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## **Policy on Quality Assurance**

February 1999

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## **PREAMBLE**

This Quality Assurance Policy ensures that Commission policies are congruent with the 1997 “Agreement respecting the renewal of arrangements for regional cooperation concerning post-secondary education” signed by the provincial Ministers, which sets out the Commission’s new mandate, including a focus on continuous quality improvement of programmes and teaching at post-secondary institutions and, in particular, at universities.

The policy is composed of two major activities:

- I. Review of Programme Proposals Prior to Implementation
- II. Monitoring Institutional Quality Assurance Policies and Procedures



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## **I. Review of Programme Proposals Prior to Implementation**

### **1. Objective**

The overall objective of the programme review is to ascertain the suitability of the programme given its objectives, structure, institutional appropriateness, resources, stated student outcomes and their relevance. The review will also provide a regional context for the programme and ensure unwarranted duplication is avoided.

### **2. Submission and Distribution of Proposals**

When submitting a proposal for a new programme, the Commission requests that institutions prepare their proposal using the *Guidelines for the preparation of proposals for new programmes*.

When submitting a proposal to modify or to terminate a programme, institutions are invited to prepare their proposal using the *Guidelines for the preparation of proposals to modify or to terminate programmes*.

When submitting a proposal for a programme articulated between two or more institutions, institutions should prepare their proposal using the *Guidelines for the preparation of proposals for articulated programmes*.

Programme proposals are distributed to the AAU-MPHEC Academic Advisory Committee members, Commission members and institutions scheduled in the MPHEC Act, for information and to facilitate communication between institutions on recent programme developments in the region. All stakeholders, especially institutions, are invited to comment, but the process will not be delayed waiting for comments and responses. Specifically, stakeholders have five working days from the date of distribution of the proposal to notify MPHEC staff that they intend to comment, and an additional five working days to provide the MPHEC with comments.

The Commission appreciates that the information required by these guidelines may rely on proprietary information. In such circumstances, the institution should attach the information as an appendix and identify it as proprietary information. Proprietary information will not be circulated during the distribution of proposals. In most instances, proprietary information will only be used by staff. In some cases, it may be distributed to the Academic Advisory Committee and to the Commission; it may also be circulated to consultants hired by the Commission to assess the proposed programme. In every case, the information will always be identified as confidential when

it is distributed. These are the only instances in which proprietary information, identified as such by the submitting institution, will be distributed.

Institutions are asked to submit proposals (under the signature of their President) once their appropriate governing bodies have approved the new or modified programmes. Proposals must be submitted on paper. However, to speed the distribution and review process, institutions are also asked to submit their proposals on a diskette or electronically, via e-mail (mphec@mphec.ca). The proposals will be distributed electronically.

Please note that only the proposal itself will be distributed; appendices will not be distributed and therefore do not need to be submitted electronically.

### **3. Definition of New and Modified Programmes**

A new programme includes any programme not currently offered or accounted for under the existing (MPHEC approved) academic programme and credential structures at the submitting institution.

A programme is considered modified when the programme name and/or credential does not change but includes revisions to the currently existing academic programme that have a significant effect on one or several of the following:

- the programme structure, e.g. duration, entrance requirements, focus, faculty/department;
- the concentration type, e.g. minor, major, honours, joint majors, specializations, concentrations, if the institution already grants a credential of a higher level in the same area;
- the programme form, e.g. integrated, sequential, change to co-op, interdisciplinary;
- the target clientele;
- the programme priority, e.g. programme termination, continuation of a term/pilot programme;
- the costs.

### **4. Definition of Articulated Programmes**

The MPHEC strongly supports an increase in the applied nature of post-secondary education. As a means to achieve this, the MPHEC supports growth in the articulation of programmes between post-secondary institutions, and in particular between community colleges and universities.

The objectives of such programmes, from a public policy point of view, are to provide graduates with a more timely access to significant jobs or earnings and ensure that they have indeed acquired



both occupation-specific and general post-secondary education competencies. The guidelines for the preparation of proposals for articulated programmes have two objectives: programme quality and suitability of services for the students involved. All proposals, for post-secondary programmes articulated between institutions where at least one institution is on the Commission schedule, should provide the information outlined in these guidelines. The guidelines do not attempt to define the articulation arrangements between institutions, given the myriad of possible solutions.

An articulated programme is defined, for the purpose of this policy, as a substantively new programme articulating components of a post-secondary programme delivered by one institution with components of the programme delivered by another. The general aim of such programmes is to expand the opportunities for graduates to acquire both occupation-specific and general post-secondary education competencies.

These institutions generally grant two different types (levels) of credentials. The institutions will generally be a community college and a university. However, other education providers (publicly or privately funded) could also be involved. An articulated programme can have one or more exit points at varying levels:

- When there is only one level, the programme is delivered by two institutions but its completion leads to only one credential.
- When there are two (or more) levels, the programme is delivered by two (or more) institutions and its completion leads to two recognized credentials, generally at two different levels. One credential may be earned as a requirement to earn the other, or they may be earned concurrently or independently.

An articulated programme is not limited to credit transfers, although it will likely include the provision of credit transfer agreements between institutions. An articulated programme is more than the simple juxtaposition or addition of existing programmes. Articulated programmes may lead to credentials in applied arts, applied sciences, applied social sciences, technology, etc. or they could lead to more traditional designations (Arts, Science, etc.).

## **5. Overview of the Programme Approval Process and Outcomes**

Programme proposals, based on their completeness and quality, will undergo either a cursory review or an in-depth assessment. The vast majority of proposals for new programmes, and all proposals for modified programmes, will be assessed via a cursory review process, providing the proposal meets the agreed-upon criteria and no major issue arises. Normally, a programme is

considered modified when the programme name and/or credential do not change. The addition of new options or concentrations is considered a new programme, unless the institution already grants a credential of a higher level in the same area and if this addition does not modify the approved credential.

New and modified programmes requesting new or additional funding from public sources will be assessed in depth. All new health-related programmes are assessed in depth and by two committees: the Atlantic Advisory Committee on Health Human Resources which establishes the need for the programme, and the AAU-MPHEC Academic Advisory Committee which determines its academic merit. The time frame and information requirements for assessment of health-related programmes may differ given that two committees are involved in the assessment.

### **5.1 Cursory Review Process**

Upon receipt, all programme proposals (with the exceptions noted above) are reviewed by MPHEC staff and granted automatic approval if they meet agreed-upon criteria (described in Section 5.2). Programmes are entered in the appropriate data bases and the Chief Executive Officer of the Commission notifies the institution that the programme has been approved.

A proposal not meeting the agreed-upon criteria in a satisfactory fashion is returned to the institution for additional information. It can also be referred to the AAU-MPHEC Academic Advisory Committee when the proposal, while not meeting all the MPHEC information requirements or criteria, does appear to contain enough information to be submitted to an in-depth assessment. In cases of doubt, the Chair of the Academic Advisory Committee and/or the Chief Executive Officer of the Commission are consulted prior to determining the appropriate process. Major issues identified during this process or through the distribution of proposals will trigger an in-depth review.

Neither the Academic Advisory Committee nor the Commission review these proposals other than through the initial distribution mentioned above. At regular intervals, staff prepares a list of programme proposals received and approved to inform both the Committee and the Commission. All programmes considered in a given year are included in the MPHEC annual report.

All programmes approved after a cursory review are approved with the condition that the institution carry out an assessment of the programme between three to five years after the initial implementation, depending on programme length. The assessment report and a follow-up plan of action are to be filed with MPHEC no later than one year following the assessment of the programme.

The MPHEC reserves the right to specify when the review should take place, and to suggest particular areas of concern to be included in the review. In addition, the MPHEC will remind the institutions 18 to 24 months in advance that a review should take place.

## **5.2 Cursory Review Assessment Criteria**

For a programme proposal to be approved through a cursory review, all the MPHEC information requirements as defined in the criteria listed below must be met.

The Commission acknowledges that not all the information requested will be available for each and every proposal. The absence of information should be noted and explained. The key is to meet the criteria.

Specifically, the proposal must include:

1. Clearly defined programme objectives and structure, including anticipated student outcomes and a demonstration of their relevance, references to optimum programme length, as well as a demonstration that the programme name and credential granted adequately capture the programme content (“truth in advertising”).
2. Evidence of the adequacy of resources (human, physical and financial) and references to the various sources of funding.
3. Evidence of the involvement of peers and experts external to the institution in the development of the proposed programme. Each external expert should be identified and their written assessment or comments on the proposed programme should be included.
4. Evidence of an environmental scan to identify all similar or equivalent or comparable programmes in the region and elsewhere as appropriate.
5. Evidence of consultation with institutions offering similar or equivalent or comparable programmes (at a minimum, letters or evidence of communication sent to other institutions requesting input; preferably, written comments from these institutions should be included). When conflicting views about the programme emerge from the consultation process, the Chair of the Academic Advisory Committee and/or the Chair of the Commission will be consulted. (This does not imply that an in-depth review of the programme will take place.)

6. Evidence of need, as documented by, among other things, analysis of the evolution of the discipline: labour market analysis; demand for graduates; consultation with potential employers and professional organization(s). This evidence should rely on external sources such as leading scholars, government agencies, employers, professional organizations, etc.
7. Evidence of student demand.

### **5.3 In-depth Assessment Process**

In addition to the situations outlined in section 5 above, an in-depth assessment is conducted in cases where staff, in consultation with the Chair of the Academic Advisory Committee and/or the CEO of the Commission, determines that a programme proposal does not satisfactorily meet all criteria but nonetheless contains enough information to be assessed in-depth. An in-depth assessment will be triggered if major issues are identified by any of the stakeholders during the proposal distribution process.

The process for an in-depth assessment is as follows:

- Staff prepares an analysis of the proposal and identifies any issue which arises;
- The Academic Advisory Committee reviews the proposal and any comments received from other institutions, other stakeholder groups;
- The Committee may request additional information and/or the advice of experts in the field if deemed appropriate;
- The Committee may elect to forward suggestions or recommendations to the institution to resolve the issues. Once the issues are resolved, or when the Committee has concluded that resolution is not possible, the Committee then forwards its final recommendation to the Commission.

### **5.4 Time Frame**

Normally, proposals meeting all the MPHEC information requirements are reviewed, using the cursory process, within a four-week time frame. An in-depth assessment is normally conducted in eight to fourteen weeks. Proposals undergoing an in-depth review which contain evidence that a peer review process was included in the development stages of the proposed programme are normally assessed in a shorter time frame.

## 6. Cooperative Action and Programme Duplication

The *Agreement Respecting the Renewal of Arrangements for Regional Cooperation Concerning Post-secondary Education*, signed in June 1997 by the three Ministers responsible for higher education in the Maritimes, states that “the Commission is expected to take initiatives to stimulate cooperative action among institutions and governments where such action is likely to improve the efficiency and effectiveness of the Maritimes’s post-secondary education system. This may include encouraging initiatives for institutions to offer joint, complementary and regional programmes.”

In keeping with this mandate, the Commission expects that institutions will seek to collaborate with other post-secondary institutions, both university and non-university, in the delivery of programmes where such collaboration could be beneficial in this regard.

In addition, the Commission places great emphasis on the need to optimize the use of limited resources in the region. The Commission addresses issues associated with programme duplication through the following variables, in no particular order:

- Geographical and linguistic accessibility for students
- Existence of similar programmes either in the Maritimes or elsewhere in Canada
- If a similar programme is already available, the differences in programme emphasis.
- Institutional differences, uniqueness and capacity; impact on the financial viability of the submitting institution;
- Institutional programme niches and leadership in programme areas within the Maritimes;
- Range of programmes required for any institution wishing to call itself a university.
- Overlap of programmes and programme areas between the community college and university systems.
- MPHEC’s graduate programme policy.
- Needs and demand of learners for a seamless post-secondary system, and for an improved transition between learning and the workforce (transferability of credit, credit equivalency, articulated programmes, reciprocal agreements, recognition and portability of credentials, emphasis on educational requirements of employers and industry need, and links between education and preparation for employment).
- The development, maintenance, integrity and support of a Maritime post-secondary system, including any provincial or regional role and capacity exercise.
- Determination of programme need and impact within the context of the existing environment, both internal and external. The external environment includes examining the possibility of collaboration with other institutions.

The Commission needs to know whether or not similar programmes are already available either in the Maritimes or elsewhere in Canada and, if so, how the proposed programme differs from or relates to existing programmes. Whether a proposed programme is unique within the region or Canada, or similar to an existing one, the need for its introduction should be substantiated.

## **7. Graduate Programme Policy**

In normal circumstances, the Commission is prepared to consider proposals for:

- a) doctoral programmes at Dalhousie University, the University of New Brunswick and l'Université de Moncton;
- b) Master's programmes at those institutions currently offering Master's programmes;

and in exceptional circumstances, the Commission is prepared to consider proposals for Master's and Doctoral programmes at institutions not designated above.

These proposals are subject to the following criteria:

- that the proposed programme is non-duplicative of offerings elsewhere in the region or represents necessary duplication, or market demand demonstrably justifies further capacity;
- that it be demonstrated that the nature of the proposed programme is such that it can best be offered at the institution in question;
- that the appropriate support network of related programmes (undergraduate and, where relevant, graduate) be available to ensure the quality of the proposed programme;
- that it be demonstrated that employability, student demand, and the institution's enrolment capacity for such a programme all favour the implementation of the proposed programme;
- that an appropriate structure (such as an Office of Graduate Studies) is in place to support the programme, especially in the case of a doctoral programme; and
- in the case of a doctoral programme, that it be demonstrated that an appropriate level of student financial support is available.

There are additional information requirements for proposals for graduate programmes.

## **8. Health-related Programmes**

All new health-related programmes are assessed in depth by two committees: the Atlantic Advisory Committee on Health Human Resources (AACHHR) which establishes the need for the programme, and the AAU-MPHEC Academic Advisory Committee which determines its academic merit. The

time frame for the assessment of health-related programmes may differ given that two committees are involved in the assessment. There are additional information requirements for proposals for health-related programmes.

The Atlantic Advisory Committee on Health Human Resources will base its evaluation of health-related programme proposals on the following principles:

- Proposed programmes should enhance the contribution of the profession to the health system, foster the provision of more efficient and effective delivery of health care services, positively affect health outcomes, and be consistent with national standards, as well as provide additional learning opportunities.
- Proposed programmes, comparable in content to programmes offered elsewhere in the region, and which lead to the same national accreditation will only be considered when offering distinct learning opportunities or representing a regional market demand.
- In this era of financial restraint, the health system must be able to financially support either new professions, or new roles for existing professions.
- Integration, adaptability and flexibility of the workforce are important in meeting the demands of a health system which is focussing more on community-based care. Programmes that support innovative approaches such as multidisciplinary course delivery and multi-skilling are of high priority.
- Mechanisms for continual learning in the health professions are required to ensure that professions can adapt to new technologies and required competencies.
- Health sciences education programmes should implement mechanisms to recognize the prior learning experiences of students for credit.
- Health sciences education programmes must produce graduates that are competent to provide quality health services. Changes in the duration of education programmes, or the level of credential obtained, must be justified in light of this fact.
- Inter-jurisdictional issues must be addressed, such as those related to the Agreement on Internal Trade.





**APPENDIX I.1**  
**AAU-MPHEC ACADEMIC ADVISORY COMMITTEE**  
**Terms of reference**

**Purpose**

1. To advise and assist the Maritime Provinces Higher Education Commission, an agency of the Council of Maritime Premiers, in assuring the quality of new and modified academic programmes at post-secondary institutions included within its scope and as defined below.

**Function**

2. To that end, the Committee shall:
  - Carry out in-depth assessments of new or modified post-secondary programmes, within the parameters established by the Commission as described in the Quality Assurance Policy document.
  - As appropriate, review and comment on the institutional assessment of programmes approved by the MPHEC through a cursory review process.
  - Advise the Commission on the appropriate evolution of the Quality Assurance Policy document, in the light of experience.
  - Advise the Commission on issues to be researched and assist in carrying out projects deemed necessary and appropriate, by the Committee and/or the Commission, as they relate to quality assurance or academic planning.

**Objective of the review of programme proposals**

3. The overall objective of the review, as stated in the Commission Quality Assurance Policy, is to ascertain the suitability of the programme given its objectives, structure, institutional appropriateness, resources, stated student outcomes and their relevance. The review will also provide a regional context for the programme and ensure unwarranted duplication is avoided.

**Review process**

4. In-depth programme assessments, for which the Academic Advisory Committee is responsible, may be undertaken when a programme proposal does not satisfactorily meet the criteria for cursory review. The process is as follows:
  - Staff prepares an analysis of the proposal and identifies any issues which arise;
  - The Academic Advisory Committee reviews the proposal and any comments received from other institutions and other stakeholder groups;
  - The Committee may request additional information and/or the advice of experts in the field;
  - The Committee may elect to forward suggestions or recommendations to the institution to resolve the issues. Once the issues are resolved, or once the Committee concludes that resolution is not possible, the Committee then forwards its final recommendation to the Commission.

## **Responsibility of Committee members**

5. In addition to carrying out in-depth assessments and reviewing institutional programme assessments, Committee members are also responsible to review and comment when appropriate, on an individual basis, on all programme proposals being assessed through a cursory review process, given that these proposals will not be discussed in Committee meetings.

## **Membership**

6. The Committee is composed of eight members, including the Chair.
7. Three members are appointed by the Chair of the Commission, for a term of three years.
8. Three members are appointed by the Association of Atlantic Universities (AAU), for a term of three years.
9. Two Committee members are students of which one is selected by the AAU and the other by the MPHEC following a joint process for nominations.
10. At least one of the members has expertise with community college programmes or university/college articulation.
11. One member is also a member of the Quality Assurance Monitoring Committee.
12. The terms should overlap to ensure continuity.

## **Chair**

13. The Chair of the Committee is a Commission member appointed to the Committee and designated by the Chair of the Commission.

## **Quorum**

14. A minimum of two members, including the Chair, appointed by the Commission Chair and a minimum of two members appointed by the AAU represent quorum.

## **Staffing**

15. The Academic Advisory Committee is assisted by the Director of Academic Planning and Research, and additional staff as assigned.
16. The Committee has the authority to engage outside consultants as required to assist in its functions.

Approved November 18, 1998  
Modified April 12, 1999

**APPENDIX I.2.1**  
**GUIDELINES FOR THE PREPARATION OF PROPOSALS FOR NEW PROGRAMMES**

**1. PROGRAMME IDENTIFICATION**

- 1.1 Submitting institution(s)
- 1.2 Faculty
- 1.3 School
- 1.4 Department
- 1.5 Programme name and level
- 1.6 Credential(s) granted
- 1.7 Proposed starting date

**2. PROGRAMME DESCRIPTION**

This section of the proposal must provide the information necessary to meet the following assessment criterion: “Clearly defined programme objectives and structure, to include anticipated student outcomes and a demonstration of their relevance, include references to optimum programme length, as well as a demonstration that the programme name and credential granted adequately capture the programme content (“truth in advertising”).”

- 2.1 Description of programme objectives
- 2.2 Description of the overall programme structure
- 2.3 Anticipated student/graduate outcomes and their relevance
- 2.4 Admission requirements, standards, etc.
- 2.5 Listing of the courses required (course name and number, whether existent or planned, its status in the programme, i.e., compulsory vs. optional; brief description of the course (for example, calendar entry). Programme duration should be stated, as well as justified.
- 2.6 Other special requirements such as thesis, practicum, apprenticeship, etc.
- 2.7 Method of programme delivery (e.g. traditional classroom, distance education, co-operative education or a combination).
- 2.8 In the case of a graduate programme, an indication of whether a programme is research or course based.
- 2.9 In the case of health-related programmes:
  - 2.9.1 Identification of the programme curriculum components emphasizing the determinants of health, health promotion and disease prevention.
  - 2.9.2 Identification of the opportunities for cross-training of health providers and for enhanced multi-skilling offered by the programme.
  - 2.9.3 Identification of opportunities for interdisciplinary clinical experiences.
  - 2.9.4 Identification of the provisions for re-training existing professionals, and for the continual learning of graduates from the programme.

### **3. RESOURCE IMPLICATIONS**

This section of the proposal must provide the information necessary to meet the following assessment criterion: “evidence of the adequacy of resources (human, physical and financial), including the various sources of funding.”

#### *3.1. Human and Physical Resource Implications*

Considering the first five years (or the time frame in which the programme is expected to be fully operational) of the proposed programme,

- 3.1.1 Extent to which current resources in terms of academic and support staff, library, space, equipment, etc. would be used.
- 3.1.2 Additional resources needed in the same areas.
- 3.1.3 Impact of the use of these resources on other programmes, including the elimination or the reduction of the scope of programmes to accommodate the new programme.
- 3.1.4 Estimate of resource needs and allocation beyond the first five years.
- 3.1.5 In the case of a graduate programme,
  - 3.1.5.1 A list of the academic staff involved within the department. (This could be covered by submitting the abbreviated c.v. of each professor.)
  - 3.1.5.2 A list of research support accorded to professors in the past with a record of publications, especially in refereed journals. (This could be covered by submitting the c.v. of each professor.)
  - 3.1.5.3 A more detailed list of available physical and human support facilities, e.g.: laboratories, instruments, computer backup, technician backup, etc. than would be given for undergraduate programmes above.
  - 3.1.5.4 A list of available sources for financial student support.

#### *3.2 Financial Implications*

- 3.2.1 Full and incremental costs of the programme for the first five years (or the time frame in which the programme is expected to be fully operational), broken down by major cost areas, academic salaries, other salaries, equipment, library acquisitions, space, etc.
- 3.2.2 Expected sources of revenue to cover the costs.
- 3.2.3 Expectations in terms of additional capital or operating funding. Institutions are normally expected to find the financial resources for new programmes from increases in the regular budget, through reallocation, or from other sources).

### **4. RELATIONSHIP TO OTHER PROGRAMMES AND INSTITUTIONS**

Information in this category should meet the following assessment criteria: “evidence of an environmental scan to identify all similar or equivalent or comparable programmes in the region and elsewhere as appropriate” and “evidence of consultation with institutions offering similar or equivalent or comparable programmes”.

- 4.1 Relationship to existing programmes in the same institution.

- 4.2 In the case of a graduate programme, a description of programmes (honours, majors, etc.) in the same department at the bachelor's level (and in the case of doctoral programmes, at the Master's level) and a history of student numbers in these programmes.
- 4.3 Comparison of the proposed programme with other comparable programmes offered elsewhere in the Maritimes and in Canada and rationale for the introduction of an additional programme, if a similar one is already offered in the region.
- 4.4 Possibilities of collaboration with other institutions in the region (university or non-university), or elsewhere in Canada, in the delivery of the programme and steps taken to that effect.
- 4.5 Evidence of consultation with institutions offering similar or equivalent or comparable programmes (at a minimum, details on the consultation process and letters or evidence of communication sent to other institutions requesting input; preferably, letters of comments from these institutions should be included).

## **5. PROGRAMME NEED**

This section of the proposal must provide the information necessary to meet the following assessment criteria: "evidence of need" and "evidence of student demand".

- 5.1 The social (local, regional, national) need(s) met by graduates from such programmes as documented by, among other things, analysis of the evolution of the discipline, labour market analysis, demand for graduates, etc. This evidence should rely on external sources (leading scholars, government agencies, employers, professional organizations, etc.).
- 5.2 Consultation with employers and/or professional organizations as to the current and anticipated job market
- 5.3 Priority within each institution's programme structure and development.
- 5.4 Student demand
- 5.5 Clientele (expected enrolment, enrolment limits or expected maximum enrolment, and clientele sources)
- 5.6 In the case of health related programmes:
  - 5.6.1 Identification of alternate solutions to the implementation of a new programme (eg. seat purchase in existing programmes); impact of the programme on the professional scope of practice and on core competencies of the profession.
  - 5.6.2 Impact of the programme on the delivery of quality health care services to consumers, on patient outcomes, on the employers and the purchasers of service (eg. insurance providers, consumers).
  - 5.6.3 Impact of the proposed programme on professional mobility, as outlined within the Labour Mobility Chapter of the Agreement on Internal Trade, and/or the North American Free Trade Act.

## **6. PROGRAMME DEVELOPMENT PROCESS**

This section of the proposal must provide the information necessary to meet the following assessment criterion: “evidence of the involvement of peers and experts external to the institution in the development of the proposed programme”.

- 6.1 Description of the institutional programme development process leading to the submission of the proposal. Each internal and external expert should be identified and their written assessment or comments on the proposed programme appended to the proposal.
- 6.2 Description of response to external reviews.
- 6.3 Description of any accreditation requirements.

## APPENDIX I.2.2

### GUIDELINES FOR THE PREPARATION OF PROPOSALS TO MODIFY OR TO TERMINATE PROGRAMMES

#### 1. PROGRAMME IDENTIFICATION

- 1.1 Submitting institution(s)
- 1.2 Faculty
- 1.3 School
- 1.4 Department
- 1.5 Programme name and level
- 1.6 Credential(s) granted
- 1.7 Proposed starting date

#### 2. DESCRIPTION OF THE PROPOSED PROGRAMME MODIFICATION

- 2.1 Description of the type of change, e.g. course change, change to co-op, change to distance education;
- 2.2 Description of the purpose of the change, e.g. following trends, accommodating the clientele to be served, establishing a better focus;
- 2.3 Comparison between the current and the modified programmes of:
  - 2.3.1 Programme objectives
  - 2.3.2 Overall programme structure
  - 2.3.4 Anticipated student/graduates outcomes and their relevance
  - 2.3.5 Admission requirements, standards, etc.
  - 2.3.6 Courses required (course name and number; whether existent or planned for the modified programme, its status in the programme (optional or compulsory); brief description of the course (for example calendar entry) if new or modified). Changes to programme duration should be stated and explained.
  - 2.3.7 Other special requirements such as thesis, practicum, apprenticeship, etc.
  - 2.3.8 Method of programme delivery (e.g. traditional classroom, distance education, co-operative education or a combination).
- 2.4 Impact of the change on human, physical and financial resources, to include anticipated impact on expenditures and revenues;
- 2.5 Potential impact of the change on other programmes at the institution or at other institutions in the region;
- 2.6 An indication of other institutions involved, or that have been consulted;
- 2.7 Any other information the institution feels will assist the Commission in its understanding and assessment of the proposed modification. Reports of internal or external review would be helpful.





**APPENDIX I.2.3**  
**GUIDELINES FOR THE PREPARATION OF PROPOSALS FOR ARTICULATED PROGRAMMES**

**1. PROGRAMME IDENTIFICATION**

- 1.1 Participating (submitting) institutions
- 1.2 Inter-institutional coordinating mechanism (see below, section 6)
- 1.3 Academic units responsible for the programme at each participating institution
- 1.4 Programme name, credential(s) awarded
- 1.5 Proposed starting date

**2. PROGRAMME DESCRIPTION**

This section of the proposal, along with section 4 and 6, must provide the information necessary to meet the following assessment criterion: “Clearly defined programme objectives and structure, to include anticipated student outcomes and a demonstration of their relevance, include references to optimum programme length, as well as a demonstration that the programme name and credential granted adequately capture the programme content (“truth in advertising”).”

- 2.1 Explicit statement with respect to the value added by combining components of a programme at one level with components of a programme at another level.
- 2.2 Proposed structure and content, addressing the following three major components:
  - a. **Occupational content**, i.e., course content directly related to the practice of an occupation in the field;
  - b. **Occupationally related content**, i.e., courses usually delivered, especially at the upper level, by a university (English, Political Science, History, Psychology, Management, etc.), where the content has been tailored to the clientele of the programme (for example, English or Political Science for journalists);
  - c. Other **academic content**, i.e., courses in other fields that contribute to the education of the student.
- 2.3 Listing of the courses required (course name and number, whether existent or planned, its status in the programme, i.e., compulsory vs. optional). Programme duration should be stated, as well as justified.
- 2.4 Practical requirements

Articulated programmes should attempt to integrate practical, hands-on training. This training can be provided to the student by different means, whether in the context of the learning programme or through internships or practicums. The proposal should describe if and how this type of training will be provided.
- 2.5 Method of programme delivery and location from the beginning to the end of the programme.
- 2.6 Summary of the admission policy and requirements.

The admission policy and requirements must be agreed upon by all the parties involved. The policy should include the customary elements of an admission policy. It can, and probably should, include several admission routes (prior learning assessment, credit transfer arrangements, etc.). The policy should address whether the province of residence would constitute a criterion for admission or exclusion, as is often the case with community college programmes. This element is important as the MPHEC expects that several of these articulated programmes could very well be unique in the region.

2.7 Comparison with similar programmes offered in the region, or elsewhere in Canada.

2.8 In the case of health-related programmes:

2.8.1 Identification of the programme curriculum components emphasizing the determinants of health, health promotion and disease prevention.

2.8.2 Identification of the opportunities for cross-training of health providers and for enhanced multi-skilling offered by the programme.

2.8.3 Identification of opportunities for interdisciplinary clinical experiences.

2.8.4 Identification of the provisions for re-training existing professionals, and for the continual learning of graduates from the programme.

### **3. RESOURCE IMPLICATIONS**

This section of the proposal must provide the information necessary to meet the following assessment criterion: “evidence of the adequacy of resources (human, physical and financial), including the various sources of funding.”

Considering the first five years (or the time frame in which the programme is expected to be fully operational) of the proposed programme,

#### *3.1 Human and Physical Resource Implications*

3.1.1 Extent to which current resources in terms of academic and support staff, library, space, equipment, etc. would be used.

3.1.2 Additional resources needed in the same areas.

3.1.3 Impact of the use of these resources on other programmes, including the elimination or the reduction of the scope of programmes to accommodate the new programme.

3.1.4 Estimate of resource needs and allocation beyond the first five years.

#### *3.2 Financial Implications*

3.2.1 Full and incremental costs of the programme for the first five years (or the time frame in which the programme is expected to be fully operational), broken down by major cost areas (academic salaries, other salaries, equipment, library acquisitions, space, etc.).

3.2.2 Expected sources of revenue to cover the costs.

3.2.3 Expectations in terms of additional capital or operating funding. Institutions are normally expected to find the financial resources for new programmes from increases in the regular budget, through reallocation, or from other sources).

### **4. RESPONSIBILITY FOR THE PROGRAMME**

This section of the proposal, along with section 1 and 6, should meet the following assessment criteria: “evidence of an environmental scan to identify all similar or equivalent or comparable programmes in the region and elsewhere as appropriate” and “evidence of consultation with institutions offering similar or equivalent or comparable programmes”.

- 4.1 Description of how the following duties will be addressed on an ongoing basis:
- Admission policy, requirements and practices.
  - Programme design.
  - Standards for progression through, and graduation from, the programme.
  - Information requirements for the transcripts at both institutions.
  - Liaison with the specific academic unit assuming responsibility for the programme at each institution.
  - In addition, a programme proposal should state how each institution will address the issue of student advising, and additional students services, where required.
- 4.2 Identification of the unit(s) responsible for the programme at each participating institution, detailing the various levels and types of responsibilities.
- 4.3 Description of the inter-institutional coordinating mechanism and its duties, given that when more than one institution is involved, the information flow between the participating institutions, as well as with the students must be facilitated. An example of such a coordinating mechanism is a joint programme committee comprising representatives of both teaching and administrative staff from major participating sectors (departments, disciplines, etc.) and institutions, as well as students. However, other mechanisms may be just as suitable.

## **5. PROGRAMME NEED**

This section of the proposal must provide the information necessary to meet the following assessment criteria: “evidence of need” and “evidence of student demand”.

- 5.1 The social (local, regional, national) need(s) met by graduates from such programmes
- 5.2 Student demand
- 5.3 Priority within each institution’s programme structure and development.
- 5.4 Clientele (expected enrolment and clientele sources)
- 5.5 Consultation with employers and/or professional organizations as to the current and anticipated job market
- 5.6 The need for a broader-based training that would include general university level competencies
- 5.7 Any accreditation requirements
- 5.8 In the case of health related programmes:

- 5.8.1 Identification of alternate solutions to the implementation of a new programme (eg. seat purchase in existing programmes); impact of the programme on the professional scope of practice and on core competencies of the profession.
- 5.8.2 Impact of the programme on the delivery of quality health care services to consumers, on patient outcomes, on the employers and the purchasers of service (eg. insurance providers, consumers).
- 5.8.3 Impact of the proposed programme on professional mobility, as outlined within the Labour Mobility Chapter of the Agreement on Internal Trade, and/or the North American Free Trade Act.

## **6. ADDITIONAL INTER-INSTITUTIONAL ARRANGEMENTS**

This section of the proposal, along with sections 1 and 4, must provide the information necessary to meet the following assessment criterion: “evidence of the involvement of peers and experts external to the institution in the development of the proposed programme”.

In addition, evidence should be provided that inter-institutional arrangements are in place to facilitate the following:

- 6.1 Student transfer from one institution to the other.
- 6.2 Cost- and revenue-sharing, both in the short term (implementation of the programme) and in the long term (maintenance and upgrades).  
This includes an agreement to the effect that each institution will be funded directly for the part of the programme they deliver, when students are registered with and pay fees to the particular institution where they are taking the courses. However, when students are moving from one institution to the other, in any given term or year, other arrangements should probably be made.
- 6.3 Clarification about enrolment count for every year or term of the programme.  
When students will be straddling both institutions at one point in the programme, or throughout, the institutions should suggest how students should be considered for enrolment count purposes.

## **7. LINKAGES TO THE LABOUR MARKET**

This section of the proposal, along with section 5, must provide the information necessary to meet the following assessment criteria “evidence of need”.

- 7.1 Evidence of linkages to the labour market should be provided; this includes, but is not limited to, evidence of consultation with respect to both programme need and programme design. Articulated programmes should have a close connection with the practical requirements of the labour market.
- 7.2 In addition to the inter-institutional coordinating mechanism, the programme should normally have the benefit of an advisory industry group. It should comprise a variety of employers and practitioners from the relevant field(s). This group would provide advice on programme design and marketplace requirements. It may be warranted in certain cases to subsume the industry advisory group with the inter-institutional coordinating mechanism.

## **8. EVALUATION POLICY**

- 8.1 As with any other programme proposal, a proposal for an articulated programme should present the evaluation procedure and cycle that would follow the implementation of the programme. This procedure should include graduate follow-ups. Given that two (or more) institutions will be involved, each with their own internal review mechanisms, particular attention should be paid to the evaluation policy of articulated programmes. In particular, the policy should include the frequency and time line of the evaluation process; identify the coordinating unit responsible for the overall management of the assessment process and for defining the assessment criteria, and determine the procedures and areas of responsibilities to ensure a proper follow-up to the review.



## **II. MONITORING INSTITUTIONAL QUALITY ASSURANCE POLICIES AND PROCEDURES**

### **1. Objective**

The monitoring of quality assessment procedures and practices is especially important given that the cornerstone of quality assurance is self-assessment by the institutions.

The specific objective of the MPHEC monitoring function is to ascertain that the procedures used by institutions to assess the quality of existing programmes, and other functions as appropriate, are performing adequately as quality control mechanisms.

The purpose of the monitoring process is to answer the following two questions: first, “How well is the institution achieving what it set out to accomplish in its quality assurance policy?”, and second, “Is the institution doing what it should be doing in the area of quality assurance?”.

The process is formative; institutional policies and practices are reviewed with a view to provide assistance and advice to institutions.

### **2. Focus**

The monitoring function focuses on three elements:

- the institutional quality assessment policy;
- quality assessment practices; and
- follow-up mechanisms.

The process pays particular attention to each institution’s mission and values.

### **3. Scope**

Given that the renewed MPHEC mandate provides for a direct focus on university education, only degree-granting institutions on the MPHEC schedule are reviewed in the context of this policy. The following institutions are included in the process:

Acadia University  
Atlantic School of Theology  
Dalhousie University, including Dal-Tech  
Mount Allison University  
Mount Saint Vincent University  
Nova Scotia Agricultural College  
Nova Scotia College of Art and Design  
St. Francis Xavier University

Saint Mary's University  
St. Thomas University  
Université de Moncton  
Université Sainte-Anne  
University College of Cape Breton  
University of King's College  
University of New Brunswick  
University of Prince Edward Island

#### **4. Cycle**

The monitoring function will be performed once at each institution in a seven-year cycle. Over the course of the seven-year cycle, two reviews per year will be conducted for the first five years, while three reviews will be conducted in each of the remaining two years of the cycle. The particular order will be established by the MPHEC Quality Assurance Monitoring Committee, in consultation with the institutions. The first review will begin in early 1999.

#### **5. Establishing a Baseline**

Given that it will take seven years to complete the first cycle of the monitoring process, the first step in the overall monitoring process will focus on establishing a baseline defining institutional activities and priorities in the area of quality assurance. In early 1998, each institution will be asked to provide a statement describing how compatible their current activities in the area of quality assurance are with the MPHEC quality assurance policy in general, and with the Guidelines for Institutional Quality Assurance Policies in particular. In addition, the statement should identify future priorities in the area of quality assurance. The statement will be submitted by January 1999.

#### **6. A Quality Assurance Monitoring Committee**

The Quality Assurance Monitoring Committee carries out the monitoring function on behalf of the Commission. It is essentially established as a peer review committee. The members are respected by the post-secondary education community, have some appreciation for, and expertise in, quality assurance and periodic programme and unit reviews, and are not current members of an institution's senior administration. The Terms of Reference of the Committee are appended to the policy.



## 7. Process and Outcomes

The monitoring process takes place over a 10- to 12-month period. Two or three institutions are reviewed simultaneously.

The quality assurance monitoring process includes the following steps:

### *Step 1 Initial meeting*

Normally, the first step of the process is a meeting to clarify the expectations and the process, as well as to establish the time frame for each step.

### *Step 2 Self-study*

The self-study focusses on the quality assessment and improvement processes in place at the institution under review. It is both descriptive *and* analytical and includes clear statements as to how well the quality assessment and quality improvement processes are performing, and whether these processes are adequate for the task.

The self-study provides answers to the two key questions guiding the monitoring process: first, “How well is the institution achieving what it set out to accomplish in its quality assurance policy?”, and second, “Is the institution doing what it should be doing in the area of quality assurance?”.

The institution has a three- to four-month period after the initial meeting to produce the self-study and forward it to the MPHEC.

### *Step 3 Analysis of all pertinent documentation*

Over the course of the following six to twelve weeks, the Committee and staff analyze the documentation and request any additional information deemed necessary.

The basis of the Committee’s report is the documentation forwarded by the institution, to include:

1. The institutional quality assessment policy. The Monitoring Committee uses the policy components and assessment criteria outlined elsewhere in the MPHEC Quality Assurance Policy as the backdrop to review each institutional policy;
2. The institutional self-study;

3. The list of all programme or unit assessments conducted in the last seven years. The institution may indicate which units or programmes in that list reflect particularly well the institution's mission and values; and
4. The schedule of forthcoming assessments.

From the list of assessments carried out by the institution, the Committee selects a number of assessments, normally from three to five, for further review by the Committee. The programme or unit assessments are chosen to reflect as accurately as possible the institution's mission and values. The institution is then asked to forward:

5. The complete dossier of these assessments.

#### *Step 4 On-site visit*

The on-site visit completes the monitoring of institutional policy and practices. The Committee meets with individuals identified during Step 2 and those identified during consultations with the institution in preparation for the visit. The objective of the on-site visit is to validate the statements offered in the self-study, as well as to verify elements contained in the assessments reviewed by the Committee.

#### *Step 5 Report*

The Committee prepares a report on its findings and formulates recommendations, first and foremost, to the institution. The report is forwarded to the institution to validate factual information within eight to twelve weeks following the on-site visit. The institution can submit any correction to the report within 30 days of receipt.

The report is then submitted to the Commission, accompanied by the comments and advice when applicable of the AAU-MPHEC Academic Advisory Committee. Once approved by the Commission, the report is made available by request to the public, listed as an MPHEC publication, and mentioned in the annual report filed by MPHEC.

#### *Step 6 Institutional response*

The institution then develops a plan of action to respond to the report, to be filed with the MPHEC no later than one year following the publication of the monitoring report. The Committee and the Commission may comment and respond to the plan of action. A brief description of the institution's

plan of action, and of the Committee's or Commission's response, when applicable, are included in the next MPHEC annual report.

## **8. Review of the MPHEC Monitoring Process**

At the end of the first seven-year cycle, a 12-month hiatus will be imposed to review and analyze the process. Institutions will be consulted in this review. Among the questions to be answered at that time are:

1. Has the process met the anticipated objectives and outcomes?
2. What are its strengths and weaknesses?
3. How can it be improved?
4. Is there value in pursuing it into a second cycle?



**APPENDIX II.1**  
**QUALITY ASSURANCE MONITORING COMMITTEE**

**TERMS OF REFERENCE**

**Purpose**

1. To advise and assist the Maritime Provinces Higher Education Commission, an agency of the Council of Maritime Premiers, in ensuring continuous improvement in the quality of academic programmes and of teaching at post-secondary institutions included within its scope by monitoring institutional quality assurance activities, as described in the MPHEC Quality Assurance Policy.

**Function**

2. The Committee shall:
  - Monitor the outcomes of institutional quality assessment policies and procedures, within the parameters established by the Commission. These parameters are described with details on the process in the Commission Quality Assurance Policy.
  - Suggest relevant research/publications to the Commission and assist in their preparation, as they relate to quality assurance.
  - Examine issues or carry out projects as the Commission may deem necessary and appropriate, as they relate to quality assurance.

**Objective of the monitoring function**

3. The specific objective of the monitoring function is to ascertain that the procedures used by institutions to assess the quality of existing programmes, and other functions as appropriate, are performing adequately as quality control and quality improvement mechanisms.
4. The purpose of the Committee in carrying out the monitoring process is to provide answers to the following two questions: first, “How well is the institution achieving what it set out to accomplish in its quality assurance policy?”, and second, “Is it doing what it should be doing in the area of quality assurance?”.
5. The process is intended to be formative; institutional policies and practices will be reviewed with a view to provide assistance and advice to institutions.

**Membership**

6. The Committee will be composed of seven members including the Chair.
7. At least two Committee members are also Commission members.
8. At least two, but ideally three Committee members will be selected from a list of nominees suggested by the AAU.
9. At least one, but ideally two Committee members are students.

10. One Committee member is also a member of the AAU-MPHEC Academic Advisory Committee.
11. Members are appointed for a three-year mandate. *(Note: to ensure continuity, three members of the initial membership will be appointed for a four-year mandate.)*

### **Chair**

12. The Chair of the Committee is one of the Commission members appointed to the Committee and is designated by the Chair of the Commission.
13. The Chair of the Committee chairs meetings.

### **Reporting Structure**

14. The Committee reports to the Commission. It shall report to the Commission at regular interval.
15. Monitoring reports are distributed to the AAU-MPHEC Academic Advisory Committee in advance of the Commission meeting to allow time for comment and advice.

### **Staffing**

16. The Director of Academic Planning and Research and staff as assigned, is responsible for monitoring institutional quality assurance policies and procedures and reports to the Commission the Committee's findings and recommendations.
17. The Committee is allowed to engage outside consultants, as required, to assist in the monitoring functions.

**APPENDIX II.2**  
**GUIDELINES FOR INSTITUTIONAL QUALITY ASSURANCE POLICIES**

**1. Purpose of the Guidelines**

The aim of these guidelines is to assist the institutions in establishing or improving their policies and processes and to support the Commission when assessing the policies and processes in place.

**2. Focus of the Institutional Quality Assurance Policy**

An institutional quality assurance policy should reflect the institution's mission and values. All institutions should have a quality assurance policy in place.

A quality assessment policy should focus on units (academic and other) and/or on programmes (or groups of programmes). The policy should include provisions to cover all the functions and units of the institution (research, administration, community service, etc.).

**3. Objective of the Institutional Quality Assurance Policy**

The institutional policy's objectives should be, at a minimum, to improve the quality of programmes and to ensure that stated student outcomes can be realized.

The purpose of the assessment itself should be to answer the following two questions: first, "How well is the unit or the programme achieving what it set out to accomplish?", and second, "Is it doing what it should be doing?"

**4. Components of an Institutional Quality Assessment Policy**

In addition to reflecting institutional mission and values, the institutional quality assurance policy should be comprehensive and apply to all programmes and units. It should also, at a minimum, address the following elements:

1. Identify the coordinating or administrative unit responsible for the overall management of the quality assurance process. This unit should be located at a higher echelon of the institution's administrative structure, and be accountable to the institution's leaders.
2. Define the assessment criteria (see section 5).
3. Require a self-study component, usually involving faculty and students participating in the programme or unit. The self-study should be student-centred as it would aim, in most cases to assess the quality of learning. The self-study should be structured according to the defined assessment procedures criteria. When and where appropriate, the results of accreditation may be included and/or substituted for this component, or a portion thereof.
4. Entail an external review component, usually carried out by two experts external to the institution. As appropriate, the results of accreditation may be included and/or substituted for this component, or a portion thereof.

5. Incorporate the participation of faculty not directly involved in the reviewed programme (or discipline or unit).
6. Enable the participation of the wider network of stakeholders, such as employers, graduates, professional associations, the local community, etc.
7. Include appropriate mechanisms, that is at a minimum the procedures and areas of responsibility, to ensure a proper follow up to the assessment.
8. Establish the assessment cycle, which should not exceed seven years. Newly established programmes or units should be assessed once fully implemented, usually at the three- to five-year mark.
9. Include provisions to review the policy periodically.

The policy should be tabled with the MPHEC as the body responsible for quality assurance.

## **5. Key Assessment Criteria**

The assessment procedures and criteria should be student-centred, and reflect institutional mission and values. The assessment criteria should be comprehensive (i.e. to include all programme and units) and address the following elements:

1. Assess intended and delivered curriculum;
2. Review teaching practices;
3. Clarify the expected outcomes for students;
4. Examine the degree to which those outcomes are realized;
5. Evaluate the appropriateness of support provided to students;
6. Appraise the research carried out by the academic unit or by faculty involved in the reviewed programme;
7. Value the contribution of the unit or programme to other aspects of the institutional mission (community service, for example); and
8. Value the contribution of the unit or programme to the larger community or society in general.



**APPENDIX II.3**  
**ASSESSMENT CRITERIA FOR THE MPHEC MONITORING PROCESS**

**I Introduction**

The specific objective of the monitoring function is to review the policy, processes and procedures used by institutions to assess the quality of existing programmes and other functions as appropriate, to ensure they are performing adequately as quality control and quality improvement mechanisms.

The purpose of the Committee in carrying out the monitoring process is to provide answers to the following two questions: first, “How well is the institution achieving what it set out to accomplish in its quality assurance policy?”, and second, “Is it doing what it should be doing in the area of quality assurance?”. The Committee will be assessing the institution’s quality assurance policy and related processes, but will not be assessing the quality of specific programmes or units.

The process is intended to be formative; institutional policies and practices will be reviewed with a view to provide assistance and advice to institutions.

**II Assessment criteria**

1. Institutional context of the policy
  - a. The policy is consistent with the institution’s mission and values.
2. General
  - a. Appropriate scope of the policy, i.e. the policy is comprehensive in terms of reviewing all programmes and units.
  - b. The policy follows the Commission’s guidelines. Any discrepancy is explained/ justified.
  - c. The policy promotes *continuous* quality improvement.
3. Policy objectives
  - a. Appropriate scope of objectives.
  - b. Links to programme quality improvement.
  - c. Links to decision-making process. (Use to be 3e)
  - d. Links to realization of stated student outcomes.
  - e. Links to the economic, cultural and social development of the university’s communities.

4. Policy components
  - a. Defined assessment criteria and their appropriateness, to include the adequacy of financial, human and physical resources.
  - b. General guidelines for the programme/unit self-study are established and are appropriate.
  - c. Objective external review process: clearly defined generic terms of reference for, and selection process for, experts.
  - d. Procedures allowing for the participation of students, faculty members, staff and the community-at-large are established.
  - e. (If the policy focuses on units) Mechanism(s) to review interdisciplinary programmes, typically not examined when a policy focuses on units.
  - f. Identified linkages between programme review and accreditation requirements.
  - g. Appropriate schedule of programme/unit reviews.
  - h. Procedures to review the policy itself are identified.
  
5. Policy implementation (quality assessment practices)
  - a. Programme/unit self-studies address the institution's assessment criteria.
  - b. Programme/unit self-studies should include a component that is student-centered, as they aim, among other things, to assess the quality of learning.
  - c. Students, faculty members, staff and the community-at-large participate in the review process.
  - d. External review process is objective; experts selected during the peer review process have the appropriate expertise.
  - e. Policy and procedures monitor the continuing relevance of the programme.
  - f. Schedule of reviews is adhered to, or modifications to schedules can be reasonably explained or justified.
  - g. Required follow-up action is undertaken.
  
6. Policy administration
  - a. Coordinating or administrative unit identified as the lead is appropriate.
  - b. Effective support has been offered to programmes and units under review.
  - c. Appropriate follow-up mechanisms are in place and are functioning appropriately.
  - d. Assessment results have been appropriately disseminated.
  - e. The process informs decision-making.

(Approved April 23, 2001)