Purpose

The purpose of this policy is to ensure that programs of instruction at Georgian College are reviewed annually, and in accordance with Ministry of Training, Colleges, and Universities (MTCU) standards, and quality assurance criteria established by the Ontario College Quality Assurance Service (OCQAS) and the Post-secondary Education Quality Assessment Board (PEQAB). As a publicly funded postsecondary institution, it is essential that programs are also aligned with Georgian College policies and relevant professional body requirements, and that they maintain quality, relevancy and currency for the students and communities we serve.
Scope

This policy applies to all Ontario College Certificate, Ontario College Diploma, Ontario College Advanced Diploma, Ontario Graduate Certificate, and Honours Bachelor Degree programs leading to a Georgian College credential.

Definitions

<table>
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<tr>
<th>Word/Term</th>
<th>Definition</th>
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<tbody>
<tr>
<td><strong>Annual Program Assessment</strong></td>
<td><strong>Program Planning Forms</strong></td>
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<tr>
<td></td>
<td>An online fillable template in which the academic areas detail how programs are achieving Georgian’s vision and ensuring program quality. Program areas identify continuous improvement strategies for the next planning year and report on progress at year-end.</td>
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<tr>
<td><strong>Annual Program Assessment</strong></td>
<td><strong>Program Report</strong></td>
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<td></td>
<td>Contains a Quantitative Measurement Summary (including sections regarding Program Demand, Program Success, and Program Resources); Program Benchmarks; Financial Contribution Report; Retention Reporting; Course Metrics Reporting and a detailed KPI Program Report Card.</td>
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<tr>
<td><strong>Annual Program Assessment</strong></td>
<td><strong>Program Resources</strong></td>
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<td>Information housed on the Institutional Research SharePoint site to assist program areas using the Program Reports and Program Forms, including definitions of metrics, frequently asked questions, and instructions on how to run detailed KPI reports.</td>
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<tr>
<td><strong>Capacity Assessment Committee</strong></td>
<td>An internal committee responsible for the evaluation of resource requirements for any proposed programs or major changes to existing programs. They provide recommendations related to the program proposal.</td>
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<tr>
<td><strong>Curriculum Information Management system (CIM)</strong></td>
<td>Curriculum Information Management module of CourseLeaf software used to manage course and program approval processes and data entry. The CourseLeaf Curriculum and CourseLeaf Catalog modules work together to automatically update all catalogues with approved course, program and student information system (Banner) data.</td>
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<tr>
<td><strong>Detailed Curriculum Map</strong></td>
<td>A spreadsheet used by program faculty to map every Course Learning Outcome (CLO) to each Program Learning Outcome (PLO) and Essential Employability Skill (ESS) or Degree Level Standards (where relevant), as well as to institutional priorities. The process of mapping is necessary when considering any curriculum change, in order to help</td>
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teams conceptualize how the pieces of the curriculum fit together and identify gaps in the intended learning.

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<tr>
<th>Key Performance Indicators (KPI)</th>
<th>Ministry-mandated metrics collected for all Ontario publicly funded colleges. The KPIs evaluate student satisfaction, graduate satisfaction, employer satisfaction, graduation rate, and employment rate by program area.</th>
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<td>Program Renewal</td>
<td>A comprehensive, cyclical program quality review process, normally conducted every five years.</td>
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<tr>
<td>Program Team</td>
<td>All employees who are involved with delivering a program (i.e. Dean, Associate Dean, Program Coordinator, Faculty, Program Assistant Technologists, Technicians, Co-op Consultant, Student Advisor, etc.).</td>
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**Responsibility**

- The **Vice President, Academic** (VPA) is responsible for reviewing the Annual Program Assessment reports, and discussing programs with potential areas of challenge with the SLT.
- The **Senior Leadership Team** (SLT) is responsible for discussing programs flagged by the VPA.
- The **Dean** of the academic area is responsible for
  - ensuring the completion and submission of the Annual Program Assessment, including the mid-year and year-end follow-up and documented on the Dean’s Personal Development Plan (PDP);
  - identifying the programs with potential areas of challenge, reviewing with the VPA, and recommending the necessary course of action to address the identified challenges;
  - tracking recommendations resulting from the program assessment until completion;
  - identifying to the VPA programs that require additional analysis or resource allocation to address the areas of challenge.
  
  *Note: The Dean may delegate responsibility to the Associate Dean as appropriate.

- The **Program Team** is responsible for completing and submitting the Annual Program Assessment, including the mid-year and year-end follow-up reports, under the guidance of the Dean.
- **Program Faculty** are responsible for providing program perspective regarding student and industry feedback, Institutional Research data, and for contributing to continuous program improvement plans.
- **Institutional Research** (with support from Information Technology) is responsible for
  - providing access to and maintaining the web forms for Annual Program Assessment;
  - collecting and analysing data to be used in the Annual Program Assessment and providing guidance about how to complete the Annual Program Assessment.

- The **Office of Academic Quality** is responsible for providing support to academic areas with the annual review of curriculum, thereby ensuring Program Quality Assurance, including the connection between Annual Program Assessment and Program Renewal, and between Annual Program Assessment and minor program and course changes.
• The Office of the Registrar is responsible for operationalizing the new or revised course and program offerings as they relate to admissions, registration, and graduation.

Policy

1.1 Academic programs must be reviewed annually to ensure academic quality and the systematic measurement of indicators that program outcomes have been met, and that the views of stakeholders (students, employers, accrediting, professional and trade bodies, and academic communities) are considered. This involves annual analysis of program curriculum and the use of provincial KPI data, as well as college performance data (refer to Policy AC-001: Academic Quality Assurance). Academic programs are also reviewed annually to ensure enrolment stability and program viability. Program assessment data is also essential to informing the college’s enrolment planning and budget setting processes. Should a program’s sustainability be at risk, relevant parties meet to discuss data and make necessary recommendations (refer to Policy AC-002: Program Suspension and Cancellation).

1.2 Annual Program Assessment involves the Program Team, and includes assessment of the continuing consistency of the program with Georgian College’s Strategic Plan, Academic Plan and Business Plan.

1.3 All changes resulting from Annual Program Assessment are communicated to relevant stakeholders in a timely manner so as to maintain the quality, currency, relevancy, and sustainability of the program. Recommendations are tracked until completion.

1.4 Annual Program Assessment supports the formal Five-year Program Renewal process by providing yearly trend data, as well as planning tools for continuous improvement (refer to Policy AC-004: Program Renewal).

Procedures

Annual Program Assessment

2.1 *In of the spring of each year, the Ministry releases the KPI data to the colleges. Based on this, Institutional Research compiles and provides Program Reports, Online Program Forms, and Program Resources to the Deans for the relevant programs within their portfolios.

2.2 Program team meets to discuss the program assessment reporting.

2.3 Based on this discussion and findings, the program team populates the action planning online web form with responses to metrics and qualitative analyses, and outlines the program area’s plans for program improvement moving forward by *mid-June of each year.

2.4 The program Dean ensures that the online report fields are complete and accurate.

2.5 At the deadline, the web forms are no longer editable, and the information is stored on the college Intranet for the VPA to review.
2.6 If during program assessment, teams identify the need for revision to program curriculum, they update the detailed curriculum map to reflect the changes as appropriate, and work with support from the Office of Academic Quality to makes changes according to the following deadlines:

2.6.1 Minor program changes, such as sequencing or minor wordsmithing, must be approved in the Curriculum Information Management system (CIM) by June 30. Changes are effective for the fall semester of the following Academic year.
2.6.2 Minor changes to course outlines must be approved CIM by November 30. Changes are effective for the fall semester of the following Academic year.
2.6.3 Major changes must adhere to the process and deadlines outlined in Policy AC-005: Curriculum Revision.

2.7 In November of each year, Institutional Research opens the Annual Program Assessment web forms, so that the program coordinator and Dean can update the fields on the status of the program improvements (including the status of changes to curriculum, resource allocation, and budgetary action items) from a mid-year perspective. The mid-year updates must be submitted by the end of December.

2.8 In May of each year, Institutional Research opens the web form for the end of year wrap-up. At this time, the program coordinator and Dean update the fields and ensure that the information is complete and submitted by *mid-June.

2.9 The data from the Annual Program Assessment is reviewed by the VPA, and kept on file to support continuous quality improvement of the program, including for use in the formal Program Renewal process, and for making decisions about program feasibility.

*Note: When the KPI data is delayed for release by the Ministry, the above timelines will be delayed. Program Teams will have a minimum of six weeks to complete the Program Assessment from the time they receive the Institutional Research data.

Related Materials
OCQAS CQAAP Standards
PEQAB Handbook for Ontario Colleges
PEQAB Degree Level Standards
Policy AC-001: Academic Quality Assurance
Policy AC-002: Program Suspension and Cancellation
Policy AC-004: Program Renewal
Policy AC-005: Curriculum Revision