Sheridan	THE SHERIDAN COLLEGE INSTITUTE OF TECHNOLOGY AND ADVANCED LEARNING	
PROGRAM REVIEW PROCEDURE: Sheridan Certificates		
Date of Approval: November 24, 2016 **Effective Date:** February 10, 2020	**Mandatory Review Date:** January 3, 2023	**Approved By:** Provost and Vice-President, Academic

1. Purpose

The purpose of program review is to support the ongoing quality and effectiveness of Sheridan's academic programming. The review process emphasizes continual improvement based on evidence and self-reflection. The program quality assurance process enables programs to share best practices, identify areas for improvement and enhancement and ensure programs are meeting professional and provincial requirements.

The Ministry of Colleges and Universities (MCU)[1] in the *Framework for Programs of Instruction*[2] requires colleges to "…establish mechanisms for the review of their programs of instruction to ensure ongoing quality, relevancy, and currency" (p. 5)[3]. Through the College Quality Assurance Audit Process (CQAAP), the Ontario College Quality Assurance Service (OCQAS) sets provincial quality assurance criteria for all colleges, audits each college's program review process, and monitors the colleges to ensure that they are meeting Ontario's quality assurance requirements. "The OCQAS defines quality as the alignment and consistency of the learning environment with the institution's vision, mission, and goals (fit for purpose) demonstrated by the development of a culture of quality, in other words, the ability of an institution to reach its stated objectives and fulfill them" (p. 5)[4]. Sheridan degree programs must meet the requirements of the Postsecondary Education Quality Assessment Board (PEQAB).

2. Scope

This Program Review Procedure applies to Sheridan Board Local Certificates, primarily offered by Continuing and Professional Studies (CAPS), and Sheridan Board Undergraduate Certificates. This procedure does not apply to Ontario College Certificates, Ontario College Graduate Certificates, or Recognition of Achievement credentials.

3. Definitions

Associate Dean/Associate Director: An academic manager, typically responsible for a group of programs reporting to a Faculty Dean/Executive Director.

College Quality Assurance Audit Process (CQAAP): Sets provincial quality assurance criteria for all colleges, audits or accredits each college's program review process and monitors the colleges to ensure that they are meeting Ontario's quality assurance requirements for diplomas, advanced diplomas and certificates.

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[1] Ministry of Colleges and Universities. (2020). Retrieved from http://www.tcu.gov.on.ca/pepg/audiences/colleges/

[2] Ministry of Training, Colleges, and Universities. (2003). *Framework for Programs of Instruction*. Retrieved from http://www.tcu.gov.on.ca/pepg/documents/FrameworkforPrograms.pdf

[3] Ministry of Training, Colleges, and Universities. (2009). Framework for Programs of Instruction. http://www.tcu.gov.on.ca/pepg/documents/FrameworkforPrograms.pdf, pg. 5

[4] Ontario College Quality Assurance Services. (2016). College Quality Assurance Audit Process: Guidelines and Framework, pg. 5.

Dean/Executive Director: The head of a Faculty/Department at Sheridan reporting to the Vice Provost.

Program Managers: A business and academic manager, reporting to the Associate Dean Faculty of Continuing and Professional Studies, with responsibility for the development, maintenance and instructional operation of a program/course portfolio.

Sheridan Certificate: Colleges must follow the Ontario Credential Framework (*Framework for Programs of Instruction Minister's Binding Policy Directive, section 3.0*), which represents the minimum provincial requirement for Ontario college credentials to be awarded. This procedure covers the Certificate credential in Section 3.0 column 2. *The Ontario Qualifications Framework* is a companion resource that provides general descriptions of all types of credentials in Ontario offered by all private and public institutions. This procedure corresponds with the column labelled Certificate II. Sheridan Certificates are typically 6 courses. For details refer to:
Procedure to Develop and Approve a Sheridan Board Local Certificate
Procedure to Develop and Approve a Sheridan Board Undergraduate Certificate

Sheridan Program Review Consultant: A Professor in the Centre for Teaching and Learning (CTL) who guides the Faculty Program Review Team throughout their comprehensive review process.

4. Procedure

4.1 Program Review Process
Program review is an important opportunity for programs to plan informed changes based on research from a variety of data sources and feedback from a wide range of stakeholders. Students, graduates and employers can be confident that Sheridan has done due diligence to ensure that program learning outcomes are being achieved, that programs provide an exceptional learning experience possible for students and are responsive to changes in industry and in education. At Sheridan, each program engages in a formative annual reflection process in addition to completing a comprehensive review every five to seven years, as required by CQAAP. A seven-year program review list is reviewed and approved by the Provost and Vice President Academic, and published by the Centre for Teaching and Learning (CTL). For programs with professional accreditation, where possible the program review process is aligned with the accreditation activity.

A. Comprehensive (5-7 Year) Review
The review cycle for commences in the Spring term and ends in the Spring term of the following year. The specific start and end dates are determined by the Dean/Executive Director and Associate Dean/Associate Director for each program.

The comprehensive review is carried out by a Program Review Team within the Faculty. The team is established by the Associate Dean and typically consists of the Associate Dean, the program manager (FCAPS) or program coordinator, and a support staff person. The program review team works with the Centre for Teaching and Learning (CTL), which provides guidance and assistance throughout the program review process. CTL assigns a program review consultant to each team as its primary contact.

The program review process includes:

1. *Program Self-Assessment*
The self-assessment template, jointly maintained by CTL, CAPS and any other Faculty offering certificates, guides the team through a series of questions to analyze and reflect on the following areas:
1. Goals and Context of Program
2. Recruitment, and Enrolment
3. Program Content & Learning Outcomes
4. Learner Experiences
5. Industry Context and Outlook
6. Human Resources & Professional Development

7. Physical and Fiscal Resources

2. *Student and Faculty Input*
The program review team collects feedback from students and faculty about program strengths, opportunities, and areas for enhancement. (e.g. through surveys or focus groups).

3. *Internal Reviewer*
Following the completion of the program self-assessment, the program review team identifies one internal (Sheridan) reviewer outside the program. The reviewer produces a report on their findings for the program based on their review of the self-assessment.

4. *Action and Implementation Plans*
Once the internal reviewer's report is received and reviewed by the program review team, an action plan is developed which includes specific recommendations for program improvement and enhancement. Based on the action plan, the Faculty/Department team establishes a corresponding implementation plan. The comprehensive report, including the action and implementation plans, are discussed with the Senior Academic Team and others, as appropriate. It is the responsibility of the Faculty Dean/Executive Director or designate to implement the agreed-upon action plan and report on implementation in the following annual report(s).

5. Documentation
A final copy of the comprehensive program review documentation is archived both in the Faculty/Department office and in CTL. To complete the comprehensive review cycle, the program reports on progress with respect to the implementation plan during the annual program self-assessment the following year.

6. Contacts: Dean CTL, Executive Director CAPS, or Dean of Faculty

B. Annual Program Self-Assessment
Sheridan's review process emphasizes continual improvement based on reflection and assessment of educational quality. All programs conduct an annual self-assessment at the end of each academic year and produce an annual program report, which supports ongoing reflection and planning, and serves as a resource for programs when they undertake comprehensive review. The annual self-assessment provides the program with the opportunity to: examine curriculum, teaching and learning practices, relationships and insights gained from industry, highlight achievements, address issues and set goals for the coming year. The annual program report is the responsibility of each Faculty Dean to administer. Programs engaged in the comprehensive review have the option to notcomplete the annual report that year for that yearly cycle, at the discretion of the Dean/Executive Dean and Associate Dean/Associate Director. Copies of all program reports are to be stored by each Department/Faculty and should be available for academic audit purposes.

C. Status Report on Implementation of Faculty/Program Action Items from Comprehensive Program Review
Aligned with CQAAP expectations, a status report is required as part of the annual report process two years following the completion of the comprehensive program review. The Dean/Executive Director of the program is required to report on progress in meeting the planned commitments, as outlined in the Comprehensive Program Review Faculty/Program Implementation Plan chart. This information is submitted to the Program Quality Assurance Committee (PQAC) of the Senate (for Academic Faculties) or the Curriculum Resource Committee (CRC) (for CAPS) in the fall term. PQAC/CRC will review the information and recommend one of the following: 1) no additional follow-up is required, 2) request additional clarification/information from the Dean/Executive Director, or 3) additional recommendations/comments to be discussed with the Vice Provost.

5. Responsible Executive:

The Sheridan Centre for Teaching and Learning will interpret and apply the policy and has the responsibility to draft any associated procedures. The Provost and Vice President Academic has the responsibility to approve any associated procedures.
Responsible Executive: Provost and Vice President Academic
Contact: Centre for Teaching and Learning

6. Related Documentation/Links/Forms

Annual Program Report Template
Comprehensive Review Template
Program Review Guide
Program Review Policy
Sheridan Program Review 5-Year Plan 2015 - 2020
Action Plan Follow-up Report
Procedure to Develop and Approve a Sheridan Board Local Certificate
Procedure to Develop and Approve a Sheridan Board Undergraduate Certificate
Sheridan Program Review Procedure - Sheridan Certificates

Related documentation is available on the CTL website: ctl.sheridancollege.ca