (see Section 7.6.5). Standard terms of reference are provided in the Guidance for Program Self-Studies on the Quality Assurance website but can be enhanced by the program under review.

7.6.3 Announcement
A cyclical review is publicly announced by posting on the Vice President Academic and Provost Website on Quality Assurance. It shall then be the responsibility of the “unit” and program(s) under review to provide further communications to faculty members, staff, students and other stakeholders as may be appropriate, and for preparing the documentation for the review.
Chart 7.5: Process for the cyclical review of programs

1. Internal University Process

<table>
<thead>
<tr>
<th>Initiation of Review by Office of Vice Provost Academic</th>
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<tbody>
<tr>
<td>Program suggestions for reviewers approved by anchor Dean(s)/Principal and forwarded to Office of Vice Provost Academic for confirmation</td>
</tr>
<tr>
<td>Input solicited from AVP Graduate/FGS Dean if graduate programs involved</td>
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<tr>
<td>Office of Vice President Academic and Provost includes announcement of reviews on Website</td>
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<tr>
<td>Preparation for review begins by the program including local communications as appropriate to faculty members, staff, students, internal and external communities</td>
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<tr>
<td>Unit: Self-study development; site visit scheduling; preparation of documents (including Dean’s/Principal’s Agenda of Concerns)</td>
</tr>
<tr>
<td>Office of Vice Provost confirm that review documentation is complete</td>
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<tr>
<td>External Review site visit and report</td>
</tr>
<tr>
<td>Response from program to Dean(s)/Principal</td>
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<tr>
<td>Response from Dean(s)/Principal including Implementation Plan (*new)</td>
</tr>
<tr>
<td>Received by Office of Vice Provost and forwarded to Joint Sub-Committee for review Meeting, if required, with unit representatives</td>
</tr>
<tr>
<td>Final assessment forwarded to parent committees: ASCP and APPRC ASCP brings forward to Senate</td>
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<tr>
<td>3. Follow-up Process</td>
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### 7.6.4 Contents

The self-study document is broad-based, reflective, forward-looking and includes critical analysis. It is an assessment of the strengths of the program(s) and opportunities for strengthening the program(s). The self-study should also consider the appropriateness of the program(s) in the context of current trends in the field, relevant academic plans, and shifting degree level expectations. Preparing a self-study involves faculty members, staff, students, and other stakeholders such as alumni or industry partners, and articulating their participation in the process. The self-study must address and document the terms of reference and program evaluation criteria that will be provided to the reviewers (see the template on the Quality Assurance website).

As specified in the QAF, the self-study includes the following:

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 Section 7.7;
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 (in old process "Program’s Agenda of Concerns");
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 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.

The documentation for the reviewers will be reviewed and approved by the Office of the Vice Provost Academic, in consultation with the Associate VP Graduate/FGS Dean, to ensure that it meets the core elements of a self-study and program evaluation criteria.
7.7. **Evaluation criteria defined by the Quality Assurance Framework**

The minimum evaluation criteria for the cyclical review of programs as defined by the QAF are set out below. Additional criteria may be added by the program(s) under review to meet the needs of their disciplines or to align with professional accreditation requirements.

7.7.1 **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.

7.7.2 **Admission requirements**

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

7.7.3 **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.

7.7.4 **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.

7.7.5 **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.

7.7.6 **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 Guidance for Program Self-Studies on the Quality Assurance website makes reference to further sources and measures that might be considered.

   a) Faculty Members: qualifications, research and scholarly record; class sizes; percentage of classes taught by permanent or non-permanent (contractual) faculty members; numbers, assignments and qualifications of part-time or temporary faculty members;
   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.

7.7.7 **Quality enhancement**

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

7.7.8 **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 members’, student and program quality, for example:
   1. Faculty Members: 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 members’ 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

7.8 Reviewer selection and process
The senior academic lead is responsible for submitting recommendations for reviewers to the Dean(s)/Principal. Consultation should be undertaken with the relevant Director(s)/Chair(s), Graduate Program Director and Undergraduate Program Director if the undergraduate and graduate programs are being reviewed together so as to ensure that the needs of both programs are addressed. Further if there is more than one department or school involved either at one campus or at different campuses, consultations should be undertaken to produce a comprehensive list of reviewers that are supported by the different program(s) and/or unit(s).

An approved list of reviewers will be submitted to the Vice Provost Academic who will confirm the reviewers in consultation with the AVP Graduate/Dean of FGS in the case of reviews of graduate programs.

7.8.1 Selection of reviewers
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.

See 3.2.4 for requirements regarding external reviewers.

Additional discretionary members may be assigned to be Reviewers if required by the complexity of the program(s) or other factors. 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.

7.8.2 Responsibilities of the Vice Provost Academic to inform the reviewers of their roles and responsibilities
The Vice Provost Academic will normally meet with the reviewers (and the Associate VP Graduate/FGS Dean if a graduate program is involved) prior to the commencement of the on-site visit and/or start of the review and ensure that the reviewers:
   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.

7.8.3 Documentation to be provided to the Reviewers
The external Reviewers will receive the following documents prior to the site visit either in hard copy or through online access to the unit website and related links (see the Quality Assurance website for further information):
   • Terms of reference
7.8.4 Site visit
The senior academic lead is responsible for arranging the schedule and providing the itinerary to the reviewers prior to commencement of the site visit. The reviewers should visit together and attend all relevant campuses. During their visit, provisions must be made for them to meet with faculty members, students, administrative staff and senior program administrators including the relevant Dean(s)/Principal, Vice Provost Academic, and in the case of reviews involving a graduate program, the Associate VP Graduate/FGS Dean.

7.8.5 Reviewers’ Report
The Reviewers’ Report is normally submitted within two months of the site visit and returned to the Vice Provost Academic. It will be included among the documentation forwarded to the Joint Sub-Committee and will address the substance of the self-study and the evaluation criteria set out in Section 7.7 above as the “Agenda of Concerns” provided by the “unit” and the “Agenda of Concerns” provided by the Dean(s)/Principal. Before accepting the Report as Final, the “unit” shall have an opportunity to bring to the attention of the reviewers any clear factual errors that can be corrected. The Final Report is then accepted and forwarded to the “unit” for a formal response.

7.9 Institutional response

7.9.1 Unit response
The senior academic lead is responsible for preparing the formal response, in consultation with other members of the “unit” including any relevant undergraduate and/or graduate program directors, to the Reviewers’ Report. The “unit’s response” shall address:
1. The plans and recommendations proposed in the self-study report;
2. The recommendations advanced by the Reviewers;
3. The program’s response to the Review Committee’s report(s);
4. Any changes in organization, policy or governance that would be necessary to meet the recommendations.

The unit’s response is submitted to the Dean / Principal of the anchor Faculty.

7.9.2 Dean(s)/Principal’s Implementation Plan
Following receipt and review of the unit’s response, the Dean/Principal of the anchor Faculty prepares an Implementation Plan, which includes the following:
1. Confirmation of the recommendations to be implemented by the unit;
2. Identification of who will be responsible for acting on and monitoring those recommendations;
3. The resources, financial and otherwise, that will be provided to support the implementation of those recommendations; and
4. A proposed timeline for the implementation of those recommendations.

The Implementation Plan is submitted to the Office of the Vice-Provost Academic.

7.9.3 Institutional perspective and Final Assessment Report
The Vice-Provost Academic forwards the following documentation to the Joint Sub-Committee on Quality Assurance:
- overview document with preliminary comments of the Vice-Provost Academic in consultation with the
AVP/Dean FGS where a graduate program is involved.

- self-study
- program’s and the Dean’s / Principal’s Agenda of Concerns
- Reviewers’ report
- program’s response to the Reviewers’ Report
- decanal Implementation Plan

The Joint Sub-Committee reviews the program review material to either confirm the Implementation Plan for the program or convene a meeting with the Dean / Principal (or designate) and representatives from the “unit” for the purpose of elaboration and clarification of the Implementation Plan.

Following the confirmation of the Implementation Plan by the Joint Sub-Committee, the Office of the Vice Provost Academic, in consultation with the Joint Sub-Committee, prepares the Final Assessment Report. The Report is an institutional synthesis of the external evaluation and internal responses and assessments 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 need to be addressed);
5. Includes the decanal Implementation Plan; and
6. Includes an institutional Executive Summary, exclusive of any such confidential information, and suitable for publication on the web.

7.9.4 Reporting requirements and Access
The Final Assessment Report (excluding all confidential information) shall be forwarded to the parent Senate committees, ASCP and APPR. The ASCP Committee transmits the Report to Faculty Councils and Senate for information. The Executive Summary (provided for in Section 7.9.3 above) of the outcomes of the review, and the associated Implementation Plan (Section 7.9.3) shall be posted on the Website of the Vice President Academic and Provost and copies provided to both the Quality Council and the Board of Governors through the Board Academic Resources Committee. The Website will be publicly accessible and will constitute the extent of public access. Information provided to the program for the self-study and the self-study report as well as the Report of the Review Committee will be available only to the program, Dean/Principal and relevant committees involved in the cyclical review including the Joint Sub-Committee on Quality Assurance.

The Office of the Vice Provost Academic shall keep an administrative record to track the subsequent 18-month follow-up provided in a written report from the Dean(s)/Principal and/or a subsequent meeting with the Joint Sub-Committee depending on whether or not quality concerns were raised.

8. QUALITY COUNCIL REVIEW AND AUDIT PROCESS

8.1 Ongoing approval of changes to the YUQAP
Further revisions to the York University Policy on the Approval and Cyclical Review of Programs and other Curriculum and/or the York University Quality Assurance Procedures (YUQAP) are subject to approval by the Quality Council.

8.2 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 YUQAP 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 in the Quality Assurance Framework. 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.

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