

**REPORT OF THE ACADEMIC PLANNING COMMITTEE
TO THE REGULAR April 2021 SENATE**

FOR DISCUSSION

**QUALITY ASSURANCE - CYCLICAL PROGRAM REVIEW OF LAURENTIAN UNIVERSITY'S
MASTERS PROGRAMS IN INTERDISCIPLINARY HEALTH
FINAL ASSESSMENT REPORT & IMPLEMENTATION PLAN, April 2021**

In accordance with the Laurentian University's Institutional Quality Assurance Process (IQAP), the Final Assessment Report has been prepared to provide a synthesis of the external evaluation and Laurentian's response and action plan. This report identifies the significant strengths of the program, opportunities for program improvement and enhancement, and sets out and prioritizes the recommendations that have been selected for implementation.

The report includes an Implementation Plan that identifies who will be responsible for approving the recommendations set out in the Final Assessment Report; who will be responsible for providing any resources made necessary by those recommendations; any changes in organization, policy or governance that will be necessary to meet the recommendations; who will be responsible for acting on those recommendations; and timelines for acting on and monitoring the implementation of those recommendations.

**SUMMARY OF THE CYCLICAL PROGRAM REVIEW OF THE MASTERS' PROGRAMS IN INTERDISCIPLINARY
HEALTH**

The Laurentian University Master's Program in Interdisciplinary Health (INDH) is housed in the Faculty of Health's School of Rural and Northern Health (SRNH). The current program is dedicated to the study of health issues that impact physical, social, and psychological health. The program offers both Master of Arts (MA) and Science (MSc) degrees. The MA program has a thesis or major paper option.

The initial origins of this program date back to 1979 when it was first offered as an interdisciplinary program in Child and Human Development. In 2000, the program became a Master's program in Human Development. In the fall of 2013 this program was moved to the SRNH in the Faculty of Health and became the Master's program in Interdisciplinary Health in the fall of 2014. The program now offers a Master's of Arts (MA) and a Master's of Science (MSc).

For the MA degree, either a thesis or major paper option can be undertaken. For the MSc degree, a thesis option is offered. Faculty experienced in teaching and research are drawn from rural and northern health and from a wide variety of health-related disciplines (e.g., geography, gerontology, human kinetics, Indigenous relations, medicine, nursing, orthophonie, psychology, sociology, social work, etc.) to participate in the program.

Students in the program can opt to graduate with the following degrees: Master of Arts in Interdisciplinary Health, Maitrise es arts santé interdisciplinaire, Master of Science in Interdisciplinary Health, and the Maitrise ès sciences santé interdisciplinaire. To obtain a Master of Science degree, a course with a laboratory component is required such as Psychology (PSYC) 5106, a course in applied multivariate statistics. This Master's program offers three required courses and two elective courses to all its thesis and major paper Master's students. Additional elective courses are offered by the PhD Program in Rural and Northern Health and by other graduate programs at Laurentian University (LU).

The purpose of the Master's Program in Interdisciplinary Health is to train high-quality Master's students in interdisciplinary health research at the intermediate level to support health agencies in the north and

to prepare students to begin training at the doctoral level. The program is expected to require two years of full-time study or three years of part-time study. There are three core courses and required two elective courses required for those undertaking an MA or MSc thesis. Two additional electives (total of four) are required if a major paper is written. Ultimately, there is an open defence for all students of either a thesis or major paper. An external examiner is required for those writing theses but not for those writing a major paper.

The concept of “health” underpinning the program structure and major paper and thesis research is broadly defined as: “a state of complete physical, mental, and social well-being and not merely the absence of infirmity (<https://www.who.int/about/mission/en/>), accessed January 11, 2021). The current Master’s Program Advisory Council (PAC) includes eight faculty representatives from a variety of disciplines and a current student in the Master’s program. The Program Coordinator for the PhD program in Rural and Northern Health is an ex-officio member

In February 2020, the program submitted its self-study to the Office of Vice-President Academic and Provost of Laurentian University.

Part 1 of the self-study presented an overview of the program and then reviewed the program’s self-perception of the faculty, library, physical resources, students, program regulations, and how the program harmonized with the strategic goals and mission of the University. It concluded with an overall assessment of the program’s strengths and weaknesses. Part 2 of the Self-Study contained the Curriculum Vitae of the Faculty, Part 3, A List of Proposed Consultants and Part 4, 8 Appendices relevant to both this program and the PhD Program in Rural and Northern Health which was being simultaneously evaluated. These include:

Appendix A – Program and Course Learning Outcomes; Appendix B -- Course Syllabi; Appendix C -- Student Perspectives Appendix D -- The Faculty Members; Appendix E – Student Handbook; Appendix F – Library Resources; Appendix G – Conceptual Framework and Appendix H – Indigenous Consultation Report.

In addition, at the request of the review team, the following documentation was also supplied:

- LU Academic Plan 2015-2018
- LU Strategic Plan 2018
- Summary of Admissions for 2021
- External Reviewer report INDH 2012
- INDH Student Thesis Titles

On 10-11 June 2020, after reviewing the documentation, the Review Team conducted a visit via Zoom thanks to the pandemic. The two externals were Lynn Lavalée, PhD, Strategic Lead, Indigenous Resurgence, Faculty of Community Services at Ryerson University and Joan Bottorff a Professor of Nursing and the Director, Institute for Healthy Living and Chronic Disease at the University of British Columbia. In addition, the team consisted of two Laurentian professors, Roxanne Bélanger (Orthophonie), from within the Faculty of Health and Linda Ambrose from the Faculty of Arts. Finally, there was one student in the program, Marnie Anderson and a second, Sharlene Webkamigad representing the PhD in Rural and Northern Health.

The team was given a Virtual tour of the School of Rural and Northern Health via Zoom. The team also met with senior members of the university administration (Dr. Line Tremblay, Interim Dean of Health, Dr. Serge Demers, Interim VP Academic and Provost, Dr. Shelley Watson, Associate VP Teaching

and Learning (and former active member of the program) plus Dr. Tammy Eger (VP Research). The Dean of Graduate Studies was unavailable. The team also met with several faculty and students in the program, the librarian who supports the program as well as several community stakeholders: David Munch, CEO, Finlandia; Renee St-Onge, Director, Knowledge & Strategic Services, Public Health Sudbury and Districts; Dr. Greg Ross, VP Academic and Research Impact, Health Sciences North, HSNRI and Dr. David Marsh, Associate Dean Research, Innovation and International Relations NOSM.

In their report dated 14 July 2020, the reviewers, who also submitted a report on the PhD program they were simultaneously assessing, made a mind-blowing, eye-popping, record-setting, 75 recommendations. On 1 November 2020, the Office of the Vice-President Academic and Provost received the program's comments on these recommendations as well as the reactions of both the Dean of Health, Dr. Céline Larivière and the Interim Dean of Graduate Studies, Dr. Lace Brogden.

Since commendations and concerns were intermingled with recommendations, this report will not pull out either and instead go directly to the comments/recommendations of the Review Team as responded to by the program and the two deans.

SUMMARY OF THE REVIEW TEAM'S RECOMMENDATIONS (R) THE PROGRAM'S (P) RESPONSES AS WELL AS THOSE OF THE DEAN OF HEALTH (D) AND THE INTERIM DEAN OF THE FACULTY OF GRADUATE STUDIES (GS)

R1. The MA/MSc in Interdisciplinary Health is, in part, aligned to LU's mission and strategic goals. A predominant theme in our discussions was that these graduate programs held potential to position LU as a leader in interdisciplinary rural and northern health. LU's location and close ties within the northern region provide an ideal context for this graduate program in rural and northern health. In addition, the focus on interdisciplinarity was a key strength discussed by many in our meetings, and a strong program element across required courses in the program to prepare graduates to find meaningful and effective solutions to complex health issues particularly in northern regions.

P1. We are pleased to see that the reviewers consider the program as being well aligned with the mission and strategic goals of Laurentian, particularly in regard to interdisciplinarity.... We are concerned with the reviewers' comments which suggest the Master's program is focused on "rural and northern health" rather than "interdisciplinary health" as is the official program mandate. Perhaps this was due to confusion with our PhD program. With interdisciplinarity noted as our strength, the rural and northern context is recognized as one of several determinants of health. A narrow focus on rural and northern health issues would place the program as a clone of the PhD and seriously weaken the ultimate purpose and mandate of the Master's Program. There were multiple instances throughout the reviewers' report where the Master's and PhD Program PLOs and objectives were confused and conflated. Although this has made understanding the reviewers' recommendations somewhat difficult, we do our best to clarify this confusion in our responses.

D1. I agree with the unit's response. The program goals go beyond research related to health issues within a rural and northern context.

GS1. N/A

R2. With respect to LU goals related to Indigeneity, the MA/MSc in Interdisciplinary Health has been successful in attracting Indigenous students. However, the program learning outcomes for these programs do not include any reference to Indigenous perspectives on health.

P2. We agree with the reviewers that Indigenous health is not well reflected in the learning outcomes of the core courses. It should be noted that Indigenous perspectives on health are clearly stated as part of the learning outcomes of the IRNH PhD program, not the INDH program. We specifically used the terms PhD and Master's in our Self-Study, rather than IRNH and INDH to avoid this confusion. These programs are separate and distinct, and while some students may move from one to the other, this is not our goal. We will be undertaking a curriculum review for all core and elective courses in the program, with Indigenous and Francophone content and readings, as part of the review. It is important to note that there is already a Masters of Indigenous Relations program at Laurentian University, and we wish to collaborate with that program to support Indigenous students. Adding Indigenous outcomes to our Master's program has the potential to generate competition between programs, which is not our goal.

Action Plan: SRNH will undertake a curriculum review of both programs and reach out to discuss collaborative opportunities with the MIR program

D2. I agree with most of the unit's response and support the action item as indicated I am less concerned about the potential to generate competition between the MRI and INDH programs by adding some Indigenous outcomes to the INDH program. I believe that working collaboratively with the School of Indigenous Relations to limit potential overlaps in program mission and goals will help to address that concern.

GS2. I am confused by the unit's espoused reluctance to include Indigenous content in an interdisciplinary degree. Thus, I agree with the FOH Dean's lack of concern about competition.

R3. Despite the potential for the MA/MSc in Interdisciplinary Health to contribute to LU's commitment to Francophone education, the French stream was suspended due to low enrolment and budget constraints. Further conversations, consultation and feasibility assessment need to continue to determine how to get this program to be in alignment with the University's strategic directions, the Program's objectives and meet the needs of the Francophone population. Perhaps a partnership and/or bridge program with College Boreal could be explored as this is already being done with Nursing and Leisure Programs at Cambrian College.

P3. We appreciate the reviewers drawing particular attention to the fact that the French stream in the program is currently "suspended". The status of the French stream has been addressed at numerous points over the life course of the program, with few viable options identified given the budgetary requirements necessary, including marketing, recruitment, teaching load and supervision.

Action Plan: We will place this issue on the agenda of the Program Advisory Committee. We also ask that the Dean of Health and the Executive Team carefully consider the reviewers' recommendation and undertake a feasibility assessment.

D3. The French stream of this program has *not been suspended* as indicated. Enrolment however has been low to nil. Conversations with the Associate Vice-President, Academic and Francophone Affairs have already commenced, and additional discussions are planned with the

Vice-President Academic and Provost to assess the sustainability of this program. Partnerships / bridge programs with Collège Boréal as suggested by the reviewers are not possible given that this is a graduate level program. Strategies to promote the program internally within the university to senior undergraduate francophone students should be prioritized.

- GS3.** It would appear the unit should conduct a feasibility study as well as a sector needs assessment, to ascertain both field demands and potential government support; Hearst is developing a Diplôme d'études supérieures en psychothérapie; the UOF will also be a potential basin de recrutement, surtout que leurs Bacs sont tous interdisciplinaires
- R4.** **In reviewing the syllabi included in the self-study materials, it was sometimes difficult to see how these program outcomes were supported by course learning outcomes, since in some cases learning outcomes were missing. In the self-study, it is noted that the LU Centre for Academic Excellence provided assistance in updating program learning outcomes and course objectives in the fall of 2019 so they are not yet reflected in course outlines but will be revised for the 2020-2021 academic year. Nevertheless, we were not told of any substantive changes to program learning outcomes.**
- P4.** The linkage between course learning outcomes and program learning outcomes was presented clearly in the first column of Table 1 in the self-study and again in Table A1 in the Appendix. These tables include revisions recommended by the CAE in the fall of 2019 and were not reflected in the copies of the syllabi included in the review, since the syllabi were gathered during the summer of 2019 and thus were from the previous year (e.g., Fall 2018).

Action Plan: The Unit is committed to a detailed Curriculum Review and Mapping exercise this year.

- D4.** I agree with the action plan and will follow-up with the unit later this year.
- GS4.** Agree; concrete timeline noted, with appreciation
- R5.** **MA/MSc in Interdisciplinary Health program includes attention to contemporary issues in health and health research including social determinants of health, health issues across the lifespan, and building knowledge and skills for collaborative work with community stakeholders. These foci, along with the Northern focus, provide an important foundation for addressing diverse health issues. This is supported by external organizations who view the program as very flexible and fitting to Northern Ontario and the opportunity to address the challenges of rural, remote, Francophone, and Indigenous health using a multidisciplinary approach. Students are supported in working with organizations to define research questions relevant to external organizations. For example, in the Health Policy Analysis (IRNH-6107) course students are required to develop a briefing note that is potentially publishable by the Northern Policy Institute.**

See <https://www.northernpolicy.ca/article/publications-search-245.asp> for a few briefing notes from the IRNH students (Ex. Health Policy Priorities 1, 2, 3). Although it is suggested in the self-study that the thesis/major research paper encourage students to develop research partnerships with stakeholders, it is not entirely clear how community stakeholders are involved in student thesis committees.

- P5.** We appreciate that the reviewers have recognized some of the essential features of the program that help to characterize it as Life Course Health Development and that these efforts are being made to address the challenges of rural, remote, Francophone and Indigenous peoples within a multidisciplinary focus. However, some of the reviewers' comments are related to content specific to the PhD program, as is the case with the comments related to the IRNH 6107 course. The reviewers also ask about how community stakeholders are involved in student supervision and we would like to clarify that there are opportunities for community members to work in collaboration with our students in a variety of formats.
- D5.** I agree with the unit's comments.
- GS5** .I agree with the unit's comments
- R6.** **There is no explicit evidence of Indigenous health issues included in the core curriculum. When we inquired about this, we were told students can obtain knowledge and skill in this area in several ways: a) students self-identifying as Indigenous sharing their experiences in class, b) the course in Indigenous Health and Wellness (IRNH 6306) offered as an elective, and c) that students were encouraged to consider elective courses in the Masters in Indigenous Relations. To better align this program with LU's mission and strategic goals, the curriculum should include a focus on Indigenous health, supported by relevant articles and sources to encourage and support access to this information. The curriculum should be developed with Indigenous scholars with the aim of developing learning experiences where Indigenous students can learn with their peers and not have to teach their peers.**
- P6.** Please see response #2. We recognize that Indigenous health is important but is not a focus of the program as approved by the Laurentian University Senate. As such, the Master's program does not have any program learning outcomes focused on Indigenous and Francophone health. We would like to note that some of the courses do have required readings with an Indigenous focus.
- D6.** While not a focus of the program, adding introductory perspectives of health as it relates to indigenous and francophone communities in one course would align the program with the broader strategic goals of the university.
- GS6.** I agree with the FOH Dean's response; I further note that the unit's response appears to situate Indigenous health and Francophone health as mutually exclusive. Or, il y a des autochtones francophones en Ontario, à travers le Canada tant qu'à y être.
- R7.** **Students in the MA/MSc in Interdisciplinary Health are provided with an overview of research designs, and considerations in developing research proposals. Although the curriculum includes an overview of quantitative, qualitative, and mixed methods, missing from the curriculum was attention to Indigenous methodologies and community-based research. For example, we noted that none of the required textbooks listed in the syllabus for the Research Design and Methods course (INDH 5206) focus on Indigenous Methods. We were told that it was often left to Indigenous students in the class to provide guidance on culturally appropriate methodologies and epistemology.**
- P7.** This is not an Indigenous program, as explained in response #6. Consideration will be given to Indigenous methodologies and community-based research, particularly in INDH 5206, during our Curriculum Review and Mapping Exercise (see response #2). However, it is important to

recognize that many of the Master's students do not conduct community-based research, so a large focus in this area will come at the expense of other research approaches and thus ignore the needs of a significant number, if not most of our students. Covering all aspects of research methods in-depth is near impossible without greatly increasing the number of required courses.

We can state definitively that at no time have any Indigenous students ever been asked to "provide guidance on culturally appropriate methodologies and epistemology". There must have been some misunderstanding in this regard. We are concerned by this comment and will be creating opportunities for the students to meet with staff from the Equity and Diversity office to explore any concerns in confidence.

- D7.** I agree with the proposal that an introduction to Indigenous methodologies and community-based research could be considered within the curriculum review. On a case-by-case basis, students wishing more in-depth and comprehensive knowledge of these methodologies could also register for directed readings or independent study courses. I am generally aware through my own readings (Sheila Cote-Meek's work) of the burden experienced by indigenous students in the classroom to guide others in matters related to culture and epistemology. Regarding the INDH program, I have no direct knowledge of this being the case. The unit is taking this feedback seriously and will take steps to respectfully address the matter in collaboration with the EHDRO and the Dean's office as necessary.
- GS7.** On the issue of the unit's resistance to the inclusion of Indigenous content in research methods courses, I am perplexed. Rather, I encourage the unit to revisit the reviewers' critique. One need not have an "Indigenous" program to include Indigenous methods content – Kovach (2011) for example, is highly accessible to a Master's level researcher as an introductory text (and as an aside, can also be read for complexity by PhD students).¹ On the issue of Indigenous students and the overburden of expertise, I defer to the Dean of Health's comments.
- R8.** **We did not see attention to integration of sex and gender in health research, and current knowledge translation models/theories (including developments in integrated knowledge translation and efforts to involve decision makers and stakeholders in all phases of the research process). Based on current directions in health research and current requirements to address these issues in proposals by many funding agencies in Canada, these are topics should be considered as essential elements of the program.**
- P8.** Please see Responses #2 and #4. We agree that additional efforts are needed to review the curriculum, with particular attention given to sex and gender in health research, and knowledge translation models/theories. To address this gap, we will investigate the availability of on-line modules offered for researchers which the students will be required to complete as part of the current course structure but may do so at no additional costs to either the student or the program and may complete the learning at their own pace within the first term of the program. In addition, we will evaluate how this gap may be addressed during the curriculum mapping exercise.
- D8.** I am satisfied with the unit's response. Consideration can also be given to explore course offerings within other units on campus that may address sex and gender issues and then tailor an assignment that further integrates this knowledge within a health framework.

¹ Kovach, Margaret. *Indigenous methodologies: Characteristics, conversations, and contexts*. University of Toronto Press, 2010.

- GS8.** The unit's response appears fulsome.
- R9.** **Indigenous health issues must be included in the core curriculum.**
- P9.** The focus of this program is on interdisciplinary health. Please see Responses #6 & #7 for additional detail.
- D9.** Please see Dean's responses #6 and #7.
- GS9.** Please see response #7.
- R10.** **Add Indigenous methods to the syllabus for Research Design and Methods (INDH 5206) as a required part of the course.**
- P10.** Please see Response #7.

Action: We will continue to encourage students with an interest in Indigenous methods to reach out to the MIR program and request permission to take MIRE 5016 EL Indigenous Research Methodologies.

- D10.** I agree with the action proposed by the unit. Also see Dean's response #7.
- GS10:** I am not satisfied with the unit's response, please see #7; rather, the reviewers' recommendation should be implemented post haste.
- R11.** **Faculty/course instructors must provide instruction on culturally appropriate methodologies and epistemologies without relying on Indigenous students to provide this instruction to their peers.**
- P11.** We are able to state definitively that at no time have any Indigenous INDH students ever been asked to provide instruction to their peers. While we recognize the importance of having Indigenous perspectives on health be presented in culturally appropriate ways, Indigenous students have shared their perspectives in similar ways to other students in the INDH classes who share their perspectives on health. While individual students' views of health are encouraged, Indigenous students have not been sought out to provide instruction to their classmates in Master's courses.
- D11.** I am satisfied with the unit's response. The reviewers' comments raise awareness about students' lived experience in the classroom.
- GS11.** I defer to the Dean of Health's assessment.
- R12.** **The deep ties to community partners are impressive and the various research institutes associated with the school offer relevant placement experiences and research sites and employment opportunities for students [e.g. Finlandia and the ties to the new Institute on Aging Research; but also HSN and HSNRI and Public Health Sudbury and Districts].**

One faculty member utilizes the campus spaces to take her learners outside and learn on the land without leaving campus and invites elders to her class, thereby strengthening relationships with communities.

As noted earlier, external organizations view the program as very flexible and fitting to Northern Ontario by focusing on the challenges of rural, remote, Francophone, Indigenous,

and multidisciplinary approaches. Students' working with organizations to define research questions is innovative and creative, such as the briefing note assignment for one of the courses. The students noted creative evaluation mechanisms in courses, such as alternative presentation of work through arts-based methods such as quilting.

- P12.** External validation of the teaching/learning process is always welcome, and we appreciate the reviewers sharing what they have learned about the program as experienced by various stakeholders.

The second paragraph above relates to an example from the PhD program (like that communicated in the PhD report), suggesting that the Master's and PhD are being viewed as more similar than distinct.

- D12:** I agree.

- GS12:** No additional comment.

- R13. Incorporate alternate modes of delivery on an ongoing basis, even after the pandemic restrictions are lifted, providing access to students in remote areas using flexible means so that even those with limitations on Wi-Fi, for example, can participate fully.**

and

Ensure equitable access to library and other campus resources for students who are completing the program in remote communities or unable to come onto campus for other reasons.

- P13.** As part of the curriculum review, we will discuss the potential of expanding our "regular" program delivery (i.e., delivery not determined by the pandemic) to include synchronous remote delivery or a hybrid of synchronous and in-person delivery (potentially including one-week intensives or delivery in time blocks). We will review readings and encourage the use of course resources that are available on-line. Laurentian is now a member of the "HathiTrust" partnership, and addition recommended by the reviewers to increase access to e-books.

It is important to note that successful implementation of any form of remote delivery, synchronous or otherwise, will require on-line access to additional journals through the Laurentian library and effective IT support for students and faculty. The reviewers' concerns regarding bandwidth availability in rural areas is a significant consideration, but one that is beyond our unit's scope. We are hopeful that this will continue to improve across rural and northern communities over time as a result of federal initiatives.

- D13.** I am satisfied with the unit's response.

- GS13.** I am satisfied with the unit's response but caution that the unit should consult with the University Librarian for the duration of our access to the Hathi Trust beyond the COVID-19 pandemic.

- R14. The option for part-time study in the Master's program (over 3 years) is effective in providing flexibility to undertake further education while working full time. However, as flexible delivery options are considered the timing of core course offerings to include both full- and part-time students will be important to accommodate commitments to full-time jobs. Also, part-time students indicated feeling excluded from important relationship-building experiences with others in the program. Hence, ways to support community-building among**

students both within courses and within the program need to be considered, particularly with respect to part-time students. For example, the timing of delivery of some courses could offer an opportunity to strengthen connections between part-time and full-time students (e.g., the thesis courses—intended to bring all students together).

P14. As part of the curriculum review (and in relation to Response #13), we will examine the potential of offering some courses in evenings (e.g., such as the thesis course (INDH 5000 and INDH 5005 –but also potentially others). It is worthy of note that INDH 5000 and INDH 5005 were offered via Zoom over the lunch hour in the most recent year. However, we must also balance the needs of students with the demands put on faculty members to teach outside of typical working hours.

We are interested in better understanding the ways in which part-time students feel excluded, as this is concerning. The Master’s Coordinator will endeavour to meet with the part-time students to get further feedback on how we may be able to address this issue. We also wish to clarify that the part-time option is not limited to 3-years.

D14. I am satisfied with the unit’s response.

GS14. No additional comment.

R16. **There is interest in offering a course-based master’s program in interdisciplinary health. However, we heard that although the faculty is confident there is an interested pool of applicants for this type of program and employment opportunities in northern regions for the graduates, resources are required to offer additional courses. This type of program expansion will need to be considered along with other resource needs (including the Francophone program).**

P15. We appreciate the reviewers’ recognition of a course-based program expansion and their words of caution that other resource needs be considered, regarding the Francophone program in particular. It should be noted that the Master’s Program Advisory Committee discussed the development of a course-based MA and voted to not proceed with further deliberations at the time (October 2019) until after the IQAP review had occurred.

D15. I am satisfied with the unit’s response. I would add that it is advisable to conduct a feasibility study to gauge potential interest in this type of program prior to allocating resources. It is also advisable to conduct a Faculty wide graduate course audit to determine what courses are currently in the database and could potentially be incorporated into a course-based masters. This exercise is currently already underway.

GS15. I am satisfied with the unit’s response; see also #3.

R16. **Students appreciate the option to choose from a variety of blended ways to take courses. However, we heard from some faculty that the ability to team teach is not possible at LU, while others contradicted this sentiment noting team teaching does occur at LU. In particular, to meet the Indigenous learning outcome, it was shared that sometimes Indigenous students are asked to guest lecture without remuneration and that it was a value shared by the administration of the program that knowledge is an exchange between students and instructors and that the Indigenous learning outcome is often met by Indigenous students sharing in the classroom. The Review Team felt that both the guest lecturing by Indigenous people and a statement made about Indigenous students helping meet the learning objective**

is completely inappropriate. We noted that in the table of the five learning objectives, only the Indigenous objective is not embedded in any required courses. If the program has a stated objective, especially an Indigenous learning objective, this should be properly resourced and a required course.

P16. There were several misunderstandings apparent in this section. Our faculty may team teach but are not remunerated for the second instructor. This policy applies to all faculty members and is not specific to Indigenous guest lecturers. At no time have any Indigenous INDH students ever been asked to guest lecture in any of the SRNH Master's or PhD courses and we agree with the reviewers that to ask them to do so (either with or without remuneration) would be highly inappropriate. The Masters program does not have an Indigenous focused PLO.

Regarding Indigenous students sharing in the classroom, we thank the reviewers for bringing their observation to our attention and we are reflecting on this most seriously. Our normal practice is for all students to share experiences and perspectives and it has never been our intent to cause Indigenous students any discomfort or anxiety. This clearly tells us that we need to listen to our Indigenous students so that we can understand their perspective and ensure that the classroom is a safe, happy, and constructive environment. We propose that we will work with the EDI to assist us by (1) conducting a focus group with all SRNH students (both INDH and IRNH) and (2) conducting a second focus group with Indigenous SRNH students. This will allow EDI to confidentially communicate student perspectives regarding how we may improve the cultural safety, equity, and diversity of our learning environment.

D16. By EDI, I am assuming that the unit means the Equity, Diversity and Human Rights Office. I am satisfied with the unit's response plan of action.

GS16. No additional comment.

R17. **Develop strategies in collaboration with students to support networking and relationship building among students, and with communities.**

P17. Please see Response #14.

D17: I agree with the unit's strategy to have the program coordinator develop a plan in consultation with the students to enhance networking opportunities.

GS17. No additional comment.

R18. **Discussion related to a course-based master's and development of a detailed plan should be conducted in collaboration with community stakeholders, affiliated and core faculty, and students. Resource implications must be considered. There must be a clear commitment by LU to ensure necessary resources to support a course-based master's prior to launching this program.**

P18. We appreciate the strong recommendation regarding the importance of multi-stakeholder participation in discussions of a course-based master's program. The Master's PAC will be advised accordingly. The Dean of Health will be informed of the reviewers' recommendation regarding the need for a clear commitment by LU, that ensures the necessary levels of support and resources are provided. See also response #15.

D18. I will work with the unit and other stakeholders to determine the feasibility of developing a course-based masters program.

GS18. No additional comment.

R19. **Admissions in the master’s programs has been declining. However, we were advised and subsequently received the enrolment statistics for 2021 that were on par with the goals set for the programs (11 masters). Although a positive indication of interest in the program, we heard concerns about uncertainties related to the influence of the pandemic and launch of other new graduate programs at LU on future recruitment and admissions. Discussions also highlighted the growth opportunity for these programs and focused on the need to expand and improve program marketing. Administrators suggested a proactive marketing strategy with clear messages about employment opportunities for graduates, and that core faculty were in an ideal position to lead this effort. However, we also heard that the program faculty needed additional support to develop marketing materials that could be posted on their website and disseminated using other channels.**

[Accordingly, we recommend that Laurentian] provide resources to expand and improve program marketing strategies to take full advantage of the opportunity to grow these master’s programs.

P19. While there was year-to-year variability in enrolment in this program, the average intake over the past 5 years has been on target. We agree with the reviewers that marketing of the program could be improved and that an aggressive program marketing strategy should be developed, which should include website improvements and support. The faculty can provide potential applicants with additional information regarding potential career opportunities. *However, we strongly disagree with the position of the administration (as reported by the reviewers) that faculty are “in an ideal position to lead” the marketing effort.* Faculty neither have the expertise nor time to launch or maintain a sustained effective marketing effort. The unit feels that both Liaison Services and Marketing need to assist all graduate programs with marketing as most marketing efforts have been exclusively focused on undergraduate studies. The unit would be happy to work with both departments but, as stated by the reviewers, “the program faculty need additional support to develop marketing materials that could be posted on their website and disseminated using other channels.”

Action: We ask the Deans of Health and Graduate Studies to bring this forward to Liaison Services for support during the 2020-2021 academic year.

D19. I agree with the unit. In fact, I have already been in contact with Liaison Services to coordinate a Faculty of Health virtual graduate student fair. One fair will be focused on engaging with 3rd and 4th year undergraduate students and the second will be focused on engaging alumni that may be seeking to further their education at the graduate level. These initiatives will require coordination on the part of Liaison services, Faculty of Health graduate program coordinators, the Faculty of Graduate Studies, and the alumni office.

GS19. The unit – or Laurentian as a whole, or both – does not seem clear on the current workload allocation associated with Grad recruitment, whereby Liaison sees its mandate as undergrad focused and FGS staff perceive their workload as untenable. This is an area that should be addressed in a collaborative manner among multiple units.

R20. Provide resources to ensure that the website for the master's programs is up-to-date and provides an effective marketing tool for the program.

P20. Please see Response #19. The previous Master Coordinator worked closely with Admissions to ensure our site is up to date. Both recommendations pertaining to marketing and website will be drawn to the attention of the Deans of Health and Graduate Studies.

D20. The website should be kept up to date and this is within the purview of the unit (possibly the administrative assistant). Consideration should also be given to promoting the graduate program via social media.

GS20. On website, I agree with the FOH Dean; on marketing, this should be a collaboration between FOH and FGS.

R21. In the Master's programs, admission requirements are in line with similar graduate programs at the master's level. Students who hold a 4-year UG degree from a wide range of health-related disciplines are recruited and admitted to the program. As part of the application requirements, prospective students need to obtain the commitment of a supervisor. As such previous relationships and knowledge of LU faculty research programs, helps LU Bachelor-level graduates meet this requirement.

Nevertheless, there were conflicting opinions about supervisory capacity—especially in relation to program expansion. Although in addition to the 5 core faculty in this program, potential supervisors also include 68 affiliated faculty members (with supervisory privileges at the master's level) from a wide range of disciplines, some faculty members suggested that supervision of IRNH master's students needed to be considered considering their already full workloads in their home departments / faculties. In addition to obtaining confirmed support from an appropriate supervisor, applications are assessed based on strength of the academic record, fit with the program based on interests and background, proposed thesis project or major paper, and previous basic knowledge of health research methods. Only those from a 4-year BSc enter the MSc program.

The process of admission seems to involve the Program Advisory Council—a that reviews applications and makes recommendations for admission to the program. Because the Master's program is offered as both an MA and an MSc, there is more scope to accept students whose backgrounds may not include the science training one might hope for. This was seen as a strength of the program.

P21. We appreciate the reviewers acknowledging our offering both an MSc and an MA as a program strength. The options of pursuing an MSc thesis, an MA Thesis or an MA Major Paper provide students with maximum flexibility in aligning their career goals with graduate study.

D21. I agree with the unit's response.

GS21. No additional comment.

R22. Some international students encountered challenges when their previous academic degrees were not considered equivalent based on the World Education Services (WES) assessment, and they had to accept admission into the Master's program when they were applying for admission to the PhD program. It was suggested that if International Credential Assessment

Service (ICAS) were used for this assessment, their past courses and program would have been accepted.

[Accordingly, we recommend that] Laurentian explore the implications of using WES vs ICAS in admission assessments.

- P22.** Although the evaluation services used by the Faculty of Graduate Studies is out of the unit's jurisdiction, we will communicate this feedback from our students to them for consideration.
- D22.** I agree with the unit's response.
- GS22.** Some consensus building around LU levels of support compared to sector needs to happen, and the unit's perceptions in the regard are welcome at FGS.
- R23.** **Some faculty and administrators suggested that admission offers were not competitive in comparison to other universities and that this influenced LU's and the program's ability to recruit graduate students. We heard from administrators there is a desire to do a better job at alerting students to unique scholarship, research assistantships and seed grant opportunities in research programs/centres as part of the recruitment process. Students with GPAs over 75% are offered GTAs.**

Accordingly, we recommend that Laurentian continue to explore ways to improve admission offers to increase competitiveness with other programs.

- P23.** We agree with the reviewers. Since increasing graduate enrolment is an institutional goal, then admission offers to graduate programs (across the institution) need to be competitive and offer guaranteed multi-year funding to strong applicants in addition to GTAs. This will greatly impact and improve graduate program recruitment and retention. We were pleased to see that administrators acknowledged this as an important issue.
- D23.** While it is important to ensure robust graduate enrolment, it appears that the institution's new strategic mandate agreement 3 (SMA3) focuses less on achieving significant increases in graduate enrolment. I will work with the unit and with the VP Academic and Provost and the Dean of the Faculty of Graduate Studies to determine realistic target enrolment goals.
- GS23.** Additional funding for grad students is a shared responsibility, including at the unit level.
- R24.** **The Master's programs include 3 core courses (INDH 5106, INDH 5206, INDH 5306), and 2 electives. Students completing the MA major paper option are required to take an additional 2 electives with a "view to interdisciplinarity," and students choosing the MSc are required to take a course with a laboratory component.... Accordingly, students are encouraged to take electives in other programs across the campus with the approval of the Grad Coordinator and have the opportunity to take courses at other universities also with approval.**

However, there was no consensus about the availability of electives. While some suggested there were a wide range of electives available in other programs across the campus, others indicated that it was not always clear what courses were available as electives and perceived there were limited options. For example, the MSc requirement for a lab based elective created problems for some students. The perception was that there was only one option available to meet this requirement—PSYC 5101 Applied Multivariate Statistics, thereby offering students

no choice at all. There does not appear to be clear information available to students or supervisors about available electives.

- P24.** Students have been provided with a list of 11 potential electives each year, both by email and on the shared Google drive. Additionally, the Student Handbook indicates that they are welcome to take any 5000 or 6000 level courses from across the university.
- D24:** I am satisfied with the unit's response. Furthermore, a broader analysis of graduate courses tagged to units with the Faculty of Health and listed in the database will be conducted before the end of this academic year. This list will be provided to all School Directors in an effort to explore the possibility of shared graduate level courses across programs where elective courses are sought.
- GS24:** I reiterate the FOH Dean's comment that cross-campus collaboration would be beneficial in improving student access and reducing redundancies of graduate offerings.
- R25. Students reported the program was rich in rural and northern health but there could be a core course to be inclusive of Indigenous people's health in the north. Students reporting having to find other supplemental reading materials and/or the Indigenous readings was optional. There was praise expressed for the Policy course and the attempt to integrate Indigenous cases and examples in the course material. Most students reported that the course content was broad with projects giving them the opportunity to flush out ideas about their research projects. Students expressed missing the epidemiology course but were able to take a course at the University of Toronto without additional charges.**
- P25.** We appreciate the reviewers again drawing our attention to the availability of course content on Indigenous people's health in the north. The comment above is directed to the PhD program (i.e., "...praise expressed for the Policy course and the attempt to integrate Indigenous cases and example..."). We would like to note that many of the core Master's courses have required readings with an Indigenous focus. See responses #6, #7, #9 and #10.
- D25.** I am satisfied with the unit's response.
- GS25.** No additional comment.
- R26. Some of the big data course content could include more detail about northern regions providing an opportunity for creation of new knowledge.**
- P26.** Both the recommendation pertaining to big data course content and the comment pertaining to a core course inclusive of Indigenous people's health was apparently made by reviewers in reference to the PhD.
- D26.** I am satisfied with the unit's response.
- GS26:** No additional comment.
- R27. Identify elective pathways both inside and outside School of Rural and Northern Health and make this information available and accessible to students and supervisors.**
- P27.** We have an existing list of electives that are shared with our students (see response #24). This list and associated elective pathways will be considered during our curriculum review.

D27. See response #24.

GS27. See above

R28. **Information available in the self-study related to student achievement in the master's programs is impressive. The average time to completion of the full-time thesis option is 2.3 years. Student success in obtaining scholarships (e.g., Ontario Graduate Scholarships), opportunities to share their scholarly work at conferences, and their success in publishing their scholarly work in peer-reviewed journals. The self-study indicates that the program is producing graduates who find employment or go on to complete doctoral studies, however, details about this were lacking. Nevertheless, we were assured by community stakeholders that MA and MSc graduates were well prepared to take up employment in a range of positions throughout northern regions.**

[Therefore, we recommend that the program] Track and promote these alumni success stories as a means of marketing the program.

P28. We are pleased that stakeholders recognize the preparedness of our Master's level graduates and the time frame within which they graduate. We will discuss the steps that may be taken to assisting in the identification of program success stories and their marketing, in conjunction with the Deans of Health and Graduate Studies.

D28. I am satisfied with the unit's response.

GS28. No additional comment.

R29. The Program has a very attentive small group of core faculty who serve students well and build strong relationships with students. There are very strong and deep community networks developed by the core and interdisciplinary faculty by way of their research as well as the availability of practitioner researchers. The Program has tremendous potential with health research and interdisciplinary perspective.

P29. We are pleased that the reviewers recognize the core program's focus on interdisciplinary health and that the focus is seen as holding tremendous potential for the program going forward.

D29. I am satisfied with the unit's response.

GS29. The potential of content and potential of enrolment are not inherently causal. I encourage the unit to develop a comprehensive, multi-year recruitment plan.

R30. A core strength of the Program is the very effective administrative assistant who serves faculty and students and operates in a role as a sort of "navigator" to help students find their way through procedures, questions and problem solving. As we prepared this report, however, we learned that the person who had been in this role has taken another position in the university.

[Therefore, we recommend that Laurentian] replace the administrative assistant with a full-time permanent person who can fulfill the administrative tasks and serve as an effective navigator for students, as the previous occupant of this role had been doing.

P30. Our administrative assistant, at the time of review, provided a crucial role to support the program and students. Recent restructuring activities have resulted in the loss of our full-time administrative assistant, who has been replaced by a more experienced administrative assistant

working less time in our unit: half-time in SRNH and half-time in the School of Kinesiology and Health Sciences. We are unsure if the change from a 1.0 FTE administrative assistant to a 0.5 FTE is temporary or permanent. We strongly encourage the Dean of Health and other levels of administration to hear the reviewers' recommendations and ensure that SRNH has a full-time administrative assistant who can provide the supports outlined above as this has been deemed "critically important" to the student and program success.

We would also like to clarify that the academic advising for our students is provided by the Program Coordinator and the supervisors.

D30. The change from a 1.0 FTE administrative assistant to a 0.5 FTE is a permanent change at least for the foreseeable future. As the university migrates to an activity-based budget model it may be possible to revisit this level of administrative support.

GS30. No additional comment.

R32. The interdisciplinary focus throughout the MA/MSc programs is a key strength. The programs are highly valued at LU, by program faculty and students, and by community stakeholders. *The focus on northern and rural health is a unique strength of these graduate programs and provides an exceptional opportunity for developing "practitioner researchers" who can spark innovations.*

P32. There is an opportunity to consider rural and northern health as a complement to the current focus on interdisciplinary health. However, this direction will need to be carefully considered, as it would represent a narrowing of our focus at a time when we are looking to expand.

D32. The unit could consider inclusion of some introductory concepts of rural and northern health as expanding and complementing the curriculum rather than viewing the suggestion as a narrowing of the program's focus.

GS31. I am inclined to align with the FOH Dean's response.

R32. **That Graduate Studies develop clearly articulated policies that are accessible in written form for reference by students, faculty, and staff.**

P32. With regard to Faculty of Graduate Studies policies, we agree with the reviewers and the lack of written policies housed in a central accessible location has been an ongoing challenge for the program, students and program faculty.

Action: We will communicate this feedback to the Dean of Graduate Studies.

D32. I am satisfied with the unit's response.

GS32. Feedback welcome.

R33. Community stakeholders who view the programs as a valuable asset to Sudbury and the region as a whole because of the urgent need to develop health research capacity in collaborating with communities to understand northern realities and identify solutions to priority health issues. LU's aspirations and the School's commitment related to Indigeneity are commendable.

[The program should] strengthen efforts to enhance curriculum related to Indigenous perspectives and provide support for community-based research].

- P33.** We agree that Indigenous health is an important topic and recognize that this is the focus of the Masters of Indigenous Relations program. We do not wish to create competition with our sister program but will work with them to ensure the needs of Indigenous students are met.

See responses #6, #7, #9 and #10.

Regarding support for community-based research, mixed-methods and community-based approaches are most definitely covered in the current course structures, although not as “in-depth as reviewers were perhaps considering. Many of our Master’s students do not conduct community-based research so a large focus in this area will come at the expense of other research approaches and thus ignore the needs of a significant number, if not the majority of our students. Covering all aspects of research methods in-depth is near impossible without greatly increasing the number of required courses.

- D33.** I am satisfied with the unit’s response.

- GS33.** See #2 & #7.

- R34.** **Revise program structure and timelines to ensure students have opportunities to engage rural and Indigenous communities and stakeholders throughout the research process and develop respectful relationships with communities and sustain them.**

- P34.** This recommendation refers to the PhD program comprehensive exam process.

- D34.** I am satisfied with the unit’s response.

- GS34.** No additional comment.

- R35.** **Ensure that SNRH’s values and practices attend to inclusion, cultural safety and Indigeneity (e.g., examining Indigenous students’ roles in classrooms; choices of textbooks and readings that could be more inclusive; the silo effect of having one Indigenous scholar carry the responsibility of providing all of the content, direction, advice related to Indigenous perspectives, considering other ways to resource Indigenous teaching needs including visiting Elders or partnering with Indigenous services/programs on campus or in the community; cultural safety training for participating faculty members).**

- P35.** The Master’s program focuses on interdisciplinarity with attention to inclusion. As a program, we will commit to completing formal cultural safety training. Additionally, we will examine cultural safety training resources for all students either on campus, in the community or online (similar to those we see to educate students regarding sex and gender in research). Ideally, we would like to see all SRNH students (in both the Master’s and PhD) participate in cultural safety training as a program requirement.

- D35.** I am satisfied with the unit’s response.

- GS35.** No additional comment.

- R36.** **Revise research courses with a view to: i) clarifying laddering between the master’s and PhD level courses, ii) include approaches for integration of sex and gender in health research across all pillars of health research, and iii) include models/approaches to knowledge translation (e.g., integrated KT) to support evidence-based changes/improvements in policies and practices to enhance health and healthcare that community-based stakeholders were looking for.**

P36. With regard to the points above:

i) The PhD program and Master's program will both conduct a curriculum review to examine how the programs may coordinate and structure course curriculum to ensure (1) the progressive laddering in learning from the masters to the doctoral program, (2) to determine where courses may be shared between the two programs as is done in many graduate programs across the country, and (3) to develop an explicit process to "fast track" exceptional students from the Master's to the doctoral program.

ii) We will investigate the availability of on-line modules offered for researchers, which the students will be required to complete as part of the current course structure, but may do so at no additional costs to either the student or the program, and may complete the learning at their own pace within the first term of the program. In addition, we will evaluate how this gap may be addressed during the curriculum mapping exercise.

iii) Similarly, we will consider knowledge translation options both on-line and through our curriculum review.

D36. I am satisfied with the unit's response.

GS36. Suggestion addition of timelines for deliverables.

R37. Develop and strengthen alternative forms of program delivery as a "growth opportunity" to provide better access to these graduate programs for interested students in rural and remote communities who are unable to relocate for on-campus courses. This will also need to include alternative modes of delivery for electives as well as thesis defenses.

P37. As part of the curriculum review, we will discuss the potential of expanding our "regular" program delivery (i.e., delivery not determined by the pandemic) to include synchronous remote delivery or a hybrid of synchronous and in-person delivery (including one week intensives or delivery in time blocks). We will endeavour to review readings and course resources are readily available on-line. It is important to note that successful implementation of any form of remote delivery, synchronous or otherwise, will require on-line access to additional journals through the Laurentian library and effective IT support for students and faculty.

D37. I am satisfied with the unit's response.

GS37. No additional comment.

R36. Hiring a Student Navigator will help enhance student engagement, supervisor relationships, as well as help with funding, course questions, Zotero and referencing assistance and contributing to up-to-date social media connections. In addition, creating student focused training from a student perspective would enhance the Program.

P38. Please see Response #30

D38. The graduate program coordinator has the responsibility to guide students. The unit may also consider creating a framework for more formal peer-to-peer student support.

GS38. Agree with the FOH Dean.

R39. The MA/MSc programs are supported with five core faculty members (who are also responsible for the PhD program) - with two faculty members working beyond the normal

retirement age), and one administrative assistant. We understand that two of the faculty do not teach courses. In addition, the MA/MSc draws on 68 affiliated faculty members across the university who are qualified to supervise, and students are encouraged to take electives offered in other programs. While faculty are well qualified and have strong programs of research underway, there appears to be no capacity to meet strategic goals to expand the program with the existing faculty complement. To take advantage of the opportunity to expand this program, there will need to be a commitment by LU to adequately resource any expansion of these programs.

P39. We are eager to see the renewal of faculty within our unit, as this is central to our future plans.

We would like to clarify that all of the SRNH core faculty teach. Although two members were not teaching in 2019-2020 (due to the Directorship and sabbatical), both of these faculty members have extensive teaching track-records and are very actively involved in the supervision of IRNH students.

We strongly agree with the reviewers that any expansion will require guaranteed resources to expand faculty complement and full-time administrative support.

D39. I will work with the unit to ensure that the program is appropriately resourced to meet its mission and objectives in a fiscally sustainable way.

GS39. No additional comment.

R40. **That LU fill anticipated vacancies due to retirements and expand teaching/supervision capacity in the future with tenure-track faculty (vs sessional hires).**

P40. Please see Response #39.

D40. I will work with the unit to ensure that the program is appropriately resourced to meet its mission and objectives in a fiscally sustainable way.

GS40. Reviewers did not appear to provide justification for this recommendation, thus, I agree neither with the recommendation, nor with the unit's response #39.

R4. **Any expansion of the programs will need to include resources for additional admin support.**

P41. Please see Response #30.

D41. See response #30.

GS41. No additional comment.

R42. **Expand the reading materials available in the main office to include copies of required textbooks (print and e-books) for students to borrow if funds are limited or unavailable from the library.**

P42. Please see Response #7.

The students have access to all required texts in the office library. In addition, students have access to an extensive library donated by the Centre for Rural and Northern Health Research. The librarian for the Faculty of Health is also able to make suggestions on where to retrieve some resources. Furthermore, students in all graduate programs across Canada are typically required to purchase their own personal copies of resource materials if they so desire.

- D42.** I am satisfied with the unit's response.
- GS42.** No additional comment.
- R43.** **Add a collection of important texts to enhance the Indigenous knowledge and research methods since students reported that they had to obtain these on their own, incurring unforeseen expenses.**
- P43.** Please see Responses #7 & #42.
- D43.** I am satisfied with the unit's response.
- GS43.** I disagree with the unit's response, please see my responses at #2 & #7.
- R44.** **The marketing, website development and IT support appears to be limited. We heard that capacity within departments to regularly up-date the website needs to be enhanced. Faculty noted that the website for the MA/MSc program is not up-to-date and needs to be enhanced to serve as an effective recruitment resource to grow the program. Online presentation of the program, profiling graduates, updates etc., were viewed as lacking, and constraining recruitment. Presently, it appears that recruitment of graduate students occurs mostly via current LU students and alumni sharing information about the program.**
- P44.** Please see Responses #19 & #20
- D44.** See responses #19 and #20.
- GS44.** No additional comment.
- R45.** **Resources in the library have suffered from university wide cuts and unreplaced retirements. Specifically, the library is required to cut \$180,000 so we were told there will not be any ordering of new books. There is no specialist librarian for the Rural and Northern Health program, and this was seen as a deficit. A health and/or data specialist librarian would also enhance the library resources for this program. The data specialist librarian was not replaced and in order to support researchers, faculty, and students whose work is "big data." It was noted that there is a need to enhance the digital resources by investing more in databases and subscriptions like the "Hathi Trust" that makes eBooks available, particularly in light that the interlibrary loan program is facing challenges. The Librarian emphasized that all of this e-resource provision is premised on a strong inter-library loan system being in place. In general, E-resources will need to be enhanced to support not just COVID accommodations but future developments of continued remote and alternate delivery if the programs invest in ongoing commitment to deliver remotely so as to provide access for learners who cannot move to Sudbury.**
- P45.** Librarian Ashley Thomson is the specialist resource for the Master's program and the review team spent time with this expert librarian. We agree with the reviewers' comments and will draw our Dean's attention to these issues so that she may take it forward. Laurentian is now a member of the "HathiTrust" partnership.
- D45.** I will work with the unit as well as the University Librarian (Dean - Brent Roe) and the Faculty of Health-designated Librarian Ashley Thomson to address this concern.
- GS45.** See Hathi Trust comment earlier in review.

- R46.** Students raised the issue of the current tuition structure and its financial implications for part-time students (versus a program fee structure when courses are finished, and students are completing their theses pay a continuation fee). Exploring the impact of student funding, particularly for part-time students, where it was expressed little to no funding exists. It was noted that NOAMA [Northern Ontario Academic Medicine Association] funding is vital but only available for physician and specific allied health students.
- P46.** We agree with the reviewers that there is a need for better student funding. Part-time students are generally not eligible for most funding – including tri-council funding.
- D46.** I agree with the unit. I have had discussions with Development Office to begin coordinating a future fundraising campaign for the Faculty of Health that could be geared in part to support student scholarships but this may take a number of months to materialize.
- GS46.** Recommend the unit study support options specific to PT students, in both program structure and faculty research grants.
- R47.** **The Masters students shared that some have received Graduate Teaching Assistantships (GTAs) and noted there are a lot of opportunities to apply for grants and various ways to be supported. However, some students were not as aware of opportunities and the Administrative Assistant of the Program does not have the policy and/or procedures about GTA to share with students who may express interest and/or need. It was noted that OSAP funding fully supports the degree programs but the GTAs are vital. For students who do not qualify for funding, OSAP, OGS or otherwise expressed financial struggles in the program. For these students in particular, not being able to pay per course is a significant burden. Whether a student takes one course or three the amount owed is the same.**
- P47.** We agree with the reviewers that the Faculty of Graduate Studies needs clear policies regarding GTAs. We will communicate the reviewers' suggestions regarding the need for tuition structure options for part-time students.
- D47.** I am prepared to collaborate with the unit and with the Faculty of Graduate Studies to address this concern.
- GS47.** GTA eligibility is communicated at time of admission; thus, the problem appears to be one of communication. FGS is willing to work with the FOH on this issue. Note: this year's offer letters were updated in early December to provide additional clarity and specify GPA requirements.
- R48.** **Students studying in Indigenous communities often take more time to progress through the program given the requirement to work with community.**
- P48.** As part of the curriculum mapping and review process, current time frames for full and part-time students will be examined with respect to some of the challenges that are part of community-based involvement. We also agree with the reviewers that there is a need for special funds to support students conducting rural and northern health research. We will communicate this with the Faculty of Graduate Studies.
- D48.** I am satisfied with the unit's response.
- GS48.** See above.
- R49.** **Hire a data specialist librarian to support researchers in this program.**

- P49. We agree with the reviewers regarding the importance of having access to a data specialist librarian and will communicate this need to the Dean of Health.
- D49. The suggestion is noted and will be considered.
- GS49. No additional comment.
- R50. Enhance digital resources in the library with investment in databases and subscriptions such as the "HathiTrust."**
- P50. We agree with the reviewers' comments and will draw our Dean's attention to these issues so that she may take them forward. Laurentian is now a member of the "HathiTrust" partnership.
- D50. The suggestion is noted and will be shared with the University Librarian.
- GS50. See Hathi Trust comment above
- R51. Enhance the sharing of information regarding seed grants and other forms of funding.**
- P51. The Faculty of Graduate Studies and the Office of Research electronically communicate funding information to students. The Office of Research also maintains directories of funding sources that can be consulted by both faculty and students. The program also notifies students directly regarding funding availability, such as OGS. We will examine our current communication of funding opportunities as part of the curriculum review initiative
- D51. I am satisfied with the unit's response.
- GS51. No additional comment.
- R52. Create materials for students and supervisors to know what funding is available to address perceived inequities in accessing these resources among students and faculty.**
- P52. Please see Response #51
- D52. See response #51.
- GS52. No additional comment.
- R53. The Program should work with the Office of Graduate Studies of the University to offer students the option to pay per course in cases where students are facing financial difficulties.**
- P53. We will communicate the reviewers' suggestions regarding the need for tuition structure options for part time students.
- D53. The suggestion is noted and will be discussed with Dean of the Faculty of Graduate Studies and other members of the senior executive team.
- GS53. The reviewers seem to have neglected the overall Laurentian grad studies environment; the challenge requires an institutional decision based on alignment of strategic priorities.
- R53. The list of first authored student publications from 2014-2020 demonstrates the support and guidance students. However, we were unable to determine from the list which publications were based on work completed in the Master's programs vs the PhD program. With 128 noted publications across a broad range of topics, many in high ranking journals it is clear that the supervision by committee members is focused on benefiting the students while ensuring**

publications for both core and affiliated faculty in the Program. Based on some of the titles of the publications and the titles of the PhD students' dissertations, it appears that collaborations are occurring with community partners. [So, keep up the good work].

P54. We are very proud of our graduate and student success regarding time to completion, obtaining competitive funding, presentations, publications, and employment. This is testimony to the hard work and dedication of our students and their supervisors.

D54. I am satisfied with the unit's response.

GS54. Congrats.

R55. **There was much appreciation expressed from community stakeholders about the research that is conducted through the School. It was expressed that most of the faculty are well-integrated into the community and therefore they know the needs of community stakeholders.**

[That said, the program should] establish a more formal consultation process at regular intervals to ask stakeholders about gaps in research and their needs for research. For example, some identified workforce needs might include gerontology (as indicated by the stakeholder from Finlandia) and more capacity in public health (post-COVID). Another identified workforce need might be fluently bilingual/Francophone professionals in various health fields.

P55. We have some concerns with the reviewers' comments regarding regular stakeholder consultations. We do not feel we have the capacity to respond to local needs in this way. Our worry is that we will set expectations in the community that we cannot fulfil. Master's students have their own research interests and although many do work with local stakeholders, we cannot guarantee these stakeholders that there will always be students interested in research related to their services and activities. We do support some local stakeholders through faculty research projects and we could explore potential independent study or placement options that are available for students locally.

D55. The suggestion is noted. A broader Faculty of Health stakeholder consultation may be envisaged that could benefit the INDH graduate program as well as other graduate programs offered in the Faculty to create further synergies.

GS55. No additional comment.

R56. **The average time to completion for the Master's program is reported in the self-study as 2.3 years for FT thesis students. This is in line with similar programs, although extra time required to meet program requirements beyond two years has a cost implication for students with respect to tuition fees that should be addressed. (See recommendation above.)**

P56. We appreciate the reviewers acknowledging the success of the program as measured by time-to-completion.

D56. I am satisfied with the unit's response.

GS56. No additional comment.

R57. **Most students reported being very happy with their committee support, describing frequent communication and feedback. Students expressed very positive feedback in response to**

COVID and the connection to supervisors and the program. The School is to be commended for this significant support during difficult times.

- P57.** We are pleased to learn that efforts to support our students have been effective and recognized, particularly during this time of COVID-19.
- D57.** I am satisfied with the unit's response.
- GS57.** Congrats.
- R58.** Areas for improvement were also identified with many of the issues expressed demonstrating a lack of clear policy and procedures and/or lack of adequate written documentation on these matters. There seemed to be indication that some of these policies fall within Graduate Studies but also Program policies and procedures were also not clearly established. The discrepancies found also seemed to indicate that depending on who the supervisor was, students were given differing direction/information, creating perceived inequities within the program and impacting the quality of supervision. There appeared to be some disconnect between faculty core to the program and supervisors from outside the program in terms of shared knowledge and expectations. Supervisors themselves expressed this lack of capacity while administration noted that there is great capacity.

Some examples of how this impacts student included selection of their committee members. One student noted that they had no flexibility in who might be on their committee and that the supervisor had complete authority. While this clearly is not a policy, these circumstances can be taken up by students as policy given the authority figure making such a statement. If clear written policy was shared with students about how committee members are selected it would be useful for students to know what is policy and what is practice from a faculty member's perspective.

While there are only five core faculty members for the program, the MA/MSc also draws on 68 affiliated faculty members across the university who are qualified to supervise. However, this should not be interpreted as adequate to support growth because it was noted that there is limited supervisory capacity with often the same faculty members supervising many students.

[Therefore it is recommended that] clearly articulated policies from the Office of the Dean of Graduate Studies should align with policies within the School. In this way, there would be less confusion for students when supervisors or committee members come from outside the SRNH.

- P58.** With regard to Faculty of Graduate Studies policies, we agree with the reviewers and the lack of written policies housed in a central accessible location has been an ongoing challenge for the program, students and program faculty. We will communicate this feedback to the Dean of Graduate Studies.
- D58.** I will collaborate with the unit and the Dean of the Faculty of Graduate Studies to address this concern.
- GS58.** Agree with FOH Dean, adding that Registrar policies are also implicated in the solution.
- R59.** Supervisors (especially those from outside the SRNH) noted the need for better orientation and accessible on-line policies to enable them to support students' progression and success through the program.

- P59.** All program faculty are provided access to the program Google Drive folder within which can be found all program policies (all of which are listed in the Student Handbook), and all required forms and students resources. We agree with the reviewers that we can do a better job to orient new supervisory faculty and we will endeavour to do so and examine the feasibility of potentially offering an orientation to those interested.
- D59.** I am satisfied with the unit's response.
- GS59.** No additional comment.
- R60.** **The past review expressed a need to support Program Coordinators and hiring of additional core faculty to replace retired faculty members. The resources to support the Program Coordinators included course release. This Review Team also noted there will be a need to replace faculty who may be retiring soon, and that these replacements must be aligned with strategic program outcomes, especially in the area of Indigeneity.**
- R60.** Please see Responses #29 & #30
- D60.** See responses #29 and #30. I would add that the program coordinator is already provided 3 cr within their workload.
- GS60.** Agree with FOH Dean.
- R61.** **Previously, the Program reported to two Deans. This appears to have been resolved. However, there is still confusion about reporting to the Dean of Health and also aligning with policies under the purview of the Dean of Graduate Studies.**
- P61.** We had difficulty in understanding the basis of this comment. From the program perspective, there is no ambiguity regarding policy. The program reports to the Dean of Health and follows Graduate Studies policies as established.
- D61.** I agree with the unit's response.
- GS61.** I agree with the unit's response.
- R62.** **There is a need for more content covering Indigenous methodologies and community-based research.**
- P62.** Please see Response #7
- D62.** See response #7
- GS62.** I disagree with the unit response, see #2 and #7.
- R63.** **Policies and procedures from Grad Studies need to be documented and clarified so that they can be consistently applied and clear and available policies and procedures within the school, above and beyond the student handbook are needed to ensure students receive equal opportunity. Some of the policies requiring focus included the GTA and OGS funding policies, ability to team teach, ability to take courses outside of the school and/or university, and student input in selecting committee members.**
- P63.** Please see Responses #22, #24, #32, #47.

Action: We will encourage Graduate Studies to document institutional policies. Our program-specific policies are laid out in our Student Handbook (See Self-Study Appendix).

- D63.** See responses #22, 24, 32 and 47. I will collaborate with the unit and with the Dean of the Faculty of Graduate Studies to achieve this objective.
- GS63.** Agree with collaboration.
- R64.** **It is recommended that communication be improved between faculty within the School and faculty supervisors from other parts of the campus to ensure all faculty involved in the Program are aware of policies and procedures that impact student success.**
- P64.** Please see Responses #58 & #59.
- D64.** See responses #58 and 59
- GS64.** No additional comment.
- R65.** **There is a recognized need for a student navigator, a role that the current Administrative Assistant currently fulfils. If this is not part of her formal job description perhaps Human Resources can ensure a proper grading, inclusion and remuneration for this type of work.**
- P65.** A full-time Administrative Assistant is a critical requirement to support our students, faculty members and programs. We are currently the only unit in the faculty of Health with less than 1.0 FTE. Please see Response #30.
- D65.** See response #30.
- GS65.** The unit does not seem to grasp the range of institutional admin support beyond the FOE [FOH?]; I refer the unit to the LU budget process.
- R66.** **It is recommended that the School undergo a comprehensive consultation process to determine the demand, needs and resources required for a course-based Masters program**
- P66.** Our plan was to embark on a joint curriculum review of the Masters and PhD programs following the IQAP Review. We will now embark on that process
- Please see Responses #15, #18 & #39.
- D66:** I am satisfied with the unit's response.
- GS67.** Good journey.
- R67.** **The Library requires further resources, specifically a data and/or health librarian to serve the School. It is recommended that the Library invest in subscriptions that will increase the capacity to serve remote learners, including HathiTrust, other databases and other electronic resources. This will also be important to support flexible delivery options.**
- P67.** Our students have access to a wide variety of resource materials. Access to the HathiTrust has recently been added. Please see Responses #7, #42, & #45.
- D67.** I am satisfied with the unit's response. It is also worth noting that library services were designated as 'non-essential' services during this period of fiscal challenges, which further complicates the ability of the library to maintain the level of resources required to support

graduate programs. I am hopeful that this decision will be reverted because library services are clearly 'essential' to ensure the mission of all academic programs.

GS37. No additional comment.

R68. **It is recommended that the School invest in print and e-resources to be housed at the School which will enhance the Indigenous content of courses and be made available for student use followed by researchers within the school.**

P68. SRNH has a physical library within the School that contains such materials, as well as electronic resources in Google drive. Unfortunately, there was no time to showcase these resources during their virtual tour of the building due to COVID 19.

D68. I am satisfied with the unit's response.

GS68. No additional comment.

R69. **The Program Advisory Committee could benefit from including further community stakeholders, particularly connection to the Indigenous community. For instance, involving the LU Native Education Council or surrounding First Nations communities and Metis Councils might assist the Program in ensuring curriculum is adequately addressing the rural and northern Indigenous communities. This should not fall to one Indigenous colleague.**

P69. Please see Responses #2, #5, #6, #7, #25.

It is important to clarify that this program is focused on interdisciplinary health and does not have outcomes specifically related to Indigenous content. We will also consult with the PhD review team as it addresses the Actions that have been identified with regard to Indigenous content, faculty support and cultural safety.

D69. I am satisfied with the unit's response.

GS69. I am not fully satisfied with the unit's response, see #2 and #7.

R70. **In order to address the needs of incoming international students, the university and Program should explore the differences between using International Credential Assessment Service or World Education Services to ensure students who should gain entry into the doctoral program do not have to take a lateral or lower degree than what they have attained in another country.**

P70. Please see Response #22.

Action: We will consider asking the Admissions Office to provide ICAS grading in the future.

D70. I am satisfied with the unit's response.

GS70. Admissions criteria are the unit's purview within the context of sector standards and the collective governance process.

R71. **There is an opportunity to expand the MA/MSc programs given the focus on interdisciplinary health and the strengths of the School in relation to rural and remote health. In this respect, it will be important to consider alternative forms of program delivery to enable access to these graduate programs for interested students in rural and remote communities who are unable to relocate for on-campus courses. This will also need to include alternative modes of delivery**

for electives as well as thesis defenses. In addition, any expansion of the program will need to be adequately resourced in terms of student support, faculty, library resources etc.

P71. Please see Responses #13, #14, #37.

We are committed to exploring alternative forms of program delivery.

D71. See responses #13, 14 and 37.

GS71. No additional comment.

R72. **Given LU's commitment to Indigeneity and strategic goal to lead the process of reconciliation through transformative postsecondary education and research, the MA/MSc programs need to be reviewed to ensure these programs reflect these commitments in program learning outcomes, course content and approaches to teaching and learning. We heard from Indigenous students that they are exhausted from being called upon having their knowledge harvested, particularly without compensation. Alternatively, we heard from members of the program that, while it is not an expectation of students to identify, when they do share it is seen as a knowledge exchange. The incongruence between the student view of knowledge being harvested and the Program's view of knowledge exchange needs to be seriously explored. It is recommended that Indigenous leaders at LU assist with this discussion**

P72. We would like to clarify that the Indigenous curriculum at the graduate level is provided effectively by our sister program in Indigenous Relations (MIR). We do not wish to overlap with this program. Furthermore, we have never asked our Indigenous students to teach in our program, and to do so would be inappropriate.

Please see Responses #2, #6, #7, #16, #25, #26, #35.

D72. See responses #2, 6, 7, 16, 25, 26 and 35.

GS72. See #2 and #7; interdisciplinary and Indigenous content are not mutually exclusive, nor proprietary to a single program.

R73. **The research courses in the Master's and PhD must be carefully reviewed for laddering, and to ensure they provide the necessary knowledge and skills to meet program objectives as well as current trends in health research (e.g., inclusion of sex and gender, implementation science, community-based research, Indigenous methods, integrated knowledge translation).**

P73. We will undertake a coordinated curriculum review with this in mind.

Please see Responses #4, #5, #7, #36.

D73. See responses #4, 5, 7, and 36.

GS73. No additional comment.

R74. **It is recommended that significant focus be placed on the lack of offering the Francophone MA/MSc program for many years while still being noted as a potential option (e.g., on the LU website). The Francophone option has not been offered for quite some time, even before the last review in 2012. There should be an admission that this option is not functional at this time and either remove it from the program information or reimagine it as a broader collaboration with other French Masters programs in other faculties. This might be a return to the original DEVE model from which the Masters programs emerged, where MA/MSc in Psychologie, MA**

Sociologie, MA Humanities, etc - all the French Masters programs might be combined into one, like the Arts PhD in Human Studies and Interdisciplinarity or the MA in Humanities.

P74. Please see Response #3.

We appreciate the attention given by the reviewers to the Francophone stream of the program. Given the history of the program and the challenges that have been faced to date, the reviewers have proposed that serious attention be given to the French program. We agree that the French INDH MA/MSc are “are not functional at this time”.

Action: We request that the Dean’s support our request for a program change that would list these programs as bilingual on both the English and French website, and that bilingual be defined as offering core courses in English with all research components being possible in English or French, provided the thesis committee is capable of supporting the student in both languages.

Alternatively, if the University wishes to preserve these French programs, we request that they commit the resources necessary to revive the program.

D74. I will work with the unit, the Dean of Graduate Studies and the AVP Academic and francophone affairs to address this concern. The use of the term ‘bilingual’ can be interpreted by some sectors as programs being offered completely in French and completely in English. One possibility is to indicate that students can complete up to X% of credits in French. This would allow the School to manage expectations of prospective students that wish to complete the program in French.

GS74. No additional comment.

R75. Further to the recommendation above, perhaps consultation exploring the feasibility and needs of the Francophone population could prove beneficial for other faculties including Arts, Education, Science, and Management. We recommend that the Dean of Health and the Dean of Graduate Studies work with the Associate Vice-President, Francophone to initiate these consultations.

The reviewers recommend that the Dean of Health, Dean of Graduate Studies and the Associate Vice-President, Francophone, jointly undertake a consultation exploring the educational needs of the Francophone population.

P75. We will convey the recommendation of the reviewers to the Dean of Health for further action within the context of concerns expressed earlier in the report regarding the viability of offering the Master’s program for francophone students (Please see Responses #74).

D75. See response #74.

GS75. No additional comment.

ACAPLAN'S RESPONSE

The reader of the last section will observe some significant overlap in several of the recommendations. Accordingly, ACAPLAN proposes to sort the comments into the following categories and then develop recommendations based on these categories:

Recommendations about:

1. Program Identity
2. Marketing
3. Admissions
4. Curriculum
5. Student Issues
6. Faculty and Staff Issues
7. Library Support
8. Planning

In addition, ACAPLAN will make a recommendation about the future review of this program.

Before setting out its recommendations, ACAPLAN will note the recommendations it does not support, with reasons.

1. PROGRAM IDENTITY

R26. Some of the big data course content could include more detail about northern regions providing an opportunity for creation of new knowledge.

Reason: The recommendation pertaining to big data course content was apparently made by reviewers about the PhD.

R34. Revise program structure and timelines to ensure students have opportunities to engage rural and Indigenous communities and stakeholders throughout the research process and develop respectful relationships with communities and sustain them.

Reason: This recommendation refers to the PhD program comprehensive exam.

R72. Given LU's commitment to Indigeneity and strategic goal to lead the process of reconciliation through transformative postsecondary education and research, the MA/MSc programs need to be reviewed to ensure these programs reflect these commitments in program learning outcomes, course content and approaches to teaching and learning.

Reason: This program has a sister program, the Master of Indigenous Relations and the two programs must not overlap. The Interdisciplinary Health program currently includes some Indigenous content and is looking forward to increasing such content during its upcoming curriculum review as is recommended in R72.

4. CURRICULUM

R4. In reviewing the syllabi included in the self-study materials, it was sometimes difficult to see how these program outcomes were supported by course learning outcomes, since in some cases learning outcomes were missing. In the self-study, it is noted that the LU Centre for Academic Excellence provided assistance in updating program learning outcomes and course objectives in the fall of 2019 so they are not yet reflected in course outlines but will be revised for the 2020-2021 academic year. Nevertheless, we were not told of any substantive changes to program learning outcomes.

Reason: The linkage between course learning outcomes and program learning outcomes was presented clearly in the first column of Table 1 in the self-study and again in Table A1 in the Appendix. These tables include revisions recommended by the CAE in the fall of 2019 and were not reflected in the copies of the syllabi included in the review, since the syllabi were gathered during the summer of 2019 and thus were from the previous year (e.g., Fall 2018). The program is committed to a detailed Curriculum Review and Mapping exercise this year.

R24. There was no consensus about the availability of electives. While some suggested there were a wide range of electives available in other programs across the campus, others indicated that it was not always clear what courses were available as electives and perceived there were limited options.

Reason: Students have been provided with a list of 11 potential electives each year, both by email and on the shared Google drive. Additionally, the Student Handbook indicates that they are welcome to take any 5000 or 6000 level courses from across the university. Furthermore, a broader analysis of graduate courses tagged to units with the Faculty of Health and listed in the database will be conducted before the end of this academic year. This list will be provided to all School Directors to explore the possibility of shared graduate level courses across programs where elective courses are sought.

R33. Community stakeholders who view the programs as a valuable asset to Sudbury and the region as a whole because of the urgent need to develop health research capacity in collaborating with communities to understand northern realities and identify solutions to priority health issues. LU's aspirations and the School's commitment related to Indigeneity are commendable.

[The program should] strengthen efforts to enhance support for community-based research].

Reason: Regarding support for community-based research, mixed-methods and community-based approaches are most definitely covered in the current course structures, although not as "in-depth" as reviewers were perhaps considering. Many Masters' students do not conduct community-based research so a large focus in this area would come at the expense of other research approaches and thus ignore the needs of a significant number, if not most students in the program. Covering all aspects of research methods in-depth is near impossible without greatly increasing the number of required courses.

R55. Establish a more formal consultation process at regular intervals to ask stakeholders about gaps in research and their needs for research. For example, some identified workforce needs might include gerontology (as indicated by the stakeholder from Finlandia) and more capacity in public health (post-COVID). Another identified workforce need might be fluently bilingual/Francophone professionals in various health fields.

Reason: The program does not have the capacity to respond to local needs in this way. Its worry is that this would set expectations in the community that the program could not fulfil. Master's students have their own research interests and although many do work with local stakeholders, the program could not guarantee these stakeholders that there would always be students interested in research related to their services and activities. [It would support some local stakeholders through faculty research projects and it could explore potential independent study or placement options that are available for students locally.]

5. STUDENT ISSUES

R51. Enhance the sharing of information regarding seed grants and other forms of funding.

Reason: The Faculty of Graduate Studies and the Office of Research electronically communicate funding information to students. The Office of Research also maintains directories of funding sources that can be consulted by both faculty and students. The program also notifies students directly regarding funding availability, such as OGS. The program will examine its current communication of funding opportunities as part of the curriculum review initiative.

6. FACULTY AND STAFF STUDENT ISSUES

R30. A core strength of the Program is the very effective administrative assistant who serves faculty and students and operates in a role as a sort of "navigator" to help students find their way through procedures, questions and problem solving. As we prepared this report, however, we learned that the person who had been in this role has taken another position in the university.

[Therefore, we recommend that Laurentian] replace the administrative assistant with a full-time permanent person who can fulfill the administrative tasks and serve as an effective navigator for students, as the previous occupant of this role had been doing.

Reason: The change from a 1.0 FTE administrative assistant to a 0.5 FTE is a permanent change at least for the foreseeable future. As the university migrates to an activity-based budget model it may be possible to revisit this level of administrative support

R38. Hire a Student Navigator will help enhance student engagement, supervisor relationships, as well as help with funding, course questions, Zotero and referencing assistance and contributing to up-to-date social media connections. In addition, creating student focused training from a student perspective would enhance the Program.

Reason: The graduate program coordinator has the responsibility to guide students. The unit may also consider creating a framework for more formal peer-to-peer student support.

7. LIBRARY SUPPORT

R42. Expand the reading materials available in the main office to include copies of required textbooks (print and e-books) for students to borrow if funds are limited or unavailable from the library.

Reason: The students have access to all required texts in the office library. In addition, students have access to an extensive library donated by the Centre for Rural and Northern Health Research. The librarian for the Faculty of Health is also able to make suggestions on where to

retrieve some resources. Furthermore, students in all graduate programs across Canada are typically required to purchase their own personal copies of resource materials if they so desire.

R50. Recommendation: Enhance digital resources in the library with investment in databases and subscriptions such as the “HathiTrust.”

Reason: Laurentian is now a member of the “HathiTrust” partnership. The library’s current budget has been cut over \$500,000—or 25%--in the last four years does not allow for the purchase of new digital material, other than the occasional book.

R68. It is recommended that the School invest in print and e-resources to be housed at the School which will enhance the Indigenous content of courses and be made available for student use followed by researchers within the school.

Reason: SRNH has a physical library within the School that contains such materials, as well as electronic resources in Google drive. Unfortunately, there was no time to showcase these resources during their virtual tour of the building due to COVID 19.

8. PLANNING

R61. There is still confusion about reporting to the Dean of Health and also aligning with policies under the purview of the Dean of Graduate Studies.

Reason: From the program perspective, there is no ambiguity regarding policy. The program reports to the Dean of Health and follows Graduate Studies policies as established.

**LAURENTIAN QUALITY ASSURANCE IMPLEMENTATION PLAN FOR THE MASTERS PROGRAMS
In
INTERDISCIPLINARY HEALTH**

1. PROGRAM IDENTIY

Recommendation	Proposed Follow-up	Responsibility for Leading Follow-up	Timeline
1. Clarify that program focuses on interdisciplinary health rather than rural and northern health	Include the program advisory committee’s discussions on program identity as part of the curriculum review and mapping exercise that will be undertaken	Program Coordinator	December 2021

2. MARKETING

Recommendation	Proposed Follow-up	Responsibility for Leading Follow-up	Timeline
1. Provide resources to expand and improve program marketing	i. Create virtual graduate program fair for the Faculty of Health targeted	Dean of Health with Liaison and individual program coordinators,	December 2021

strategies to take full advantage of the opportunity to grow the program.	especially at students in third and fourth years ii. Repeat for alumni that may be seeking to further their education at the graduate level	Graduate Studies and Alumni office as relevant	
2. Track and promote alumni success stories as means of marketing the program	Initiate discussions with Alumni Office	Program Coordinator	September 2021
3. Keep website current	Follow up with administrative assistant	Program Coordinator	Ongoing
4. Consider promoting the graduate program via social media.	Follow up with LU marketing unit	Dean of Health with Dean of Graduate Studies	June 2021

3. ADMISSIONS

Recommendation	Proposed Follow-up	Responsibility for Leading Follow-up	Timeline
1. Explore the implications of using WES vs ICAS in admission assessments.	Discuss with Graduate Studies—policy should affect all GS programs	Program Coordinator	June 2021
2. Explore ways to improve financial support for incoming students to increase competitiveness with programs in other universities.	Discuss possibilities with Graduate Studies, bearing in mind that members of program also share some responsibility	Program Coordinator	June 2021 and ongoing

4. CURRICULUM

Recommendation	Proposed Follow-up	Responsibility for Leading Follow-up	Timeline
1. Consider including some introductory concepts of rural and northern health as expanding and complementing the curriculum rather than viewing the suggestion as a narrowing of the program's focus.	Include in curriculum review	Program Coordinator	September 2021
2. Embed more	i. As part of curriculum	Program Coordinator	September 2021

<p>Indigenous content in program</p>	<p>review, consult Master's program in Indigenous Relations for possible synergies.</p> <p>ii) Although the program does not explicitly have an Indigenous focus, as part of the review, it should consider assessing course content and readings related to Indigenous perspectives on health.</p>		
<p>3. Revise research courses with a view to:</p> <p>i) clarifying laddering between the master's and PhD level courses,</p> <p>ii) include approaches for integration of sex and gender in health research across all pillars of health research, and iii) include models / approaches to knowledge translation (e.g., integrated KT) to support evidence-based changes / improvements in policies and practices to enhance health and healthcare that community-based stakeholders were looking for.</p>	<p>i) Undertake a coordinated curriculum review and mapping exercise in conjunction with the IRNH PhD program. This process will include all core and elective courses in our programs and will ensure that sex and gender are considered.</p> <p>ii) Investigate the availability of on-line modules offered for researchers, which the students will be required to complete as part of the current course structure, but may do so at no additional costs to either the student or the program, and may complete the learning at their own pace within the first term of the program. In addition, we will evaluate how this gap may be addressed during the curriculum mapping exercise.</p> <p>iii) Consider knowledge translation options both on-line and through our curriculum review.</p>	<p>Program Coordinator</p>	<p>June 2022</p>

5. STUDENT ISSUES

Recommendation	Proposed Follow-up	Responsibility for Leading Follow-up	Timeline
<p>1. Faculty/course instructors must provide instruction on culturally appropriate methodologies and epistemologies without relying on Indigenous students to provide this instruction to their peers</p>	<p>i) Contact EHDRO and the Dean's office as necessary to (1) conduct focus group with all SRNH students (both INDH and IRNH) and (2) conduct a second focus group with Indigenous SRNH students. This will allow EDI to confidentially communicate student perspectives regarding how the program may improve the cultural safety, equity, and diversity of our learning environment.</p> <p>ii) Ensure participation in the cultural safety training that will be provided for all SRNH core faculty, Master's teaching faculty, and Master's students.</p>	<p>Program Coordinator</p>	<p>June 2021 and ongoing</p>
<p>2. Examine the issue of the current tuition structure and its financial implications for part-time students (versus a program fee structure when courses are finished, and students are completing their theses pay a continuation fee).</p>	<p>i. Consider the practicality of a "pay by course" option</p> <p>ii. Discuss support for part-time students with Development Office with a view to establishing targeted scholarships</p>	<p>Dean of Health with Dean GS and Executive Team</p>	<p>June 2021</p>
<p>3. Improve course scheduling to better accommodate part-time students and improve networking</p>	<p>i. Examine the potential of offering some courses in evenings (e.g., such as the thesis course (INDH 5000 and INDH 5005 –but also potentially others).</p> <p>ii. Meet with the part-time students to get further feedback on how the</p>	<p>Program Coordinator</p>	<p>June 2022</p>

	program may be able to address this issue		
4. Better accommodate students studying in Indigenous communities who often take more time to progress through the program given the requirement to work with community.	<p>i. As part of the curriculum mapping and review process, current time frames for full and part-time students will be examined with respect to some of the challenges that are part of community-based involvement.</p> <p>ii. Make the case that there is a need for special funds to support students conducting rural and northern health research.</p>	Program Coordinator	September 2021
5. Graduate Studies must develop clearly articulated policies, including ones for GTAs, that are accessible in written form for reference by students, faculty, and staff.	Consult Dean of GS and work out plan of action	Program Coordinator with Dean GS	September 2021

6. FACULTY AND STAFF ISSUES

Recommendation	Proposed Follow-up	Responsibility for Leading Follow-up	Timeline
1. Fill anticipated vacancies due to retirements and expand teaching / supervision capacity in the future with tenure-track faculty (vs sessional hires).	Prepare case for Dean of Health	Program Coordinator	As required
2. Improve orientation and create accessible on-line policies for supervisors outside the unit to enable them to support students' progression and success	Consult supervisors as to specific needs and develop plan to meet them	Program Coordinator	June 2021 and Ongoing

through the program.			
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7. LIBRARY SUPPORT

Recommendation	Proposed Follow-up	Responsibility for Leading Follow-up	Timeline
1. Hire a data specialist librarian to support researchers in this program.	Work with University Librarian	Program Coordinator as well as Dean of Health and GS	June 2021 and ongoing

8. PLANNING

Recommendation	Proposed Follow-up	Responsibility for Leading Follow-up	Timeline
1. Assess feasibility of reviving francophone side of program	<p>i. Unit should conduct a feasibility study as well as a sector needs assessment, to ascertain both field demands and potential government support; Hearst is developing a Diplôme d'études supérieures en psychothérapie; the UOF will also be a potential bassin de recrutement, surtout que leurs Bacs sont tous interdisciplinaires</p> <p>ii. In the meantime, consider listing these programs as bilingual on both the English and French website, and that bilingual be defined as offering core courses in English with all research components being possible in English or French, provided the thesis committee is capable of supporting the student in both languages.</p>	Program Coordinator working with Deans of Health and GS as well as Associate VP Academic and Francophone Affairs	Start June 2021
2. Incorporate alternate modes of delivery on an ongoing basis, even after the pandemic	As part of the curriculum review, discuss the potential of expanding the "regular" program delivery	Program Coordinator	June 2022

<p>restrictions are lifted, providing access to students in remote areas using flexible means so that even those with limitations on Wi-Fi, for example, can participate fully.</p>	<p>(i.e., delivery not determined by the pandemic) to include synchronous remote delivery or a hybrid of synchronous and in-person delivery (potentially including one-week intensives or delivery in time blocks).</p>		
<p>3. Consider offering a course-based master's program in interdisciplinary health.</p>	<p>i. Conduct a feasibility study to gauge potential interest in this type of program prior to allocating resources.</p> <p>ii) Ensure that community stakeholders are consulted</p> <p>iii) Conduct a Faculty wide graduate course audit to determine what courses are currently in the database and could potentially be incorporated into a course-based masters.</p>	<p>Program Coordinator with Dean of Health</p>	<p>June 2022</p>

The Dean of Health shall be responsible for monitoring the implementation plan. The details of progress made shall be presented in the Dean's Annual Report and filed with the Vice-President Academic and Provost. The Executive Summary and the monitoring reports will be posted on Laurentian University's web site.

CONCLUSION

The Masters' programs in Interdisciplinary Health are approved to continue and it will be reviewed in the fall of 2028.

Recommendation to the VPA: At that time, the programs should be evaluated separately and distinctly from the PhD in Rural and Northern Health, with a different set of reviewers.