

PROGRAM REVIEW PROCEDURES		
Related to Policy No	E 3.07 Program Review	
	Policy	
Approved by	Education Council	
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Executive Responsible	Vice-President Academic &	
	Research	
Administrator Responsible	Secretary to Education	
	Council	
Date of Next Review	January 2030	

#### PROGRAM REVIEW PROCEDURES

### **PURPOSE**

To outline the implementation steps, roles and responsibilities of the NLC Program Review Policy E3.07

#### **DEFINITIONS**

### **Action Plan**

The action plan is the outcome of the program review process and includes specific goals, action items, and timelines related directly to the data gathered through the program review process.

# **External Review Report**

The external review report is completed by the external review team and includes the findings and recommendations that result from the external review and site visit.

## **External Review Team**

The external review team, consisting of three members, appointed by the relevant dean(s) will include one internal-external NLC faculty member and two peers from other post-secondary institutions and/or industry with expertise in the discipline under review. The two external reviewers are normally chosen by the dean(s) from a list provided by the program review group. The three team members will engage in a virtual or in-person site visit with shareholders and complete their review report.

### **Final Report**

The final report is completed by the program review team in collaboration with relevant dean(s). The final report summarizes and evaluates information from both the internal self-study and external review report. The final report provides the basis for the action plan.

### **Internal-External Faculty Reviewer**

The internal-external faculty reviewer is one member of the external review team. This person is a faculty member who is internal to NLC, but external to the program group undergoing review.

### **One-Year Follow-up Report**

After a Level 2 Program Review and Renewal process, the following year's annual Level 1 Program Review and Renewal report will include the progress update the program review group made towards meeting the goals outlined in the Level 2 action plan. This report is normally completed by the chair(s) or designated faculty in consultation with faculty from within the program review group and may also include new goals and action items that have emerged over the year.

### **Program Review Groups**

One or more credentialed programs and/or related credit courses which are grouped together for the purpose of program review. Program review groups will be determined by the Vice President Academic & Research (VPAR) in consultation with the faculty, CETL Coordinator, Dean(s), and Chairs as relevant.

## **Program Review Team**

The program review team includes all current faculty members from within the program review group. The relevant dean(s), in collaboration with the program review team, will appoint one or more faculty to take the lead in facilitating the program review process.

# **Self-Study Report**

The self-study report is completed as part of the Level 2 Program Review process by the program review team. The content of the self-study report is specific to the program group under review. The self-study involves a comprehensive review of the program strengths and opportunities for improvement and is based on data gathered through the program review process.

#### **RESPONSIBILITIES**

Establishes program review groups through consultation with faculty, CETL
Coordinator, Deans, Chairs as relevant.
<ol><li>Determines the schedule for program review in consultation with faculty, CETL Coordinator, Deans, Chairs on an annual basis.</li></ol>
3. Approves final Program Review Schedule.
4. May initiate a Program Review at any time.
<ol><li>Receives final Level 1 Program Review and Renewal reports and reviews.</li></ol>
6. Receives final Level 2 Program Review and Action Plan. May provide additional
recommendation for the Action Plan. Provides the final report and action plan
to Education Council for information.
7. In consultation with the education team, will endeavour to make resource
allocation decisions in line with departments' action plans.
8. Ensures that self-study reports and external review reports will be published on internal NLC platforms and available to NLC employees. Final reports and action plans will be published on internal and external NLC platforms. Publication of material related to program review on NLC platforms will be done in a manner which is consistent with the Freedom of Information and Protection of Privacy Act.
<ol> <li>Finalizes review of Program Review Schedule before approval by VPAR</li> </ol>
<ol><li>Approves final Level 1 Program Review and Renewal reports and submits to VPAR.</li></ol>
3. Reviews and approves final Level 2 Program Review Report and Action Plan and
may supplement and/or amend action items and/or provide additional
comments prior to submission.

CETL Coordinator	<ol> <li>Work with relevant staff, faculty, and administration to support the timely completion of the program review processes.</li> </ol>
Chairs or appointed	Leads Level 1 Program Review and Renewal process annually
Faculty member	<ol><li>Submits draft Level 1 Program Review and Renewal report to Dean for approval.</li></ol>
Faculty	1. Engage in annual Level 1 Program Review and Renewal processes.
	2. Contribute to Level 2 Program Reviews as required.
Program Review	1. Takes the lead in completing the Self-Study for Level 2 Program Reviews.
Team	<ol><li>Collaborates with Dean on a response to the external review report via the Final Report.</li></ol>
	3. Completes the Final Report and Action Plan.
External Review Team	Completes external review reports.

#### PROGRAM REVIEW AND RENEWAL

To maintain currency, relevance, and efficiency and to help the College establish priorities among programs and accomplish its strategic goals, each program will undergo a regular review process. Review processes will be compliant with any government directives (e.g. Quality Assurance Process Audit QAPA), Board or President directives, and developed in consultation with the Centre for Excellence in Teaching (CETL) and Education Council.

NLC has developed a program quality assurance framework that identifies two levels of program renewal and review. The renewal and review processes have templates to support the people involved in this quality assurance process.

While NLC has designed an annual program review process that supports program quality it is important to note that programs continue to support program quality year-round. This occurs in many ways such as keeping courses and curriculum up to date, in professional development activities, in support to students, in external activities, and others.

#### **Level 1 Annual Program Review and Renewal**

All programs at NLC complete an <u>annual</u> program review to a standard outlined in the *Program Review Procedures Guidebook*. Each program completes this annual formative review during the program's planning week (typically in the spring) – engaging the Chair, faculty, and other program staff. Using a planning template, the program team undertakes a review of the year and develops goals for the next year. The program submits the completed Level 1 review to their program Dean for approval and allocation of resources where appropriate.

### **Level 2 Program Review and Renewal**

All programs at NLC complete a comprehensive program review on a recurring 7-year interval, or as requested by the program Dean. Level 2 Review standards are outlined in the *Program Review Procedures Guidebook*. Where a program is required to complete an accreditation or professional standards report, the timing of this report will follow the accrediting or professional bodies requirements and meet many of the NLC Level 2 Program Review requirements. A Level 2 Program Review will be a summative assessment of program quality and goals. A Level 2 program review includes participation by program Chair, faculty, staff, students, program advisory committee members, and the program Dean. The completed Level 2 program review is submitted to the program Dean and

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then to the Vice President Academic and Research (VPAR) for final approval and allocation of resources where appropriate.

#### PROGRAM QUALITY ASSURANCE METRICS

NLC employs a comprehensive set of evidence to support the review, and encourages a collaborative approach engaging faculty, administration, students, and external partners to assess program quality. The sources of data summarized below are used in the completion of program reviews, in supporting program excellence, and in decision-making.

- **1. NLC Strategic Alignment and Achievements** Programming alignment with NLC Strategic Planning Framework and evidence of how programming contributes to strategic goals.
- **2. Alignment with Relevant Ministries, Provincial Bodies' legislative requirements** Program alignment with relevant Ministries, e.g. Post-Secondary Education and Future Skills, Skilled Trades BC.
- **3. Student Feedback** Students are provided with the opportunity to complete satisfaction surveys and Student Questionnaires.
- **4. Student Admission/Enrolment/Retention Data** Program faculty and staff have access to relevant data and respond to student program data trends.
- 5. BC Outcomes Graduate Data Program faculty and staff have access to BC Outcomes data including Diploma, Associate Degree, Certificate Survey, Trades Foundation and Apprenticeship (DACSO) survey. There is evidence that program faculty and staff are responsive to graduate survey data trends e.g., program feedback, graduate employment. Survey results can be found at https://bcstats.shinyapps.io/so\_data\_viewer/.
- **6. Program Advisory Committee (PAC)** Relevant programs host regular Program Advisory Committee meetings, keep minutes, and respond to PAC feedback.
- **7. Achievement with Accreditation and Professional Standards** Relevant programs meet accreditation and professional standards, including regular reporting and successful achievement.
- 8. Teaching Excellence Hiring practices, teaching qualifications, faculty self-report, CETL report
- **9. Student Support** Student supports including Library services, advising, learning supports, Indigenous supports, supports for international students, counselling, and supports for students needing accommodations
- **10. Resource Use** Effective use of program budget, resources and facilities allocations.
- **11. Adherence to College Policy** The program is aware of relevant College and Education Council policy and procedures and applies them appropriately.
- **12. Program Renewal** Evidence that program continues to remain current, relevant, and responsive to the needs of students and graduates, the community/industry, and to transfer partners.

**13. Pathways** – Program has current and successful pathways and pre-requisites for students into the program and transfer opportunities to other educational institutions.

#### LEVEL 1 ANNUAL PROGRAM REVIEW AND RENEWAL PROCESS

The Level 1 Annual Program Review and Renewal Process, completed each year under the direction of the Dean, supports Northern Lights College (NLC) continuous improvement and program quality assurance commitments. It enables the team of people responsible for program delivery – Dean, Chair, Faculty, Staff -- to assess program quality and set goals to make improvements that are most important to the well-being of the program.

The annual process is designed to support a collaborative conversation within program teams of faculty and staff where faculty and staff talk about program quality and document the successes and challenges of the previous year, review resources and data, and consider program quality goals and actions for the year to come. This template is to be completed annually during program planning meetings. Led by the program Chair, program faculty and staff are encouraged to collaborate to draft the program review and renewal report based on various measures related to program quality and continuous program improvement. The draft program review and renewal report is submitted to the program Dean for feedback and approval.

The annual program review and renewal process provides an opportunity for program teams to identify all the activities and projects they are undertaking as part of their work they think contributes to program quality and leads to the development of an annual workplan for each program in consultation with the program dean.

The annual program review and renewal template is divided into the following sections:

- Quality Assurance
- Quantitative Enrollment and Completion Measures
- Strategic Alignment
- Teaching and Learning Excellence
- Curricular Review
- Student Supports
- Faculty Development
- Student Outcome Measures
- Resources

The results of the Level 1 review may be examined in relation to the ongoing work with the Program Advisory Committees (PACs), Articulation Committees, and feedback from learners, Deans, Chairs, and instructors.

The annual review identifies areas of strength and concern, and provides evidence-based recommendations for continuous improvement. Concerns identified through the Level 1 Review can be addressed through a subsequent Level 2 Review.

The results of the Level 1 review may be used for accreditation, articulation, and continuous environmental scanning as inputs toward the more detailed Level 2 process.

The Level 1 Program Review Template will be updated as needed and circulated annually.

#### **LEVEL 2 PROGRAM REVIEW AND RENEWAL PROCESS**

At NLC, a Level 2 Program Review is a collaborative process that engages program faculty, staff, administration, students, graduates, employers, and others in a comprehensive review of a program. The process focuses on the quality of the program in meeting the needs of students, employers, faculty and staff, transferability and its strategic direction and mandate. Level 2 program reviews will be supported by the VPAR, the relevant program dean, the college's institutional research and registrar's office, and Centre for Excellence in Teaching and Learning (CETL).

Level 2 Program Reviews are typically completed on a seven (7) year cycle, as required by accrediting and regulatory or professional bodies as per Quality Assurance Policy E-3.06, or in response to concerns raised during the Level 1 review. The Level 2 review is more comprehensive than the annual review and is designed to have a deeper and broader look at the program being reviewed.

Deans will identify the priority for each program within their portfolio and make recommendations for Level 2 reviews annually (in the fall) to the VPAR.

The objective of a Level 2 review is to complete a detailed review process to ensure continuous quality improvement of the programs offered at Northern Lights College and to meet provincial quality assurance processes. Where an appropriate external accreditation or program recognition process is available for diploma or certificate programs, this may be used in lieu of or as part of the Level 2 review process.

The Level 2 Program Review will be supported by the following planning documents: Level 2 Program Review and Renewal Template, *Program Review Procedures Guidebook*.

## **Level 2 Program Review Steps**

### A Level 2 Program Review includes the following 7 Steps:

- 1. Planning
- 2. Data Gathering and Analysis
- 3. Self-Study
- 4. External Review
- 5. Final Report and Action Plan
- 6. One-Year Follow-up Report
- 7. Ongoing Curriculum Renewal Activities

# 1. Planning Steps

### 1.1 Organization of Program Review Groups

- 1.1.1 Under the authority of the Vice President Academic & Research (VPAR), Northern Lights College (NLC) will establish program review groups.
- 1.1.2 The configuration of the program review groups will be assessed on a regular basis and, under the direction of the VPAR, may be reorganized as needed.
- 1.1.3 A complete list of NLC's current program review groups will be updated annually.

## 1.2. Program Review Schedule

- 1.2.1. The VPAR will determine the program review schedule in consultation with relevant deans and faculty
- 1.2.2. Program review groups will normally complete a full Level 2 program review every seven years.

- 1.2.3. Program review schedules will normally be posted within 6 -12 months in advance of the of the start date of the scheduled program review.
- 1.2.4. The VPAR may initiate a program review at any time.
- 1.2.5. For programs that are subject to external accreditation, every effort will be made to align program review and accreditation timelines and processes.
- 1.2.6 Program reviews will normally be completed within two years from Step one to Step six. Step seven (ongoing curriculum renewal) will continue every year until Step one is scheduled again.

## 1.3. Orientation of Faculty to Program Review

- 1.3.1. The VPAR or designate will meet with faculty members of the program review group to provide an orientation to program review policy, procedures, and resources. Relevant dean(s) may also attend this orientation session.
- 1.3.2. The VPAR or designate will provide access to relevant resources to support the program review process.

# 1.4 Appointment of Program Review Team Lead(s)

- 1.4.1. Relevant dean(s), in collaboration with the program review team, will appoint one or more faculty to take the lead in facilitating the program review process.
- 1.4.2. Relevant dean(s) will determine resourcing required to facilitate the program review process.

### 1.5. Identification of Specific Needs

1.5.1. The program review team will review the data collection templates and determine any additional needs of the program review group. Relevant dean(s) may provide recommendations as to specific needs of the program review group.

### 2. Data Gathering and Analysis Step

- 2.1 Institutional Data Collection
  - 2.1.1. Data provided by the office of Institutional Research (IR) will include standardized data used for existing reporting processes. The office of IR will collaborate with the program review team to determine any additional or modified data collection needs.

### 2.2. Program Data Collection

2.2.1. Program data collection is coordinated by the program review team and forms the basis of the internal self-study. This data is normally collected from a variety of sources including students, alumni, faculty, community partners, industry, employers of graduates, and other stakeholders. CETL may assist with data collection by helping write survey questions, lead focus groups, interpret and theme data etc.

### 3. Self-Study Step

### 3.1. Self-Study Report

- 3.1.1. All self-study reports will include required information focused on key quality indicators to be included for all program reviews at NLC. Program review teams and/or dean(s)/director may add additional elements to the self-study report that are specific to the program review group.
- 3.1.2. The program review team lead(s) will facilitate the completion of the self-study report.
- 3.1.3. All faculty within the program review group will have the opportunity to provide input into the self-study report.

3.1.4. The completed self-study report will be provided to the relevant dean(s)/director or designate. The dean(s)/director or designate may provide feedback and/or suggest revision of the self-study report.

### **4. External Review Step**

- 4.1. Appointment of External Review Team
  - 4.1.1. All program reviews will include an external review completed by an external review team.
  - 4.1.2. External review teams will normally consist of two external reviewers and one internal-external reviewer (a NLC faculty member from outside the program review group).
  - 4.1.3. The program review team will normally nominate a minimum of five to seven peers from other post-secondary institutions and/or industry who are experts in an area relevant to the program group under review and have quality assurance experience. The relevant dean(s) may choose two peers from these nominations to serve as the external reviewers.
  - 4.1.4. The relevant dean(s) will appoint one internal-external faculty member to the external review team.
  - 4.1.5. Prior to appointment, all members of the external review team will be asked about potential conflict of interest. Any individual with real or perceived conflict of interest will not be asked to serve as an external reviewer.

# 4.2. Planning for Site Visit Step

- 4.2.1. All members of the external review team will be provided with the self-study report a minimum of two weeks prior to the site visit.
- 4.2.2. The VPAR or designate will support the organization of the site visit in collaboration with relevant dean(s) and program review groups.
- 4.2.3. The internal-external faculty member will provide on-site support for external reviewers throughout the site visit in consultation with faculty, dean(s), the CETL Coordinator and the VPAR.

#### 4.3. Site Visit Step

- 4.3.1. Members of the external review team will normally be provided with an honorarium. External reviewers will be reimbursed for any travel expenses and costs directly related to the site visit.
- 4.3.2. Site visits will normally take place over 1-2 days, either in-person or virtually via web-conferencing technology. It may be necessary for the external review team to travel to multiple campuses. When appropriate, technology may be used to facilitate participation from multiple campuses.
- 4.3.3. The external review team will review the content and findings of the self-study and may engage in several review activities including, but not limited to:
  - Tour of the College facilities used by the program.
  - Interviews with students, faculty, support areas, community partners/employers, and administration.
  - Reviewing samples of instructional and evaluation material used in the program.

### 4.4. External Review Report Step

- 4.4.1. The external review team will collaborate on the completion of the external review report, which focuses on providing an assessment of the program area's quality specifically these four points:
  - 1. Whether the self-study addresses each of the quality indicators

- 2. Whether the recommendations in the self-study are supported by the findings in the self-study report
- 3. Whether the findings in the self-study are validated by the visit and meetings with shareholders
- 4. Other ideas and recommendations for enhancing the student learning experience and overall program area development and growth.
- 4.4.2. The external review report will normally be completed within two to four weeks of the site visit and will be provided to the VPAR, program review team and relevant dean(s).
- 4.4.3. The program review team and relevant dean(s) or designates will collaborate on a response to the external review report. This response will become a part of the external review report.

## 5. FINAL REPORT and ACTION PLAN Step

## 5.1. Final Report

- 5.1.1. The final report is completed by the program review team lead(s) in collaboration with faculty and relevant dean(s). The dean(s) will approve the final report prior to submission to the VPAR.
- 5.1.2. The final report summarizes and evaluates information from both the internal self-study report and external review report and forms the basis for the action plan.

#### 5.2. Action Plan

- 5.2.1. The action plan is completed by the program review team lead in collaboration with faculty and relevant dean(s). Relevant dean(s) will approve the action plan prior to submission to the VPAR.
- 5.2.2. The action plan will relate directly to the data and recommendations gathered through the program review process.
- 5.2.3. The action plan will identify and prioritize goals. The action plan will include two categories of goals: those which can be accomplished with existing resources and those which require additional resources. The action plan will include timelines and specific strategies for achieving goals.

### 6. Submission and Publication

- 6.1. Submission of Final Report and Action Plan
  - 6.1.1. Following approval, the relevant dean(s)/director will submit the final report and action plan to the VPAR.
  - 6.1.2. The VPAR may provide additional recommendations regarding the action plan.
  - 6.1.3. The final report and action plan will be provided to Education Council and the Board of Governors by the VPAR for information.

### 6.2. Publication

- 6.2.1. The VPAR will coordinate the publication of program review reports.
- 6.2.2. The self-study report and external review report will be published on an internal NLC platform and will be available to all NLC employees.
- 6.2.3. The final report and action plan will be published on both internal and external NLC platforms.

## 7.Action Plan Accountability

- 7.1. One-Year Follow-Up Report
  - 7.1.1. Following the completion of the program review process, the department chair(s) or designated faculty will normally take the lead in completing the one-year follow-up report, in collaboration with all faculty within the program review group.
  - 7.1.2. The one-year follow-up report will be provided to the relevant dean(s) within established timelines. The dean(s) may provide recommendations for the one-year follow-up report.
  - 7.1.3. Following approval, the dean(s)/director will submit the one-year follow-up report to the VPAR. The VPAR may make additional recommendations.
  - 7.1.4. The VPAR will coordinate the publication of the one-year follow-up report on an internal and external NLC platform.