

Program Review

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Responsible Executive:	Chief Academic Officer
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PURPOSE

This policy establishes a quality assurance framework for the systematic review, assessment, and evaluation of post-secondary programs offered by Coquitlam College (the College). Program reviews promote academic excellence, evidence-based reflection, and continuous improvement, ensuring that all programs meet internal and external standards of quality, relevance, and student success.

SCOPE

This policy applies to all programs offered by the College that result in the awarding of a post-secondary credential.

POLICY STATEMENTS

1. The College is committed to maintaining current, relevant, and high-quality academic programs that align with Ministerial Consent, Degree Quality Assessment Board requirements, articulation agreements, and internal quality assurance processes.
2. All post-secondary programs undergo a Comprehensive Program Review every seven (7) years.
3. The scope, depth, and methodology of reviews are proportionate to the program's size, maturity, and external accreditation requirements, ensuring a sustainable and meaningful quality assurance process.
4. Program Review outcomes and action plans are integrated into academic, budgetary, and strategic planning at both departmental and institutional levels.
5. An executive summary of each Comprehensive Program Review will be posted on the College website to promote transparency and accountability.

PROCEDURES

6. The College's program review framework consists of three interconnected quality assurance processes:
 - a. Academic Department Assessment (ADA)
 - b. Service Area Assessment (SAA)
 - c. Comprehensive Program Review (CPR).
7. This policy is supported by companion documents:

- a. Comprehensive Program Review Guide
 - b. Program Review Templates, Tools and Resources
8. The Program Review Framework evaluates the achievement of program-level learning outcomes, the alignment of curriculum, the effectiveness of teaching, learning, and assessment strategies, and the effectiveness of service areas in supporting student success and program quality.

A. Academic Department Assessment

9. The Academic Department Assessment (ADA) is completed annually and provides a concise, data-informed overview of departmental activities, priorities, and emerging issues to support continuous improvement.
10. The ADA process is managed by the Director, Curriculum and Pedagogy (Director) who will:
- a. Ensure departments receive the data necessary to complete the assessment
 - b. Facilitate the ADA process within departments, including:
 - i. Assisting with identifying trends in the subject areas
 - ii. Assessing curriculum currency
 - iii. Evaluating applicable resources and services
 - iv. Reviewing articulation involvement
 - v. Evaluating progress on action plans, identifying new priorities or challenges, and revising or updating action plans
 - c. Receive and summarize Assessments and Action Plans from all Departments.
11. The Director provides the Chief Academic Officer (CAO) with an annual ADA Summary that identifies common strengths, themes, action items, and progress on previously identified priorities.
12. The CAO may request further analysis, follow-up, or resource planning where significant issues or opportunities are identified.
13. Findings arising from the ADA inform the Internal Self-Study and may also contribute to the development of the CPR Summary Report and Action Plan.

B. Service Area Assessment (SAA)

14. The SAA provides a structured process for the ongoing evaluation and continuous improvement of service areas that contribute to student success and the delivery of academic programs.
15. The CAO coordinates the SAA process in collaboration with service area leaders and will:
- a. maintain a Service Area Quality Improvement Register to identify, monitor, and document significant quality improvement initiatives;
 - b. obtain Service Area Self-Reflections as part of each Comprehensive Program Review; and
 - c. prepare a Service Area Summary for inclusion in the Internal Self-Study.

16. The President, in consultation with the CAO and/or area leaders may initiate periodic service area updates to evaluate progress, identify emerging priorities, and revise the Service Area Quality Improvement Register;
17. Findings arising from the SAA inform the Internal Self-Study and may also contribute to the development of CPR Summary Report and Action Plan.

C. Comprehensive Program Review (CPR)

18. The CPR provides a holistic evaluation of program quality, effectiveness, and relevance, grounded in faculty expertise, stakeholder feedback, and evidence-based analysis.
19. For each CPR, the CAO will convene a Program Review Steering Committee (Committee) to oversee the review process. The Committee will:
 - a. establish the scope, key review questions, and priorities for the review;
 - b. set the timelines and deliverables;
 - c. determine how faculty will actively participate throughout the review process;
 - d. identify the resources required to support the review; and
 - e. review evidence arising from each stage of the review and recommend priorities for inclusion in the Summary Report and Action Plan.
20. The CPR consists of three integrated components:
 - a. Internal Self-Study
A reflective, evidence-based evaluation of the program drawing on Academic Department Assessments, Service Area Assessments, faculty expertise, institutional data, stakeholder feedback, and other relevant evidence.
The findings are documented in an Internal Self-Study Report.
 - b. External Review and Institutional Response
An independent assessment conducted by external reviewers that evaluates the program and the findings of the Internal Self-Study, providing an external perspective on program quality, effectiveness, and opportunities for enhancement.
The findings are documented in an External Review Report. The College's response to the External Review is documented in an Institutional Response.
 - c. Summary Report and Action Plan
An institutional report that synthesizes the findings of the Internal Self-Study, External Review, Institutional Response, and other relevant evidence into a coordinated plan for continuous improvement. The report summarizes key findings, establishes priorities, assigns responsibilities, identifies resource implications, and provides a framework for implementation and follow-up.
21. The CPR is completed through the following stages:
 - a. The CAO coordinates the Internal Self-Study and prepares an Internal Self-Study Report that forms the basis for the External Review.
 - b. External reviewers complete the External Review and prepare an External Review Report. The report is submitted to the CAO, who will review it for clarity and factual accuracy. The CAO will prepare a draft Institutional Response and will provide both documents to the Senior Team for review and approval before submitting them to the

Committee.

- c. The Committee reviews the Internal Self-Study Report, External Review Report, Institutional Response, and other relevant evidence to determine the content of the Summary Report and Action Plan. In doing so, the Committee, will:
 - i. identify key priorities and improvement initiatives;
 - ii. set measurable objectives and timelines;
 - iii. assign responsibilities;
 - iv. identify resource implications; and
 - v. outline follow-up reporting requirements.
 - d. Based on the Committee's recommendations, the Internal Self-Study Report, External Review Report, and Institutional Response, the CAO prepares the Summary Report and Action Plan presents it to the Senior Team for approval. Following approval, the document is presented to Academic Council for information.
 - e. Once the Comprehensive Program Review is complete, an Executive Summary will be published on the College Website.
22. The CAO oversees implementation of the Summary Report and Action Plan, including quality improvement initiatives identified through the ADA and SAA processes, and reports progress to the Senior Team and Academic Council.

Continuous Improvement

23. The College will periodically review the program review framework to ensure its effectiveness, efficiency, and sustainability. Feedback from faculty, staff, and reviewers will be used to refine the process and ensure alignment with Ministry and DQAB standards.
24. Where significant issues are identified during any stage of review, the CAO may initiate an accelerated or targeted review to address academic or operational risks.

DEFINITIONS

Academic Departmental Assessment: An annual data-informed reflection using selected indicators to monitor program health and identify areas requiring attention.

External Review Panel: An independent group of academic and industry experts who assess the program's quality, relevance, and alignment with external standards and expectations.

Service Area: Administrative and student support functions that contribute to student success and the delivery of academic programs.

RELATED RESOURCES

- Curriculum Development, Alignment, and Approval Policy 2.4.1
- Comprehensive Program Review Guide (internal)
- Comprehensive Program Review Templates (internal)