



Procedure Name	Program Review <i>Revised</i>		
Procedure Number	AP 2.2	Effective Date	January 29, 2025
Parent Policy	AP 2.0 Quality Assurance		
Procedure Authority	Manager, Program Excellence		
Executive Sponsor	Vice-President, Academic		
Approved By	Vice-President, Academic		

1. PURPOSE

Medicine Hat College (MHC) is committed to maintaining high standards, promoting academic excellence, and ensuring programs remain relevant to meet the needs of students and the broader community. Program review promotes MHC’s accountability and commitment to continuous improvement through regular analysis and the development and implementation of evidence-informed action plans. It is intentionally flexible and collaborative in order to meet the unique needs of the institution’s diverse programs.

2. DEFINITIONS

- **Action Plan:** a documented integrated plan for strengthening a program, defining specific actions, timelines and accountability for achieving them. It is based on the self-study, external, and internal committee recommendations.
- **Curriculum:** in the context of this procedure, a collection of courses that together fulfil program learning outcomes offered by MHC.
- **Curriculum Map:** a document that outlines program learning outcomes and shows how elements of course learning outcomes align with these in a matrix format.
- **Program Review:** a systematic approach to evaluating academic programs, focusing on academic standards, student outcomes, resources, and strategic alignment with MHC’s purpose and mandate.
- **Self-Study:** an analysis of a program’s strengths, opportunities, and challenges that forms the foundation on which a comprehensive review is based. It defines the scope of the review and determines the focus for the external review and subsequent action planning.

3. THE PROGRAM REVIEW CYCLE

The program review cycle is comprised of three parts:

1. Comprehensive Program Review
2. Annual Program Reporting
3. Annual Curriculum Review

Title	Frequency	Summary of Content
Comprehensive Program Review	Normally 7 years <i>initiated at the start of the academic year (July 1) and completed over 12 months.</i>	<ul style="list-style-type: none"> • Self-Study • External review and recommendations • Internal Committee review and recommendations <p>Output: ACTION PLAN</p>
Annual Program Report	Annually – completed by June 30	<ul style="list-style-type: none"> • Updates on action plan • Key or emerging considerations (from PAC input, data, faculty feedback) • Noteworthy activity (including celebrations) <p>Output: UPDATED ACTION PLAN</p>
Annual Curriculum Review	Annually – Winter	<ul style="list-style-type: none"> • Updated curriculum map (ensures course learning outcomes collectively achieve program learning outcomes and that the program courses are relevant and current) <p>Output: UPDATED CURRICULUM/related documents</p>

4. COMPREHENSIVE PROGRAM REVIEW

A comprehensive program review is normally conducted once every seven years. This review helps achieve Campus Alberta Quality Council (CAQC) standards for degree programs and parallels the CAQC process for other programs. It includes external review. The process focuses on academic standards, student outcomes, resources, and strategic alignment with the institution's mission. It leads to coordinated action that strengthens the program's ability to support students in achieving the program's competencies and learning outcomes and ensures effectiveness, currency, and relevancy. Published action plans resulting from comprehensive program reviews are stored centrally and used for program, school, and institutional planning.

In consultation with the Senior Academic Leadership Team (SALT), the Manager, Program Excellence develops the schedule of reviews. Comprehensive program reviews that are outside of this schedule can occur if they are deemed necessary.

A comprehensive program review features both quantitative and qualitative analysis, including enrollment metrics, financial indicators, retention and completion data, student satisfaction, and stakeholder feedback. The quantitative analysis consists of gathering and analyzing numerical data related to the program. The qualitative analysis is done in two parts: a self-study and a review by an external reviewer to augment and validate the self-study which is used to develop a strategic action plan for the program. These data are reported in the Self-Study Report.

A balance between quantitative and qualitative analysis ensures accountability and fairness of the review process.

The comprehensive review process is completed over a 12-month period.

ROLES AND RESPONSIBILITIES: COMPREHENSIVE PROGRAM REVIEW

Program Coordinator (RESPONSIBLE)	Chair and select self-study committee and coordinate the review. Write self-study report. Host external reviewer. Jointly, with academic chair, present review to Program Quality Assurance Committee (PQAC). Create final draft action plan. Develop summary report for dean/Vice-President, Academic and Provost (VPA). Develop implementation plan.
Academic Chair (SUPPORT)	Guide selection of a self-study committee. Guide recommendation for external reviewer. Guide development of self-study report. Present review to PQAC with program coordinator.
Associate Dean (COLLABORATE)	Approve external reviewer(s). Oversee any issues managing review. Oversee implementation of action plans.
Self-Study Committee (COLLABORATE)	Participate in the collection and analysis of, and reflection on qualitative and quantitative data, identifying themes, and generating draft action plans.
Program Faculty (COLLABORATE)	Provide input to self-study. Sit on self-study committee, if selected. Participate in implementation of action plan.
Program Excellence and Institutional Research (PEIR) (COLLABORATE)	Assist program coordinator with review. Provide data packages for quantitative review. Facilitate qualitative data gathering. Maintain current templates. Maintain database of action plans.
External Reviewer (SUPPORT)	Review self-study and provide feedback. Conduct a site visitation. Make recommendations on draft action plan.
PQAC (COLLABORATE)	Review the results of self-study and external review. Review and make recommendations on draft action plan.
Dean (ACCOUNTABLE)	Receive summary report and draft action plan. Finalize and approve action plan. Use report and action plans for planning purposes. If off-cycle review is required, request review through VPA. Budget approval/inclusion.

5. ANNUAL PROGRAM REPORTING

Between comprehensive reviews, annual program reporting is used to highlight significant achievements, emerging challenges, and progress toward implementing action plans. The report incorporates program specific key data, including enrollment metrics, financial indicators, retention and completion data, and student satisfaction. It also provides a summary of changes resulting from the annual curriculum review and is used for annual planning and budgeting. The updated action plan is tracked and revised annually and both it, and the annual reports are key inputs to comprehensive reviews.

ROLES AND RESPONSIBILITIES: ANNUAL REPORTING

Program Coordinator (RESPONSIBLE)	Complete annual report according to college requirements. Update draft action plan (provide rationale for any changes). Lead the implementation of action plan.
Program Faculty (COLLABORATE)	Provide input and support to program coordinator, as requested. Participate in implementation of action plan.
PEIR (SUPPORT)	Provide data packages. Respond to ad hoc requests for data to support reporting. Receive updated action plans and update records.
Academic Chair (SUPPORT)	Review draft report, provide suggestions.
Associate Dean (COLLABORATE)	Review report, make recommendations for revisions to action plans. Make budget recommendations. Oversee implementation of action plans.
Dean (ACCOUNTABLE)	Respond to report. Finalize and approve changes to action plan. Use updated action plans for planning purposes. Approve budgetary changes.

6. ANNUAL CURRICULUM REVIEW

Annual curriculum review is a formative component of the overall quality assurance process. It focuses on mapping program learning outcomes (PLOs) across courses, checking currency and relevance with faculty and external stakeholders, and identifying any gaps. The outcome of the review is an updated curriculum map, response to gaps, and, where appropriate, recommendations for improving the following curricula areas:

- Student preparedness for careers and further education.
- Discipline and sector currency and relevance.

Annual curriculum review normally occurs in the Winter. All changes go through required institutional processes prior to implementation. Changes that do not impact the Academic Calendar can be implemented immediately following the approval process, as early as the next semester. Changes requiring General Academic Council Curriculum Committee (GAC CC) and/or government approval will not be implemented for one full academic year.

ROLES AND RESPONSIBILITIES – ANNUAL CURRICULUM REVIEW

Program Coordinator (RESPONSIBLE)	Chair the review of curriculum with program faculty. Review PLOs, and skills and knowledge required for employment and further education, with the Program Advisory Committee (PAC). Update curriculum map and create response to gaps. Submit changes as appropriate. For University Transfer (UT) and interdisciplinary courses, facilitate a collaborative mapping process.
Academic Chair (SUPPORT)	Review curriculum map and make recommendations. Approve changes according to GAC CC process. For UT and interdisciplinary courses, support faculty in mapping alignment of learning outcomes with equivalent courses at receiving institutions.
Program Faculty (COLLABORATE)	Map curriculum for courses taught. Provide feedback on PLOs. Help identify and address gaps.
Teaching and Learning (SUPPORT)	Provide consultation for mapping.
Associate Dean (COLLABORATE)	Initiate review process, provide assistance in managing review. Review curriculum map.
Dean (ACCOUNTABLE)	Approve curriculum map. Approve changes according to the GAC CC process.

7. EXTERNALLY REGULATED QUALITY ASSURANCE PROCESSES

Some MHC programs undergo a program review process governed by external bodies. This includes programs subject to CAQC oversight, collaborative degrees, or programs requiring external review reporting and/or accreditation.

These reviews are another way in which programs are appraised using a process of self-evaluation and peer assessment to ensure continuous program quality improvement.

MHC recognizes the mutually reinforcing relationship between internal and external quality assurance. MHC is committed to reducing duplication of effort in quality assurance activities and where possible, to harmonizing internal quality assurance review with external processes.

The VPA will consider a written request from the dean of the relevant faculty to delay, modify, or cancel a particular quality assurance review cycle when program in question is subject to an external process. The written request from the dean must include detailed rationale that justifies the request, plus relevant supporting documentation, such as past accreditation review reports and up-to-date action plans.

ORIGINAL COPY SIGNED

Nancy Brown
 Vice-President of Academic and Provost
 Date: January 29, 2025

Additional Information	Location
General Academic Council Curriculum Committee Process	Registrar’s Office
AP 1.3 Course Development Procedure	MHC Website/Policy SharePoint
AP 2.1 Program Advisory Committee Procedure	MHC Website/Policy SharePoint
Comprehensive Review Template and Guide	PEIR SharePoint (in development)
Annual Report Template and Guide	PEIR SharePoint (in development)
Annual Curriculum Review Guide	PEIR SharePoint (in development)
Published Action Plans	PEIR SharePoint