**Curriculum Renewal:**

**Analysis and Action Plan Template 2013/14**

| **Program Coordinator:** | **Susan Hyndman** | **School:** | **GAS** |
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| **Program Code:** | **44700** | **Date Completed:** |  |
| **Program Name:** | **GAS - College Health Science Option (GHS)** | | |

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| **A. Analysis of Indicators**  Note: data is **not** recorded in this section of the template.  **Reflect on, and discuss, the following indicators in the context of the curriculum and program:** |
| 1. **Industry / Sector Trends**    1. Are there new or emergent *industry or sector* related issues and trends identified over the past year and their potential impact on the program? Yes   Initiatives from Heads of Health Science Pre-Health Sciences Project entitled “PRE-HEALTH COLLEGE TO COLLEGE ALIGNMENT OF POLICY, PRACTICE AND PROGRAM LEARNING OUTCOMES TO FACILITATE STUDENT MOBILITY AND INTER-COLLEGE ADMISSIONS AND CREDIT TRANSFER REPORT”. In summary, this project hopes to standardize all pre-health science programs at the course level so that all pre-health programs are standardized.  *TBA whether Fleming is involved in this standardization or not.*   * 1. What are the Advisory Committee recommendations from the past year that will affect the positioning, nature, or scope of the program? N/A (minutes reviewed and no recommendations documented)   2. What information / observations have been generated via faculty and staff professional development, engagement in sectoral and profession associations, and involvement in community and employer networks connected to the field?   3. Are there new or changing employment trends in the industry or sector?   4. What are the curriculum issues / strengths that have been identified by employers pertaining to graduate job readiness? |
| **2. Curriculum Development**   * 1. Have there been any curriculum changes in the last year such as changes in course content and course materials, course / program outcomes, innovative delivery approaches, assessment practices, applied learning experiences, e-learning / blended learning? If yes, please provide details.   The GHS curriculum was changed significantly and introduced in the 2012/13 academic year.  See the file in S:\shared data\CLT\GAS\GAS\_PROGRAMS\GAS\_College Health Science\_GHS\Program Curriculum Renewal Reports entitled “Fall 2011 Curriulum Renewal for GHS to Begin Fall 2012” for additional details on sequencing.  In addition, the GHS program went through an extensive program review.  See the file in S:\shared data\CLT\GAS\GAS\_PROGRAMS\GAS\_College Health Science\_GHS\Program Review Reports entitled “GHS\_Program Review\_Final     * 1. Does the current curriculum align with the college’s e-learning strategy which strives to have all Fleming graduates experience e-learning in each semester of their program? Yes   Most e-learning within courses occurs through good use of D2L components and some can be considered web-enhanced. Many on-line choices are available for general electives and potentially expose students to a completely on-line course.   * 1. Are there any recent or anticipated initiatives that promote student pathways including dual credits, partnerships with high schools, program laddering, and university transfer / articulations, continuing education? Yes   Internal pathways for GHS graduates have been recently expanded to include reserved seats within the Pharmacy Technician and Health Information Management programs.   * 1. Are there any new competitor programs and/or re-positioning of existing programs?   Durham has recently expanded their generic GAS pathway certificate to include numerous streams. One of the new streams is GAS-Health Preparation which may be a competitor for the GHS program.  See <http://www.durhamcollege.ca/programs/health-sciences-preparation-gash> for details on the new Durham program.   * 1. Are there any new or changing provincial standards, standards for accreditation, credentials, and / or industry or sector certifications over the past year?   Initiatives from Heads of Health Science Pre-Health Sciences Project entitled “PRE-HEALTH COLLEGE TO COLLEGE ALIGNMENT OF POLICY, PRACTICE AND PROGRAM LEARNING OUTCOMES TO FACILITATE STUDENT MOBILITY AND INTER-COLLEGE ADMISSIONS AND CREDIT TRANSFER REPORT”. In summary, this project hopes to standardize all pre-health science programs at the course level so that all pre-health programs are standardized.   * 1. What is the progress made from the last curriculum renewal initiative?   The bulk of the curriculum work was completed before the launch of the new GHS curriculum in Fall 2012. Ongoing work has included modifications to these courses such as inclusion of more e-learning, more hands-on applications/labs, and ongoing integration of common scientific/mathemetical concepts across core courses. |
| **3. Applied Learning**   * 1. Does the current program contain a discrete Applied Learning opportunity for students? If yes, which category of Applied Learning is fulfilled? No, only in-class applied learning (labs)   \_\_\_ Field Work (Indirect Supervision)  \_\_\_ Field Work (Direct Supervision)  \_\_\_ Co-op  \_\_\_ Applied Project / Applied Research Project  Phase II (tentative only) of the applied learning implementation plan will hopefully include an additional category to recognize *in-class* applied learning.   * 1. In the 2013/14 academic year, Fleming College will ask all programs with Applied Learning opportunities to align to an agreed upon framework. To confirm program alignment, please complete the appropriate Applied Learning Framework Checklist and attach it to this document. After completing the checklist, please answer the following: Is the program in alignment with the Applied Learning Framework? If no, what are the strategies in place to bring the program into alignment? No   GHS is a pathway program so core courses have set delivery patterns (although there is ample applied learning in the form of labs).   * 1. If the answer to 3.1 is no, are there plans to create a discrete Applied Learning opportunity for students within this program? Why or why not?   Perhaps a selection of general education or program electives can serve as a discrete applied learning opportunity (future action item to review GNED, program elective choices?). |
| **3. Student and Graduate Satisfaction**  3.1 Key performance indicators # 4, 8, 9, and 11 (see **Appendix of Curriculum Guide** for a description of these). All Excellent!  GHS KPI analysis for 2013 Reporting Year   |  |  | | --- | --- | | KPI Indicator | Benchmark Gap | | KPI#4: Graduate Satisfaction, Learning Outcomes | +27.96 | | KPI#8: Student Satisfaction, Learning Experience | +7.8 | | KPI#9: Student Satisfaction, Teachers | +10.10 | | KPI#11: Graduate Satisfaction, Program | +9.34 |   *BENCHMARK GAP is Program Difference minus the College Difference. If the Benchmark Gap is positive, Fleming's program difference is above the college difference and the program does not have to increase its performance on this KPI. If the Benchmark Gap is negative, Fleming's program difference is below the college difference and the program needs to increase its performance on this KPI by the value of the Benchmark gap.*  3.2 Review and discuss student retention on a semester by semester basis over the past year.  TBA – Based on fall to winter retention? |
| **B. Curriculum Strengths and Challenges**  Summarize the curriculum strengths and challenges identified by the team. |
| *(Update as appropriate based on discussions with teams)*   * **Strengths:**   Comprehensive Orientation package featuring key program information, college services and contact information of faculty.  Recent course and curriculum changes (2012) give a unique program opportunity to GHS students with separate Biology, Chemistry, and Math curriculum. In addition, HLTH273/274 are unique to the program and build on EE and other transferable skills.  Enhanced curriculum that is coordinated and integrated among 4 core courses  Dedicated teaching team that meets regularly to discuss student issues, progress and curriculum challenges. The teaching team has coordinated approach to assessments and course policies as well as  consistent expectations of students across core courses.   * **Challenges:**   Lack of consistent (smaller) program team makes integration of content across core courses more difficult as well as meetings and discussions re: student progress. Addition of new program team members and late contract hires makes communication re: GHS program “vision” more difficult  Lack of any real advising model used in GAS, lack of follow-up re: Week 4 reporting, etc.  As of Fall 2013, No more GAS drop-in clinics for Chemistry, Biology, and Mathematics.  Is there consistent identification of “at-risk” students – are Accuplacer scores for literacy and numeracy pulled from the database and shared with GHS team? |
| **C. Action Plan**    Identify priority actions for the next year and the rationale for their inclusion. For each, indicate the project lead, and the proposed timelines for completion. **What resources are required to complete the action plan, i.e., software, equipment, and training?** |
| * Follow-up with Administration re: if Fleming has signed on to be part of the Heads of Health Sciences Pre-Health Sciences Standardization project. This is critical for future revisions to curriculum. * Curriculum modifications to individual GHS courses as identified by team. Also, review and re-alignment of curriculum for all core GHS courses. * Follow-up with FDR re: what GHS students are coming in with and where GHS graduates go. * Follow-up to assess whether spots within the Pre-service Firefighter Program can be reserved for GHS graduates |
| **D. Deferred Actions**  Record any issues that will need to bemonitored, researched, or deferred for future action. |
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| **E. Attach an updated Program Curriculum Map to your report** |
| Please file an updated Program Curriculum Map in folder named Program Curriculum Map.:  **S:\shared data\CLT\School Name\Program Name\Program Curriculum Map** |