

# York University

## York University Quality Assurance Procedures (YUQAP)

AUGUST 2023

An electronic version of the York University Quality Assurance Procedures, along with various documentation that support the quality assurance process at York University, can be accessed through the YUQAP website located at <https://yuqap.info.yorku.ca/>

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# 1. QUALITY ASSURANCE CONTEXT

## 1.1 Introduction

Context and History: Quality assurance of university academic programs has been adopted around the world and is widely recognized as a vital component of every reputable educational system. Quality assurance processes contribute significantly to an education system that is open, accountable, and transparent. In 2010, the Ontario Universities Council on Quality Assurance, or the Quality Council, was established by the Council of Ontario Universities as an arm's length body tasked with overseeing implementation of the province's new Quality Assurance Framework (QAF). The QAF supports a vision of student-centred education based on clearly articulated program learning outcomes that are aligned with provincial [Degree Level Expectations](#) (DLEs). Ontario's publicly assisted universities contributed to these developments and have committed to ongoing participation in the work of the Quality Council. They also agreed to adopting the regulations, procedures and criteria set out in the QAF, as adapted to their own contexts through their institutional quality assurance procedures. Quality assurance in Ontario is therefore a shared responsibility between universities and the Quality Council.

Academic standards and ongoing program improvements are, as set out in the QAF, the responsibility of universities, which also determine priorities for funding, space and faculty allocation. York University shares this commitment and supports quality assurance with its emphasis on the continuous improvement of our programs by developing resources and participating in institutional and provincial dialogue.

At York, responsibility for quality assurance of academic programs is shared between academic collegial governance and academic administration. The University [Policy on the Approval and Cyclical Review of Programs](#) embeds quality assurance in our collegial governance and describes its objectives and commitments as follows: "The application of this policy and adherence to its associated procedures affirms York's commitment to academic excellence and to quality assurance (including degree level expectations) through Senate and its committees, Faculty Councils and Faculties, units, and the University as a whole." It was approved by Senate in October 2010 and revised in May 2020. The [Joint Sub-Committee on Quality Assurance](#) provides oversight for the effective implementation of the policy at York.

The Provost and Vice President Academic is the chief academic officer at York University and is responsible for the implementation of the York University Quality Assurance Procedures (YUQAP), which outline the protocols for the assessment and approval of new programs, modification and cyclical review of existing programs, and closure of programs. The Vice-Provost Academic oversees the administration, liaison, and reporting associated with the YUQAP, the initial version of which was first ratified by the Quality Council in March 2011, with subsequent versions ratified in August 2013 and August 2020. The YUQAP and related

documents are housed on the university's website dedicated to quality assurance:  
<https://yuqap.info.yorku.ca/>.

Moving Forward: Quality assurance is a dynamic process in Ontario and at the university. Recommendations resulting from a 2018 External Review Panel resulted in a revised 2021 Quality Assurance Framework that demonstrates a clear commitment to foster a culture of and investment in continuous improvement. Subsequent to the adoption of the updated QAF, universities revised their own institutional procedures. York's YUQAP was re-ratified in DATE.

The revised QAF articulates [a set of 15 principles](#) that guide and inform every aspect of quality assurance, including the procedures (or protocols) outlined in this document. The principles express the importance of the student experience, institutional diversity and distinctiveness, international confidence in Ontario university credentials, and a balanced perspective between the value of innovation and the need for accountability. The first principle is worth noting in full:

*Principle 1: The best interest of students is at the core of quality assurance activities. Quality assurance is ultimately about the centrality of the student experience in Ontario. It is about student achievement in programs that lead to a degree or diploma; about ensuring the value of the university degree in Ontario and of ensuring that our highly qualified graduates continue to be strong and innovative contributors to the well-being of Ontario's economy and society.*

This principle speaks to many of the key themes in the university's planning documents, which will continue to provide important direction for program improvement and enhancement in the coming years. York University's vision, which is set out in [Building a Better Future: York University Academic Plan 2020-2025](#), is to provide a broad sociodemographic of students with access to a high-quality education at a research-intensive university that is committed to enhancing the well-being of the communities we serve. Building a Better Future expresses our ongoing commitment to our foundational strengths and to our emerging areas of focus with a set of clear priorities for action and a planning ecosystem that connects our academic plans and initiatives to each other. Our academic planning is supported by an integrated resource planning process that ensures accountability.

The first priority in the university's academic plan, [21<sup>st</sup> Century Learning: Diversifying Whom, What and How We Teach](#), resonates particularly well with the first principle of the QAF noted above given the shared focus on the experience of the student. Many outcomes related to this priority rely heavily on institutional support and investment, but none can be achieved without the concerted effort of academic colleagues as they participate in program reviews, renewal, and development. Three activities that programs are well-poised to undertake serve as examples that align with the QAF's first principle:

- Continually reinvent our programs to address emerging issues and labour market needs that call for new pedagogical approaches and cross-disciplinary thinking

- Pursue inclusive excellence by decolonizing curriculum and ensuring our graduates are known for their global mindset, ethical judgment, and superior ability to integrate diverse ideas and worldviews
- Build 21<sup>st</sup> century skills into our programs, including digital fluencies, information literacies, critical thinking, and the ability to ask good questions, marshal evidence, and communicate effectively across varied media.

Our commitment to continuous improvement is also demonstrated by our ongoing attention to the development of supports and resources for quality assurance activities. While the first decade of quality assurance work at York focused on ensuring that all programs articulated program-level outcomes in alignment with [Degree Level Expectations](#) (DLEs) and mapped their outcomes to courses and other learning opportunities, the focus over the next decade will be on supporting the refinement of program-level outcomes into concise and meaningful sets that speak to programs’ distinctiveness and more usefully support discussions about quality. We have also developed and will continue to enhance the data reports that align with evaluation criteria for program reviews, resources for the assessment of the need and demand for new and revised programs, and approaches to learning about our students and their level of satisfaction with our existing programs. Moreover, additional resources will support the development of program-level experiential and work-integrated learning as well as other innovations in teaching and learning.

This introduction to York University’s Quality Assurance Procedures documents the evolution of university academic program quality assurance in the province of Ontario and at our own institution. It will be updated at regular intervals to reflect our academic planning cycle and other external factors that may have an impact on our quality assurance activities and commitments. Updates may but will not necessarily represent revisions to the YUQAP.

Unless otherwise directed by the Quality Council, any change made to the QAF will be reflected in the YUQAP as appropriate. Such changes will be considered minor and will not require renewed ratification. A report on minor revisions to the YUQAP will be submitted to the Quality Council annually.

## **MILESTONE SUMMARY**

Below is a list of key dates that point to the iterative nature and context of the YUQAP:

- 2010: OCAV establishes the Ontario Universities Council on Quality Assurance (the Quality Council) and approves the Quality Assurance Framework (QAF)
- October 2010: York University Senate approves the York University Quality Assurance Policy and the first version of the YUQAP
- 2011: Revised version of YUQAP ratified by the Quality Council
- 2012: Revised version of YUQAP ratified by the Quality Council
- 2013: Revised version of YUQAP ratified by the Quality Council



- 2015-2016: Quality Council conducts first cyclical audit of quality assurance practices at York
- 2020: Revised version of YUQAP ratified by the Quality Council
- February 2021: Revised QAF ratified, and universities asked to revise IQAPs to align with the changes
- September 2021: York's Joint Sub-Committee on Quality Assurance approved a codicil to the YUQAP to serve until the revised YUQAP is ratified.

## 1.2 Scope of Application

York University's responsibility for quality assurance extends to new and continuing undergraduate and graduate degree and diploma programs, undergraduate certificates, and also to programs offered in partnership, collaboration, or similar arrangements with other postsecondary institutions, including Colleges of Applied Arts and Technology (CAATS), universities, or institutes.

## 1.3 York University Quality Assurance Procedures

The York University Quality Assurance Procedures (YUQAP) reflect two main principles: (1) the pursuit of academic quality is the University's highest academic objective; and (2) quality assurance is a responsibility shared by academic units, Faculty Councils, and Senate. Additional principles reflected in the YUQAP can be found in Part One of the QAF. York University's commitment to academic quality is also embedded within university planning documents.

The articulation of program learning outcomes is central to York University's approach to ensuring that its academic programs are of high quality compared to international standards. A priority embedded in the YUQAP is to ensure that the program learning outcomes have been articulated and are available to students in the case of all degree programs. Reviews are premised on the expectation that every program can be improved and that regular evaluation directed towards improvement is a major responsibility of the programs and their related departments, schools, and Faculties.

The YUQAP covers all academic programs whether or not they are eligible for government funding and regardless of mode of delivery or location.

YUQAP comprises four distinct components based on the QAF as set out below.

The 'Definitions' section in Appendix 1 of the QAF contains definitions of some specialized vocabulary used throughout this document. In addition, the Guide to the Quality Assurance Framework contains links to best practices and guidance on the protocols below. Links to the QAF and the Guide are posted on the YUQAP website.

### **1.3.1 THE PROTOCOL FOR NEW DEGREE PROGRAM APPROVALS**

The Protocol for New Degree Program Approvals applies to new undergraduate degrees, undergraduate honours specializations and majors (for which a similar specialization is not already approved), graduate degrees, and combined degrees (when a new parent program at the University is being proposed in conjunction with the combined degree). New degree programs are externally reviewed as part of the process leading to institutional approval. Once approved by the institutional governance process, new programs are reviewed by the Appraisal Committee of the Quality Council. The Quality Council has the authority to approve or decline new program proposals. (See Section 3.)

### **1.3.2 THE PROTOCOL FOR NEW PROGRAMS WITH EXPEDITED APPROVALS**

The Protocol for New Programs with Expedited Approvals applies to new graduate diplomas. These programs do not require external appraisal. Once approved by the institutional governance process, these programs are reviewed by the Appraisal Committee of the Quality Council. The Quality Council has the authority to approve or decline these proposals. (See Section 4.)

### **1.3.3 THE PROTOCOL FOR MAJOR MODIFICATIONS (PROGRAM RENEWAL AND SIGNIFICANT CHANGE)**

The Protocol for Major Modifications is used to assure program quality where significant changes have been made to existing and previously approved programs, and for the establishment of a new minor program. This protocol also applies to new undergraduate certificates. Program closures follow the same approval process as other major modifications. Major modifications and closures are approved by the institutional governance process and are reported annually to the Quality Council. (See Section 5.)

### **1.3.4 THE PROTOCOL FOR CYCLICAL PROGRAM REVIEWS**

The Protocol for Cyclical Program Reviews assesses the academic standards of existing undergraduate and graduate programs, including graduate diploma and undergraduate certificate programs, and assures their ongoing improvement. To the extent possible, related undergraduate and graduate program reviews will be conducted concurrently. (See Section 6.)

## **1.4 YUQAP Website**

In addition to the protocols described in the YUQAP, the York University Quality Assurance website houses templates, forms, and toolkits that:

- a) Outline requirements for the Proposal for new programs, major modifications, program closures, and Cyclical Program Reviews;

- b) Provide guidance on the Cyclical Program Review process, including the articulation of program learning outcomes, the format of the self-study, and the data provided for the self-study;
- c) Outline the processes for the selection of reviewers and scheduling of site visits for both new programs and Cyclical Program Reviews;
- d) Set out the planned cycle called the Rota for the conduct of Undergraduate and Graduate Program Reviews;
- e) Identify contact information for support and assistance.

The YUQAP website can be accessed here: <https://yuqap.info.yorku.ca/>

## 2. UNIVERSITY AUTHORITIES

### 2.1 Quality Council Liaison and Reporting

The Provost and Vice-President Academic is the chief academic officer at York University and is responsible for the oversight of the York University Quality Assurance Procedures (YUQAP). Within the Office of the Provost and Vice-President Academic, the Vice-Provost Academic oversees the administration, liaison, and reporting associated with the YUQAP.

### 2.2 Institutional Quality Assurance Authority

#### 2.2.1 SENATE AUTHORITY AND RELATIONSHIP TO FACULTY COUNCILS

All proposals for the establishment of new graduate and undergraduate degree programs, diplomas, and certificates and the revision or closure of graduate and undergraduate degree programs, diplomas, and certificates require the approval of Senate. Normally, only proposals that have been approved by the applicable Faculty Council(s) shall be considered by Senate and its committees (Senate Committee on Academic Standards, Curriculum and Pedagogy (ASCP), Senate Academic Policy, Planning, and Research Committee (APPRC)).

#### 2.2.2 OVERSIGHT OF THE YORK UNIVERSITY QUALITY ASSURANCE POLICY

Senate oversight of the [Policy on the Approval and Cyclical Review of Programs and Other Curriculum](#) (York University Quality Assurance Policy) is vested with the Joint Sub-Committee on Quality Assurance (Joint Sub-Committee) established by Senate's Academic Policy, Planning and Research Committee and the Academic Standards, Curriculum and Pedagogy Committee.

#### 2.2.3 ROLE OF THE JOINT SUB-COMMITTEE

On behalf of Senate, the Joint Sub-Committee will ensure compliance with the Quality Council's protocols, respond to audit reports conducted by the Quality Council, and propose

changes as may be needed. The Joint Sub-Committee oversees the cyclical review of programs and approves the Final Assessment Report, including the implementation plan, and follow-up reports.

### **2.2.3(A) COMPOSITION OF THE JOINT SUB-COMMITTEE**

The Joint Sub-Committee is composed of the following members:

- Five elected faculty members
- Vice-Provost Academic
- The Associate Vice-President Graduate and Dean of the Faculty of Graduate Studies

### **2.2.3(B) ELIGIBILITY FOR MEMBERSHIP ON THE JOINT SUB-COMMITTEE**

At least three members shall hold an appointment in the Faculty of Graduate Studies, and four members shall hold the rank of Associate Professor or higher.

Normally, members elected to the Sub-Committee will have prior experience in the design, review, approval and/or administration of curriculum (e.g., served on a Faculty or Senate-level curriculum committee, as an Undergraduate or Graduate Program Director, etc.).

From time to time the composition of the oversight committee may be modified and approved through revision of the quality assurance policy by the Senate of York University. Changes to the composition of the committee will be considered minor and will not require renewed ratification.

## **2.3 Office of the Provost and Vice-President Academic Administration of Processes**

The Office of the Provost and Vice-President Academic is responsible for the administration of quality assurance processes and for the publication of required documents and information and shall maintain a website for that purpose. The Vice-Provost Academic is responsible for the cyclical review process and shall maintain a Rota of program reviews, which shall be submitted annually to the Joint Sub-Committee. The Vice-Provost Academic shall provide support and advice to the Deans or Principals and their proponents and facilitate processes covered by this policy. Graduate programs will receive special attention from the relevant graduate committees and graduate studies offices, as well as from the Dean of Graduate Studies.

The Vice-Provost Academic is the sole contact between the institution and the Quality Council.

## 3. THE PROTOCOL FOR NEW DEGREE PROGRAM APPROVALS

### 3.1 Scope

The Protocol for New Degree Program Approvals applies to new programs where a similar option has not already been approved. New programs include:

- Undergraduate degrees and majors
- Graduate degrees and programs

This protocol covers inter and intra-institutional degree programs.

A new program has substantially different program requirements and substantially different learning outcomes from those of any existing approved programs. A change of name, on its own, 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 Vice-Provost Academic will determine whether a change falls under the protocol for major modifications or new programs.

### 3.2 Initial Institutional Process

The approval process for the introduction of new undergraduate and graduate degree programs is set out below.

#### 3.2.1 EARLY NOTICE OF INTENT

Prior to the development of a proposal, proponents shall submit to the Vice-Provost Academic a Notice of Intent, providing a brief statement about the proposal, a summary of new or reallocated resources, and details about preliminary consultations undertaken and those anticipated.

The purpose of this required step is to allow the Vice-Provost Academic to:

- Provide input and ensure consultation with other Faculties and with the Deans or Principals
- Consult with the Dean of Graduate Studies as needed
- Facilitate consultations among interested parties at the earliest opportunity
- Ensure alignment with academic plans.

A formal letter of support from the relevant Dean or Principal must accompany the Notice of Intent.

The Vice-Provost Academic is authorized to determine whether the proponents will be authorized to proceed with the development of a Proposal. Authorization to proceed with a proposal does not constitute formal support.

The Notice of Intent form is posted on the YUQAP website.

### **3.2.2 PROGRAM PROPOSAL**

Once authorized, the proponents proceed to develop the New Program using the relevant template with oversight from the Office of the Dean or Principal and with support from the Office of the Vice-Provost Academic and other relevant bodies. Following approval by the Faculty curriculum committee, the Faculty's Dean or Principal provides a full statement of support subject to revision pending the review of the proposal. The Office of the Vice-Provost Academic reviews the proposal for compliance with the evaluation criteria (see Section 3.3). The Provost and Vice-President Academic provides a full statement of support that is provisional and subject to revision pending the review of the proposal.

New program proposals for joint and collaborative programs must include details on the governance process for the collaborative academic administration of the program, including the cyclical review process.

### **3.2.3 EXTERNAL REVIEW OF NEW PROGRAM PROPOSALS**

The external review of a new degree or program will normally be conducted following approval of proposals by the relevant sub-committees of Faculty Councils but before consideration by individual Faculty Councils.

Proposals will be provided to the reviewers along with all relevant faculty CVs.

External reviews new programs will normally be conducted on-site, but the Vice-Provost Academic may propose that the review be conducted by virtual site visit or an equivalent method if the external reviewers are satisfied that the off-site option is acceptable. The Vice-Provost Academic will also provide a clear justification for the decision to use these alternatives.

Certain undergraduate and master's programs (e.g., professional master's programs, fully online or other) may be conducted by desk review, if both the Vice-Provost Academic and external reviewers are satisfied that a desk review is acceptable.

### **3.2.4 EXTERNAL REVIEWERS**

The Vice-Provost Academic is responsible for commissioning external reviews and is responsible for contacting, selecting, and vetting potential external reviewers. Programs and Dean(s)/Principal will normally nominate eight reviewers which are to be ranked by the Dean(s)/Principal, the Dean of FGS where relevant, and submitted to the Vice-Provost

Academic. The York University External Reviewer Nomination Form, posted on the YUQAP website, outlines the nomination process.

There will be two external reviewers for new undergraduate and graduate programs.

External reviewers will normally be associate or full professors, or the equivalent, with program management experience, a strong track record as academic scholars, and an appreciation of pedagogy and learning outcomes. The reviewers must also be at arm's-length from the program under development. For the definition of arm's-length, please see section 3.2.5 below.

### **3.2.5 DEFINITION OF ARM'S LENGTH**

The reviewers must be at arm's-length from the program under development. The arm's length requirement means that reviewers should not be chosen who are likely, or perceived to be likely, to be predisposed, positively or negatively, to the program. Arm's length does not mean that the reviewers must never have met or even heard of a single member of the program. Examples are provided below on what does and does not constitute a close connection that would violate the arm's-length requirement.

Examples of what does not violate the arm's length requirement:

- Appeared on a panel at a conference with a member of the program
- Served on a granting council selection panel with a member of the program
- Author of an article in a journal edited by a member of the program, or of a chapter in a book edited by a member of the program
- External examiner of a dissertation by a doctoral student in the program
- Presented a paper at a conference held at the university where the program is located
- Invited a member of the program to present a paper at a conference organized by the reviewer, or to write a chapter in a book edited by the reviewer
- Received a bachelor's degree from the university (especially if in another program)
- Co-author or research collaborator with a member of the program more than seven years ago
- Presented a guest lecture at the university
- Reviewed for publication a manuscript written by a member of the program

Examples of what does violate the arm's length requirement:

- A previous member of the program or department under review (including being a visiting professor)
- Received a graduate degree from the program under review
- A regular co-author and research collaborator with a member of the program, within the past seven years, and especially if that collaboration is ongoing
- Close family/friend relationship with a member of the program

- A regular or repeated external examiner of dissertations by doctoral students in the program
- The doctoral supervisor of one or more members of the program

### **3.2.6 EXTERNAL REVIEW REPORT**

The reviewers will normally provide one report that appraises the standards and quality of the proposed program, addressing the criteria set out in Section 3.3, including the faculty members associated with the program and the material resources and facilities. They will identify any clearly innovative aspects of the proposed program and make recommendations on any essential or otherwise desirable modifications to it. The External Review Report will normally be due within four weeks of the site visit. The External Reviewers template is posted on the YUQAP website.

### **3.2.7 INTERNAL RESPONSES**

Separate responses to the External Review Report and each recommendation are required from both the proposing academic unit and the relevant Dean or Principal. Based on the program's responses and Dean/Principal's support, the program may modify the proposal accordingly, and the program response should include a summary of the changes made to the proposal, if any. The Provost and Vice-President Academic will provide an updated statement confirming support.

### **3.2.8 INSTITUTIONAL APPROVAL**

Based on the Proposal, the External Review Report, and the internal responses to both, the Vice-Provost Academic decides if the program proposal proceeds to Faculty Council, and then to the Senate Committee on Academic Standards, Curriculum and Pedagogy (ASCP) for its approval. ASCP determines whether the proposal satisfies the new program evaluation criteria or needs further modification or additional information.

Upon approval by ASCP, proposals are forwarded to the Senate Academic Policy, Planning and Research Committee (APPRC) for concurrence and then forwarded to Senate by ASCP.

Note: It is possible that a determination will be made at this point, or at any other point, not to proceed with a proposal. Communication to proponents about such a decision will come from the Vice-Provost Academic or, if initiated by proponents, be communicated to the Vice-Provost Academic, and the decision shall be conveyed to Senate committees that have reviewed the proposal.

### **3.2.9 QUALITY COUNCIL SECRETARIAT AND OTHER APPROVALS**

Following Senate's approval of the proposal, the Vice-Provost Academic submits the proposal, together with all required reports and documents, to the Quality Council Secretariat.

The appraisal of new programs by Quality Council is outlined below in section 3.4.



### **3.2.10 ANNOUNCEMENT OF NEW PROGRAMS**

Following Senate's approval of a new program and the submission of the New Program Proposal to the Quality Council, and subject to approval by the Provost and Vice-President Academic, the University may announce its intention to offer the new undergraduate or graduate program in advance of approval by the Quality Council. In such instances, prospective students are advised that offers of admission to a new program may be made only after the University receives confirmation that the Quality Council has approved the program.

The announcement must contain the following statement: 'Prospective students are advised that the program is still subject to formal approval by the Quality Council.'

## **3.3 Evaluation Criteria**

New Program Proposals must address the evaluation criteria set out in section 2.1.2 of the Quality Assurance Framework (QAF), and which are summarized below.

In recognition of York's institutional strategies, the proposal template may be adjusted from time to time to include additional elements (e.g., consideration of DEDI, the Sustainable Development Goals, or other elements of the University's academic plan).

### **3.3.1 PROGRAM OBJECTIVES**

- a) Clarity of the program's objectives.
- b) Appropriateness of degree nomenclature given the program's objectives. Note: Degree types are approved by Senate and require two meetings for approval: an initial notice of motion and then the motion to establish the new degree type.
- c) Consistency of the program's objectives with the institution's mission and academic plans.

### **3.3.2 ADMISSION REQUIREMENTS**

- a) Appropriateness of the program's admission requirements given the program's objectives and program-level learning outcomes.
- 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 languages, or portfolios, along with how the program recognizes prior work or learning experience.

### **3.3.3 PROGRAM REQUIREMENTS FOR UNDERGRADUATE AND GRADUATE PROGRAMS**

- a) Appropriateness of the program's structure and requirements to meet its objectives and program-level learning outcomes. NOTE: The QAF makes a clear distinction between program-level learning outcomes and program objectives. For more information, please see the Quality Council's guidance on [Program Objectives and](#)

[Program-level Learning Outcomes](#) in the Guide to the Quality Assurance Framework (linked to on the YUQAP website).

- b) Appropriateness of the program's structure, requirements, and program-level learning outcomes in meeting York's undergraduate and graduate degree level expectations.
- c) Appropriateness of the proposed mode(s) of delivery to facilitate students' successful completion of the program-level learning outcomes.
- d) Ways in which the curriculum addresses the current state of the discipline or area of study and identification of any unique curriculum or program innovations or creative components.

### **3.3.4 PROGRAM REQUIREMENTS FOR GRADUATE PROGRAMS**

- a) A clear rationale for program length that ensures that the program-level learning outcomes and requirements can be reasonably completed within the proposed time period.
- b) 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.
- c) For research-focused graduate programs, a clear indication of the nature and suitability of the major research requirements for degree completion.

### **3.3.5 EXPERIENTIAL EDUCATION**

Appropriateness and sustainability of experiential components which may include a wide variety of options, including classroom-based activities, community-based learning, or internships and co-op placements.

A description of the provision of supervision of the above should be included.

### **3.3.6 ASSESSMENT OF TEACHING AND LEARNING**

- a) Appropriateness of the proposed methods for the assessment of student achievement of the Degree Level Expectations as articulated in the program learning outcomes.
- b) Appropriateness of the plans to monitor and assess:
  - i. the overall quality of the program
  - ii. whether the program is achieving in practice its proposed objectives
  - iii. Whether students are achieving the program-level learning outcomes
  - iv. How the resulting information will be documented and subsequently used to inform continuous program improvement.

Programs are encouraged to refer to the Guide to the Quality Assurance Framework, a link to which is posted on the YUQAP website.

### **3.3.7 RESOURCES FOR ALL PROGRAMS**

- a) Participation of a sufficient number and quality of faculty members who are competent to teach and/or supervise in and to achieve the goals of the program and foster the appropriate academic environment.
- b) If applicable discussions/explanation of the role and approximate percentage of adjunct and part-time faculty members/limited-term appointments used in the delivery of the program and the associated plans to ensure the sustainability of the program and quality of the student experience.
- c) Adequacy of the administrative unit's planned utilization of existing human, electronic, physical, and financial resources, including implications for the impact on other existing programs at the university as well as any additional institutional resource commitments to support the program in step with its ongoing implementation.
- d) Evidence that there are adequate resources to sustain the quality of scholarship produced by undergraduate students' and graduate students' scholarship and research activities, including library support, information technology support, and laboratory access.
- e) Definition and use of indicators that provide evidence of quality of the faculty members (e.g., qualifications, research, innovation, and scholarly record; appropriateness of collective faculty members' expertise to contribute substantively to the proposed program).
- f) Indication of planned/anticipated class sizes.
- g) Indication of whether the new program is intended to be funded or to be a full-cost recovery program.

### **3.3.8 RESOURCES FOR GRADUATE PROGRAMS ONLY**

- a) Evidence that faculty members 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 of the qualifications and appointment status of faculty members who will provide instruction and supervision.

### **3.3.9 QUALITY AND OTHER INDICATORS**

- a) Evidence and planning for adequate numbers and quality of faculty and staff to achieve the goals of the program.
- b) Programs may identify other quality indicators not included above.

### 3.4 Appraisal Process by the Quality Council

Sections 2.6 and 2.7 of the Quality Assurance Framework (QAF) outline in detail the processes followed by the Appraisal Committee for new program proposals. This includes the initial appraisal, the process for requesting additional information, decisions, and the appeal process.

The Quality Council makes one of the following decisions about new programs:

- a) Approval to commence
- b) Approval to commence, with report
- c) Deferral for up to one year, affording the institution an opportunity to amend and resubmit its Proposal
- d) Refusal of program proposal

The outcomes of an appraisal process will be conveyed to the Office of the Vice-Provost Academic who provides it to the program and Dean or Principal with information on the timeline for the monitoring report and the launch year for the initial CPR.

Where a report is required, the Office of the Vice-Provost Academic will, in consultation with the program and the Dean or Principal, prepare and submit the report to the Quality Council.

Links to the Quality Assurance Framework and its related guide are posted on the YUQAP website.

### 3.5 Subsequent Process

#### 3.5.1 ONTARIO GOVERNMENT FUNDING

Program proposals are submitted, as required, to the relevant Ontario Ministry by the Office of the Vice-Provost Academic. The Notice of Approval by the Quality Council is forwarded to the Ministry.

#### 3.5.2 IMPLEMENTATION WINDOW

After a new program is approved to commence by the Quality Council, the program will begin within thirty-six months of that date of approval; otherwise, the approval will lapse. Programs shall inform the Office of the Vice-Provost Academic of any change in plans for the start of a program.

#### 3.5.3 MONITORING OF NEW PROGRAMS

New programs are to be monitored by the academic unit and the respective Deans or Principals responsible for delivering the program, including an annual assessment of data such as admissions and enrolment trends, retention patterns, and faculty resources. A monitoring report must be produced between the program's launch and its first cyclical program review, normally in the term four years after the first class has been admitted.

This report, written by the program and submitted with a letter from the Dean, commenting on the above, will be submitted to the Vice-Provost Academic and should carefully evaluate the program's success in realizing its objectives, requirements, and outcomes, as originally proposed, and approved, as well as any changes that have occurred in the interim, including in response to any note(s) from the Appraisal Committee (see 3.4 above). The monitoring report should also take into consideration the outcomes of any interim reports and any additional areas to be considered in the first cyclical program review of the new program.

The Vice-Provost Academic will relay significant concerns to the Provost and Vice-President Academic.

Where a new program undertakes a cyclical program review within the first four years to align with other cognate programs, this cyclical program review will satisfy the monitoring requirement. This will only be considered for programs of short duration where sufficient data can be gathered to inform a CPR.

### **3.5.4 FIRST CYCLICAL REVIEW**

The first cyclical review for any new program must be initiated no more than eight years after the date of the program's initial enrolment. The review should speak to any issues raised in the monitoring report (see section 3.5.2) as well as those raised by the Appraisal Committee at the time of the program's approval by Quality Council.

## **4. THE PROTOCOL FOR EXPEDITED APPROVALS**

### **4.1 Scope**

The Protocol for Expedited Approvals applies to:

- New Graduate diplomas (Types 2 and 3)
- New standalone degree programs arising from a long-standing field in a master's or doctoral program that has undergone at least two cyclical program reviews and has at least two graduating cohorts.

The Protocol for Expedited Approvals also applies to major modifications that the University chooses to submit to the Quality Council in instances when a set of changes does not neatly fall within the scope of either a major modification or a new program. The Quality Council has the final authority to decide if a major modification constitutes a new program.

These programs do not require external review and after Faculty Council approval are forwarded by the Committee on Academic Standards, Curriculum and Pedagogy (ASCP) to the Academic Policy, Planning and Research Committee (APPRC) for concurrence and then on to Senate. Once approved by Senate, the new programs are reviewed by the Appraisal Committee

of the Quality Council. The Quality Council has the authority to approve or decline these proposals.

## 4.2 Initial Institutional Process

The Protocol for New Programs for Expedited Approvals and the major steps within the institution and through the Quality Council differ from the Protocol for New Degree Programs in that there is no external review.

### 4.2.1 PROPOSAL

The expedited approvals process requires the submission to the Quality Council of a Proposal for the new program and the rationale for it. The evaluation criteria outlined in Section 3.3 will be applied to the proposal, as included in the template.

In recognition of York's institutional strategies, the proposal template may be adjusted from time to time to include additional elements (for example, consideration of DEDI, the Sustainable Development Goals, or other elements of the University's Academic Plan).

In cases where a submission of a major modification to the Quality Council is made, the submitted proposal will include:

- A description of, and rationale for, the proposed changes; and
- Application of the relevant criteria outlined in section 3.3 to the proposed changes.

## 4.3 Expedited Approvals Process

The Quality Assurance Framework (QAF) outlines the processes followed by the Appraisal Committee for new program proposals in detail. This includes the initial appraisal, the process for requesting additional information, decisions, and the appeal process.

The Appraisal Committee of the Quality Council makes one of the following decisions about new programs:

- a) Approval to commence
- b) Approval to commence, with report
- c) Not approved

The outcomes of the appraisal process will be conveyed to the Office of the

Vice-Provost Academic who provides it to the program and Dean or Principal, along with information on the launch year for the initial CPR where relevant.

## 5. THE PROTOCOL FOR MAJOR MODIFICATIONS (PROGRAM RENEWAL AND SIGNIFICANT CHANGE)

Academic programs exist in a dynamic environment and benefit from ongoing vigilance of their content, learning outcomes, student learning experiences and assessment as well as their capacity to meet demand, adjust for changes and respond to new opportunities. The protocol for major modifications supports the development, evaluation, and approval of ongoing improvements of existing programs.

### 5.1 Initial Institutional Process

Program renewal is an important feature of ongoing and continuous quality assurance.

The approval process for major modifications of undergraduate and graduate degree programs follows the Protocol for Major Modifications set out below.

Prior to the development of a proposal, proponents will submit a Notice of Intent, providing a brief statement about the proposal, a summary of new or reallocated resources, and details about preliminary consultations undertaken.

The purpose of this required step is to allow the Provost and Vice-President Academic to:

- a) Provide input and ensure consultation with other Associate Vice-Presidents and the Vice-Provost Students as needed
- b) Consult with the Dean of Graduate Studies as needed
- c) Facilitate consultations among interested parties at the earliest opportunity
- d) Ensure alignment with academic plans.

A letter of support from the relevant Dean or Principal must accompany the Notice of Intent.

The Vice-Provost Academic will, if appropriate, authorize the proponents to proceed with the development of a Proposal.

The Office of the Vice-Provost Academic will determine whether a change falls under the protocol for major modifications, the protocol for new programs, or another process that may not be governed by the YUQAP.

The Notice of Intent form is available on the YUQAP website.

### 5.2 Scope

Major modifications involve changes to existing programs due to curricular renewal to keep a program current, the restructuring of a program, a merger of existing programs, and proposals for new certificates. Other drivers of program modifications include, but are not limited to,

implementation of outcomes of a cyclical program review, improvements in technology, and significant changes to essential resources that enhance or impair the delivery of an approved program, including faculty or physical resources associated with the program. Examples include changes to faculty resources, staff resources, or physical space.

Major modifications typically include one or more of the following features:

- a) Substantive changes to learning outcomes and/or approved requirements that comprise up to approximately one-third of the program.
- b) Major changes to courses comprising a significant proportion of the program and making an important contribution to meeting program learning outcomes (approximately one-third of courses).
- c) The addition of a new major (undergraduate) where a similar major exists.
- d) Change in program name and/or degree nomenclature when this results in a change in learning outcomes.
- e) Addition or deletion of streams.
- f) Establishment of undergraduate certificates.
- g) The merger of two or more programs.
- h) The creation of combined degrees (existing programs), either undergraduate, graduate, or undergraduate/graduate.
- i) Establishment of a minor program or option.
- j) The addition of new options or significant changes to a program's delivery, including to the program's faculty 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 and/or online/hybrid delivery).
- k) At the master's level, the introduction or deletion of a major research paper or thesis, course-only, co-op placement, internship, or practicum option.
- l) A new specialization at the graduate level.
- m) The introduction or deletion of a field in a graduate program.
- n) The creation of a collaborative specialization at the graduate level.
- o) Significant change to graduate degree requirements, including comprehensive exams and thesis requirements, that result in a significant change to the learning outcomes (see point a above).

Major modifications to existing programs do not require, but may include, submission of a proposal to the Quality Council. The University may request that the Quality Council review a major modification proposal in cases where the change is significant and it may be unclear whether it constitutes a major modification or a new program. Normally that will occur through the expedited approval process. Final authority to decide if a major modification constitutes a new program rests with the Quality Council. The Quality Council will review major modifications annually to ensure that the threshold for a new program was not met.



### 5.2.1 CLOSURE

Closure of a program (majors, certificates, degrees) follows the same governance procedures as a major modification. The Closure template is posted on the YUQAP website.

Where a report is required, the Vice-Provost Academic will, in consultation with the program and Dean or Principal, prepare and submit the report to the Quality Council.

### 5.2.2 OTHER MODIFICATIONS

Other changes that do not necessarily rise to the level of a major modification will also come forward through Faculty Councils to the Senate Committee on Academic Standards, Curriculum and Pedagogy (ASCP). Examples include, but are not limited to, minor changes to degree or admission requirements, the establishment of micro-credentials<sup>1</sup>, the laddering or stacking of credentials or similar options, changes to the delivery mode in courses, substitutions or edits to course lists or requirements, minor changes to program titles, and changes to an existing emphasis, option or minor program.

These modifications are forwarded to ASCP and Senate, if necessary, for either information or approval as appropriate.

## 5.3 Proposal

The Proposal for a major modification includes the following along with any additional requirements that a Faculty may choose to apply. The Major Modifications template is posted on the YUQAP website.

- a) A description of the proposed changes and the rationale, including alignment with University and Faculty academic plans.
- b) An outline of the changes to requirements, including how the proposed requirements will support the achievement of program learning outcomes.
- c) An overview of the consultation undertaken with relevant academic units and an assessment of the impact of the major modifications on other programs (where and as appropriate, the proposal must include statements from the relevant program(s) confirming consultation/support).
- d) An overview of the consultation undertaken with current students and recent graduates. Input from students and recent graduates is required as part of the Major Modification process.
- e) A summary of any resource implications and how they are being addressed. Attention should be paid to whether the proposed changes will be supported by a reallocation of existing resources or if new/additional resources are required. A letter from the relevant Dean or Principal is required if new resources are required.

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<sup>1</sup> Note: Micro-credentials and other short program elements that satisfy degree program requirements must be approved by the appropriate governance process.

- f) When changing the mode of delivery of a program to online for all or a significant portion of a program, the proposal should demonstrate the consideration of the program objectives and program learning outcomes; the adequacy of the technological platform and tools; sufficiency of the support services and training for teaching staff; sufficiency and type of support for students in the new learning environment; and access.
- g) The application of any other relevant criteria as outlined in Section 3.3 to the proposed changes.
- h) A summary of how students currently enrolled in the program will be accommodated.
- i) Other information as required by Senate and/or its committees (for example, a side-by-side comparison of the existing and proposed program requirements as they will appear in the Undergraduate or Graduate Academic Calendar).

## 5.4 Institutional Approval Process

Upon approval by the Faculty Council subcommittee on curriculum, the proposal proceeds to Faculty Council, and, once approved, proceeds to the Senate ASCP for approval. Upon approval by the ASCP, proposals are forwarded to the Senate for approval.

## 5.5 Annual Report to the Quality Council

The Office of the Provost and Vice-President Academic files an Annual Report with 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.

# 6. THE PROTOCOL FOR CYCLICAL PROGRAM REVIEWS

Academic programs exist in a dynamic environment and benefit from periodic review of their content, learning outcomes, learning experiences, resources and operations with a view towards the evaluation of program changes made since the previous review as well as internal or external factors that may have or can be anticipated to have an impact on the program's overall quality. The protocol for cyclical program reviews provides support for conducting an effective review by defining the scope and criteria of evaluation and identifying timelines, resources, and processes to guide reviews. The protocol ensures multiple perspectives, both internal to and external to York, that contribute to robust outcomes and identification of opportunities for ongoing program enhancement and improvement.

## 6.1 Objective and Scope

The Protocol for the Cyclical Program Reviews assesses the academic standards of existing undergraduate and graduate programs, including graduate diplomas, and ensures that

programs maintain the highest academic quality and that the educational experiences students have are engaging and rigorous.

All undergraduate and graduate degree programs, certificates, and diplomas approved by the Senate of York University, including those offered in partnership, collaboration, or other such arrangement with other postsecondary institutions (i.e., colleges, universities, Institutes of Technology and Advanced Learning [ITALs]), are required to initiate a review every eight years.

## 6.2 Administration and Authority for Cyclical Reviews

The Office of the Vice-Provost Academic shall have administrative responsibility for the cyclical review process and for establishing a rota of all academic programs subject under the YUQAP for review. The rota will 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 shall provide advice to proponents and facilitate processes covered by this policy, consulting with the Dean of Graduate Studies as appropriate. Resources, including templates, guidance documents, and links to the QAF are posted on the YUQAP website.

The Vice-Provost Academic may require a program to launch a review in order to align with related programs.

Programs which have been closed or for which admission has been suspended are out of scope for a Cyclical Program Review.

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 Reviewer Report, along with all relevant documentation, and it approves the Final Assessment Report and the Follow-up Report. The reports are transmitted by the Joint Sub-Committee to the Committee of Academic Standards, Curriculum and Pedagogy (ASCP) and to the Committee on Academic Policy Planning and Resources (APPRC). The Vice-Provost Academic transmits the Final Assessment Report to the Dean or Principal and the program. Executive Summaries, which include the Implementation Plan, are posted on the YUQAP website.

Academic programs under review are responsible for the preparation of all components of the Self-Study and the site visit itinerary.

## 6.3 Programs and Review Schedule

The University's full complement of its undergraduate and certificate programs and its graduate and diploma programs are reviewed on a planned cycle (the rota). The rota includes all discrete versions of these programs, such as those offered at different campuses and in

different modes of delivery. 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<sup>2</sup> that administer more than one program must conduct a full review of each, including all elements, as outlined below.

Cyclical reviews are initiated by the Vice-Provost Academic and are announced by posting the rota on the YUQAP website. It is 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.

The full schedule of all program reviews is maintained in the Office of the Vice-Provost Academic.

Programs are reviewed on a regular basis, and the interval between program reviews must not exceed eight years. Cyclical reviews of undergraduate programs will normally be conducted concurrently with reviews of graduate programs. Interdisciplinary and multidisciplinary graduate programs, as well as cognate programs offered at multiple campuses, may involve faculty members from several different academic units. A senior academic (typically a Chairperson or a Director) will act as the lead contact and be responsible for the local coordination, in consultation with relevant Directors of undergraduate and graduate programs.

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 timelines and, where appropriate, requirements of the internally and externally commissioned reviews and supplementing documentation as necessary. Efforts to streamline are made in consultation with the Vice-Provost Academic and will comply with the quality assurance procedures.

The review cycle will include all combined, multi-disciplinary, interdisciplinary, second-entry, multi-sited and inter-institutional programs, and all modes of delivery.

Inter-institutional programs, such as dual credential or joint degree programs offered in partnership with other postsecondary institutions, must establish a review process.

## 6.4 Process Overview

The YUQAP for the conduct of Cyclical Program Reviews has five principal components.

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2 The term “unit” should be taken to include departments, schools, and Faculties (i.e., those bodies responsible for administering academic programs).

- a) Self-Study, including course descriptions and CVs of full-time faculty and CVs or bios of part-time/adjunct faculty.
- b) External evaluation through a Review Report with recommendations on program quality improvement.
- c) Internal perspectives and responses each from the program and from the Dean or Principal to the Review Report recommendations.
- d) A Final Assessment Report that includes an implementation plan for the actions, including timelines.
- e) Follow-up Report on the Implementation Plan.

The Final Assessment Report and the Follow-Up Report are the basis of continuous improvement of programs.

#### **6.4.1 JOINT AND COLLABORATIVE PROGRAMS**

The Cyclical Program Reviews of joint and collaborative programs will include the following:

- Input from partners to the Self-Study and on the selection of external reviewers.
- Feedback from all institutions will be sought on the Review Report.
- A Final Assessment Report, Implementation Plan, and Executive Summary, which will be made available at each institution.
- A Follow-up Report with input from each institution.

New program proposals for joint and collaborative programs must include details on the governance process for the cyclical review of the programs. For programs with more than one Ontario participant, one will be identified as the lead for the CPR. All aspects of joint and collaborative programs are subject to review.

## **6.5 Self-Study**

### **6.5.1 CONTENTS**

The unit and/or program prepares a Self-Study that 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 and improving the program(s) in relation to the quality of student experience and the reputation of the program(s). During preparation for the Self-Study, the program should consider the appropriateness of the program(s) in the context of current trends in the field, relevant academic plans, and critical reflection on the program(s) learning outcomes and assessment. Undertaking the self-study involves faculty members, staff, students, and other stakeholders such as alumni or industry partners. The Self-Study must address and document the evaluation criteria and quality indicators identified in the Quality Assurance Framework Section 5.1.3.1. for each discrete program being reviewed. It must also include a description of how the self-study was written as well as commentary on how the views of the various constituents were obtained and considered.

The Self-Study describes the following:

- a) Any unique curriculum or program innovations or creative components.
- b) Program-related data and measures of performance, including applicable provincial, national, and professional standards (where available).
- c) Reflection on the information and trends revealed by the data provided and/or collected.
- d) Evaluation criteria and quality indicators identified in Section 6.7.
- e) The concerns and recommendations raised in previous reviews and how they have since been addressed, especially those detailed in the Final Assessment Report, Implementation Plan and subsequent monitoring reports from the previous Cyclical Review of the program.
- f) Adequacy of academic services that directly contribute to the academic quality of each program under review.
- g) Areas identified through the self-study process that require improvement or hold promise for enhancement or curricular renewal.

For the first Cyclical Review of a new program, the Self-Study will describe the steps taken to address any issues or items flagged in the monitoring report for follow-up and/or items identified for follow-up by the Quality Council.

Where a unit offers more than one program, the relevant Chairs, Directors, Undergraduate Program Directors, and Graduate Program Directors will collaborate on the omnibus statement.

The Self-Study includes course descriptions and is accompanied by CVs of full-time faculty and CVs or biographies of part-time/adjunct faculty. For graduate programs, the Self-Study includes a list, with rank and membership status in the program, of those who have been appointed or reappointed to the program based on the program's criteria for appointment to the Faculty of Graduate Studies. These criteria will be included as an appendix in the self-study.

### **6.5.2 PROCESS**

The Self-Study is submitted to the Vice-Provost Academic along with the Dean's or Principal's Statement for Reviewers. The Dean or Principal should discuss their Statement for Reviewers with the program prior to submitting it. The Vice-Provost Academic will distribute the documents to the external reviewers.

The documentation for the reviewers will be reviewed and approved by the Office of the Vice-Provost Academic to ensure that it meets the core elements of a self-study and program evaluation criteria. The Vice-Provost Academic will consult with the Dean of Graduate Studies as needed.

## 6.6 Use of Accreditation and Other External Reviews

In consultation with the unit, the Office of the Vice-Provost Academic will determine when the substitution or addition of some documentation or specific accreditation process is appropriate. The Office will keep record of the grounds on which decisions about substitutions and additions were made.

All elements of the evaluation criteria described in section 6.7 must be addressed in the Self-Study and by the External Reviews. How substitutions and additions have been addressed will be described in the Final Assessment Report, and if applicable, as well as in subsequent monitoring reports.

## 6.7 Evaluation Criteria

The minimum evaluation criteria for the cyclical review of programs as defined by the QAF are set out below. Institutional criteria aligned with the University's priorities may be included in the Self-Study template.

There are several widely used quality indicators or proxies for reflecting program quality, and institutions are encouraged by the QAF 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.

This section aligns with the most recent QAF wording and may be updated as the QAF is refined.

### 6.7.1 OBJECTIVES

- a) Consistency of the program with the institution's mission and academic plans.

### 6.7.2 PROGRAM REQUIREMENTS

- a) Clarity and appropriateness of the program's structure and requirements to meet its objectives and the learning outcomes;
- b) Appropriateness of the program's structure, requirements and program-level learning outcomes in meeting the degree level expectations;
- c) Appropriateness and effectiveness of the mode(s) of delivery to facilitate students' successful completion of the program-level learning outcomes; and
- d) Ways in which the curriculum addresses the current state of the discipline or area of study.

### 6.7.3 PROGRAM REQUIREMENTS FOR GRADUATE PROGRAMS ONLY

- a) Clear rationale for program length that ensures that students can complete the program-level learning outcomes and requirements within the time required

- b) 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;
- c) For research-focused graduate programs, clear indication of the nature and suitability of the major research requirements for degree completion.

#### **6.7.4 ADMISSION REQUIREMENTS**

- a) Appropriateness of the program's admission requirements given the program's objectives and program-level learning outcomes
- 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 languages or portfolios, along with how the program recognizes prior work and varied learning experiences.

#### **6.7.5 EXPERIENTIAL EDUCATION**

Appropriateness and sustainability of experiential components which may include a wide variety of options, including classroom-based activities, community-based learning, or internships and co-op placements.

A description of the provision of supervision of the above should be included.

#### **6.7.6 ASSESSMENT OF TEACHING AND LEARNING**

- a) Appropriateness and effectiveness of the methods for assessing student achievement of the program-level learning outcomes and degree level expectations; and
- b) Appropriateness and effectiveness of the plans to monitor and assess:
  - i. The overall quality of the program;
  - ii. Whether the program continues to achieve in practice its objectives;
  - iii. Whether the students are achieving the program level learning outcomes;
  - iv. How the resulting information is documented and subsequently used to inform continuous program improvement and renewal.

#### **6.7.7 RESOURCES FOR ALL PROGRAMS**

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

- a) Participation of a sufficient number of appropriately qualified core faculty members who are competent to teach and/or supervise in and achieve the goals of the program and foster the appropriate academic environment
- b) Information about class sizes, the percentage of classes taught by permanent or non-permanent (contractual) faculty members, the participation and qualifications of part-time or temporary faculty members, and the associated plans to ensure the sustainability of the program and quality of the student experience.
- 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.

- d) 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.

#### **6.7.8 RESOURCES FOR GRADUATE PROGRAMS**

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

#### **6.7.9 QUALITY AND OTHER INDICATORS**

- a) Evidence of the quality of the faculty (e.g., qualifications, funding, honours, awards, research, innovation, and scholarly record; appropriateness of collective faculty expertise to contribute substantively to the program and commitment to student mentoring).
- b) Other evidence, if applicable, that the program and faculty ensure the intellectual quality of the student experience.

#### **6.7.10 STUDENTS**

Trends, challenges, and opportunities for students include GPA for admission, scholarly output, success rates in provincial and national scholarships, competitions, awards, applications and registrations, retention or attrition rates, time-to-completion, final-year academic achievement, graduation rates, and commitment to professional and transferable skills, where applicable. If available, alumni reports on program quality may be included.

Reviewers will be instructed that these items may not be available and applicable to all programs.

#### **6.7.11 QUALITY ENHANCEMENT**

Quality enhancement of programs includes initiatives taken and planned to improve the quality of the program and the associated learning and teaching environment, taking into consideration the recommendations from the previous review.

## 6.8 External Evaluation and Perspective

The Vice-Provost Academic is responsible for contacting, selecting, and vetting potential external reviewers. The senior academic lead (typically a Chair or a Director) is responsible for submitting recommendations for reviewers to the Dean or Principal. Programs and Dean(s)/Principal will normally nominate eight reviewers which are to be ranked by the Dean(s)/Principal and submitted to the Vice-Provost Academic. Consultation should be undertaken with the relevant Director or Chair, Graduate Program Director, and Undergraduate Program Director if the undergraduate and graduate programs are being reviewed together 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 is supported by the different program(s) and/or unit(s).

A list of suggested reviewers will be submitted to the Vice-Provost Academic who will finalize the selection of the reviewers who are qualified by discipline and experience to review the programs. In the case of graduate programs, the selection will be made in consultation with the Dean of Graduate Studies.

### 6.8.1 NUMBER OF REVIEWERS

The evaluation will be conducted by a Review Committee composed of at least two external reviewers. One further reviewer who is from within the university but from outside the discipline (or interdisciplinary group) will participate in the review.

See Section 3.2.4 and 3.2.5 (under New Programs) 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.

### 6.8.2 COMMUNICATION WITH THE REVIEWERS

The Vice-Provost Academic will communicate with the reviewers prior to the commencement of the site visit and/or start of the review process to establish a mutually agreeable date for the site visit and to ensure that the reviewers:

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

- f) Respect the confidentiality required for all aspects of the review process.
- g) Agree to the timelines of the process.

### **6.8.3 DOCUMENTATION 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 YUQAP website for further information):

- University planning documents (University Academic Plan, Faculty Plans, for example).
- Self-Study, including the Dean's or Principal's Statement for Reviewers.
- Faculty CVs.
- Other materials deemed relevant by the program, in consultation with the Vice-Provost Academic.
- The Review Report template.

### **6.8.4 SITE VISIT**

The senior academic lead in the unit is responsible for arranging the itinerary for the site visit prior to commencement of the visit. The reviewers should visit together and attend all relevant campuses.

The Vice-Provost Academic and, in the case of reviews involving a graduate program the Dean of Graduate Studies as well, shall meet with the reviewers at the beginning of their visit. Arrangements must be made for the reviewers to meet with faculty members, students, administrative staff, and senior program administrators, including the relevant Dean or Principal. For professional programs, the views of employers or professional associations should be included in the Self-Study or otherwise made available to the external reviewers.

External reviews will normally be conducted on-site, but the Vice-Provost Academic may propose that the review be conducted by virtual site visit or an equivalent method if the external reviewers are satisfied that the off-site option is acceptable. The Vice-Provost Academic will also provide a clear justification for the decision to use these alternatives in the Final Assessment Report.

Certain undergraduate and master's programs (e.g., professional master's programs, fully online or other) may be conducted by desk review, if both the Vice-Provost Academic and external reviewers are satisfied that a desk review is acceptable.

### **6.8.5 REVIEW REPORT**

The Review Report is normally submitted within two months following the site visit to the Vice-Provost Academic. The Report will address the substance of the self-study for each program being reviewed with a focus on the evaluation criteria set out in Section 6.7. It will describe the program's respective strengths, areas for improvement, and opportunities for enhancement, and commend notably strong and creative attributes and strengths, including significant

innovation or creativity in the content or delivery of the program. The report will also include at least three recommendations for specific steps to be taken that will lead to the improvement or renewal of the program, distinguishing between those the program can itself take and those that require external action.

If the external reviewers' report includes commentary on issues such as faculty complement and/or space requirements, recommendations on these or any other elements that are within the purview of the university's budgetary decision-making processes should be tied directly to issues of program quality or sustainability.

Where circumstances permit, one external review report may be submitted.

The Review Report will be submitted to the Vice-Provost Academic who will, in turn, provide the report to the program lead and Dean or Principal.

The Vice-Provost Academic will have an opportunity to identify any clear factual errors.

In the case of an unsatisfactory or incomplete review report, the Vice-Provost will work with the reviewers to ensure a viable report is provided.

## **6.9 Institutional Response**

### **6.9.1 UNIT RESPONSE**

The senior academic lead is responsible for preparing the formal response to the Review Report and recommendations, in consultation with other members of the unit, including any relevant Directors of undergraduate and/or graduate programs as well as relevant members of a joint or collaborative program. The response shall provide the response to the Review Committee's report(s) and recommendations.

The unit's response should be provided to the Vice-Provost Academic within six weeks of receipt of the Review Report.

### **6.9.2 DEAN'S OR PRINCIPAL'S RESPONSE**

Following receipt and review of the unit's response, the Dean or Principal of the Faculty provides a response to each recommendation and a proposed action, which will include the following:

- a) Identification of those responsible for acting on and monitoring those recommendations.
- b) The resources, financial and otherwise, that will be provided to support the implementation of the recommendations; and identification of what other supports are required from the institutional level.
- c) A proposed timeline for the implementation of those recommendations.

The Dean's or Principal's response should be provided to the Vice-Provost Academic within four weeks of receipt of the Program's response. The Dean or Principal should discuss their response with the Program prior to submitting it to the Vice-Provost Academic.

### **6.9.3 IMPLEMENTATION PLAN AND FINAL ASSESSMENT REPORT**

Key components of the cyclical program review are the final assessment report (FAR), which includes an implementation plan. The FAR draws upon the materials that comprise the full review process and is drafted by the Vice-Provost Academic for consideration by the Joint Sub-Committee. The FAR synthesizes the review process and identifies recommendations to be implemented by the program, with specified resources, timelines and support, as well as recommendations that will not be pursued, with a rationale. This document represents York's shared commitment to the quality of all of its programs and to the processes of ongoing program evaluation, enhancement and improvement.

The Joint Sub-Committee reviews the following documentation along with the FAR:

- a) Self-Study Brief along with the Dean's or Principal's Statement
- b) Review Report
- c) Program's response to the Review Report
- d) Dean's or Principal's response to the Review Report, including proposed actions

The Joint Sub-Committee approves the FAR.

The Final Assessment Report is a summary of the external evaluation and internal responses and assessments which:

- a) Identifies any significant strengths of the program
- b) Identifies opportunities for program improvement and enhancement
- c) Sets out and prioritizes the plan for the external reviewer recommendations that are confirmed for implementation
- d) Includes any additional recommendations that the unit, the Dean(s)/Principal and/or the university may have identified as requiring action as a result of the program's review
- e) May include a confidential section (where personnel issues need to be addressed)
- f) Includes an Executive Summary, exclusive of any such confidential information, and suitable for publication on the YUQAP website. The implementation plan is one component of the Executive Summary.

### **6.9.4 MONITORING REPORTS**

The Follow-up Report, normally due eighteen months after the Final Assessment Report is completed, is provided in a written report on the Implementation Plan from the Dean or Principal. The Implementation Plan may identify more frequent or earlier reports. Upon review

and confirmation by the Joint Sub-Committee, the Follow-up Report is transmitted to the relevant Faculty Council(s) and posted on the YUQAP website.

The Office of the Vice-Provost Academic maintains a record for tracking of the 18-month monitoring reports.

### **6.9.5 REPORTING REQUIREMENTS AND ACCESS**

Following approval by the Joint Subcommittee on Quality Assurance, the Vice-Provost, Academic transmits the Final Assessment Report to the Dean(s)/Principal and program(s) who are responsible for implementing the plan. The Report (excluding all confidential information) shall be forwarded to the parent Senate committees of the Joint Subcommittee on Quality Assurance, ASCP and APPRC. The ASCP and APPRC Committees jointly transmit the FARs to Faculty Councils and Senate for their information.

The Executive Summary of the Final Assessment Report, which includes the Implementation Plan resulting from the review, is provided to the Board Academic Resources Committee.

The Executive Summary is posted on the website of the Vice-Provost Academic. Information provided to the program for the self-study and the Self-Study document, as well as the Report of the Review Committee, will be available only to the program, the Dean or Principal, and the relevant committees involved in the cyclical review.

The Office of the Vice-Provost Academic prepares the annual report listing Final Assessment Reports and Implementations plans, as well as monitoring reports. The report is accompanied by an attestation of the Vice-Provost Academic that all required Cyclical Review Processes have been followed and includes a link to the YUQAP site where the Executive Summaries and monitoring reports are posted.

## **7. THE QUALITY COUNCIL REVIEW AND AUDIT PROCESS**

### **7.1 Ongoing Approval of Changes to the YUQAP**

Substantive revisions to the York University Quality Assurance Procedures (YUQAP) are subject to approval by the Quality Council. Minor changes, as determined by the Joint Sub-Committee, may be made to YUQAP as required.

### **7.2 Audit Objectives**

The objectives of the Cyclical Audit by Quality Council, which occurs at least once every eight years, are to ensure transparency and accountability to post-secondary education's principal stakeholders with regard to the development and review of academic programs. These

principal stakeholders include universities (individually and collectively, as a system), students, government, employers, and the public.

The audit monitors the degree to which a university has

- a) Improved/enhanced its quality assurance processes and practices;
- b) Created an ethos of continuous improvement; and
- c) Developed a culture that supports program-level learning outcomes and student-centered learning.

The audit will review institutional changes in policy, process and practice in response to the recommendations from the previous audit and confirm alignment of practices with those laid out in the YUQAP, with a particular focus on quality assurance practices and processes related to new program approvals and cyclical program reviews.

### 7.3 Audit Process

The University will abide by the requirements of the Audit Protocol as stipulated in section 6.0 of the Quality Assurance Framework.

The university will assess and present its quality assurance processes through an institutional quality assurance self-study which is presented and submitted to the Quality Assurance Secretariat in advance of the desk audit and forms the foundation of the Cyclical Audit.

The audit team will select a sample of programs for audit, normally two examples of new programs and three or four programs that have undergone a cyclical program review. Programs that have undergone the cyclical program review since the University's last audit will be eligible for selection. Programs that have undergone the expedited protocol or the major modifications (program renewal and significant change) will not normally be subject to audit.

The Vice-Provost Academic will be responsible for the preparation of the Institutional Self-Study and other relevant documentation requested for the audit. To prepare the Self-Study, the Vice-Provost will consult with and obtain input from the Provost, Deans, and relevant committees.

Prior to a scheduled on-site visit, the auditors will undertake a desk audit of the university's quality assurance practices. Documentation to be submitted for audit will include all relevant documents related to the programs selected, a record of revisions to the YUQAP, as ratified by Quality Council, and the annual report of any minor revisions of the YUQAP that did not require re-ratification by Quality Council (the report on minor revisions to the YUQAP will also be submitted annually to the Quality Council). During the audit, the University's web-based publications of the Executive Summaries of the Final Assessment Reports and Follow-up Reports will be reviewed.

The Audit Report may include findings in the form of suggestions, recommendations or causes for concern.

Depending on the report, specific steps, as outlined in the Quality Assurance Framework, Section 6, may be required.

The auditors' report on the scope and adequacy of the university's follow-up response (where required) will be published on the University's website.