

**REPORT OF THE ACADEMIC PLANNING COMMITTEE
TO THE REGULAR May 2021 SENATE MEETING**

FOR DISCUSSION

**QUALITY ASSURANCE - CYCLICAL PROGRAM REVIEW OF LAURENTIAN UNIVERSITY'S
INTERDISCIPLINARY PhD in RURAL and NORTHERN HEALTH
FINAL ASSESSMENT REPORT & IMPLEMENTATION PLAN, May 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
INTERDISCIPLINARY PhD in RURAL and NORTHERN HEALTH**

Laurentian University's Interdisciplinary PhD In Rural and Northern Health is housed in the Faculty of Health's School of Rural and Northern Health (SRNH).

The PhD program is offered in English and has four core courses: Theory and Framework in Health (RNH-6106); Health Policy Analysis (IRNH-6107); Research Seminar I (IRNH-6056); and Research Seminar II (IRNH-6057). Each student also completes a comprehensive exam midway through the program and a thesis; guided by a supervisor and a thesis committee.

This PhD program was founded by faculty members from the Schools of Nursing, Midwifery, Social Work (which was subsequently divided into the Schools of Social Work and Indigenous Social Work), Human Kinetics, and the Northern Ontario School of Medicine (NOSM). The initial proposal for the IRNH PhD Program was submitted to the Ontario Council of Graduate Studies in August 2004, revisions were submitted early in 2006, and it was accredited in 2006. SRNH was formed in 2007 to provide a home for the core faculty members who support the program.

The first cohort of doctoral students entered the program in 2006. As of September 2014, seven students had graduated from the program, and an additional 19 doctoral students were active in the program. As of September 2019, 26 students have graduated from the program, and an additional 32 doctoral students were active in the program. The program offers innovative, interdisciplinary, doctoral-level education and thesis supervision that focuses on health services and health policy research in northern and rural communities. It is supported by a core faculty of 5 members. While the language of instruction for the program is English, students may complete their comprehensive examinations and all thesis research in either English or French.

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:

- Summary of Admissions for 2020
- External Reviewer report INDH 2012
- External Review report IRNH 2013
- INDH Student Thesis Titles
- IRNH Comprehensive Examination Questions (sample of recent comprehensive questions not the entire bank of possible questions)
- IRNH Student Thesis Titles
- Student Publications List

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 Lavalley, 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 (History) 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 MA/MSc in Interdisciplinary Health they were simultaneously assessing, made a remarkable 73 comments/recommendations, two less than were made about the Masters in Interdisciplinary Health conducted by the same reviewers. 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. Lacey 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 COMMENTS/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 PhD in Rural and Northern Health is ... well aligned to LU's mission and strategic goals.

P1. We were pleased to see that the reviewers felt IRNH is well aligned with Laurentian's mission and strategic goals. The program makes significant effort to maintain interdisciplinarity as an integral component of the program. We will continue to do so to the best of our ability. We will continue to work to support students who conduct research with rural and northern communities and maintain strong relationships with local research partners and organizations.

D1. I am satisfied with unit's response.

GS1. I am satisfied with unit's response.

R2. With respect to LU goals related to Indigeneity, the PhD in Rural and Northern Health has been successful in attracting Indigenous students. However, the program learning outcome related to the "capacity to integrate Indigenous perspectives, community engagement and integration of strength-based approaches in health research" is not part of any of the required courses or these course learning outcomes ... [In addition] Evident in our conversations with faculty and students ... was a reliance on self-identifying Indigenous students to share their experiences and to teach other students in order to fulfill this learning outcome. Often, this was done without considering the burden this placed on students and without financial compensation that would typically be provided for others carrying out similar roles

P2. The reviewers focused on Indigenous content in several places throughout their report. At this point, we will provide some context that was also shared with the reviewers in our self-study and during the virtual site visit. The Program Learning Outcome (PLO) and program core competency to build "capacity to integrate Indigenous perspectives, community engagement and integration of strength-based approaches in health research" was very recently added to the program (May 2019). This addition came in response to guidance from the Laurentian University Native Education Council. The advice came as part of the consultation process that was conducted by Dr. Jennifer Walker regarding the potential development of a new field of study in IRNH. This consultation was initiated in response to recommendations from the previous IRNH IQAP review in 2014. Dr. Walker's Indigenous consultation report was finalized in October 2019 and was included in our self-study appendix. Although the PLO was added in 2019, we were advised by the Provost not to make significant program changes to our approved course outcomes in 2019, and rather to use the IQAP review as an opportunity to receive guidance regarding how to best structure our program to meet this new PLO and core competency. The reviewers' assessment has allowed us to do so....

We would also like to take this opportunity to clarify, as we did during the site visit, that while our Indigenous students sometimes choose to share cultural perspectives in the classroom, they

are not responsible for “teach[ing] other students in order to fulfill this learning outcome”. Please see responses #15 and #72 for additional details regarding these reviewer comments.

- D2.** I am satisfied with the unit’s response and will collaborate with and support the unit to implement the various program changes.
- GS2.** No comment.
- R3.** **Although a new program outcome and “core competency” (“Capacity to integrate Indigenous perspectives, community engagement and integration of strength-based approach in health research”) was added in May 2019, it is not reflected in the core courses. In support of this new program outcome, the School has hired an Indigenous faculty member and added an Indigenous perspectives course as an elective.**
- P3.** We agree with the reviewers that the new PLO and core competency is not reflected in the learning outcomes of the core courses as explained in Response #2 (previously). Our plan to address this gap is twofold (1) we will conduct a curriculum review with all IRNH courses – core and elective – to ensure that all 5 PLOs are adequately and effectively addressed in both course content and required readings, and (2) we will request approval from CELP to make IRNH 6306 Indigenous Perspectives in Health and Wellness a required course for all IRNH students and review the course learning outcomes to ensure the course covers the necessary breadth and depth (e.g., consider the addition of Indigenous research methods, theoretical research perspectives and touch on diversity among First Nations, Inuit and Métis populations). The curriculum review will be coordinated with the Master’s in Interdisciplinary Health (INDH) Program (Please see Response #4).
- D3.** I am satisfied with the unit’s response and will collaborate with and support the unit to implement the various program changes.
- GS3.** I am satisfied with unit’s response.
- R4.** **The leveling of the research methods courses between the masters and doctoral program is not clear based on the information provided in the self-study (INDH 5206 and IRNH 6056 [Part 1]). We were told that the master’s level course is at the “intermediate” level. However, it is not clear what is meant by this because the course syllabi look very similar - each providing an overview of research methods and requiring preparation of a proposal.**
- P4.** We agree with the reviewers that the syllabi appear similar – although the delivered content is quite different. This will be carefully considered during the joint curriculum review (see Response #3 above) to examine how our Master’s and PhD programs may improve the curriculum structure. We aim (1) to ensure the progressive laddering in learning from the master’s to the doctoral level, (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. We will also consider the course names and descriptions at this time.
- D4.** I am satisfied with the unit’s response.
- GS4.** I am satisfied with unit’s response.

- R5.** We did not see attention to integration of sex and gender in health research in the research courses. Based on current directions in health research and current requirements to address sex and gender in health research by many funding agencies in Canada, as well as an increasing number of peer-reviewed journals that have adopted the SAGER guidelines¹, this topic should be considered as an essential element in the research courses, and a requirement in thesis research.
- P5.** We agree with the reviewers that IRNH currently does not have an explicit module or session dedicated to sex and gender in health research. However, aspects of sex and gender are already woven into our courses. Given the interdisciplinary nature of the program, it is a struggle to include the vast breadth of issues, which we would like to cover, without requiring a massive course component for all students. To address this perceived gap we will investigate the availability of on-line modules offered for researchers (e.g., CIHR Sex and Gender Module - <https://cihr-irsc.gc.ca/e/49347.html>) which the students will be required to complete as part of the current course structure. Students may access these training resources 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 perceived gap may be further addressed during the curriculum review.
- D5.** I am satisfied with the unit's response. Furthermore, it may be possible to tap into existing expertise at Laurentian and at our Federated partners to integrate guest lectures related to Sex and Gender within existing courses.
- GS5.** I am satisfied with unit's response.
- R6.** **Despite the addition of a core program objective related to Indigenous health, there appears to be very limited attention to Indigenous perspectives in the core courses.... [To be sure] while students noted there was some integration of Indigenous perspectives in core courses, they emphasized the need to make the Indigenous Health and Wellbeing course a core course, in addition to more frequent or better offering of electives.**
- P6.** Please see Response #3 above.

We agree that Indigenous theoretical frameworks should be included in the IRNH 6106 course and they are consistently included to varying degrees (e.g., Indigenous Worldview, Holistic Theory, Two-Eyed Seeing as a guiding principle; social determinants of Indigenous health); however, these need to be explicitly listed on the course syllabi, with provision additional readings and depth.

We also intend to incorporate Indigenous theoretical perspectives into the IRNH 6306 course, which will be a required course for all PhD students. We would like to note that several of the courses do have required readings with an Indigenous focus. In addition to the topics covered in IRNH 6106 outlined above, required readings from other IRNH core course include the Truth and Reconciliation Commission of Canada Final Report and the United Nations Declaration on the Rights of Indigenous Peoples (IRNH 6107).

¹ See: Sex and Gender Equity in Research: Rationale for the SAGER Guidelines and Recommended Use: <https://researchintegrityjournal.biomedcentral.com/articles/10.1186/s41073-016-0007-6>

In addition, IRNH 6056 includes Indigenous examples in the course outline, IRNH 6057 includes Research is Ceremony. Indigenous Research Methods and Decolonizing Methodologies: Research and Indigenous Peoples on the list of supplemental texts, IRNH 6057 and IRNH 6107 both have at least one full session on Indigenous Health Research and Indigenous Health Policy respectively, and IRNH 6306 is entirely focused on Indigenous health and wellness. We are sorry that the reviewers missed this in our submitted materials.

Regarding electives, we agree with the reviewers and will (1) work with the Dean of the Faculty of Health to incorporate electives into annual workloads and course offerings on a cyclical basis, and (2) provide students with an annual list of graduate level electives available to them across the Laurentian campus.

- D6.** I am satisfied with the unit's response. I would add that a Faculty-wide graduate course audit is currently underway to determine what courses are currently in the database and which ones could potentially be incorporated as electives.
- GS6.** The unit's response to Indigenous research methods – as outlined here – seems cursory. LU Indigenous research output also seemed absent from the response; I would have expected the response to include a more precise reference list of what was missed or, alternatively, that the unit would take up the recommendations for required readings in a more robust manner.
- R7.** **The content regarding community-based approaches and methodology did not appear to be a strength of the research methods courses. There is concern that the core/required courses are tied to a binary about qualitative vs quantitative and may not reflect any in-depth training about mixed methods, community-based research or Indigenous knowledge as REQUIRED and foundational. There was a sense that this curriculum is sometimes available, depending on the makeup and timing of the particular cohort of students. In addition, the structure of the program may make it difficult to conduct research in a community engaged manner, unless previous relationships exist. Given the focus on rural health and location of the program, ensuring the program does not have systemic barriers to doing research with Indigenous communities should be further explored.**
- P7.** Please see response #3 above with respect to the inclusion of Indigenous knowledge in course content.

We do note that mixed-methods and community-based approaches are currently covered in the current course structures. We acknowledge that it is not easily identified in the course outlines and is not represented "in-depth". However, Cresswell's 2018 text entitled *Research Design: Qualitative, Quantitative, and Mixed Methods Approaches* is a core reading for several courses.

The balance of depth and breadth is one of the challenges faced by interdisciplinary programs. Without greatly increasing the number of required courses, an in-depth focus in this area would come at the expense of other research approaches and, thus, ignore the needs of a significant number, if not majority, of our students because many of the IRNH students do not conduct community-based research. As such, we attempt to address the breadth of research methodologies that are commonly used in rural and northern areas and require each student to dig deeper into those methods that are most applicable to their own research needs. We feel this offers the flexibility required for students who are conducting research across a diverse spectrum of disciplines and subject areas and one of the challenges faced by interdisciplinary

programs. As mentioned above in Responses #3 and #4, IRNH will undergo a curriculum review to evaluate all course content.

D7. I am satisfied with the unit's response. Additionally, more in depth knowledge about mixed-methods and community-based approaches could also be gleaned on a case-by-case basis via directed readings or independent study courses.

GS7. The unit's response is adequate.

R8. **The PhD program offers IRNH 6306 Perspectives on Indigenous Health and Wellness as an elective. We heard rave reviews about this course from both students and faculty. However, there were concerns about the demands being placed on one faculty member to meet the needs for inclusion of Indigenous perspectives in the PhD program (as well as the two master's programs).**

P8. We were pleased that the reviewers heard favourable reviews of IRNH 6306 Perspectives of Health and Wellness. In recent years, Dr. Jennifer Walker has taught this course as part of her annual workload. In addition, we are exceptionally fortunate to have involvement from Indigenous faculty across the Laurentian campus who contribute Indigenous content to our courses, supervise students and participate on student supervisory committees.

We agree with the reviewers that an additional faculty member capable of supporting an increase in Indigenous content would assist in the program meeting its PLO's and competencies and address the issue of overburdening one faculty member which were raised by the reviewers. Over the past several years, SRNH has made several requests for an additional faculty member and will continue to do so.

D8. I am satisfied with the unit's response. The request for additional resources is noted.

GS8. No comment.

R9. **A new process for comprehensive exams has been introduced. The program structure for the format of comprehensive exams was viewed as problematic. The examination includes two parts: 1) completion of comprehensive exam questions intended to assess the students' breadth of knowledge (to be completed between 8-16 months into full-time study) and 2) oral defense of proposal. A detailed timeline is outlined in the self-study document...**

However, the changes that have been introduced have created other problems. The Comprehensive Examination committee is the same for Part 1 and 2. This has created problems, especially with respect to the proposal defense. The Comprehensive Examination Committee is composed of: the thesis supervisor, an additional member from the Supervisory Committee, two Program Faculty members from outside the Supervisory Committee (ideally from different disciplines) and a Chair who votes in the event of a tie. While this is appropriate for Part 1 of the Comprehensive Examination, it is less appropriate for Part 2 the proposal defense. Since most (if not all) students have supervisory committees that include more than a supervisor and one committee member, *this means that there is potential for other members of the committee to be excluded from the proposal defense.*

[In addition] for some students, *the structure and rigid schedule of the Comprehensive Exam process does not accommodate the time needed to develop relationships with communities*

and engage stakeholders in priority setting and ensuring culturally-appropriate research approaches.

- P9.** We would like to correct the misunderstanding regarding the “potential for other members of the committee to be excluded from the proposal defense”. The supervisory committee plays a critical role in supporting the student to develop their proposal and must sign-off on the proposal before it is presented as part of the comprehensive exam. By adding faculty to the examination committee who are external to the supervisory committee, allows for a “peer-review” of the process to ensure that nothing has been overlooked prior to embarking on the thesis.

We agree with the reviewers that the timing of the comprehensive examination process needs to be re-examined at this time. The shortening of the comprehensive examination timelines came as a result of the first IQAP review and was a request from the Dean of Graduate Studies. Although we do agree that it is in the best interest of the students to go through the examination process as early as possible, those timelines are not rigid. We have had many student request extensions, and, in every case, those extensions have been granted to provide support and flexibility to our students as per their needs.

We will evaluate the timing of the comprehensive exam process during the curriculum review. Regardless of the revisions that may emerge from the curriculum review process, we will continue to provide students with the opportunity to request extensions/delays for both personal as well as research-related reasons.

- D9.** I am satisfied with the unit’s response.

- GS9.** I am satisfied with unit’s response.

- R10.** **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].**

We heard examples of a faculty member using campus spaces to engage students in learning about the land without leaving campus and inviting elders to class, thereby strengthening relationships with communities.

- P10.** We were pleased to see that despite the gaps identified in our Indigenous content, the reviewers acknowledge some of the ways in which our program draws on the expertise of Elders, strengthens relationships with communities and incorporates the importance of the land into learning.

- D10.** I am satisfied with the unit’s response.

- GS10.** I am satisfied with unit’s response.

- R11.** **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.

- P11.** We were pleased that the reviewers noted the favourable reflections offered by external organizations and feedback from the students regarding the value of assignments and creative evaluation. We will endeavour to build on these strengths and consider it in our curriculum review.
- D11.** I am satisfied with the unit's response.
- GS11.** No comment.
- R12.** **The PhD program has been primarily delivered as a face-to-face on campus program, with the only exception to that being students completing their thesis research may opt to complete their program requirements at distance. In the self-study, the School re-stated its commitment to continuing this form of delivery despite recognizing that there is a need for graduate education in northern communities.**

However, many faculty members reported they have changed their minds since COVID imposed alternate delivery. They were surprised by the level of student engagement in courses and recognized that some students did better with remote interactions. At the same time, some students struggled with technology limitations due to remote or rural settings and band width (e.g., Manitoulin) and for others there were challenges in obtaining access to campus resources (e.g., library resources not in electronic form).

As a result, while faculty are adamant that they do not want to use LU's distance education model, they are now ready to consider options for a more flexible delivery approach to include options like teleconference and one-week intensives to enable students in rural and northern areas to participate in graduate education. Students view options to choose from a variety of blended ways to take courses positively.

Given these observations, flexible delivery options provide potential to open up graduate education to a new pool of applicants and support expansion of the PhD program, while meeting needs for building health research capacity in rural and northern regions. However, facilitating access to campus resources, including availability of e-resources and electives, will need to be considered as part of this planning, along with the program requirement to attend 10 graduate proposals, thesis defenses, or health-related conferences.

- P12.** COVID-19 has provided the program with challenges and opportunities. As part of the curriculum review (please see Response #3 above), we will discuss the potential of expanding our "regular" program delivery (e.g., delivery not determined by the pandemic) to include synchronous online delivery or a hybrid of synchronous and in-person delivery (including one-week intensives or delivery in time blocks). We will endeavour to ensure readings and course resources are readily available on-line. It is important to note that successful implementation of any form of distance-based 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 internet access will continue to improve across rural and northern communities as a result of the new federal commitments to better access in rural and remote Canada.

One small correction to the reviewers' comment above is that IRNH students are not required to attend 10 graduate proposals as that is a requirement in the Master's program only.

D12. I am satisfied with the unit's response. A university-wide plan to implement more permanent processes for hybrid and remote-delivery of courses (vs online delivery) is likely to emerge as a result of the pandemic.

GS12. I am satisfied with unit's response.

R13. **The option for part-time study in the PhD 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 needs to be considered, particularly with respect to part-time students.

P13. As part of the curriculum review (and in relation to Response #12), we will examine the potential of offering some courses in evenings (e.g., the thesis course – but also potentially others).

We are not quite clear as to the ways in which part-time students feel excluded and this is concerning. We will endeavour to conduct some focus groups with students to get further feedback on how we may be able to address this issue.

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

GS13. I am satisfied with unit's response.

R14. **Although team teaching provides strong support for the interdisciplinary focus, we heard from some faculty that the ability to team teach is not possible at LU. However, others contradicted this sentiment noting team teaching does occur at LU.**

P14. To clarify this point, it was discussed that team teaching requires faculty to share the workload allotted to the course (i.e., so for a 3 credit course each faculty member would receive 1.5 credits). The original goal at the inception of the program was to have several faculty in the classroom at all times to provide interdisciplinary teaching. The current workload restrictions only allow for faculty to cycle through the classes which provide single sessions from different disciplinary perspectives (i.e., multidisciplinary vs. interdisciplinary). In order to maintain the interdisciplinary teaching, the program heavily depends on the generosity of faculty from across Laurentian and experts from the community to come, lecture and facilitate class discussions without compensation (with the exception of Elders who always receive an honorarium). Thus, the team teaching that does occur in the program happens due to the good will of others. We are grateful to them for their time and contributions. Although we have been able to consistently meet our needs in this way, it makes planning difficult and is of constant concern regarding the stability of the interdisciplinarity of the program.

D14. I am open to considering a team teaching approach during the planning of workloads that could be mutually beneficial for the SRNH and another unit. The challenge is ensuring that the needs of the 'home unit' are not compromised and that faculty resources are not depleted from one unit to serve the needs of another unit.

GS14. I am satisfied with unit's response.

R15. **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 depending on guest lecturing by Indigenous people and Indigenous students to help meet learning objectives is completely inappropriate.**

P15. We can state definitively that at no time have any Indigenous students ever been asked to guest lecture in any PhD or Master's courses in our school and agree with the reviewers that to ask them to do so (either with or without remuneration) would be highly inappropriate. We are aware that several of our Indigenous PhD students are asked to formally lecture for courses in other programs at Laurentian and we are not able to comment whether they receive payment for doing so. We also do have several Indigenous students who are sessional instructors or who have delivered lectures in other programs as part of a GTA opportunity.

Please see Response #3 regarding meeting our Indigenous focused PLO. With regard to Indigenous students sharing in the classroom, the reviewers mention this again later in their report and we will address this important issue in detail below (See Response #72).

D15. I am satisfied with the unit's response. Sessional contracts are issued to indigenous scholars to teach courses within the Faculty of Health. I will consult the Directors within the Faculty of Health to determine how prevalent the practice is to have indigenous PhD students and other PhD students formally lecture in courses as part of a GTA assignment or not. Providing teaching opportunities to doctoral students do help build students' academic portfolio but should not be exploitative.

GS15. I am not able to comment on the unit's response except to note that GTA Awards come with significant financial remuneration.

R16. **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 be part of one or more required courses.**

P16. We will work to make IRNH 6306 – Indigenous Perspectives in Health and Wellness a required course. Please see Response #3.

D16. I am satisfied with the unit's response.

GS16. Implementation timeline recommended.

- R17. Admissions in the PhD program has been declining. However, we were advised and subsequently received the enrollment statistics for 2021 that were on par with the goals set for the programs (6 PhD). 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 (e.g., in Human Kinetics) on future recruitment and admissions.**

Discussions also highlighted the growth opportunity for the PhD Program, 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 need additional support to develop marketing materials that could be posted on their website and disseminated using other channels.

- P17. We wish to clarify that enrolment in the IRNH has remained stable over the past five years....**

We agree with the reviewers that expansion in marketing is needed including website improvements and support. Faculty members are able to 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 have neither the expertise nor time to launch or maintain a sustained effective marketing effort. The unit feels that Liaison Services needs 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 Liaison Services 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.”

- D17. I am satisfied with the unit’s response. I would add that 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 as well as Masters 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.**

- GS17. The unit – or Laurentian, 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. That said, I would agree with the report that at the PhD level, faculty member involvement is an essential component of doctoral recruitment, both in developing robust programs of research that include funding for development of HQP, and in engagement with the field that ensures an informal recruitment network.**

- R18. In the PhD program, admission requirements are in line with similar doctoral programs. The master’s programs are situated to be an effective feeder into the PhD 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 graduates meet this requirement. Nevertheless, there were conflicting opinions**

about supervisory capacity - especially in relation to increasing admissions to the PhD program. Although in addition to the 5 core faculty members, potential supervisors include 42 affiliated faculty members (with supervisory privileges at the PhD level) from a wide range of disciplines, some faculty members suggested that supervision of IRNH PhD students needed to be considered in light of their already full workloads in their home departments/faculties.

- P18.** We agree with the reviewers that there are concerns regarding the sustainability of supervisory capacity for IRNH. Although there are many faculty accredited to supervise or co-supervise in the program, only 20 actively do so, and of which five are SRNH core/sessional faculty who supervise/co-supervise 17 of 34 current students. Of the remaining current supervisors, four faculty members have multiple IRNH student supervisions. It is also important to note that of those 42 affiliated members, 16 have never supervised/co-supervised an IRNH student nor participated on a student supervisory committee. Our purpose in drawing attention to this fact is to stress the difference between active program faculty and those that have qualified for, and were granted, accreditation by the Faculty of Graduate Studies but have yet to contribute to the program. We note that this may be a function of opportunity or student fit, but we stress this to illustrate that the applicants tend to gravitate to a core group of supervisors – which is most realistically due to the research foci of these specific program faculty members. For these reasons, the IRNH Program’s supervisory capacity is strained and we are concerned about sustainability. To remedy this, additional faculty is required. Further to this point, please see Response #8 above.
- D18:** The SRNH may also consider taking this opportunity to review the list of accredited faculty members, re-engage with less active external faculty members and to invite new faculty members to contribute to the program in an effort to increase supervisory capacity in the program.
- GS18.** No comment.
- R19.** **Overall, students reported that they were well served by the School with answers to their questions [about admission] but reported problems, delays, etc. with the Laurentian “Hub” - the central student services desk that ties Admissions and Registrar’s Offices to students’ entry to LU.**
- P19.** We were pleased to see that our students are satisfied with the admissions process, and in particular, with the assistance [from the School] they received in finding a supervisor. This is often the most difficult part of any applicant’s application process and is taxing on the Program Coordinator’s time. We will endeavour to continue to support applicants to the best of our ability.
- D19.** I am satisfied with the unit’s response.
- GS19.** GP Coordinators receive course release for the stated work.
- R20.** **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 the [International Credential Assessment Service \(ICAS\)](#) was used for this assessment, their past courses and program would have been accepted.**

- P20.** Although the evaluation services used by the Faculty of Graduate Studies (FGS) is out of the Unit's jurisdiction, we will communicate this feedback from our students to the FGS and Admissions Office for consideration. The admissions officer has already confirmed that they have the capacity to use ICAS if directed to do so.
- D20.** I am satisfied with the unit's response and can help liaise with the Dean of the Faculty of Graduate Studies.
- GS20.** The unit may, through the collegial governance process and in accordance with scholarly standards, alter its admissions criteria.
- R21.** **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.**
- P21.** We agree with the reviewers. If increasing graduate enrollment 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.
- D21.** 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. Information related to scholarships, research assistantships etc...could be incorporated in the program's student handbook (though I realize that this handbook targets students that are admitted to the program rather than being a recruitment tool).
- GS21.** I agree with the Dean of Health's observation that the unit should position itself as a partner in graduate student funding.
- R22.** **There are some concerns that the PhD in Human Kinetics (starting Sept 2020) may impact recruitment into the PhD in IRNH. There was also mention that some students use the MA/MSc program as a steppingstone for admissions to the Northern Ontario School of Medicine (NOSM) rather than the PHD in Rural and Northern Health. Some thought should be given to how to create pathways into the PhD in Rural and Northern Health, including a pathway from the Masters into the PhD.**
- P22.** There is minimal overlap between the two PhD programs. In the past decade, we had one student who would have been better served by a PhD in Human Kinetics. This student succeeded in our program with some adjustments of assignments and by having a Human Kinetics supervisor. Our Unit supported the proposal for a PhD in Human Kinetics because it would have very little impact on our program.

The IRNH PhD and INDH Master's programs are offered by the same unit and are indirectly linked. Both programs draw students from a diverse range of programs and will feed towards a diverse range of future paths. The IRNH program is designed to train students in health research. It is not intended to be a direct entry program from INDH. It is our preference to recruit students with diverse backgrounds. The fact that some students choose to pursue a career in medicine is not a concern for the PhD program. We respect all of the various career

paths that students have available to them and are eager to welcome students from a wide variety of health programs and various other institutions.

D22. I am satisfied with the unit's response. Although the program objectives for the PhD programs in IRNH and Human Kinetics are distinct, there's a high level of research cross-collaboration between faculty members from the SRNH and the School of Kinesiology and Health Sciences, which I view as a benefit.

GS22. I am satisfied with unit's response.

R23. **The program structure for the format of comprehensive exams was viewed as problematic.... Since most (if not all) students have supervisory committees that include more than a supervisor and one committee member, ... there is potential for other members of the committee to be excluded from the proposal defense.**

For some students, the structure and rigid time schedule of the comprehensive exam process does not accommodate the time needed to develop relationships with communities and engage stakeholders in priority setting and ensuring culturally appropriate research approaches.

P23. Please see Response #9 [re Involvement of Supervisory Committee. In addition] we will evaluate the timing of the comprehensive exam process during the curriculum review.

D24. I am satisfied with the unit's response.

GS24. I am satisfied with unit's response.

R25. **We heard from both participating faculty and students that policies and practices related to graduate programs LU were not "written down" or accessible in a central location. This precipitated impressions that there may be inequities in opportunities afforded to students, and often placed faculty at a loss about how to guide students.**

Evident as well is a need for grad studies policies and practices to be more student-focused, and to enhance clarity regarding relationships and expectations between students and supervisors.

The PhD program is supported by 5 core faculty and 42 affiliated faculty from across the university. Although there are obvious benefits to involving this diverse group of faculty in the PhD program, it creates challenges in ensuring that all affiliated faculty are oriented to the program and have a clear understanding of the policies and practices of the program.

P24. All program faculty are provided access to the IRNH Google folder within which our program policies can be found, and all required forms and student resources. All of our program policies are also outlined in the SRNH Student Handbook. These resources are also available to supervisors either through their students or by requesting them from the SRNH Administrative Assistant. In the past, we have invited supervisors to annual meetings between the student and the Program Coordinator and to orientation. We will endeavour to do a better job to orient new supervisory faculty and we will endeavour to examine the feasibility of potentially offering a supervisors orientation session to those interested.

Regarding FGS policies, we agree with the reviewers that the lack of written policies, housed in a central accessible location, has been an ongoing challenge for the program, students, program faculty and the program's leadership. We will communicate this feedback to the Dean of Graduate Studies.

- D24.** It may be worth inviting all Faculty members affiliated with the program and potential new faculty members to a mini-retreat to provide updates about the program and to reconnect with the members to enhance engagement with the program. Documents related to program policies could be shared as part of this mini-retreat. Regarding Graduate Studies policies, the interim Dean of the Faculty of Graduate Studies is aware of this gap and is sure to work collaboratively with the unit to address this concern.
- GS24.** I agree with the Dean of Health's comments. I note, however, that policies unique to this PhD program remain the purview of the unit, through the collegial governance process, and are housed by the Registrar.
- R25.** **The self-study did not report any intentional type of laddering between the School's Master's programs and the PhD in Rural and Northern Health program or an option of transferring or spring boarding from the Master's into the PhD. However, a student raised an example of another student who 'spring boarded' from the Master to PhD when supervised by the Director of the program. We were not certain about the accuracy of this information, but the program might intentionally consider how to ladder courses from Masters to PhD so a transfer or springboard might be possible for qualified students. It is vital that a clear policy be in place and available procedures be developed so that qualified students are afforded the opportunity to transfer from Masters to PhD.**
- P25.** Please see Response #4. For clarification, one student has transferred from the Master's directly to the PhD and this student was not supervised by the Director of the school or by a program coordinator at the time of transfer. The possibility of fast-track was raised at her comprehensive exam and was related to the scope of the thesis being more consistent with a PhD thesis compared to a Master's thesis. That specific student was required to formally apply to the PhD and her application was reviewed by the IRNH Admissions Committee with all other applicants for that year as per our official admissions procedure. She was the first student (and to date only) to apply for consideration under such circumstances.

We are committed to formalizing the procedures to encourage others to do so in future.

- D25.** I am satisfied with the unit's response.
- GS25.** I am satisfied with unit's response.
- R26.** **Students reported the program was rich in rural and northern health, but there should 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 were optional.**
- In addition, students indicated some of the big data course material could focus more on northern regions to provide opportunities for creation of new knowledge in the field of rural health.**
- P26.** Please see Response #3 and #6. We would like to clarify that it is typically not Indigenous content that students must seek elsewhere, but a diverse range of specialty topics that are not available at Laurentian University. The faculty actively encourage students to seek out diverse experiences and there are clear policies and procedures in place to make this possible at no additional cost.

With regard to the "big data course material", our response to this falls somewhat in line with the issues addressed in Response #7 regarding community-based research. We would ideally love to include everything. We will consider all these issues during our curriculum review.

- D26.** I am satisfied with the unit's response. Sharing appropriate elective graduate courses between Schools may also help fill this gap.
- GS26.** I am satisfied with unit's response.
- R27.** **Student achievement in the PhD program is impressive. This is reflected in the average time to completion (5.2 years with a mix of FT and PT students), and student success in obtaining competitive funding from provincial and national agencies, opportunities afforded to them to share their scholarly work at conferences and their success in publishing their work in peer-reviewed journals.**
- Information provided on employment status of graduates is also impressive. Among the 27 graduates, over 50% are in academic positions, 8.3% are postdoctoral fellows, and 4 % are in senior leadership positions. This suggests that students are meeting or exceeding program goals. Reflected, in part, here is the fact that the doctoral program is serving as an important mechanism for LU faculty to obtain their PhDs.**
- P27.** We are very proud of our graduate and student success with 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. It also suggests that the comprehensive exam process, although not perfect, has been very effective.
- D27.** I am satisfied with the unit's response.
- GS27.** I am satisfied with unit's response.
- R28.** **Aspirationally, the PhD Program is aligned with the university mission and strategic documents. The Program has a very attentive 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 its focus on rural and northern health research and interdisciplinary perspectives.**
- P28.** We agree with the reviewers that the dedication of our core faculty members is a key asset in our program, as is our deep community networks. We thank the reviewers for recognizing these strengths. We also celebrate our strengths in interdisciplinarity.
- D28.** I agree.
- GS28.** Agree.
- R29.** **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. Nevertheless, as we prepared this report, we learned that the person who had been in this role has taken another position in the university. Replacing the administrative assistant with a full-time permanent person who can fulfill the administrative tasks and serve as an effective navigator for students, is critically important.**
- P29.** We would like to clarify that the academic advising for our students is provided by the Program Coordinator and the supervisors. Our administrative assistant provided a crucial role to support the program and students. However, recent restructuring activities resulted in our full-time Administrative Assistant being transferred to the Research Office and replaced by an experienced Administrative Assistant working as a 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 the Faculty of Health to hear the reviewers' recommendations and ensure that SRNH has a full-time Administrative Assistant who is able to provide the supports outlined above, as this has been deemed "critically important" to the student and program success.

- D29.** 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.
- GS29.** No comment, this item is contingent upon Laurentian's adopted budget model.
- R30.** **The interdisciplinary focus throughout the PhD program is a key strength. The program is 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 this doctoral program and provides an exceptional opportunity for developing "practitioner researchers" who can spark innovations. This point was reinforced by community stakeholders who view the program 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 to Indigeneity are commendable.**
- P30.** We were pleased to hear that the reviewers feel our interdisciplinary focus, community relationship and opportunities for "practitioner researchers" are all considered strengths of the program. In addition, we are very happy that the reviewers acknowledge our commitment to Indigeneity.
- D30.** I agree.
- GS30.** Agree.
- R31.** **That Graduate Studies develop clearly articulated policies that are accessible in written form for reference by students, faculty, and staff.**
- P31.** Please see Response # 25.
- D31.** See response #25.
- GS31.** See above.
- R32.** **Strengthen efforts to enhance the core curriculum related to Indigenous perspectives and provide support for community-based research.**
- P32.** Please see Response #3 and Response #7.
- D32.** See responses #3 and 7.
- GS32.** See above.
- R33.** **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.**
- P33.** Please see Response # 9.
- D33.** See response #9.
- GS33.** See above.

R34. 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).

P34. Please see Responses #3, #6, #8 and #15.

With regard to cultural safety training for faculty, we agree with reviewers and as a Unit, we commit to completing a cultural safety training. Additionally, we will examine what cultural safety training resources are available 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 outlined in Response #5). Ideally, we would like to see all SRNH students (in both the Master's and PhD) receive some formal form of cultural safety certificate as a program requirement.

D34. See responses #3, 6,8 and 15. I will collaborate with the unit to achieve this objective.

GS34. See above.

R35. Revise research courses with a view to: i) clarifying laddering between the master's and PhD level courses, ii) including approaches for integration of sex and gender in health research across all pillars of health research, iii) including Indigenous research methodologies and community-based research, and iv) including models/approaches to knowledge translation (e.g., integrated KT) to support evidence-based changes in policies and practices to enhance health and healthcare that community-based stakeholders were looking for.

P35. With regard to each point above, please see i) Response #4, ii) Response #5, iii) Responses #3 and #7, iv) Responses #3 and #4.

D35. See corresponding responses.

GS35. See above.

R36. Revise the rigid timetable and procedures for the PhD comprehensive examination and proposal defense.

P36. We will review the timing of the comprehensive examination. Please see Response #9.

D36. I am satisfied with the unit's response. See response #9

GS36. See previous comments.

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 northern 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. We will review program delivery modalities to maximize program reach and student access. Please see Responses #12 and #13.

D37. I am satisfied with the unit's response. See responses #12 and 13.

GS37. No additional comments.

- R38.** Hiring a Student Navigator will help with enhancing 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.** We agree that a full-time Administrative Assistant is essential to support program and student success. Please see Response #30.
- D38.** The graduate program coordinator has the responsibility to guide students with additional support provided by the administrative assistant. The unit may also consider creating a framework for more formal peer-to-peer student support.
- GS38.** I endorse the Dean of Health's comment. See also previous comments.
- R39.** **The PhD program (as well as the MA/MSc programs) are supported with five core faculty members - with two faculty members working beyond the normal retirement age - and one administrative assistant. We were told that two of the faculty do not teach courses. In addition, the PhD program draws on 42 affiliated faculty members across the university and 8 adjunct faculty from other institutions 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 fill anticipated vacancies due to retirements and expanding teaching/supervision capacity in the future with tenure-track faculty (vs. sessional hires). Further, any expansion of the programs will need to include resources for additional admin support.**
- P39.** Please see Responses #8, #14 and #18.
- We would like to clarify that all the SRNH core faculty teach. At the time of the review, one faculty member was on sabbatical and one faculty member's workload was assigned to a research chair and directorship – thus these two members were not teaching in 2019-2020. Both 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 of this program must be accompanied by an increase in tenure-track or tenured 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.** I did not note any plan for expansion, only enrolment growth of existing program as will be updated to align with this review.
- R40.** **The main office has bookshelves with theses of previous students and some resources for course readings. This could be expanded to include copies of required textbooks for on-campus students to borrow if funds are limited or unavailable from the library. In addition, this could also include a collection of important texts and e-resources to enhance the Indigenous knowledge and research methods since students reported that they had to obtain these on their own, incurring unforeseen expenses.**
- P40.** Students have access to all required texts in the office library. In addition, students have access to an extensive library, which is located in SE-213 to which all students have access.

Unfortunately, this was not showcased during the virtual site visit. Despite these resources, students in all graduate programs across Canada are typically required to purchase their own personal copies of resource materials if they so desire.

D40. I am satisfied with the unit's response.

GS40. No additional comment.

R41. **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 PhD program 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. An expanded marketing strategy is needed, along with resources to support this effort, particularly to enable recruitment of students in other northern regions and international students.**

P41. Please see Response #17. In addition, our core faculty members are active researchers with extensive profiles on search engines regularly used by prospective students (e.g., ResearchGate). Thus there are additional resources that may not have been considered by the reviewers.

D41. 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.

GS41. No additional comment.

R42. **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" having a specialized librarian will be helpful.

It was noted that there is a need to enhance the digital resources by investing more in databases and subscriptions like the "HathiTrust" that makes ebooks available, particularly in light that the interlibrary loan program is facing challenges.

P42. We agree with the reviewers comments regarding the loss of the previous data expert and will draw our Dean's attention to this issue so that she may take it forward. Laurentian is now a member of the "HathiTrust" partnership.

D42. I will work with the unit as well as the University Librarian (Dean – Brent Roe) and the Faculty of Health-designated Librarian to address this concern.

G42. it is my understanding that the Hathi Trust resources are only available during COVID-19, but I may be mistaken; this should be verified with the University Librarian.²

R43. **Students discussed the issue of the current tuition fee structure and its implications for part-time students versus a program fee structure. Part-time students who, due to work commitments or the nature of their research, extend their time in the program are particularly disadvantaged under the current tuition fee structure.**

Added to this is the lack of student funding particularly for part-time students, where we were told 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. There is an urgent need to create materials regarding seed grants and other forms of funding for students and supervisors to address perceived inequities in accessing these resources among students and faculty.

P43. We agree with the reviewers that there is a need for better student funding. At one time, the PhD program had entrance scholarships, which made our offers somewhat more competitive. Unfortunately, those are no longer available. The issue of funding for part-time students is more complicated as part-time students are generally not eligible for most funding – including tri-council funding.

D43. 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.

GS43. I am aware that not all graduate scholarships are successfully awarded in a given year; the unit is encouraged to direct students toward Graduate student awards as may be applicable to their unique academic trajectories; I applaud the Dean's plan for a future fundraising campaign.

R44. **The PhD students shared that some have received Graduate Teaching Assistantships (GTAs) and noted there were opportunities to apply for grants and other ways to be supported. However, some students were not as aware of opportunities and stated it was difficult to access policy and/or procedures about GTAs. It was noted that OSAP funding fully supports the degree program, but the GTAs are a vital source of funding for students.**

For students who do not qualify for funding, OSAP, OGS or otherwise expressed financial struggles in the program. For these students in particular, the current tuition fee structure creates a significant burden. Whether a student takes one course or three courses the tuition was the same. The Program should explore other tuition models for graduate programs, including the option to pay per course to reduce the risk of students facing financial difficulties and not being able to complete their programs.

P44. Much of this information is included in the SRNH student handbook. Some of the funding mentioned (e.g., OGS) is highly competitive and restricted to full-time students. 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 to the Deans of Health and Graduate Studies, respectively, and encourage them to consider alternative options for part time students.

² The Dean is not mistaken. Hathi Trust is only available during the pandemic.

- D44.** I am prepared to collaborate with the unit and with the Faculty of Graduate Studies to address this concern.
- GS44.** GTA eligibility is communicated at time of admission; thus, student confusion is itself confusing; the FGS is willing to work with the unit on communicating GTA availability to candidates (this year's offer letters were updated in early December to provide additional clarity and specify GPA requirements).
- R45.** **With respect to research, increased funding for student research is needed, particularly given that rural, remote and Indigenous community-based research is often expensive. In addition, students studying in Indigenous communities often take more time to progress through the program given the requirement to work directly with communities. Consistent with the learning outcome of the program to increase the focus on Indigenous health, funding needs to be available for costs incurred (honorariums, travel, etc.) to conduct community-based research.**
- P45.** We 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.
- D45.** I am satisfied with the unit's response. It may also be worth exploring whether doctoral students are eligible to apply for funding via the Advancing Indigenous Research Funds if their project is tied to a research question that will benefit indigenous communities.
- GS45.** in addition to collaboration with FGS, unit should improve ties with ORS for tri-council funding opportunities and support and consider the Dean's proposal of a campaign with Advancement.
- R46.** **The list of first authored student publications from 2014-2020 demonstrates the support and guidance students receive in the Masters and PhD Programs (presuming this includes both programs but unable to determine). 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.**
- P46.** Please see Response #28
- D46.** See response #28.
- GS46.** No additional comment.
- R47.** **There was much appreciation expressed from community stakeholders about the research that is conducted through the School. It was suggested that most of the faculty are fairly well-integrated into the community and therefore know the needs of community stakeholders. A formal consultation process at regular intervals to ask stakeholders about gaps in research and their needs for research, however, should be conducted. For example, some identified workforce needs we heard included gerontology (as indicated by the stakeholder from Finlandia) and more capacity in public health (post-COVID). Another identified workforce need**

is fluently bilingual/Francophone professionals in various health fields. How the program is consistently hearing about and responding to emerging priorities was not clear.

- P47.** 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. IRNH 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.
- D47.** The suggestion is noted. A broader Faculty of Health stakeholder consultation may be envisaged that could benefit the IRNH graduate program as well as other graduate programs offered in the Faculty to create further synergies.
- GS47.** I am inclined to agree with the reviewers over the unit response. A Dean's advisory committee on the program – as a way to inform but not direct or dictate – would be a concise way to engage community stakeholders within an achievable time commitment.
- R48. Times to completion are monitored by the program. The average time to completion for the PhD program is reported in the self-study as 5.2 years (with FT and PT students grouped). The time frames appear to be in line with similar graduate programs. We heard from the community stakeholders, that one of them was impressed with the tight time frames imposed on PhD students. However, the review committee questioned this, especially in the case of community-based research because it is not realistic to build relationships in that short amount of time. Students also raised concerns about the rigid timelines, particularly in reference to the comprehensive exam process.**
- P48.** As the reviewers note, our average time to completion is 5.2 years. We have had several students exceed this by more than one standard deviation, without penalty. Thus there is room for variation across students and based on thesis topics. Please see Response #9 for clarification on the timelines for comprehensive exams.
- D48.** I am satisfied with the unit's response.
- GS48.** No additional comment.
- R49. The doctoral program provides an excellent and important opportunity for current LU faculty to obtain PhDs, however, their faculty roles often resulted in very extended times to completion. Again, the flexibility to allow these extensions was viewed by those we spoke to as a strength of the program.**
- P49.** We felt that this comment indicated a contradiction with the reviewers' previous statements, which indicated "rigid timelines". This statement indicates that we do allow extensions and extended timelines to support individual student needs. We will continue to work with students to ensure flexibility and consider the supports required under special circumstances that promote student success.
- D49.** I am satisfied with the unit's response.

GS49. No additional comment.

R50. **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.**

P50. We were very happy to hear that the students feel supported during the COVID-19 pandemic. It has been a difficult time and all students, supervisory faculty, core SRNH faculty and SRNH administrative support are to be commended for their efforts!

D50. I agree.

GS50. I agree.

R51. **Areas for improvement were also identified with many of the issues expressed demonstrating a lack of clear policy and procedures, and a 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/guidance, creating perceived inequities within the program and impacting the quality of supervision. There appeared to be a disconnect between faculty core to the program and supervisors from outside the program in terms of shared knowledge and expectations. 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.

Affiliated faculty members eligible to supervise PhD students reported that they need better orientation and accessible on-line policies to enable them to support student progression and success through the PhD program.

P51. Please see Response #25.

Our program has well-established policies, a formal student orientation and a Student Handbook that clearly outlines our policies. The handbook articulates the responsibilities of the student (p.22) and supervisor (p.23) and the process for forming a supervisory committee (p.21). Committee formation is also covered during the mandatory new student orientation every year. Furthermore, during orientation, all students meet the Program Coordinator and the Director and are made aware that these leaders are accessible to address any concerns.

D51. I am satisfied with the unit's response.

GS51. I disagree with the unit's response as the unit itself earlier in the report questioned the clarity of FGS policies as apply to their students. Recommend including links to FGS as may enhance student experience.

R52. **Supervisors told us they lacked capacity to expand supervisory responsibilities, while LU administrators noted that there is great capacity among existing faculty to support expanded graduate programs, including this PhD program. While there are only five core faculty members for the program, the PhD program also draws on 42 affiliated faculty members across the university and 8 adjunct faculty from other institutions who are qualified to supervise. However, it was noted that there is limited supervisory capacity with often the same faculty members supervising many students.**

P52. We agree with the reviewers that there are challenges associated with sustaining supervisory capacity if IRNH were to be expanded. Please see Response #18 and #8.

D52. There may be an opportunity to re-examine the list of affiliated faculty members and to seek new members that could take on supervisory or co-supervisory roles as deemed appropriate. There are still some schools within the Faculty of Health who either do not offer a PhD program or any graduate level programs thereby limiting the opportunities to supervise graduate students within these units. Having access to graduate student supervisory or co-supervisory opportunities within the IRNH program could help fill that void.

GS52. No additional comment.

R53. **The past reviewers noted that the program lacked a clear philosophy, vision, mission and values statement. The current self-study included the mission to enhance quality and quantity of research focused in rural and northern health with an ultimate result demonstrating a significant positive impact on rural and northern health and quality of life.**

The website was noted as not meeting expectations of prospective students. While there may have been an improvement since the last review, we did hear about challenges with the website, including the challenges of keeping the website updated in the context of limited resources directed toward this at the university and program levels, and some faculty not providing their information. This challenge seems to remain.

P53. Please see Response #17.

In addition, the Unit has periodically sent a reminder to supervisory faculty asking them to provide their information on their faculty profiles. Ultimately, this responsibility rests with the supervisors.

D53. I agree with the unit's response.

GS53. I disagree with the unit's response; rather, I encourage the unit to take collective responsibility on this, and to set criteria for individual faculty profiles as a requirement of adjunct and affiliate status.

R54. **The past review noted that course titles and descriptions should be examined for congruences to the core concepts of the degree. Again, the core course titles and course descriptions remain generic, particularly not noting rural and northern health or Indigenous health.**

- P54.** We will review the course titles and descriptions during our curriculum review. Please see Response #4.
- D54.** I am satisfied with the unit's response.
- GS54.** No additional comment.
- R55.** **Our review noted a lack of apparent laddering of the core research courses. Something similar was noted in the previous review, particularly exploring if the research course in the Masters program adequately prepares students who then enter the PhD program.**
- P55.** We will review the content of the Master's and PhD research courses during our curriculum review. Please see Response #4.
- D55.** I am satisfied with the unit's response.
- GS55.** No additional comment.
- R56.** **The same issue [laddering] appears to be present with respect to the comprehensive exam being linked to the proposal defense. The reviewers noted there was consensus amongst faculty to separate them at that time.**
- P56.** We will re-examine the comprehensive exam process. Please see Response #9.
- D56.** I am satisfied with the unit's response.
- GS56.** No additional comment.
- R57.** **Further IT support is needed.**
- P57.** We agree with the reviewers' statement. However, the website is now the responsibility of the LU Web Team rather than IT.
- D57.** The Digital Strategies team is usually responsive to addressing questions and concerns about the website.
- GS57.** No additional comment.
- R58.** **A recommendation [from the 2013 review] to increase enrollment particularly with inclusion of Indigenous course content appears to have been partially achieved along with the addition of a new Indigenous faculty member. However, there remain critical gaps identified by this Review Team with respect to infusion of Indigenous content in core courses.**
- P58.** We will review course content to ensure that the Indigenous PLO is effectively addressed. Please see Response #3.
- D58.** I am satisfied with the unit's response.
- GS58.** I encourage timelines be associated with the unit's response.

- R59.** Policies and procedures from Grad Studies must be clarified and documented so that they are easily accessible and can be consistently applied. In addition, 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, rules and regulations around comprehensive and oral examinations, and student input in selecting committee members.
- P59.** We will encourage FGS to document institutional policies. Our program-specific policies are laid out in our Student Handbook (see Self-Study Appendix). Please see Responses #25, #46 and #52.
- D59.** The unit can work collaboratively with the Faculty of Graduate Studies to address this concern. The student handbook is a valuable tool.
- GS59.** I agree with the Dean of the Faculty of Health.
- R60.** Communication must be improved between faculty within the School and faculty supervisors from other parts of the campus to ensure all faculty involved in the PhD program are aware of policies and procedures that impact student success. Supervisors (especially those from outside the SRNH) need better orientation and accessible on-line policies to enable them to support students' progression and success through the program.
- P60.** We will continue to reach out to support our program faculty and orient them to these materials that are already available to them via the IRNH Google folder. Please see Response #25.
- D60.** During the curriculum review, it may be advisable to consult the Faculty membership for feedback, which may in turn increase engagement. A mini-retreat may also be considered to reconnect with faculty members.
- GS60.** No additional comment.
- R61.** Electives both inside and outside School of Rural and Northern Health need to be identified and accessible to students and supervisors. At the beginning of each year all students should be advised about available electives as well as courses to meet program requirements, including those outside of the school, especially in fields related to Indigenous methodologies and biomedical statistics.
- P61.** Our past and current practice has been to provide all students with a list of potential electives each year (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. There are no courses in biomedical statistics available at Laurentian, however, the University of Ottawa does offer an excellent summer option that our students are encouraged to consider. We will review this gap during our curriculum review.
- D61.** I agree with the unit. In addition, a Faculty of Health-wide graduate course audit is underway to determine what courses are currently in the database and could potentially be offered cyclically as electives to ensure variety.

- GS61.** No additional comment.
- R62.** **The rigid timetable for the PhD comprehensive examination and proposal defense needs to be revised. It is also recommended that these two requirements be separated, and that all committee members be able to participate in the proposal defense.**
- P62.** We have been able to accommodate requests for modification to timelines in the past, and will review the comprehensive exam process as part of our curriculum review. Please see Response # 9.
- D62.** I am satisfied with the unit's response.
- GS62.** No additional comment.
- GS63.** **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 and other databases, and other electronic resources. This will also be important to support flexible delivery options. There is a need to ensure that all readings related to the comprehensive exam are readily available for students during that phase of their degree. Investment in print and e-resources for the PhD program is needed, focusing particularly on resources to support the Indigenous learning objective, to support the inclusion of the Indigenous content in core courses, and student access to these resources.**
- P63.** Please see Responses #41 and #43.
- D63.** Access to the HathiTrust has recently been added. 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.
- GS63.** See above.
- R64.** **The Program Advisory Committee requires community stakeholder engagement, particularly representing connections to the Indigenous community. For instance, involving the LU Native Education Council or surrounding First Nations communities and Metis Councils will assist the Program in ensuring curriculum is adequately addressing the rural and northern Indigenous communities.**
- P64.** Please see Response #3 and #48.
- R65.** **In order to address the needs of incoming international students, the university and program faculty 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 are not having to take a lateral or lower degree than what they have attained in another country.**

- P65.** We will communicate this information with FGS and the Admissions Office. Please see Response #20.
- D65.** I agree.
- GS65.** See above.
- R66.** **Alternative forms of program delivery must be put in place to sustain and expand the PhD program to fully support the program's unique focus on rural and northern health, the need to enable access to doctoral level education among interested students in rural and northern communities who are unable to relocate for on-campus courses, and to meet the critical need to build research capacity in the North to find solutions for pressing health issues. Alternative modes of delivery need to accommodate completion of electives and thesis defenses, and must be adequately resourced in terms of student support, faculty, library resources etc.**
- P66.** We will review delivery modalities as part of our curriculum review. Please see Responses #12, #13 and #43.
- D66.** I agree. See responses #12, 13 and 43.
- GS66.** No additional comment.
- R67.** **An expanded marketing strategy is needed, along with resources to support this effort, particularly to enable recruitment of students in other northern regions and international students. Alumni success stories should be included in marketing the program.**
- P67.** We will work with Liaison Services to improve our recruitment materials and strategies. Please see Response #17.
- D67.** See response #17.
- GS67.** See response #17.
- R68.** **There is a recognized need for a student navigator, a role that the Administrative Assistant previously fulfilled. 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.**
- P68.** Please see Response #30.
- D68.** See response #30.
- GS68.** No additional comment.
- R69.** **Given LU's commitment to Indigeneity and strategic goal to lead the process of reconciliation through transformative postsecondary education and research, as well as the significant challenges identified with the infusion model of addressing what some call the Indigenous requirement (Indigenous learning objective), we strongly recommend that the next faculty hire be an Indigenous colleague to reinforce the 5th Program Learning Outcome of the doctoral program and to advance the culture within the school itself to a greater degree of cultural safety and cultural humility and a deeper competency in Indigenous knowledges and methodologies.**

P69. Please see Response #3 and #8.

D69. See responses #3 and 8. I will work collaboratively with the unit to determine the criteria for a future potential faculty hire.

GS69. No additional comment.

R70. **The Indigenous learning outcome must be clearly reflected in the core courses for this PhD program. The program structure and timelines must be revised 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.**

The timelines of the program and the linking of the comprehensive exam to the research proposal must be re-considered and revised so that this process is conducive to Indigenous ways of doing research (as required by the Tri-Council Policy Statement on Research with Human Participants).

P70. Please see Responses #3 and #9.

D70. See responses #3 and 9.

GS70. No additional comment.

R71. **The incongruence between the student view of knowledge being harvested and the Program's view of knowledge exchange must be seriously explored. It is strongly recommended that from Indigenous students that they are exhausted from being called upon having their knowledge harvested, particularly without compensation, as well as reports we heard from faculty in the program that, while it is not an expectation of students to identify, when they do share it is viewed as a knowledge exchange.**

P71. We thank the reviewers and our students for bringing their observations 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 EDHRO Office to assist us by (1) conducting a focus group with all SRNH students (both IRNH and INDH) and (2) conducting a second focus group with Indigenous SRNH students. This will allow the EDHRO Office to confidentially communicate student perspectives regarding how we may improve the cultural safety, equity and diversity of our learning environment.

D71. I am satisfied with the unit's response.

GS71. No additional comment.

R72. **The research courses in the master's and PhD must be reviewed and revised to account for i) laddering between the master's and PhD level courses, and ii) 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 in health research across all pillars, implementation science, community-based research, Indigenous methods, models/approaches to knowledge translation to support evidence-based changes/improvements in policies and practices to enhance health and healthcare that community-based stakeholders are looking for)**

P72. Please see Responses #4, #5, and #7.

D72. See responses #4, 5 and 7.

GS72. No additional comment.

R73. Adequate funding for doctoral students is essential to sustain and expand the program.

LU and the program faculty should continue to explore ways to improve admission offers to the PhD program to increase competitiveness with other programs.

Additional recommended strategies to support student research include: i) enhanced efforts to share information regarding seed grants and other forms of funding in ways that can be easily accessed by students and supervisors to address perceived inequities in accessing these resources among students and faculty, and ii) providing research funding to support community-based research with Indigenous communities in rural and northern regions (e.g., to cover travel expenses, honouraria, etc.).

P73. Please see Responses #44 and #46.

D73. See responses #44 and 46.

GS73. No additional comment.

ACAPLAN'S RESPONSE

The reader of the last section will observe some significant overlap in several of the comments/recommendations. Accordingly, ACAPLAN proposes 1) to pull the positive comments out first since they require no follow-up. 2) It will then identify those recommendations it cannot support. 3) The remaining recommendations will be sorted into the following categories and then ACAPLAN will develop its own recommendations based on these categories:

Recommendations about:

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

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

1. ACAPLAN notes the following recommendations to “keep up the good work” need no follow-up since they identify existing program strengths

R1. The PhD in Rural and Northern Health is ... well aligned to LU's mission and strategic goals.

- R10.** 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.
- R11.** 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.
- R27.** Student achievement in the PhD program is impressive. Information provided on employment status of graduates is also impressive.
- R28.** Aspirationally, the PhD Program is aligned with the university mission and strategic documents. The Program has a very attentive 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 its focus on rural and northern health research and interdisciplinary perspectives.
- R30.** The interdisciplinary focus throughout the PhD program is a key strength.
- R46.** The list of first authored student publications from 2014-2020 demonstrates the support and guidance students receive in the Masters and PhD Programs (presuming this includes both programs but unable to determine).
- R49.** The doctoral program provides an excellent and important opportunity for current LU faculty to obtain PhDs, however, their faculty roles often resulted in very extended times to completion. Again, the flexibility to allow these extensions was viewed by those we spoke to as a strength of the program.
- R50.** 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.
2. The following is a list recommendations ACAPLAN does not support, with reasons.
- R7.** The content regarding community-based approaches and methodology did not appear to be a strength of the research methods courses. There is concern that the core/required courses are tied to a binary about qualitative vs quantitative and may not reflect any in-depth training about mixed methods, community-based research or Indigenous knowledge as REQUIRED and foundational. There was a sense that this curriculum is sometimes available, depending on the makeup and timing of the particular cohort of students. In addition, the structure of the program may make it difficult to conduct research in a community engaged manner, unless previous relationships exist. Given the focus on rural health and location of the program, ensuring the program does not have systemic barriers to doing research with Indigenous communities should be further explored.

Reason: Mixed-methods and community-based approaches are currently covered in the current course structures. Without greatly increasing the number of required courses, an in-depth focus in this area would come at the expense of other research approaches and, thus, ignore the needs of a significant number, if not majority, of students because many do not conduct community-based research.

R8. The PhD program offers IRNH 6306 Perspectives on Indigenous Health and Wellness as an elective. We heard rave reviews about this course from both students and faculty. However, there were concerns about the demands being placed on one faculty member to meet the needs for inclusion of Indigenous perspectives in the PhD program (as well as the two master's programs).

Reason: University finances would not currently allow the hiring of an additional faculty member. With the transition to activity-based budgeting, it might be possible to reconsider this recommendation.

R9. A new process for comprehensive exams has been introduced. The program structure for the format of comprehensive exams was viewed as problematic. The examination includes two parts: 1) completion of comprehensive exam questions intended to assess the students' breadth of knowledge (to be completed between 8-16 months into full-time study) and 2) oral defense of proposal. A detailed timeline is outlined in the self-study document... However, the changes that have been introduced have created other problems.

And

R23. The program structure for the format of comprehensive exams was viewed as problematic.... Since most (if not all) students have supervisory committees that include more than a supervisor and one committee member, ... there is potential for other members of the committee to be excluded from the proposal defense.

For some students, the structure and rigid time schedule of the comprehensive exam process does not accommodate the time needed to develop relationships with communities and engage stakeholders in priority setting and ensuring culturally appropriate research approaches.

Reason: The reviewers were concerned that not all members of the supervisory committee were allowed to participate in the thesis defence proposal. But the supervisory committee plays a critical role in supporting the student to develop their proposal and must sign-off on the proposal before it is presented as part of the comprehensive exam. A second concern revolved around the rigid timeline between the comprehensive exam and the proposal defense. In fact, the program has had student requests extensions, and, *in every case, those extensions have been granted* to provide support and flexibility to our students as per their needs.

R15. 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 depending on guest lecturing by

Indigenous people and Indigenous students to help meet learning objectives is completely inappropriate.

And

R71. The incongruence between the student view of knowledge being harvested and the Program's view of knowledge exchange must be seriously explored. It is strongly recommended that from Indigenous students that they are exhausted from being called upon having their knowledge harvested, particularly without compensation, as well as reports we heard from faculty in the program that, while it is not an expectation of students to identify, when they do share it is viewed as a knowledge exchange.

Reason: The program states definitively that at no time have any Indigenous students ever been asked to guest lecture in any PhD or Master's courses in our school and it agrees with the reviewers that to ask them to do so (either with or without remuneration) would be highly inappropriate.

R22. There are some concerns that the PhD in Human Kinetics (starting Sept 2020) may impact recruitment into the PhD in IRNH. There was also mention that some students use the MA/MSc program as a steppingstone for admissions to the Northern Ontario School of Medicine (NOSM) rather than the PHD in Rural and Northern Health. Some thought should be given to how to create pathways into the PhD in Rural and Northern Health, including a pathway from the Masters into the PhD.

Reason: There is minimal overlap between the two programs. To be sure, while the program objectives for the PhD programs in IRNH and Human Kinetics are distinct, there's a high level of research cross-collaboration between faculty members from the SRNH and the School of Kinesiology and Health Sciences, which is a benefit to both.

R26. Students reported the program was rich in rural and northern health, but there should 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 were optional.

In addition, students indicated some of the big data course material could focus more on northern regions to provide opportunities for creation of new knowledge in the field of rural health.

Reason: It is typically not Indigenous content that students must seek elsewhere, but a diverse range of specialty topics that are not available at Laurentian University. The faculty actively encourage students to seek out diverse experiences and there are clear policies and procedures in place to make this possible at no additional cost.

With regard to the "big data course material", the response to this fall somewhat in line with the issues addressed in Response #7 (above) regarding community-based research. The program would ideally love to include everything but realistically cannot.

R29. 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. Nevertheless, as we prepared this report, we learned that the person who had been in this role has taken another position in the university. Replacing the administrative assistant with a full-time permanent person who can

fulfill the administrative tasks and serve as an effective navigator for students, is critically important.

And

R38. Hiring a Student Navigator will help with enhancing 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.

And

R68. There is a recognized need for a student navigator, a role that the Administrative Assistant previously fulfilled. 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: Academic advising for students is provided by the Program Coordinator and the supervisors. The change from a 1.0 FTE administrative assistant to a 0.5 FTE is a permanent change at least for the foreseeable future.

R40. The main office has bookshelves with theses of previous students and some resources for course readings. This could be expanded to include copies of required textbooks for on-campus students to borrow if funds are limited or unavailable from the library. In addition, this could also include a collection of important texts and e-resources to enhance the Indigenous knowledge and research methods since students reported that they had to obtain these on their own, incurring unforeseen expenses.

Reason: Students have access to all required texts in the office library. In addition, students have access to an extensive library, which is located in SE-213 to which all students have access. Unfortunately, this was not showcased during the virtual site visit. Despite these resources, students in all graduate programs across Canada are typically required to purchase their own personal copies of resource materials if they so desire.

R42. It was noted that there is a need to enhance the digital resources by investing more in databases and subscriptions like the "HathiTrust" that makes ebooks available, particularly in light that the interlibrary loan program is facing challenges

Reason: The Library now has a subscription to Hathi Trust and even more important, the Interlibrary loan service is now operational.

R47. There was much appreciation expressed from community stakeholders about the research that is conducted through the School. It was suggested that most of the faculty are fairly well-integrated into the community and therefore know the needs of community stakeholders. A formal consultation process at regular intervals to ask stakeholders about gaps in research and their needs for research, however, should be conducted. For example, some identified workforce needs we heard included gerontology (as indicated by the stakeholder from Finlandia) and more capacity in public health (post-COVID). Another identified workforce need is fluently bilingual/Francophone professionals in various health fields. How the program is consistently hearing about and responding to emerging priorities was not clear.

Reason: The program as currently configured does not have the capacity to respond to local needs in this way. Its worry is that it would set expectations in the community that we cannot fulfil. IRNH students have their own research interests and although many do work with local stakeholders, the program cannot guarantee these stakeholders that there will always be students interested in research related to their services and activities. The program does however support some local stakeholders through faculty research projects.

R48. Times to completion are monitored by the program. The average time to completion for the PhD program is reported in the self-study as 5.2 years (with FT and PT students grouped). The time frames appear to be in line with similar graduate programs. We heard from the community stakeholders, that one of them was impressed with the tight time frames imposed on PhD students. However, the review committee questioned this, especially in the case of community-based research because it is not realistic to build relationships in that short amount of time. Students also raised concerns about the rigid timelines, particularly in reference to the comprehensive exam process.

Reason: The average time to completion is 5.2 years although several students have exceeded this by more than one standard deviation, without penalty. Thus, there is room for variation across students and based on thesis topics. As to the rigid timeline, particularly in reference to the comprehensive exam process, as noted in R9 (above: has had students request extensions, and, *in every case, those extensions have been granted* to provide support and flexibility to our students as per their needs).

R51. Areas for improvement were also identified with many of the issues expressed demonstrating a lack of clear policy and procedures, and a 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/guidance, creating perceived inequities within the program and impacting the quality of supervision. There appeared to be a disconnect between faculty core to the program and supervisors from outside the program in terms of shared knowledge and expectations. 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

Reason: The program has well-established policies, a formal student orientation and a Student Handbook that clearly outlines its policies. The handbook articulates the responsibilities of the student (p.22) and supervisor (p.23) and the process for forming a supervisory committee (p.21). Committee formation is also covered during the mandatory new student orientation every year. Furthermore, during orientation, all students meet the Program Coordinator and the Director and are made aware that these leaders are accessible to address any concerns.

RURAL and NORTHERN HEALTH

1. MARKETING

Recommendation	Proposed Follow-up	Responsibility for Leading Follow-up	Timeline
1. Provide resources to expand and improve program marketing strategies to take full advantage of the opportunity to grow the program.	i. Create virtual graduate program fair for the Faculty of Health targeted especially at students in third and fourth years ii. Repeat for alumni that may be seeking to further their education at the graduate level	Dean of Health with Liaison and individual program coordinators, Graduate Studies and Alumni office as relevant	Ongoing
2. Encourage active faculty involvement in recruiting	i. Continue to develop robust programs of research that include funding for development of HQP, and in engagement with the field that ensures an informal recruitment network. ii. Add publications to LUZone, Research Gate etc. where they would be accessible to Internet searchers	Program Coordinator	Ongoing
3. Track and promote alumni success stories as means of marketing the program	i. Initiate discussions with Alumni Office ii. Profile alumni on website	Program Coordinator	September 2021
4. Keep website current	i. Make full profile on website a condition of a faculty member's association with program ii. Follow up with administrative assistant	Program Coordinator	Ongoing
5. 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
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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	Ongoing

4. CURRICULUM

Recommendation	Proposed Follow-up	Responsibility for Leading Follow-up	Timeline
1. Embed more Indigenous content in core courses to fulfill “core competency” (“Capacity to integrate Indigenous perspectives, community engagement and integration of strength-based approach in health research”) added in May 2019,	<p>i. Make IRNH 6306 – Indigenous Perspectives in Health and Wellness a required course.</p> <p>ii. Ensure Indigenous learning outcomes are clearly reflected in all core courses</p> <p>iii. Contact Master’s of Indigenous Relations (MIR) Program to inquire if IRNH students with the appropriate prerequisite background may enrol in MIRE 5016 Indigenous Methods.</p>	Program Coordinator	<p>i. June 2022</p> <p>ii and iii. September 2021</p>
2. 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	<p>i) Undertake a coordinated curriculum review and mapping exercise in conjunction with the IRNH Master’s 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</p>	Program Coordinator	June 2022

support evidence-based changes / improvements in policies and practices to enhance health and healthcare that community-based stakeholders were looking 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.		
3. Examine course titles and descriptions for congruence to core concepts of the degree	i. Include as part of curriculum review	Program Coordinator	June 2022
4. More frequent or better offering of electives	i. Work with the Dean of the Faculty of Health to incorporate electives into annual workloads and course offerings on a cyclical basis ii. Provide students with an annual list of graduate level electives available to them across the Laurentian campus	Program Coordinator	Ongoing
5. Revise the rigid timetable and procedures for the PhD comprehensive examination and proposal defense	i. While the timetable is officially rigid, the program is flexible in allowing deviations—so make such flexibility official (i.e., outline in handbook)	Program Coordinator	June 2021

5. STUDENT ISSUES

Recommendation	Proposed Follow-up	Responsibility for Leading Follow-up	Timeline
1. Faculty/course instructors must provide instruction on culturally appropriate methodologies and epistemologies without relying on Indigenous	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	Program Coordinator	June 2021 and ongoing

<p>students to provide this instruction to their peers</p>	<p>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>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.</p> <p>ii. Meet with the part-time students to get further feedback on how the program may be able to address this issue</p>	<p>Program Coordinator</p>	<p>June 2022</p>
<p>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>	<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>Program Coordinator</p>	<p>September 2021</p>

	ii. Make the case that there is a need for special funds to support students conducting rural and northern health research.		
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	Dean GS	September 2021

6. FACULTY AND STAFF ISSUES

Recommendation	Proposed Follow-up	Responsibility for Leading Follow-up	Timeline
1. Develop strategy to implement some team teaching	Dean of Faculty of Health to plan workloads that could be mutually beneficial for the SRNH and another unit.	Dean of Health	ongoing
2. Fill anticipated vacancies due to retirements and expand teaching / supervision capacity in the future with tenure-track faculty	Prepare case for Dean of Health	Program Coordinator	As required
3. Improve orientation and create accessible on-line policies for supervisors outside the unit to enable them to support students' progression and success through the program.	Consult supervisors as to specific needs and develop plan to meet them	Program Coordinator	June 2021 and Ongoing
4. Ensure only active faculty are listed as supervisors	i. Review the list of accredited faculty members. ii. Re-engage with less active external faculty members. iii. Invite new faculty	Program Coordinator	June 2021 and ongoing

	<p>members to contribute to the program in an effort to increase supervisory capacity in the program.</p> <p>iv. invite all faculty members affiliated with the program and potential new faculty members to a mini-retreat to provide updates about the program and to reconnect with the members to enhance engagement with the program. Ensure documents related to program policies are shared and available.</p>		
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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	Deans of Health and GS	June 2021 and ongoing

8. PLANNING

Recommendation	Proposed Follow-up	Responsibility for Leading Follow-up	Timeline
1. 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.	As part of the curriculum review, discuss the potential of expanding the “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).	Program Coordinator	June 2022
2. Create ladder	Develop procedures for		June 2022

between Masters and Doctoral programs	laddering as part of curriculum review		
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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 Interdisciplinary PhD in Rural and Northern Health are approved to continue and it will be reviewed in the fall of 2028.

Recommendation to the VPA: At that time, the program should be evaluated separately and distinctly from the Masters in Interdisciplinary Health, with a different set of reviewers.