

To: Dr. Lynn McIntyre, Dean, Faculty of Health Professions (FHP)

From: Drs. David Egan and David Persaud

Date: September 19, 2001 (with editorial changes by L. McIntyre November 9, 2001)

Re: **Reviews of Schools/College within the Faculty of Health Professions**

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Attached please find a revised memo and draft of our work to date on the Self-study Review Guidelines and some minor revisions to the Guidelines for Periodic (Full) Reviews for Schools/College in the Faculty of Health Professions. You will note that we have extended the original six components to nine, the additional components being research, clinical/fieldwork/residency programs, and specific accreditation criteria. The first part outlines our mandate and the way we have developed our proposal, and this is followed with the review policy, guidelines for self-study (including nine components), and the guidelines for periodic reviews.

Our mandate was to modify existing self-study guidelines for all Schools/College to ensure that the process is revisited annually and internally in preparation for the full review and/or accreditation that occurs each 5–7 years. There should be no need for annual reporting of the self-study outside the School/College. We envision the self-study procedures as a way of recording the current status of the School/College relative to each of the nine components (mission, values, program objectives; curriculum; research program; clinical, residency, or fieldwork program; administration; resources; students; external relations, specific accreditation requirements) so that the internal and annual self-study will provide an objective guide for assessment of progress of the School/College in each area. Thus each unit will be monitoring and accurately recording its own history and progress. The self-study will represent a dynamic and ongoing process that occurs within each School/College so that the achievement of predetermined goals can be measured and the setting of new goals supported. This process will result in each unit being able to compile its 5–7 year report in a timely and comprehensive manner for the periodic (full) FHP review and/or accreditation. It follows that the components of the periodic review will be the same as those for the self-study.

We see little point in requiring a School/College to meet two sets of standards (FHP review and accreditation) if the two processes address the required nine components. Accordingly, we are recommending that the accreditation components, timing, and standards are built into the self-study guidelines by the appropriate School/College. We have added a section on specific accreditation requirements in those instances where the accreditation requirements are not addressed by the other eight components. This document sets out guidelines for the implementation of annual self-study and periodic reviews.

These were our guiding principles:

1. The process of preparation for the periodic (full) FHP review or accreditation will be less onerous than the present system.

2. The self-study guidelines will allow for a dynamic ongoing process of goal achievement working from clear statements and records of the School/College's present status.
3. The self-study process will provide a sound basis for necessary changes through the development of specific indicators reflective of future goals.
4. The self-study review will measure goal attainment within a set of uniform Dalhousie/ Faculty of Health Professions guidelines that integrates the accreditation requirements.
5. The goals will be derived from the School/College's mission and vision relative to its relationships within and outside the university.
6. For those Schools/College that have accreditation requirements, the factors to be assessed and the standards to be met would be used as part of, or as the whole of, the FHP review process provided that the other eight listed factors are addressed.
7. Initially, gaps in goal attainment will be identified between the performance of a unit and pre-determined expectations from goal-setting exercises expressed in principle 5.
8. Schools/College will be able to monitor their progress (or lack thereof) toward goal attainment by setting out specific objectives to be achieved.
9. Once a School/College has initiated the initial self-study process, subsequent monitoring and fine tuning should provide a solid basis from which to assess progress and mitigate the considerable effort required of the current 5–7 year review process.
10. The self-study process will provide accountability for decisions and actions.

# **FACULTY OF HEALTH PROFESSIONS SCHOOL/COLLEGE REVIEW POLICY**

## **INTRODUCTION**

The self-study process represents a dynamic process that occurs annually so that the achievement of predetermined goals can be ascertained and the setting of new goals supported. This will result in each School/College being able to compile its periodic review (every 5–7 years for the Faculty of Health Professions review and every 5–7 years for those units that are externally accredited) in a timely and comprehensive manner. This is possible because annual School/College reviews are intended to facilitate ongoing program integrity and accountability, with much of the information necessary for periodic reviews having already been collected on a yearly basis.

In endorsing the practice of annual (internal) self-study in preparation for the periodic School/College review or accreditation, the following principles are observed.

- The self-study guidelines will allow for a dynamic ongoing process of goal achievement.
- The process will provide a sound basis for necessary changes through the development of specific indicators reflective of future goals.
- The review will measure goal attainment within a set of uniform Dalhousie/Faculty of Health Professions guidelines as well as taking account of accreditation requirements.
- The goals will be derived from the School/College's mission and vision as well as from accreditation guidelines and procedures.
- Initially, gaps in goal attainment will be identified between the performance of a unit and pre-determined expectations from goal-setting exercises.
- Units will be able to monitor their progress (or lack thereof) toward goal attainment by setting out specific objectives to be achieved.
- Once a unit has initiated the initial self-study process, subsequent monitoring and fine-tuning should provide a solid basis from which to assess progress and mitigate the considerable effort required of the current 5–7 year review process.
- The self-study process will provide accountability for decisions and actions.
- Internal reviews will be conducted on a yearly basis to assess goal attainment from gaps in performance determined from previous reviews or new goals developed during a previous review.
- All reviews are to be oriented by positive values; that is, they ought to be seen by the School/College in question as ultimately serving their best interests as well as meeting Faculty and University requirements.

- A self-study document prepared by the School/College in accordance with guidelines that follow will serve as the focal instrument of the review.
- While formal reviews will occur at specified times for those Schools/College needing external accreditation or for reviews by the Faculty, the process of self-evaluation on an annual basis using the self-study guide will be a desirable and natural ongoing feature of School/College planning.
- All reviews (annual or periodic) shall be conducted with the least amount of intrusion and disruption possible.
- Review policies and procedures shall be developed with clarity, precision, and fairness and shall follow the outline of the self-study guide.

## **GUIDELINES FOR SELF-STUDY FOR SCHOOLS/COLLEGE IN THE FACULTY OF HEALTH PROFESSIONS**

### **PREAMBLE**

Ongoing self-studies that are prepared by the School/College shall serve as the basis of Faculty and Accreditation reviews. Self-study shall be developed taking into account the mission statements of the University, Faculty, and School/College, the academic profiles, and plans of the Faculty and School/College. Where accreditation is required, the individual School/College may incorporate appropriate elements of the accreditation program to reflect those needs. As well, the self-study ought to contain a reflective self-appraisal of program strengths, weaknesses, and future directions and provide justification for the defined measures to be used. Above all, the compilation of the initial report is predicated on the assumption that it will emanate from a team effort within the School/College. In particular, attention shall be paid to the nine components: mission, values, program objectives; curriculum; research program; clinical, residency or fieldwork program; administration; resources; students; external relations; and specific accreditation requirements.

The starting point of the self-study guide requires a description of the present state of the School/College in its entirety. In preparation for this starting point, each School/College may add to or more clearly define (but not reduce) assessment procedures and performance measures from these guidelines for the assessment of each component. This initial statement of the present affairs of the School/College will form the basis for implementing and sustaining progress through annual internal assessments (self-study) of performance under each component. The self-study process is a dynamic one that is especially intended to encourage regular updating and planning reconsideration for each component of the School/College's activities.

To assist the School/College in the preparation of the initial dossier for self-study, a summary table is provided (Table 1). This table is intended for use as a checklist and as the template for ongoing review and planning. A detailed requirement for each component is also provided. All statements numbered x.1 explain what is required to describe the component, and all statements numbered x.2 explain the requirements for assessment of the particular component. The statements are deliberately generic, thereby allowing each School/College to add to or more clearly define them according to its particular needs and accreditation requirements. The individual School/College should strive to ensure that performance measures be tied to activities/processes that can be readily modified or changed according to the feedback (outcome) from self-study and that recognize the uniqueness and specific needs of the School/College within the diversity of programs in the Faculty. As well, the performance indicators need to show how effectively the School/College is able to advance in the pursuit of its mission. Lack of advancement should be readily evidenced from yearly internal review and this should provide a firm basis for reasoned and timely change and sound academic planning.

## THE NINE COMPONENTS OF THE SELF-STUDY

### 1. THE MISSION, VISION, VALUES AND PROGRAM OBJECTIVES OF THE SCHOOL/COLLEGE

#### 1.1. Description

Describe the mission, values, and program objectives, taking into account the following:

- Faculty and University mission statements.
- Duly approved policy statements of the School/College accreditation or licensing boards (where appropriate).
- Description of the School/College procedures for the ongoing self-study and evaluation of its programs.
- Description of the objectives of the program.

#### 1.2. Assessment

The defined measures for the assessment are to be based on evidence of the following:

- How the School/College procedures for the ongoing and reflective self-study are assessed and reflect the mission, values, and objectives.
- The explicitness and relevance of the general and specific objectives.
- How the objectives of the program are responsive to changing social conditions, professional developments, and advances in knowledge.

### 2. CURRICULUM

#### a. Undergraduate

#### b. Graduate

These may be described separately or combined.

#### 2.1 Description

Describe the curriculum in terms of the following:

- Philosophy, curriculum plan, goals, overall objectives, and overall learning experiences, and how the curriculum is consistent with the stated objectives of the program.

- Entry requirements and prerequisites for the program.
- Procedures for determining student achievement and promotion.
- How the curriculum provides for a sound combination of general and professional knowledge, both theoretical and applied.
- How internal and external feedback on the curriculum is obtained.
- Resources utilized in the program (here or at 6.1).
- Where appropriate, describe the accreditation requirements for the curriculum.

## **2.2 Assessment**

The defined measures for the assessment are to be based on evidence of the following:

- How well the philosophy, goals, and overall objectives are being met and updated.
- Clearly defined entry requirements, policies and procedures for promotion.
- How internal and external feedback on the curriculum is effectively integrated into the curriculum to provide for a sound combination of general and professional knowledge, both theoretical and applied.
- How the entire curriculum fosters in the student the development of professional goals and commitment to learning, scientific inquiry, and accountability.
- Adequacy of the resources utilized in the program (here or at 6.1).

## **3. RESEARCH**

### **3.1 Description**

Describe the research program in terms of the following:

- Philosophy, plan, goals, and major objectives of the program.
- Research activities and achievements.
- Plan for sustaining and improving the program (long-term goals).
- Faculty and graduate student roles.
- Resources utilized in the research program (here or at 6.1).

### **3.2 Assessment**

The defined measures for the assessment are to be based on evidence of the following:

- Relevance and feasibility of the philosophy, research plan, goals, and major objectives of the research program in light of the overall record.
- Feasibility of the plan for sustaining and improving research activity.
- Productivity and achievements of the faculty and graduate students.
- Adequacy of the resources utilized in the research program (here or at 6.1).

## **4. CLINICAL/FIELDWORK/RESIDENCY PROGRAM**

### **4.1 Description**

Describe this component in terms of the following:

- Philosophy, goals, and broad objectives of the program.
- Timing and methods for student placement.
- Instructors and staff of the clinical/fieldwork/residency program.
- University/facility agreements for the program.
- Resources utilized in the program (here or at 6.1).

### **4.2 Assessment**

The defined measures for the assessment are to be based on evidence of the following:

- How the practica/clinical component reflects the School/College objectives and prepares the student for reflective practice.
- How the administrative arrangements between the School/College and the settings sustain the practica/clinical component, and how educational purpose is maintained.
- Adequacy of the resources utilized in the program (here or at 6.1).



## 5. **ADMINISTRATION**

### 5.1 **Description**

A clear plan of the administration of the School/College is required. This plan shall address the following:

- Academic governance and policy making.
- Established lines of authority and communication within the School/College
- Links with the Faculty, university, and outside agencies.
- Management of resources.

### 5.2 **Assessment**

The defined measures for the assessment are to be based on evidence of the following:

- Overall quality of the administrative plans for the School/College in light of its missions and programs.
- Adequacy of the faculty and staff to meet these needs.

## 6. **RESOURCES**

### 6.1 **Description**

Provide a description and plan for each of the following seven areas of this component:

#### i. Faculty

- Faculty involved in the delivery of each program.
- School/College capacity for providing opportunities for the continued development of faculty.
- Summary of the workload distributions of the faculty.

#### ii. Staff

- Staff involved in the delivery of the program.
- Provisions made for staff participation and development.
- Summary of the responsibilities for each member of staff.

- iii. Equipment
  - Inventory of the equipment used in the delivery of the program.
- iv. Space
  - Space and its utilization.
- v. Library
  - Summary of the library holdings and accessibility to external resources.
- vi. Safety
  - Safety policies and procedures for the School/College as they apply to activities within and outside the university.
- vii. Budget
  - Summary of the complete annual budget (excluding individual faculty/staff salary details) and revenue-generating activities.

## **6.2 Assessment**

The defined measures for the assessment are to be based on evidence that an appropriate resource plan is in place and evidence of the following:

- i. Faculty
  - Adequacy of the faculty complement and expertise to deliver the program.
  - Scholarly/professional qualifications and contributions of faculty.
  - Fairness and relevance of the workload distributions of the faculty to the mission and activities of the School/College.
  - School/College capacity for providing opportunities for the continued development of faculty.
- ii. Staff
  - Adequacy of staff complement and expertise to meet the needs of the School/College.
  - Provisions made for staff participation and development.

- iii. Equipment
  - Adequacy of equipment against that required to carry out the overall program objectives.
- iv. Space
  - Adequacy, suitability, and location of space.
- v. Library
  - Adequacy of library holdings and accessibility to external resources
- vi. Safety
  - How the safety policies and procedures for the School/College meet established guidelines within and outside the university.
- vii. Budget
  - Adequacy of the annual budget to support the School/College needs and the use of all additional revenues.

## 7. **STUDENTS**

### 7.1 **Description**

Provide a description of each of the following:

- Role and opportunities afforded students in the development of program objectives and in the operation of the program
- Admission requirements and procedures.
- Application to acceptance ratios, enrollment and attrition rates; employment opportunities and where appropriate external examination success rates.
- Policies and procedures for designated groups or others deemed for special consideration.
- Policies and procedures for student advising.
- Policies and procedures for monitoring student progression.
- Procedures used for tracking students, exit surveys, and graduate surveys.
- Procedures for obtaining information on employer satisfaction with graduates from the program.

## **7.2 Assessment**

The defined measures for the assessment are to be based on evidence of the following:

- Role and opportunities afforded students in the development of program objectives and in the operation of the program during and after their program of studies.
- Adequacy of admission requirements.
- Adequacy of policies and procedures for student advising.
- Adequacy of policies and procedures for designated groups or others deemed for special consideration.
- Quality of application to acceptance ratios, enrollment and attrition rates; employment opportunities and where appropriate external examination success rates.
- Effectiveness of the procedures used for tracking students, exit surveys, and graduate surveys.
- Quality of the information on employer satisfaction with graduates from the program.

## **8. EXTERNAL RELATIONS**

### **8.1 Description**

Provide a description of each of the following:

- Student and faculty interaction with the larger university community.
- Collaborative contacts with relevant professional associations.
- How the School/College interacts with and provides leadership in the community at large.

### **8.2 Assessment**

The defined measures for the assessment are to be based on evidence of the following:

- Active student and faculty interaction with the larger university community.
- How effectively the School/College maintains collaborative contacts with its professional associations.

- The extent to which the School/College interacts with and provides leadership to the community at large.

9. **SPECIFIC ACCREDITATION REQUIREMENTS**

Please address specific accreditation requirements that are not otherwise covered in the previous categories and comment upon achievements to date.

# **GUIDELINES FOR PERIODIC (FULL) REVIEWS FOR SCHOOLS/COLLEGE IN THE FACULTY OF HEALTH PROFESSIONS**

## **INTRODUCTION**

Using the same guidelines outlined for the annual self-study, the periodic review process will examine the nine components of the School/College, culminate in a report on the results of the review, and make recommendations. Additional guidelines for periodic reviews include the following:

- Periodic reviews (i.e., Full reviews) are either accreditation reviews for Schools/College that have external accreditation requirements or School/College reviews conducted by the Faculty of Health Professions.
- Accreditation reviews complement but do not substitute for School/College reviews by the Faculty which requires that the regular eight components be evaluated.
- Schools/College are to share the management of the process of the review with the Faculty of Health Professions.
- Expert peer reviewers must be used to maintain the impartiality of Faculty and Accreditation reviews.

## **TIMING OF PERIODIC REVIEW**

The timing of reviews will be determined in the following ways:

- For Schools/College that have external accreditation-approval requirements, these formal reviews will be dictated by that process. Wherever possible, the yearly self-study exercise should endeavour to incorporate pertinent information from accreditation requirements, thereby preparing and providing much of the information for the accreditation.
- For Schools/College that do not have external requirements, a formal review will involve external expert peer reviewers and will normally be held every five to seven years. Again, the annual self-study guide should mitigate much of the effort of the formal review.

## **COMPOSITION OF REVIEW TEAMS FOR EXTERNAL AND FACULTY ACCREDITATION**

The composition of the Review Team will be determined in two ways:

- For Schools/College that have external accreditation-approval requirements, the Review Team will be established by those procedures. An additional one or two external members (external to the School unless otherwise negotiated), appointed from a slate of three nominees submitted by the School/College under review, will participate in the

accreditation review, if acceptable to the accrediting agency, or concurrent with this review.

- For Schools/College that do not have external requirements, the Review Team will normally consist of two external members (external to the School/College unless otherwise negotiated) and not more than three. Faculty Council will appoint reviewers from a slate of six nominees submitted by the School/College under review.

### **AUTHORITY**

The results of the review including recommendations shall be submitted to Faculty Council simultaneously with the response of the School/College under review.

### **PROCEDURES**

- A copy of the most recent self-study report shall be provided by the School/College to the Review Team prior to the site visit.
- Review teams shall limit their review to those areas outlined in the self-study guide.
- Site visits by Review Teams shall normally be limited to two days.
- The Director of the School/College shall provide the liaison contact with the Review Team.
- The Review Team shall provide opportunity for input from faculty, staff, students, university officials, and appropriate external groups.
- The Review Team shall submit its report within the prescribed time requirement of the site visit.
- Schools/College shall have an opportunity to respond to the Review Team report prior to its consideration by Council. The response to the report by Schools/College shall be filed with Faculty Council within two months of the receipt of the report.
- Faculty Council shall receive for information the Review Report and the School/College's response to the Review Report. A special meeting may be called for this purpose. At this meeting, any editorial comments from Faculty Council, ensuing from the discussion of the Report, would also be tabled. These comments would be made known to the School/College and the Review Committee.
- Undergraduate Reviews: Two reviewers from the Faculty of Health Professions' Faculty Council (FC) will submit a summary of the report and comments to FC (all recommendations will be made available to FC). The Director concerned will receive the reviewers' comments before they are submitted to Faculty Council. The reviewers will speak to their comments at Faculty Council. The Director will respond. The complete report will be available at the Dean's Office for any FC members who wish to review it.

- Graduate Reviews: One reviewer from the Faculty of Graduate Studies' Faculty Council will submit his/her summary and comments to FC (all recommendations will be made available to FC). If the member of the Faculty of Health Professions has sat on the FGS Committee, this person will prepare the summary for FC. The Director concerned will receive the FC reviewer's comments before they are submitted to Faculty Council. The reviewer will speak to his/her comments at Faculty Council. The Director will respond. The complete report will be available at the Dean's Office for any FC members who wish to review it in its entirety.
- Recommendations, other than those that are required by accrediting bodies, ensuing from the periodic Review Report will be implemented only following approval by Faculty Council.
- The School/College will be expected to report on progress with implementation of the recommendations approved by Council at its next annual review, or as otherwise requested by Faculty Council.

DE/DP September 19, 2001 (amended November 9, 2001)  
Approved by Faculty Council February 21, 2002



**FHP SELF-STUDY GUIDE**  
**Table 1 Annual Review Check List**

	Name of academic unit		Location		
Type of review	Whole unit, graduate, undergraduate				
Accreditation	Required/not required				
	<b>Present state</b>		<b>Added value — Self-study</b>		
Component	Description	Date	Assessment Self-evaluation Defined measures	Gap Analysis Identification	Ongoing assessment Plan to close gap, Define new measures, timeframe
1. Mission, vision, values, and program objectives.	1.1 University FHP School/College Accreditation Board		1.2		
2. Curriculum a. Undergraduate b. Graduate	2.1 Philosophy Goals Objectives Prerequisites  Additional accreditation requirements *Resources		2.2		
3. Research program (including graduate)	3.1 Philosophy Goals Objectives  Additional FGS requirements *Resources		3.2		
4. Clinical, residency, or fieldwork program	4.1 Philosophy Goals Objectives Instructors Staff Clinical/fieldwork facilities  *Resources		4.2		

5. Administration	5.1	Academic governance Policy-making Management of resources Established lines of authority and communication within the School/ College Links with the faculty, university, and outside agencies  *Resources		5.2		
6. Resources * define for each program and activity	6.1	Faculty Staff Equipment Safety Space Library Budget		6.2		
7. Students	7.1	Undergraduate Graduate		7.2		
8. External relations	8.1	University Profession Community		8.2		
9. Other specific accreditation requirements						

DE/DP September 19, 2001 (amended LM November 9, 2001)  
Approved by Faculty Council February 21, 2002

## **ADDENDUM TO SCHOOL/COLLEGE REVIEW POLICY**

One of the mandates of the Faculty of Health Professions is to support each School/College in demonstrating accountability for the quality of academic programs. Each School/College is responsible for ensuring that the Faculty of Health Professions is updated regularly on the external Accreditation requirements for its programs. The FHP will take those requirements into account in its own guidelines for review. Where a School/College is not subject to external accreditation, the FHP provides guidelines for routine unit reviews.

### **PROCESS**

1. Mandatory Unit Review (5–7 years) either coordinated with Accreditation with FHP representative as Observer with Accreditation Team, followed by report to FHP **OR** separate review by FHP representative(s) for units without Accreditation.
2. Accreditation criteria take priority if FHP defines similar criteria somewhat differently. However, any **ADDITIONAL** items must be added for FHP review.
3. Voluntary Annual Review by all Units, designed to assist in developing documentation over time to better prepare for the mandatory review each 5–7 years.

**EXAMPLE: FHP CRITERIA (9)**

Documentation required for (1) description and (2) assessment.

<b>FHP</b> <b>Annual = Voluntary</b> <b>5–7 years = Mandatory</b>	<b>CAOT Mandatory (5–7 years)</b>	<b>Documentation</b>
1. Mission, vision, values, program objectives (link to licensing boards)	8. Comprehensive planning and review	
2. Curriculum (objectives, framework, evaluation)	2. Curriculum (objectives, framework, evaluation, fieldwork)	
3. Research (program, philosophy, plan, activities, graduate students, resources)	9. Research (new, faculty involvement, activities, etc.)	
4. Clinical/fieldwork/residency program (objectives, agreements, resources, measures)	(under Curriculum)	
5. Administration (governance, policies, communication)	1. Established in a degree-granting university (governance, policies, committees, communication)	
6. Resources (faculty, staff, equipment, space, library, safety, budget)	4. Financial resources 5. Human resources (leadership, faculty, staff) 6. Environmental resources (space, safety, access) 7. Learning resources (library, A/V)	
7. Students (policies, procedures, data, outcomes)	3. Students (support services)	
8. External relations (faculty, students, professional, community)	Non-specific	
9. Specific accreditation requirements	CAOT	

Approved by Faculty Council February 21, 2002

**EXCERPT FROM THE MINUTES OF THE FHP FACULTY COUNCIL MEETING  
FEBRUARY 21, 2002**

**02.02.02      Matters Arising**

Schools/College Review Policy

An addendum proposed by the School of Occupational Therapy was precirculated for consideration. This addendum would be added for clarification to the document.

It was moved that:

**“Faculty Council adopt the School/College Review Policy with the understanding that the full document serves as the School/College policy for those units that are not accredited and that units undergoing accreditation apply only the relevant sections. It is further understood that annual data collection is voluntary.”**

**(EGAN/YEUNG)**

**MOTION CARRIED**

It was noted that there was no representation from the Maritime School of Social Work during the vote.

The Dean thanked David Egan and David Persaud for their work on these guidelines.

Minutes approved by Faculty Council April 18, 2002