Queen's University Quality Assurance Processes (QUQAP)

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Link to the Ontario Universities Council on Quality Assurance: Quality Assurance Framework

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1. Introduction

1.1 Preamble

The *Queen's University Quality Assurance Processes (QUQAP)* outlines the Protocols for developing new academic programs and for revising and reviewing existing programs. These processes are drawn from and align with the *Quality Assurance Framework* (QAF) established by the Ontario Quality Council, but they also include requirements established specifically by Queen's University for all undergraduate and graduate programs. The QAF is a province-wide initiative undertaken by all universities to ensure consistency and cohesion among all programs offered in Ontario. The QUQAP is based directly on part II of the QAF but is also committed to the quality assurance principles as outlined in part I of the QAF.

The QUQAP also signifies Queen's University's firm commitment to cultivating a culture of excellence in education and articulates the quality of a Queen's degree. The QUQAP Protocols have the goal of establishing processes that are effective, transparent, publicly accountable, and in support of continuous academic improvement. This document provides a mechanism for Academic Units and Faculties and Schools to clearly articulate the quality of their programs. Central to quality assurance is a set of alignments that connect degree level expectations (DLEs) (Appendix 2), program and course learning outcomes, assessment, modes of delivery, teaching and learning strategies and the human, physical and financial resources which support all programs.

1.2 The Elements of Quality Assurance

The QUQAP consists of six distinct Protocols, information on separately established University Senate policies related to academic programs, and a definitions section (Appendix 1). The Protocols that are described briefly below specify the minimum requirements for the internal and external quality assurance activities and the interplay among them.

1.2.1 New Program Approvals

The Protocol for New Program Approvals applies to both new undergraduate and graduate programs and is used to secure the academic standards of new programs and to assure their ongoing improvement. The Appraisal Committee of the Quality Council reviews the Proposals. The Council has the final authority to approve (with or without conditions) or decline New Program Proposals.

1.2.2 Expedited Approvals

The Protocol for Expedited Approvals does not require an external review and provides a more expeditious process for approving programs. Proposals for new for-credit graduate diplomas (type 2 and 3) are to be submitted for approval through the Protocol for Expedited Approvals. This Protocol can also optionally apply to requests for approval by the

Quality Council of a new field in a graduate program, as well as requests for its approval of a proposed major modification to an existing program.

1.2.3 Major Modifications (Program Renewal and Significant Change)

The fundamental purpose for the Protocol for Major Modifications (Program Renewal and Significant Change) is the identification of major modifications to existing programs and their approval through a robust quality assurance process. This process does not require, but may include, Quality Council approval to assure the universities, the public, and the government of the ongoing quality of all the University's academic programs. While universities themselves are best placed to determine the degree of change that is being proposed, the distinction between major modifications and new programs can, at times, be difficult to determine. The Council has the final authority to decide if a major modification constitutes a new program and, therefore, must follow the Protocol for New Program Approvals.

1.2.4 Minor Modifications

The Protocol for Minor Modifications includes changes to individual courses in a program and other program changes that do not rise to the level of a major modification. Such changes are approved within Faculties or Schools and do not require Quality Council appraisal and approval.

1.2.5 Cyclical Program Reviews

The Protocol for Cyclical Program Reviews is used to secure the academic standards of existing undergraduate and graduate degree programs, for-credit graduate diploma programs, and Senate-approved certificate programs (through a Final Assessment Report). The Cyclical Program Review also functions to assure the ongoing improvement of all programs through an Implementation Plan. Undergraduate and graduate program reviews must be conducted concurrently and may be completed in conjunction with departmental or formal accreditation reviews, when approved.

1.2.6 Audit

The Audit Protocol is conducted through a panel of auditors, collectively known as "the Audit Committee" of the Quality Council. Each cycle of audits spans an eight-year period, and all member universities are audited at least once within each cycle. The first cycle of audits (2012- 13 to 2019-20) examined each university's compliance with its own Institutional Quality Assurance Processes (IQAP) (or QUQAP at Queen's University), as ratified by the Quality Council. The Quality Council has the authority to approve or not approve the recommendations and reports of the Audit Committee.

1.2.7 Definitions

The Definitions Section additionally contains definitions of some of the specialized vocabulary used throughout this document. Most of these definitions are derived from the QAF, but some have been modified to fit the Queen's context.

1.3 Scope of the Application of QUQAP

The QUQAP Protocols extend to new and continuing Senate-approved undergraduate and graduate degree/diploma/certificate programs whether offered in full, in part, or conjointly by any institutions federated and affiliated with the university. These responsibilities also extend to programs offered in partnership, collaboration or other such arrangement with other postsecondary institutions including colleges, universities, or institutes. For definitions of the inter-institutional arrangements, see Definitions.

1.4 Responsibility for the QUQAP and Institutional Contact

1.4.1 The Provost and Vice-Principal (Academic)

The Provost and Vice-Principal (Academic), with the assistance of the Deputy Provost and the senior leadership Teaching and Learning team within the Office of the Provost has oversight over undergraduate and graduate quality assurance processes. The Provost is the university contact person for the Ontario Universities Council on Quality Assurance (QC). N.B Hereinafter, for the purposes of this policy, "Provost (or delegate)" will refer to the leadership position with delegated quality assurance authority in the Teaching and Learning Team within the Office of the Provost and Vice-Principal (Academic), unless otherwise stated.

1.4.2 Vice-Provost and Dean (School of Graduate Studies and Postdoctoral Affairs) and Faculty Deans

This responsibility of quality assurance within the university is shared with the Vice-Provost and Dean of the School of Graduate Studies and Postdoctoral Affairs (SGSPA) and the Faculty Deans as appropriate. The Vice-Provost and Dean (SGSPA) reviews proposals for new graduate programs and major modifications to graduate programs at the pre-approval stage and is involved as proposals develop. The Vice-Provost and Dean (SGSPA) provides guidance to programs during cyclical program review and reviews nominations for review team members for all external reviews, prior to approval by the Provost (or delegate). Faculty Deans advise both new programs and those undertaking cyclical review within their faculties. Their approval is required for new programs and cyclical program review self-studies before these are approved by the Vice-Provost and Dean (SGSPA) and Provost (or delegate). Faculty Deans review and suggest a ranking for review team member nominations before these are considered by the Vice-Provost and Dean (SGSPA) (for graduate programs) and the Provost (or delegate).

1.4.3 Curriculum Committees, Academic Boards, Other Academic Committees

Curriculum Committees, Academic Boards, and other Faculty or School academic committees involved in the review and approval of curriculum are also responsible for aligning with quality assurance processes. The processes of these academic bodies are not outlined here but are governed by local by-laws.

1.4.4 University Senate

The University Senate is the ultimate institutional authority responsible for quality assurance of all Queen's academic programs.

1.4.5 The Senate Committee on Academic Development and Procedures (SCADP)

The Senate Committee on Academic Development and Procedures (SCADP) makes recommendations to Senate on the approval of programs completing the Protocols associated with new programs, modifications, and expedited approvals. SCADP also reviews the continuous improvement reports related to these Protocols.

1.4.6 The Senate Cyclical Program Review Committee (SCPRC)

The Senate Cyclical Program Review Committee (SCPRC) reviews cyclical program reviews as well as continuous improvement reports and develops Final Assessment Reports and Implementation Plans for each Review. SCPRC reports annually to Senate and makes recommendations to the Provost that will ensure programs' ongoing improvement.

1.4.7 Appraisal Committee and Quality Council

The QUQAP is subject to the review of the Audit Committee and ratification by the Quality Council upon initiation and thereafter when it is revised.

2. Protocol for New Program Approvals

2.1 Objectives

The Protocol is designed so that, in developing new programs, Queen's University is able to ensure that the educational experiences offered to students are engaging and rigorous, and that the approved programs through which those experiences are provided are routinely monitored and, if necessary, revised. Continuous improvement of those facets of education that most directly impact the academic experiences of students is fundamental to quality assurance and, thus, an important objective of this Protocol is to ensure that there are sufficient monitoring plans for new programs to promote continuous improvement.

Detailed process information can be found on the QUQAP website.

2.2 Scope

The Protocol for New Program Approvals applies to both new undergraduate and new graduate programs whether offered by one institution or jointly with another institution.

In developing a new joint program and other inter-institutional programs, the IQAP (or QUQAP) of all the participating universities granting the degree should be followed. See Guidance for important elements to consider in developing and approving these joint programs and in subsequent cyclical program reviews.

2.3 Initial Institutional Process: The Pre-Approval Stage

2.3.1 Pre-Approval Form

Academic Units must prepare a Pre-Approval Form for each new program. A Pre-Approval Form may be obtained from the Provost (or delegate). The Provost (or delegate) can offer guidance on consultation with central services such as the Centre for Teaching and Learning, Office of the University Registrar, Office of Planning and Budgeting and others in the early stages of program development.

2.3.2 New Undergraduate Program Pre-Approval Review

In the case of new undergraduate programs, the Pre-Approval Form must be reviewed and approved by the relevant Dean(s)/Director(s) and Unit Head(s). The Dean(s) may, at their discretion, submit the Pre-Approval to the appropriate sub-committee (e.g., curriculum committee) of their Faculty Board, for review, comment and/or preliminary approval. The Office of the University Registrar and the Office of Planning and Budgeting must also be consulted during the development of the Pre-Approval Form.

2.3.3 New Graduate Program Pre-Approval Review

For proposed new graduate programs, the Pre-Approval Form must be reviewed and approved by the Dean(s)/Director(s) of that Unit(s), the Vice-Provost and Dean of the School of Graduate Studies and Postdoctoral Affairs, and the Graduate Studies Executive Council. The Office of the University Registrar and the Office of Planning and Budgeting must also be consulted during the development of the Pre-Approval Form.

2.3.4 Pre-Approval Form Submission and Approval

Once the Pre-Approval Form has been completed and submitted to the Provost (or delegate), it will be reviewed for completeness and to ensure that the appropriate offices have been consulted. The Office of the University Registrar, the Office of Planning and Budgeting, and the School of Graduate Studies and Postdoctoral Affairs (applicable to graduate programs only) will function as signatory bodies on the Pre-Approval Form. The Provost (or delegate) will provide the final signature and authorization for the full proposal to be developed. Any outstanding issues can be discussed and resolved at this early stage. Full process and approval information can be found on the QUQAP website.

2.3.5 Full Proposal Deadline

In cases where there is a delay of more than 18 months in developing the full proposal, Academic Units should contact the Provost (or delegate) to determine whether a new Pre-Approval Form should be completed.

2.4 Development of Program Proposal

2.4.1 Proposal Form

If the Pre-Approval Form is approved, the Academic Units must then prepare a Proposal Form. A Proposal Form may be obtained from the Provost (or delegate). The Provost (or delegate) can offer guidance on consultation with academic and non-academic central services including the Office of the University Registrar, the Office of Planning and Budgeting, University Library, IT Services, the Centre for Teaching and Learning, the Office of Institutional Research and Planning, and the Human Rights and Equity Office.

2.4.2 Evaluation Criteria

The Proposal should identify unique curriculum and/or program innovations, creative components, and/or significant high impact practices (see Guidance) in addition to addressing the following evaluation criteria:

2.4.2.1 Program objectives

- 2.4.2.1.1 Clarity of the program's objectives;
- 2.4.2.1.2 Appropriateness of degree nomenclature given the program's objectives; and
- 2.4.2.1.3 Consistency of the program's objectives with the institution's mission and academic plans.

2.4.2.2 Academic integrity

- 2.4.2.2.1 Ways in which the program educates students and staff on the principles of academic integrity (including integrity in research), as outlined in the Senate-adopted Academic Integrity Policy Statement; and
- 2.4.2.2.2 Relation of the principles of academic integrity to the field of study.

2.4.2.3 Equity, Diversity, Inclusivity, and Indigenization

The University Diversity and Equity Assessment and Planning (DEAP) Tool should be used to complete this section.

- 2.4.2.3.1 Ways in which the objectives, outcomes and curriculum of the new program address equity, diversity, and inclusion;
- 2.4.2.3.2 Ways in which the new program addresses university goals for Indigenization and Reconciliation outlined in Yakwanastahentéha Aankenjigemi Extending the Rafters: Truth and Reconciliation Commission Task Force Final Report, specifically sections 21-25; and
- 2.4.2.3.3 Anti-racism and anti-oppression initiatives within the new program.

2.4.2.4 Accessibility

2.4.2.4.1 Ways in which the new program addresses the regulations under the Accessibility for Ontarians with Disability Act, 2005.

2.4.2.5 Program requirements

2.4.2.5.1 Appropriateness of the program's structure and the requirements to meet its objectives and program-level learning outcomes;

2.4.2.5.2 Appropriateness of the program's structure, requirements, and program-level learning outcomes in meeting the institution's undergraduate or graduate DLEs;

2.4.2.5.3 Appropriateness of the proposed mode(s) of delivery (see Definitions) to facilitate students' successful completion of the program-level learning outcomes; and

2.4.2.5.4 Ways in which the curriculum addresses the current state of the discipline or area of study.

2.4.2.6 Program requirements for graduate programs only

2.4.2.6.1 Clear rationale for program length that ensures that students can complete the program-level learning outcomes and requirements within the proposed time;

2.4.2.6.2 Evidence that each graduate student in the program is required to take a minimum of two-thirds of the course requirements from among graduate-level courses; and

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

2.4.2.7 Assessment of teaching and learning

2.4.2.7.1 Appropriateness of the methods for assessing student achievement of the program-level learning outcomes and DLEs; and

2.4.2.7.2 Appropriateness of the plans to monitor and assess:

2.4.2.7.2.1 The overall quality of the program;

2.4.2.7.2.2 Whether the program is achieving in practice its proposed objectives;

2.4.2.7.2.3 Whether students are achieving the program- level learning outcomes; and

2.4.2.7.2.4 How the resulting information will be documented and subsequently used to inform continuous program improvement.

2.4.2.8 Admission requirements

2.4.2.8.1 Appropriateness of the program's admission requirements given the program's objectives and program-level learning outcomes; and

2.4.2.8.2 Sufficient explanation of alternative requirements, if applicable, for admission into a graduate, second-entry, or undergraduate program, e.g., minimum grade point average, additional languages, or portfolios, and how the program recognizes prior work or learning experience.

2.4.2.9 Resources

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

2.4.2.9.1 Participation of a sufficient number and quality of core Faculty who are competent to teach and/or supervise in and achieve the goals of the program and foster the appropriate academic environment;

2.4.2.9.2 If applicable, discussion/explanation of the role and approximate percentage of adjunct and part-time Faculty/limited-term appointments used in the delivery of the program and the associated plans to ensure the sustainability of the program and quality of the student experience;

2.4.2.9.3 If required, provision of supervision of experiential learning opportunities;

2.4.2.9.4 Adequacy of the academic unit's planned utilization of existing human, physical and financial resources, including implications for the impact on other existing programs at the university;

2.4.2.9.5 Evidence that there are adequate resources to sustain the quality of scholarship and research activities produced by students, including library support, information technology support, and laboratory access; and

2.4.2.9.6 If necessary, additional institutional resource commitments to support the program in step with its ongoing implementation.

2.4.2.10 Resources for graduate programs only

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

2.4.2.10.1 Evidence that faculty have the recent research or professional/clinical expertise needed to sustain the program, promote innovation, and foster an appropriate intellectual climate;

2.4.2.10.2 Where appropriate to the program, evidence that financial assistance for students will be sufficient to ensure adequate quality and numbers of students; and

2.4.2.10.3 Evidence of how supervisory loads will be distributed, considering qualifications and appointment status of the faculty.

2.4.2.11 Quality and other indicators

2.4.2.11.1 Evidence of the quality of the faculty (e.g., qualifications, funding, honours, awards, research, innovation, and scholarly record; appropriateness of collective Faculty expertise to contribute substantively to the program and commitment to student mentoring); and

2.4.2.11.2 Any other evidence that the program and faculty will ensure the intellectual quality of the student experience.

2.4.3 New Undergraduate Program Proposal Review

In the case of new undergraduate programs, the Proposal Form must be reviewed and approved by the relevant Unit Head(s), Dean(s)/Director(s) and Faculty Board(s).

2.4.4 New Graduate Program Proposal Review

For new graduate program proposals, the Proposal Form must be reviewed by the relevant Unit Head(s), Dean(s)/Director(s), Faculty Graduate Councils (if required), and Graduate Studies Executive Council.

2.4.5 Proposal Form Submission

Once the Proposal has been completed and submitted to the Provost (or delegate), it will be reviewed for completeness and to ensure that the appropriate offices have been consulted. Academic and non-academic central supports will review and approve sections of the Proposal relevant to their offices at the request of the Provost (or delegate). The Academic Unit will be notified that the Form has been fully reviewed and is ready for inclusion in the Review Team package.

2.4.6 Proposal Approval

After the review internal responses are collated and any resulting edits to the Proposal are made, then the Vice-Provost and Dean of the School of Graduate

Studies and Postdoctoral Affairs (if applicable) and the Provost (or delegate) will approve the full proposal package.

2.5 External Evaluation

2.5.1 Composition of the Review Committee

2.5.1.1 External Reviewers

2.5.1.1.1 The Review Team is required to be comprised of at least two external reviewers for new undergraduate and graduate programs.

2.5.1.1.2 External Review Team members will normally be associate or full professors, active and respected in their field. External Review Team members must also have disciplinary experience and qualifications relevant to the program under review. Their experience must also relate to program management, pedagogy, and learning outcomes.

2.5.1.1.3 All members of the Review Team will be at "arm's length" from the program being proposed. Potential conflict of interest situations includes, but are not limited to, the existence of family ties, partnership links, supervisory relations, or other types of relationships with individuals connected to the new program(s) under review. Some of these relationships may not exclude a potential reviewer in and of themselves; however, possible conflicts must be identified before the appointment of an individual external reviewer. In case of uncertainty, Academic Units and/or the Faculty Office are encouraged to consult with the Provost (or delegate) and/or the School of Graduate Studies and Postdoctoral Affairs as appropriate.

2.5.1.1.4 Attempts will be made to ensure that at least one of the external reviewers is from inside and one from outside the province of Ontario.

2.5.1.2 Internal Reviewer

2.5.1.2.1 The Review Team is required to include at least one internal reviewer for new undergraduate and graduate programs.

2.5.1.2.2 The internal reviewer does not necessarily need to be a specialist in a discipline of the program(s) under review.

2.5.1.2.3 The internal reviewer should be knowledgeable about Queen's and its administrative and academic structures and experienced in providing constructive program critiques.

2.5.1.2.4 The internal reviewer must also be at arm's length. If possible, the internal reviewer should come from outside the Faculty, School, or discipline in which the program under review is located.

2.5.1.2.5 The internal reviewer will receive the same materials as the external reviewers and will attend briefings with the Provost (or delegate) and all meetings with members of the program under review.

2.5.1.3 Professional Reviewers

2.5.1.3.1 Optional professional reviewers may be requested by the Academic Unit, and inclusion on the Review Team is subject to approval by the relevant Dean(s) and the Provost (or delegate).

2.5.1.3.2 Professional reviewers are appropriately qualified members of industry in good standing with any relevant professional boards.

2.5.1.3.3 Professional reviewers must be at arm's length from the program(s) being reviewed.

2.5.1.3.4 Professional reviewers are considered additional review team members and do not replace internal or external reviewers.

2.5.1.4 Additional Reviewers

2.5.1.4.1 Additional discretionary members may be assigned to the Review Team where requested by the Academic Unit and approved by the relevant Dean(s) and the Provost (or delegate). Any additional reviewers must also be at arm's length from the program(s) being reviewed.

2.5.1.4.2 Additional reviewers do not replace the required internal or external reviewers.

2.5.2 Selection of Review Team

2.5.2.1 The Academic Unit may contact the potential reviewers while in the process of developing a list of nominees to ask if they are willing to be considered as a potential reviewer. To avoid conflict of interest, the Academic Unit may not contact the reviewers at other times or for other reasons.

2.5.2.2 A rank ordered list of six recommendations for external reviewers, a rank ordered list of three recommendations for internal reviewers, and an optional request for professional or additional reviewers, each with a brief biographical summary and description of relevant expertise, is submitted by the Academic Unit(s) to the Provost (or delegate) using the templates provided by the Provost (or delegate). Any potential conflicts of interest will be identified on the template.

2.5.2.3 For undergraduate programs, in departmentalized Faculties, the Faculty Dean(s) ranks nominations from the Academic Unit(s) involved and approves a prioritized list which is then forwarded to the Provost (or delegate) for a final decision.

2.5.2.4 Where a graduate program is involved, the faculty-ranked nominations are forwarded to the Vice-Provost and Dean, School of Graduate Studies and Postdoctoral Affairs, who provides comments and submits the nominations and rankings to the Provost (or delegate) for a final decision.

2.5.2.5 The decision of the Provost (or delegate) is then communicated to the Academic Unit and Faculty or School Office(s), at which point the Review Team Report template will be provided.

2.5.2.6 The Faculty or School Office(s) will then invite reviewers to serve.

2.5.2.7 If the required selection of review team members cannot be maintained, the nomination process will be restarted from the beginning.

2.5.3 Preparing the Review Team for the Site Visit

2.5.3.1 The Provost (or delegate) will review the New Program Proposal for completeness before sending the documentation to the Review Team.

2.5.3.2 The Review Team will also be provided with instructions and an information package by the Faculty or School Office(s) for the program(s) being reviewed.

2.5.3.3 The Provost (or delegate) will meet separately with the Review Team in person or online to ensure that the members:

2.5.3.3.1 Understand their role and obligations;

2.5.3.3.2 Identify and commend the program(s)' notably strong and creative attributes;

2.5.3.3.3 Describe the program(s)' respective strengths, areas for improvement, and opportunities for enhancement;

2.5.3.3.4 Recommend specific steps to be taken to improve the program(s), distinguishing between those the Academic Unit responsible for the program(s) can itself take and those that require external action;

2.5.3.3.5 Recognize the University's autonomy to determine priorities for funding, space, and faculty allocation;

2.5.3.3.6 Respect the confidentiality required for all aspects of the review process; and

2.5.3.3.7 Follow the Review Team Report template provided in developing their report to ensure that the program is assessed against the evaluation criteria specified in section 2.4.

2.5.3.4 The information package provided to the Review Team will contain the New Program Proposal, CVs of Faculty members involved in the program, relevant institutional plans and frameworks, meeting itinerary, and contact information.

2.5.3.4.1 The CVs must include information on the faculty members' education, background, competence, and expertise.

2.5.3.5 The Provost (or delegate) will determine if any additional information is needed by the Review Team. Additional information may include but is not limited to, submissions from graduates of the program, representatives of industry, the professions, employers, and professional associations.

2.5.4 The Site Visit

2.5.4.1 The purpose of the site visit is to allow the Review Team to follow up on matters raised by the New Program Proposal, to interview students, staff, faculty, and others who can most appropriately provide informed comments, and to examine the physical facilities used by the program.

2.5.4.2 A site visit, typically for two full days, can be conducted on-campus and in-person, virtually, or by desk review.

2.5.4.2.1 Reviews of a new doctoral and master's program proposals must incorporate an on-site visit, with the exception of certain new master's programs (e.g., professional master's programs, fully online programs, etc.), reviews for which may be conducted by a desk review or virtual site visit.

2.5.4.2.2 All site visits are conducted in-person and on-campus unless an alternative method is requested by the Academic Unit and/or Faculty or School in advance of the review. Alternative methods for site-visits (e.g., virtual or desk review) are not permitted for doctoral or master's programs (with the exception of certain master's programs as stated above.)

2.5.4.2.3 A clear justification for the request of an alternative review method must be provided to the Provost (or delegate). The Provost (or delegate) will have final approval authority over the request.

2.5.4.2.4 The Review Team must be satisfied that the review method taking place is acceptable and appropriate.

2.5.4.3 The Review Team should visit the campus together or engage together on the same remote calls.

2.5.4.4 The Faculty Office(s) and the School of Graduate Studies and Postdoctoral Affairs, if appropriate, will consult with members of the new program(s) and with assistance from the Provost's Office, will arrange for meetings between the reviewers and appropriate individuals as outlined in the Sample Meeting Itinerary:

2.5.4.4.1 Provost or delegate;

2.5.4.4.2 Vice-Provost and Dean of the School of Graduate Studies and Postdoctoral Affairs or delegate (as applicable);

2.5.4.4.3 Dean or delegate of the faculty(ies) (as applicable);

2.5.4.4.4 Unit Head(s);

2.5.4.4.5 Unit(s) faculty members;

2.5.4.4.6 Faculty member representatives from cognate units (if applicable);

2.5.4.4.7 Undergraduate students, graduate students, and postdoctoral fellows (as appropriate) of the unit(s);

2.5.4.4.8 Staff members of the unit(s);

2.5.4.4.9 Support Service representatives such as the Librarian (or delegate) associated with the unit(s) and Information Technology Services (ITS) as applicable; and

2.5.4.4.10 Relevant members of the external community (if applicable).

2.5.4.5 The Review Team members will be free to seek information from other sources, and, to suggest other individuals and groups with whom to meet during the site visit.

2.5.4.6 The Provost (or delegate) will brief the reviewers on basic aspects of the review process.

2.5.4.7 The Review Team members should not be invited to participate in academic or social events other than as required by their duties as reviewers.

2.5.4.8 During the site visit and writing of the Review Report, the internal reviewer will provide important insights about the University so that any conclusions drawn and/or recommendations made by the external reviewers are done with an understanding of how changes are implemented at Queen's.

2.5.5 Review Report

The Review Report(s) (preferably one joint report using the appropriate template, where circumstances permit) will:

2.5.5.1 Address the substance of the New Program Proposal;

2.5.5.2 Respond to the evaluation criteria set out in section 2.4;

2.5.5.3 Comment on the adequacy of existing physical, human, and financial resources;

2.5.5.4 The internal reviewer may also review a draft of the Review Report and provide comments on its accuracy.

2.5.5.5 Acknowledge any clearly innovative aspects of the proposed program together with recommendations on any essential or otherwise desirable modifications to it; and

2.5.5.6 Be submitted to the Provost (or delegate) when completed.

2.5.5.6.1 If the report has not been completed or does not provide adequate recommendations, the Provost (or delegate) will return the report to the Review Team for revisions. In the event that the Review Team cannot provide revisions or cannot be reached within a reasonable amount of time, a new review and report will be commissioned utilizing the next-ranked members on the review team nomination form. Faculty Offices are advised to withhold stipends until the report has been received.

2.5.6 Internal Responses

It is essential that the proposing Academic Unit and the relevant Dean(s) or their designate(s) make clearly independent responses to the Review Report and recommendations. A single response is acceptable only in the case of non-departmentalized Faculties or Schools where the Dean (or equivalent) also acts as the Department Head (or equivalent).

2.5.6.1 Academic Unit Response

2.5.6.1.1 The Provost (or delegate) will invite the Head(s) of the Academic Unit(s) proposing the new program to respond to the Review Report before it is reviewed by SCADP.

2.5.6.1.2 The response from the Academic Unit should be a maximum of four pages long and address any factual errors in the Review Team Report, as well as respond to the substantive issues raised and each of the recommendations in the Review Report.

2.5.6.1.3 The response should be submitted to the Provost (or delegate) within two weeks of the Unit being asked to respond.

2.5.6.2 Faculty or School Response

2.5.6.2.1 The Provost will invite the appropriate Dean(s) (or Associate Dean acting as their delegate) to make a response to the Reviewer Report independent of that provided by the Academic unit.

2.5.6.2.2 The response from the Dean(s) (or delegate) will also be a maximum four pages long and should comment on both substantive matters and the recommendations in the Review Team report and the Unit's own response.

2.5.6.2.3 This response should also be submitted to the Provost (or Delegate) within two weeks of the invitation to respond.

2.5.6.3 School of Graduate Studies and Postdoctoral Affairs Response

2.5.6.3.1 Where graduate programs are proposed, the Provost will invite the Vice-Provost and Dean of the School of Graduate Studies and Postdoctoral Affairs to make a response to the Reviewer Report independent of that provided by the Academic Unit and Faculty or School.

2.5.6.3.2 The response by the Vice-Provost and Dean of the School of Graduate Studies and Postdoctoral Affairs will address substantive matters in the Report and the specific recommendations.

2.5.6.3.3 This response should also be submitted to the Provost (or delegate) within two weeks of the invitation to respond.

2.5.7 Changes to the New Program Proposal Resulting from the External Review

2.5.7.1 Changes made to the Proposal resulting from the Review Team Report and/or the internal responses should be summarized in an appendix to the original proposal.

2.5.7.2 The changes must be submitted to the Provost (or delegate) for review.

2.5.7.3 After reviewing, the Provost (or delegate) will inform the Academic Unit, Faculty or School and School of Graduate Studies and Postdoctoral Affairs (if applicable). Each body will have the opportunity to amend their initial response.

2.5.8 Institutional Approval

2.5.8.1 In consultation with the Provost (or delegate), the Faculty or School Office is responsible for preparing the full New Program Proposal package for submission to SCADP. The package should be submitted to the secretary of SCADP via the Provost (or delegate) in accordance with agenda deadlines. Late submissions may not be considered until future meetings.

2.5.8.2 The New Program Proposal package should contain the final proposal document with associated appendices, Review Team report, and internal responses.

2.5.8.2.1 The package must be submitted in a single, appropriately bookmarked PDF document.

2.5.8.3 SCADP will review the proposal against the evaluation criteria outlined in section 2.4.2 and, if it meets the University's quality assurance standards, will recommend the program to Senate for approval.

2.5.8.4 Senate has the authority for final institutional approval of all new programs, prior to submission to Quality Council for final approval.

2.5.8.5 The Academic Unit, Faculty Office and School of Graduate Studies and Postdoctoral Affairs (if applicable) will be notified of the SCADP and Senate decisions.

2.5.8.6 Following Senate approval, the Provost (or delegate) will submit the proposal to the next stage of approval in accordance with the relevant agenda deadlines.

2.5.8.7 If SCADP or Senate has not approved, the Provost (or delegate) will outline the reasons for the outcome and any required changes that need to be made prior to re-submission.

2.5.9 Quality Council Approval Process

After approval by Senate, the Provost (or delegate) will submit the Proposal, together with all required reports and documents, to the Quality Assurance Secretariat.

2.5.9.1 The submission will include the New Program Proposal, the Review Team Report, the internal responses, a summary of changes made after the Review Team Report (if applicable), along with the date of approvals by SCADP and Senate.

2.5.9.2 The submission template will include information on whether the proposed program will be a cost-recovery program. The same standards and Protocols apply regardless of the source of funding.

2.5.9.3 The submission will further include a brief commentary on the two external reviewers selected to review the proposed program regarding their qualifications in the following areas:

2.5.9.3.1 Sufficient expertise in content and program delivery;

2.5.9.3.2 Appropriate connections to industry (where appropriate); and

2.5.9.3.3 Expertise in teaching and learning.

2.5.9.4 The review and approval processes, and possible outcomes of the Appraisal Committee and Quality Council review are outlined in the QAF, sections 2.6-2.8.

2.5.9.4.1 Should the Quality Council approve a program to commence, with report, the Provost (or delegate) will initiate the development of this report with the Academic Unit, as outlined in the approval letter, and submit it to Quality Council on the University's behalf.

2.5.10 Public Announcement of New Programs

After approval by Senate, and subject to approval by the Provost (or delegate), the University, Faculty or School, or Academic Unit may publicly announce its intention to offer a new undergraduate or graduate program in advance of receiving approval by the Quality Council. When such announcements are made at this stage, they must contain the following statement: "*Prospective students are advised that the program is still subject to formal approval.*"

2.5.11 Subsequent Institutional Processes

2.5.11.1 Implementation Window

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

2.5.11.2 Monitoring and Interim Reporting

The monitoring of a new program facilitates continuous improvement, which is an essential goal of quality assurance.

2.5.11.2.1 Within five years of commencement and prior to the program's first cyclical program review, new programs will be jointly assessed by the Dean(s) and Unit Head(s), with the submission of an Interim Monitoring Report to the Provost (or delegate) and to Senate for information.

2.5.11.2.2 The Interim Monitoring Report template must be obtained from the Provost (or delegate).

2.5.11.2.3 The Interim Monitoring Report will evaluate the new program's success in realizing its objectives, requirements, and outcomes, as originally proposed and approved, as well as any changes that have occurred in the interim.

2.5.11.2.4 If the Interim Monitoring Report identifies significant challenges or opportunities, the program may be asked to address these items immediately and/or report on them during the first cyclical program review.

2.5.11.3 Website Posting

2.5.11.3.1 A brief description of each new program, created by the Academic Unit and approved by the Provost (or delegate), will be posted to the QUQAP website.

2.5.12 First Cyclical Program Review

2.5.12.1 The first cyclical program review of any new program must be conducted no more than seven years after the date of the program's initial enrolment.

2.5.12.2 The Faculty Office will inform the Provost (or delegate) when a new program has commenced.

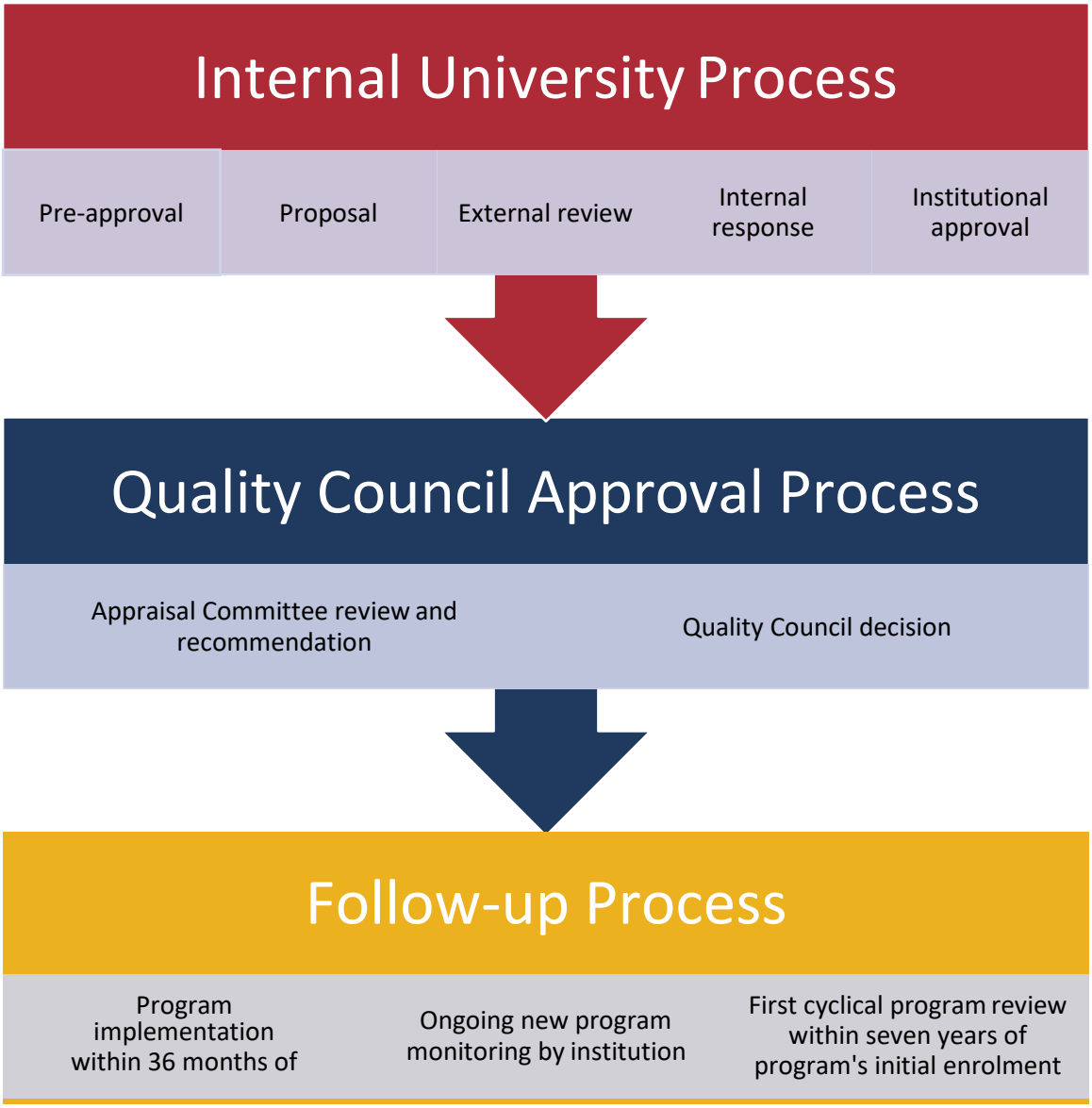
2.5.12.3 The Provost (or delegate) will place the program in the schedule of reviews and notify the Academic Unit, Department Head, Faculty or School and School of Graduate Studies and Postdoctoral Affairs (if applicable) of when the first review is to take place.

2.5.13 Audit

2.5.13.1 New undergraduate and/or graduate programs that have been approved within the period since the conduct of the previous Audit of New Programs are eligible for selection for the University's next Cyclical Audit.

2.5.13.2 Additional information on the Audit of New Programs can be found in section 2.9.4 of the QAF.

2.6 Overview of Protocol for Undergraduate and Graduate New Program Approvals



3. Protocol for Expedited Approvals

3.1 Objectives

The process associated with the Protocol for Expedited Approvals is intended to enable universities to secure Quality Council approvals more efficiently for changes that are considered less wide-ranging than New Program Proposals. As with each of the other four Protocols, the oversight provided by the requirements of this Protocol ensures that the integrity of a degree awarded by an Ontario university is sustained and enables evolution of programming in a timely manner.

Detailed process information can be found on the QUQAP website.

3.2 Scope

This Protocol applies to the following proposal types:

- New for-credit graduate diplomas (Types 2 and 3);
- New standalone degree programs arising from a long-standing field in a master's or doctoral program that has undergone at least two Cyclical Program Reviews and has at least two graduating cohorts; (See guidance)
- This Protocol can also optionally apply to requests for the Quality Council's consideration of a new field(s) in a graduate program, as well as requests for its consideration of a proposed major modification to an existing program. This option might be helpful should a university wish to promote the fact that it has received the Quality Council's approval for the proposal, and/or for a university that wishes to utilize the external oversight this Protocol provides.
- New standalone for-credit microcredentials (see below for clarification).

3.3 Microcredentials

The approval process for the creation and modification of for-credit and non-credit microcredentials is under development at the University. This includes stand-alone microcredentials and those that are part of a new or existing program. Microcredentials are not reviewed by the Appraisal Committee or Quality Council. They will remain under the jurisdiction of Senate. Once approved, the Microcredential Approval Processes will govern the approval of microcredentials at the University.

3.4 Initial Institutional Process: The Pre-Approval Stage

The pre-approval stage for Expedited Approvals follows the same process as that set out for new programs in section 2.3.

3.5 Development of Program Proposal: Evaluation Criteria

The Program Proposal will use the applicable evaluation criteria outlined in section 2.4.2 No external review or internal response is required, but the Program Proposal will be submitted to the Quality Council for approval.

3.6 Institutional Approval

The institutional approval processes are the same as those used for new programs with the exclusion of the external evaluation and internal response steps in section 2.5.8 .

3.7 Quality Council Approval Process

The Expedited Approval Process is the same as identified for new programs in section 2.5.9, with the exception that the Appraisal Committee will function as the final approval body. Outcomes of the Appraisal Committee review can be found in section 3.2 of the QAF.

3.8 Subsequent Institutional Processes

3.8.1 Implementation Window

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

3.8.2 First Cyclical Program Review

The process for establishing the first cyclical program review is similar to that identified for new programs in section 2.5.12. with the following exceptions:

3.8.2.1 Graduate Diplomas will be reviewed in the same year as related graduate programs if possible.

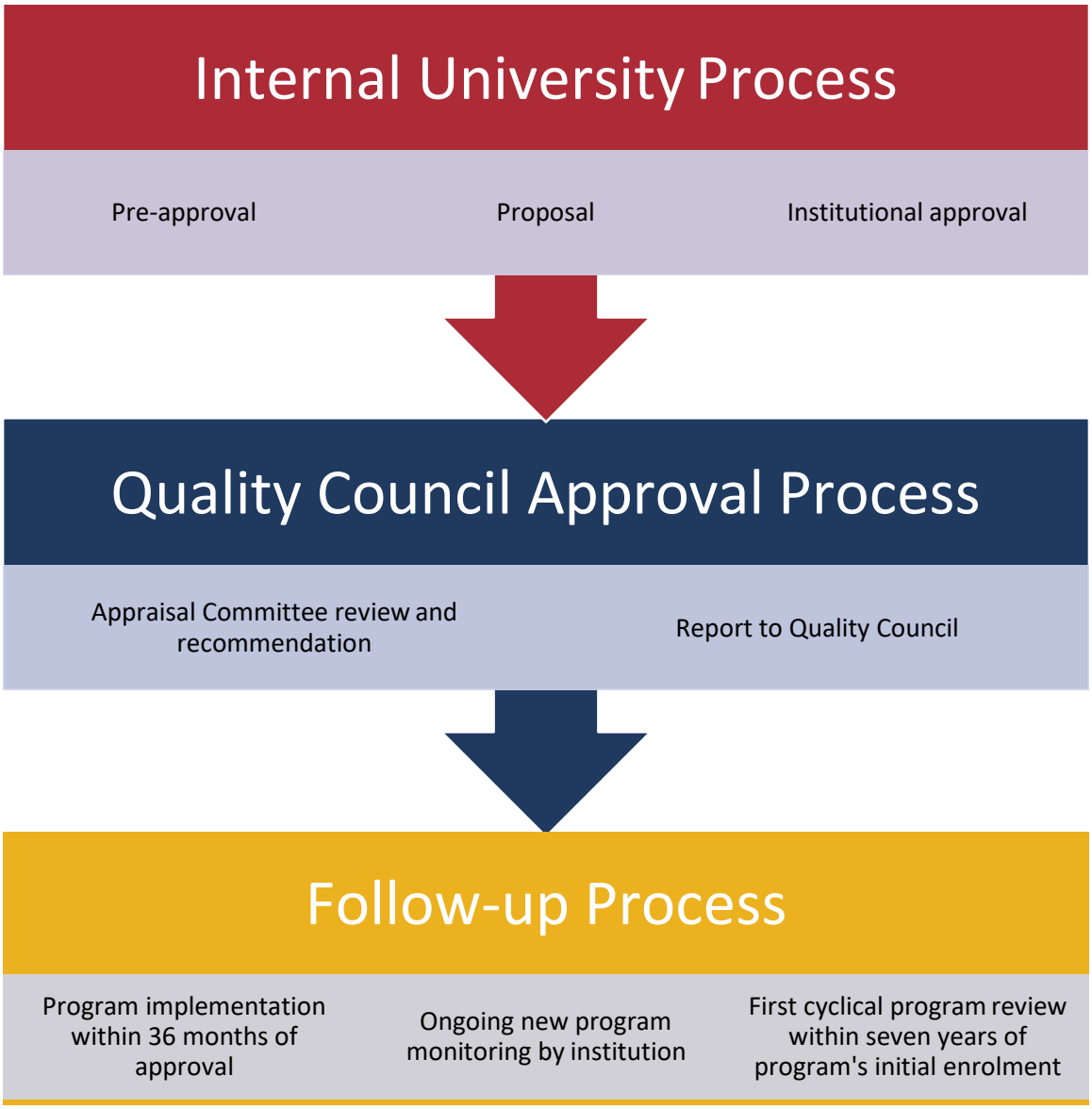
3.8.2.2 Modifications that have elected to go through the expedited approval process will be reviewed together with the program to which the modification applies.

3.8.3 Audit

3.8.3.1 Programs created or modified through the Protocol for Expedited Approvals are not normally subject to Audit.

3.8.3.2 Information on the Audit of programs created or modified through the Protocol for Expedited Approvals can be found in section 3.4 of the QAF.

3.9 Overview of Protocol for Undergraduate and Graduate Expedited Program Approvals



4. Protocol for Major Modifications (Program Renewal and Significant Change)

4.1 Objectives

The fundamental purpose for the Protocol is the identification of Major Modifications to existing programs, and their approval, through a robust quality assurance process. This process does not require, but may include, Quality Council approval (through the Protocol for Expedited Approval), to assure the universities, the public, and the government of the ongoing quality of all of the university's academic programs.

Major modifications are made by institutions to:

- Implement the outcomes of a cyclical program review;
- Reflect the ongoing evolution of the discipline;
- Accommodate new developments in a particular field;
- Facilitate improvements in teaching and learning strategies;
- Formally close a program;
- Respond to the changing needs of students, society, and industry; and/or
- Respond to improvements in technology.

Such modifications provide an opportunity for continuous improvement, improving the student experience and staying current with the discipline.

The Provost (or delegate) is the University's arbiter on what constitutes a significant change and a major modification as opposed to a new program. However, the Quality Council has the final authority to decide if a major modification constitutes a new program, and therefore, must follow the Protocol for New Program Approvals. The Quality Council will review major modifications annually to ensure that the threshold for a new program was not met.

Detailed process information can be found on the QUQAP website.

4.2 Scope

4.2.1 Major modifications typically include, but are not limited to, one or more of the following:

4.2.1.1 Requirements that differ significantly from those existing at the time of the previous cyclical program review:

4.2.1.1.1 Significant change in the laboratory hours of an undergraduate program;

4.2.1.1.2 Change to full- or part-time program options, or vice versa;

4.2.1.1.3 The introduction or deletion of an undergraduate thesis or capstone project;

4.2.1.1.4 The introduction or deletion of a work experience, co-op option, internship, or practicum, or portfolio; or

4.2.1.1.5 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.

4.2.1.1.6 Any change to the requirements for graduate program candidacy examinations, field studies or residence requirements;

4.2.1.1.7 Major change to courses comprising a significant proportion of the program (typically one-third);

4.2.1.2 The creation, deletion, or re-naming of a single new field in an existing graduate program;

4.2.1.3 The merger of two or more programs;

4.2.1.4 New bridging options for college diploma graduates;

4.2.1.5 Significant changes to the program-level learning outcomes that do not, however, meet the threshold of a new program:

4.2.1.5.1 Changes to program content, other than those listed in section 4.1 above, that affect the learning outcomes, but do not meet the threshold for a new program.

4.2.1.6 Change in program name and/or degree nomenclature when this change impacts learning outcomes.

4.2.1.7 Significant changes to the program's delivery, including to the program's faculty and/or to the essential physical resources as may occur, for example, where there have been changes to the existing mode(s) of delivery (e.g., different campus and/or online/ hybrid delivery – see below):

4.2.1.7.1 Changes to the faculty delivering the program (e.g., a large proportion of the faculty retires, new hires that affect the areas of research and teaching interests);

4.2.1.7.2 A change in the language of program delivery;

4.2.1.7.3 Changes to the essential resources, where these changes impact the delivery of the approved program; and/or

4.2.1.7.4 The establishment of an existing program substantially online where it had previously been offered in face-to-face mode, or vice versa. The program must identify the following criteria when making this change:

4.2.1.7.4.1 Maintenance of and/or changes to the program objectives and program-level learning outcomes;

4.2.1.7.4.2 Adequacy of the technological platform and tools;

4.2.1.7.4.3 Sufficiency of support services and training for teaching staff;

4.2.1.7.4.4 Sufficiency and type of support for students in the new learning environment; and

4.2.1.7.4.5 Access. For example, students in rural areas may not be able to access online programs.

4.2.1.8 Program Closure

4.2.1.8.1 For the development of a proposal to close a program, see link

4.3 Development of Major Modification Proposal

4.3.1 Initial Consultation

4.3.1.1 Proposals for major modifications should begin with a brief consultation with the Provost (or delegate) to determine if the modification is minor, major, or significant enough to meet the threshold of a new program.

4.3.1.2 This initial consultation may include discussions with the Office of the University Registrar, the Office of Planning and Budgeting, the School of Graduate Studies and Postdoctoral Affairs or other offices as appropriate.

4.3.1.3 The initial consultation will determine if the major modification should continue with the Protocol for Major Modifications or if extensive and/or significant, the Protocol for Expedited Approvals.

4.3.1.3.1 The Academic Unit, relevant Faculties or Schools, or the Provost (or delegate) may request that the Quality Council review a proposal for a major modification to an existing program.

4.3.1.4 If the initial consultation determines that the change qualifies under the Protocol for Expedited approvals, the proposal will follow the process for expedited approvals and will require the following:

4.3.1.4.1 Description of, and rationale for, the proposed changes; and

4.3.1.4.2 Application of the relevant criteria, as outlined in section 2.4.2, to the proposed changes. The University will determine which criteria are deemed relevant for each Proposal and, to meet its own needs and in recognition of the diversity in institutional strategies, the University may include its own quality assurance requirements, including for example, consideration of equity, diversity and inclusion, special missions and mandates, and student populations that are being encouraged by governments, institutions, and others.

4.3.1.5 If the initial consultation determines that the change qualifies as a Major Modification, the Provost (or delegate) will supply a Major Modification of Existing Programs template.

4.3.1.6 Those developing the proposal may seek support from relevant central offices as they complete the form. The Proposal must be developed in consultation with the Office of the University Registrar, Office of Planning and Budgeting and any other Academic Unit that may be impacted.

4.3.1.7 Input from current students and recent graduates of the program should be considered as part of the development of the Proposal, with the Proposal including a statement on the way in which the proposed Major Modification will improve the student experience (see Guidance).

4.4 Institutional Approval

The internal approval process will ensure that the proposed modification is in alignment with the relevant program-level learning outcomes. Further, the internal review and approval process should include an assessment of the impact the proposed modification will have on the program's current and graduated students. The completed proposal will be approved by the appropriate Academic Unit committees, Faculty Boards, Faculty Graduate Councils (if applicable), and the Graduate Studies Executive Council (if applicable). For institutional approval processes related specifically to suspensions and closures, see the link.

4.4.1 The process for institutional approval of Major Modifications is similar to what has been identified for new programs in section 2.5.8, with the following exceptions:

4.4.1.1 The package will not require a Review Team Report or internal responses;

4.4.1.2 After Senate approval, the Major Modification will be reported annually to Quality Council; and

4.4.1.3 Major Modifications can be implemented upon approval from Senate.

4.5 Annual Report to Quality Council

Queen's University will file an Annual Report to the Quality Council that provides a summary of Major Program Modifications that were approved through the University's internal approval process in the past year.

The Quality Council reviews these reports to ensure compliance with the Quality Assurance Framework, as well as to compile data for its own Annual Report, which is widely distributed to the internal and external community, including the provincial government.

If any Major Modifications have been deemed by Quality Council not to be in compliance, the Provost (or delegate) will communicate any remedial actions required to the Academic Unit and Faculty Office or School.

4.6 Audit

4.6.1 Major Modifications are not normally subject to Audit.

4.6.2 For information regarding the audit of Major Modifications, see QAF section 4.4.

5. Protocol for Minor Modifications

5.1 Scope

Minor Modifications to existing programs do not change the fundamental aspects of a Program such as the learning outcomes, program requirements or structure, or admission standards. Minor Modifications include changes to an existing Emphasis, Option, or Minor Program; new or changes to laddering, stacking or similar options (see Guidance); or comparable elements that do not require Quality Council appraisal and approval.

Detailed process information can be found on the QUQAP website.

5.2 Development of Minor Modification Proposal

5.2.1 Submission

5.2.1.1 Minor Modifications requiring a change to the name of a program or Department, and/or a change to the degree designation (that do not impact learning outcomes) will be submitted using the Minor Modification Form, which can be obtained after consultation with the Provost (or delegate).

5.2.1.2 All other changes not rising to the threshold of a Major Modification remain under the jurisdiction of each Faculty's curriculum committee, Faculty Board, or equivalent.

5.3 Institutional Approval

5.3.1 Approval

5.3.1.1 Minor Modifications requiring name or degree designation changes (that do not impact learning outcomes) will be approved by the SCADP and Senate as outlined in the process for new programs (section 2.5.8).

5.3.1.2 The package for approval should contain the Minor Modification template.

5.3.1.3 The Minor Modification may be fully implemented after Senate approval.

5.3.1.4 All other Minor Modifications should follow the processes outlined by the Faculty or School approval bodies, such as curriculum committee, Faculty Board, or the Graduate Studies Executive Council, if applicable.

5.3.1.5 Minor Modifications are not approved by or reported to Quality Council.

6. Protocol for Cyclical Program Reviews

6.1 Preamble

The process for the conduct of each Cyclical Program Review (CPR) will be initiated by the Provost (or delegate). CPRs consist of five major components:

- the Self-Study;
- the external evaluation (peer review) including site visits;
- internal responses from the Academic Unit Head(s) and appropriate Dean(s);
- the analysis of program Review Reports by the Senate Cyclical Program Review Committee (SCPRC); and
- the Provost's recommendations and plans to implement, monitor and follow-up on those recommendations.

6.2 Objectives

One fundamental element of accountability is *continuous improvement*, which signals that quality assurance is never static. Continuous improvement is the ultimate goal of the ongoing and fluid work of the University as it creates living documents that meet evolving standards and measures of quality in its programs. The Protocol for Cyclical Program

Reviews is designed to ensure that the educational experiences students have are engaging and rigorous, but also that the programs through which those experiences are provided are routinely monitored and, if necessary, revised. Continuous improvement of those facets of education that most directly impact the academic experiences of Ontario students is fundamental to quality assurance and, thus, continuous improvement factors significantly in the Protocol for Cyclical Program Reviews.

Detailed process information can be found on the QUQAP website.

6.3 Scope

6.3.1 The schedule for CPRs consists of the full complement of Queen's academic programs, including:

6.3.1.1 All collaborative, joint, multi-disciplinary, interdisciplinary, multi-sited and inter-institutional programs/specializations, and all modes of delivery.

6.3.1.2 All programs required to be reviewed, whether or not they are supported by Government funding.

6.3.1.3 Programs where there is more than one mode or site involved in delivering a specific program, the distinct versions of each program that are to be reviewed must be clearly identified.

6.3.2 Reviews of collaborative/joint/interdisciplinary programs/specializations leading to a degree follow the same Protocols as those for single disciplinary programs (described below).

6.3.3 Review of interdisciplinary collaborative specializations may be undertaken, where appropriate, in combination with the review of the larger degree program.

6.3.4 Joint graduate programs that involve more than one institution will identify a lead institution to prepare the Self-Study document, consulting and obtaining relevant input from all participating institutions.

6.3.5 Suspended programs are out of scope and do not participate in cyclical program reviews. The process for suspending admissions to program is described in the Recommended Procedures Concerning the Temporary Suspension of Admissions to Academic Programs.

6.4 Schedule of Reviews

6.4.1 The Schedule of Reviews will not exceed seven years between reviews for each program.

6.4.1.1 Accredited programs, if requested by the Academic Unit and approved by the relevant Faculty and/or School Dean(s), and the Provost (or delegate), may complete CPRs on the same schedule as their accreditation provided their accreditation does not exceed a seven-year cycle.

6.4.2 The first cyclical program review of any new program will be scheduled to take place no more than seven years after the date of the program's initial enrolment.

6.4.3 The Schedule of Reviews will identify:

6.4.3.1 the University's full complement of undergraduate programs, graduate degree and diploma programs, and will consider all independent offerings of each program;

6.4.3.2 the years in which active programs will complete their cyclical program review and continuous improvement reports;

6.4.3.3 temporarily suspended programs not requiring review (section 6.3.5).

6.4.3.4 collaborative/joint/interdisciplinary programs/specializations that involve more than one institution;

6.4.3.5 all modes of program delivery;

6.4.3.6 concurrent review of a program's undergraduate and graduate offerings.

6.4.4 The Schedule of Reviews will be updated and maintained by the Office of the Provost (or delegate).

6.4.5 Placement of New Programs

6.4.5.1 New programs will be placed into the Schedule of Reviews with any related concurrent programs, not exceeding seven years from the first student cohort intake, at the approval and discretion of the Provost (or delegate).

6.4.5.2 The number of programs being reviewed by individual departments each year and a program's accreditation schedule will be taken into consideration.

6.5 Development of the Self-Study

The Self-Study document (see Guidance) is broad-based, reflective, and forward-looking, and includes critical analysis of the program(s). The views of program faculty, staff, and students must be considered during the process of writing the Self-Study. When the University chooses to review different program levels (for example, graduate and undergraduate), program modes, or programs offered at different locations at the same time, the University may prepare separate reports for each discrete program or address each program within a single omnibus report. Regardless of reviewing programs concurrently, the quality of each academic program and the learning environment of the students in each program must be explicitly addressed in the Self-Study and the Review Team Report.

6.5.1 The following elements for the preparation and writing of the Self-Study are required:

6.5.1.1 Description of how the Self-Study was written, including how the views of faculty, staff and students were obtained and considered (see Guidance);

6.5.1.2 Inclusion of the evaluation criteria and quality indicators identified in section 6.6, for each discrete program being reviewed;

6.5.1.3 Program-related data and measures of performance, including applicable provincial, national, and professional standards (where available), with a notation and interpretation of all relevant data sources;

6.5.1.4 Description of how concerns and recommendations raised in previous reviews have since been addressed, especially those detailed in the Final Assessment Report, Implementation Plan, and subsequent monitoring reports from the previous cyclical program review of the program;

6.5.1.5 For the first cyclical program review of a program, the steps taken to address any issues or items flagged in the monitoring report for follow-up (see QAF section 2.9.2), and/or items identified for follow-up by the Quality Council (for example, in the form of a note and/or report for the first Cyclical Program Review in the Quality Council's approval letter – see QAF section 2.6.3 a) or b));

6.5.1.6 Where appropriate, any unique curriculum or program innovations, creative components, or significant high impact practices (see Guidance);

6.5.1.7 Areas that the program's faculty, staff and/or students have identified as requiring improvement, or as holding promise for enhancement and/or opportunities for curricular change;

6.5.1.8 Assessment of the adequacy of all relevant academic services that directly contribute to the academic quality of each program under review (see Guidance); and

6.5.1.9 The input of others deemed to be relevant and useful, such as graduates of the program, representatives of industry, the professions, practical training programs, and employers may also be included.

6.6 Evaluation Criteria for Self-Study

The Self-Study must address the following evaluation criteria:

6.6.1 Program objectives

6.6.1.1 Describe how the program's objectives are consistent with the University's mission and academic plans.

6.6.2 Academic integrity

6.6.2.1 Describe how the program has educated and informed students and staff on the principles of academic integrity (including integrity in research), as outlined in the Senate Academic Integrity Policy.

6.6.2.2 Describe how the program has related the principles of academic integrity to the field of study.

6.6.3 Equity, diversity, inclusivity, and Indigenization

6.6.3.1 The University Diversity and Equity Assessment and Planning (DEAP) Tool should be used to complete this section.

6.6.3.2 Describe how the program objectives, outcomes and curriculum address equity, diversity, and inclusion.

6.6.3.3 Describe how the program addresses university goals for Indigenization and Reconciliation outlined in Yakwanastahentéha Aankenjigemi Extending the Rafters: Truth and Reconciliation Commission Task Force Final Report, specifically sections 21-25.

6.6.3.4 Comment on anti-racism and anti-oppression initiatives within the program.

6.6.4 Accessibility

6.6.4.1 Describe how the program has addressed the regulations under the Accessibility for Ontarians with Disability Act (2005).

6.6.5 Program requirements (for all programs)

6.6.5.1 Comment on the appropriateness of the program's structure and the requirements to meet its objectives and the program-level learning outcomes.

6.6.5.2 Comment on the appropriateness of the program's structure, requirements, and program-level learning outcomes in meeting the University's undergraduate or graduate DLEs.

6.6.5.3 Comment on the appropriateness and effectiveness of the mode(s) of delivery (see Definitions) to facilitate students' successful completion of the program-level learning outcomes.

6.6.5.4 Describe the ways in which the curriculum addresses the current state of the discipline or area of study.

6.6.6 Program requirements (for graduate programs only)

6.6.6.1 Provide a clear rationale for program length that ensures that students can complete the program-level learning outcomes and requirements within the time required.

6.6.6.2 Provide evidence that each graduate student in the program is required to take minimum of the two-thirds of the course requirements from among graduate level courses.

6.6.6.3 For research-focused graduate programs, provide a clear indication of the nature and suitability of the major research requirements for degree completion.

6.6.7 Assessment of teaching and learning (see Guidance)

6.6.7.1 Comment on the appropriateness and effectiveness of the methods for assessing student achievement of the program-level learning outcomes and DLEs.

6.6.7.2 Comment on the appropriateness and effectiveness of the plans to monitor and assess:

6.6.7.2.1 the overall quality of the program;

6.6.7.2.2 whether the program continues to achieve in practice its objectives;

6.6.7.2.3 whether the program's students are achieving the program- level learning outcomes; and

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

6.6.8 Admission requirements

6.6.8.1 Comment on the appropriateness of the program's admission requirements given the program's objectives and program-level learning outcomes.

6.6.8.2 Provide sufficient explanation of alternative requirements, if applicable, for admission into a graduate, second-entry, or undergraduate program, e.g., minimum grade point average, additional languages, or portfolios, and how the program recognizes prior work or learning experience.

6.6.9 Resources (for all programs)

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

6.6.9.1 the participation of a sufficient number of qualified core faculty who are competent to teach and/or supervise in and achieve the goals of the program and foster the appropriate academic environment;

6.6.9.2 the role and approximate percentage of adjunct and part-time faculty/limited-term appointments used in the delivery of the program and the associated plans to ensure the sustainability of the program and quality of the student experience, if applicable (see Guidance);

6.6.9.3 the provision of supervision for required experiential learning opportunities;

6.6.9.4 the adequacy of the administrative unit's utilization of existing human, physical and financial resources; and

6.6.9.5 the presence of adequate resources to sustain the quality of scholarship and research activities produced by students, including library support, information technology support, and laboratory access.

6.6.10 Resources (for graduate programs only)

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

6.6.10.1 evidence that faculty have the recent research or professional/clinical expertise needed to foster an appropriate intellectual climate, sustain the program, and promote innovation;

6.6.10.2 evidence that financial assistance for students is sufficient to ensure adequate quality and numbers of students, where appropriate to the program; and

6.6.10.3 evidence of how supervisory loads are distributed, considering qualifications and appointment status of the faculty.

6.6.11 Quality and other indicators

6.6.11.1 Provide evidence of the quality of the faculty (e.g., qualifications, funding, honours, awards, research, innovation, and scholarly record; appropriateness of collective faculty expertise to contribute substantively to the program and commitment to student mentoring).

6.6.11.2 Provide any other evidence that the program and faculty ensure the intellectual quality of the student experience.

6.6.11.3 Provide student data: grade-level for admission, scholarly output, success rates in provincial and national scholarships, competitions, awards, commitment to professional and transferable skills, and times-to-completion and retention rates.

6.7 External Evaluation

6.7.1 Composition of the Review Team

6.7.1.1 External Reviewers

6.7.1.1.1 The Review Team is required to include at least two external reviewers for undergraduate and graduate programs.

6.7.1.1.2 External Review Team members will normally be associate or full professors, active and respected in their field.

6.7.1.1.3 Reviewers should also have academic administrative experience in such roles as Undergraduate or Graduate Program Coordinators, Department Chair/Head, Associate Dean, Graduate Dean, or related positions. Reviewers are also expected to have experience with curriculum design and developing learning outcomes. This combination of experience helps to ensure that a reviewer will provide the most informed and constructive feedback on program reviews. External Review Committee members must have disciplinary experience and qualifications relevant to the program(s) under review. Their experience must also relate to program management, pedagogy, and learning outcomes.

6.7.1.1.4 All members of the Review Team will be at “arm’s length” from the program being reviewed. Potential conflict of interest situations includes, but are not limited to, the existence of family ties, partnership links, supervisory or other types of relationships with individuals connected to the program(s) under review. Some of these relationships may not exclude a potential reviewer in and of themselves; however, possible conflicts must be identified before the appointment of an individual external reviewer. In case of uncertainty, Academic Units and/or the Faculty Office are encouraged to consult with the Provost (or delegate) and/or the School of Graduate Studies and Postdoctoral Affairs as appropriate.

6.7.1.1.5 Attempts will be made to ensure that at least one of the external reviewers is from inside and one from outside the province of Ontario.

6.7.1.1.6 If the program is undergoing a successive CPR, at least one of the external reviewers must not have participated in a previous cyclical program review of that unit or program.

6.7.1.2 Internal Reviewer

6.7.1.2.1 The Review Team is required to include at least one internal reviewer for undergraduate and graduate programs.

6.7.1.2.2 The internal reviewer does not necessarily need to be a specialist in a discipline of the program(s) under review.

6.7.1.2.3 The internal reviewer should be knowledgeable about Queen's and its administrative and academic structures and experienced in providing constructive program critiques.

6.7.1.2.4 The internal reviewer must be at arm's length. If possible, the internal reviewer should come from outside the Faculty, School, or discipline in which the program under review is located.

6.7.1.2.5 The internal reviewer will receive the same materials as the external reviewers and will attend briefings with the Provost (or delegate) and all meetings with members of the program under review.

6.7.1.3 Professional Reviewers

6.7.1.3.1 Optional professional reviewers may be requested by the Academic Unit, and inclusion on the Review Team is subject to approval by the relevant Dean(s) and the Provost (or delegate).

6.7.1.3.2 Professional reviewers are appropriately qualified members of industry in good standing with any relevant professional boards.

6.7.1.3.3 Professional reviewers must be at arm's length from the program(s) being reviewed.

6.7.1.3.4 Professional reviewers are considered additional review team members and do not replace internal or external reviewers.

6.7.1.4 Additional Reviewers

6.7.1.4.1 Additional discretionary members may be assigned to the Review Team where requested by the Academic Unit and approved by the relevant Dean(s) and the Provost (or delegate). Such additional members should be appropriately qualified and experienced individuals selected from industry or the professions, and/or, where consistent with the University's own policies and practices, student members.

6.7.1.4.2 Additional reviewers must be at arm's length from the program(s) being reviewed.

6.7.1.4.3 Additional reviewers do not replace the required internal or external reviewers.

6.7.2 Selection of Review Team

6.7.2.1 Academic Units should work with the relevant Faculty or School Office(s) to prepare the nomination template.

6.7.2.2 The Academic Unit may contact the potential reviewers while in the process of developing a list of nominees to ask if they are willing to be considered as a potential reviewer. To avoid conflict of interest, the Academic Unit may not contact the reviewers at other times or for other reasons.

6.7.2.3 A rank-ordered list of six recommendations for external reviewers, a rank-ordered list of three recommendations internal reviewers, and a request for any optional additional reviewers, each with a brief biographical summary and description of relevant expertise, is sent by the Dean(s) or delegate(s) using the templates provided by the Provost (or delegate).

6.7.2.4 Any potential conflicts of interest will be identified on the template.

6.7.2.5 For reviews of undergraduate-only programs, in departmentalized Faculties, the Faculty Dean(s) solicits recommendations from the Academic Unit(s) involved and approves a prioritized list that is then forwarded to the Provost (or delegate) for a final decision.

6.7.2.6 Where a graduate program review is involved, the Faculty Dean(s) solicits recommendations from the Academic Unit(s) involved and approves a prioritized list that is sent to the Provost (or delegate).

6.7.2.7 The list is then forwarded to the Vice-Provost and Dean of the School of Graduate Studies and Postdoctoral Affairs, who makes comments on the prioritized list and forwards it to the Provost (or delegate) for a final decision.

6.7.2.8 The decision of the Provost (or delegate) is then communicated to the Academic Unit and Faculty or School Office(s).

6.7.2.9 The Faculty or School Office(s) will then invite reviewers to serve.

6.7.2.10 If the required selection of review team members cannot be maintained, the nomination process will be restarted from the beginning.

6.7.3 Preparing the Review Team for the Site Visit

6.7.3.1 The Provost (or delegate) will review the Self-Study for completeness before sending the documentation to the Review Team.

6.7.3.2 The Review Team will also be provided with instructions and an information package by the Faculty or School Office(s) for the program(s) being reviewed.

6.7.3.3 The Provost (or delegate) will meet separately with the Review Team in person or online to ensure that the members:

6.7.3.3.1 understand their roles and obligations;

6.7.3.3.2 identify and commend the program(s)' notably strong and creative attributes;

6.7.3.3.3 describe the program(s)' respective strengths, areas for improvement, and opportunities for enhancement;

6.7.3.3.4 recommend specific steps to be taken to improve the Program(s), distinguishing between those the Academic Unit responsible for the Program(s) can itself take and those that require external action;

6.7.3.3.5 recognize the University's autonomy to determine priorities for funding, space, and faculty allocation;

6.7.3.3.6 respect the confidentiality required for all aspects of the review process; and

6.7.3.3.7 follow the Review Team Report template provided in developing their report to ensure that the program is assessed against the evaluation criteria specified in section 6.6.

6.7.3.4 The information package provided to the Review Team will contain the Self-Study, evidence of the quality of faculty members involved in the program, meeting itinerary, and contact information (see Guidance).

6.7.3.4.1 Evidence of the quality of the faculty must include information on faculty members' qualifications, background, competence, funding, honours, awards, research, innovation, scholarly record, and expertise.

6.7.3.5 The Provost (or delegate) will determine if any additional information is needed by the Review Team. Additional information may include (but is not limited to) submissions from graduates of the program, representatives of industry, the professions, employers, and professional associations.

6.7.4 The Site Visit

6.7.4.1 The purpose of the site visit is to allow the Review Team to follow up on matters raised by the program review, to interview students, staff, faculty, and others who can most appropriately provide informed comments, and to examine the physical facilities used by the program.

6.7.4.2 A site visit, typically for two full days, can be conducted on-campus and in-person, virtually, or by desk review.

6.7.4.2.1 Reviews of doctoral and master's programs must incorporate an on-site visit, with the exception of certain master's programs (e.g., professional master's programs, fully online programs, etc.), reviews for which may be conducted by a desk review or virtual site visit.

6.7.4.3 All site visits for undergraduate programs are conducted in-person and on-campus unless an alternative method is requested by the Academic Unit and/or Faculty or School in advance of the review. Alternative methods for site-visits (e.g., virtual or desk review) are not permitted for doctoral or master's programs (with the exception of certain master's programs as stated above.)

6.7.4.3.1 A clear justification for the request of an alternative review method must be provided to the Provost (or delegate), who will have final approval authority over the request.

6.7.4.3.2 The Review Team must be satisfied that the review method taking place is acceptable and appropriate.

6.7.4.4 The Review Team should visit the campus together or engage together on the same remote calls.

6.7.4.5 The Faculty Office(s) and the School of Graduate Studies and Postdoctoral Affairs, if appropriate, will consult with members of the program(s) and with assistance from the Provost's Office, arrange for meetings between the reviewers and appropriate individuals as outlined in the Sample Meeting Itinerary:

6.7.4.5.1 Provost (or delegate);

6.7.4.5.2 Vice-Provost and Dean of the School of Graduate Studies and Postdoctoral Affairs or delegate (if applicable);

6.7.4.5.3 Dean or delegate of the faculty(ies) (if applicable);

6.7.4.5.4 Unit Head(s);

6.7.4.5.5 Unit(s) faculty members;

6.7.4.5.6 faculty member representatives from cognate units (if applicable);

6.7.4.5.7 Undergraduate students, graduate students, and postdoctoral fellows (as appropriate) of the unit(s);

6.7.4.5.8 Staff members of the unit(s);

6.7.4.5.9 Support Service representatives such as the Librarian (or delegate) associated with the unit(s) and Information Technology Services (ITS) (if applicable); and

6.7.4.5.10 Relevant members of the external community (if applicable).

6.7.4.6 The Review Team members will be free to seek information from other sources, and, to suggest other individuals and groups with whom to meet during the site visit.

6.7.4.7 The Provost (or delegate) will brief the reviewers on foundational aspects of the review process.

6.7.4.8 The Review Team members should not be invited to participate in academic or social events other than as required by their duties as reviewers.

6.7.4.9 During the site visit and the writing of the Review Report, the internal reviewer will provide important insights about the University so that any conclusions drawn and/or recommendations made by the external reviewers are done with an understanding of how changes are implemented at Queen's.

6.7.5 The Review Report

6.7.5.1 The Review Team's evaluation and Report(s) is submitted to the Provost (or delegate) within one month after the site visit.

6.7.5.2 Where circumstances permit, the Review Team will submit one joint report.

6.7.5.3 The report(s) will:

6.7.5.3.1 address the substance of the Self-Study (see section 6.5), with particular focus on responding to the evaluation criteria in section 6.6;

6.7.5.3.2 identify and commend the program's notably strong and creative attributes;

6.7.5.3.3 describe the program's respective strengths, areas for improvement, and opportunities for enhancement;

6.7.5.3.4 provide evidence of any significant innovation or creativity in the content and/or delivery of the program relative to other such programs;

6.7.5.3.5 make at least three recommendations for specific steps to be taken that will lead to the continuous improvement of the program, distinguishing between those the program can itself take and those that require external action; and

6.7.5.3.6 identify the distinctive attributes of each discrete program documented in the Self-Study in those cases where the University chooses to simultaneously review more than one program / program level (for example, graduate and undergraduate), program modes, and/or programs offered at different locations.

6.7.5.4 It is important to note that, while the Review Report may include commentary on issues such as faculty complement and/or space requirements when related to the quality of the program under review, recommendations on these or any other elements that are within the purview of the University's internal budgetary decision-making processes must be tied directly to issues of program quality or sustainability.

The internal reviewer may also review a draft of the Review Report and provide comments on its accuracy.

6.7.5.5 If the report has not been completed or does not provide adequate recommendations, the Provost (or delegate) will return the report to the Review Team for revisions. In the event that the Review Team cannot provide revisions or cannot be reached within a reasonable amount of time, a new review and report will be commissioned utilizing the next-ranked members on the review team nomination form. Faculty Offices are advised to withhold stipends until the report has been received.

6.7.6 Internal Responses

It is essential that the Academic Unit and the relevant Dean(s) or their designate(s)/Departmental Head(s) make clearly separate responses to the Review Report(s) and recommendations. The exception to this requirement for separate responses is in the case of non-departmentalized Faculties and/or Schools (or equivalent), where the Dean (or equivalent) is essentially the Departmental Head.

6.7.7 Academic Unit Response

The Provost (or delegate) will invite the Academic Unit to respond to the Review Report. The Unit response should address any factual errors and substantial matters set out by the reviewers. The Unit should also comment on each of the recommendations in the Review Report.

6.7.8 Decanal Response

The Provost will circulate the Review Report to the School of Graduate Studies and Postdoctoral Affairs (if appropriate), the relevant Dean(s) and the Unit Head(s) responsible for the program under review. The Dean(s) are required to provide their responses to each of the following:

6.7.8.1 the plans and recommendations proposed in the Self-Study document;

6.7.8.2 the recommendations advanced by the Review Team; and

6.7.8.3 the Academic Unit's response to the Review Report(s).

In their responses to the Review Report, the relevant Dean(s) should indicate which recommendations they endorse, where they disagree and the reasons why. For the recommendations they support, responses should include a description, to the extent possible, of the following:

6.7.8.4 any changes in organization, policy or governance that would be necessary to meet the recommendations;

6.7.8.5 the resources, financial and otherwise, that would be necessary to implement the recommendations; and

6.7.8.6 a proposed timeline for the implementation of the recommendations.

6.8 Final Assessment Report and Implementation Plan

The Final Assessment Report provides the institutional synthesis of the external evaluation of the program and strategies for continuous improvement.

The SCPRC identifies key components for inclusion in the Final Assessment Report, and then the Final Assessment Report and Implementation Plan are drafted by the Provost's Office for review and approval by the SCPRC. The SCPRC reports on Final Assessment Reports and Implementation Plans annually, for information.

6.8.1 The Final Assessment Report:

6.8.1.1 identifies significant strengths of the program;

6.8.1.2 identifies opportunities for further program improvement and enhancement with a view towards continuous improvement;

6.8.1.3 lists all recommendations of the external reviewers and the associated, separate, internal responses and assessments from the unit and from the Dean(s);

6.8.1.4 explains why any external reviewers' recommendations not selected for further action in the Implementation Plan have not been prioritized;

6.8.1.5 includes any additional recommendations that the Academic Unit, the Dean(s) and/or the University may have identified as requiring action as a result of the program's review;

6.8.1.6 may include a confidential section (for example, where personnel issues need to be addressed); and

6.8.1.7 identifies who will be responsible for approving the recommendations set out in the Final Assessment Report.

6.8.2 The Final Assessment Report must include an Executive Summary, excluding any confidential information, which is to be published on the University's website alongside the associated Implementation Plan.

6.8.3 The Final Assessment Report will also include an Implementation Plan that:

6.8.3.1 Is the primary responsibility of the Unit Head and Faculty of the relevant program(s).

6.8.3.2 sets out and prioritizes those recommendations that are selected for implementation;

6.8.3.3 identifies the group or individual responsible for providing resources needed to address recommendations from the external reviewers or action items identified by the University;

6.8.3.4 identifies who will be responsible for acting on those recommendations; and

6.8.3.5 provides specific timelines for acting on and monitoring the implementation of those recommendations.

6.9 Reporting Requirements

6.9.1 Internal Reporting Requirements

6.9.1.1 The Final Assessment Report (excluding all confidential information) and associated Implementation Plan will be distributed to Senate for information.

6.9.1.2 The Executive Summary and the associated Implementation Plan will be posted on the university's website and copies will be provided to the University's governing body.

6.9.1.2.1 Unless approved by the Academic Unit the Self-Study Report, Review Team Report, and Internal Responses will not be shared publicly.

6.9.1.3 The approved Final Assessment Report (excluding all confidential information, as appropriate), Executive Summary and Implementation Plan will be provided to the Academic Unit to "own" and act on, as appropriate.

6.9.1.4 It is strongly recommended that the Academic Unit post the Executive Summary and Implementation Plan on the program's website (see Guidance).

6.9.1.5 It is expected that the report from the Review Team will be afforded an appropriate level of confidentiality.

6.9.2 External Reporting Requirements

The University is required to report on the outcomes of the Cyclical Program Review activity to the Quality Council.

Reporting will be done by the submission of an annual report to the Quality Council that lists the past year's completed Final Assessment Reports, Implementation Plans and monitoring reports and provides an attestation by the Provost (or delegate) that all QUQAP-required Cyclical Program Review processes have been followed. The report will also include a link to the University's web posting of the completed Executive Summaries and Implementation Plans, as well as any monitoring reports that have also been completed over the prior year.

The annual report and related Cyclical Program Review processes will occasionally be reviewed for compliance by the Quality Council. Only when members find an issue or potential area of concern will the report be discussed by the Quality Council. Should the Council then determine that a substantive issue(s) appears to

exist, it may decide to initiate a Focused Audit (see section 6.3 of the QAF and associated Definition).

6.9.3 Subsequent Institutional Processes

6.9.3.1 Monitoring

The program will submit a follow-up report to the SCPRC on the implementation of recommendations 18 months and 4 years after the Final Assessment Report and Implementation Plan approval date. The report will focus on updates to the implementation plan and work completed on the recommendations as outlined in the review team report. While the Faculty Dean is responsible for the continuous improvement of programs, the Provost (or delegate) will initiate the monitoring reports. Reports will be reviewed and approved by the Unit Head, Faculty Dean, Vice-Provost and Dean (SGSPA) (if required) and the Provost (or delegate). The reports will also be reviewed and approved by SCPRC prior to being reported to Senate for information. All monitoring reports will be posted on the Provost's Quality Assurance website. Academic Units are strongly encouraged to post these reports on their own websites.

6.9.3.2 Subsequent Cyclical Program Review

The next cyclical program review will be scheduled within seven years of the Senate approval of the Final Assessment Report and Implementation Plan.

6.10 Use of Accreditation and Other External Reviews in the Institutional Quality Assurance Process

6.10.1 An accreditation review can usefully replace some of the requirements of a Cyclical Program Review. The Protocol for Cyclical Program Review can therefore allow for the substitution or addition of some documentation or specific processes associated with the accreditation of a program. Adaptations may be made for certain components of the program review process, but only when these elements are fully consistent with the requirements established in this Framework (see Guidance).Alignment between Accreditation Protocols and Cyclical Program Review As the protocols and standards differ between accreditation bodies and programs, decisions on protocol alignments will be made on an individual basis.

6.10.1.1 When a program is approved under the Protocol for New Programs the Academic Unit may request that the cyclical program review of the program be conducted in alignment with their accreditation.

6.10.1.2 The request must be made with approval from the relevant Faculty or School Deans.

6.10.1.3 Final approval for alignment will be the responsibility of the Provost (or delegate).

6.10.2 Considerations for Alignment

How the Academic Unit, relevant Faculty or School Deans, and the Provost (or delegate) approaches the question of whether to combine, coordinate or completely segregate the reviews depends on a number of factors, including:

- levels and complexity of program offered (undergraduate, graduate, professional);
- review cycle;
- qualifications required for reviewers;
- evaluation criteria; and
- issues currently faced by the program and/or the University.

One common characteristic of both accreditation and cyclical program review is the development of a Self-Study by the program undergoing review. However, combining a Cyclical Program Review and an accreditation review can be challenging given the different purposes and evaluation criteria that apply. Ultimately, while some stages of the review process may be substituted or augmented by an accreditation review, the evaluation criteria detailed in section 6.6 must be addressed in the Self-Study and by the external reviewers and a Final Assessment Report, Executive Summary, Implementation Plan, and subsequent monitoring reports, as detailed in sections 6.8 and 6.9 , must be produced and approved for all programs.

6.10.3 Impacts of Alignment

If the program has been approved for an accreditation aligned cyclical program review, there are several impacts on the review protocol that the Academic Unit and relevant Faculty or School Deans should be aware of.

6.10.3.1 All cyclical program reviews will be conducted on the accreditation schedule, provided the accreditation takes place within at least every seven years.

6.10.3.2 Ultimately, while some stages of the review process may be substituted or augmented by an accreditation review, the evaluation criteria detailed in section 6.6 must be addressed in the Self-Study and by the Review Team.

6.10.3.2.1 The Academic Unit must consult with the Provost (or delegate) on proper alignment prior to beginning their Self-Study (see Guidance).

6.10.3.2.2 The Self-Study must include a chart detailing the parallels between the accreditation and cyclical program review evaluation criteria. Rationale for any changes must be provided.

6.10.3.3 The Self-Study must address any challenges raised in the previous cyclical program review, accreditation, or subsequent monitoring reports.

6.10.3.4 Review Team Reports (6.7.5), Final Assessment Reports (6.9.1.1), Executive Summaries (6.9.1.2), Implementation Plans and subsequent monitoring reports (6.9.3) must be produced and approved for all programs.

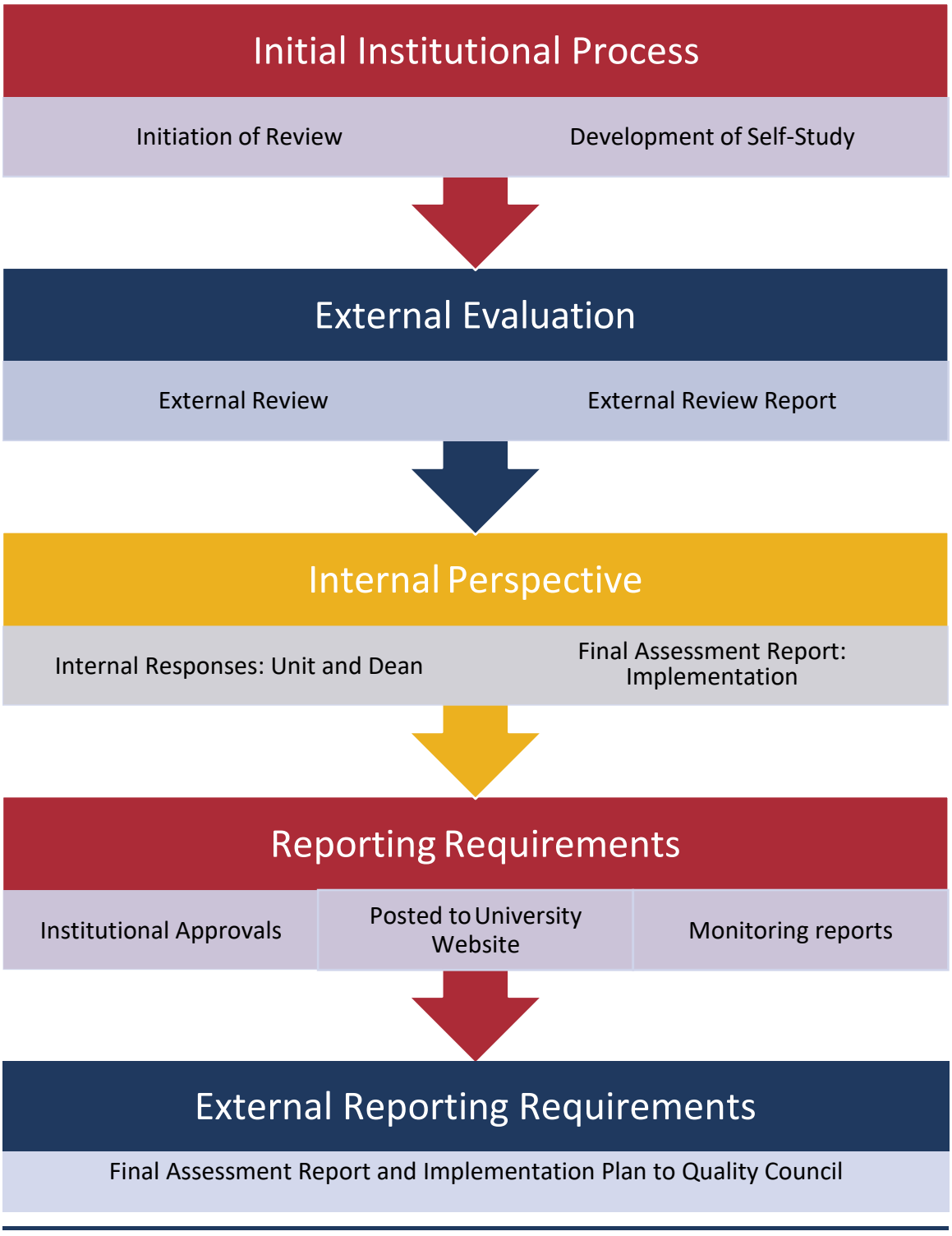
6.11 Audit

6.11.1 A Record of Substitution or Addition, and the grounds on which decisions were made, is eligible for Cyclical Audit.

6.11.2 Cyclical Program Reviews that were undertaken within the period since the conduct of the previous Audit are eligible for selection for the University's next Cyclical Audit.

6.11.3 Additional information on the Audit of Cyclical Program Reviews is found in QAF 5.6

6.12 Overview of the Protocol for Cyclical Program Reviews



7. Audit Protocol

At least once in every eight years, the University undergoes a "Cyclical Audit" of its quality assurance practices. As outlined in the QAF, section 6.1, the Cyclical Audit will:

1. Review institutional changes made in policy, process, and practice in response to the recommendations from the previous audit;
2. Confirm the university's practice is in compliance with its IQAP as ratified by the Quality Council and note any misalignment of its IQAP with the QAF; and
3. Review institutional quality assurance practices that contribute to continuous improvement of programs, especially the processes for New Program Approvals and Cyclical Program Reviews.

The same section indicates that the objectives of the Cyclical Audit are to ensure transparency and accountability in the development and review of academic programs, to assure students, citizens, and the government of the international standards of quality assurance processes, and to monitor the degree to which a university has:

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

Queen's University supports the aims of quality assurance generally and the specific aims of the audit process and its objectives. Queen's will supply the documents requested for the Cyclical Audit, support the visit by auditors, and engage fully with the Audit process as outlined in QAF 6.0.
The Institutional Self-Study will be prepared by the Provost or delegate. A draft will be based on the template provided in 6.2.3 of the QAF and then circulated for comment to the following individuals or groups:

1. The Principal
2. The Deans of the Faculties and Schools
3. SCPRC and SCADP
4. Relevant offices contacted in the development of quality assurance documents (School of Graduate Studies, the Library, the Office of Indigenous Initiatives, Institutional Research and Planning, Information Technology Services, the Human Rights and Equity Office, the Office of the University Registrar.

Others may be consulted as appropriate.

Appendix 1: Definitions

Academic Services

Those services integral to a student's ability to achieve the program-level learning outcomes. Such services would typically include, but are not limited to, academic advising and counselling appropriate to the program; information technology, library and laboratory resources directed towards the program; and internship, co-operative education, and practicum placement services, where these experiential components are a required part of a program. Excluded from academic services are items such as intramural and extramural activities, residence services, food services, health and wellness services, psychological services, and financial aid services and career services, except where any of these services are specifically identified to be an integral part of the academic program.

Adjusted Oversight

A guiding Principle of the Quality Assurance Framework is that the "Quality Council recognizes past performance of institutions and adjusts oversight accordingly." Adjusted oversight refers to the practice of decreasing or increasing the degree of oversight by the Quality Council depending upon the university's compliance across the spectrum of its quality assurance practices. Oversight may also be increased in one area and decreased in another. Examples of adjusted oversight include: a reduction or increase in the number of programs selected for a Cyclical Audit, a Focused Audit, adjusted requirements for documentation, and adjusted reporting requirements. See Guidance for detailed examples.

Certificate

See, Undergraduate Certificate

Collaborative Specialization

An intra-university graduate field of study that provides an additional multidisciplinary experience for students enrolled in and completing the degree requirements for one of several approved master's and/or PhD programs within the collaborative specialization. Students meet the admission requirements of and register in the participating (or "home") program but complete, in addition to the degree requirements of that program, the additional requirements specified by the Collaborative Specialization. The degree conferred is that of the home program, and the completion of the Collaborative Specialization is indicated by a transcript notation indicating the additional specialization that has been attained (e.g., MA in Political Science with specialization in American Studies).

A Collaborative Specialization must have:

- At least one core one-semester course that is foundational to the specialization and does not form part of the course offerings of any of the partner programs. This

course must be completed by all students from partner programs registered in the specialization and provides an opportunity for students to appreciate the different disciplinary perspectives that can be brought to bear on the area of specialization. This course may serve as an elective in the student's home program.

- Clear and explicit requirements for each Collaborative Specialization. In programs requiring a major research paper, essay, or thesis, the topic must be in the area of the collaborative specialization. In course-only master's programs, at least 30% of the courses must be in the area of specialization including the core course described above. Courses in the area of specialization may be considered electives in the home program.
- Core-only faculty, that are those faculty members in the participating home programs who have an interest and expertise in the area of the collaborative specialization (this may include faculty primarily appointed to an interdisciplinary Academic Unit – for example, an Institute of American Studies – that provides the anchor for the specialization).
- Appropriate administrative and academic oversight/governance to ensure requirements associated with the specialization are being met.

Combined Programs

A program of study that combines two existing degree programs of different types. The combination may, for example, consist of two existing graduate programs, or a graduate and an undergraduate program. In most cases, the combination will involve at least one professionally oriented program. As students normally pursue one degree program at a time, and if two qualifications are sought, the degree programs would best be pursued consecutively. However, there are cases where the combination of two programs may be advantageous from a student's point of view.

If a combined program is proposed, there must be a demonstration that it provides such advantages to students through time efficiency, benefits to scholarship, professional development, or other considerations. Students must be made fully aware of the requirements and the schedule for completion of both programs, before embarking upon the combined degree.

Degree

An academic credential awarded on successful completion of a prescribed set and sequence of requirements at a specified standard of performance consistent with the Ontario Council of Academic Vice-Presidents (OCAV) DLEs and the university's own

expression of those Expectations (see Appendix 2) and achievement of the degree's associated learning outcomes.

Degree Level Expectations

Academic standards that identify the knowledge and skill outcome competencies and reflect progressive levels of intellectual and creative development, as established by OCAV. The DLEs detailed in Appendix 2 are the Quality Assurance Framework's link to the Ontario Qualifications Framework (OQF). DLEs may be expressed in subject-specific or in generic terms. Graduates at specified degree levels (*e.g.*, BA, MSc) are expected to demonstrate these competencies. Each university has undertaken to adapt and describe the DLEs that will apply within its own institution. Likewise, Academic Units will describe their university's expectations in terms appropriate to their academic programs. Further information, together with examples for successive degree levels, is provided in Guidance.

Degree Program

The complete set and sequence of courses, combinations of courses and/or other units of study, research and practice prescribed by a university for the fulfillment of the requirements for each degree.

Desk Audit

The process associated with the Audit Team's auditing of documents that have been submitted for a university's audit, as required as a preliminary step of the Cyclical Audit. A desk audit is one part of the process to determine an institution's compliance with its own IQAP and/or the Quality Assurance Framework.

Desk Review

A review of a New Program Proposal or Self-Study conducted by external reviewers that is conducted independently of the university (i.e., does not typically include interviews or in-person or virtual site visits). Such a review may, with the agreement of both the external reviewers and the Provost (or delegate), replace the external reviewers' in-person or virtual site visit in the New Program Approval process and Cyclical Program Review process for certain undergraduate and master's program reviews (see sections 2.5.4 and 6.7.4).

Diploma Program

The complete set and sequence of courses, combinations of courses and/or other units of study prescribed by a university for the fulfillment of the requirements for each for-credit or not-for-credit undergraduate and graduate diploma. Not-for-credit and for-credit

undergraduate or post-graduate diploma programs are not subject to approval or audit by the Quality Council.

The Quality Council recognizes only three types or categories of Graduate Diploma (see definitions below and Guidance), with specific appraisal conditions (and an associated submission template) applying to each. In each case, when proposing a new graduate diploma, a university may request an Expedited Approval process (see definition below). All such programs, once approved, will be subject to the normal cycle of program reviews, typically in conjunction with the related degree program.

Type 1: Awarded when a candidate admitted to a master's program leaves the program after completing a prescribed proportion of the requirements. Students are not admitted directly to these programs. When new, these programs require approval through the university's Protocol for Major Modification (Program Renewal and Significant Change) prior to their adoption. Once approved, they will be incorporated into the university's schedule for cyclical program reviews as part of the parent program.

Type 2: Offered in conjunction with a master's or doctoral degree, the admission to which requires that the candidate be already admitted to the master's or doctoral program. This represents an additional, usually interdisciplinary, qualification. When new, these programs require submission to the Quality Council for an Expedited Approval (no external reviewers required) prior to their adoption. Once approved, they will be incorporated into the university's schedule for cyclical program reviews as part of the parent program.

Type 3: A stand-alone, direct-entry program, generally developed by a unit already offering a related master's or doctoral degree and designed to meet the needs of a particular clientele or market.

Where the program has been conceived and developed as a distinct and original entity, the university will use the Expedited Approval (see below).

Although the Expedited Approval Protocol does not involve external reviewers, new Type 3 graduate diplomas are to be included in the university's schedule for cyclical reviews and will be subject to external review during the CPR process. (Cf. Senate Policy on Certificate and Diploma Programs and Undergraduate Diplomas below).

Emphasis, Option, Minor Program (or similar)

An identified set and sequence of courses and/or other units of study, as well as research and practice within an area of disciplinary or interdisciplinary study, which are completed on an optional basis in partial fulfillment of the requirements for the awarding of a degree, and which may be recorded on the graduate's academic record. While requiring recognition in the IQAP, proposals for their introduction or modification do not require reference to the Quality Council unless they are part of a new program.

Expedited Protocol

Generally, approvals granted in a shorter time span with less required documentation. The Expedited Protocol requires the submission to the Quality Council of a Proposal Brief (see suggested template) of the proposed program change/new program (as detailed above) and the rationale for it. Furthermore, the Council's appraisal and approval processes are reduced. The outcomes of these submissions will be conveyed to the proposing university directly by the Quality Assurance Secretariat and reported to the Quality Council.

Field

In graduate programs, an area of specialization or concentration (in multi/interdisciplinary programs a clustered area of specialization) that is related to the demonstrable and collective strengths of the program's faculty and to a new or existing program. Universities are not required to declare fields at either the master's or doctoral level. Universities may wish, through an Expedited Protocol, to seek the endorsement of the Quality Council.

Focused Audit

A close examination of a specific aspect of an institution's quality assurance processes and practices that have not met the standards/requirements set out by the Quality Council in the QAF or in the institution's IQAP. A Focused Audit does not replace a Cyclical Audit.

Graduate Level Course

A course offered by a graduate program and taught by institutionally approved graduate faculty, where the learning outcomes are aligned with the Graduate DLEs and the majority of students are registered as graduate students.

Inter-Institutional Program Categories

1. Conjoint Degree Program: A program of study, offered by a postsecondary institution that is affiliated, federated, or collaborating with a university, which is approved by the university's Senate or equivalent body, and for which a single degree document signed by both institutions is awarded.

2. Cotutelle: A customized program of doctoral study developed jointly by two institutions for an individual student in which the requirements of each university's doctoral program are upheld, but the student working with supervisors at each institution prepares a single thesis which is then examined by a committee whose members are drawn from both institutions. The student is awarded two-degree documents, though there is a notation on the transcripts indicating that the student completed their thesis under Cotutelle arrangements.

In the case of the Cotutelle, since this arrangement relates to an existing, approved program, no separate appraisal or review processes will apply.

3. Dual Credential/Degree Program: A program of study offered by two or more universities or by a university and a college or institute, including Institutes of Technology and Advanced Learning, in which successful completion of the requirements is confirmed by a separate and different degree/diploma document being awarded by each of the participating institutions.

4. Joint Degree Program: A program of study offered by two or more universities or by a university and a college or institute, including an Institute of Technology and Advanced Learning, in which successful completion of the requirements is confirmed by a single degree document. (See Guidance)

The Protocol for New Program Approvals or the Protocol for Major Modifications (Significant Change and Program Renewal) will be used, as appropriate.

For existing inter-institutional programs in which all partners are institutions within Ontario, the Quality Council's Cyclical Program Review Processes will apply to all elements of those programs as offered by all partner institutions involved (including, e.g., Ontario Colleges of Applied Arts and Technology and Institutes of Technology and Advanced Learning). For joint programs in which some partners are institutions outside Ontario, the elements of the programs contributed by the out-of-province partner will be subject to the quality assurance processes in their respective jurisdictions but must also satisfy the corresponding requirements of the QAF. The Quality Council will verify that post-secondary assurance processes of an out-of-province partner are recognized and accepted as being comparable to our own. In cases where out-of-province processes are deemed to be insufficiently comparable to the requirements of the QAF, the Quality Council will

determine the appropriate action to be taken on quality assurance if the collaboration is to be permitted to proceed.

Major Modifications

A "significant change" in the program requirements, intended learning outcomes, and/or human and other resources associated with a degree program or program of specialization, as defined by institutions within their IQAP. (See Guidance)

Micro-credentials

A designation of achievement of a coherent set of skills and knowledge, specified by a statement of purpose, learning outcomes, and strong evidence of need by industry, employers, and/or the community. They have fewer requirements and are of shorter duration than a qualification and focus on learning outcomes that are distinct from diploma/degree programs. While requiring recognition in the IQAP, proposals for the introduction or modification of a micro-credential do not require reference to the Quality Council unless they are part of a new program.

Mode of Delivery

The means or medium used in delivering a program (e.g., lecture format, distance, online, synchronous/asynchronous, problem-based, compressed part-time, multi-campus, inter-institutional collaboration, or other non-standard forms of delivery).

New Program

Any degree credential (e.g., BMus, Bachelor of Integrated Studies) or degree program (within an existing degree credential), 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). To clarify, for the purposes of this Framework, a 'new program' is brand-new: that is to say, the program has substantially different program objectives, program requirements and program-level learning outcomes from those of any existing approved programs offered by the institution. Examples of what constitutes a 'new program' are provided in Guidance.

The approval process for the introduction of new undergraduate and graduate programs follows the New Program Approval Protocol in Framework Part Two. All Proposal Briefs

submitted to the Quality Council will report whether the program is a professional program and/or a full cost-recovery program.

Professional Master's Program

Typically, a professional master's degree is a terminal degree that does not lead to entry into a doctoral program. Such programs are designed to help students to prepare for a career in specific fields, such as occupational therapy, physical therapy, finance, or business, among others. A professional master's degree often puts a great deal of focus on real-world application, with many requiring students to complete internships or projects in their field of study before graduation. In contrast, a research master's degree provides experience in research and scholarship and may be either the final degree or a step toward entry into a doctoral program.

Program

A program is the complete set and sequence of courses, combinations of courses and/or other units of study, research and practice described by Queen's University for the fulfillment of the requirements of a degree, diploma, or certificate.

Program-Level Student Learning Outcomes

Clear and concise statements that describe what successful students should have achieved and the knowledge, skills, and abilities that they should have acquired by the end of the program, however an institution defines 'program' in its IQAP. Program-level student learning outcomes emphasize the application and integration of knowledge – both in the context of the program and more broadly – rather than coverage of material; make explicit the expectations for student success; are measurable and thus form the criteria for assessment/evaluation; and are written in greater detail than the program objectives. Clear and concise program-level learning outcomes also help to create shared expectations between students and instructors. (See Guidance)

Program Objectives

Clear and concise statements that describe the goals of the program, however an institution defines 'program' in its IQAP. Program objectives explain the potential applications of the knowledge and skills acquired in the program; seek to help students connect learning across various contexts; situate the program in the context of the discipline as a whole; and are often broader in scope than the program-level learning outcomes that they help to generate. (See Guidance)

Program of Specialization (e.g., a major, honours program, concentration, or similar designation)

An identified set and sequence of courses and/or other units of study, research, and

practice within an area of disciplinary or interdisciplinary study, completed in full or partial fulfillment of the requirements for the awarding of a degree, and which is recorded on the graduate's academic record.

It should be noted that:

a) A program constitutes complete fulfillment of the requirements for the awarding of a degree when the program and degree program are one and the same.
b) A program constitutes "partial" fulfillment of the requirements for the awarding of a degree when the program is a subset of the degree program. Typically, a bachelor's degree requires the completion of a program of specialization, often referred to as a major, an honours program, a concentration or similar designation.

Undergraduate Certificate

The Senate Policy on Certificate and Diploma Programs defines the Undergraduate Certificate as follows:
Admission to a Queen's Undergraduate Certificate will be in accordance with the admission policies of an individual Faculty/School. An Undergraduate Certificate is a program of study coherently organized around clear learning objectives and outcomes, and typically having academic content equivalent to a minimum of half a year of full-time undergraduate study at Queen's (15.0 units of degree-credit courses or equivalent). An Undergraduate Certificate may be a stand-alone credential, or, under prescribed conditions, it may be part of a set of laddered Undergraduate Diploma and/or Degree Programs (see below). Certificates may be focused primarily upon academic or professional development objectives, but typically should meet this minimum criterion of academic content.

Note that a laddered undergraduate certificate can only culminate in a Senate-approved degree program.

Undergraduate Diploma

The Senate Policy on Certificate and Diploma Programs defines the Undergraduate Diploma as follows:

Admission to a Queen's Undergraduate Diploma will be in accordance with the admission policies of an individual Faculty/School. An Undergraduate Diploma is a program of study that involves a significant body of academic work coherently organized around clear learning objectives and outcomes typically having academic content equivalent to a minimum of one year of full-time undergraduate study at Queen's (30.0 units of degree-credit courses or equivalent). An Undergraduate Diploma may be a stand-alone credential, or, under prescribed circumstances, it may be part of a laddered set of programs leading to an Undergraduate Degree. Undergraduate Diplomas may be focused primarily upon academic or professional development objectives, but typically all should meet this minimum criterion of academic content.

Virtual Site Visit

The practice of conducting all required elements of the external reviewers' site visit using videoconferencing software and/or other suitable platforms. A virtual site visit will still include elements such as virtual meetings with students, faculty, and other relevant groups. It may also include remote attendance at performances or events, and virtual facilities tours. A virtual site visit may replace an in-person site visit for certain undergraduate and master's program, with agreement from both the external reviewers and the Provost.

Appendix 2: Ontario Council of Academic Vice-Presidents' Undergraduate and Graduate Degree Level Expectations

Ontario Council of Academic Vice-Presidents' Undergraduate Degree Level Expectations

With Revisions specific to Queen's University

	Baccalaureate/bachelor's degree This degree is awarded to students who have demonstrated/are able to:	Baccalaureate/bachelor's degree: honours This degree is awarded to students who have demonstrated the following:
Depth and Breadth of Knowledge	a) General knowledge and understanding of many key concepts, methodologies, theoretical approaches and assumptions in a discipline; b) Broad understanding of some of the major fields in a discipline, including, where appropriate, from an interdisciplinary perspective, and how the fields may intersect with fields in related disciplines; c) Ability to gather, review, evaluate and interpret information relevant to one or more of the major fields in a discipline; d) Some detailed knowledge in an area of the discipline; e) Critical thinking and analytical skills inside and outside the discipline; f) Ability to apply learning from one or more areas outside the discipline; g) Ability to identify the potential for inequities in the production and dissemination of knowledge; and h) Ability to recognize diverse worldviews, ways of knowing, abilities, and experiences, including Indigenous perspectives.	a) Developed knowledge and critical understanding of the key concepts, methodologies, current advances, theoretical approaches and assumptions in a discipline overall, as well as in a specialized area of a discipline; b) Developed understanding of many of the major fields in a discipline, including, where appropriate, from an interdisciplinary perspective, and how the fields may intersect with fields in related disciplines; c) Developed ability to: i) gather, review, evaluate and interpret information, and ii) compare the merits of alternate hypotheses or creative options, relevant to one or more of the major fields in a discipline; d) Developed, detailed knowledge of and experience in research in an area of the discipline; e) Developed critical thinking and analytical skills inside and outside the discipline; f) Ability to apply learning from one or more areas outside the discipline.

		g) Ability to examine the potential for inequities in the production and dissemination of knowledge; and h) Ability to explore diverse worldviews, ways of knowing, abilities, and experiences, including Indigenous perspectives.
Knowledge of Methodologies	An understanding of methods of enquiry or creative activity, or both, in their primary area of study that enables the student to: a) evaluate the appropriateness of different approaches to solving problems using well established ideas and techniques; b) devise and sustain arguments or solve problems using these methods; and c) describe limitations of methods they use, recognizing potential inequities, biases, or implicit assumptions.	An understanding of methods of enquiry or creative activity, or both, in their primary area of study that enables the student to: a) evaluate the appropriateness of different approaches to solving problems using well established ideas and techniques; b) devise and sustain arguments or solve problems using these methods; c) describe and comment upon particular aspects of current research or equivalent advanced scholarship; and d) describe limitations of methods they use, recognizing potential inequities, biases, or implicit assumptions.
Application of Knowledge	The ability to review, present, and interpret quantitative and qualitative information to: a) develop lines of argument; b) make sound judgments in accordance with the major theories, concepts and methods of the subject(s) of study; and The ability to use a basic range of established techniques to: a) analyze information; b) evaluate the appropriateness of different approaches to solving problems related to their area(s) of study; c) propose solutions;	The ability to review, present and critically evaluate quantitative and qualitative information to: a) develop lines of argument; b) make sound judgements in accordance with the major theories, concepts and methods of the subject(s) of study; c) apply underlying concepts, principles, and techniques of analysis, both within and outside the discipline; d) where appropriate use this knowledge in the creative process; e) explore the complex interactions between individual, society, economy, environment, and/or technology; and

	d) make use of scholarly reviews and primary sources; and e) explore problems from local and global perspectives.	The ability to use a range of established techniques to: a) initiate and undertake critical evaluation of arguments, assumptions, abstract concepts and information; b) propose solutions; c) frame appropriate questions for the purpose of solving a problem; d) solve a problem or create a new work; e) make critical use of scholarly reviews and primary sources; and f) explore problems from local and global perspectives.
Communication Skills	The ability to communicate information, arguments, and analyses: a) accurately and reliably; b) orally and in writing; and c) to a broad range of audiences in ways that are accessible and inclusive.	The ability to communicate information, arguments, and analyses: a) accurately and reliably; b) orally and in writing; and c) to a broad range of audiences in ways that are accessible and inclusive.
Awareness of Limits of Knowledge	An understanding of the limits to their own knowledge and how this might influence their analyses and interpretations.	a) An understanding of the limits to their own knowledge and ability, and an appreciation of the uncertainty, ambiguity and limits to knowledge and how this might influence analyses and interpretations; and b) Commitment to ongoing learning by identifying gaps, setting personal learning goals, and advancing knowledge.
Autonomy and Professional Capacity	Qualities and transferable skills necessary for further study, employment, community involvement and other activities requiring: a) the exercise of personal responsibility and decision-making;	Qualities and transferable skills necessary for further study, employment, community involvement and other activities requiring: a) the exercise of initiative, personal responsibility and accountability in both personal and group contexts;

	b) working effectively with others; c) the ability to identify and address their own learning needs in changing circumstances and to select an appropriate program of further study; d) behaviour consistent with academic integrity and social responsibility; and e) behaviour consistent with exercising intercultural sensitivity.	b) working effectively with others; c) decision-making in complex contexts; d) ability to manage their own learning in changing circumstances, both within and outside the discipline and to select an appropriate program of further study; e) behaviour consistent with academic integrity and social responsibility; and f) behaviour consistent with exercising intercultural sensitivity.

Ontario Council of Academic Vice-Presidents' Graduate Degree Level Expectations

With Revisions specific to Queen's University

	Master's degree This degree is awarded to students who have demonstrated the following:	Doctoral degree This degree extends the skills associated with the master's degree and is awarded to students who have demonstrated the following:
Depth and Breadth of Knowledge	a) A systematic understanding of knowledge, including, where appropriate, relevant knowledge outside the field and/or discipline, and a critical awareness of current problems and/or new insights, much of which are at, or informed by, the forefront of their academic discipline, field of study, or area of professional practice; b) A recognition of diverse worldviews, ways of knowing, abilities and experiences, including Indigenous perspectives; and c) A recognition of how one's field of study has developed over time.	a) A thorough understanding of a substantial body of knowledge that is at the forefront of their academic discipline or area of professional practice including, where appropriate, relevant knowledge outside the field and/or discipline; b) A critical engagement with diverse worldviews, ways of knowing, abilities, and experiences, including Indigenous perspectives; and c) A recognition of how one's field of study has developed over time.
Research and Scholarship	A conceptual understanding and methodological competence that: a) enables a working comprehension of how established techniques of research and inquiry are used to create and interpret knowledge in the discipline; b) enables a critical evaluation of current research and advanced research and scholarship in the discipline or area of professional competence, including recognizing potential inequities, biases or implicit assumptions; c) enables a treatment of complex issues and judgements based on established principles and techniques; and d) enables a recognition of diverse research methods, technologies, and ways of knowing to explore complex problems.	a) The ability to conceptualize, design, and implement research for the generation of new knowledge, applications, or understanding at the forefront of the discipline, and to adjust the research design or methodology in the light of unforeseen problems; b) The ability to make informed judgments on complex issues in specialist fields, sometimes requiring new methods; c) The ability to produce original research, or other advanced scholarship, of a quality to satisfy peer review, and to merit publication; d) The ability to engage with diverse research methods, technologies, and ways of knowing to explore complex problems;

		e) The ability to ethically engage diverse communities and participants to advance research and scholarship and to benefit communities.
Level of Application of Knowledge	a) Competence in the research process by applying an existing body of knowledge in the critical analysis of a new question or of a specific problem or issue in a new setting; b) originality in the application of knowledge; and c) application of context-appropriate approaches in the production, dissemination, and validation of knowledge.	The capacity to: a) undertake pure and/or applied research at an advanced level; and b) contribute to the development of academic or professional skills, techniques, tools, practices, ideas, theories, approaches, and/or materials; and c) apply context-appropriate approaches in the production, dissemination, and validation of knowledge.
Professional Capacity/Autonomy	a) The qualities and transferable skills necessary for employment requiring: i. the exercise of initiative and of personal responsibility and accountability; and ii. decision-making in complex situations; b) The intellectual independence required for continuing professional development; c) The ethical behaviour consistent with academic integrity and the use of appropriate guidelines and procedures for responsible conduct of research; and d) The ability to appreciate the broader implications of applying knowledge to particular contexts.	a) The qualities and transferable skills necessary for employment requiring the exercise of personal responsibility and largely autonomous initiative in complex situations; b) The intellectual independence to be academically and professionally engaged and current; c) The ethical behaviour consistent with academic integrity and the use of appropriate guidelines and procedures for responsible conduct of research; d) The ability to evaluate the broader implications of applying knowledge to particular contexts; and e) The ability to recognize inequitable power structures in the field.
Level of Communication Skills	The practice of formally and informally communicating: a) ideas, issues, and conclusions clearly and accurately; b) through various modes of communication;	The practice of formally and informally communicating: a) complex and/or ambiguous ideas, issues, and conclusions clearly and accurately; b) through various modes of communication; c) to diverse audiences in ways that are accessible and inclusive; and

	c) to diverse audiences in ways that are accessible and inclusive; and d) in ways that demonstrate active listening skills.	d) in ways that demonstrate active listening skills.
Awareness of limits of knowledge	Cognizance of the complexity of knowledge and of the potential contributions of other interpretations, worldviews, methods, and disciplines.	An appreciation of the limitations of one's own work and discipline, of the complexity of knowledge, and of the potential contributions of other interpretations, worldviews, methods, and disciplines.