University of Lethbridge

Office of the Provost and
Vice-President (Academic)
and Deputy Provost

4401 University Drive
Lethbridge, Alberta, Canada
T1K 3M4

Phone: 403-329-2202
uleth.ca/vp-academic/
provost@uleth.ca

TO: Digvir Jayas
President and Vice Chancellor

DATE: August 1, 2026

FROM: Lynn Kennedy
Chair, Academic Quality Assurance Committee

RE: MSc Health Sciences Academic Quality Assurance Review

In accordance with the U of L *Academic Quality Assurance Policy and Process*, the Academic Quality Assurance Committee approved the review of the MSc Health Sciences at its February 24, 2026 meeting.

The Self Study Committee for this review was comprised of: Julia Brassolotto (Program Review Coordinator), Olu Awosoga, Sienna Caspar, Peter Kellett, and Bonnie Lee.

The review produced 5 documents:

1. Self Study Report. Written by the Self Study Committee. Received July 21, 2025.
2. External Review Report. Written by Ketan Shankardass (Wilfred Laurier University) and Luke Harris (University of Northern British Columbia) based on a site visit October 14 to 15, 2025. Received November 14, 2025.
3. Program Response. Written by the Self Study Committee. Received December 1, 2025.
4. Dean's Response. Written by Jon Doan, Dean of the Faculty of Health Sciences and Jackie Rice, Dean of the School of Graduate Studies. Received January 12, 2025.
5. Provost's Action plan. Written by Michelle Helstein, Provost and Vice President (Academic). Received June 4, 2026.

Self Study Report

The report highlighted a number of program strengths including:

- The Master of Science in Health Sciences program (all majors and specialization) has successfully graduated students who have found work in government, healthcare agencies, and non-profit organizations.
- It provides strong training and preparation in research. Most of the courses offered focus on research methods and all majors require the completion of a thesis.
- The multi-disciplinarity of the MSc program creates opportunities for students from a range of health disciplines, and for cross-disciplinary knowledge sharing.
    - In the 2023 Faculty Member survey, "diversity in faculty expertise," "interdisciplinarity of student experience," and "broad health focus" were identified as leading strengths of the MSc program.
- Supervision is provided by dedicated faculty members who are committed to the success of their students and the program. Multiple faculty members have held research chairs and some have nationally and internationally recognized programs of research.
- The program has relatively small cohorts and classes, providing the ability to be student-centered (also identified as strengths in the Faculty Member survey).
- The Public Health Specialization offers advanced training in epidemiology, biostatistics, program planning and evaluation, and public policy. These courses are generally well-liked and are sought out by students from multiple majors and graduate programs across the FOHS.
- Each of the majors has optional graduate level practicum or co-op placement opportunities for students to engage in (often paid) hands-on work-integrated learning.
- Students in the MSc program provide considerable GA Teaching/Research support for faculty members in Health Sciences and gain academic and research training as part of this process.
- Historically, the MSc Nursing major was created to provide opportunities for local nurses to pursue research at the graduate level before our Master of Nursing program was developed. This provided an opportunity to train and develop our own nursing faculty members. This major also provided a route for international nurses (since the MN program requires a Canadian nursing license).

The report also noted some challenges experienced by the program:

- Completion timelines tend to be quite lengthy. The MSc is promoted as a 2-year program but has often taken students 3-5 years to complete.
- There is limited guaranteed funding to offer students for competitive recruitment and to make full-time study possible with the current cost of living, particularly for international students.
- Historically, there has been limited faculty-provided funding for graduate students. The FOHS has largely relied on SGS to fund MSc students, rather than through faculty members' external grants.
- Higher than average rate of supervisory turnover.
- The program has an increasingly limited pool of potential supervisors.
- The Addictions Counselling major and Public Health specialization rely heavily on their program's respective graduate certificates. Having students in the certificate programs ensures that courses have high enough enrollment numbers to be offered. If enrollment dips in these certificates, or the government/institution changes course on micro-credentials, there may be some negative implications for our MSc programs.
    - The Public Health Specialization courses were all moved online to accommodate students in the Graduate Certificates, but the MSc Health Sciences is otherwise an in-person program (for all other majors). This can lead to misalignment in tuition fee structures and challenges with building cohort connections for students in the Public Health Specialization.

- For the general Health Sciences, Nursing, and Addictions Counselling majors, there are only research methods courses offered and no required content courses to expand students' knowledge about health and health care at the graduate level.
    - Presumably, students in the Addictions Counselling major can take elective courses from the Addictions Counselling Graduate Certificate offerings (in Advanced Clinical Study of Addiction or Couple and Family Counselling Studies) or Graduate Diploma offerings (in Addictions and Mental Health Psychotherapy), but this is not communicated in the program description nor built into the requirements of the major itself.
    - There is also little meaningful distinction between the majors, aside from the program affiliation of the supervisor. There is no disciplinary content about Nursing or Addictions Counselling, nor any specifically articulated curricular outcomes for any of the majors, aside from the Public Health Specialization. From the Faculty Member survey: "[There are] no true distinctions between majors apart from the Public Health specialization, no content courses for other majors."
    - Enrolment and interest in the MSc Nursing have declined since introduction of MN program.
- Regarding the MSc Nursing Major: the designation can be deceptive for international nurses and may pose challenges for their future employment in Canada. The content of the MSc Nursing major does not represent the nursing-focused education they would receive in an MN program, though the degree has nursing in the name.

The report made several recommendations and asked for External Reviewer feedback on several areas including:

- There is a strong research culture among faculty who teach and supervise in the program, which could be used more effectively to recruit students.
- There has been ongoing discussion about the need/opportunity to consolidate some existing graduate-level courses on research methods and/or on qualitative research methods. This change would eliminate redundancy in the content of those courses, encourage a multi-disciplinary health sciences focus in our methods course offerings, and would free up full-time continuing faculty to teach other courses or take on additional graduate student supervision.
- With lower enrolment numbers in thesis-based programs (in general, as well as a potential future decrease resulting from the introduction of a course-based MHSc), we may be able to offer more generous funding packages to the students who do enroll in thesis programs.
- There is an opportunity to discontinue the Nursing major given decreasing enrollment, lack of nursing curricular content, and the presence of a successful Master of Nursing program in recent years. This will enable us to re-allocate related resources to the MN program (which has clear nursing curricular content, outcomes, and professional credibility) and make our graduate offerings in Nursing clearer for prospective students.
- Which aspects of our MSc program are deserving of priority attention?
- What do you feel are the strengths or most essential components of our MSc offerings?
- How would you recommend we improve our program in our current resource-constrained environment (e.g., without the addition of new hires)?
- We initially only offered a MSc Health Sciences major. Do you believe we should continue with multiple majors and specializations? What benefits or challenges can you anticipate with either option?

External Review Report

The External Review Report contained eleven (11) recommendations for improving the MSc Health Sciences:

- Articulate program-level learning objectives and align curriculum. Publish shared outcomes; audit and reduce duplication in methods; clarify thesis applicability across course options; add a guide to

timelines and milestones to the Graduate Handbook; consider more clearly distinguishing and configuring coursework and research-based streams to improve completion times.

- Create a mandatory, for-credit interdisciplinary graduate seminar. Use it to build cohort identity, embed cross-cohort dialogue, and integrate Indigenous mentorship (e.g., Elders-in-Residence participation).
- Review and calibrate the methods course curriculum across graduate program options. Emphasize replacing one or more required methods courses with courses that offer more experiential learning and/or breadth options.
- Strengthen Indigenous methodologies access and mentorship. Expand course content and land-based/cultural safety learning; engage local Nations and the Iniskim Education Committee to support graduate-level experiences and community partnerships.
- Formalize supervision standards and workload recognition. Define expectations; quantify supervisory load; enable co-supervision for mentorship, methods harmonization, and continuity; implement a rolling supervision capacity map tied to admissions.
- Stabilize and make funding more equitable. Smooth intra-program funding variability; earmark portions of new MHSc revenue for MSc studentship supplements; define an equity pathway within current budgets.
- Optimize resource deployment. Cross-list cognate courses, ladder or integrate similar offerings, and ensure replacement hiring sustains core supervision and teaching capacity.
- Enable faculty research time and grant success. Reintroduce/expand teaching load remission for research-active faculty; increase uptake of ORIS grant development supports; link gains to graduate RAships and primary data collection opportunities.
- Strengthen progress monitoring and escalation. Close reporting gaps, standardize notifications, and specify triage pathways for stalled milestones.
- Systematize degree recognition evidence. Implement exit surveys; conduct regular alumni follow-up; integrate outcomes into curriculum review and recruitment materials.
- Enhance communication and wellness supports. Consolidate and actively communicate supports; align wellness considerations with program design and workload expectations.

Program Response

In their Program Response, the Self Study Committee addressed the recommendations from the External Review Report:

1. Articulate program-level learning objectives and align curriculum.	The program area agrees with this recommendation.
2. Create a mandatory, for-credit interdisciplinary graduate seminar.	The program area agrees with this recommendation.
3. Review and calibrate the methods course curriculum across graduate program options.	The program area agrees with this recommendation.
4. Strengthen Indigenous methodologies access and mentorship.	The program area agrees with this recommendation.
5. Formalize supervision standards and workload recognition.	The program area agrees with this recommendation.

6. Stabilize and make funding more equitable.	The program area agrees with this recommendation.
7. Optimize resource deployment.	The program area agrees with this recommendation.
8. Enable faculty research time and grant success.	The program area agrees with this recommendation.
9. Strengthen progress monitoring and escalation.	The program area agrees with this recommendation.
10. Systematize degree recognition evidence.	The program area agrees with this recommendation.
11. Enhance communication and wellness supports.	The program area agrees with this recommendation.

Dean's Response

This is a summary of the Dean of the Faculty of Health Sciences' and the Dean of the School of Graduate Studies' response to the above documents:

The Faculty of Health Sciences thanks Drs. Harris and Shankardass for their enjoyable visit to Lethbridge, and for their thoughtful review. We are confident their task was strongly aided by the self-study report prepared by FoHS academic and non-academic staff – it was clear and concise, and thanks to those colleagues for their efforts. The external reviewers' report identifies a graduate program with good and broad research expertise amongst the supervisors, and useful dedicated administrative and functional supports for students. The review also clearly identifies now as the time to bring consistency and coherence to the program, to improve experiences and outcomes for both students and supervisors. The action items are helpful and highly appreciated for direction.

Provost's Action Plan

Consulting the External Reviewer Recommendations, the Program Response, and Deans Doan and Rice, the Academic Quality Assurance Committee made the following four (4) recommendations for action which the Program must report on in 1 and 3 years:

1. The MSc Health Sciences program will hold a retreat to assess curriculum. Discussions should include:
    a. Developing formal program-level learning outcomes.
    b. Reducing curriculum complexity to ensure this program is deliverable within existing resources.
    c. Review of the current Methods course curriculum across graduate program options; and cross listing, laddering, or integrating similar offerings across programs.
    d. The potential of creating a mandatory, for-credit interdisciplinary graduate seminar.
    e. Ways of strengthening Indigenous methodologies, access, and mentorship.
    f. The potential termination of the MSc (Nursing) major.
2. The Faculty of Health Sciences Dean's Office will work with the MSc Health Sciences program, in consultation with the School of Graduate Studies, to develop stronger supervision standards and guidelines, including:
    a. Communicating expectations around supervisory workloads within the existing assignment of duties.

b. Developing consistent on-boarding and training of new supervisors and graduate committee members.

c. Strengthening systems to monitor progress of students in the program.

d. Clarifying expectations of supervisor funding of students.

3. The Faculty of Health Sciences Dean's Office will work with the School of Graduate Studies to ensure the collection of data useful for assessing the MSc Health Sciences program, and will consult with Institutional Analysis about the use of existing alumni surveys.
4. The MSc Health Sciences program, in consultation with the School of Graduate Studies, will work to improve communication with students, cohort building, interdisciplinary engagement, and access to wellness supports.

The Academic Quality Assurance Committee is satisfied that the MSc Health Sciences academic quality assurance review has followed the U of L's academic quality assurance process appropriately, and acknowledges the successful completion of the review.

Sincerely,

Dr. Lynn Kennedy
Chair, Academic Quality Assurance Committee
Associate Professor, Department of History and Religion

cc Michelle Helstein, PhD.
Provost & Vice-President (Academic)