

Western University's Institutional Quality Assurance Process



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1. Introduction

1.0 Preamble

As part of its ongoing commitment to offering graduate and undergraduate programs of high quality, Western University has adopted the Quality Assurance Framework (QAF) of the Ontario Universities Council on Quality Assurance, referred to in this document as the Quality Council (QC). Established by the Council of Ontario Universities, the QC oversees quality assurance processes for all levels of programs across Ontario's publicly assisted universities. In accordance with the QAF and Western's history of commitment to quality education, the University undertakes to establish, maintain and enhance the academic quality of its programs, in keeping with its academic mission and its institutional degree expectations.

Western has maintained well-established quality assurance processes that have been effective in fostering innovation while maintaining academic excellence. The overarching structure mandated by the QAF has long been operational at Western. Consequently, the ongoing enhancements to Western's Institutional Quality Assurance Process (IQAP) occur regularly to ensure alignment with the [principles and procedures of the Quality Council's QAF](#).

The last decade of engagement in quality assurance work at Western has revealed a wisdom of practice from across the institutional community. Those who have deeply engaged in these processes have advocated for:

- establishing clear mandates, timelines, protocols, and responsibilities for all administrators, faculty members, external reviewers, support staff, students and alumni involved in IQAP procedures, recognizing that a program-driven participatory approach is central to a meaningful and constructive quality assurance process;
- ensuring that the distinctive organizational structures, cultures and external accreditation responsibilities of Faculties, Departments/Schools, and Programs are reflected and respected throughout the program review, in terms of both criteria and processes;
- acknowledging and actioning Western's commitment to Equity, Diversity and Inclusion (EDI), decolonization, Indigenization and the Truth and Reconciliation Calls to Action, and accessibility as part of all programmatic discussions and decisions;
- establishing ongoing, as opposed to episodic, program review and renewal, encouraging continual enhancement of curricula, teaching strategies and program quality in a manner consistent with Western's and each Faculty's strategic plans; and
- adopting an approach to the formulation of program recommendations that results in realistic, concrete, constructive, supportable, data-driven, and demonstrable recommendations, and that encourages the celebration of successes as goals are achieved.

The purpose of this document is to outline the principles, structures, stakeholders, responsibilities, procedures and protocols that support Western University's commitment to quality academic programs, teaching, and learning experiences and that embrace accessibility, equity, diversity, inclusion, decolonization, and Indigenization.

1.1 Stakeholders, Responsibilities and Authorities

Western's Senate holds the ultimate authority with respect to ensuring the quality of all academic programs. Senate Committee on Academic Curriculum and Awards (ACA) and its two subcommittees, the ACA Subcommittee on Program Review – Undergraduate (SUPR-U) and the ACA Subcommittee on Program Review – Graduate (SUPR-G), undertake the program reviews on Senate's behalf and bring all program recommendations to Senate for ultimate consideration and/or approval.

The Provost and Vice-President (Academic), along with the Vice-Provost (Academic Programs) [VP (AP)] and the Vice-Provost (Graduate & Postdoctoral Studies) [VP (SGPS)], have oversight of the undergraduate and graduate quality assurance processes. The Provost, VP (AP) and VP (SGPS) are supported by the Office of Academic Quality and Enhancement (OAQE), which monitors all aspects of the program review process at Western and provides advice regarding compliance to, and effectiveness of, quality assurance processes and supports, and ensures public accountability of the review outcomes. With a focus on institutional governance, the University Secretariat monitors and supports approval processes for program reviews.

Beyond the various administrating groups and units listed above, the principal stakeholders of all quality assurance processes are the faculty members, staff and students within the programs under review, seeking modifications, or being created. Self-studies and program proposals/modifications that are part of the quality assurance processes are faculty-driven; however, they must include relevant student participation in quality assurance activities such that student perspectives inform the development, revision, and review of programs. Other key informants and collaborators in the development of self-studies and program proposals include:

- the Office of Institutional Planning and Budgeting
- the Office of the Registrar
- Western Libraries
- the Centre for Teaching and Learning
- the Office of Equity, Diversity & Inclusion
- the Office of Indigenous Initiatives
- Western alumni
- Employers of Western graduates
- Industry and community leaders

Western's IQAP and any subsequent revisions to this process are subject to the approval of Senate and the QC.

1.2 Contact

The principal institutional contact person for the QC and the Council of Ontario Universities is the Provost and Vice-President (Academic). Internal to Western, the contact for the IQAP is the Office of Academic Quality and Enhancement (OAQE).

1.3 Overview and Scope of the Quality Assurance Framework

All undergraduate and graduate programs offered by Western and its Affiliated University Colleges (Brescia University College, Huron University College, and King's University College) for which a degree is conferred, or a diploma or certificate is awarded, are subject to Western's IQAP. In addition, Western's IQAP includes all programs offered jointly between Western and another institution (such as joint programs offered by Western and Fanshawe College).

The QAF has five components:

- **Protocol for New Program Approvals** applies to new undergraduate and new graduate programs. New programs require Senate approval, followed by approval by the QC's Appraisal Committee.
- **Protocol for Expedited Approvals** applies to the introduction of a new graduate diploma. It can also optionally apply to requests for the QC's consideration of a new field(s) in a graduate program, or of a proposed major modification to an existing undergraduate or graduate program. Following approval by Senate, proposals are submitted to the QC for expedited approval.
- **Protocol for Major Modifications** applies to existing undergraduate and graduate programs. These are approved by Senate and reported to the QC.
- **Protocol for Cyclical Review of Existing Programs** applies to existing undergraduate and graduate programs and graduate diploma programs. When possible and desirable, undergraduate and graduate program reviews can be conducted concurrently and may be scheduled to coincide with external accreditation reviews.
- **Protocol for the Audit Process** applies to an audit of Western's quality assurance processes. The QC has the authority to approve or not approve the auditors' report. The outcome of an audit cannot reverse the approval of any program.

As per the QAF, all of Western's new for-credit programs approved through the IQAP are forwarded to the QC for final approval. Modifications to existing programs as well as Cyclical Program Reviews are subject only to institutional approval in conformity with the requirements of the IQAP. All modifications and the outcomes of Cyclical Program Reviews are annually reported to the QC.

Table 1 presents key distinctions between the involvement of reviewers and levels of approval for protocols 1 through 4 introduced above. The specifics of each protocol are outlined in the subsequent sections of this document.

Table 1. Western’s Institutional Quality Assurance Process (IQAP) Levels of Approval

Program / Review		Internal Reviewers	External Reviewers	SUPR-U	SUPR-G	ACA	Senate	Quality Council
New Program Approval (New Graduate Program; New Undergraduate Degree Program or Disciplinary Program)	Graduate	2	2	-	for recommendation	for approval	for approval	for approval
	Undergraduate	2	2	for recommendation	-	for approval	for approval	for approval
Expedited Approval (New Diploma, or new fields for existing programs if requested; Proposed major modification upon request)	Graduate		-	-	for recommendation	for approval	for approval	for approval
	Undergraduate (Proposed major modification upon request, but not necessary)	2	-	for recommendation		for approval	for approval	For approval
Major Modification Change in Program Requirements, Introduction of or Change in Field(s) or Collaborative Specialization(s)	Graduate		-	-	for recommendation	for approval	for approval	report
	Undergraduate (Change in Program Requirements; Introduction of Undergraduate Diploma or Certificate)	-	-	for recommendation	-	for approval	for approval	report
Cyclical Review of Existing Programs (All existing Graduate & Undergraduate Programs)	Graduate	2	2	-	for recommendation	for approval	report	report
	Undergraduate	2	2	for recommendation	-	for approval	report	report

SUPR-U ACA Subcommittee on Program Review – Undergraduate
 SUPR-G ACA Subcommittee on Program Review – Graduate
 ACA Senate Committee on Academic Curriculum and Awards

2. New Program Approvals

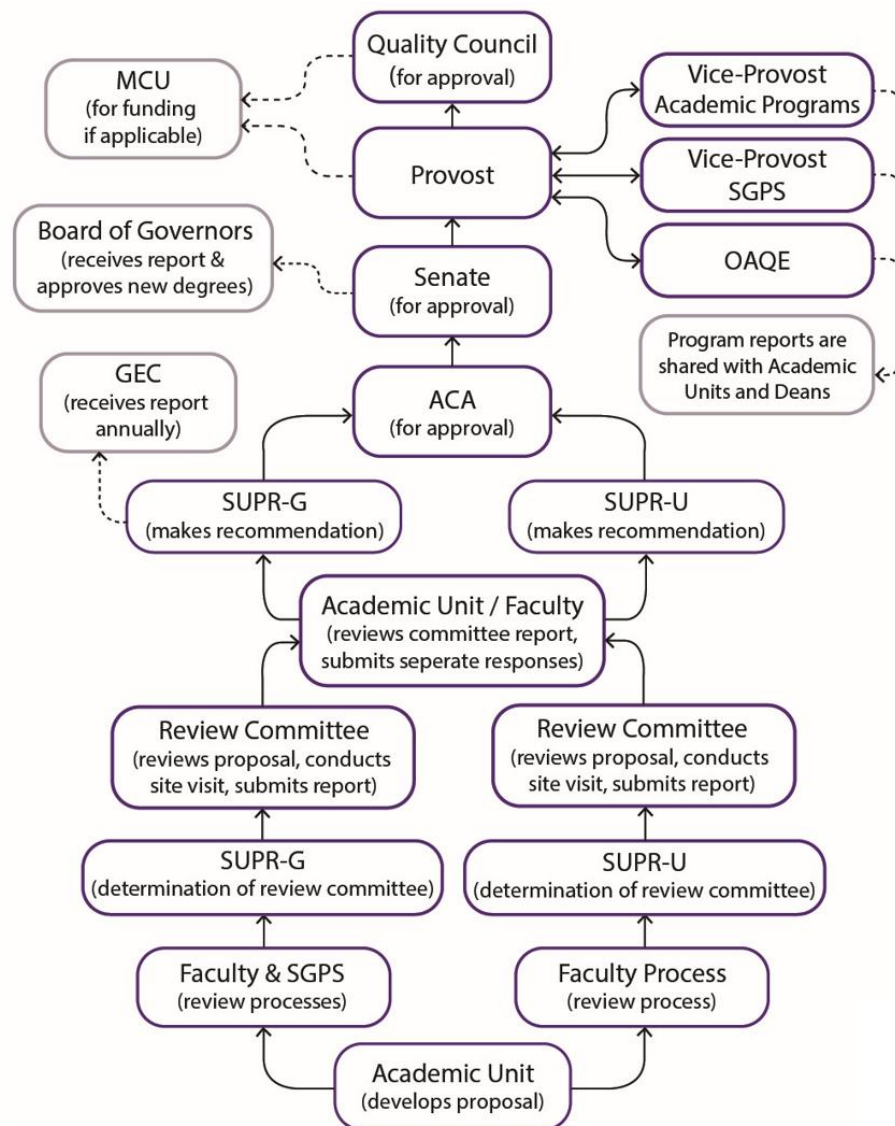
2.0 Preamble

Proposals for all new undergraduate honours specialization, specialization, and major modules within approved degrees, graduate degrees, and joint programs with other institutions, regardless of whether the University will be applying for provincial funding, require review and approval by Western’s Senate and must be approved by the QC.

As part of the development of a new joint program or inter-institutional programs, the IQAPs of all the participating institutions granting the degree should be followed. See the [Quality Council’s guidance](#) for elements to consider in the development and approval of joint programs.

The process is designed to ensure that in developing new programs, academic units ensure that the educational experiences offered to students are engaging and rigorous, and that the approved programs through which those experiences are provided are routinely monitored, and revised as necessary, in an ethos of continuous improvement.

2.1 Institutional Process for New Program Approvals



2.1.1 Summary of Steps

1. The proposal is developed by the academic unit(s).
2. Proposals are subject to Faculty-level internal review and approval processes. For graduate programs, the SGPS conducts a review prior to submission.
3. The proposal for a new program is received by SUPR-U/SUPR-G. The Chair(s) of SUPR-U/SUPR-G appoint(s) internal reviewers and external reviewers to review the proposal and conduct a site visit. The external reviewers submit a written report of the review.
4. The external reviewers' report is shared with the academic unit(s)/program and the Faculty for the provision of separate written responses. The internal reviewer (faculty member), in collaboration with the OAQE, will prepare a Final Assessment Report of the review for SUPR-U/SUPR-G.
5. On the basis of the external reviewers' report, the academic unit(s)/program and the Faculty-level responses to the report, and the Final Assessment Report, SUPR-U/SUPR-G makes a recommendation to ACA.
6. ACA reviews the report of SUPR-U/SUPR-G and, if approved, forwards to Senate.
7. Senate approves the new program.
8. The OAQE submits the proposal to the QC for approval.
9. The proposal is submitted to the Ministry of Colleges and Universities for funding purposes, where applicable.
10. The new program is monitored via the continuous improvement plan outlined in the program proposal and by an Ongoing Improvement Progress Report submitted to the OAQE.
11. The first cyclical review occurs within eight years of the first enrolment into the program.

2.1.2 New Program Proposal Brief

For proposed new undergraduate programs, academic units must prepare a New Program Proposal Brief for review by SUPR-U.

For proposed new graduate programs, academic units must meet with relevant SGPS members to initiate discussion. Following discussion of the proposed program with the VP (SGPS) or designate, the unit must prepare a New Program Proposal Brief for review conducted by SUPR-G.

New Program Proposal Briefs must describe unique curriculum or program innovations, creative components, and/or significant high impact practices, and are required to address the evaluation criteria as set out by the QAF. To facilitate this process, new Program Proposal Briefs must follow templates provided by the OAQE.

2.1.3 Evaluation Criteria

Proposals for new undergraduate or graduate degree programs are evaluated against the following criteria.

2.1.3.1 Program Objectives

- a) Clarity of the program's objectives;
- b) Appropriateness of the degree nomenclature given the program's objectives; and
- c) Consistency of the program's objectives with Western's mission, values, strategic priorities, and academic plans.

2.1.3.2 Program Requirements

- a) Appropriateness of the program's structure and the requirements to meet its objectives and program-level learning outcomes;
- b) Appropriateness of the program's structure, requirements and program learning outcomes in relation to the Western Degree Outcomes or the graduate degree level expectations;
- c) Appropriateness of the proposed mode(s) of delivery (e.g., classroom format, online, blended, community-engaged learning, problem-based, compressed part-time, multi-campus, inter-institutional) 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
- e) Ways in which the program actions Western's commitment to Equity, Diversity, Inclusion (EDI), decolonization and Indigenization.

2.1.3.3 Program Requirements Specific to Graduate Programs

- a) Clear rationale for program length that ensures that students can complete the program-level learning outcomes and requirements within the proposed time (with a maximum of 6 terms for master's programs and 12 terms for doctoral programs);
- 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; and
- c) For research-focused graduate programs, indication of the nature and suitability of the major research requirements for degree completion.

2.1.3.4 Assessment of Teaching and Learning

- a) Appropriateness of the methods for assessing student achievement of the program-level learning outcomes and the Western Degree Outcomes or the graduate degree level expectations; and
- 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 its students are achieving the program-level learning outcomes; and

- iv. how the resulting information will be documented and subsequently used to inform continuous program improvement.

2.1.3.5 Admission Requirements

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

2.1.3.6 Resources

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

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

2.1.3.7 Resources Specific to Graduate Programs

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

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

2.1.3.8 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); and
- b) Any other evidence that the program and faculty will ensure the intellectual quality of the student experience.

2.1.4 External Reviewers

All proposals for new programs will be subject to review by external reviewers. For new undergraduate programs, two external reviewers will be chosen from a list supplied via the academic unit (or proposed program) by the Chair(s) of SUPR-U. In addition to reviewing the program brief, the reviewers receive all relevant faculty CVs and will conduct an on-site review, accompanied by two internal reviewers selected by SUPR-U (normally one member of SUPR-U and one student). A desk review or virtual site visit may be undertaken if both the VP (AP) and external reviewers are satisfied that the off-site option is acceptable, and if a clear justification for the alternative format is provided.

For new graduate programs, two external reviewers will be chosen from a list supplied via the academic unit (or proposed program) by the Chair(s) of SUPR-G. In addition to reviewing the program brief, the reviewers receive all relevant faculty CVs and will conduct an on-site review, accompanied by two internal reviewers selected by SUPR-G (normally one member of SUPR-G and one graduate student). While an on-site visit for a new master's or doctoral program is normally required, certain new master's programs (e.g., professional master's programs) may be conducted by desk review, virtual site visit, or equivalent method if both the VP (SGPS) and external reviewers are satisfied that the off-site option is acceptable. This may be the case for programs that are predominantly taught online and/or that do not make use of specialized on-site facilities.

Reviewers will normally be associate or full professors with suitable disciplinary expertise, qualifications and program administration experience, including an appreciation of pedagogy and learning outcomes, and must be at "arms length" from the program under review. "Arms length" reviewers have no family ties, partnership links, supervisory relationships or other relationships with anyone in the program being reviewed. A conflict of interest would exist in cases where the proposed reviewer has collaborated or published with a member of the program within the past seven years, has an administrative or family link with a member of the program being reviewed, has been a supervisor or supervisee (graduate or postdoctoral) of a member of the program being reviewed within the past seven years, is a former member of the program being reviewed, is a friend of a member of the program being reviewed, or has been a recent (within the past five years) visiting professor in the program being reviewed.

The Chair(s) of SUPR-U/SUPR-G has the responsibility to ensure that the Review Team will:

- a) understand its role and obligations;

- b) identify and commend the proposed program's notably strong and creative attributes;
- c) describe opportunities for improvement and further enhancement;
- d) recommend specific steps to be taken to improve the proposed program, distinguishing between those that the program can itself take and those that require action or support from outside of the academic unit;
- e) recognize the University's autonomy to determine priorities for funding, space, and Faculty allocation; and
- f) respect the confidentiality required for all aspects of the review process.

These expectations will be shared with the Review Team in the form of written instructions and through face-to-face meetings.

2.1.5 External Reviewers' Report

Using a report template provided by the OAQE, the external reviewers will complete a joint report that responds to the evaluation criteria in 2.1.3. In addition, the report will address the substance of the New Proposal Brief, comment on the adequacy of existing physical, human and financial resources, identify any innovative aspects of the proposed program, and recommend any considerations for improvement. While the authors of the report are the external reviewers, internal reviewers may be invited to provide comment, in particular to institution specific information, terms and/or structures. The external reviewers will be instructed to submit the report to the OAQE within two weeks of the on-site visit, where possible.

2.1.6 Administrative Responses

The report of the external reviewers will be shared with the Chair(s) or Director(s) of the proposing academic unit(s) and relevant Dean(s) or designate. Separate responses from the academic unit(s) and Faculty(ies) are required. Exceptionally, one report can be submitted where the Dean (or equivalent) acts as divisional head (e.g., for a Faculty without departments). In addition, the report of the external reviewers will be shared with the VP (AP) or the VP (SGPS), who may also provide a written response. Any subsequent amendments to the New Program Proposal Brief, primarily resulting from the external reviewers' recommendations and/or the internal responses, must be summarized in a separate document.

2.1.7 Institutional Approval

Once the report of the external reviewers and the responses to the report are received, the OAQE will draft a Final Assessment Report with the support of the internal reviewers. The Final Assessment Report provides the institutional synthesis of the external evaluation of the program, recommendations for further enhancement, and strategies for continuous improvement. SUPR-U/SUPR-G will review the proposal, the report of the external reviewers, the academic unit(s) and Faculty-level responses to the report, and the Final Assessment Report. SUPR-U/SUPR-G will subsequently make a recommendation regarding approval to ACA. ACA will review the recommendation from SUPR-U/SUPR-G and, if approved, will provide its

recommendation to Senate. Recommendations to ACA regarding approval generally take two forms:

- a) Approved to commence; or
- b) Approved to commence, with report.

When a program is approved to commence, any reporting condition (generally 1-2 years following program commencement) is typically the result of a provision not yet in place but considered essential for a successful program (e.g., facility, equipment, staff).

2.1.8 Quality Council

Following Senate's approval of the new program, the New Program Proposal Brief, along with the report of the external reviewers and the academic unit(s) and Faculty-level responses, and the Final Assessment Report, will be submitted to the QC from the OAQE. As part of the submission checklist to be included, a brief commentary regarding the qualifications of the two external reviewers will be added, as well as whether the proposed program will be cost-recovery.

The QC's Appraisal Committee will review the submission and may seek further information. The Committee will submit a recommendation to the QC. Following the consideration of the recommendation, the QC will make a decision, which will typically be one of the following:

- a) Approved to commence;
- b) Approved to commence, with report;
- c) Deferred for up to one year during which time the University may address identified issues and report back;
- d) Not approved; or
- e) Such other action as the QC considers reasonable and appropriate in the circumstances.

Any reporting conditions will require that the Appraisal Committee reviews the subsequently submitted report(s), conducts consultations as needed, and makes one of the following recommendations to the Council:

- a) Approved to continue without condition;
- b) Approved to continue, but the Council requires additional follow-up and report within a specified period, prior to the initial cyclical review; or
- c) Required to suspend admissions for a minimum of two years. The QC will then specify the conditions to be met in the interim in order for admissions to the program to resume.

2.1.9 Announcement of New Programs

Following approval by the Provost or designate, Western can announce its intention to offer a new undergraduate or graduate program in advance of approval by the QC. The announcement must contain the following statement: “Prospective students are advised that the program is still subject to formal approval.”

2.1.10 Implementation Window

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

2.1.11 Monitoring

To facilitate the continuous improvement of the new program, the monitoring process will include a brief Ongoing Improvement Progress Report. In general, new programs will be reviewed on the same cycle as other programs offered by the academic unit introducing the program. When the next Cyclical Program Review is more than three years after final approval of the new program, a brief Ongoing Improvement Progress Report will be produced by the academic unit(s) between the program’s launch and its first cyclical review and be submitted to the OAQE (specific date to be determined by SUPR-U/SUPR-G). This Report should carefully evaluate program administration, resource allocation and outline the program’s success in realizing its objectives, requirements, enrolment targets and learning outcomes as originally proposed and approved, any changes that have occurred in the interim, and address any notes from the QC’s Appraisal Committee. The Ongoing Improvement Progress Report applies to all new programs and is not to be confused with reports requested as part of program approval decisions (e.g., Approved to commence, with report). The outcomes of the Ongoing Improvement Progress Report must be considered in the first cyclical review of the new program. Should any issues emerge from the monitoring process, the OAQE will report these to SUPR-U or SUPR-G for consideration.

2.1.12 First Cyclical Review

The first cyclical review of the program will be conducted no more than eight years after the date of the program’s initial enrolment and normally in accordance with Western’s program review schedule.

2.1.13 Audit Process

Western will undergo an audit process conducted by the Audit Committee of the QC. At least one of the undergraduate and one of the graduate programs selected for the audit sample will be a new program approved within the period since the previous audit. The audit cannot reverse the approval of a program.

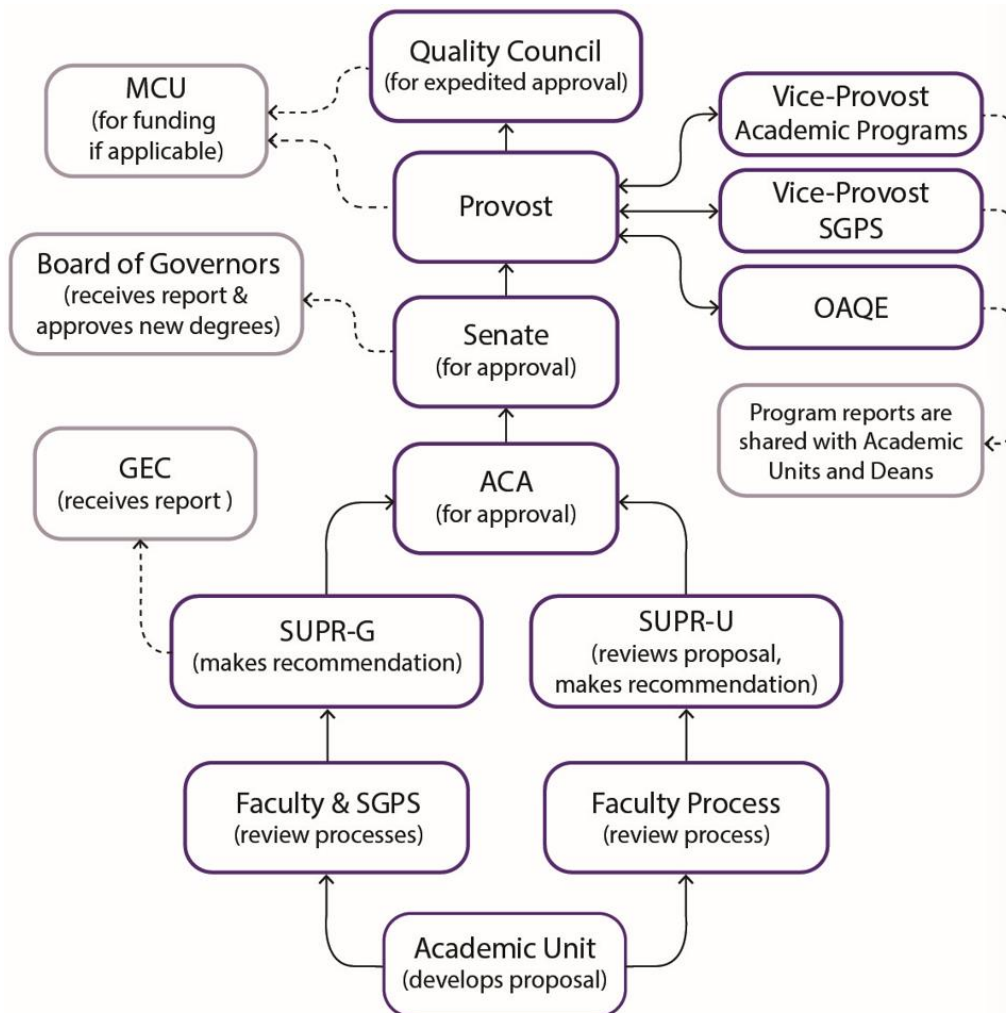
3. Expedited Approvals

3.0 Preamble

The process associated with the Protocol for Expedited Approvals is intended to obtain QC approvals more efficiently for changes that are considered less substantial than New Program Proposals. Expedited Approval processes are less extensive and do not require external reviewers. Expedited Approvals apply only to:

- a) new graduate diploma programs (Types 2 and 3);
- b) new standalone degree programs arising from a long-standing field in a master’s or doctoral program that have undergone at least two Cyclical Program Reviews and have at least two graduating cohorts;
- c) if requested, new fields for existing graduate programs (if seeking an endorsement of the QC); and
- d) if requested, proposed major modifications to an existing program (graduate or undergraduate).

3.1 Institutional Process for Expedited Approvals



3.1.1 Summary of Steps

1. The proposal is developed by the academic unit(s).
2. Proposals are subject to Faculty-level internal approval processes. For graduate programs, the SGPS conducts a review prior to submission.
3. The proposal is received by SUPR-U/SUPR-G. SUPR-U/SUPR-G makes a recommendation to ACA.
4. ACA reviews the proposal of SUPR-U/SUPR-G and, if approved, forwards to Senate.
5. Senate approves the proposal.
6. The OAQE submits the proposal to the QC for approval.
7. The proposal is submitted to the Ministry of Colleges and Universities for funding purposes, where applicable.
8. In the case of a new program, it is monitored via the continuous improvement plan outlined in the proposal and an Ongoing Improvement Progress Report submitted to the OAQE.
9. The first cyclical review occurs within eight years of the first enrolment into the program. If applicable, approved graduate diplomas will be added to the Cyclical Program Review Schedule for review alongside its “parent” master’s or doctoral degree program.

3.1.2 Proposal Brief

As applicable, the proposal brief will describe the new graduate diploma program, new field(s), or the significant change(s) being proposed (including, as appropriate, reference to learning outcomes and the academic unit’s resources). The proposal will provide the rationale for the new graduate diploma program or field and will include, as applicable, the evaluation criteria outlined in Section 2.1.3.

3.2 Expedited Approval Process

Once Senate approval has been obtained, the proposal brief will be submitted by the OAQE to the QC’s Appraisal Committee for consideration. Within 45 days of receipt of a final and complete submission from Western, the Quality Assurance Secretariat will report the decision to the QC for information, and then the University. Outcomes will be one of the following decisions:

- a) Approved to commence;
- b) Approved to commence, with report; or
- c) Not approved.

When a program is approved to commence, any reporting condition (generally 1-2 years following program commencement) is typically the result of a provision not yet in place but considered essential for a successful program (e.g., facility, equipment, staff).

4. Major Modifications to Existing Programs

4.0 Preamble

Continuous improvement is the ultimate goal of the ongoing and dynamic work of academic programs at Western as they create living documents that meet evolving standards and measures of quality in their programs. The quality assurance processes associated with major program modifications arising from program renewal and/or significant changes are designed to ensure that the educational experiences students have are engaging and rigorous, but also that the programs through which the experiences are provided are routinely monitored and, if necessary, revised. Typically, major modifications to a program are made to:

- implement the outcomes of a Cyclical Program Review;
- reflect the ongoing evolution of the discipline;
- accommodate new developments in a particular field;
- facilitate improvements in teaching and learning strategies;
- respond to the changing needs of students, society, and industry; and/or
- respond to improvements in technology.

4.1 Determination

Common programmatic changes that fall under major modifications to existing programs include one or more of the following:

- a) Introduction of a new undergraduate module (honours specialization, specialization, major, and minor) that comprises primarily existing courses and that is offered with existing faculty expertise and resources. However, if the proposed module has requirements and learning outcomes that are substantially different from those of any existing module, it must be reviewed as a New Program;
- b) A change in program requirements that differ significantly from those existing at the time of the previous cyclical review or the introduction of the program, including, for example:
 - the merger of two or more existing programs;
 - the introduction of a combined program option;
 - the introduction or deletion of a thesis requirement;
 - the introduction or deletion of a laboratory requirement;
 - the introduction or deletion of a practicum, work-experience, internship, or portfolio requirement; and
 - creation, deletion or renaming of a field in a graduate program or a collaborative specialization.
- c) A change in program name and/or degree nomenclature, when this results in a change in learning outcomes;
- d) Changes to program content, other than those listed in a) above, that necessitate changes to the learning outcomes, but do not meet the threshold for a new program. For example:

- major changes to courses (or program milestones) comprising a significant proportion of the program (approximately one-third or more of courses).
- changing the mode of delivery of a program to online for all or a significant portion of a program that was previously delivered in-person (or vice versa).

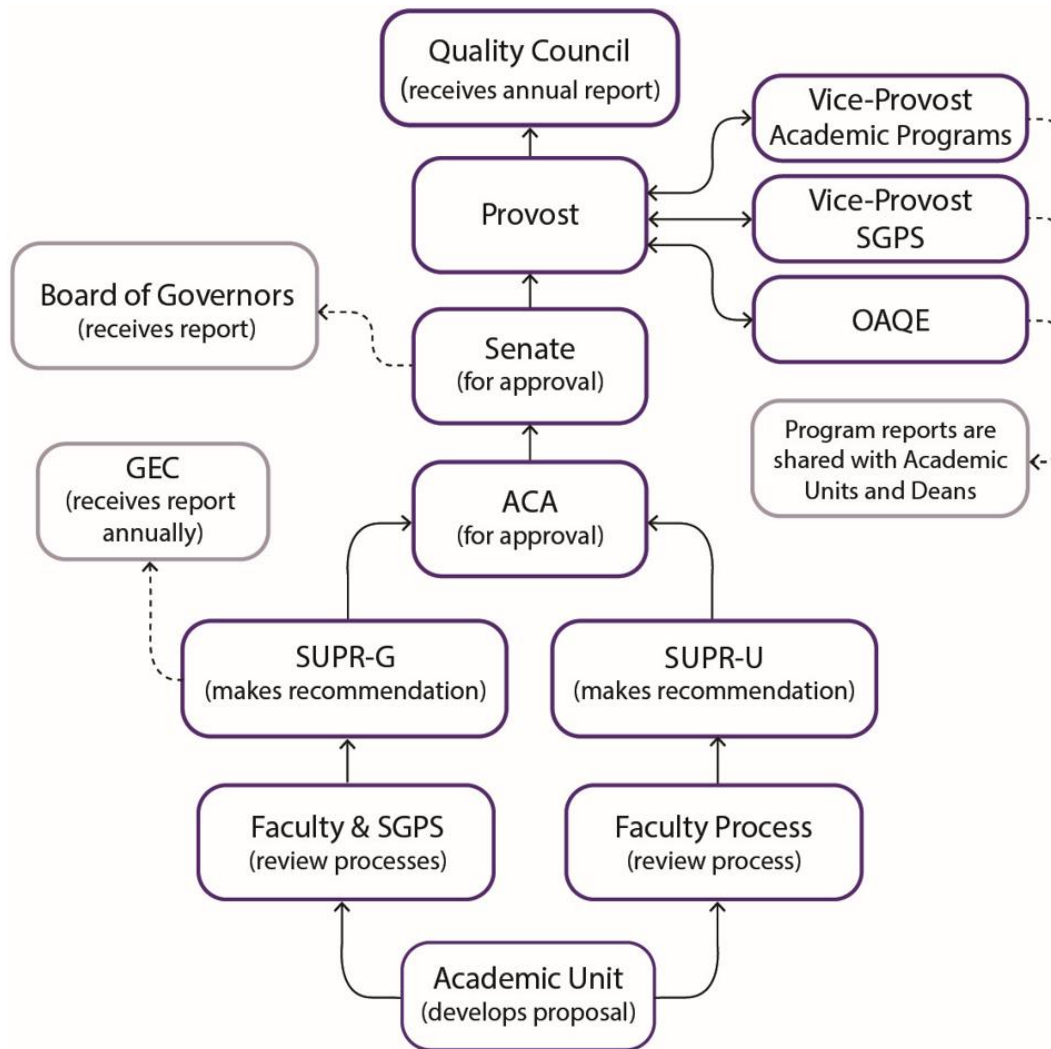
Modifications that are not considered to be "significant changes" and that are considered to be minor consist of changes to courses and curriculum that do not change the nature or essence of a program or the learning outcomes. Western considers minor modifications to include such things as the:

- changes to an existing option or minor module within a program;
- changes to admission requirements;
- changes to subject areas as part of Western's breadth requirements for degrees; and
- creation of a new course (for required graduate courses, this may be treated as a major modification).

Minor modifications are subject to Western's governance processes for internal approval, but do not need to be submitted for consideration through the IQAP process via SUPR-U/SUPR-G as outlined in section 4.2.1. The intra-institutional steps that apply to the quality assurance of program changes related to Undergraduate Certificates, Undergraduate Diplomas and Micro-credentials are articulated in [Western's Senate Academic Policies](#).

The list of modifications above is not intended to be inclusive and it may, at times, be difficult to determine whether a proposed change constitutes a "significant change", or is categorized as a new program, a major modification or a minor modification. In such situations, SUPR-U/SUPR-G will serve as the arbiter in determining whether a proposed change constitutes a major or minor modification. In addition, SUPR-U/SUPR-G may, at its discretion, request that the QC review a major modification proposal through the Expedited Approval process. The QC has the final authority to decide if a major modification constitutes a new program and, therefore, if it must follow the protocol for New Program Approvals.

4.2 Institutional Process for Major Modifications



4.2.1 Summary of Steps

1. The proposed major modification is developed by the academic unit(s).
2. Proposals are subject to Faculty-level internal approval processes. For graduate programs, the SGPS conducts a review prior to submission.
3. The proposal is received by SUPR-U/SUPR-G. SUPR-U/SUPR-G makes a recommendation to ACA.
4. ACA reviews the recommendation of SUPR-U/SUPR-G and makes a recommendation to Senate.
5. Senate approves the proposal.
6. The OAQE will submit an annual report to the QC that includes all Senate approved major modifications made during the academic year.

4.2.2 Proposal Brief

The proposal brief will include the following elements together with the evaluation criteria outlined in Section 2.1.3, as applicable:

- Description of, and rationale for, the major modification and consistency with the unit's academic plan;
- Outline of the major changes to the program description, requirements, and program learning outcomes;
- As appropriate, description of how the proposed modification is in alignment with the relevant program-level learning outcomes;
- Description of the way in which the proposed major modification will improve the student experience;
- Description of any resulting resource implications, including, but not limited to, such areas as staffing, space, libraries and computing facilities, enrolment/ admissions and revenue/costs; and
- Description of any impact that the major modification may have on students or other divisions; description of consultation with those affected.

Input from current students and recent graduates of the program should be considered as part of the development of the proposal (e.g., targeted survey, focus group, consultation with designated student representatives), with the proposal including a statement on the way in which the proposed major modification will improve the student experience.

When changing the mode of delivery of a program to online for all or a significant portion of a program that was previously delivered in-person, consideration of the following criteria is requested as part of the approval process for the proposed major modification:

- Maintenance of and/or changes to the program objectives and program-level learning outcomes;
- Adequacy of the technological platform and tools;
- Sufficiency of support services and training for teaching staff; and
- Sufficiency and type of support for students in the new learning environment.
- Access to the learning environment and to the necessary technological tools.

4.3 Program Closure

An academic program may be closed for a variety of reasons such as low enrolment or a changing disciplinary environment. Whether identified as part of a cyclical review or by the academic unit, program closure is viewed as a specific type of "major modification" that requires its own process.

4.3.1 Program Closure Brief

The brief for program closure will include the following elements, along with any additional requirements that the academic unit(s) choose(s) to apply:

- Rationale for the closure, including alignment with the unit's academic plan;
- Impact on the nature and quality of the division's program of study;

- Impact of closure on other units, including inter-Faculty and inter-institutional agreements/contracts; and
- Impact on and accommodation of any students currently enrolled in the program.

The reporting/approval process will follow the same steps outlined in 4.2.1.

4.4 Annual Report to the Quality Council

All major modifications to existing programs and program closures that were approved through Western's internal review and approval process will be included in an Annual Report to the QC, submitted by the OAQE.

5. Cyclical Program Reviews

5.0 Preamble

The Cyclical Program Review of undergraduate and graduate programs is a process used to ensure that Western programs meet the highest standards of academic rigor and innovation. The objectives of the process are largely to assess the quality of academic programs, to identify ongoing enhancements to programs, and to ensure the continuing relevance of the program to all stakeholders by fostering increased dialogue and collaboration within and among academic and service units regarding student learning and program improvement. The self-study and external assessment provide internal and external perspectives on the institutional goals, program's objectives, program-level learning outcomes, and student experiences.

Western's protocol for Cyclical Program Reviews has five principal components:

- a) The preparation of a self-study report by the academic unit(s) offering the program;
- b) External peer review with a report, and separate internal responses from the academic unit(s) and at the Faculty-level to the report;
- c) Institutional evaluation of all program review documents and reports contributing to recommendations for program quality improvement;
- d) Preparation and adoption of plans to implement the recommendations and to monitor their implementation; and
- e) Follow-up on the principal findings of the review and the implementation of the recommendations.

The principal outcome of the Cyclical Program Review is a Final Assessment Report and associated Implementation Plan, which become the basis of a continuous improvement process. The primary responsibility to execute the Implementation Plan rests with the leadership of the program as per established timelines and any reporting requirements.

5.1 Schedule and Scope of Reviews

Reviews are conducted on a regular basis, frequent enough to ensure that Chairs, Deans, Vice-Provosts and the Provost are kept informed of developments in all academic units, but at sufficiently long intervals that the effects of actions deriving from Implementation Plans can be assessed and that the system is not over-burdened by the logistical demands of the process. The schedule of Cyclical Program Reviews ensures that the period between reviews does not exceed eight years. New Programs must equally be reviewed no more than eight years after the date of the program's first enrolment. The schedule is designed to allow the undergraduate and graduate programs within an academic unit to be reviewed concurrently; however, although the reviews may occur concurrently, they will normally undergo separate review processes with different external reviewers. Where multiple programs are reviewed together, the quality of each academic program and the learning environment of the students in each program must be addressed distinctly.

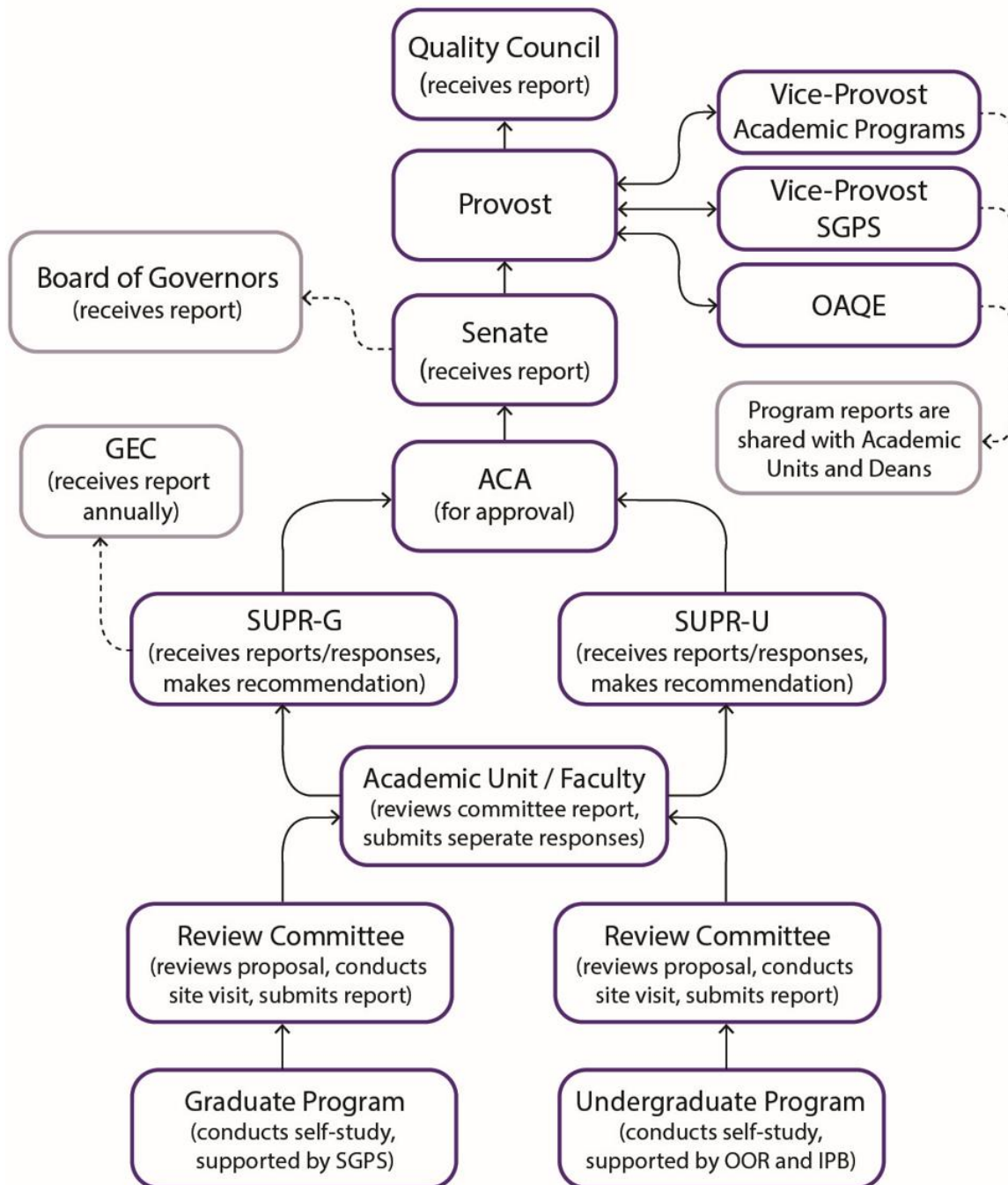
Western's cyclical reviews may not be waived because an externally commissioned review, such as an accreditation, has recently been, or will be conducted. While reviews of academic programs for professional accreditation bodies are intended to ensure that mutually agreed-upon standards of quality are maintained in new and existing programs, such reviews may serve different purposes than those outlined by Western's IQAP. In some cases, however, the cyclical review process may be streamlined if the mandates of both sets of reviews are closely aligned and any gaps can be addressed via the provision of supplementary documentation as necessary.

The scope of the cyclical review includes multiple degree options, including the varied honours specialization, specialization, and major modules within a program. Therefore, the evaluation criteria to be considered in the self-study, as well as the external reviewer recommendations, will apply to the suite of modules related to a program. Any programs, or related modules, that have been closed or for which admission has been suspended are outside the scope of the review process.

The review schedule also includes all joint, interdisciplinary and multi-disciplinary programs, as well as those offered at multiple sites and using all modes of delivery. In addition, the programs offered by Western's affiliated University Colleges are included in the schedule. Joint programs that involve more than one institution will identify a lead institution to prepare the self-study report and any subsequent follow-up or Monitoring Reports, consulting and obtaining relevant input from all participating institutions. In reviewing a joint program and other inter-institutional programs, the IQAPs of the participating universities granting the degree should be considered. See guidance provided by the Quality Council on the [Review of Joint Programs](#).

5.2 Institutional Process for Cyclical Program Reviews

The Provost and Vice-President (Academic) is responsible for Cyclical Program Reviews and for reporting their outcomes to the QC. The Provost initiates the scheduled review, identifying the specific programs that will be reviewed. The review process is administered by the OAQE and supported by the VP (AP) for undergraduate programs and the VP (SGPS) for graduate programs. The University Secretariat monitors and supports all related approval processes.



5.2.1 Summary of Steps

1. The self-study report is developed by the program with support from Institutional Planning & Budgeting and the Office of the Registrar (for undergraduate programs) and from the SGPS (for graduate programs).
2. The report is received by SUPR-U/SUPR-G. The Chair(s) of SUPR-U/SUPR-G appoint(s) internal reviewers and external reviewers to review the self-study report and conduct a site visit. The external reviewers submit a written report of the review.
3. The external reviewers' report is shared with the academic unit/program and the Faculty for the provision of separate written responses. The internal reviewer (faculty member), in collaboration with the OAQE, will prepare a Final Assessment Report of the review for SUPR-U/SUPR-G.
On the basis of the external reviewers' report, the academic unit/program and Faculty-level responses to the report, and the Final Assessment Report, SUPR-U/SUPR-G submits the Final Assessment Report to ACA along with a recommendation regarding approval.
4. ACA reviews the report of SUPR-U/SUPR-G and makes a determination. ACA submits report to Senate.
5. Senate receives report for information.
6. The OAQE includes the outcome of the cyclical review in an annual report to the QC, and ensures that recommendations for improving the program, and a plan for their implementation, are shared with the Dean of the program's Faculty.
7. Implementation of the recommended improvements is monitored via an Ongoing Improvement Progress Report to be submitted to the OAQE approximately 3-4 years following the review.

5.2.2 Self-Study

The self-study will comprise a broad, reflective, critical and forward-looking analysis of the program based on pertinent qualitative and quantitative data. It will reflect the involvement and consultation of faculty members, staff and students of the program being reviewed, and it will include data on University-recognized indicators. In large part, these data will be provided by, or corroborated by, Institutional Planning & Budgeting (IPB) and the Office of the Registrar (OOR) (for undergraduate programs) and the SGPS (for graduate programs). Where multiple programs within an academic unit are reviewed at the same time (e.g., undergraduate and graduate programs, programs at different locations), the preparation of separate self-study reports for each discrete program is required.

The self-study report will address:

- Objectives of the program;
- Program regulations;
- Consistency of the program's learning outcomes with the University's mission and with the Western Degree Outcomes or graduate degree level expectations;
- Assessment methods and instructional strategies used to support student achievement of the program's learning outcomes;
- Engagement with Equity, Diversity, Inclusion (EDI), decolonization and Indigenization;

- Fields of specialization (for graduate programs with fields);
- Unique curricular and/or program innovations, creative components and/or significant high impact practices, where appropriate;
- Concerns and recommendations raised in the previous review of the program and how these have been addressed, especially those detailed in the Final Assessment Report, Implementation Plan, and subsequent monitoring reports from the previous Cyclical Review of the program;
- For the first Cyclical Review of a new program, steps taken to address any issues flagged in the Monitoring Report and/or any items identified for follow-up by the QC.
- Enrolments, graduations, and withdrawals;
- Program-related data and measures of performance, where applicable and available;
- Indicators relevant to the evaluation criteria (as identified in Section 5.2.3);
- Academic services and resources that contribute to the academic quality of the program, including library resources and support;
- Employment or subsequent academic pursuits of graduates;
- How the self-study was written, including how the perspectives of faculty, staff and students were obtained and included;
- Financial support for students (as applicable for graduate programs);
- Publications of current students and recent graduates (for graduate programs);
- The integrity of the data included;
- Areas that the program's faculty, staff and/or students have identified as requiring improvement, or as holding promise for enhancement and/or opportunities for curricular change; and
- A discussion of the results of the self-study that summarizes key points from the analysis, and recommends actions that the program can undertake to maintain and/or enhance quality.

The self-study requires a participatory and transparent approach, involving program faculty, staff, and students, documentation of how their views were obtained, and how they were taken into account in the development of the report. Where appropriate, input of others deemed to be relevant may be included in the self-study brief. For example, input from graduates of the program, professionals, industry representatives, and employers may be included. In the case of professional programs, soliciting and reporting on the views of employers and professional associations is a necessary inclusion.

It is expected that academic units will plan in advance to gather stakeholder data from multiple sources. Support may be procured through the OAQE and/or the Centre for Teaching and Learning.

The VP (AP), or their delegate, will review and approve the self-study report for undergraduate programs undergoing cyclical reviews. The VP (SGPS), or their delegate, will review and approve the self-study report for graduate programs undergoing cyclical review.

5.2.3 Evaluation Criteria

5.2.3.1 Program Objectives

- a) Consistency of the program's objectives with Western's mission, values, strategic priorities, and academic plans.

5.2.3.2 Program Requirements

- a) Appropriateness of the program's structure and the requirements to meet its objectives and the program-level learning outcomes;
- b) Appropriateness of the program's structure, requirements and associated learning outcomes in relation to the Western Degree Outcomes or the graduate degree level expectations;
- c) Appropriateness and effectiveness of the mode(s) of delivery (e.g., classroom format, online, blended, community-engaged learning, problem-based, compressed part-time, multi-campus, inter-institutional) 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
- e) Ways in which the program actions Western's commitment to Equity, Diversity, Inclusion (EDI), decolonization and Indigenization.

5.2.3.3 Program Requirements Specific to Graduate Programs

- a) Clear rationale for program length that ensures that students can complete the program-level learning outcomes and requirements within the time required (with a maximum of 6 terms for master's programs and 12 terms for doctoral programs);
- 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; and
- c) For research-focused graduate programs, clear indication of the nature and suitability of the major research requirements for degree completion.

5.2.3.4 Assessment of Teaching and Learning

- a) Appropriateness and effectiveness of the methods for assessing student achievement of the program-level learning outcomes and the Western Degree Outcomes or the graduate 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 its students are achieving the program-level learning outcomes and the Western Degree Outcomes or graduate degree level expectations; and
 - iv. how the resulting information will be documented and subsequently used to inform continuous program improvement.

5.2.3.5 Admission Requirements

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

5.2.3.6 Resources

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

- a) Participation of a sufficient number of 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) If applicable, discussion/explanation of the role and approximate percentage of adjunct and part-time faculty/limited term appointments used in the delivery of the program and the associated plans to ensure the sustainability of the program and quality of the student experience;
- c) If required, provision of supervision of experiential learning opportunities;
- d) Adequacy of the academic unit's utilization of existing human, physical, technology, and financial resources to support the program; and
- e) Evidence that there are adequate resources to sustain the quality of scholarship and research activities produced by students, including library support, information technology support, and laboratory access.

5.2.3.7 Resources Specific to Graduate Programs

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

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

5.2.3.8 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) Any other evidence that the program and faculty ensure the intellectual quality of the student experience; and
- c) For students: grade-level for admission, scholarly output, success rates in provincial and national scholarships, competitions, awards and commitment to professional and transferable skills, and times-to-completion and retention rates.

5.2.4 The Review Team

The cyclical review process for each program will include internal and external reviewers. The review team will normally include:

- a) one faculty member internal to Western (normally a member of SUPR-U/SUPR-G), but not a member of the academic unit under review;
- b) one undergraduate or graduate student who is not from the program being reviewed; and
- c) two faculty members external to Western with expertise in the discipline.

The faculty member internal to Western and the student comprise the internal reviewers. The Chair(s) of SUPR-U or SUPR-G may invite additional members of the Review Team if circumstances warrant (such as appropriately qualified and experienced individuals selected from industry or the professions).

All members of the review team will be at “arm’s length” from the program under review. Internal reviewers will not be from the program being reviewed. Additional conflicts of interest may include family ties, partnership ties, supervisory relations or other types of relationships with individuals in the program being reviewed. Any such relationships must be declared to determine the potential for conflict of interest. The Chair(s) of SUPR-U/SUPR-G, in consultation with the Provost, will evaluate the potential for conflict of interest.

External reviewers will normally be associate or full professors with suitable disciplinary expertise, qualifications and program administration experience, and must be at “arms length” from the program under review. “Arms length” reviewers have no family ties, partnership links, supervisory relationships or other relationships with anyone in the program being reviewed. A conflict of interest would exist in cases where the proposed reviewer has collaborated or published with a member of the program within the past seven years, has an administrative or family link with a member of the program being reviewed, has been a supervisor or supervisee (graduate or postdoctoral) of a member of the program being reviewed within the past seven years, is a former member of the program being reviewed, is a friend of a member of the program being reviewed, or has been a recent (within the past five years) visiting professor in the program being reviewed. The Chair(s) of SUPR-U/SUPR-G will select the external reviewers from a list supplied by the academic unit. Following the template provided, the list of prospective external reviewers shall normally consist of ten candidates.

The Chair(s) of SUPR-U/SUPR-G will appoint the internal reviewers. The faculty member internal reviewer will be selected by SUPR-U/SUPR-G. Student members of the review teams will be selected from a list of student volunteers provided by varied student councils/societies and/or student members of SUPR-U/SUPR-G. The Chair(s) of SUPR-U /SUPR-G, will select the external reviewers from the list of potential reviewers provided by the program.

All members of the Review Team will receive the program’s self-study report, a volume containing the CVs of all of the full-time faculty members in the program under review, as well

as written instructions about the review process and a template for the resulting report. The Chair(s) of SUPR-U/SUPR-G has the responsibility to ensure that the Review Team will:

- a) understand its role and obligations;
- b) identify and commend the program's notably strong and creative attributes;
- c) describe the program's strengths, areas for improvement, and opportunities for enhancement;
- d) recommend specific steps to be taken to improve the program, distinguishing between those that the program can itself take and those that require action or support from outside of the program;
- e) recognize the University's autonomy to determine priorities for funding, space, and Faculty allocation; and
- f) respect the confidentiality required for all aspects of the review process.

These expectations will be shared with the Review Team in the form of written instructions and through face-to-face meetings.

5.2.5 The Site Visit

For undergraduate programs, the site visit will be arranged by the Office of the VP (AP) in collaboration with the academic unit(s). The internal reviewers will participate with the external reviewers in all aspects of the site visit. External review of undergraduate programs will normally be conducted on-site, but the VP (AP) may propose that the review be conducted by desk review, virtual site visit, or an equivalent method if a clear justification for the alternative format is provided and if the external reviewers are satisfied that the off-site option is acceptable. The visit will include meetings with:

- the Director of Academic Quality and Enhancement at the beginning of the site visit (optional);
- the Vice-Provost (Academic Programs);
- the Vice-Provost (Academic Planning, Policy and Faculty);
- the University Librarian and/or Assistant/Associate University Librarian;
- the Dean and/or Associate Dean of the program undergoing review;
- the Undergraduate Chair of the program undergoing review;
- the Department/School Chair or Director of the program undergoing review;
- faculty members of the program undergoing review (including limited duties faculty);
- undergraduate students of the program undergoing review; and
- support staff of the program undergoing review.

For graduate programs, the site visit will be arranged by the Office of the VP (SGPS) in collaboration with the program. The internal reviewers will participate with the external reviewers in all aspects of the site visit. While an on-site visit for doctoral programs is required, certain master's programs and graduate diplomas (e.g., professional master's programs, fully online programs, etc.) may be conducted by desk review, virtual site visit or an equivalent

method if there is a clear justification for the alternative format and if both the VP (SGPS) and external reviewers are satisfied that the off-site option is acceptable. The visit will include meetings with:

- the Director of Academic Quality and Enhancement at the beginning of the site visit (optional);
- the Vice-Provost (Graduate & Postdoctoral Studies) and/or an Associate Vice-Provost (Graduate & Postdoctoral Studies);
- the Vice-Provost (Academic Planning, Policy and Faculty);
- the University Librarian and/or Assistant/Associate University Librarian;
- the Dean and/or Associate Dean of the program undergoing review;
- the Graduate Chair of the program undergoing review;
- the Department/School/Centre Chair or Director of the program undergoing review;
- faculty members of the program undergoing review (including limited duties faculty);
- graduate students of the program undergoing review; and
- support staff of the program undergoing review.

Site visits normally take place over one or two days but may be longer if appropriate to the size and complexity of the program(s) being reviewed. For both undergraduate and graduate reviews, the review team will be free to seek information from other sources and to suggest other individuals and groups with whom to meet during the site visit.

5.2.6 The Report of the External Reviewers

The external reviewers will normally provide a joint report that appraises the standards and quality of the program by:

- a) addressing the substance of the self-study report, with particular focus on responding to the evaluation criteria detailed therein (Section 5.2.3);
- b) identifying and commending the program's notably strong and creative attributes;
- c) describing the program's respective strengths, areas for improvement, and opportunities for enhancement;
- d) commenting on proposed changes to the program emerging from the review process, if applicable;
- e) making at least three recommendations for specific steps to be taken that will lead to the continuous improvement of the program, distinguishing between those the program can itself take and those that require support external to the program; and
- f) identifying the distinctive attributes of each discrete program documented in the self-study in those cases where the University chooses to simultaneously review more than one program / program level (for example, graduate and undergraduate), program modes, and/or programs offered at different locations.
- g) Tying any recommendations that are within the purview of the University's budgetary decision-making processes (e.g., faculty complement, space requirements) directly to issues of program quality and/or sustainability.

While the authors of the report are the external reviewers, internal reviewers may be invited to provide comment, in particular to institution-specific information, terms and/or structures. The external reviewers will be instructed to submit their joint report to the OAQE within two weeks of the site visit. A template will be provided by the OAQE to ensure that all elements of the program review are addressed. Should the reviewers' report not adequately address all of the above, revisions will be requested of the reviewers by the OAQE.

The report of the external reviewers will be shared with the relevant Dean(s), or designate, and unit/program Chair(s) or Director(s). Separate Faculty-level and program-level responses to the report will be requested. In addition, the report will be shared with the VP (AP) or the VP (SGPS), who may also provide a written response. The academic unit(s) and Faculty-level responses will comment on:

- a) the plans proposed in the self-study report;
- b) the recommendations advanced in the report of the external reviewers; and
- c) the academic unit's response to the report of the external reviewers (in the case of the Faculty-level response).

and will describe:

- d) any changes in organization, policy or governance that would be necessary to meet the recommendations;
- e) the resources, financial and otherwise, that would be provided in supporting the implementation of selected recommendations; and
- f) a proposed timeline for the implementation of any of those recommendations.

5.2.7 Final Assessment Report and Implementation Plan

Once the report of the external reviewers and the responses to the report are received, the OAQE will draft a Final Assessment Report with the support of the internal reviewers. The Final Assessment Report provides the institutional synthesis of the external evaluation of the program and strategies for continuous improvement, and:

- a) identifies significant strengths of the program;
- b) identifies opportunities for further program improvement and enhancement with a view towards continuous improvement;
- c) lists all recommendations of the external reviewers and the associated separate internal responses and assessments from the academic unit(s) and from the Faculty(ies);
- d) explains why any external reviewers' recommendations not selected for further action in the Implementation Plan have not been prioritized;
- e) includes any additional recommendations that the unit, the Dean(s) and/or the University may have identified as requiring action as a result of the program's review;
- f) identifies who will be responsible for approving and implementing the recommendations set out in the Final Assessment Report;
- g) provides a timeline for implementing recommendations;

- h) provides a strategy for monitoring the implementation of recommendations, which will include a brief report from the academic unit(s) to the OAQE midway between the year of the last and next cyclical reviews;
- i) may include a confidential section (for example, where personnel issues need to be addressed); and
- j) includes an Executive Summary without reference to any confidential information.

The Final Assessment Report, excluding any confidential information, will be published on Western's IQAP website. This report will include an Implementation Plan that will:

- a) set out and prioritize those recommendations that are selected for implementation;
- b) identify the group or individual responsible for providing resources needed to address recommendations from the external reviewers or action items identified by the University;
- c) identify who will be responsible for acting on those recommendations; and
- d) provide specific timelines for acting on and monitoring the implementation of those recommendations.

5.2.8 Report to ACA and Senate

SUPR-U/SUPR-G will review the Final Assessment Report along with the report of the external reviewers and the responses to the report. SUPR-U/SUPR-G may consult with the VP (AP), the VP (SGPS), or the Provost in its evaluation of a program's review. SUPR-U/SUPR-G will forward its final recommendation to ACA. Recommendations to ACA regarding the review of a program generally take four forms:

- a) Good quality
- b) Good quality with report
- c) Conditionally approved
- d) Not approved

ACA will review the Final Assessment Report from SUPR-U/SUPR-G. ACA may seek clarification or additional information from SUPR-U/SUPR-G prior to acceptance of the report. The Final Assessment Report, exclusive of any confidential information, will be provided to the program and to the Dean(s) responsible for the program. ACA will submit the report to Senate for information.

Following Senate's receipt of the Final Assessment Report, the University will post a copy (including the Implementation Plan of the review) on Western's IQAP webpage. These documents are the academic unit's to "own" and act on, as appropriate. It is strongly recommended that academic units post a copy of the Final Assessment Report on the program's website as well. Implementation of the recommendations resulting from the review will be monitored via an Ongoing Improvement Progress Report to be submitted to the OAQE approximately 3-4 years following the review. As received, Progress Reports will equally be posted on Western's IQAP webpage.

Normally, documentation as part of the review process will not be made public. This includes:

- information made available for the self-study;
- the self-study report;
- the report of the external reviewers; and
- the responses to the report of the external reviewers.

In particular, it is expected that the report from the Review Committee will be afforded an appropriate level of confidentiality.

5.2.9 Report to the Quality Council

Western will provide an annual report to the QC, which lists the past year's completed Final Assessment Reports (including Implementation Plans) and monitoring reports and provides an attestation by the Provost (or delegate) that all IQAP-required Cyclical Program Review processes have been followed. The report will also include a link to the university's web posting of the completed Final Assessment Reports (including Implementation Plans), as well as any monitoring reports that have also been completed over the prior year. The report will occasionally be reviewed for compliance by the QC and if issues are found, the QC may decide to initiate an audit.

5.3 Monitoring

To facilitate the continuous improvement of academic programs between review cycles, in connection with the Final Assessment Report and Implementation Plan, a monitoring process will include an Ongoing Improvement Progress Report. At a time designated by SUPR-U/SUPR-G (approximately 3-4 years following each cyclical review), an Ongoing Improvement Progress Report shall be prepared by the academic unit(s) to follow up on the implementation of recommended improvements approved during the last cyclical review and be submitted to the OAQE. The Ongoing Improvement Progress Report applies to all academic programs and is not to be confused with specific reports requested as part of program review decisions (e.g., Good Quality with report). Should any issues emerge from the monitoring process, the OAQE will report these to SUPR-U or SUPR-G for consideration.

5.4 Accreditation Reviews

Cyclical Program Reviews may be scheduled to coincide with accreditation reviews. The normal period between reviews may be shortened to allow a program's cyclical review to coincide with an accreditation review; however, synchronization of the cyclical review and accreditation review will only be permitted in cases where the maximum period between cyclical reviews does not exceed eight years.

Although Cyclical Program Reviews may be scheduled to coincide with accreditation reviews, accreditation reviews will not take the place of cyclical reviews. In consultation with the OAQE and the relevant Vice-Provost, the combined reviews may allow for the substitution or addition of some documentation or specific processes associated with the accreditation of a program. While some stages of the review process may be substituted or augmented by an accreditation review, the evaluation criteria detailed in section 5.2.3 must be addressed in the self-study and

by the external reviewers. Where a synchronized review takes place, a Record of Substitution or Addition, and the grounds on which decisions were made, will be drafted by the OAQE.

5.5 Western's IQAP Website

Western has established an institutional website that describes and/or links to quality assurance processes, committee structures, and mandates in detail. The website includes instructions for external reviewers and internal reviewers, along with templates for proposal briefs and review briefs. More specifically, the website:

- provides guidance on the conduct of rigorous, objective and reflective self-studies;
- establishes the criteria for the nomination and selection of arm's length external reviewers;
- identifies responsibilities for the collection, aggregation, and distribution of institutional data and outcome measures required for self-studies;
- specifies the format required for the self-study and review reports;
- sets out the institutional cycle for the conduct of graduate and undergraduate program reviews; and
- posts the Senate approved Final Assessment Report (including the Implementation Plan) of all programs reviewed under the direction of the IQAP.

In addition to the information and templates available on the IQAP website, support documents specific to the cyclical review process are available on the Centre for Teaching and Learning website.

6. Quality Council Audit Process

6.0 Preamble

As a mechanism of accountability to post-secondary education's principal stakeholders (i.e., universities, students, government, employers, and the public) a cyclical audit will assess the degree to which Western's internally-defined quality assurance processes, procedures, and practices align with and satisfy internationally agreed upon standards, as set out in Ontario's QAF.

Set on an eight-year cycle, the audit provides an opportunity for Western to evaluate its quality assurance policies and practices. It is supported by an assessment of performance by the QC. The cyclical audit begins with a self-study, which enables the University to reflect on current policies and practices, and the extent to which it demonstrates a focus on continuous improvement in the development of new programs and the cyclical review of existing ones.

6.1 Process

For each cyclical audit, an Audit Team is established, comprised of members of the QC's Audit Committee plus the Quality Assurance Secretariat. The Audit Team reviews the University's self-study, conducts a desk audit of documentation associated with the development and review of a selection of Western's programs, and conducts a site visit. The Audit Team independently selects a sample of programs for audit that represents the New Program Approval Protocol (normally two examples of new programs developed under this Protocol) and the Cyclical Program Review Protocol (normally three or four examples of programs that have undergone a Cyclical Program Review). Programs that have undergone the Expedited Approval and/or the Protocol for Major Modifications will not normally be subject to audit.

In preparation for the audit, relevant members of Western will participate in a half-day briefing with the Quality Assurance Secretariat and an Audit Team member approximately one-year prior to the scheduled Cyclical Audit. Following this briefing, the OAQE will coordinate the institutional quality assurance self-study to assess Western's quality assurance processes, including challenges and opportunities, within the institutional context. The self-study will integrate the perspectives of stakeholders involved in quality assurance from across the institution (e.g., program leadership, faculty-level leadership, the university secretariat, the Centre for Teaching and Learning). Once completed, the draft self-study document will be shared with members of SUPR-U/SUPR-G for comment and, once finalized, will be submitted to the Quality Assurance Secretariat in advance of the desk audit and will form the foundation of the Cyclical Audit.

After the desk audit, auditors will conduct a site visit over two or three days, as needed. The auditors will prepare a report that will comment on the Western's commitment to the culture of engagement with quality assurance and continuous improvement, and will:

- a) describe the audit methodology and the verification steps used;

- b) comment on the self-study submitted for audit;
- c) describe whether Western's practices are in compliance with its IQAP as ratified by the QC, on the basis of the programs selected for audit;
- d) note any misalignment of its IQAP with the QAF;
- e) respond to any areas that the auditors were asked to pay particular attention to;
- f) identify and record any notably effective policies or practices revealed in the course of the audit of the sampled programs; and
- g) comment on the approach that Western has taken to ensure continuous improvement in quality assurance through the implementation of the outcomes of Cyclical Program Reviews and the monitoring of new programs.

The University will publish the audit report (absent any confidential information), along with the follow-up institutional response, as necessary, on its IQAP website.

Should the audit report identify any cause for concern, the QC may require closer scrutiny via a focused audit. Should this be requested, Western will participate and agrees to publish the resulting report on its website.

Appendix A: Acronyms and Definitions

Acronyms	
SOC	Subcommittee on Undergraduate Academic Courses
GEC	Graduate Education Council
IPB	Office of Institutional Planning and Budgeting
IQAP	Institutional Quality Assurance Process
MCU	Ministry of Colleges and Universities
OAQE	Office of Academic Quality and Enhancement
OOR	Office of the Registrar
QAF	Quality Assurance Framework
QC	Ontario Universities Council of Quality Assurance / Quality Council
ACA	Senate Committee on Academic Curriculum and Awards
SGPS	School of Graduate and Postdoctoral Studies
SUPR-G	ACA Subcommittee on Program Review – Graduate
SUPR-U	ACA Subcommittee on Program Review – Undergraduate
VP (AP)	Vice-Provost (Academic Programs)
VP (SGPS)	Vice-Provost (School of Graduate and Postdoctoral Studies)

Definitions		
	Graduate	Undergraduate
Certificate Program	<ul style="list-style-type: none"> Not offered at the graduate level. 	<ul style="list-style-type: none"> A structured set of courses specified by a Department, Faculty or Affiliated University College to allow students to acquire a specific set of skills or competencies. May be pursued concurrently with, or subsequent to, the completion of a Bachelor's degree. Should be awarded when the following criteria are met: <ol style="list-style-type: none"> normally a pre-degree program; normally requiring up to the equivalent of one calendar year or more to complete; and normally consisting of a minimum of 3.0 courses, frequently in combination with a certificate-credit component.
Joint Program	<ul style="list-style-type: none"> Not offered at the graduate level. 	<ul style="list-style-type: none"> A 2 + 2 (or similar) program with a community college or with another University.
Collaborative Specialization	<ul style="list-style-type: none"> A multidisciplinary or interdisciplinary field of specialization that spans multiple programs. Students are registered in a participating degree program and meet the requirements 	<ul style="list-style-type: none"> Not offered at the undergraduate level.

	of the participating program as well as those of the collaborative specialization.	
Diploma Program	<ul style="list-style-type: none"> • A structured set of courses specified by a Program to allow students to acquire a set of skills or competencies. • For-credit diploma program that meets one of the following specifications: <ul style="list-style-type: none"> ○ Type 1: Awarded when a candidate admitted to a master’s program leaves the program after completing a certain proportion of the requirements. Students are not admitted directly to these programs. ○ Type 2: Offered in conjunction with a master’s (or doctoral) degree, the admission to which requires that the candidate be already admitted to the master’s (or doctoral) program. This represents an additional, usually interdisciplinary, qualification. ○ Type 3: A stand-alone, direct-entry program, generally developed by a unit already offering a related master’s or doctoral degree, and is designed to meet the needs of a particular clientele or market. 	<ul style="list-style-type: none"> • A structured set of courses specified by a Department, Faculty or Affiliated University College to allow students to acquire a specific set of skills or competencies. • Normally post-graduate programs. • Should be awarded when the following criteria are met: <ol style="list-style-type: none"> 1. normally a post-degree program; 2. normally requiring the equivalent of one calendar year or more to complete; and 3. normally consisting of a minimum of 5.0 courses.
Field	<ul style="list-style-type: none"> • An area of strength, specialization or concentration within a program that is approved through the review process. • Collaborative specializations are fields that span multiple programs. 	<ul style="list-style-type: none"> • Not offered at the undergraduate level.
Major Modification	<ul style="list-style-type: none"> • A significant change in program requirements, which may include: <ul style="list-style-type: none"> ○ a significant change to the learning outcome(s) of the program. <ul style="list-style-type: none"> ▪ a significant change to the learning outcome(s) is one that changes, broadens or limits the subsequent career or educational opportunities of the graduates (e.g., a master’s program currently aimed at educating doctoral program-bound graduates revises its curriculum to yield master’s graduates with practical experience in applied areas directly relevant to professional careers). ▪ changes to course content and/or requirements when one-third or more of the courses are affected. 	<ul style="list-style-type: none"> • Introduction of a new module (honours specialization, specialization, or major) that comprises primarily existing courses and that is offered with existing faculty expertise and resources. • Introduction of a new for-credit diploma or certificate program. • Any change to an existing program that affects the learning outcome(s) of the program. <ul style="list-style-type: none"> ○ a significant change to the learning outcome(s) is one that changes, broadens or limits the subsequent career or educational opportunities of the graduates. ○ changes to the mode of delivery of a program to online for all or a significant portion of a program that was previously delivered in-person (or vice versa).

	<ul style="list-style-type: none"> ▪ changes to the mode of delivery of a program to online for all or a significant portion of a program that was previously delivered in-person (or vice versa). ○ elimination, introduction, or replacement of a thesis requirement. ○ introduction of a course-based option. ○ replacement of a course-requirement with a practical or experiential requirement ○ creation, deletion or renaming of a field, or collaborative specialization. 	<ul style="list-style-type: none"> • Any change that is considered more substantive than what is appropriate for Western’s Subcommittee on Undergraduate Academic Courses (SOC) for review and approval.
<p>Minor Modification</p>	<ul style="list-style-type: none"> • A change to the content or title of a course. • A change that does not affect the program requirements or learning outcomes. 	<ul style="list-style-type: none"> • Submissions to SOC (or "Virtual Committee" of ACA), which: <ul style="list-style-type: none"> ○ introduce, revise or withdraw a course ○ change the weight of a 1.0 (full) course to a 0.5 (half) course, or vice versa. (This is done by withdrawing one course and introducing a new one in its place with a new number. The former course is listed as an antirequisite.) ○ change the essay designation on a course, e.g., A/B to F/G or vice versa ○ delete, change, or add an antirequisite, prerequisite or corequisite • Introduction of a new module that has requirements and learning outcomes substantially the same as an existing module. • Introduction of a new minor module that comprises primarily existing courses that is offered with existing faculty expertise and resources. • Minor course changes include: <ul style="list-style-type: none"> ○ changes to titles or descriptions of courses that do not substantively change the course content ○ changes to course hours • Changes to subject areas as part of the breadth requirement for a Western degree.

<p>Module</p>	<ul style="list-style-type: none"> • Not offered at the graduate level. 	<ul style="list-style-type: none"> • A structured set of courses specified by a Department, Faculty or Affiliated University College to fulfill the requirements of an Honours Specialization, Specialization, Major or Minor. Modules are the central components that determine the disciplinary character of a degree. Students can combine different modules from different subjects, Departments and Faculties to construct individualized, interdisciplinary degrees. <p>Honours Specialization module:</p> <ul style="list-style-type: none"> ○ Comprised of 9.0 or more courses designated by a Department, Faculty or Affiliated University College; available only in an Honours Bachelor Degree (Four-Year). <p>Specialization module:</p> <ul style="list-style-type: none"> ○ Comprised of 9.0 or more courses designated by a Department, Faculty or Affiliated University College; available only in a Bachelor Degree (Four-Year). ○ The Specialization module is typically distinguished from the Honours Specialization module by virtue of its admission and progression requirements. <p>Major module:</p> <ul style="list-style-type: none"> ○ Comprised of 6.0 or 7.0 courses designated by a Department, Faculty or Affiliated University College. This module is available in the Bachelor Degree (Four-Year), the Bachelor Degree (Three-Year), and the Honours Bachelor Degree (Four-Year). <p>Minor module:</p> <ul style="list-style-type: none"> ○ Comprised of 4.0 or 5.0 courses designated by a Department, Faculty or Affiliated University College. A degree with a single Minor is not available. A Minor may be combined with another Minor in a Bachelor Degree (Three-Year) or a Minor module may be taken as an additional module within the Honours Bachelor Degree (Four-Year), the Bachelor Degree (Four-Year), or the Bachelor Degree (Three-Year).
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New Program	<ul style="list-style-type: none"> • Any degree credential or program currently approved by Senate that has not been previously approved by the QC or its predecessor. • A “new program” is brand new; the program has substantially different program requirements and substantially different learning outcomes from those of any existing program offered at Western. • A new master’s or doctoral program (e.g., introduction of a PhD Program in Film Studies). • A new professional master’s program in an area where Western already has a thesis/research-based master’s program (e.g., introduction of a MA in Professional Writing). 	<ul style="list-style-type: none"> • Any degree credential, degree program, or specialization currently approved by Senate that has not been previously approved by the QC or its predecessor. • A “new program” is brand new; the program has substantially different program requirements and substantially different learning outcomes from those of any existing program offered at Western. • A new program is a program consisting primarily of new courses offered predominantly (in most circumstances) by new faculty members who are recruited to provide the program area expertise previously lacking at Western. In addition to the need for new faculty members, new programs also require additional resources, such as space and library collections. • A new program could be: <ul style="list-style-type: none"> ○ A new degree program (e.g., BHSc – Bachelor of Health Sciences). ○ A new disciplinary program (e.g., BSc with an Honours Specialization in Oceanography). ○ A new module, if the module has requirements and learning outcomes that are substantially different from those of any existing module.
Program-Level Learning Outcomes	<p>Clear and concise statements that describe what successful students should have achieved and the knowledge, skills, and abilities that they should have acquired by the end of the program. Program-level learning outcomes emphasize the application and integration of knowledge – both in the context of the program and more broadly – rather than coverage of material; make explicit the expectations for student success; are measurable and thus form the criteria for assessment/evaluation; and are written in greater detail than the program objectives.</p>	
Program Objectives	<p>Clear and concise statements that describe the goals of the program. Program objectives explain the potential applications of the knowledge and skills acquired in the program; seek to help students connect learning across various contexts; situate the particular program in the context of the discipline as a whole; and are often broader in scope than the program-level learning outcomes.</p>	