



UNIVERSITY OF  
**WATERLOO**

Institutional Quality Assurance Process (IQAP)

Office of the Associate Vice-President, Academic  
and Office of the Associate Provost, Graduate Studies  
University of Waterloo  
Waterloo, Ontario N2L 3G1

Approved March 8, 2011  
Revised January 16, 2017

## Table of Contents

<b>A. PURPOSE AND SCOPE OF REVIEWS</b>	<b>3</b>
<b>B. CYCLICAL REVIEWS OF EXISTING ACADEMIC PROGRAMS</b>	<b>5</b>
1. ACADEMIC PROGRAMS NOT RELATED TO PROFESSIONAL ACCREDITATION	5
<i>Quality Council Evaluation Criteria</i>	6
<i>Guidelines for Self-Studies</i>	8
<i>Guidelines for Site Visits</i>	9
2. ACADEMIC PROGRAMS RELATED TO PROFESSIONAL ACCREDITATION	15
3. MULTI- OR INTERDISCIPLINARY PROGRAMS	16
4. PROGRAMS JOINT WITH OTHER UNIVERSITIES	17
5. PROGRAMS AT THE FEDERATED OR AFFILIATED INSTITUTIONS	17
6. CREDIT-BEARING DIPLOMA AND CERTIFICATE PROGRAMS	18
<b>C. REVIEWS OF NEW PROGRAMS</b>	<b>18</b>
DEFINITION OF A NEW PROGRAM	19
AIMS	21
PLANNING	22
PROGRAM PROPOSAL	22
APPROVAL PROCESS	24
SITE VISIT (IF REQUIRED)	24
<b>D. MAJOR MODIFICATIONS OF EXISTING PROGRAMS</b>	<b>26</b>
DEFINITION OF A MAJOR MODIFICATION	26
PROCEDURE	27
<b>E. AUDIT PROCESS</b>	<b>27</b>
<b>F. REFERENCES</b>	<b>28</b>

## A. Purpose and Scope of Reviews

Consistent with good educational practice, the University of Waterloo regularly reviews its academic programs. The [schedule](#) for undergraduate and graduate program reviews is based on a seven year cycle.

This Institutional Quality Assurance Process (IQAP) document is consistent with recommendations of the Ontario Universities Council on Quality Assurance (the Quality Council), and is effective July 1, 2011. Waterloo's IQAP document replaces the previous guidelines for undergraduate programs (originally approved by Senate in February 1997), and previous guidelines for graduate programs (Ontario Council for Graduate Studies guidelines originally implemented in 1982). The current version of Waterloo's IQAP was reviewed and updated in May 2015.

Any changes to the IQAP are subject to approval by Waterloo's Senate and by the Quality Council. The review processes described herein are subject to regular audit by the Quality Council, on a schedule determined by the Quality Council. The threshold framework for degree expectations are Waterloo's guidelines for Undergraduate Degree Level Expectations (adopted by Senate in 2008), and Waterloo's guidelines for Graduate Degree Level Expectations (adopted by Senate in 2010). These in turn conform to the Guidelines for Degree Level Expectations adopted by the Ontario Council of Academic Vice-Presidents (OCAV) 2005.

In addition to the Undergraduate Degree Level Expectations, Waterloo intends its graduating students at the Bachelor's level to be able to articulate their learning from experiential or applied opportunities, and to demonstrate an understanding of the intellectual, social, cultural, and political diversity of the world in which we live.

The OCAV framework for degree expectations, together with Waterloo's enhancements, will support departments and academic units in planning or revising curricula and in communicating program goals and outcomes to students and other stakeholders. As of July 2011, departments and faculties engaged in program review shall use these guidelines as base expectations while retaining the flexibility to add objectives unique to their specialties.

The [Quality Assurance Framework](#) of the Quality Council is the foundational document for Waterloo's IQAP. This framework defines a degree program as the "complete set and sequence of courses, combinations of courses and/or other units of study, research and practice prescribed by an institution for the fulfillment of the requirements of a particular degree". Programs<sup>1</sup> are not necessarily congruent with academic organizational units, and provision should be made to include joint programs and multi- or inter-disciplinary programs in a way

---

<sup>1</sup>Note that while Waterloo's student information system often uses the term "plan" to refer to a program, the term "program" will be used throughout this document to avoid confusion.

appropriate for the institution. At Waterloo, many students complete their degrees in a faculty rather than in a department or school. Faculty-based programs are treated similarly to their counterparts in departments or schools.

Following the Quality Assurance Framework, the scope of academic reviews at Waterloo covers “new and continuing undergraduate and graduate degree/diploma programs whether offered in full, in part, or conjointly by any institutions federated and affiliated with the university.” This also extends “to programs offered in partnership, collaboration or other such arrangement with other postsecondary institutions including colleges, universities, or institutes, including Institutes of Technology and Advanced Learning”.

At Waterloo, the fundamental purposes of the review process are to:

1. help each program to achieve and maintain the highest possible standards of academic excellence, through systematically reflecting on its strengths and weaknesses, and looking forward to determine what actions would further enhance quality in the program;
2. assess the quality of the program relative to counterpart programs in Ontario, Canada and internationally;
3. meet public accountability expectations through a credible, transparent, and action-oriented review process;
4. create an institutional culture which understands and values the benefits of program reviews, while recognizing the significant workload implications of preparing a self-study, hosting a site visit, and providing a two-year progress report.

The design of the Program Review process is intended to be as streamlined as possible, while ensuring its accessibility and transparency to the Waterloo community. At Waterloo, the responsibility for undergraduate academic reviews rests with the position of Associate Vice-President, Academic. The responsibility for graduate academic reviews rests with the Associate Provost, Graduate Studies. Responsibility for combined (or augmented) reviews of undergraduate and graduate programs is allocated to one of these two individuals. These are the sole institutional contacts with the Quality Council.

Waterloo encourages combined augmented reviews where feasible. Not only can they be more efficient, they also have academic merit as there are frequently interactions between the undergraduate and graduate programs. Academic units proposing an augmented review should indicate their intention to the Associate Vice-President, Academic (AVPA) or Associate Provost, Graduate Studies (APGS) as soon as possible prior to the academic year in which the self-study actually takes place.

Academic programs are normally reviewed every seven years. To achieve alignment between the timing of reviews of undergraduate and graduate programs, dates can be adjusted, subject to the interval between reviews of individual programs not exceeding eight years. The accreditation schedule for professional programs can be adjusted to allow the program review

to occur simultaneously with the professional accreditation review.

Policy since 1998 has been that:

1. reviews would be treated as “whole of program reviews” in the belief that undergraduate and graduate programs should be considered together;
2. interdisciplinary options and minors are reviewed under the same arrangement as for single-discipline reviews except for the composition of the review committee;
3. review processes for professional accreditation would be examined to determine if they meet the Waterloo and the Quality Council requirements for a program review.

The self-study process is started during the preceding academic year with a joint presentation in September organized by the AVPA (undergraduate reviews) and the APGS (graduate reviews). In cases where the academic unit chooses to submit an augmented review, either the AVPA or APGS assumes primary responsibility for overseeing that particular review. Augmented reviews are shared in order to balance workloads. At the presentation, the nature of the review process is discussed, and opportunity is provided for questions. After the presentation, departments can contact either the AVPA or APGS office for further clarification on matters pertaining to their programs. The self-study is submitted the following June, so that the site visit could be scheduled for either the following fall or winter term. Data for the self-study is provided primarily by Institutional Analysis and Planning (IAP) to ensure that it reflects centrally compiled institutional data, ensuring consistency in definitions, sources and dates. This data is not publicly available.

The following sections outline the expectations and processes associated with program reviews at the University of Waterloo.

## **B. Cyclical Reviews of Existing Academic Programs**

### ***1. Academic Programs not related to Professional Accreditation***

The Quality Assurance Framework specifies the key elements for the Institutional Quality Assurance Process (IQAP). Waterloo’s approach to fulfilling each of the criteria is described in the sections “Guidelines for Self-Studies” and “Guidelines for Site Visits” below.

According to the Quality Assurance Framework, the institutional review practice should:

1. include a self-appraisal by faculty, staff and students participating in the program (see section below “Guidelines for Self-Studies);
2. have an external evaluation, including a site visit by a review team. The composition of the review team is described below in Section 1.1 in “Guidelines for Site Visits);
3. describe the process of assessment of the self-study and review within the university,

and describe how a final assessment report will be drafted, including an implementation plan for recommendations (see sections below “Quality Council Evaluation Criteria”, “3. Guidelines for the Report from the Review Team”, “4. After the Site Visit”);

4. describe reporting requirements (see section below “4. After the Site Visit”);
5. provide an institutional manual that supports the institutional quality assurance process. Note that the approach at Waterloo here has been to develop an informative web site as well as a comprehensive template for the self-study document (Volume I – Self-Study), as well as templates for the required supporting documentation (Volume II – Faculty CVs, Volume III – Proposed Reviewers).

How Waterloo’s IQAP meets criteria 1 through 4 is described below.

### **Quality Council Evaluation Criteria**

The curricular content, admission requirements, mode of delivery, basis of evaluation of student performance, commitment of resources and overall quality of any program and its courses are all necessarily related to their goals, learning objectives and learning outcomes. Goals provide an overview for students, instructors and program/course evaluators of what the program or course aims to accomplish. Learning objectives are an expression of what the instructor intends that students should have learned or achieved by the end of the program or course. Learning outcomes are what the students have actually learned or achieved in the program or course.

The Quality Assurance [Framework](#) specifies that the review of existing programs should use the following criteria (excerpted from Quality Assurance Framework):

#### **1. Objectives**

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

#### **2. Admission requirements**

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

#### **3. Curriculum**

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

#### **4. Teaching and assessment**

- a) Methods for assessing student achievement of the defined learning outcomes and degree learning expectations are appropriate and effective.

- b) Appropriateness and effectiveness of the means of assessment, especially in the students' final year of the program, in clearly demonstrating achievement of the program learning objectives and the institution's statement of Degree Level Expectations.

### **5. Resources**

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

### **6. Quality indicators**

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

### **7. Quality enhancement**

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

### **8. Additional graduate program criteria**

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

## Guidelines for Self-Studies

The chair/director of the program under review arranges for completion of a self-study with input from the dean, faculty members, staff, students and alumni. The [template](#) provided for the self-study reflects closely the guidelines articulated by the Quality Assurance Framework. The template includes the major headings relevant to self-assessment of the past, present and future, the organization and the people involved, research, service, teaching (with special attention to co-operative education and online learning), the students and the support available (human, physical and financial).

The Waterloo guidelines are broad in scope, so that each program being reviewed can emphasize those aspects that are most relevant. The review covers the last seven fiscal years (spring/fall/winter), with emphasis on the last several years. IAP provides most of the historical data for each program review.

Under each heading in the Waterloo guidelines are suggested areas that could be discussed and critically examined. In some cases, a topic may fit just as well under another heading. It is not necessary to repeat information in several sections, and generally it will be up to the program to decide where information should be included in the self-study. The self-study should be broad-based, reflective, forward-looking and include critical analysis.

The self-study should address and document the:

- consistency of the program's learning outcomes with the institution's mission and Degree Level Expectations, and how its graduates achieve those outcomes
- program-related data and measures of performance, including applicable provincial, national and professional standards (where available)
- integrity of the data
- review criteria and quality indicators identified above
- concerns and recommendations raised in previous reviews
- areas identified through the conduct of the self-study as requiring improvement
- areas that hold promise for enhancement
- academic services that directly contribute to the academic quality of each program under review
- [participation of program faculty, staff, students and alumni](#) in the self-study

Faculty, staff and students associated with a program should be provided the opportunity to participate in the self-appraisal process and to comment on the self-study. Faculty from the Affiliated and Federated Institutions of Waterloo and part-time faculty who regularly teach in the program are also to be given this opportunity. If there are differing views among the faculty these should be noted. Also all faculty members should have the opportunity to participate in the program's response to the review team report. Again the response should note differing views if there is no consensus among faculty. It is also good practice, once the program review has been completed, to inform faculty, staff and students (e.g., at a town hall meeting) of the

review team's findings and plans for program improvement.

The completed self-study is reviewed and approved by the AVPA for undergraduate programs, the APGS for graduate programs, or both for augmented reviews.

### **Guidelines for Site Visits**

The following guidelines will assist departments/schools in making arrangements for the site visit related to their program reviews. The program under review takes the lead role in making arrangements for scheduling the site visit. However, arrangements should be prepared in consultation with the office of the AVPA or the APGS, as appropriate. For augmented reviews (reviews combining both undergraduate and graduate offices), one office will be assigned primary responsibility, and consultation with the other will occur as needed. Contact the relevant administrative assistant.

The schedule for the site visit should be prepared at least one month in advance of the visit, so that the review team can see the schedule, and have an opportunity to suggest changes.

#### **1. Prior to the Site Visit**

1.1 The chair/director of the program under review, in consultation with the dean of the faculty, develops a proposed list of reviewers (including full contact information and a brief biography) which is submitted to the AVPA/APGS (Volume III – Proposed Reviewers). For most program reviews, two external reviewers and one internal reviewer are required. Five names should be proposed, and ranked in order of preference, for each of (1) an external reviewer who will normally come from a university in Ontario; (2) an external reviewer who will normally come from a university outside Ontario, but at the undergraduate level usually within Canada. One external reviewer may be a non-university appointee (e.g., someone from government or the private sector), provided that she/he has appropriate qualifications to fulfill the reviewer role. An internal reviewer, who will come from Waterloo but normally from outside the home faculty, will be selected by the AVPA/APGS.

For interdisciplinary options and minors not attached to degree programs, these programs are reviewed by two arm's length reviewers (see 1.2. below), at least one of whom should have some relevant disciplinary experience. In this situation, one reviewer may be from the faculty in which the program resides.

1.2 All proposed reviewers should be at [arm's length](#) from the program, meaning not collaborators, supervisors/supervisees, relatives, etc. The AVPA/APGS will make the final choice of members for the review team.

1.3 The chair/director identifies several two-day blocks suitable to the program under review for the site visit, and provides those to the AVPA/APGS.

- 1.4 The office of the AVPA/ APGS contacts the proposed external and internal reviewers, to invite them to serve as the external reviewers for the program review process. Once reviewers have agreed to participate, they are sent a link to an “External Reviewers’ Report” template where the evaluation criteria are described.
- 1.5 The office of the AVPA/APGS confirms the time and arrangements for the site visit with the reviewers.
- 1.6 The office of the AVPA/APGS co-ordinates some travel arrangements and the hotel accommodations for the external reviewers.
- 1.7 The office of the AVPA/APGS sends a copy of the self-study to the external reviewers at least one month prior to the visit.

## **2. The Site Visit**

- 2.1 The external reviewers normally arrive no later than the evening before the site visit activities are to begin.
- 2.2 An initial meeting with the AVPA/APGS is held at the start of the visit.

The purpose<sup>2</sup> of the meeting is to ensure that the reviewers:

- understand their role and obligations
  - identify and commend the program’s notably strong and creative attributes
  - describe the program’s respective strengths, areas for improvement, and opportunities for enhancement
  - recommend specific steps to be taken to improve the program, distinguishing between those the program can itself take and those that require external action
  - recognize the institution’s autonomy to determine priorities for funding, space, and faculty allocation
  - respect the confidentiality required for all aspects of the review process
- 2.3 The review team usually has two days to meet with key stakeholders in the program under review. For reviews of interdisciplinary options and minors not attached to degree programs, the site visit should take place over a single day.

The chair/director should make arrangements for the review team to meet at a minimum with the:

- dean and associate dean(s) (subject to availability) relevant to the program under

---

<sup>2</sup> from the Quality Assurance Framework

review

- chair/director and associate chairs
- faculty (including adjunct faculty and those in the Affiliated and Federated Institutions of Waterloo where applicable) in groups, or, if feasible, individuals when requested
- staff
- the relevant Librarian
- Co-operative Education and Career Action (if there is a co-op stream)
- undergraduate students (more than one time slot should be identified for undergraduates to ensure that adequate opportunity is provided to meet with the Review Team). These meetings should be arranged without faculty present, to facilitate frank and open discussion. It is good practice to ask the departmental/school undergraduate student association (where one exists) to invite students to participate in this meeting.
- graduate students, with particular attention to ensuring teaching assistants are well represented. As with the undergraduates, these meetings should be arranged without faculty present, and it is good practice to ask the departmental/school graduate student association (where one exists) to invite students to participate in this meeting.
- Vice-President, Academic and Provost (subject to his/her availability)

Graduate reviews will conclude with a second/wrap-up meeting with the APGS; undergraduate reviews will conclude with a second/wrap-up meeting with the AVPA; and augmented reviews will typically conclude with a meeting that includes both the APGS and AVPA.

- 2.4 If possible, the review team should be provided by the program under review with an office in which the reviewers can leave their belongings, and have discussions among themselves.
- 2.5 The host program should discuss with the review team if, over lunch periods, the review team would like to be by itself, in order to discuss what has been learned, or whether it would appreciate the opportunity to meet with other people.
- 2.6 The program should allocate time in the evening after the first day of the site visit, and in the latter part of the second day, for the review team members to discuss among themselves what they have been learning, how they will structure their report, and how they will divide the tasks for writing the report. The internal member of the review team typically does not participate directly in the writing of the report. As the review team's report is expected within two weeks of the site visit, they must be given sufficient time to make arrangements for the preparation of the report before completing the site visit.

### **3. Guidelines for the Report from the Review Team**

3.1 The review team will prepare a report which should be submitted to the AVPA or APGS within two weeks of the completion of the site visit. For augmented reviews, sections pertaining to the undergraduate and graduate programs should be clearly differentiated. The report should cover the evaluation criteria identified in the Quality Assurance Framework. Reviewers may find the external reviewers' report template to be useful. The report should include relevant details on the following:

**Part 1:** The Review Process

- time of visit
- documents reviewed
- individuals and groups met
- adequacy of site visit arrangements

**Part 2:** Findings, Conclusions and Recommendations

3.2 In preparing its report, the review team should be aware that the Quality Assurance Framework specifies that a review of programs should address the review criteria 1 through 8 (if 8 is applicable) in the previous section "Quality Council Evaluation Criteria". The review team is welcome to add other topics as long as attention is given to the points highlighted above.

3.3 The most useful report for Waterloo is one which is "constructively critical", identifying strengths which should be protected and enhanced, weaknesses or challenges that deserve attention, and new opportunities. When weaknesses or challenges are identified, the report will be more helpful if suggestions are presented regarding how they could be addressed.

3.4 The review team report will lose credibility within Waterloo if it is perceived primarily to be a "booster report" for a discipline or profession, and only recommends providing more funding to the program. A more helpful report will consider what could be done by the program, by itself or in collaboration with its faculty and the University, in using limited resources more efficiently and effectively, along with considering where new resources would represent a strategic investment to allow a program to increase quality.

3.5 The review team report, if necessary, may include a confidential letter of transmittal to cover personnel issues. This letter would only be available to the Dean, AVPA/APGS, and the Vice-President, Academic and Provost.

### **4. After the Site Visit**

4.1 The review team report is submitted to the AVPA/APGS, and copies are then distributed to the Vice-President, Academic and Provost, the dean of the faculty, and the chair/director of

the program.

- 4.2 The external review team members submit their travel and accommodation expense claims to the office of the AVPA/APGS. Honoraria for the external reviewers are paid after receipt of their final report.
- 4.3 The program under review is invited to provide comments to the AVPA/APGS, verbally or in writing, regarding the experience with the site visit, and especially to identify aspects of the site visit that could be improved. It is important that students also have an opportunity to provide comments related to the site visit.
- 4.4 The chair/director and the faculty members of the department/school have an opportunity to provide comments on factual errors in the review team report. Comments should be sent to the AVPA/APGS within four weeks of receiving a copy of the report. If no comments are received within that time period, unless other arrangements have been made, it will be concluded that the program has no initial comments to make about the report.
- 4.5 The chair/director, will submit a report (“program response”) endorsed by the faculty dean (or equivalent in the Affiliated and Federated Institutions of Waterloo) to the AVPA/APGS addressing each of the following:
  - plans and recommendations proposed in the self-study report
  - recommendations advanced by the review team in its report

The program response should include a credible implementation plan that not only addresses the substantive issues identified from the program review process but also identifies clearly:

- what actions will follow from specific recommendations
- any changes in organization, policy or governance that would be necessary to follow the recommendations
- resources, financial or otherwise, required to support the implementation of selected recommendations
- who will be responsible for providing resources
- a proposed timeline and responsibility for oversight for implementation of any of those recommendations
- priorities for implementation and realistic timelines for initiating and monitoring actions

The program response should be submitted within 10 weeks of the program receiving its copy of the review team report.

- 4.6 The AVPA/APGS provides a [final assessment report](#) (“FAR”) to the Vice-President, Academic and Provost, outlining the nature of the review process, the main findings,

conclusions and recommendations from the review team report, and the program response, including the implementation plan. The FAR is submitted within four weeks of receiving the chair's/director's report described in 4.5 above. The FAR is presented for approval to Senate Undergraduate Council for undergraduate program reviews or Senate Graduate and Research Council for graduate program reviews, or to either or both councils for augmented reviews, as jointly determined by the Associate Vice-President, Academic and the Associate Provost, Graduate Studies. The program chair/director may be invited to these meetings to respond to questions.

- 4.7 The AVPA/APGS submits the FAR to Senate for information. The Vice-President, Academic and Provost reports to the Board of Governors once a year on which programs were reviewed the previous academic year. The FAR is available publicly in the Senate agenda as well as in the Academic Program Reviews website. However, other documents associated with the program review (self-study, review team report, program response) are not publically available.
- 4.8 The Vice-President, Academic and Provost, or designate, will have responsibility for ensuring that all recommendations and issues arising from the reviews are dealt with in a manner that brings closure to the process, including provision of necessary resources.
- 4.9 The chair/director is responsible for a [two-year progress report](#) on steps taken since the program review was completed. This report is presented to either or both Senate Undergraduate Council/Senate Graduate and Research Council for approval as jointly determined by the Associate Vice-President, Academic and the Associate Provost, Graduate Studies, and then Senate for information. The two-year report is available publicly in the Senate agenda as well as in the Academic Program Reviews website.

The two-year progress report must outline what progress has been achieved to date with regards to the implementing plan from the last program review. The report does not need to be long, but should accomplish the following:

- clearly describe progress achieved on the various action items in the original implementation plan, and discernible impacts, if any
- propose an amended implementation schedule for items that are behind schedule. There should be a clear indication of when specific actions will occur, who will be responsible for oversight or implementation, and, if there are resource implications, where those resources will come from
- explain any circumstances that have altered the original implementation plan
- if certain recommendations or planned actions are no longer considered appropriate, indicate why
- address any significant developments or initiatives that have arisen since the program review process, or that were not contemplated during the program review process
- report on anything else the program considers to be appropriate to bring to Senate concerning this program.

4.10 The FAR as well as the two-year progress report are available to the Ontario Quality Council through Waterloo’s annual reporting.

Table 1. Summary of timelines for reviews of existing programs

Fall (September), previous academic year	Meeting of those responsible in department/school, with AVPA/APGS and resource persons; final decision as to whether review will be augmented or only undergraduate/only graduate
June 1	Complete draft of self-study submitted to AVPA/APGS
July 1	Final copies of Volume I (self-study), Volume II (faculty CVs) and Volume III (proposed reviewers) submitted to AVPA/APGS
Fall/Winter	Site visit occurs
2 weeks after site visit	External reviewers submit report to AVPA/APGS
4 weeks after external reviewers’ report received	Chair/director submits comments on factual errors/issues in report to AVPA/APGS or both for augmented reviews
10 weeks after external reviewers’ report received	Program response submitted on what was learned from self-study and external reviewers’ report, and plans for future
4 weeks after program response received	AVPA/APGS submits final assessment report (FAR) to Senate Undergraduate Council/Senate Graduate and Research Council for approval, and then to Senate for information. FAR is made available to the Quality Council in July.
February of subsequent academic year	Provost reports to Board of Governors all programs reviewed in previous academic year cycle
2 years after site visit	Two-year progress report submitted by department/school to Senate Undergraduate Council/Senate Graduate and Research Council for approval, and Senate for information

## **2. Academic Programs Related to Professional Accreditation**

The Quality Assurance Framework (section 4.2.7) states that “The IQAP may allow for and specify the substitution or addition of documents or processes associated with the accreditation of a program, for components of the institutional program review process, when it is fully consistent with the requirements established in this framework... A record of substitution or

addition, and the grounds on which it was made, will be eligible for audit by the Quality Council.”

The AVPA/APGS, as relevant, reviews the guidelines for the accreditation process, meets with the person(s) at Waterloo responsible for the professional accreditation together with the director of the program, to review the guidelines for the accreditation and Waterloo reviews, and to determine what additional information, if any, is required for the Waterloo review. Such discussions occur at the time when work begins by a program to prepare for the accreditation process, and a memo is filed documenting the decision taken. If necessary, the program under review will be asked to provide supplemental information to meet the needs of the Waterloo review process.

When the review team is appointed by an accreditation organization, Waterloo will seek to ensure that the review team is willing to report on the criteria required for the IQAP. When this is not feasible, Waterloo will request that an external, Waterloo-appointed reviewer join the accrediting organization’s review team. Regardless of whether the Waterloo-appointed external reviewer is permitted to work with the review team, he or she will conduct interviews and examine documents related to the program review process and prepare a written report to supplement the accreditation report from the accrediting organization’s review team.

For master’s programs which are subject to accreditation reviews, it is usually necessary to review the research components of the program. These aspects can be reviewed in conjunction with a review of the PhD program (if one exists) or research master’s in the same unit (if one exists). If the only graduate program in the unit is a professional master’s subject to accreditation, then a separate review of the research components is required.

### ***3. Multi- or Interdisciplinary Programs***

Reviews of interdisciplinary programs which lead to a degree should follow the same procedures as those for single discipline programs, as described above. The review of an interdisciplinary program (including collaborative graduate programs) can be, where appropriate, combined with the review of a larger program. One of the considerations in such combined reviews is whether a review team can be assembled which has expertise in the various disciplinary areas. Separate report sections must also be written for each program.

Where an interdisciplinary undergraduate program does not lead to a separate degree (for example, an undergraduate option), the composition of the review team will follow the same process as for minors not attached to degree programs. The program is reviewed by two arm’s length reviewers, at least one of whom should have some relevant disciplinary experience. The director of the interdisciplinary program and the dean (or equivalent in the Affiliated and Federated Institutions of Waterloo) who provide oversight of the program will be invited to suggest individuals to serve on the review committee. The composition of the review committee

will be determined by the AVPA/APGS. The review process follows the same arrangement as for single-discipline reviews.

#### ***4. Programs Joint with other Universities***

For programs offered jointly with another/other Ontario universities, the procedure is that one individual (normally the director or equivalent of the joint program) will prepare a self-study following the template of his/her university, in consultation with faculty, staff and students at the other institution(s). The review team will be chosen in consultation with both/all partners, and the “internal” reviewer can come from each partner, or be chosen to represent all partners. The review visit will include both/all campuses. The response to the review can be written by the director of the joint program in consultation with the appropriate chairs and deans at both/all participating institutions, and then sent through the regular process at both/all universities. If deemed more appropriate, separate responses could be prepared, one for each participating institution, to follow the normal process at each university.

For programs joint with other universities outside Ontario, Waterloo will follow the review process for Ontario universities. This would not necessarily require a site visit to the other university, provided that the Quality Council has determined that the partner university is also subject to an appropriate quality review process in its own jurisdiction. However Waterloo would obtain information about the components of the program completed outside Ontario as appropriate, and include this in the review within Ontario.

If, in future, Waterloo develops partnerships to offer degree or diploma programs with other institutions such as colleges or institutes, the present document will be modified to include such programs.

#### ***5. Programs at the Federated or Affiliated Institutions***

The University of Waterloo has one federated university (St. Jerome’s University) and three affiliated university colleges (Conrad Grebel, Renison, St. Paul’s). Waterloo has made arrangements with the Affiliated and Federated Institutions of Waterloo to ensure that program reviews are completed in a coordinated manner. When a program is primarily based within one of the Affiliated and Federated Institutions of Waterloo, the lead role for the program review is taken by the relevant institution, with the self-study submitted to the AVPA or APGS at Waterloo. During their program reviews, academic departments at Waterloo are directed to identify when there are complementary disciplinary or program activities at one or more of the Affiliated and Federated Institutions of Waterloo, to ensure that such activities are considered in their self-study.

The Affiliated and Federated Institutions of Waterloo may opt to have their program reviews considered at their own councils, in parallel to consideration at Senate Undergraduate

Council/Senate Graduate and Research Council.

## **6. Credit-Bearing Diploma and Certificate Programs**

Diplomas and certificates, where offered for credit, are reviewed on the same cycle as other programs. Where possible, they should be reviewed in conjunction with a related degree program.

## **C. Reviews of New Programs**

At Waterloo, academic reviews of new programs follow a similar procedure to reviews of existing programs, with appropriate modifications to the program proposal documentation and the external review (for example, there are no current students to interview or for whom to provide statistics). A comprehensive template is provided for the proposal document (Volume I – Proposed Brief), as well as templates for the required supporting documentation (Volume II – Faculty CVs, Volume III – Proposed Reviewers).

For new undergraduate programs, the AVPA has responsibility for the review, whereas for new graduate programs it is the APGS.

The steps for approval for new programs are similar to those for review of current programs.

1. An initial proposal document is developed, addressing the topics outlined in the Quality Council criteria. This proposal goes to the appropriate department/school committee and faculty council and Institutional Analysis and Planning (IAP) for discussion and approval. If the program includes co-op experience, a report from Co-operative Education and Career Action is required. The proposal specifies the tuition rate the program intends to adopt, and whether the program is a professional program and/or a full cost recovery program. If the program is not intended to be full cost recovery, the proposal should include the expected provincial funding weight (BIU weight). The proposal should also include a report from the Library to confirm that existing resources are in place to support the program, and what, if any, additional library resources may need to be acquired.
2. For many programs, in addition to the academic review, the Ministry of Training, Colleges and Universities (MTCU) must also review the program to ensure that enrolments in the new program are eligible to generate provincial grant funding, and to allow students to be eligible for the Ontario Student Assistance Program (OSAP). MTCU also needs to approve the proposed tuition rate. IAP manages this process.

Departments should consult with IAP early in the planning stage to discuss the MTCU approval process.

3. For all programs, in addition to the academic review and the MTCU review, the program must also be reviewed by IAP and the Provost from a financial perspective. IAP assists departments in completing a financial viability analysis, which must be approved by the Provost before the program proceeds to faculty approval or Quality Council.
4. If an external review with a site visit is required, this occurs following faculty council approval, and the unit concerned has the opportunity to respond to the review comments.
5. The proposal (modified if appropriate following the external review) then goes to either Senate Undergraduate Council, or Senate Graduate and Research Council, and then Senate, for approval.
6. At this point the proposal is sent to the Quality Council for approval, if approval is required, or for information (new undergraduate minors and options do not require notification to the Quality Council).
7. The Board of Governors receives information once a year about programs approved to commence in the previous year (along with information on completed reviews of existing programs).
8. As is the case for reviews of existing programs, a two-year progress report is required for new programs. The purpose of the two-year progress report is to provide initial data on student progress and implementation of the program, and to respond to any issues raised by the external review. Copies of the two-year progress report are made available to the Quality Council for information (or, if required, for decision).
9. Thereafter the program enters into the regular review cycle.

### ***Definition of a New Program***

The Quality Assurance Framework defines a new [degree] program as “Any degree, degree program, or program of specialization, currently approved by Senate or equivalent governing body, which has not been previously approved for that institution by the Quality Council, its predecessors, or any intra-institutional approval processes that previously applied. A change of name, only, does not constitute a new program; nor does the inclusion of a new program of specialization where another with the same designation already exists (e.g., a new honours program where a major with the same designation already exists).” The Quality Assurance Framework further clarifies that “a ‘new program’ is brand-new: that is to say, the program has substantially different program requirements and substantially different learning outcomes from those of any existing approved programs offered by the institution”.

Depending on the type of program, the levels at which approvals are required differ, as shown in Table 2 below. All new programs require internal approval (up to the Senate level), and depending on whether Quality Council and/or MTCU approval is also required, additional

approval steps are needed.

Table 2. Level of approval required for new programs and major modifications<sup>1</sup>

<b>Program Type</b>	<b>Senate</b>	<b>External reviewers</b>	<b>Quality Council</b>	<b>MTCU</b>
Undergrad minor, option, certificate	Yes	No	No	No
Undergrad major or specialization	Yes	Yes if “brand-new” <sup>2</sup>	Yes if “brand-new” <sup>2</sup>	Yes, in non-core areas <sup>3</sup>
Undergraduate degree	Yes	Yes	Yes	Yes, in non-core areas <sup>3</sup>
Undergraduate diploma	Yes	No	No	Yes, in non-core areas <sup>3</sup>
Graduate field <sup>4</sup>	Yes	No	No	No
Graduate collab. program	Yes	No	Yes <sup>5</sup>	Yes
New graduate degree	Yes	Yes	Yes	Yes
Graduate Diploma	Yes	No	Yes <sup>5</sup>	Yes, if stand-alone
Major change to existing program	Yes	No	No (but notification required)	No, but change needs to be reported to MTCU in the Annual Program Development Report
Minor change to existing program	No	No	No	No, but change needs to be reported to MTCU in the Annual Program Development Report

<sup>1</sup> Major modifications are defined in section D below

<sup>2</sup> See definition of new program above table; notification is required if the change is a major modification but not “brand-new”

<sup>3</sup> Consult IAP to determine if a program is core or non-core.

<sup>4</sup> If graduate programs wish to advertise that a field has been approved by the Quality Council, it must be submitted for Expedited Approval

<sup>5</sup> Follows Expedited Approval process defined by the Quality Assurance Framework.

## ***Aims***

The procedures for assessing proposals for new programs should ensure:

- the program achieves Waterloo’s academic excellence goals
- the program name is appropriate to the content and recognizable to employers
- the program reflects Waterloo’s distinctiveness, is technologically current, is creative and innovative in its curriculum content and delivery, and entrepreneurial and appropriately inter-disciplinary in perspective

- the program has the potential to be one of the best in Canada and at least among the top quarter of similar programs in North America
- the program has the potential to attract excellent students
- the program has sufficient resources committed to it.

## ***Planning***

The detailed planning process for new programs takes place in the academic unit that will host it. This planning is done in consultation with various groups, some of which are: the Registrar's Office; IAP; other relevant academic departments in the University; Co-operative Education and Career Services (CECA) (if a co-op program is being proposed); the offices of the dean and associate dean (undergraduate/graduate as appropriate) of the faculty. In addition it is the unit's responsibility to meet the Degree Level Expectations approved by the University and by MTCU, for non-core undergraduate programs and all graduate programs which are requesting approval for specific funding for BIU entitlement.

## ***Program Proposal***

A program proposal document is required, following the provided template (Volume I – Proposed Brief).

Any proposed new program will be reviewed using the Quality Assurance Framework criteria for new programs, reproduced verbatim below:

### **1. Objectives**

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

### **2. Admission requirements**

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

### **3. Structure**

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

#### **4. Program content**

- a) Ways in which the curriculum reflects the current state of the discipline or area of study.
- b) Identification of any unique curriculum or program innovations or creative components.
- c) For research-focused graduate programs, clear indication of the nature and suitability of the major research requirements for degree completion.
- d) Evidence that each graduate student in the program is required to take a minimum of two-thirds of the course requirements from among graduate level courses.

#### **5. Mode of delivery.**

Appropriateness of the proposed methods for the assessment of student achievement of the intended program learning outcomes and Degree Level Expectations.

#### **6. Assessment of teaching and learning**

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

#### **7. Resources for all programs**

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

#### **8. Resources for graduate programs only**

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

#### **9. Resources for undergraduate programs only**

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

#### **10. Quality and other indicators**

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

### ***Approval Process***

The normal approval process is as follows (with some variations according to the organization of the academic unit, and whether one or more academic units are involved):

- approval by departmental/school curriculum committee(s)
- approval by department/school as a whole at a department/school meeting
- review by IAP and CECA
- approval of the financial plan by IAP and the Provost
- approval by the appropriate faculty(ies) undergraduate/graduate council(s)
- approval by the appropriate faculty council(s)
- site visit by external reviewers (if required)
- departments/school response to external reviewers' report and modifications of proposal (if required)
- approval by Senate Undergraduate Council or Senate Graduate and Research Council
- approval by Senate; programs may be advertised once Senate approval has been granted and the proposal has been sent to the Quality Council, but should clearly state "subject to approval by the Quality Council"
- approval by the Quality Council
- approval for funding by MTCU, if required
- after a new program is approved to commence by the Quality Council, the program needs to begin within 36 months of the date of approval, otherwise the approval will lapse
- report to Board of Governors on new degrees, programs, certificates, diplomas, and minors approved in previous year
- two-year progress report to Senate Undergraduate Council/Senate Graduate and Research Council and then Senate, for new degrees, programs, certificates, diplomas and minors. This report should include responses to any questions posed by the external reviewers and provide preliminary information on student numbers and progress
- two-year progress report to the Quality Council, if requested

### ***Site Visit (if required)***

Guidelines for the site visit for existing programs should be used. The main difference is that there are no existing students who can be interviewed. However, it may be appropriate for some new programs to invite current students who are interested in the new program, to meet with the reviewers. This can include students who are interested in transferring into the new

program (at the undergraduate level) or applying to the new graduate program.

Table 3: Timelines for approval of new programs<sup>1</sup>

Month 1	Approval by department
Month 2	Approval by faculty <ul style="list-style-type: none"> <li>• co-op report commissioned</li> <li>• library report commissioned</li> <li>• list of possible external reviewers sent to office of AVPA/APGS</li> <li>• proposal brief prepared (allow 1 month for external reviewers to read document)</li> </ul>
Months 5-6	External reviewer site visit; review report received within 2 weeks Chair/director ensures consultation and implementation of any changes recommended by reviewers; submits revised brief
Months 6-7	Approval by Senate Undergraduate Council/Senate Graduate and Research Council
Months 7-8	Approval by Senate; advertising permitted with qualification “subject to approval by the Quality Council”
Months 8-9	Submission to Quality Council and MTCU (if required) <sup>2</sup>
Month 10	Approval by the Quality Council
Months 13-24	Approval by MTCU <sup>2</sup>
Two years after site visit	Two-year progress report submitted, as for existing programs

<sup>1</sup> Note: not all new programs require external reviews (for example, graduate collaborative programs, graduate diplomas); if so, the timeline will be shorter. Otherwise these represent the minimum time required.

<sup>2</sup> MTCU has four approval cycles per year with submission deadlines in July, November, January and April. Minimum approval time is 4 months, but approval can take as much as 12 months or longer if MTCU has concerns with the program or the tuition proposed.

## D. Major Modifications of Existing Programs

### ***Definition of a Major Modification***

The Quality Assurance Framework defines a major modification to a program as one or more of the following changes:

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

The following examples of major modifications are provided in the [Quality Council's Quality Assurance Guide](#):

#### **1. Examples of requirements that differ significantly from those existing at the time of the previous cyclical program review**

- merger of two or more programs
- new bridging options for college diploma graduates
- significant change in the laboratory time of an undergraduate program
- introduction or deletion of an undergraduate thesis or capstone project
- introduction or deletion of a work experience, co-op option, internship or practicum, or portfolio
- at the master's level, the introduction or deletion of a research project, research essay or thesis, course-only, co-op, internship or practicum option
- creation, deletion or re-naming of a field in a graduate program
- any change to the requirements for graduate program candidacy examinations, field studies or residence requirements
- major changes to courses comprising a significant proportion of the program, where significant is defined as more than one-third of the courses

#### **2. Examples of significant changes to the learning outcomes**

Changes to program content, other than those listed in "1" above, that affect the learning outcomes, but do not meet the threshold for a "new program"

#### **3. Examples of significant changes to the faculty engaged in delivering the program and/or to the essential resources, for example, when there have been changes to the existing mode(s) of delivery (such as different campus, online delivery and inter-institutional collaboration)**

- changes to the faculty delivering the program; for example, a large proportion of the

- faculty retires; new hires alter the areas of research and teaching interests
- change in the language of program delivery
  - establishment of an existing degree program at another institution or location
  - offering of an existing program substantially online where it had previously been offered in face-to-face mode, or vice versa
  - change to full- or part-time program options, or vice versa
  - changes to the essential resources, where these changes impair the delivery of the approved program

If there is uncertainty as to whether a particular change is major or minor, the AVPA or APGS will be the arbiter for undergraduate and graduate programs, respectively. The Vice-President, Academic and Provost has the final say in this decision. The Vice-President, Academic and Provost has the right to choose to send a particular major modification to the Quality Council for an expedited review, as per section 3.3 of the Quality Assurance Framework, and if so would follow procedures similar to those for a new graduate field.

### ***Procedure***

All modifications to existing programs require internal approvals. Major modifications, including those not required to be reported to the Quality Council, are first approved at the department/school level, then faculty council. Major modifications are subsequently approved at Senate Undergraduate Council or Senate Graduate and Research Council, and then finally, Senate. Depending on the nature of the changes, Co-operative Education and Career Services and the Library are consulted to confirm any impact of the proposed changes. Minor modifications follow the same process, with the exception that Senate Undergraduate Council or Senate Graduate and Research Council are empowered to approve changes on behalf of Senate, as per Senate Bylaw 2. If an existing program is offered in a new location, this requires notification at the department, faculty and Senate Undergraduate/Senate Graduate and Research Council levels.

Major modifications requiring reporting to the Quality Council are reported on an annual basis.

## **E. Audit Process**

The Quality Council will audit each institution once every eight years. The objective of the audit is to determine whether or not the University, since the last review, has acted in compliance with the provisions of its IQAP for cyclical program reviews as ratified by the Quality Council. The Quality Council's Quality Assurance Framework indicates the means of selection of the auditors, together with the steps in the audit process.

## F. References

Council of Ontario Universities, Ontario Council of Academic Vice Presidents (2005) *Guidelines for University Undergraduate Degree Level Expectations*, Toronto, Council of Ontario Universities, December 16, 3pp.

Quality Council (Ontario Universities Council on Quality Assurance) (2014) *Quality Assurance Framework*. Council of Ontario Universities, 41pp. Available electronically at <http://oucqa.ca/resources-publications/quality-assurance-framework/>

Quality Council (Ontario Universities Council on Quality Assurance) (2014) *Guide to Quality Assurance*. Council of Ontario Universities, Available electronically at <http://oucqa.ca/resources-publications/guide-to-quality-assurance-processes/>