

Policy History
<b>Policy No.</b> AC3
<b>Approving Jurisdiction:</b> Board of Governors, with Senate advice
<b>Administrative Responsibility:</b> Provost and Vice President Academic
<b>Effective Date:</b> September 1, 2025

## Program Review Procedure

### A. DEFINITIONS

1. **Annual Follow-up Report:** Annual Follow-up Reporting is the last phase in KPU's Program Review process. It provides programs with a framework for reporting on progress made in carrying out the Quality Assurance Plan (QAP). The first annual-follow up report is due one year after the Quality Assurance Plan has been approved. Reports are provided annually until the program has demonstrated to the satisfaction of the Senate Standing Committee on Program Review (SSCPR) that the Quality Assurance Plan (QAP) is substantially completed. This is required so KPU can demonstrate how the Program Review led to program improvements, one of our accountability requirements to government.
  
2. **External Review:** The External Review follows the completion of the Self-Study Report. It is conducted by a team of three members, two of whom are external to KPU, and one who is a faculty member from another faculty at KPU. The purpose is to validate the Self-Study Report and provide additional information regarding program's strengths and areas needing improvement. The External Review phase involves a site visit, either on-campus or online, which allows the External Review Team (ERT) to meet with various interested parties to ensure that the ERT has sufficient information upon

which to base their assessment of the Self-Study Report.

3. **Program:** A defined set of courses of instruction that lead to a credential approved by KPU Senate. A program also consists of a) a unit of study, under the governance of Senate, that results in the granting of a degree or a non-degree credential or b) a unit of study that constitutes the designation of major or minor, or c) a unit of study that constitutes a department.
4. **Quality Assurance Plan:** The Quality Assurance Plan (QAP) is a multi-year strategic plan for how the program will address the recommendations emerging from the Self-Study and External Review of the program.
5. **Self-Study:** The Self-Study consists of a review of the program's curriculum, instructional design and delivery, program relevance, student demand and resources needed to support the program. It is the core of the program review process and forms the foundation on which the entire review is based. It includes an analysis of the program's strengths, weaknesses, opportunities and challenges, as well as recommendations that will need to be addressed to improve the program's quality.
6. **SSCPR:** The Senate Standing Committee on Program Review (SSCPR) is responsible for: developing procedures and standards to ensure Program Reviews are conducted in accordance with the principles of the Program Review Policy; and reviewing reports to ensure they meet KPU's program review standards. The Committee includes faculty, dean, staff and student representation.

## **B. PROCEDURES**

1. The schedule for Program Reviews is updated on a yearly basis by the Office of Planning & Accountability's (OPA) Manager of Quality Assurance, in consultation with the Deans and Associate Deans, and provided to Senate to ensure programs are reviewed at least once every five years. For departments with more than one program in the same discipline, they are reviewed together.

2. The review consists of four components, each of which requires a report to be submitted to the SSCPR:
  - a. Phase 1: Self-Study;
  - b. Phase 2: External Review;
  - c. Phase 3: Quality Assurance Plan;
  - d. Phase 4: Annual Follow-Up Reporting.
3. Faculty are responsible for writing and submitting all Program Review reports and appendices (with the exception of the External Review) and ensuring that each report is in compliance with SSCPR-approved standards and templates. Deans are also expected to provide input to all reports (with the exception of the External Review). The Provost is expected to provide direct input to the Quality Assurance Plan.
4. Guides that lay out expectations for each component of the review process, as well as templates for each report, are available on OPA's Program Review webpage, linked here: [Guides & Sample Reports](#). These documents include, but are not limited to, the following:
  - a. **Guide #1: Getting Started** – provides the Program Review Team with an overview of the Program Review process at KPU and prepares them for the Program Review kick-off meeting.
  - b. **Guide #2: Curriculum Review** – includes information on how to conduct a curriculum review, including developing/reviewing program learning outcomes, career pathways map, and curriculum map. It also explains where to report this information in the Self-Study Report template.
  - c. **Guide #3: Self-Study Data** – provides information about the data sources available for the Self-Study, including administrative data, standard survey questions, and the survey development process. Administrative data and survey results, which are provided by OPA, inform assessments of program relevance and demand, effectiveness of instructional delivery, and program resources, services, and facilities.
  - d. **Guide #4: Self-Study** – Explains how to use the Self-Study data to address the Program Review questions and where to report this information in the Self-Study Report template within the following sections: program relevance and demand (relevance, faculty qualifications and currency, student demand); effectiveness of instructional delivery (instructional design and delivery of the curriculum, student success, student experience including equity, diversity and inclusion); and resources, services and facilities.
  - e. **Guide #5: External Review** – provides information on the steps required to plan an external review site visit and criteria for selection of external reviewers.

- f. **Guide #6: Quality Assurance Plan Development** – comes with a template and explains in detail how to develop a Quality Assurance Plan based on the findings and recommendations in the Self-Study and External Review Reports.
  - g. **Guide #7: Annual Follow-Up Reporting** – explains the process for reporting back to the SSCPR on progress made in carrying out the Quality Assurance Plan.
- 5. Sample approved reports are also available on the OPA's Program Review webpage, linked here: [Guides & Sample Reports](#).
- 6. To ensure quality standards, the SSCPR must approve each report before the review can proceed to the next phase of the process.
- 7. The SSCPR also approves the individuals the program nominates to serve as external reviewers.
- 8. A program with an external accreditation body will only require one external review site visit (to be conducted by the accreditation external review team) if the following conditions are met:
  - a. The composition of the accreditation external review panel is equivalent to that of a KPU external review team (i.e. the team consists of a combination of academics and discipline/sector professionals).
  - b. The accreditation review site visit is similar in scope to that of a KPU external review site visit and will involve talking to similar groups of stakeholders (e.g. students, faculty, staff, alumni, advisory board members).
  - c. The accreditation external review report can be made public on KPU's Program Review website.
- 9. The Quality Assurance Plan is approved by SSCPR and is then forwarded to Senate for information. The next Program Review begins five years following the date of approval of the Quality Assurance Plan by SSCPR. The approved Quality Assurance Plans are available on OPA's Program Review webpage, linked here: [Completed Reviews](#).
- 10. A Program Review is completed once the SSCPR has determined that the Quality Assurance Plan has been substantially completed and no additional Annual Follow-up Reporting is required.
- 11. A review typically takes 16-20 months from commencement to submission of the Quality Assurance Plan, unless the program has provided the SSCPR with an appropriate rationale for an extension. The Dean or AVP Academic decides if a delay is appropriate. However, all reviews must be completed within 24 months of starting (i.e., the Quality Assurance Plan must be approved by the SSCPR within 24 months of the commencement of the review).
- 12. Compliance with AC3 Policy and Procedure would encompass the following situations:
  - a. A program's Quality Assurance Plan not more than five years ago; OR

- b. The review is underway, started within 5 years of completion of the last review, and is progressing appropriately (i.e., it has been less than 24 months since the review began).
- 13. The Provost will decide on the appropriate action should a program not be in compliance with this Policy and Procedure.
- 14. OPA provides planning support and guidance throughout the review process; provides administrative data; oversees survey data collection (which includes gathering views from students, faculty, alumni and members of the sector), including guidance on survey design, survey administration, and data analysis and reporting. OPA also provides administrative support to the SSCPR. The OPA staff who are on-hand to provide support are:
  - a. Manager, Quality Assurance;
  - b. Research Analysts, Quality Assurance.

## **C. RELATED POLICY**

AC3 Program Review

AC9 Skills and Outcomes

AC10 Development and Change of Senate-Approved Programs