



School of Graduate Studies

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To : Members of Graduate Council

From : Christina Bryce
Assistant Graduate Secretary

The next meeting of Graduate Council will be held on **Tuesday, December 9th** at **9:30 am** in **Council Chambers (GH-111)**

Listed below are the agenda items for discussion.

Please email cbryce@mcmaster.ca if you are unable to attend the meeting.

A G E N D A

- I. Minutes of the meeting of November 19th 2014
- II. Business arising
- III. Report from the Acting Associate Vice-President and Dean of Graduate Studies
- IV. Report from the Graduate Associate Deans
- V. Report from the Associate Registrar and Graduate Secretary
- VI. Report from the Assistant Dean, Graduate Student Life and Research Training
- VII. New Program Proposal: Child Life and Pediatric Psychosocial Care
- VIII. Faculty of Health Science Graduate Policy and Curriculum Committee Report
- IX. Faculty of Science Graduate Curriculum and Policy Committee Report
- X. Faculty of Social Sciences Graduate Curriculum and Policy Committee Report
- XI. Mosaics Revisions to Terminology (to be distributed)
- XII. New Scholarships
- XIII. Other Business



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Graduate Council
November 18th, 2014 – 9:30 am
GH 111

Present: Ms. S. Baschiera, Dr. G. McClelland, Dr. A. Dean, Ms. C. Chapman, Dr. T. Adams, Ms. S. Nagle-Smith, Mr. T. Van Boxtel, Dr. A. Holloway, Mr. R. Morton, Dr. W. Wiesner, Dr. K. Bird, Dr. D. Novog, Dr. A. Grenier, Ms. C. Brown, Ms. V. Lewis, Dr. B. Milliken, Dr. S. Hanna, Dr. N. Agarwal, Dr. D. Down, Dr. B. Ibhawoh, Dr. M. Thompson, Ms. C. Chapman, Dr. T. Porter, Dr. C. Hayward, Ms. B. Gordon, Dr. A. Shi, Dr. S. Streefer, Mr. C. Egan, Ms. M. Mujib, Mr. P. Self

Regrets: Dr. I. Zeytinoglu, Dr. S. McCracken, Ms. T. VanDuzer, Dr. T. Kroeker, Dr. T. Adams

By Invitation: Dr. M. Hartmann

A G E N D A

I. Minutes of the meeting of October 21st 2014

The minutes of the meeting of October 21st, 2014 were approved on a motion by Dr. Hayward, seconded by Dr. Milliken.

II. Business arising

There was no business arising.

III. Report from the Acting Associate Vice-President and Dean of Graduate Studies

Dr. Welch discussed some of the changes associated with graduate student pay. He noted that the first meeting of the Graduate Council working group formed to discuss and advise on these issues had held their first meeting. He noted that the documents from the CUPE information sessions regarding graduate pay were available on the School of Graduate Studies website along with a tool to help students determine whether they were being paid the correct amount.

IV. Report from the Graduate Associate Deans

Dr. Hayward reported that the Faculty of Health Sciences will be holding a retreat for the heads of their graduate programs in December to try to get a better sense of what is restricting growth in Ph.D.s and are surveying faculty members to find out if they have the right mix of masters and Ph.D. students in

research labs. The Faculty of Health Sciences has also been working on a to-do list for folks starting new programs.

V. Report from the Associate Registrar and Graduate Secretary

Stephanie Baschiera noted that we had received more information from the MTCU with dates and deadlines around funding for new programs and asked that anyone interested in starting a program notify their associate dean as soon as possible.

VI. Report from the Assistant Dean, Graduate Student Life and Research Training

Peter Self reported that the School of Graduate Studies had hired a Graduate Career Strategist for the Student Life team. A one-week resume course is now available online for students. The Student Life team also held focus groups with graduate students to determine what sorts of career services they required. He also noted that applications are now being accepted for SPICES and that the deadline for proposals is in February.

VII. New Program Proposal: Executive MBA

Dr. Agarwal introduced the proposed new program. He explained that the School of Business currently offers an MBA program with a number of different options (co-op, accelerated etc.) and the school would now like to offer an executive MBA in Digital Technology. Dr. Hartmann explained that the executive MBA design committee had spent the last year looking at the marketplace and engaging in discussion with industry partners. The format for delivery will be largely residency based, supported by online learning activities. Council members discussed the courses noted in one of the appendices. Dr. Agarwal noted that the proposal uses some current MBA course codes to indicate where the course content will be delivered and that new courses for the executive MBA will go through the regular curriculum process.

Dr. Agarwal moved and Dr. Wiesner seconded, 'that Graduate Council approve the Executive MBA program proposal as outlined in the documents'

The motion was **carried** with one abstention.

VIII. Faculty of Business Graduate Curriculum and Policy Committee Report

Dr. Agarwal report three items for approval. The first item was a change in course requirements for the Masters of Finance program: the program proposed the introduction of a non-credit career development course and a substitution of a new course in list of permitted electives. The second set of recommendations comes from Professional Accountancy and includes a change to admission requirements to allow graduates from comparable programs outside of McMaster to be considered for admission to the diploma. The other change is the addition of workshop course as mandatory program requirement. The third set of changes come from the MBA program – three co-op work term courses have been created and will now be required as part of the student's degree completion. Additionally, the Accounting and Financial Management Services Specialization of MBA proposed adding one course to the permitted list of electives

Dr. Agarwal moved and Dr. Wiesner seconded 'that Graduate Council approve the Faculty of Business curriculum changes as described in the documents.'

The motion was **carried** with one abstention.

IX. Faculty of Engineering Graduate Curriculum and Policy Committee Report

Dr. Mike Thompson reported on the three items for approval from the Faculty of Engineering graduate curriculum and policy committee. The first change proposed, from the Engineering Physics program, is to raise the admission requirements for the M.Eng. degree offered by their program to match that of their M.A.Sc. The second change proposed was from the Materials Science and Engineering program regarding their M.A.Sc. degree; they proposed offering an accelerated option to allow the M.A.Sc. to be completed in one year. A similar proposal has already been implemented in Chemical Engineering and would allow the program to retain and capitalize upon excellent students in their undergraduate population. The final change proposed was from Mechanical Engineering; the program proposed dropping the number of required courses from four to two to give more time to work on research as well as to improve time to completion.

Council members discussed the number of required courses from local comparators. Dr. Thompson noted that the number of courses proposed by Mechanical Engineering was on the low side but that there was a real range in the area. Council members also discussed the 400/600 level course that students would be allowed to complete during their undergraduate degree.

Dr. Thompson moved and Dr. Novog seconded, 'that Graduate Council approve the Faculty of Engineering curriculum changes as described in the documents.'

The motion was **carried**.

X. Faculty of Humanities Graduate Curriculum and Policy Committee Report

Dr. Ibhawoh reported on two items forwarded for approval from the Faculty of Humanities graduate curriculum and policy committee. The first was from the Cognitive Science of Language program, who proposed deleting two required courses for both their Masters and Ph.D. students. The Cognitive Science of Language program also proposed changing their comprehensive examination requirement to align with comparable programs, now requiring only one paper and setting clearer guidelines for the scope of the paper. The second change brought forward for approval was the deletion of the thesis option in the Communication Management program. This change was proposed in light of the fact that there has, historically, been a significant lack of uptake of the thesis option and that the capstone project option offered by the program is equivalent to a major research paper and has not proven to be an obstacle to admission into a Ph.D. program.

Dr. Ibhaworh moved and Dr. Ighneski seconded 'that Graduate Council approve the Faculty of Humanities curriculum changes as described in the documents.'

The motion was **carried** with one abstention.

XI. Quality Assurance Committee Membership

Dr. Welch moved and Dr. Hayward seconded 'that Graduate Council approved Dr. Sue McCracken, Dr. Allison Holloway and Dr. Violetta Ighneski as the Graduate Council members of the Quality Assurance Committee.'

The motion was **carried**.

XII. New Scholarship

Brooke Gordon noted that the proposed new scholarship was for both doctoral and post-doctoral candidates and was, therefore, not expressly a graduate student award. The scholarship will be awarded to a candidate within School of Rehabilitation Sciences who are studying childhood disability.

Dr. Welch proposed a friendly amendment to clarify what the scholarship meant by post-doctoral student.

Dr. Hayward moved and Dr. Agarwal seconded, 'that Graduate Council approve the new scholarship.'

The motion was **carried**.



McMaster University
Program Proposal Brief

Master of Child Life and Pediatric Psychosocial Care

Submitted by the
Department of Pediatrics
Faculty of Health Sciences

November 2014

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1. Program

1.1 Background

This brief is a proposal from the Department of Pediatrics and the Child Life Studies Diploma Program to establish a Master's degree in Child Life and Pediatric Psychosocial Care. Originally founded in 1989, the current Child Life Studies Diploma Program has become an internationally recognized post-baccalaureate education and training program for child life specialists. Following the development of the Child Life Council's (the profession's North American association) 2012-2014 strategic plan, it has been determined that as of 2022, a Master's degree in Child Life will be required to enter the profession and meet new certification eligibility requirements. The current diploma program therefore needs to evolve to meet the changing degree and certification requirements.

Child life specialists are members of pediatric interdisciplinary health care teams whose primary focus is on the developmental and emotional needs of children and their families. The role developed in response to research findings dating back to the 1930s, demonstrating that infants and children are vulnerable to the effects of healthcare experiences including developmental regression, excessive fears and altered behavioural patterns, which have been shown to persist for days to months following discharge (Thompson, 1989).

The role of a child life specialist includes active assessment of child, family, social, and health care factors to better understand the potential and current risk on a child's and family's resiliency to determine individualized interventions to promote coping and adjustment. Interventions such as play, explaining a new diagnosis in developmentally appropriate language, providing psychological preparation for procedures, incorporating self-expression activities and opportunities that encourage normalization and promote children's continued growth and development are a few examples of child life work.

While this profession only began in the late 1920s, today, there are more than 480 child life programs listed in the Child Life Council's Directory of Programs (Child Life Council, 2014), in 18 countries around the world (LeBlanc & Chambers, 2013) and are considered to be "...a quality benchmark of an integrated patient-and family-centered health care system, a recommended component of medical education, and an indicator of excellence in pediatric care" (AAP, 2014, p.1472).

While the profession has established its value within medical contexts and interprofessional teams, there is a risk to its sustainability, as there are currently no Master's programs in Child Life in Canada. While a total of 18 child life graduate programs currently exist in the United States, this number will diminish to 6 in the world by 2022 unless change occurs, as the remaining 12 only offer a

concentration in child life as part of a more general degree (e.g. within a Human Development and Family Studies graduate degree) (see Appendix 1 for a full listing of all available programs). Only Master's in Child Life Programs will be accredited. Cathy Humphreys, a current McMaster Child Life Studies Program faculty member, is co-chairing the profession's Graduate Program Accreditation Task Force.

We therefore propose to develop the flagship Master's of Science (MSc) in Child Life and Pediatric Psychosocial Care as an academic and clinical training program in Canada. The proposed program will meet the learning needs for Canadian and international students, and it will also meet the healthcare system's need for certified child life specialists with Master's level training. The proposed program includes a second stream for child life specialists already in the field that wish to upgrade their qualifications to a Master's degree. Our national survey of practicing child life specialists (see Appendix 2) indicates that 60% have an interest in pursuing an advanced degree. Accordingly, our plan is to build on our success and expertise in online education and offer much of the content in an online delivery format that will attract practicing child life specialists and health care professionals (e.g. pediatric clinical psychologists) in practice due to the flexible and accessible learning schedule and opportunity to upgrade qualifications.

In 1999, we became the first child life academic program to offer on-line course offerings. Initial online offerings were developed as professional development courses (6 weeks in length) to enhance the skills of practicing child life specialists and those of related health professionals. We received a significant number of requests to develop on-line undergraduate credit courses. Many were from those seeking university credit courses to meet child life professional certification requirements, as the availability of these offerings are limited world wide, while others were seeking specific coursework to prepare for a career in pediatric health care. In 2010, we began offering two online undergraduate level, 3.0 credit courses CHILD LS 2HC3 'The Hospitalized Child' and CHILD LS 3PP3 'Preparing the Pediatric Population for Health Care and Life Changing Events'.

We anticipated and quickly came to appreciate the significant demand for on-line child life/psychosocially-based credit courses as undergraduate electives within a variety of other educational programs and professions (e.g. Bachelor of Health Sciences, Nursing, Biology, Kinesiology, Life Sciences, Psychology, etc.) both within McMaster as well as from continuing education students outside of the university. Multiple online section/cohorts were initiated for each course, but due to limited human resources in the fall of 2013, enrollment needed to be capped at 4 sections/cohorts of 2HC3 (100 students) and 3 sections/cohorts of 3PP3 (75 students). To date, we have had online students from Canada and many other countries, including: Australia, Cayman

Islands, India, Mexico, New Zealand, the Philippines, Puerto Rico, Qatar, Singapore, and the United States of America.

With our extensive experience in online education and our international reputation as leaders in the field, we are in an excellent position to attract highly qualified applicants as we transition to a Master's program. It is apparent from the list of programs offering child life education (Appendix 1) that McMaster is the only one situated within a Department of Pediatrics, itself part of a Faculty of Health Sciences. As an allied health profession providing pediatric psychosocial support to children and families, this position within the academic organizational structure is well suited, supportive, and also appealing to new students.

The existing Child Life Studies Diploma Program will be discontinued upon initiation of this proposed Master's program, as a Master's degree will be the required pathway in the near future. The Master's program would therefore not compete with the diploma program for students, but would instead offer the appropriate education level and training, with advanced theory and clinical skills to enter the profession fully prepared.

1.2 Consistency of program with university's mission and academic plan

In September 2011, President Patrick Deane presented a new vision for McMaster University through his open letter titled *Forward with Integrity* (FWI). The Master's in Child Life and Pediatric Psychosocial Care is embedded within four of the FWI themes including *interdisciplinarity, community engagement, experiential learning and internationalization* into its core principles.

The proposed academic coursework is rooted in the values of learning from and working alongside a variety of health care professionals to deliver care in a family-centred care framework. Our interdisciplinary faculty will provide expertise across healthcare domains and our courses have the potential to be cross-listed to welcome students of a variety of academic backgrounds. The child life profession itself is one that incorporates interdisciplinary collaboration through evidence-based practice, clinical internships, curriculum and the mission, vision and value statements of the Child Life Council (Appendix 3). During the two clinical internships for Stream 1 learners in the Master's program, interns will work with clinical supervisors as well as interdisciplinary health care professionals to meet the emotional and psychosocial needs of pediatric patients and their families in a variety of settings.

This program aligns with the university's key focus in implementing experiential learning opportunities with a well-coordinated and well-connected placement service. This proposed graduate program will build on the existing model held by the current Child Life Studies diploma program,

whereby an Internship Coordinator/Clinical Educator will liaise with community and hospital partners to facilitate the student placement process (for Stream 1 learners entering the child life profession), maintain a positive relationship with each site, conduct site reviews and collaborate regarding student evaluations. Please see Appendix 4 for letters of support received from current internship partners in child life programs at major teaching hospitals, community sites and alternative settings from Nanaimo, BC through to Charlottetown PEI, and their interest in providing internship supervision to our future students. The problem-based learning format that is embedded in the academic coursework, also allows for the development of critical thinking skills, problem-solving skills, self-directed learning strategies, communication and team participation skills, to address the presented areas of study through practical application of knowledge to practice.

President Deane's Forward With Integrity document speaks to the importance of an international perspective in the University's curriculum, program design and prosecution of its academic mission. Working in healthcare today involves interactions with people of all ethnicities, languages, spiritual beliefs, socio-economic status, geographic origin, and so on. Individuals can have a long family history of residing in Canada, or be new immigrants or refugees requiring healthcare.

This program has therefore incorporated cultural competence as a core element to weave across and throughout curriculum in order to consider and plan individualized care for the diverse needs of all pediatric patients and families.

In May of 2014, an invitational International summit was held on "The State of International Pediatric Psychosocial Services: A Global Perspective on Play and Psychosocial Care for Children in Hospital" by the Child Life Council. Delegates from 45 countries were in attendance. As a member of the Child Life Council Board of Directors, McMaster faculty member Cathy Humphreys met with many delegates and learned about the strengths and challenges in their healthcare systems. While many described economic hardship in delivering healthcare within their countries, all shared a vision to provide emotional and developmental support to children, alongside medical treatment, regardless of job title.

The online format proposed for this graduate program therefore affords the opportunity to move beyond geographical boundaries and reach learners in all regions of Ontario, Canada and other countries. While some individuals abroad may not be able to pursue the full graduate degree, having the opportunity to select courses of interest online will allow for global perspectives in the delivery of psychosocial care to pediatric patients and families, and extend the reach of this theoretical and applied knowledge.

McMaster strongly supports the establishment of this new graduate program. It is highlighted in the University's Strategic Mandate Agreement (SMA) proposed to the Ministry of Training, Colleges and Universities (MTCU) in December, 2013. Under the area of program growth titled "broader determinants of health," this Master's degree is listed as one example of McMaster's "commitment to provide interdisciplinary perspectives on contemporary issues in health and society, and to build on its demonstrated success in scholarly and educational programs that study the health of individuals and society at large."

This program will also serve to support the University's identified goal to provide an increased emphasis on professional and practice-focused graduate degrees. Students in this program will develop highly specialized skills and knowledge that will prepare them for professional certification eligibility, and the ability to move quickly into a rewarding career in pediatric psychosocial care. Furthermore, the graduates will be well positioned to fulfill workplace and societal needs.

1.3 Clarity and appropriateness of program requirements and learning outcomes in meeting University's Degree Level Expectations

This proposed program will provide core theoretical knowledge with application to clinical practice in an entirely course-based format. As noted earlier, Stream 1 learners will complete two experiential clinical internships, whereas Stream 2 learners, who are already practicing in pediatric healthcare, will not. This program will address the University's degree level expectations in the following ways.

Depth and breadth of knowledge

Students will be required to demonstrate an understanding of pediatric psychosocial assessment, interventions and the ability to apply theoretical knowledge, as well as patient and family-centred care principles to diverse pediatric settings. Expectations will also include having an understanding of clinical research methodology, and the ability to incorporate evidence to improve reasoning, critical analysis and clinical decision making skills throughout coursework and in the Independent Master's project.

Students in Stream 1 will also apply theoretical knowledge in clinical internship placements and be evaluated through a child life competency based assessment tool matching the profession's competency framework. Two residency periods for both streams will enable specific sessions to build skills and capacity for clinical interventions, student presentations, and Objective Structured Clinical Examination (OSCE) station assessments.

Research and scholarship

While research will not be formally undertaken within this proposed program, students will acquire an understanding of qualitative, quantitative and mixed methods research to broaden their knowledge base and enhance their skills as research collaborators and critical thinkers. To develop skills in applying evidence to practice, students will be required to understand and critically evaluate evidence and incorporate evidence-based practice within course discussions, term papers and in their Independent Master's project.

Level of application of knowledge

Students will be expected to utilize real-time and asynchronous online discussion forums and small group work to synthesize and communicate information, discuss its application to clinical practice, and engage in scholarly debate with students and faculty. Knowledge will be evaluated through a variety of learning formats including assignments, quizzes, participation in discussions, group work and term papers to demonstrate understanding and consolidation of concepts from theory and evidence-based research to professional application in a healthcare setting. Those in Stream 1 pursuing this Master's to enter the child life profession will additionally be assessed through clinical internships and OSCE to test clinical skill performance and competence. The Independent Master's project expects students to focus the application of research in a body of literature to a specific problem or issue in the field of child life, thus contributing to the profession's body of knowledge.

Professional capacity/autonomy

As noted previously, there are currently no other Master's-level programs in Child Life in Canada, and there are only six currently offered worldwide that would meet the new graduate degree requirements for future entry into practice, as set forth by the Child Life Council. Our goal is to provide an educational environment that is attractive to diverse Canadian and International students with our unique programming, diverse faculty, course offerings and engaging online format. Students will obtain core knowledge in child life clinical practice and pediatric psychosocial care delivery that is responsive and inclusive of diverse needs. This theoretical knowledge and skills can be readily applied in pediatric clinical settings.

Stream 1 online course topics have been established to align with current practice trends, child life competencies and certification eligibility requirements. Students will additionally be supervised by a child life preceptor(s) to receive hands-on experience and clinical training through two unpaid internships that meet the guidelines as set out in the Official Documents of the Child Life Council, and also the Ministry of Labour directives on internships in university training

programs(www.ontario.ca/internshipstandards). To provide supervised learning experiences and incorporate daily modeling and observation, preceptors must have a minimum of 4000 hours of paid child life experience. This clinical supervision will be provided in-kind. Students will integrate ethical principles, psychosocial assessment and interventions reflecting the scope of child life practice. These clinical skills will be further advanced through weekly clinical skills seminars which will run concurrently during both 12 week internships.

Lifelong learning through continuing education is a requirement to maintain child life professional certification. Stream 2 will interest clinicians in practice who wish to add advanced practice skills and an awareness of research to broaden their careers, and enhance their professional development for use in re-certification at the Master's level through course work (Stream 2 learners will not need to do an internship).

Level of communication skills

There will be many opportunities for students to develop and augment their critical thinking skills through online discussions and the preparation of assignments and term papers. These tasks will allow students to develop their abilities to communicate issues, apply theory to practice, and incorporate evidence-based findings. The combination of coursework and clinical internships will enhance critical thinking skills for Stream 1 students, and provide them with the ability to analyze, consolidate information, and advocate for the pediatric patients and families in the healthcare world. The online learning format utilized will allow for both real-time and asynchronous communication with fellow classmates. Some courses are offered to both Stream 1 and Stream 2 students, which will allow for increased learning from peers already working in the field (Stream 2). The potential to cross-list courses will also open the level of interprofessional communication. The term papers, in addition to the Independent Master's project, will require students to demonstrate Master's level analysis skills, consolidation of information, and structured arguments on a specific topic in professional practice. Faculty will provide consistent evaluation and feedback to assess students' communication abilities and suggest areas for improvement to maintain academic rigor.

Program Learning Outcomes

Upon completion of the MSc in Child Life and Pediatric Psychosocial Care, both streams of students will be able to:

1. Demonstrate comprehension of research methods and the ability to critically evaluate the validity of key assumptions and evidence
2. Demonstrate ability to apply theoretical knowledge and patient and family-centred care principles to diverse pediatric health and community settings
3. Apply concepts of pediatric psychosocial assessment incorporating child, family and healthcare variables
4. Utilize effective communication strategies and documentation of pediatric psychosocial assessment and interventions to advocate for the diverse needs of infants, children, youth and families

Stream 1 students will additionally be able to:

1. Integrate knowledge of ethical principles and professional responsibility in accordance with the standards of child life professional practice
2. Demonstrate capacity to assess and develop a plan of care for pediatric patients and families that is responsive to and inclusive of diverse needs
3. Illustrate scope of child life practice through clinical internships and clinical seminars

Stream 2 students will be able to:

1. Demonstrate critical analysis and advanced practice skills through exposure to specialized topics
2. Exhibit the ability to evaluate and recommend systems to improve delivery of quality psychosocial care in pediatric settings

See Appendix 5 for a table linking program learning outcomes to DLEs, teaching activities, and GDCE program requirements.

1.4 Appropriateness of degree nomenclature

The Master's of Science in Child Life and Pediatric Psychosocial Care is the most appropriate nomenclature for the proposed program. A Master's in Child Life is the recognized degree title within the United States. The designation of a Master's of Science in Child Life and Pediatric Psychosocial Care is likely also to be recognized by the Child Life Council, the profession's North American association and certification granting body, as meeting the newly established criteria outlined for people preparing for a career as a child life specialist. The proposed nomenclature also meets academic program accreditation requirements. The inclusion of the element of pediatric psychosocial care within the program degree name also appeals to a broader spectrum of potential applicants, including those already in clinical practice. The Master's of Science in Child Life and Pediatric Psychosocial Care is therefore recommended as the most appropriate degree nomenclature.

2. Admission Requirements

2.1 Appropriateness of program's admission requirements for the learning outcomes established for completion of program

Applicants will be required to meet the admission requirements of the School of Graduate Studies:

- A four-year undergraduate degree or the international equivalent from an accredited university
- B+ average (77-79%, equivalent to a McMaster 8.5 grade point average) in the final year of undergraduate study
- Applicants whose native language is not English will be required to demonstrate proficiency in the use of the English language, as outlined in the Graduate Calendar. Similar to several other graduate programs, a minimum acceptable TOEFL (iBT) score will be 92 overall with a minimum of 22 for reading, 24 for speaking, 24 for listening and 22 for writing. Alternately an overall minimum IELTS score of 7.0 will be required.

For admission to the MSc in Child Life and Pediatric Psychosocial Care program, an applicant must also meet the criteria listed below to ensure the appropriate background and success of our learners. For those applying to Stream 1 of this program, which provides the academic and clinical preparation to enter the field of child life, applicants will also be required to demonstrate the following:

- A minimum of 100 hours of volunteer work in a child life setting;
- A minimum of two undergraduate courses in child development;
- Successful completion of the program's multiple-mini-interviews.

Stream 2 applicants must have qualifications as a child life specialist, or relevant healthcare professional (e.g. pediatric clinical psychologist).

Meeting the above minimum admissions requirements for both streams does not guarantee admission. Limited space will be available, and the admission process is expected to be competitive.

3. Structure

3.1 Course requirements

To be awarded an 'MSc in Child Life and Pediatric Psychosocial Care'; students in Stream 1 (entry to child life practice) will be required to complete 48 units full-time. This incorporates both academic course work and clinical internships. Those in Stream 2 (child life specialists seeking to upgrade or individuals from other healthcare professions who are practicing clinicians with an interest in pediatric psychosocial care) will have an option for full or part-time education to complete 27 units of course work only.

Table 1 demonstrates where there are shared core course requirements (green) for both streams, and where Stream 1 courses will also be available as elective options for Stream 2 learners (purple). Section 4.1 will provide context for this rationale.

Table 1: Green represents core courses for both streams; Purple demonstrates core Stream 1 courses that are also available as Stream 2 elective options.

Stream 1 (48units)	Stream 2 (27units)
Core Courses	Core Courses
Child Life Residency 1 1.5 units	Pediatric Psychosocial Care Residency 1 1.5 units
SGS 101 Academic Integrity and Ethics 1.5 units	SGS 101 Academic Integrity and Ethics 1.5 units
SGS 201 Accessibility for Ontarians with Disabilities act (AODA) Training 1.5 units	SGS 201 Accessibility for Ontarians with Disabilities act (AODA) Training 1.5 units
Evaluating Evidence 1.5 units	Evaluating Evidence 1.5 units
Professional Ethics 1.5 units	Professional Ethics 1.5 units
HS 702 Educational Research Methods in Health Sciences Education – 3 units	HS 702 Educational Research Methods in Health Sciences Education – 3 units
Independent Master’s Project – 3 units	Independent Master’s Project – 3 units
Child Life Residency II - 1.5 units	Pediatric Psychosocial Care Residency 11 1.5 units
Child Life Internship 1 & 11 – 12units	Current Issues in Pediatric Psychosocial Care 3 units
Clinical Skills seminar 1 & 11 – 3 units	Choice of 3 Elective Options
Child Life: Foundations of Play – 3 units	Special Topics in Pediatric Psychosocial Care 3 units
The Vulnerable Child – 3 units	The Vulnerable Child – 3 units
Pediatric Psychosocial Assessment – 3 units	Pediatric Psychosocial Assessment – 3 units
Children’s Grief, Loss & Bereavement 3 units	Children’s Grief, Loss & Bereavement 3 units
Program Planning and Evaluation – 3 units	Program Planning and Evaluation – 3 units
Children and Families in Healthcare – 3 units	Children and Families in Healthcare – 3 units
	RS 708 Reasoning and Decision Making 3 units
	RS 770 Leadership in Rehabilitation - 3 units
	Other elective(s) approved in advance by the program

3.2 Projected Intake and Enrollments

We anticipate admitting about 12 full-time and 8 part-time students each year (Table 2). At a steady state, expected by the 4th year of the program, the Child Life and Pediatric Psychosocial Care Program will have 22 full-time and 15 part-time BIU-eligible students enrolled with approximately half of the students in Stream 1 (all full time) and half in Stream 2. We assumed attrition of 1 student/year. In addition, we conservatively expect about 2 international full-time graduate students enrolled at steady state.

Table 2. Student Intake and Enrolment

	2016-17	2017-18	2018-19	2019-20
Stream 1 Full-time	10	20	20	22
Stream 2 Full-time	2	2	3	2
Stream 2 Part-time	8	16	15	15
TOTAL	20	38	38	39

Our recruitment efforts will include University fairs as students from Psychology, Life Sciences, Bachelor of Health Sciences and Child and Youth Studies undergraduate programs will be primary sources from which students may be drawn. Other recruitment efforts will take place through the Child Life Council annual conference and quarterly publication, pediatric-related conferences, the Canadian Association of Medical Education Conference as well as the Canadian Association of Child Life Leaders, and the National Association of Health Play Specialists (UK) networks. In addition, we will utilize social media such as Twitter.

3.3 Administrative, governance and communication processes

The MSc in Child Life and Pediatric Psychosocial Care will have a Director who will:

- Be selected from faculty in the Department of Pediatrics similar to all Faculty of Health Sciences (FHS) graduate programs. The Director will have a dual reporting role to the Associate Dean of Graduate Studies (Health Sciences) and to the Chair of the Department of Pediatrics.
- Ensure admission requirements and academic regulations are appropriately applied
- Work in conjunction with the program's Admissions and Advisory Committee, Department of Pediatrics Chair, the Deans, and governing bodies of the University
- Take overall responsibility for activities related to the delivery of the program such as instructional support, recruitment and evaluation
- Develop an annual report for the Department of Pediatrics and Faculty of Health Sciences

There will also be an Internship Coordinator/Clinical Educator who will:

- develop and maintain relationships with the Program's clinical internship partners
- oversee the placement of students in clinical internships that meet certification eligibility requirements
- facilitate the clinical seminar courses (1.5 units each)
- participate in student's midterm and final evaluations
- assign grades utilizing the site/rotation supervisor's recommendations

There are plans to grow the core faculty of this program along with sessional instructors to teach core and elective courses and/or facilitate a section of a course offered to both streams. Sessional instructors, who are practicing child life specialists with appropriate qualifications, will contribute and add important clinical perspectives to the program. A Program Coordinator will be hired to oversee the administration of the program and will function as the primary administrative contact for admissions, calendar changes, degree audits, in addition to the coordination and support of other administrative activities. There will also be a technology position to set up the online courses, add learning resources, manage online course enrolment, etc.

As mentioned above, there will be advisory, curriculum, admissions and student affairs committees. These will be permanent committees with clearly defined Terms of Reference to deal with specific issues of the program. Faculty who serve on committees will be able to count work towards their educational contributions.

The program curriculum committee will first approve any program and course changes. Subsequent approvals will follow the normal University order of procedure (e.g., Health Sciences Graduate Policy and Curriculum Council, the Faculty Executive Council and Graduate Council, as appropriate).

3.4 Appropriateness of program's structure and regulations to meet specified program learning outcomes and Degree Level Expectations

The MSc in Child Life and Pediatric Psychosocial Care program has been designed to provide a flexible and accessible online learning schedule for entry level students (Stream 1) and practicing child life specialists and other clinicians (Stream 2). We have conducted a review of all other Master's of Child Life programs as part of our environmental scan. Our proposed structure, length and requirements are appropriate as compared to these other programs as well as with the new certification eligibility requirements established by the profession's certifying body, The Child Life

Council. See Appendix 6 for individual comparisons.

Grades in the MSc Child Life and Pediatric Psychosocial Care program will be reported as letter grades as described in Graduate Calendar. Students must successfully complete all required courses to complete the program. The passing grade for courses will be a B-, consistent with other Master's-level courses offered by McMaster University. Clinical internships will be evaluated utilizing the internship evaluation tool established by our profession's North American association and certifying body, The Child Life Council (CLC). This tool is designed to assess skills and knowledge base reflective of the CLC Child Life Competencies and the Child Life Professional Certification Exam Classification System. It will be utilized a minimum of twice per internship to assess student progress and identify areas requiring more growth and skill development during clinical placements.

The requirement for having each stream of students attend two residency periods is important for orientation and it will provide unique opportunities for increased student observation and assessment that would not typically be available in an online program. Real-time and synchronous online sessions will also be incorporated for student engagement and evaluation.

Appendix 5 shows how specific activities in each course will permit students to achieve the degree level expectations and program learning outcomes.

3.5 Rationale for program length

All students will commence the program in the Fall term for their first of two on-campus residency periods. Students in Stream 1 (entering the child life profession) can only be registered full-time and will complete all courses and clinical internships within two calendar years. Stream 2 learners do not require a clinical internship. Full-time students in Stream 2, who are already practicing child life specialists (or other clinicians), should complete their core and elective option courses in 12 months. People who choose to be part-time in Stream 2 will have two to five years from their initial registration to complete required core and elective requirements.

Please refer to Table 3 and 4 for the program maps for full-time students in Stream 1 and 2. Table 5 maps out the program for part-time Stream 2 students.

Table 3. Stream 1 Full Time Students (24 months - 48 units)

Stream/Year of Study	Sept – Dec		Jan– April		May – August	
	Course	Units	Course	Units	Course	Units
Stream 1 (F/T) 24 months 48units						
Year 1	Child Life Studies Residency (Sept. – 1st Week)	1.5	Pediatric Psychosocial Assessment	3	The Vulnerable Child	3
	The Child & Family in Healthcare	3	Children's Grief, Loss & Bereavement	3	Child Life Foundations of Play	3
	Research Methods	3	Professional Ethics	1.5	Evaluating Evidence	1.5
	SGS 101* Academic Integrity & Ethics	1.5	SGS 201* Accessibility for Ontarians with Disabilities Act (AODA)	1.5	Child Life Studies Residency 2 (AUGUST)	1.5
Year 2	Clinical Internship #1	6	Clinical Internship #2	6	Program Planning	3
	Clinical Skills Seminar	1.5	Clinical Skills Seminar	1.5	Independent Master's Project	3

*SGS 101 and 201 could be completed in the first term and must be completed in year 1

Table 4. Stream 2 Full-Time Students (12 months - 27units)

Stream/Year of Study	Sept - Dec		Jan – April		May– August	
	Course	Units	Course	Units	Course	Units
Stream 2 (F/T) 12 months 27units						
Year 1	Pediatric Psychosocial Care Residency 1 (Sept. – 1 st week)	1.5	Professional Ethics	1.5	Evaluating Evidence	1.5
	Research Methods	3	Current Issues in Pediatric Psychosocial Care	3	Independent Master's Project	3
	Choose 1 Elective: -The Child & Family in Healthcare -Special Topics in Pediatric Psychosocial Care	3	Choose 1 Elective: -Pediatric Psychosocial Assessment -Children's Grief, Loss & Bereavement	3	Choose 1 Elective: -Special Topics in Pediatric Psychosocial Care -The Vulnerable Child -Program Planning	3
	SGS 101* Academic Integrity & Ethics	1.5	SGS 201* Accessibility for Ontarians with Disabilities Act (AODA)	1.5	Pediatric Psychosocial Care Residency (August)	1.5

*SGS 101 and 201 could be completed in the first term and must be completed in year 1

Table 5. Stream 2 Part-Time Students (24 months – 27units)

Stream/Year of Study	Sept – Dec		Jan– April		May - August	
Stream 2 (P/T) 24 months 27units	Course	Units	Course	Units	Course	Units
Year 1	Pediatric Psychosocial Care Residency 1 (Sept. – 1 st week)	1.5	Professional Ethics	1.5	Evaluating Evidence	1.5
	Research Methods	3	Current Issues in Pediatric Psychosocial Care	3	Choose 1 Elective: -Special Topics in Pediatric Psychosocial Care -The Vulnerable Child -Program Planning	3
	SGS 101* Academic Integrity & Ethics	1.5	SGS 201* Accessibility for Ontarians with Disabilities Act (AODA)	1.5		
Year 2	Choose 1 Elective: -The Child & Family in Healthcare -Special Topics in Pediatric Psychosocial Care	3	Choose 1 Elective: -Pediatric Psychosocial Assessment -Children's Grief, Loss & Bereavement	3	Independent Master's Project	3
					Pediatric Psychosocial Care Residency 2 (August)	1.5

*SGS 101 and 201 could be completed in the first term and must be completed in year 1

4. Program Content

4.1 How curriculum addresses the current state of the discipline or area of study

As noted in section 1, by the year 2022, child life learners will be required to complete a Master's degree to enter the profession and meet the profession's new certification eligibility requirements. This poses a significant risk to the child life profession in Canada and in the healthcare system acquiring certified child life specialists.

Certification eligibility requirements for the profession are already changing as part of the progressive implementation of standards to be in place by 2022. These changes considered a child life practice analysis, conducted by our professional association in 2013. The changes in curriculum content areas have been conceptualized in building the curriculum of courses within this proposal (course work in family systems, play, grief and bereavement, child life, and research) in addition to establishing the prerequisites for Stream 1 admission (a minimum of 2 child development courses, taken as an undergraduate or post-degree student, and 100 hours of volunteer experience in a child life setting). The information gathered through 2 focus groups held by child life faculty with hospital and community child life specialists (Hamilton, Oakville, Mississauga and Toronto region representatives) in 2014 (see Appendix 7) also provided insight by Ontario clinicians into curriculum content needs for entry-level child life practice. This has enabled us to accommodate the anticipated evolution of entry-level practice while providing a foundation and framework that contributes to the depth and breadth of child life and pediatric psychosocial care-based education.

The development of our program's Stream 2 curriculum carefully considered the findings of the Canadian Child Life Institute's national professional development needs survey, completed in early 2014 (see Appendix 8), as well as the McMaster University Child Life Studies Program's results of the national survey of practicing child life specialists (see Appendix 2). These surveys in our environmental scan highlighted the continuing education interests reported among practicing child life specialists that are addressed in our Stream 1 curriculum (e.g. mental health, palliative care, assessment, program planning and evaluation). We will therefore offer five of the Stream 1 courses as elective options for Stream 2 students so their studies can be tailored to their individual continuing education needs. Other health care professionals in clinical practice will also benefit from selecting course work that best addresses their educational needs and is of most relevance in enhancing their delivery of pediatric psychosocial care and practices

4.2 Course Descriptions

The following courses will be offered within this proposed Master's program. As noted in Section 3.1, some courses will be offered as core courses for those in Stream 1 (entering child life practice), and others will be offered as core or elective options for Stream 2 (those already in practice). For those courses with both entry to practice and practicing child life specialists, there are plans to create cohort/sections within these shared courses to allow for more advanced discussion questions and threads in the online forums for those in practice.

Core Courses for Stream 1 & 2

Evaluating Evidence – 1.5 units

This course explores the value of evidence to support approaches, interventions, and decision-making within a pediatric clinical environment. Students will be exposed to a range of methodological and practical considerations for interpreting and evaluating the quality of evidence and recommendations to improve pediatric clinical outcomes related to their field.

HS 702 Educational Research Methods in Health Sciences Education – 3 units

As per the agreement with the MSc Health Sciences Education Program

Students will be introduced to a range of research methods used to investigate learning and education in the health sciences. The course will introduce the major traditions including psychometrics, epidemiology, experimentation, quantitative, and qualitative methods. General research issues such as ethical research, sampling, and data collection will also be covered. Students will be asked to integrate the course material as well as their preferred or chosen tradition into existing research projects or research questions.

Independent Master's Project – 3 units

This course is designed to allow further inquiry, reflection and the development of aspects of relative professional clinical practice that cover innovative and progressive areas of thinking about specific topics/issues in the field. Students will identify a need in clinical practice or an area of selected topics of interest, examine the current evidence and propose a program or suitable intervention to address this need.

Professional Ethics – 1.5 units

This course critically examines ethical issues that arise in pediatric healthcare. The course will explicate the principles, theories and practices of ethical decision making into information and applications relevant to pediatric psychosocial care. Ethical dilemmas within standards of practice including informed consent, duty to report, professional boundaries, and ethical considerations in assessment and management of suicide risk will be examined. The course

builds on the recognition of the influences and factors that impact on traditional health care ethical decision making. Students will have opportunities for evaluation and reflection on differing views and values and how these apply to various contexts and codes of ethics.

Additional Core Courses for Stream 1 Only

Child Life Residency 1 -1.5 units

This face-to-face intensive course provides students with an overview of the program and coursework. The learning outcomes, instructional and assessment methods, and faculty of the program are introduced. An introduction to medical terminology and familiarization with health care principles and practices will be included. The history, competencies, and standards of child life clinical practice will be examined to provide a foundation from which to build knowledge and professional clinical application in remaining courses and internships.

Child Life Residency II – 1.5 units

This one week intensive course provides students with experiential learning opportunities to practice and build skills in planning, implementing, documenting and assessing developmentally appropriate child life interventions. Preparation strategies, therapeutic play, expressive activities, and non-pharmacological pain management techniques for use with the pediatric population through the literature in other courses will be further explored and applied through case studies, simulation and small group discussions. Opportunities for discussion regarding students' Independent Master's Project will be offered. This is the final of two on-site residency requirements for the program.

Child Life Internship 1 – 6units

Child Life Clinical Internship 1 provides students with the opportunity to complement their knowledge with professional skill development within the scope of child life practice in a 12-week placement, accumulating a minimum of 350 hours of supervised experience. This is the first of two internships with the purpose of providing the student with experience within a healthcare setting to develop clinical skills in accordance with the competencies outlined by the Child Life Council.

Child Life Clinical Internship 2 – 6 units

Child Life Clinical Internship 2 provides students with the opportunity to further their skill development within the scope of child life practice in a 12 week placement, accumulating a minimum of 350 hours of supervised experience. This second internship will provide the student with advanced experience within a healthcare setting OR community placement to develop professional clinical skills in accordance with the competencies outlined by the Child Life Council. Learning goals and objectives will build on strengths and areas of continued skill development from Child Life Clinical Internship 1 and may also include special interest areas of

practice when available (grief and bereavement, support groups, child advocacy, emergency medicine, etc.).

Child Life Clinical Skills Seminar 1 & 2 – 3 units (1.5 units each running in conjunction with Internship #1 and Internship #2)

Each Clinical Skills Seminar is taken simultaneously with a Child Life Clinical Internship for a 12-week period. Students will be provided the opportunity to engage in reflective practice, process experiences during placements, debrief with a lead facilitator and fellow interns, and share clinical practice information and resources through presentations and discussion. Special topic areas such as procedural support, end of life care, community resources, volunteer and intern management, interprofessional collaboration, professional boundaries, ethics and self-care will be discussed. There will be some flexibility for course sessions, as learning needs shift and change throughout the twelve weeks of internships.

Additional Core Courses for Stream 2 Only

Current Issues in Pediatric Psychosocial care– 3 units

This course will explore current topics and issues within the field of Pediatric Psychosocial care to advance clinical practice. Students will examine interrelated theories, current health trends, ethical and policy issues that shape pediatric psychosocial health care delivery. Students will explore clinical practice areas such as pediatric pain and non-pharmacological interventions, the use of technology, and provide highly developed complex clinical professional practice to children and their families.

Pediatric Psychosocial Care Residency #1 – 1.5 units

This face-to-face intensive course provides students with an overview of the program and its' courses. The learning outcomes, instructional and assessment methods, and faculty of the program are introduced. The history and evolution of pediatric psychosocial care delivery will also be examined to provide a foundation from which to build knowledge and clinical application in remaining courses. Students will also explore library resources, Avenue to Learn and other online learning resources

Pediatric Psychosocial Care Residency #2 – 1.5 units

This face-to-face course provides students with an intensive period for presentations and discussion with peers and faculty related to their Independent Master's Projects. This is the final of two on-site residency requirements for the program.

Core Courses for Stream 1/Elective Options for Stream 2

The Vulnerable Child -3 units

This course is designed to provide an understanding of the issues faced by children deemed vulnerable resulting from multiple factors including: low socio-economic status, special needs, child maltreatment, mental health disorders and acute or chronic diagnosis and illness. This course examines theoretical foundations in relation to specific areas of pediatric psychosocial delivery as well as cover definitions, classifications, incidence, social implications, and attitudes. Students will examine the relationship of resilience and models for providing interventions, resources and support for families and children.

Children and Families in Healthcare – 3 units

This course examines the theoretical nature of family systems and dynamics of family interactions with a focus on diversity, parent-child relations, sibling relationships and verbal and nonverbal communication processes, patterns, and problems in relation to healthcare. The primary focus will be investigating theory and social determinants of health, developmental concepts of illness, psychological preparation for procedures, adolescent transitions in healthcare, communicating difficult information within the developmental trajectory, and evaluation of evidence for delivering enhanced psychosocial care using a family-centered care model that is culturally sensitive and inclusive. Interprofessional teamwork and collaboration with other health care professionals will be examined.

Child Life: Foundations of Play – 3 units

This course examines and focuses on developing theoretically justified therapeutic play practices across multiple contexts. The course will offer exposure to a variety of play modalities; exploring and evaluating the developmental and therapeutic potential of therapeutic play activities and a critical evaluation of relevant research. Cultural issues that may influence children's play experiences are examined as well as global policies for children's right to play.

Pediatric Psychosocial Assessment - 3 units

This course will examine methods of assessing the psychosocial needs of children, adolescents and families in health care and community settings. Topics to be addressed include assessment of: impact of illness, injury and hospitalization on the family, social and developmental theory and concerns and identification of the variables that put the child and family at risk for negative psychological experiences and/or trauma. Course content will include: professionalism, values clarification, the development of supportive relationships with

young patients, siblings and families as a dynamic assessment practice, family assessment and interviewing skills and techniques, and documentation of practice.

Children's Grief, Loss, and Bereavement – 3 units

This course will examine major factors influencing children and adolescent's responses to loss, grief and bereavement and potential barriers in their capacity to mourn. Topics to be addressed include loss through separation and divorce, illness, hospitalization and/or death of a caregiver or sibling, and communicating with the terminally ill child. Tools and techniques in supporting children and youth within the context of family-centred care will be explored.

Program Planning and Evaluation - 3 units

This course is designed to help move beyond critical appraisal of evidence-based research to exploring methods and issues related to implementation of this evidence into practice. Students will gain knowledge in areas of assessment of needs in program or clinical care, building evidence, and exploration of implementation strategies and tools to evaluate effectiveness. Patient-reported outcome measures, conceptual frameworks, and performance indicators will be discussed. The course will also examine clinical pathways as effective methods to assist practitioners in communicating and implementing clinical best practice guidelines. Program planning and change management will also be explored.

Elective Options for Stream 2 only

Special Topics in Pediatric Psychosocial Care – 3 units (Elective for Stream 2)

This selected topics course is designed to address relevant current issues and emerging trends and findings within presented topics/issues in pediatric psychosocial care. The specific topics will be developed in response to needs identified by faculty or students.

As per the agreement with the Rehabilitation Sciences program, the following two RS courses can be considered as elective options;

RS 708 Reasoning and Decision Making – 3 units (Elective for Stream 2)

Reasoning is the process by which rehabilitation practitioners consider alternatives and make decisions on a day to day basis. Guided by relevant conceptual frameworks, participants will practice strategies such as critical reflection, narratives, and assessment of the literature and other evidence to improve their reasoning and decision-making skills.

RS 770 Leadership in Rehabilitation - 3 units (Elective for Stream 2)

This course explores principles, practices, trends and issues of leadership in rehabilitation settings. Current theories of leadership with attention to styles, practices, tasks and models will be covered. Participants will be encouraged to reflect on and analyze their own leadership experiences in light of theories studied. Through the interplay of theory and practical application, participants will gain a deeper appreciation for the requirements, responsibilities, and consequences of effective leadership. The course encourages professional and personal development through action learning that is relevant and transferable to organizations.

Other elective(s) approved in advance by the program

4.3 Unique curriculum or program innovations or creative components

The MSc program in Child Life and Pediatric Psychosocial Care will be the first of its kind in Canada, and at the time of drafting this proposal, it would be the seventh graduate program developed in this field in the world. Only one other program in the United States is offered online and only two provide education options for child life specialists in practice to upgrade. Our plans for a blended delivery model with two one-week residency periods, and opportunities for both real-time and asynchronous sessions, will provide learners with opportunities for self-directed learning, guided instruction as well as hands on application of theory to practice throughout the curriculum.

McMaster University is home to the McMaster Children's Hospital, one of the largest pediatric facilities in the country. The Department of Pediatrics physician group and allied health professionals enjoy a reputation for clinical and research excellence across the country. This proposed MSc program will enable a new concentration in pediatric specific graduate course work. Based on the level of interest and demand received among the university's students in Sciences, Life Sciences, and Health Sciences programs for current undergraduate credit courses in this area of study, interest has been expressed in having more pediatric courses developed with the continued potential for cross listing or offering our courses as elective options for other learners. Building this knowledge base of pediatric psychosocial issues will enable future clinicians and professionals to care for the whole child.

In 2014, the current child life diploma program received 125 applications for the 10 admission spots demonstrating the high demand for this type of education. Building on the history of the current program, multiple-mini interviews will continue to be utilized in the admission process. Despite the literature supporting the efficacy of this type of interview format, we remain the only child life education program to do so. We also intend to develop and implement the first OSCE assessments

utilized with child life trainees following the university's policy on OSCEs. This would occur during the second residency for Stream 1 students.

Two faculty members within the current child life academic program are near completion of their MSc in Health Science Education to allow them to fully explore the science of teaching and learning to inform the development of this program's curriculum design, assessment processes and evaluation methods. These faculty members are also currently conducting research in the area of health education with transferability to other allied health disciplines.

4.4 Nature and suitability of major research requirements

This program requires students to evaluate and utilize evidence to incorporate evidence-based practice within term papers, course discussions and in completing their Independent Master's project. Students will understand the foundations of clinical research including qualitative, quantitative and mixed methods research, engage in critical reflection, and incorporate evidence to improve their reasoning and clinical decision-making skills.

4.5 Appropriateness of courses for graduate level degrees

The proposed courses are appropriate for the MSc degree because they will cover the core knowledge base for students wishing to gain entry into the child life profession and are grounded in theory, the application of critical thinking, appraisal of evidence based research and exploring methods of implementation into practice. Similar to occupational therapy and physiotherapy, which also require a Master's level entry degree, content requirements as well as recommended indicators are necessary to meet pre-determined standards of the profession. Proposed course content therefore reflects certification eligibility requirements, as well as additional areas identified through our focus groups as pertinent to pediatric psychosocial care. Courses will include extensive readings, recorded lectures, video clips demonstrating clinical application to practice, online discussion boards and some live online tutorial sessions. Faculty will hold live online office hours to address student inquiries.

Online discussions, the preparation of assignments, term papers, an independent master's project and learning portfolios will enhance students' ability to augment critical thinking skills and communicate research ideas and evidence clearly. Examinations will be a component of each course in addition to OSCE for Stream 1 students in their second residency, as noted above.

In addition to the required coursework, students in Stream 1 pursuing certification eligibility in the child life profession will be required to complete two twelve-week internships to establish minimum entry-level competence across identified domains. These internships and competency areas will follow the criteria set forth by the Child Life Council certification committee. Students will receive a mid-term and final evaluation for both internships with the faculty Internship Coordinator/Clinical Educator.

5. Mode of Delivery

5.1 Mode of Delivery

The MSc in Child Life and Pediatric Psychosocial Care courses will be delivered using a web-based, online learning format, complemented by two residency periods; similar to other successful Master's programs at McMaster University (e.g., Master's of Health Management, Master's of Science in Health Science Education). As noted above in Section 4.3, this mode of delivery will be creative and unique in child life education. The blended delivery model with two one-week residency periods and opportunities for real-time and asynchronous on-line learning sessions will broaden the reach of this type of education and also provide flexibility for the schedules of working professionals taking Stream 2 (child life specialists or other health professionals returning to upgrade to a Master's degree, and/or pursuing further education due to an interest in pediatric psychosocial care).

Avenue to Learn (a web-based course management system) and Blackboard Collaborate/Elluminate will be utilized to facilitate interaction between students and faculty. Instructors and students can communicate and collaborate in real-time using this software to share desktops, brainstorm with the whiteboard, view presentations, etc. Weekly modules will be created and can also include a recorded lecture with readings for students to playback later. Avenue to Learn features discussion boards, an electronic Dropbox to submit assignments, an automated grade book, and a mechanism to administer quizzes/examinations.

Avenue also enables us to deliver some of the same courses to both streams of students simultaneously while dividing the cohorts into different sections for online discussion groups. The level of discussion, focus of questions and scholarly inquiry can therefore be tailored to the entry level and advanced professional.

A Course Coordinator will lead each course. Some courses may have multiple tutors to lead students through the various modules. Faculty member Allison Sohanlal is our current expert in online education with experience in designing online courses, setting up course shells within Avenue to Learn, managing online enrolment, facilitating real-time and asynchronous discussions through

Avenue and Blackboard Collaborate, etc. for our current diploma program. She has also developed online modules for the PIPER program (Program for Interprofessional Practice, Education and Research). Several other proposed faculty members have experience as online instructors as well. As previously noted, we have included a technology position within our proposed budget to add learning resources, manage online course enrolment, etc. beginning in year 2. Allison's expertise will be well utilized during our first year.

5.2 Course development and delivery

Core course development will occur over a sixteen month period. Table 6 below displays the step-wise production and delivery schedule. Once the core courses are well established and we have evaluated the effectiveness of the initial program, we anticipate developing other program-specific elective courses based on student and stakeholder feedback, and the evolution of pediatric psychosocial practices.

Table 6

MSc Child Life and Pediatric Psychosocial Care Course development and delivery schedule

Course	Course Coordinators	2015-16			2016-17			2017-18		
		Fall	Winter	Summer	Fall	Winter	Summer	Fall	Winter	Summer
Child Life Residency 1	Cathy Humphreys		Develop		Deliver			Deliver		
Pediatric Psychosocial Care Residency 1	Andrea Hunter		Develop		Deliver			Deliver		
Children and Families in Healthcare	Peter Rosenbaum		Develop		Deliver			Deliver		
Special Topics in Pediatric Psychosocial Care	Sarah Patterson		Develop		Deliver			Deliver		
Professional Ethics	Christine Wekerle			Develop		Deliver			Deliver	
Pediatric Psychosocial Assessment	Sarah Patterson			Develop		Deliver			Deliver	
Children & Families in Healthcare	Peter Rosenbaum		Develop		Deliver			Deliver		
Children's Grief & Loss	Cathy Humphreys			Develop		Deliver			Deliver	
HS EDUC 702 Educational Research Methods	Lucy Giglia				Deliver			Deliver		
The Vulnerable Child	Anne Niec				Develop		Deliver			Deliver
Child Life: Foundations of Play	Cathy Humphreys				Adapt		Deliver			Deliver
Evaluating Evidence	Wenonah Campbell				Develop		Deliver			Deliver
Independent Master's Project	Mark Ferro				Develop		Deliver			Deliver
Child Life Residency 11	Cathy Humphreys				Develop		Deliver			Deliver
Pediatric Psychosocial Care Residency 11	Sarah Patterson				Develop		Deliver			Deliver
Child Life Internship	Allison Sohanlal				Liaise with Internship Sites			Deliver	Deliver	
Clinical Skills Seminar 1	Allison Sohanlal					Adapt		Deliver		
Clinical Skills Seminar 2	Allison Sohanlal					Adapt		Deliver		
Current Issues in Pediatric Psychosocial Care	Sarah Patterson			Develop		Deliver			Deliver	

Assessment of Teaching and Learning

6.1 Appropriateness of proposed methods for instruction and assessment of student achievement for intended Program Learning Outcomes

The diverse slate of core and elective courses, clinical internships and clinical skills seminars (for Stream 1 only), independent master's project, portfolios, and course assignments will ensure students achieve the defined learning outcomes at the level of a Master's degree. Student performance in each of these curriculum elements will be assessed through a combination of course-assessment tools and clinical evaluation methods. Please see Appendix 6 for the curriculum map.

6.2 Plans for documenting and demonstrating the level of performance of students

Student success in achieving course level learning outcomes will be monitored on a course-by-course basis by faculty using a variety of assessment methods to evaluate comprehension and integration of course materials as per the learning outcomes. Course assignments, term papers, examinations, participation in online discussions, etc. will be used to document performance. Students will also maintain a portfolio to plan and track their learning and achievement of competencies. Standard processes will be followed related to failed courses with the possibility that a student who has failed may need to pay for an additional semester of study to complete program requirements.

Students in Stream 1 will also be evaluated throughout their two clinical internships. Formal evaluations will be generated with the internship evaluation tool during week 6 (midterm) and 12 (final) of their rotations. The program's Internship Coordinator/Clinical Educator will assign the grades for these evaluations, after meeting with each student and his/her clinical supervisor. The Internship Coordinator/CLE will also facilitate a clinical skills seminar during both internships to further promote clinical competence and augment theory to practice.

6.3 Evaluation of the program

Courses and faculty members who teach within the MSc Child Life and Pediatric Psychosocial Care program will be assessed each semester, utilizing the course and instructor evaluation tools developed in the Health Sciences Graduate Studies Office to obtain anonymous feedback from students. Each domain (e.g. organization and preparedness), and the overall effectiveness of the instructor, will be scored on a 7-point scale ranging from 1 (poor) to 7 (excellent). Any open-ended comments/feedback will be collated and individual summaries will be provided to each instructor. Cyclical program evaluations will occur to examine the admissions criteria, assessment practices, etc. We will also survey learners and conduct focus groups as they exit the program and maintain statistics on child life professional certification exam pass rates, and employment rate data on

graduates. Surveys of graduates and employers will also be conducted to evaluate the quality of the program.

Resources for Programs

7.1 Administrative unit's planned utilization of existing human resources, physical and financial resources and any institutional commitment to supplement the resources

Faculty

The MSc in Child Life program will draw upon three 0.75 FTE core child life faculty to commence the program, as well as sessional instructors, with plans to expand faculty FTEs and sessional instructions yearly. Other faculty members within the Department of Pediatrics and Faculty of Health Sciences may lead sessions or modules in a team based approach to course delivery. Table7 includes core and sessional child life faculty members.

Table 7

Faculty Member Name	Rank	Home Department	Degree & University
Rosenbaum, Peter	Professor	Pediatrics and Rehabilitation Science <i>CanChild</i> Centre for Childhood Disability Research	B.Sc (McGill) MD,CM (McGill)
Ferro, Mark	Assistant Professor	Psychiatry and Behavioural Neurosciences and Pediatrics	MSc (Saskatchewan) , PhD (Western)
Wekerle, Christine	Associate Professor (Part-time)	Pediatrics Offord Centre for Child Studies	BSc (Toronto), MA (Western) PhD (Western)

Faculty Member Name	Rank	Home Department	Degree & University
Campbell, Wenonah	Assistant Clinical Professor	Rehabilitation Science CanChild	BA (Acadia), MSc. (Dalhousie), PhD (Western)
Humphreys, Cathy	Assistant Clinical Professor	Pediatrics	BASc(Guelph), CLSt. Dipl. (McMaster), MSc (McMaster2015)
Patterson, Sarah	Assistant Clinical Professor	Pediatrics	BA (Carleton), MSc (Illinois State)
Sohanlal, Allison	Assistant Professor	Pediatrics	BA (Guelph), MS (Wheelock) MSc (McMaster 2015)
Andrea Hunter	Associate Clinical Professor	Pediatrics	BSc & BPHE (Queens) MD (McMaster) DTM&H (London)
Lucy Giglia	Associate Clinical Professor	Pediatrics	BSc (Waterloo), MD (McMaster), MSc (Toronto)
Anne Niec	Professor	Pediatrics	BSc (Windsor), MD (Toronto)
Anne Klassen	Associate Professor	Pediatrics and Clinical Epidemiology and Biostatistics	BA (Waterloo), DPhil (Oxford)
Christina Grant	Associate Professor	Pediatrics	BSc (Bishops), MD (McMaster)
Ceilidh Eaton Russell	Sessional Instructor		BA (McMaster), CLSt. Dipl (McMaster), MSc (Guelph), PhD in progress
Miller, Jessica	Sessional Instructor		BA (Western), MA (Ryerson)

Faculty Member Name	Rank	Home Department	Degree & University
O'Leary, Kim	Sessional Instructor		BA (Ryerson), MEd (Toronto)

Financial Resources

We anticipate that the program will be funded through the BIU grant from the Ministry of Training, Colleges and Universities (MTCU), and student tuition as set by the Program with approval from the University. It has also been arranged that the first year deficit will be covered by the Department of Pediatrics and Faculty of Health Sciences.

Table 8 compares the tuition costs and scholarship availability for the six Master's in Child Life programs in the United States. Their tuition costs are significant and place a large burden on aspiring Canadian child life specialists who will, on average, *progress* to make approximately \$60,000 maximum per year in salary after several years of clinical work. The salary predictions are based on recent Canadian salary comparisons received from the Canadian Association of Child Life Leaders Child Life Compensation Survey, which was completed in February 2012.

Table 8 Comparison of Tuition costs with other Master's in Child Life Programs

Program Name	Degree Type	Tuition Fee	Scholarship Availability
Wheelock College Boston, MA	MS in Child Life and Family Centered Care MS in Child Life and Family Centered Care: Advanced Standing MS in Child Life and Family Centered Care: Combined Degree (direct entry from their undergrad program)	39 credits x \$990/credit hour = \$36,610 36 credits x \$990/credit hour = \$35,640 27 credits x \$990/credit hour = \$26,730	Students are eligible for entry scholarships
Bank Street College New York, NY	MS in Child Life	43 credits x \$1400/credit = \$60,200	Students are eligible for scholarships
College of Charleston Charleston, SC	MS in Child Life	42 credits x \$484 for in-state students = \$20,328 42 credits x \$1263 for out-of-state students = \$53,046	Students are eligible for scholarships
Loma Linda University Loma Linda, CA	MS in Child Life Specialist	72 units (quarter credits) x \$732 per unit = \$52,704	Students are eligible for scholarships
University of LaVerne LaVerne, CA	MS in Child Life	36 credits x \$660 per semester hour + additional fees = \$23,760 (calculated with credits under assumption that is equivalent to semester hour noted in fees)	Students are eligible for scholarships
Towson University	MS Child Life, Administration and Family Collaboration	\$8,568 for full-time in-state residents x 2 years = \$17,136.00 \$15,588 for full-time out-of-state residents per year x 2 years = \$31,176	Graduate Assistantships available

We therefore propose a more modest tuition of \$7,500 for full-time, Stream 1 students, plus a \$1,500 internship fee. This is in keeping with the required resources to organize, supervise and evaluate the clinical internship portion of the program per term fee totalling \$9,000.

Stream 2 of this proposed program does not require an internship or clinical skills seminars and needs fewer units (27units compared to 48units) as the target population for this stream are child life specialists already in practice wishing to upgrade. They will have therefore already completed their internship hours to achieve certification eligibility and will therefore not be required to pay the additional internship fee.

As mentioned earlier within this report, there is interest among international colleagues (e.g. pediatric clinical psychologists) to expand pediatric psychosocial care in their countries, but there is limited access to further training. We therefore recommend incorporating post-degree fees, as per the graduate calendar, for students not pursuing the full degree. A maximum of three courses can be taken by non-degree seeking students, before they need to enrol in the program.

Space Requirements

The courses in the MSc Child Life and Pediatric Psychosocial Care program will be offered entirely online with the exception of two, one-week residency periods. Students can be based primarily off campus, and therefore the program will not require any additional space for students, except for the use of student rooms, meeting rooms, and physical library resources during residency weeks in September and August of each year. One office space is in use for the current diploma program. Additional office space requirements will be provided by the Department of Pediatrics.

7.2 Participation of a sufficient number and quality of faculty who are competent to teach and/or supervise in the program

Core faculty listed in Table 7 will contribute to course development and curriculum, and will teach the program. Teaching and facilitating within each course are team based, which will distribute the teaching amongst the group of faculty and not substantially affect the demands on the core faculty who teach in other programs. Many of the core program faculty members include individuals who have experience supervising graduate students (course-based and thesis based), and teaching graduate courses at McMaster. Several proposed faculty members will be brought forward by the Department of Pediatrics for graduate faculty status. In addition to core faculty, other members in the Department of Pediatrics may participate in the program as occasional guest lecturers, OSCE examiners, and other roles. These individuals will contribute in kind without cost to the University.

Additional faculty will be recruited to the Department of Pediatrics between years 2 to 5. This will enable sufficient support to develop and expand elective course options, and facilitate sections of courses throughout the curriculum.

7.3 Evidence of adequate resources to sustain the quality of scholarship produced

Faculty and staff will connect to existing FHS/McMaster IT systems (e.g. email, MacConnect Wi-Fi, learning management systems and the library) with no noticeable impact on capacity. Online courses and program specific information will be posted through Avenue to Learn and/or Blackboard Collaborate including academic resources (e.g. electronic articles) providing an accessible format for learners. Students will also have online access to the university's libraries, enabling straightforward access to supplementary research evidence for their weekly discussion posts, term papers and assignments.

Faculty will also hold weekly online office hours so students can speak directly with a course coordinator to address questions and receive mentorship in their scholarly inquiry and understanding.

Resources for Graduate Programs

8.1 Plans for adequate numbers of faculty and staff to achieve program's goals

Faculty members possess either a PhD, MSc an MD in combination with an MSc, or an MD with exemplary clinical expertise and research qualifications. This combination of professional and scholarly expertise will be adequate to sustain the program and foster an appropriate intellectual climate.

Teaching in the Child Life and Pediatric Psychosocial Care program will count toward faculty members' teaching loads with units sufficient to encourage faculty members to participate in the online courses.

Each course will be co-developed by faculty who are experts in various areas of the course's content. Each content expert will develop a section of the course in his or her area of expertise and other members of the development team may also teach/tutor sections of the course. Other faculty may be recruited to teach by the faculty course coordinator. Table 9 lists the faculty members tentatively responsible for coordinating the development of each course.

Table 9

Course	Course Coordinator
Child Life Residency 1- 1.5 units	Cathy Humphreys
Pediatric Psychosocial Care Residency 1 - 1.5 units	Andrea Hunter
The Vulnerable Child 3 units	Anne Niec
Child Life: Foundations of Play 3 units	Cathy Humphreys
Program Planning & Evaluation 3 units	Anne Klassen
Pediatric Psychosocial Assessment 3 units	Sarah Patterson
Children and Families in Healthcare 3 units	Peter Rosenbaum
Children's Grief and Loss 3 units	Cathy Humphreys
Educational Research Methods in Health Sciences Education 3 units	Lucy Giglia * see note below *
Professional Ethics 1.5 units	Christine Wekerle
Evaluating Evidence 1.5 units	Wenonah Campbell
Independent Master's Project – 3 units	Mark Ferro
Child Life Studies Residency II 1.5 units	Cathy Humphreys

Course	Course Coordinator
Pediatric Psychosocial Care Residency 11 – 1.5 units	Sarah Patterson
Child Life Internship 6 units	Allison Sohanlal
Clinical Skills Seminar 1 1.5 units	Allison Sohanlal
Clinical Skills Seminar 2 1.5 units	Allison Sohanlal
Current Issues in Pediatric Psychosocial Care 3 units	Sarah Patterson
Special Topics in Pediatric Psychosocial Care 3 units	Sarah Patterson

The Master’s of Science in Health Science Education program’s HS 702 “Educational Research Methods in Health Science Education” course has been included in the chart above. Please refer to Appendix 10 for the letter of agreement that supports having this course cross listed. This agreement includes having faculty involvement in moderating discussion boards and grading our students’ assignments. A faculty member has therefore been assigned as course coordinator to fulfill this particular role.

8.2 Evidence that faculty research supervisors have ongoing funding, space and relevant research infrastructure to support students in program

The MSc in Child Life and Pediatric Psychosocial Care is a course-based program without a thesis component. Students will therefore not impact research space, funding or infrastructure.

8.3 Evidence of prior experience in graduate teaching and research supervision for faculty

Most of the proposed faculty members have experience teaching at the graduate level within Medical Education, Global Health, Rehab Sciences, Medical Sciences, Health Research

Methodology and Nursing programs. The remaining faculty members currently in the post-baccalaureate Child Life Studies diploma program; all similarly have experience teaching, providing independent study advisement, clinical supervision and acting as student advisors to post-degree students.

Several faculty members also have experience providing research supervision to graduate students across McMaster in the aforementioned programs in addition to Life Sciences, as well as providing research supervision to students at other universities in Canada and abroad (e.g. University of Toronto, University of Oxford, University of Utrecht, University of Witwatersrand).

Quality and Other Indicators

9.1 Definition and use of indicators that provide evidence of quality of the faculty

This proposed faculty bring clinical and research expertise (including papers and book chapters) in the areas of childhood disability, resilience, family-centred care, family well-being and service delivery, quality of life, child maltreatment, cultural competence, knowledge translation, developmentally focused care for infants and children experiencing prolonged hospitalization, psychosocial determinants of mental health, therapeutic and expressive play interventions, and methods to prepare children and families for health care and stressful life events. All of these topics will provide a core foundation for curriculum development.

Faculty members also bring exemplary scholarly experience and awards such as:

- National Health Research Scientist Award (Health and Welfare Canada)
- Ross Award (Canadian Paediatric Society)
- Honorary Doctor of Science, Université Laval
- Anne E. Dyson Child Advocacy Award (American Academy of Pediatrics).
- Lifetime Achievement Award, American Academy for Cerebral Palsy and Developmental Medicine
- Distinguished Service Award (Easter Seals Society)
- Fredrick Banting and Charles Best Canada Graduate Scholarship Doctoral Award, CIHR
- Brain Star Award, Institute of Neurosciences, Mental Health and Addiction, CIHR
- Young Investigator Award, American Epilepsy Society
- Research Early Career Award from Hamilton Health Sciences
- Faculty Teaching Awards (McMaster University)
- McMaster Graduate Faculty Excellence in Supervision Award

- Paediatric Chairs of Canada Paediatric Academic Leadership – Clinical Investigator Award
- New Investigator Award (5 yr award), CIHR
- Ontario Women's Health Council /CIHR IGH Mid-Career Award
- PAIRO Educator Travel Award
- Canadian Association for Medical Education Certificate of Merit Award
- Outstanding Preceptor (clinical supervisor) Teaching Award (Michael DeGroote School of Medicine, McMaster University)
- Ari Shali Teaching Award (Michael DeGroote School of Medicine, McMaster University)
- BoscoPaes Award for outstanding contributions to education in the pediatric residency program (McMaster University)
- Teaching Excellence Award (Associate Faculty Category), Department of Clinical Epidemiology and Biostatistics, McMaster University

Proposed faculty members also hold sizeable research grants to further their research endeavours in multiple aspects of child health, childhood disability, mental health, promoting resilience, health related quality of life, and outcome measures.

Two members of this faculty group also remain highly involved within the child life community and are well known for their clinical work, scholarly contributions and committee and task force work (either as a member or Co-Chair) within the Child Life Council. Faculty member Cathy Humphreys has been President of the Canadian Association of Child Life Leaders twice, has been an active member of the Child Life Council Board of Directors (North American) for several different terms, and involved in the profession's strategic planning endeavours. Allison Sohanlal has been instrumental in the development of the profession's childlife internship accreditation process and now serves on the Child Life Council Internship Accreditation Oversight Committee. This involvement has enabled the faculty not only to remain abreast of new changes within child life practice and policy, but also has enabled participation in the strategic direction and development. This has continued to place McMaster at the forefront of child life practice and education.

Several proposed faculty also have international experience due to their clinical expertise providing consultation in the development of pediatric programs. Andrea Hunter, for example, is the Co-External Program Director for a pediatric residency program in Georgetown, Guyana providing curriculum development and acting as a visiting lecturer/examiner. Sarah Patterson and Allison Sohanlal have been actively involved in providing consultation in the development of a pediatric hospital in Doha, Qatar. This has included visiting lectures for pediatric staff on non-pharmacologic

pain management techniques, and mentorship in the building of Qatar's first child life clinical program. Peter Rosenbaum, faculty and steering committee member, holds a Tier 1 Canada Research Chair in Childhood Disability Research, Dissemination and Mentoring and is highly recognized for his collaboration with and mentorship of colleagues and students abroad in the area of childhood disability. As Co-Founder of *CanChild* Centre for Childhood Disability Research, he is also recognized as a global leader for his research and knowledge translation activities. All of these accomplishments point to the quality and merit of the faculty proposed and their capacity to deliver an exemplary program.

9.2 Evidence of a program structure and faculty research that will ensure the intellectual quality of the student experience

The research and infrastructure within the Department of Pediatrics allows for student access and exposure to a diverse interdisciplinary faculty, and world renowned research and knowledge translation centres. The involvement of this presented interdisciplinary faculty will bring heightened awareness to the importance of interprofessional collaboration in caring for the health and well-being of infants, children, youth and their families. It also exemplifies the value and importance of a patient and family-centred approach within healthcare, and honours the UN Convention on the Rights of the Child, highlighting children's rights to expression, information, to make decisions, and to play.

Consultation Process

10.1 Description of the consultation process undertaken during the development of the proposal

A number of internal and external consultations were held in the development of this proposal. The following provides a summary of these activities;

- Review of 2013 child life practice analysis through the Child Life Council
- Exploration of new certification eligibility requirement course work and planning ways to map these requirements throughout the new proposed curriculum
- Needs assessment on professional development interests for practicing child life specialists, conducted by the Canadian Child Life Institute in 2014
- Survey of practicing Canadian child life specialist's related to graduate education, conducted by McMaster's Child Life Studies Program
- Internal consultation with;
 - the Department of Pediatrics
 - the School of Rehabilitation Sciences

- the Health Sciences Education Program
- the Associate Dean of Graduate Studies of the Faculty of Health Sciences
- the Dean of the School of Graduate Studies
- the Associate Vice-President (Academic) of the Faculty of Health Sciences
- Education Services
- the Associate Registrar and Graduate Secretary
- the McMaster Institute for Innovation and Excellence in Teaching and Learning
- An international environmental scan obtained through discussions with international summit attendees at the Child Life Council International Summit on Pediatric Psychosocial Care
- An environmental scan of other similar programs offered in the United States
- Two focus groups, facilitated by faculty of the Child Life Studies Program, with hospital and community based child life specialists (participants were from the Hamilton, Oakville, Mississauga and Toronto regions) to assess the top content area needs for curriculum development based on clinical practice and to gather data to assist in developing program outcomes
- External consultation with child life internship partners who provided letters of support to continue our relationship as partners in a graduate program structure

Appendix 1

Current Master's Level Programs Providing Child Life Education

The following 6 institutions offer an MS in Child Life;

- Bank Street College of Education (New York, NY) - Graduate School of Education
- Wheelock College (Boston, MA) - a private education based college
- University of La Verne (La Verne, CA) – College of Education and Organizational Leadership, Dept. of Advanced Studies in Education & Human Development
- *Loma Linda University (Loma Linda, CA) – Department of Counseling and Family Sciences, School of Behavioral Health*
- College of Charleston (Charleston, SC) –The Graduate School of the College of Charleston
- Towson University (Towson, MD) – MS in Child Life Administration & Family Collaboration, Dept. of Family Studies & Community Development, College of Liberal Arts

There are 12 other Master's level programs that offer a child life concentration or emphasis within the following graduate degree areas;

- Mills College (Oakland, CA) MA in Early Childhood Education with a Concentration in Child Life in Hospital
- Colorado State University (Fort Collins, CO) MS in Human Development & Family Studies with a concentration in Child Life
- University of Georgia (Athens, GA) MS in Child & Family Development with a concentration in Child Life
- Erickson Institute (Chicago, IL) MS in Child Development with a Child Life specialization
- Ohio University (Athens, OH) MS in Child & Family Studies with a concentration in Child Life, Dept. of Social and Public Health
- Texas State University (San Marcos, TX) MS in Family & Child Studies with a Child Life Specialist Track
- University of Akron (Akron, OH) MS in Family & Consumer Sciences: Child Life Specialist
- Springfield College (Springfield, MA) MA in Therapeutic Recreation Services with a Child Life option
- University of Missouri (Columbia, MO) MA or MS in Human Development & Family Studies with a concentration in Child Life
- Illinois State University (Normal, IL) MS in Family and Consumer Sciences with a concentration in Child Life
- University of Pittsburg (Pittsburg, PA) MS Applied Developmental Psychology with a Child Life option
- University of Utah (Salt Lake City, UT) MS in Human Development & Social Policy with Child Life Track

Appendix 2
McMaster University Child Life Studies Program
National Survey Summary of Practicing Child Life Specialists

This survey was distributed to practicing child life specialists in July 2014. Questions were designed to gauge potential interest in participant's acquiring their Master's degree, as well as their views, and opinions on how this proposed Master's should be designed and delivered.

Survey population and responses

- Child Life Specialists were surveyed between July 14, 2014 and July 26, 2014. Surveys were distributed to child life clinical leaders who were asked to distribute the survey to child life staff within their programs
- A total of 40 Canadian child life specialists completed the survey

Respondent details

1. As a practicing child life specialist, would you be interested in pursuing a Master's Degree?
 - 60% said yes
 - 17.5% said no
 - 22.5% were unsure

The comments provided for those indicating they were not interested in pursuing a Master's Degree was because they already had a Master's degree in a related field or were close to retirement.

2. Would you prefer that classes be held:
 - 72% said online
 - 21% said through a combination of online and on campus courses
 - 23% were unsure
3. Would you pursue a Master's degree that is:
 - 97.5% said part time
 - 2.5 said full time
4. What type of course content is important to include in a Master's program for those already working in the field?
 - 90% said Leadership in Healthcare
 - 85% said Issues in Clinical Practice
 - 77.5% said Research Methods
 - 67.5% said Grief, Loss and Bereavement
 - 67.5% said Program Planning and Evaluation

- 62.5% said Psychosocial Assessment

5. What content would be most valuable to include in a Master's program for those just entering the child life profession given your experience in the field?

- 90% said Psychosocial Assessment
- 75% said Preparing the Pediatric Patient
- 75% said The Hospitalized Child
- 75% said Grief, Loss and Bereavement
- 57.5% said Continuum of Play
- 50% said Research Methods

Appendix 3 Child Life Council Mission, Vision, Values

<http://www.childlife.org/The%20Child%20Life%20Profession/ProfessionMissionVisionValuesPositionStatements.cfm>

Mission Statement

We, as child life professionals, strive to reduce the negative impact of stressful or traumatic life events and situations that affect the development, health and well-being of infants, children, youth and families. We embrace the value of play as a healing modality as we work to enhance the optimal growth and development of infants, children and youth through assessment, intervention, prevention, advocacy, and education.

Values Statement

We, as child life professionals, value:

Infants, Children, Youth and Families

We recognize the diversity of individual and family strengths and needs, acknowledging their support systems and community links. We promote individual and family integrity, development, and well being by embracing the concepts of family-centered care.

Play

Play is an essential, natural part of childhood, important in its own right. Play facilitates healing, coping, mastery, self-expression, creativity, achievement and learning, and is vital to a child's optimal growth and development. Play is an integral aspect of child life practice with infants, children and youth of all ages.

Therapeutic Relationships

We are committed to relationships built on trust, respect and professional competence which contribute to the development of confidence, resilience, and problem-solving skills that enable individuals and families to deal effectively with challenges to development, health and well-being.

Communication

Infants, children and youth communicate their needs through words, play and behavior. We are committed to enabling all forms of communication. We accomplish this by observing, listening and facilitating communication with those who may be misunderstood or needing support in order to be heard. Written documentation of child life assessments, interventions and evaluation of outcomes is an essential aspect of our practice.

Theoretical Foundations of Practice

Knowledge and application of our foundations in theories of child development, play, stress and coping, and family systems are the basis for our professional practices.

Professional Collaboration

The shared and reciprocal efforts of individuals, disciplines, organizations and communities are an effective means of meeting the diverse needs of infants, children, youth and families. Child life practice includes professional collaboration, as well as commitment to the education, supervision and mentoring of novice child life professionals.

Professional Standards of Practice

The commitment to excellence and integrity in our professional practices involves lifelong learning, adherence to our code of ethics, and the development and support of educational and training programs based upon defined clinical competencies.

Research

Research is a fundamental tool of inquiry to guide our practices and interventions, and strengthen and promote our profession. Child life professionals have a responsibility to maintain a current understanding of research findings and participate in research that examines our practices.

Vision Statement

The profession of child life will continue to meet the needs of infants, children, youth and families in times of stressful or traumatic life events and situations. The philosophy and practice of child life will be applicable to any health care setting and transferable to other environments or situations in which the potential for infants, children and youth to cope, learn and master is placed at risk. The services provided by the child life profession will be holistic and will utilize applied child development and family systems theory. The objectives of such services will be to minimize the negative impact of situational disruptions while maintaining individual growth and development and family relations

Appendix 4

Clinical Internship Letters of Support

1. Calgary Consortium
 - a. Alberta Children's Hospital
 - b. Rotary Flames House
 - c. Sheldon Kennedy Advocacy Centre
 - d. Ronald McDonald House Alberta
2. BC Children's Hospital
3. Children's Hospital of Eastern Ontario
4. Grand River Hospital
5. Humber River Hospital
6. IWK Health Centre
7. London Health Sciences Centre – London Children's Hospital
8. McMaster Children's Hospital
9. Max & Beatrice Wolfe Children's Centre – Mt. Sinai Hospital
10. Nanaimo Regional General Hospital
11. Queen Elizabeth Hospital
12. Rouge Valley Hospital
13. The Hospital for Sick Children
14. Trillium Health Care - Credit Valley Hospital
15. Trillium Health Care - Mississauga General Hospital
16. Windsor Regional Hospital
17. Winnipeg Health Sciences Centre

*Please see separate document titled [Appendix4 Clinical Site Letters of Support.doc](#)

Appendix 5
Statement on Expectations for a Master’s Degree

The numbers in the second column of this chart denote the following Master’s Level Degree Expectations;

1. Depth and Breadth of Knowledge
2. Research and Scholarship
3. Level of Application of Knowledge
4. Professional Capacity/Autonomy
5. Level of Communication Skills
6. Awareness of Limits of Knowledge

Core Outcomes (Both Streams)

Program Learning Outcomes	Master’s Level Degree Expectations	MCL Teaching Activities and Learning Opportunities	MCL Assessment and Evidence
Demonstrate comprehension of research methods and the ability to critically evaluate the validity of key assumptions and evidence	1, 2, 3	Child Life Residency II Educational Research Methods in Health Science Education (MSchSEd) Program Planning & Evaluation Knowledge Translation Course Evaluating Evidence	Course assessment tools (assignments, papers, participation in discussion forums) Final knowledge translation project/paper and presentation Focus on providing students with knowledge of research methods and applicability of major projects based in professional practice topics with the goal of academic coursework and experiential learning contributing to the field of child life and pediatric healthcare

<p>Demonstrate ability to apply theoretical knowledge and patient and family centered care principles to diverse pediatric health and community settings</p>	<p>1, 4, 6</p>	<p>The Vulnerable Child Children and Families in Health Care Program Planning and Evaluation Child Life Clinical Internship 1 & 2 Child Life Clinical Seminar 1 & 2 Knowledge Translation Course Child Life: Issues in Clinical Practice Current Issues in Pediatric Psychosocial Care Professional Ethics</p>	<p>Course assessment tools (assignments, papers, participation in discussion forums) Final knowledge translation project/paper and presentation Clinical internship evaluations Clinical Seminar presentations Professional portfolio</p>
<p>Apply concepts of pediatric psychosocial assessment incorporating child, family and healthcare variables</p>	<p>1,3,4,5</p>	<p>Pediatric Psychosocial Assessment The Vulnerable Child Child Life Clinical Internship 1 & 2 Child Life Seminar 1 & 2 Children's Grief Loss & Bereavement</p>	<p>Course assessment tools (assignments, papers, participation in discussion forums) Clinical internship evaluations Professional portfolio</p>
<p>Utilize effective communication strategies and documentation of pediatric psychosocial assessment</p>	<p>1,3,4,5,6</p>	<p>Child Life Residency I & II The Vulnerable Child Children and Families in Healthcare</p>	<p>Course assessment tools (assignments, papers, participation in discussion forums) Residency periods allow for the use of</p>

<p>and interventions to advocate for the diverse needs of infants, children, youth and families</p>		<p>Child Life: Foundations of Play</p> <p>Pediatric Psychosocial Assessment</p> <p>Child Life Internship 1 & 2</p> <p>Child Life Seminar 1 & 2</p> <p>Child Life: Issues in Clinical Practice</p> <p>Current Issues in Pediatric Psychosocial Care</p>	<p>TOSCE's and OSCE's for pre and post evaluation of skill sets and knowledge base</p> <p>Professional portfolio</p> <p>Knowledge translation project/paper and presentation</p> <p>Students will be encouraged to advocate for their own learning needs and participate regularly in online sessions to build their capacity for personal responsibility and accountability</p>
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Stream 1 Outcomes

Program Learning Outcomes	Master's Level Degree Expectations	MCL Teaching Activities and Learning Opportunities	MCL Assessment and Evidence
Integrate knowledge of ethical principles and professional responsibility in accordance with the standards of child life professional practice	1,4	Child Life Residency I Child Life Residency II Child Life Seminar 1 & 2 Professional Ethics	Course assessment tools (assignments, papers, participation in discussion forums)
Demonstrate capacity to assess and develop a plan of care for pediatric patients and families that is responsible to and inclusive of diverse needs	1,2,4,6	The Vulnerable Child Children and Families in Healthcare Pediatric Psychosocial Assessment Children's Grief, Loss and Bereavement Child Life Internship 1 & 2 Child Life Seminar 1 & 2	Course assessment tools (assignments, papers, participation in discussion forums) Professional portfolio Child Life Seminar assignments and presentations
Illustrate scope of child life practice through clinical internships and clinical seminars	1,3,4,5	Child Life Internship 1 & 2 Child Life Seminar 1 & 2 Clinical field experience (minimum 600 hours) supervised by preceptor and	Written journals Interdisciplinary and experiential learning through two 10 week clinical internship opportunities to apply knowledge from coursework to

		<p>academic supervisor</p> <p>Opportunities for reflective practice</p>	<p>healthcare and community settings.</p> <p>Clinical evaluation using a competency based assessment tool specific to the field of child life matching the competency framework of the Child Life Council and child life certification exam.</p> <p>Competency based assignments</p> <p>Therapeutic activity plans</p> <p>Completion of professional portfolio</p> <p>Clinical seminar attached to clinical internship allows for additional reflection as well as application of topics such as professionalism, ethics, decision-making and sharing of knowledge from a variety of clinical settings.</p>
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Stream 2 Outcomes

Program Learning Outcomes	Master's Level Degree Expectations	MCL Teaching Activities and Learning Opportunities	MCL Assessment and Evidence
Demonstrate critical analysis and advanced practice skills through exposure to specialized topics	1,2,3,4	Child Life Residency I Child Life Residency II Child Life: Issues in Clinical Practice Current Issues in Pediatric Psychosocial Care Evaluating Evidence	Course assessment tools (assignments, papers, participation in discussion forums) Use of TOSCE's to evaluate interdisciplinary teamwork Residency presentations
Exhibit the ability to evaluate and recommend systems to improve delivery of quality psychosocial care in pediatric settings	2,3,4,6	Child Life Residency II Child Life: Issues in Clinical Practice Knowledge Translation Evaluating Evidence	Course assessment tools (assignments, papers, participation in discussion forums) Final project/paper and presentation

Appendix 6
Comparison of Other Master's in Child Life Graduate Degree Programs

University	Overview	Courses	Practicum
<p>Wheelock College Boston, MA</p>	<p>M.S. Child Life and Family Centered</p> <p>-non thesis degree</p> <p>MS Child Life and Family Centered Care: Advanced Standing</p> <p>-non thesis degree</p> <p>MS Child Life and Family Centered Care: Combined Degree (direct entry from their undergrad program)</p> <p>-non thesis degree</p>	<p>-9 core courses (27 credits)</p> <p>- electives (12 credits)</p> <p>-7 core courses (21 credits)</p> <p>- electives (15 credits)</p> <p>-3 core courses (9 credits)</p> <p>-electives (18 credits)</p>	<p>-Clinical internship and seminar (6 credits)</p> <p>(600 hour internship)</p> <p>-Clinical internship and seminar (3 credits) (200 hour internship)</p> <p>-optional clinical internship and seminar II (3 credits)</p>
<p>Bank Street College New York, NY</p>	<p>MS in Child Life</p> <p>- 20 months for FT</p> <p>-available online or on campus</p> <p>-independent master's project or thesis option</p> <p>-on campus attendance</p>	<p>-12 core courses</p> <p>- 4 elective courses</p>	<p>-2 Clinical Experience Internship after core coursework (12 credits)</p> <p>(600 hour internship)</p>

University	Overview	Courses	Practicum
College of Charleston Charleston, SC	MS in Child Life -20 months -FT -non-thesis degree	-7 core courses (21 credits) -4 electives (12 credits)	- Child Life Internship (12 credits) (600 hour internship)
Loma Linda University Loma Linda, CA	MS in Child Life Specialist -2 years FT -non-thesis degree	-24 required courses (on the quarter system – each course is 11 weeks totally 66 credits)	-100 hour practicum & 600 hour internship (8 credits)
University of LaVerne LaVerne, CA	MS in Child Life -available FT or PT -non-thesis degree	-9 core courses (27 credits) -1 elective (3 credits)	--2 Child Life Internships (6 credits) (600 hour internship)
Towson University Towson, MD	MS Child Life, Administration and Family Collaboration -2 years FT -PT available -thesis option for advance standing CCLS	-8 required courses (25 credits) - electives (15 credits)	-Child Life Internship (600 hour internship)

Appendix 7
Focus Group Themes
Rank Order of Recommended Curriculum Content for Entry-Level Child Life Practice

Recommendations from Focus Group held at McMaster Children's July 22, 2014

Assessment	17
Therapeutic Interventions	14
Child Development	13
Knowledge of Health Care	12
Family/Cultural Competency	12
Research	11
Professional Responsibility	10
Program Management	9
Treatment	7
High Risk/Vulnerability	6
Communication	5
Documentation	5
Soft Skills	5
Mental Health	4

*Recommendations from Focus Group held at the Hospital for Sick Children
August 6, 2014*

Assessment	17
Therapeutic Interventions	14
Child Development	13
Hospitalization	12
Family/Cultural Competence	12
Leadership/Program Management	11
Research	11
Communication/Soft Skills	10
Professional Responsibility	10
High Risk/Vulnerability	6
Treatment	7
Documentation	5
Knowledge of Health Care	5
Mental Health	4

Appendix 8
National Survey Results
Child Life Specialist Professional Development Interest Needs
Conducted by the Canadian Child Life Institute, February 2014

Respondents were asked to indicate their level of interest ('no interest', 'slight interest', 'moderate interest', 'very interested') in 26 different professional development topic areas. A free text box was also provided to identify other priority areas.

Survey respondents self-identified as;

- Child life specialist with less than 5 years of experience 40%
- Child life specialist with more than 5 years of experience 52%
- Child life professional practice leader/manager 8%

The following provides a summary of the top ten professional development needs.

Top 10 Ranked as Very Interested	Top 10 Ranked as Moderate & Very Interested Combined
Procedural Support – 86%	Child Life in mental health– 56%
Supporting children with autism in healthcare environments – 85%	Use of technology to engage patients (e.g. Ipads, social networking) - 50%
Use of technology to engage patients (e.g. Ipads, social networking) – 84%	Supporting children with autism in healthcare environments – 49%
Resilience – 82%	Procedural Support and Child life in the community (transference of skills) – 48%
Child Life in mental health – 80%	Quality indicators – How to measure success – 46%
Quality indicators – How to measure success - 79%	Pediatric Palliative Care – 41%
Pediatric Palliative Care – 79%	Effective Communication – 40%
Healing Environments – 76%	Transition to Adult Care and Leadership – 39%
Temperament, Effective Communication and Support Group Facilitation – 73%	Resilience and Clinical Supervision – 38%
Child life in the community (transference of skills) – 72%	Support Group Facilitation and Healing Environments – 36%

Appendix 9 Budget Assumptions and Justifications

It is our hope that the MSc program will be funded through the BIU grant from the Ministry of Training, Colleges and Universities (MTCU), and standard student tuition as set by the Program with approval from the Faculty of Health Sciences and the University. The following provides additional information related to our budget assumptions and justifications.

Budget Justification / Assumptions

1. Projected admissions:

	Year 1	Year 2	Year 3	Year 4	Year 5
Stream 1	10	20	20	22	22
Stream 2 – F/T	2	2	3	2	3
Stream 2 – P/T	8	16	15	15	16
TOTAL	20	38	38	39	41

We anticipate expanding our Stream 1 cohort to 12 students instead of 10 by Year 5, as 2020 will be the year of transition as entry into the child life field will require enrolment in a Master's in Child Life program to meet the 2022 certification eligibility requirements.

2. We have two streams in this Master's: Stream 1 for full-time students needing course based and internship (24 months), and Stream 2 for full-time students requiring courses only (12 months), or if taken part-time, Stream 2 students finish in a minimum of 24 months. Part-time students will have up to five years from their initial registration to complete required and elective requirements.
3. The retention rate for full-time students has been set at 98% for Stream 1 in that all students must complete the requirements in order to be eligible to write the certification exam with the Child Life Council, and 95% for Stream 2 as they are working professionals upgrading to a Master's degree.
4. The tuition for international students has been set keeping in mind the growing demand in our profession to expand globally and meet the needs of international learners interested in starting child life programs or expanding psychosocial care delivery in their country. The salary for a child life specialist is on average, \$55,000 to \$60,000 in Canada (Canada has higher salaries than other countries) after several years of work. The proposed international tuition is intended to remain competitive to US tuition fees. We would typically accept 1-2 international students each year.

5. We are unable to compare tuition to Canadian programs because there are no others in this content area at this time. Tuition compared to 6 similar Master's-level child life programs in the United States puts our program as more affordable for Canadian students and market value for international students. We want to be a leader in child life graduate education especially approaching the 2022 date imposed by the Child Life Council for all child life specialists to have a minimum Master's-level education in child life in order to be eligible for the certification exam.
6. Post-degree fees, as per the graduate calendar, will be incorporated for students not pursuing the full degree. A maximum of three courses can be taken by non-degree seeking students, before they need to enrol in the program.
7. BIU revenue was held constant across all years at \$13,798 per FTE Master's student, which is the value set by the Ministry for 2014-15.
8. Assume any international students are included in the numbers above. We estimate international students will be in Stream 1 but if students are able to pay by course, our international student rate may increase in Stream 2; international students are not BIU-eligible. Based on our current post baccalaureate diploma program, we project one international student in first year of program, and one to two admitted each year after that
9. It has been arranged that the first year budget deficit will be covered by the Department of Pediatrics and Faculty of Health Sciences.

Appendix 10

Letter of Agreement: Health Science Education



David Wilkinson
Provost and Vice-President (Academic)
McMaster University
University Hall, Room 201
1280 Main Street West
Hamilton, Ontario
L8S 4K1

Tuesday, August 19, 2014

Dear Dr. Wilkinson,

I am writing this letter with regard to the Masters of Science (MSc) in Child Life and Pediatric Care program. This program has requested their future MSc students be allowed to take Educational Research Methods (HS EDUC 702*), which is currently an elective course in the MSc Health Science Education program, as a required course for their program. This request has been reviewed by the Health Science Education Curriculum Committee, and we agreed that Child Life and Pediatric Care students could enroll in Educational Research Methods on the condition that there are enough instructors and facilitators from the Child Life and Pediatric Care program to support the additional number of students in the course. The MSc in Child Life and Pediatric Care has agreed with this condition.

I fully support having Educational Research Methods included on the MSc Child Life and Pediatric Care program's course selection. Please feel free to contact me if you have any questions or concerns.

Sincerely,

A handwritten signature in black ink, appearing to read "Kelly E. Dore". The signature is written in a cursive style with a large, looping initial "K".

Kelly E. Dore, PhD
Assistant Professor
Departments of Medicine, Obstetrics & Gynecology, Surgery, & Pediatrics
Program for Educational Research & Development
Director, MSc Health Science Education Program
McMaster University

Appendix 11

Letter of Agreement: Rehabilitation Sciences



School of Rehabilitation Science
1400 Main Street West
IAHS-403
Hamilton, ON L8S 1C7
T: (905) 525-9140, ext 22666
E: solomon@mcmaster.ca
www.srs-mcmaster.ca



11 November 2014

Ms Cathy Humphreys
Director, Chair of Admissions
Child Life Studies
HSC-3H46C

Dear Ms Humphreys

On behalf of the School of Rehabilitation Science, I am pleased to offer this letter of support for the proposed Master of Child Life Studies Program.

You have formally requested to have "RS708 Reasoning and Decision Making" and "RS770 Leadership in Rehabilitation" offered as elective options for students who are wishing to upgrade to a Masters, or for those with an interest in pediatric psychosocial care. You anticipate approximately ten full and part-time students (combined) per year in this stream.

The School of Rehabilitation Science is able to offer RS708 and RS770 to your prospective student as elective courses.

I look forward to collaborations in the future.

Yours sincerely,

A handwritten signature in black ink, appearing to read "Patricia Solomon".

Patricia Solomon, PhD
Associate Dean (Health Sciences) and
Director, School of Rehabilitation Science

cc: Dr Joy MacDermid
Assistant Dean, Rehabilitation Science Graduate Program



Date: October 21, 2014.

McMaster University
Child Life Program
Attn: Allison Sohanlal, Internship Coordinator
1280 Main St. W. FHS 3H46-C
Hamilton, ON, L8S 4K1

Dear Concerned Parties:

I am writing to you on behalf of the Calgary Child Life Internship Program to express our support for the creation of a Master of Science in Child Life and Pediatric Psychosocial Care at McMaster University.

The Calgary Child Life Internship Program is a partnership between Child Life Programs in both hospital and community settings. The Alberta Children's Hospital, Ronald McDonald House Southern Alberta, Rotary Flames House, and Sheldon Kennedy Child Advocacy Centre have joined together to offer students working towards certification as a Child Life Specialist a unique internship program that is rich in learning opportunities. We have been offering students clinical experience as part of the Calgary Child Life Internship Program for almost a year now, and have been in partnership with McMaster University since the very beginning.

Our program is very excited about the steps McMaster University is taking towards the advancement of the Child Life profession through the creation of a Master program and it is our hope to continue offering clinical placements for McMaster child life students as part of this process.

Sincerely,

Emily Synnott
Certified Child Life Specialist
Sheldon Kennedy Child Advocacy Centre

Signing on behalf of, and in partnership with: Sandy Baggott (Alberta Children's Hospital), Alyssia Premji (Ronald McDonald House Southern Alberta), and Kate Ross (Rotary Flames House)





August 13, 2014

Cathy Humphreys, Director Chair of Admissions
Allison Sohanlal, Internship Coordinator
McMaster University
Child Life Program
1280 Main St. W.
Hamilton, ON
L8S 4K1

Dear Ms. Humphreys and Ms. Sohanlal,

I am pleased to provide this letter of support for creation and development of a Master of Science in Child Life & Pediatric Psychosocial Care at McMaster University. As the Director of Patient & Family Centred Care at BC Children's Hospital and as a former President of the Child Life Council Board of Directors, I fully support the advancement of academic standards for Child Life.

The Child Life Department at BC Children's Hospital has a comprehensive internship program for child life students and with the development of a Master of Science in Child Life & Pediatric Psychosocial Care, we would be open to offering internship opportunities at our site.

Thank you for your consideration and please do not hesitate to contact me if you require any additional information at 604-875-2345 ext 7687, or by email dphart@cw.bc.ca.

Sincerely,

Diane Hart
Director, Patient & Family Centred Care



September 16th, 2014

McMaster University
Child Life Program
Internship Coordinator
1280 Main St. W.
Hamilton, ON
L8S 4K1

Dear Cathy Humphreys:

As the Coordinator and Professional Practice Leader of child life at the Children's Hospital of Eastern Ontario I would like to endorse the creation and development of a Master of Science in Child Life and Paediatric Psychosocial Care and McMaster University. It is exciting that you will be looking to develop two streams of study; training for those studying to become child life specialists and a stream for certified child life specialists to upgrade their education at the Masters level. This program will fill an important need for training opportunities for child life specialist professionals in Canada.

We currently provide Child Life internships on a yearly basis to students in the graduate Child Life Studies Diploma program. Our institution has had an ongoing Affiliation Agreement with McMaster University for many years. We would continue to offer internship placements to students in this new Masters of Science program. Currently all child life specialists at CHEO are certified and are able to provide clinical supervision that meets the requirements for Child Life Certification.

CHEO has strong ties with many academic institutions and is committed to providing excellent clinical learning opportunities. We are also committed to receiving feedback from student placements in order to continue to continue to meet their academic and clinical needs.

Sincerely,

Nora Ulliyot, CCLS

Coordinator and Professional Practice Leader, Child Life

Grand River Hospital
P.O.Box 9056
Kitchener, ON
N2G 1G3

Date: August 26, 2014

McMaster University
Child Life Program
Attn: Allison Sohanlal, Internship Coordinator
1280 Main St. W. FHS 3H46-C
Hamilton, ON
L8S 4K1

Dear Allison

As the Child Life field changes and the Child Life Council moves towards recommending that a Masters Degree become a requirement for certification in 2022, we support the opportunity for students to study and obtain this degree in Child Life at a Canadian University.

We are currently in partnership with the McMaster Child Life program and value the fresh ideas and dedication to the field of Child Life that the interns bring. The hours spent by the Child Life Interns contribute to the Child Life program at our hospital, providing enrichment to the services we offer as we support and help to educate these new professionals. We look forward to continuing our partnership with the McMaster Child Life program.

Sincerely,

Mary Thibault, CCLS

Brenda Smallwood, CCLS
Professional Lead, Child Life Services



Date: Aug 25/14.

McMaster University
Child Life Program
Attn: Allison Sohanlal, Internship Coordinator
1280 Main St. W. FHS 3H46-C
Hamilton, ON
L8S 4K1

Dear Allison,

Please accept this as a letter of support between Humber River Hospital (HRH) Child Life Services and McMaster University to being internship partners with the development and implementation of the future Masters of Science in Child Life & Paediatric Psychosocial Care Students.

We have valued our past & current internship partnership with McMaster of the Child Life Diploma program with HRH Child Life Services and are both excited and supportive about this new milestone and further professional educational development and creation into a Masters Program as it will further advance the profession of Child Life and further standardize educational requirements on a higher level.

As we are currently in partnership with McMaster Child Life Diploma Program for offering child life internships, we will continue to do for the duration of the Diploma Program until the implementation of the Masters program and our participation of internship partners for the Masters Internships between McMaster and HRH.

We look forward to continued partnership with McMaster and have been thrilled & impressed with the exceptional students from McMaster Child Life Diploma Program completing internships at HRH and wonderful Faculty facilitating internships, guidance, regular communication, student supervision from McMaster University.

Sincerely,

A. Christofides

Alexandra Christofides, CCLS, RECE, BA (ECE)
President Elect - Canadian Association of Child Life Leaders
Certified Child Life Specialist, Registered Early Childhood Educator
Humber River Hospital- Child Life Services
2115 Finch Ave West Downsview, Ont. M3N 1N1



IWK Health Centre

5850/5980 University Avenue
PO Box 9700
Halifax, NS B3K 6R8
Canada
tel: 902.470.8888
www.iwk.nshealth.ca

August 27, 2014

McMaster University
Child Life Program
Internship Coordinator
1280 Main St. W.
Hamilton, ON
L8S 4K1

Dear Cathy:

As the Professional Practice Chief for Child Life Services at the IWK Health Centre, I am sending this letter of unwavering support for the development of a Master of Science in Child Life & Pediatric Psychosocial Care at McMaster University. There is a critical need for a Canadian Master's program focusing on child life and pediatric psychosocial care. I strongly believe that your program is one of the strongest training programs for child life professionals in Canada. We must continue to meet the Child Life Certifying Committee's educational and experiential requirements for child life certification and this proposed graduate program is crucial in providing Canadians this important educational and training opportunity.

We have been a clinical internship site for many McMaster University Child Life Studies Diploma Program students and we truly value the quality of the students you have trained. We look forward to being a continued partner in providing internships within your proposed graduate studies program. This allows us to participate in teaching and mentoring of new child life professionals and fosters excellence in our child life specialists.

I am thrilled that you are moving forward in developing a Master of Science in Child Life & Pediatric Psychosocial Care and I salute you, your colleagues and your Faculty partners in making this happen! Please feel free to contact me if there is anything further I can do to support this effort.

Respectfully,

Chantal

Chantal LeBlanc, CCLS, BPs
Professional Practice Chief, Child Life Services
IWK Health Centre

Child Life Services
Children's Hospital, London Health Sciences Centre
800 Commissioners Road East, PO Box 5010
London, Ontario, Canada N6A 5W9
519-685-8500, ext. 57404
www.childrenshospitalhsc.ca



Date: September 9, 2014

McMaster University, Child Life Program
Internship Coordinator
1280 Main St. W.
Hamilton, ON L8S 4K1

Dear Internship Coordinator,

As you know, the Child Life Council (CLC) Board of Directors approved a series of important recommendations for academic preparation in May 2012, inclusive of the requirement to hold a master's degree in child life from an academic program accredited by the CLC. The CLC Board of Directors anticipates that this advanced degree requirement will yield more child life-specific research, supported by child life-specific graduate level coursework, and provide students with leadership training and opportunities.

As a past graduate of the current Child Life Studies Programme at McMaster University, a past member of the CLC Board of Directors, and a current leader of a Child Life Program, I support the creation and development of a Master of Science in Child Life & Paediatric Psychosocial Care at McMaster University. The advanced degree will be critically important in order to meet the future academic preparation requirements, as outlined by the CLC as well as ensure that graduates possess advanced theoretical and applied knowledge, skills in analysis, critical evaluation and professional application as well as the ability to solve complex problems.

Currently, Children's Hospital, London Health Sciences Centre works in partnership with the Post-Graduate Child Life Studies Programme at McMaster University, offering child life internship placements. Children's Hospital plans to continue supporting internship

opportunities, creating quality and meaningful work assignments designed to help students learn and gain knowledge in the child life field. As a host site for child life internships, it has also been an excellent way to develop a pipeline of qualified child life professionals, resulting in the successful recruitment of several of our past interns.

In closing, I strongly support the development of a Master of Science in Child Life & Paediatric Psychosocial Care at McMaster University. Please feel free to contact me via e-mail, michelle.wilband@lhsc.on.ca or via phone, 519-685-8500, ext. 57404 to further discuss the proposed change with current program and future internship opportunities at Children's Hospital.

Sincerely,

MWilband

Michelle Wilband, BA, CLSt. Dipl., MHS, CCLS
Coordinator, Paediatric Medical Day Unit & Specialty Services



August 20, 2014

McMaster University
Child Life Program
Internship Coordinator
1280 Main St W.
Hamilton, On L8S 4K1

To whom it may concern,

The Child Life team at McMaster Children's hospital was pleased to hear that the graduate level of the Child Life Studies program at McMaster University will be expanding to become a masters program in Child Life and Pediatric Psychosocial Care.

McMaster Childrens hospital has always valued our role in providing placements for students in the McMaster Child Life program since its inception in 1989. We look forward to maintaining partnership for future students.

Sincerely,

A handwritten signature in blue ink that reads 'Tracy Akitt'.

Tracy Akitt
Certified Child life Specialist
McMaster Children's Hospital
(905)521-2100, ext 76173

MOUNT SINAI HOSPITAL
Joseph and Wolf Lebovic Health Complex



Tommy Lainer Centre for Palliative Care
Max and Beatrice Wolfe Children's Centre

August 12, 2014

Sarah Patterson
McMaster University
Child Life Program
1280 Main St. W.
Hamilton, ON
L8S 4K1

Dear Ms. Patterson:

Please accept this letter as an expression of my enthusiastic support for the development of a Master of Science in Child Life & Pediatric Psychosocial Care at McMaster University. I strongly believe that this unique program would provide a crucial and accessible avenue for Child Life Specialists from across the globe to enhance their clinical, academic and research skills, which would ultimately bolster the capacity of the profession as a whole. The creation of this program is especially timely given the widespread encouragement and pressure for practicing professionals to obtain Master's degrees from the institutions at which they are employed or seeking employment.

The Dr. Jay Children's Grief Program has partnered with Child Life Diploma Programme since 2008 to provide internship placements and have hired two of these uniquely qualified interns upon graduation. We have found that Child Life interns bring a unique combination of knowledge of and practical skills that have been invaluable training, and we are excited at the possibility of exponentially enhancing those skills through a Master of Science program. We are committed to collaborating with the new Master's program to support Child Life & Pediatric Psychosocial Care interns with clinical experiences within our Grief Program.

It is my sincere hope that you will support the creation of this important program, for the sake of current and future students and professionals, and all of the children and families whose lives they affect. If there is any additional information that I can provide in support of this program, please contact me by phone or email as listed below.

Sincerely,

Ceilidh Eaton Russell, MSc
Certified Child Life Specialist,
Dr. Jay Children's Grief Program at MBWCC
t 416-586-4800 ext. 6707 f 416-586-4804

Excellent care, for everyone,
everywhere, every time.



August 18, 2014

McMaster University
Child Life Program- Internship Coordinator
1280 Main St. W.
Hamilton, ON L8S 4K1

To Whom It May Concern,

I'm writing in support of the creation and development of a Master of Science in Child Life & Pediatric Psychosocial Care at McMaster University. As a graduate of the McMaster Child Life studies diploma program in 2007, a practicing Certified Child Life Specialist and internship supervisor, I am strongly in favor of expanding and updating the current program to meet the child life profession's evolving educational requirements while continuing to offer high quality child life education and internship opportunities.

As the only post-secondary child life program in Canada, the McMaster child life diploma program provided me with the world class education, skills and knowledge to confidently embark on this profession and build my clinical skills. As you know, the requirements for becoming a certified child life specialist will change as of 2022. If the Master's program were to be created, it would ensure future Canadian child life students have the advanced education required by the international certifying committee within the profession. It would also showcase McMaster University as being a leader within the child life profession in Canada, the United States, and internationally.

In addition to internship sites currently offered to McMaster child life students, I offer internship at my site in Nanaimo which is located on Vancouver Island, British Columbia. I would be interested in having McMaster interns train with me at Nanaimo Regional General Hospital.

Thank you for accepting this letter in support of the creation of a Master of Science in Child Life & Pediatric Psychosocial Care at McMaster University.

Sincerely,

A handwritten signature in blue ink, appearing to read "Kelly Raymond".

Caroline "Kelly" Raymond, B.A., Dipl. CLS, CCLS
Certified Child Life Specialist/Program Director
Nanaimo, British Columbia
(250) 739-5816
caroline.raymond@viha.ca

Nanaimo Regional General Hospital – Department of Pediatrics
1200 Dufferin Crescent | Nanaimo, BC V9S 2B7 Canada

Tel: 250-739-5816 | Fax: 250-739-5855
viha.ca

Queen Elizabeth Hospital



60 Riverside Dr. Unit 5 - Pediatrics • Charlottetown, PE C1A 8T5 • Phone: 902-894-2193 • Fax: 902-894-2461
E-Mail: sdzipursky@ihis.org Web: <http://www.healthpei.ca/>

Date: August 22, 2014

McMaster University
Child Life Program
Attn: Allison Sohanlal, Internship Coordinator
1280 Main St. W. FHS 3H46-C
Hamilton, ON
L8S 4K1

Dear Proposal Review Committee:

As a graduate of the McMaster University Child Life Studies Programme, I feel I was given the necessary skill sets, tools, and confidence in order to practice successfully as a Child Life Specialist. As the only program of its kind in Canada it is imperative that McMaster University follow the evolution of the profession set forth by our governing body. As standards change it is essential that the program move from its current state to a Master of Science in Child Life & Pediatric Psychosocial Care.

The Child Life Program at the QEH, Charlottetown, PE began less than a year ago. Accepting students affiliated with the McMaster University Program is something we are working towards. Hopefully in the near future, once the position is more established, our site will offer a clinical placement for Child Life students.

I remain in contact with McMaster University, and insure standards of practice are adhered to and any changes within the profession are known. I look forward to continuing my partnership with the University and support them fully in creating this change.

Sincerely,

Shira D. Zipursky, BHEc, CLSt Dipl, CCLS
Certified Child Life Specialist



Rouge Valley Centenary
2867 Ellesmere Road
Toronto, ON M1E 4B9
(416) 284-8131

Rouge Valley Ajax and Pickering
580 Harwood Avenue South
Ajax, ON L1S 2J4
(905) 683-2320

Date: September 15, 2014

McMaster University
Child Life Program
Attn: Allison Sohanlal, Internship Coordinator
1280 Main St. W. FHS 3H46-C
Hamilton, ON
L8S 4K1

Dear McMaster University Child Life Program:

Rouge Valley Health System's Child Life Program is in complete support of the creation and development of a Master of Science in Child Life & Pediatric Psychosocial Care at McMaster University. As the only university in Canada that offers a post-graduate program specifically in Child Life, this master's program will be beneficial in maintaining the highest quality of education for child life professionals. This program will provide an opportunity for an equivalent level of education to all other allied health professionals such as occupational therapist and social workers, as well as consistency with other child life educational programs in the United States. The Master of Science in Child Life & Pediatric Psychosocial Care would comply with the new education standard set out by the professional governing body, the Child Life Council. The higher level of academic and clinical inquiry involved in a Master's level program also will allow child life professionals to develop a stronger academic background potentially leading to future research and inquiry once in clinical practice.

Rouge Valley Health System has a relatively new child life program and is looking forward developing a partnership with the McMaster University Child Life Studies Program and is extremely interested in offering clinical child life placements this coming year and in the future.

Sincerely,

A handwritten signature in blue ink, appearing to read "Alexandra Frankel", written in a cursive style.

Alexandra Frankel
Certified Child Life Specialist

SickKids
THE HOSPITAL FOR
SICK CHILDREN

Date: August 18, 2014

McMaster University
Child Life Program
Sarah Patterson
1280 Main St. W.
Hamilton, ON
L8S 4K1

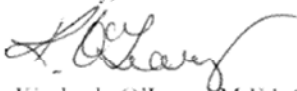
Dear Ms. Patterson

It is with great pleasure that I write this letter of support for the creation and development of a Master of Science in Child Life & Pediatric Psychosocial Care at McMaster University.

We look forward to a continued partnership with the Child Life Studies Programme where we will offer internship opportunities for your students.

I wish you the best in this endeavor as you continue to move the profession forward in alignment with the Child Life Council mandate.

Sincerely,



Kimberly O'Leary M.Ed, CCLS
Manager, Child Life Services



Trillium
Health Partners
Better Together

Credit Valley Hospital
2200 Eglinton Avenue West
Mississauga ON L5M 2N1
T: (905) 813-2200
www.trilliumhealthpartners.ca

August 25, 2014

McMaster University
Child Life Program
Attn: Allison Sohanlal, Internship Coordinator
1280 Main St.W. FHS 3H46-C
Hamilton, ON
L8S 4K1

Dear Allison Sohanlal,

This letter is written in support of the McMaster Child Life Internship program as well as the creation and development of a Master of Science in Child Life & Paediatric Psychosocial Care at McMaster University.

The Credit Valley Hospital has participated in the internship program for over 5 years and looks forward to continuing this relationship throughout this exciting transition into a Masters program.

Sincerely,

Martha McLeod BA, CCLS
Child Life Specialist
Trillium Health Partners

Date: August 12, 2014

McMaster University
Child Life Program
Attn: Allison Sohanlal, Internship Coordinator
1280 Main St. W. FHS 3H46-C
Hamilton, ON, L8S 4K1

Dear Alison Sohanlal:

I would like to extend my sincere appreciation to you and the McMaster Child Life student placement coordination team for your wonderful work in sending such appropriate student candidates into our hospital settings for their internship experiences.

As a current partner of the McMaster Child Life program, I appreciate the quality of the screening process that is implemented for your students to enter into the child life studies field. Your particular program standardizes the quality of baseline knowledge that every student that comes to us for a placement is equipped with, prior to applying what they know in the clinical work environment, which is comforting as a one-person program mentor.

Due to my appreciation of the professional standards that your current program creates, I would be thrilled to support the further development of a Master of Science in Child Life & Pediatric Psychosocial Care program at McMaster University and would be honored to continue our student placement relationship at Trillium Health Partners organization.

Sincerely,

Katrina DesRochers, BA, BEd, CLST Dipl., CCLS
Certified Child Life Specialist- Paediatrics
Trillium Health Partners- The Mississauga Hospital
Office: 905-848-7580 Ext. 2516, Email: kdesrochers@thc.on.ca,
Website: www.trilliumhealthcentre.org





August 20, 2014

McMaster University
Child Life Program
Attn: Allison Sohanlal, Internship Coordinator
1280 Main St. W. FHS 3H46-C
Hamilton, ON
L8S 4K1

To Whom it may Concern,

This letter is in support of the creation and development of a Master of Science in Child Life & Pediatric Psychosocial Care at McMaster University. Both the nature of our profession and the rising standards of higher education demand the creation of a Masters Level program. Canada needs to become competitive in the creation of such a program as the United States already offers Masters Level education in our field. Attaining the Masters level may assist new graduates in securing pay scales more appropriate to their actual job duties. Providing Masters level child life education may assist in fostering increased interest in child life research. I personally believe a Masters level education in Child Life will create more respect from fellow professionals working in the Health Care field. The intense nature of our work demands the maturity and dedication to study at a Masters level.

At WRH, we have provided placements for Child Life interns through McMaster since 2006. Many of these past interns have gone on to paid employment within our organization. Our program would be pleased to accept future students through a Master of Science in Child Life & Pediatric Psychosocial Care through McMaster University. Please do not hesitate to contact me if you have any questions regarding this letter of support.

Sincerely,

A handwritten signature in black ink, appearing to read "Jen Burton Liang". The signature is fluid and cursive, with a large loop at the end.

Jen Burton Liang, BFA, DipAT, OATR, CCLS
Certified Child Life Specialist, Registered Art Therapist
Windsor Regional Hospital
1995 Lens Avenue
Windsor, Ontario
N8W 1L9
519.254.5577 x53408
jennifer_burton-liang@wrh.on.ca



Health Sciences Centre
Winnipeg

Child Life Department
Child Health Program

CH212, Children's Hospital
840 Sherbrook Street
Winnipeg, MB R3A 1S1
Ph: (204) 787-2260
Fax: (204) 787-1965
rethans@hsc.mb.ca

August 7, 2014

Allison Sohanlal
Child Life Program, Internship Coordinator &
Cathy Humphreys
Director, Chair of Admissions
Child Life Studies HSC 3H46C
Assistant Clinical Professor, Dept. of Pediatrics Faculty of Health Sciences
McMaster University
1280 Main St. W.
Hamilton, ON L8S 4K1

Dear Ms Sohanlal and Ms Humphreys:

I am writing in support of the creation and development of a Master of Science in Child Life & Pediatric Psychosocial Care at McMaster University. Children's Hospital at Health Sciences Centre Winnipeg, has had a formal child life program since 1969, which was preceded in the 1940's by strong psychosocial components that aimed to treat the "whole child" and family. I myself have worked in this child life department for 32 years, and have seen the incredible growth and involvement in this area. The Child Life Council's (CLC) role in developing standards, ethics, certification and opportunities for education and networking has ensured that child life specialists are appropriately trained and competent in their field. The CLC now plans to increase the requirements for certification to include a Master's degree in child life.

As child life is a rapidly expanding profession whose presence is supported by the Canadian Pediatric Society, American Academy of Pediatrics and Accreditation Canada, it is imperative that we provide ample opportunities for students to gain the required theoretical and educational base along with hands-on experience and training. Canada needs to stay in step with the growing requirements. I have always been extremely impressed with the highly qualified McMaster Child Life Studies program and view it as the most experienced site to create a Master of Science in Child Life & Pediatric Psychosocial Care. Our child life department has hosted numerous child life interns from McMaster, and also hired their grads. We are so impressed, in fact, that we prioritize taking interns from McMaster over any other site. With all certainty, we plan to continue to partner with the McMaster Child Life Program offer internship placements as they are available.

Thank you for your consideration.

Sincerely,

Renée Ethans, CCLS
Manager
Child Life Department, Children's Hospital

840 Sherbrook Street (CH212), Winnipeg, Manitoba R3A 1S1 / Phone 204-787-2260 / Fax 204-787-1965 / www.hsc.mb.ca

An operating
division of the
 Winnipeg Regional
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santé de Winnipeg

Affiliated
with the
 UNIVERSITY
OF MANITOBA



School of Graduate Studies 1280 Main Street West Phone 905.525.9140
Hamilton, Ontario, Canada Ext. 23679
L8S 4L8 <http://graduate.mcmaster.ca>

To : Graduate Council
From : Christina Bryce
Assistant Graduate Secretary

At its meetings on October 8th and November 19th the Faculty of Health Sciences Policy and Curriculum Council approved the following graduate curriculum recommendations.

Please note that these recommendations were forwarded for approval to the November 26th, 2014 meeting of the Faculty of Health Sciences Executive Meeting.

FOR APPROVAL OF GRADUATE COUNCIL:

-Biomedical Engineering (also approved by Faculty of Engineering GCPC and Faculty)
-Change to Program Requirements

-Nursing
-Change to Research Areas

-Occupational Therapy
-Change to Course Requirements

FOR INFORMATION OF GRADUATE COUNCIL:

-Biomedical Engineering (also approved by Faculty of Engineering GCPC and Faculty)
-New Cross-listed Courses
- *708 Biomaterials and Tissue Engineering
- *771 Research Methodology in Basic Health Science

-Health Management (also approved by Faculty of Business GCPC and Faculty)
-New Courses: HM 731, 732, 733, 734

-Medical Sciences
-New Cross-listed course
- *707 Statistical Methods in Health Sciences Research

-Nursing
-Change to Course Title and Description
- *709 Statistical Methods in Health Sciences Research

-Change to Course Timing
- *701 Theoretical Basis of Nursing Practice

- *711 Advanced Practicum in Nursing

- Change to Course Leader

- *745 Qualitative Health Research Methods

- Occupational Therapy

- New Courses

- *798 Occupational Therapy Theory and Practice Remediation

- 799 Occupational Therapy Theory and Practice Remediation

- Rehabilitation Science

- New Course

- *772 Introduction to Qualitative Research



RECOMMENDATION FOR CHANGE IN GRADUATE CURRICULUM - FOR CHANGE(S) INVOLVING DEGREE PROGRAM REQUIREMENTS / PROCEDURES

IMPORTANT: PLEASE READ THE FOLLOWING NOTES BEFORE COMPLETING THIS FORM:								
<p>1. This form must be completed for ALL changes involving degree program requirements/procedures. All sections of this form must be completed.</p> <p>2. An electronic version of this form (must be in MS WORD not PDF) should be emailed to the Assistant Secretary, School of Graduate Studies.</p> <p>3. A representative from the department is required to attend the Faculty Curriculum and Policy Committee meeting during which this recommendation for change in graduate curriculum will be discussed.</p>								
DEPARTMENT		School of Biomedical Engineering						
NAME OF PROGRAM		BME						
PROGRAM DEGREE	Ph.D. (<input checked="" type="checkbox"/>)	M.A. (<input type="checkbox"/>)	M.A.Sc. (<input type="checkbox"/>)	M.B.A. (<input type="checkbox"/>)	M. Eng. (<input type="checkbox"/>)	M.Sc. (<input type="checkbox"/>)	Diploma Program (<input type="checkbox"/>)	Other (Specify)
NATURE OF RECOMMENDATION (PLEASE CHECK APPROPRIATE BOX)								
CHANGE IN ADMISSION REQUIREMENTS		<input type="checkbox"/>	CHANGE IN COMPREHENSIVE EXAMINATION PROCEDURE		<input type="checkbox"/>	CHANGE IN COURSE REQUIREMENTS		<input checked="" type="checkbox"/>
CHANGE IN THE DESCRIPTION OF A SECTION IN THE GRADUATE CALENDAR			<input checked="" type="checkbox"/>	EXPLAIN: Reduce the number of courses required for students who transfer from MAsC to PhD from 6 beyond the baccalaureate degree to 5.				
OTHER CHANGES		EXPLAIN:						
DESCRIBE THE <u>EXISTING</u> REQUIREMENT/PROCEDURE:								
Current description for PhD requires 6 half courses beyond the baccalaureate degree or three half courses beyond MAsC.								

PROVIDE A DETAILED DESCRIPTION OF THE RECOMMENDED CHANGE (*Attach additional pages if space is not sufficient.*)

For students in the PhD program or who transfer from MASc to PhD without completion of PhD, the requirement will be 2 courses beyond the master's or 5 courses beyond the baccalaureate degree. One of the additional courses must be from the complimentary discipline from their background (Engineering students must take at least one 700 level Health Science Course, Health/Life Science students must take at least one 700 level engineering course).

RATIONALE FOR THE RECOMMENDED CHANGE:

Input provided to streamline the course load expectations from the IQAP review. This will provide the student the interdisciplinary curriculum while allowing time to focus on their research.

PROVIDE IMPLEMENTATION DATE: (*Implementation date should be at the beginning of the academic year*)

September 2015

ARE THERE ANY OTHER DETAILS OF THE RECOMMENDED CHANGE THAT THE CURRICULUM AND POLICY COMMITTEE SHOULD BE AWARE OF? IF YES, EXPLAIN.

PROVIDE A DESCRIPTION OF THE RECOMMENDED CHANGE TO BE INCLUDED IN THE CALENDAR:

Students completing a PhD will be required to complete 2 courses beyond the masters or 5 courses beyond the baccalaureate degree. One must be the core course and one additional course must be from the complimentary discipline from their background (Engineering students must take at least one 700 level Health Science Course, Health/Life Science students must take at least one 700 level engineering course).

CONTACT INFORMATION FOR THE RECOMMENDED CHANGE:

Name: N. Illingworth Email: illing@mcmastermca Extension: 23486 Date submitted:
September 29, 2014

If you have any questions regarding this form, please contact the Assistant Secretary, School of Graduate Studies,
cbryce@mcmaster.ca

SGS/2013



RECOMMENDATION FOR CHANGE IN GRADUATE CURRICULUM - FOR CHANGE(S) INVOLVING DEGREE PROGRAM REQUIREMENTS / PROCEDURES

IMPORTANT: PLEASE READ THE FOLLOWING NOTES BEFORE COMPLETING THIS FORM:								
<p>1. This form must be completed for ALL changes involving degree program requirements/procedures. All sections of this form must be completed.</p> <p>2. An electronic version of this form (must be in MS WORD not PDF) should be emailed to the Assistant Secretary, School of Graduate Studies.</p> <p>3. A representative from the department is required to attend the Faculty Curriculum and Policy Committee meeting during which this recommendation for change in graduate curriculum will be discussed.</p>								
DEPARTMENT		Nursing						
NAME OF PROGRAM		Program Areas of Research Excellence						
PROGRAM DEGREE	Ph.D. ()	M.A. ()	M.A.Sc. ()	M.B.A. ()	M. Eng. ()	M.Sc. ()	Diploma Program ()	Other (Specify)
NATURE OF RECOMMENDATION (PLEASE CHECK APPROPRIATE BOX)								
CHANGE IN ADMISSION REQUIREMENTS		<input type="checkbox"/>	CHANGE IN COMPREHENSIVE EXAMINATION PROCEDURE		<input type="checkbox"/>	CHANGE IN COURSE REQUIREMENTS		<input type="checkbox"/>
CHANGE IN THE DESCRIPTION OF A SECTION IN THE GRADUATE CALENDAR			<input checked="" type="checkbox"/>	EXPLAIN: The current six areas of excellence in research are being revised and reduced to three areas. This was done with consultation with our faculty and recommended in our IQAP review.				
OTHER CHANGES		EXPLAIN:						
DESCRIBE THE EXISTING REQUIREMENT/PROCEDURE:								
<p>Students in the M.Sc. and Ph.D. programs can declare their intentions to focus within one of the following six areas of excellence. They are:</p> <p>1. Health Populations Our research focuses on health outcomes, patterns of health determinants, policies and interventions. Examples of topics may include the impact of socio-economic status, the environment, culture, and gender on</p>								

health and quality of life. Nursing studies examining the impact of globalization are also included.

2. Wellness and Healing Across the Lifespan

Our research focuses on the study of interventions, relationships and interactions that foster a sense of belonging, well-being, and coherence. This field includes the study of traditional or alternative nursing modalities in periods of illness and crisis, and the role of spirituality in health.

3. Health Services and Policy

Health services research is a multidisciplinary field of inquiry, both basic and applied, that examines access to, and the use, costs, quality, delivery, organization, financing, and outcomes of health care services to produce new knowledge about the structure, processes, and effects of health services for individuals and populations. New knowledge in relation to nursing services is our focus.

Related to Health Services is Health Policy Research, which addresses the history, structure, theory and process of health policymaking to plan, implement, and evaluate policies. Topics may include the economic, ethical, and social implications of policy decisions, and may develop or assess strategies to advocate for policy change. Effective policies are essential to quality nursing services.

4. Nursing Leadership and Management

Research in Leadership focuses on studying the identification and development of the skills and knowledge needed for leadership roles in nursing.

5. Advance Nursing Practice

Research in practice involves the study of relationships among advanced nursing practice, theory, and scholarly inquiry. Research may also focus on the development and evaluation of practice specialties with specific populations or settings (e.g., nurse practitioner) and knowledge exchange.

6 Nursing Education

Our research focuses on the investigation of teaching-learning modalities (e.g., self-directed learning, technology) for enhancing nursing education as a practice discipline, the development of the knowledge base related to learning to nurse, and the evaluation of educational programs and strategies. Examples of topics may include inter-professional learning, program evaluation, critical thinking, and reflective practice

PROVIDE A DETAILED DESCRIPTION OF THE RECOMMENDED CHANGE (*Attach additional pages if space is not sufficient.*)

1. Illness Prevention and Management

Health promotion, illness prevention and chronic disease management are proactive approaches to health care. These approaches may involve strategies at the individual, family, and community levels. Health promotion and illness prevention strategies are focused on keeping people well and preventing illness. Scholars engaged in research in this area of excellence are committed to developing an understanding of preferences for care; interventions to promote health of individuals, families and communities; and interventions aimed at supporting those living with acute or chronic conditions.

2. Health Equity and Disparity

Health equity occurs when individuals, locally or globally, have the opportunity to maximize their full health potential. Health disparities occur when there is a difference in health status between two groups. Health equity and health disparities are influenced by the social determinants of health and the conditions in which people live, work, and play. Scholars engaged in research in this area of excellence are committed to defining, measuring, understanding and addressing health disparities particularly in populations disadvantaged due to socioeconomic

status, race/ethnicity, sexual orientation, gender, disability status, geographic location or a combination of the above. This includes advancing interventions, programs, and policies that promote resiliency, access, social justice, and health equity.

3. Health System Innovation

Health systems or health services research aims to improve the efficiency and effectiveness of the health care system through changes to practice and policy. Scholars engaged in research in this area of excellence are committed to the development, implementation, and evaluation of innovative interventions as well as the translation of this knowledge to support optimal health service provision and improved health care outcomes.

RATIONALE FOR THE RECOMMENDED CHANGE:

The existing areas of excellence were not reflective of the research of our graduate faculty and out of date. Consultation with the graduate faculty and graduate students was used to develop the proposed three new areas.

PROVIDE IMPLEMENTATION DATE: (Implementation date should be at the beginning of the academic year)

Sept 2015

ARE THERE ANY OTHER DETAILS OF THE RECOMMENDED CHANGE THAT THE CURRICULUM AND POLICY COMMITTEE SHOULD BE AWARE OF? IF YES, EXPLAIN.

PROVIDE A DESCRIPTION OF THE RECOMMENDED CHANGE TO BE INCLUDED IN THE CALENDAR:

Students in the M.Sc. and Ph.D. programs are asked to declare their intentions to focus within one of the following three areas of research excellence. They are:

1. Illness Prevention and Management

Health promotion, illness prevention and chronic disease management are proactive approaches to health care. These approaches may involve strategies at the individual, family, and community levels. Health promotion and illness prevention strategies are focused on keeping people well and preventing illness. Scholars engaged in research in this area of excellence are committed to developing an understanding of preferences for care; interventions to promote health of individuals, families and communities; and interventions aimed at supporting those living with acute or chronic conditions.

2. Health Equity and Disparity

Health equity occurs when individuals, locally or globally, have the opportunity to maximize their full health potential. Health disparities occur when there is a difference in health status between two groups. Health equity and health disparities are influenced by the social determinants of health and the conditions in which people live, work, and play. Scholars engaged

in research in this area of excellence are committed to defining, measuring, understanding and addressing health disparities particularly in populations disadvantaged due to socioeconomic status, race/ethnicity, sexual orientation, gender, disability status, geographic location or a combination of the above. This includes advancing interventions, programs, and policies that promote resiliency, access, social justice, and health equity.

3. Health System Innovation

Health systems or health services research aims to improve the efficiency and effectiveness of the health care system through changes to practice and policy. Scholars engaged in research in this area of excellence are committed to the development, implementation, and evaluation of innovative interventions as well as the translation of this knowledge to support optimal health service provision and improved health care outcomes.

CONTACT INFORMATION FOR THE RECOMMENDED CHANGE:

Name: Jennifer Skelly Email: skelly@mcmaster.ca Extension: 22259 Date submitted: 10/11/14

If you have any questions regarding this form, please contact the Assistant Secretary, School of Graduate Studies, cbryce@mcmaster.ca

SGS/2014



SCHOOL OF GRADUATE STUDIES

**RECOMMENDATION FOR CHANGE IN GRADUATE CURRICULUM
- FOR CHANGE(S) INVOLVING DEGREE PROGRAM REQUIREMENTS /
PROCEDURES**

PLEASE READ THE FOLLOWING NOTES BEFORE COMPLETING THIS FORM:

1. This form must be completed for **ALL** changes involving degree program requirements/procedures. **All** sections of this form **must** be completed.
2. An electronic version of this form must be emailed to the Assistant Secretary and SynApps System Administrator (Email: *espiritu@mcmaster.ca*).
3. A representative from the department is required to attend the Faculty Curriculum and Policy Committee meeting during which this recommendation for change in graduate curriculum will be discussed.

DEPARTMENT		School of Rehabilitation Science						
NAME OF PROGRAM		Occupational Therapy						
PROGRAM DEGREE	Ph.D. ()	M.A. ()	M.A.Sc. ()	M.B.A. ()	M. Eng. ()	M.Sc. (X)	Diploma Program ()	Other (Specify)
NATURE OF RECOMMENDATION (PLEASE CHECK APPROPRIATE BOX)								
CHANGE IN ADMISSION REQUIREMENTS		<input type="checkbox"/>	CHANGE IN COMPREHENSIVE EXAMINATION PROCEDURE		<input type="checkbox"/>	CHANGE IN COURSE REQUIREMENTS		<input checked="" type="checkbox"/>
CHANGE IN THE DESCRIPTION OF A SECTION IN THE GRADUATE CALENDAR			<input checked="" type="checkbox"/>	EXPLAIN: Revision to graduate calendar description of occupational therapy program to reflect elective remediation courses.				
OTHER CHANGES	EXPLAIN:							
DESCRIBE THE <u>EXISTING</u> REQUIREMENT/PROCEDURE:								
<p>Currently, all courses are required and students must pass all courses to proceed in the program. Students who fail a required course are given an opportunity (in most cases) to remediate. When remediation is offered, the course grade is submitted as INCOMPLETE (INC) until the student has addressed learning issues and has successfully completed the remediation. If the student successfully completes the remediation, a grade of B- is submitted, and the student continues in the program. The transcript does not reflect that the student had a failing grade on a course unless the student is unsuccessful in completing the remediation. If the student is not successful in completing the remediation, an F is submitted and a recommendation for required withdrawal is processed.</p>								

PROVIDE A DETAILED DESCRIPTION OF THE RECOMMENDED CHANGE (*Attach additional pages if space is not sufficient.*)

Two new courses are proposed, which will be offered as elective courses to students who have failed a course and who the program believes have the potential to meet academic requirements of the failed course with further coursework. The course (798 for half course or 799 for full course) will be determined based on the weight of the course that has been failed. The Occupational Therapy Program Academic Study Committee (PASC) will make the determination of eligibility for remediation, based on the performance in the failed course, and academic performance in the program to date. The transcript will reflect an F in the failed course. Subsequently eligible students will register for the elective remediation course; the course will be designed as an independent study course, and will be tailored to address the learning gaps identified through the failed course. If the student passes the remediation course, he/she will be permitted to continue in the program. If the remediation course is failed, a recommendation for required withdrawal will be processed. A student will be permitted to enrol in only one remediation course during their studies in the Occupational Therapy Program. Therefore the two courses (798 and 799) should be anti-requisites.

RATIONALE FOR THE RECOMMENDED CHANGE:

Based on a review of data from 2006-2013, as well as practices at other Ontario accredited occupational therapy programs, remediation after one failed course has been endorsed by the Occupational Therapy Curriculum Committee and the Occupational Therapy Education Council. To better align with the School of Graduate Studies Policy re: failure of courses, OTEC has endorsed the development of Remediation Courses, which students would take if they do not successfully complete a course during their program of study. Implementation of this type of course will allow better transparency in regards to a student's academic record (i.e. recording an "F" on the transcript) while providing the student with an opportunity to demonstrate meeting academic requirements to continue in the program. Students who receive a failing grade in a course will be reviewed by the OT Program Academic Study Committee (PASC), which will consider eligibility for remediation.

PROVIDE IMPLEMENTATION DATE: (*Implementation date should be at the beginning of the academic year*)

September 2015 (will apply to students in course as well as incoming students)

ARE THERE ANY OTHER DETAILS OF THE RECOMMENDED CHANGE THAT THE CURRICULUM AND POLICY COMMITTEE SHOULD BE AWARE OF? IF YES, EXPLAIN.

PROVIDE A DESCRIPTION OF THE RECOMMENDED CHANGE TO BE INCLUDED IN THE CALENDAR:

The following wording should be inserted in Graduate Calendar to replace the Program Requirements section. The final sentence in the first paragraph is the only thing changed:

Program Requirements

The Master of Science in Occupational Therapy is a full time course-based accredited professional Master's program. It prepares students with knowledge, skills, and professional behaviours to practice as entry level occupational therapists. The program utilizes a problem-based self-directed learning philosophy. Students will complete course work, clinical practica, and an independent evidence-based practice project during their two extended study years. All courses are required with the exception of OT 798 and 799 which are elective courses offered to eligible students who have failed a required course.

The University reserves the right to cancel academic privileges of a student at any time should the student's scholastic record or conduct warrant so doing. For details on procedures and requirements related to university-based courses, clinical practica courses, remediation, and required withdrawals for the Occupational Therapy Program, students should consult the relevant sections of Graduate Calendar, the Occupational Therapy Program Handbook, Professional Practica Handbook, and Term handbooks. In the event of a discrepancy between these documents and the Graduate Calendar, the Graduate Calendar represents the official policy.

CONTACT INFORMATION FOR THE RECOMMENDED CHANGE:

Name: Lori Letts

Email: lettstl@mcmaster.ca

Extension: 27816

Date submitted: September 2014

If you have any questions regarding this form, please contact Medy Espiritu, Assistant Secretary and SynApps System Administrator, School of Graduate Studies, extension 24204.



School of Graduate Studies 1280 Main Street West Phone 905.525.9140
Hamilton, Ontario, Canada Ext. 23679
L8S 4L8 <http://graduate.mcmaster.ca>

To : Graduate Council
From : Christina Bryce
Assistant Graduate Secretary

At its meetings on October 6th and November 4th, 2014 the Faculty of Science Graduate Curriculum, Policy, Admissions and Study Committee approved the following graduate curriculum recommendations.

Please note that these recommendations were approved at the November 20th, 2014 meeting of the Faculty of Science.

FOR APPROVAL OF GRADUATE COUNCIL:

Psychology, Neuroscience and Behaviour
-Change in Program Requirements

Mathematics
-Change in Course Requirements

FOR INFORMATION OF GRADUATE COUNCIL:

Chemistry
-New Courses
-6IA3 Physical Methods of Inorganic Structure Determination
-6IB3 Bio-Inorganic Chemistry
-6PC3 Thermal Properties of Materials

-Change in Course Description
-6PB3 Computational Models for Electronic Structure and Chemical Bonding

Computational Science and Engineering
-New Courses:
-CSE 6TE3 – Continuous Optimization Algorithms
-CSE 761 – Topics in Numerical Analysis
-CSE 762 – Stochastic Optimization
-Course Cancellations:
- CSE #722 and CSE #723

Geography and Earth Sciences

-New Courses

- *6FE3 Biogeochemistry of Algonquin Park Lakes
- *6J03 Basin Analysis
- *711 Petroleum Exploration Workshop

Kinesiology

-New Courses:

- KIN 723 Directed Reading for Kinesiology Master Students
- KIN 724 Sensorimotor Neurophysiology
- KIN 725 Neuromuscular Biology

-Course Title Change:

- KIN 701 Enquiry and Research in Physical Activity

RECOMMENDATION FOR CHANGE IN GRADUATE CURRICULUM - FOR CHANGE(S) INVOLVING DEGREE PROGRAM REQUIREMENTS / PROCEDURES

IMPORTANT: PLEASE READ THE FOLLOWING NOTES BEFORE COMPLETING THIS FORM:								
<p>1. This form must be completed for ALL changes involving degree program requirements/procedures. All sections of this form must be completed.</p> <p>2. An electronic version of this form (must be in MS WORD not PDF) should be emailed to the Assistant Secretary, School of Graduate Studies.</p> <p>3. A representative from the department is required to attend the Faculty Curriculum and Policy Committee meeting during which this recommendation for change in graduate curriculum will be discussed.</p>								
DEPARTMENT		Psychology, Neuroscience & Behaviour						
NAME OF PROGRAM		Psychology, Neuroscience & Behaviour						
PROGRAM DEGREE	Ph.D. (<input checked="" type="checkbox"/>)	M.A. (<input checked="" type="checkbox"/>)	M.A.Sc. ()	M.B.A. ()	M. Eng. ()	M.Sc. ()	Diploma Program ()	Other (Specify)
NATURE OF RECOMMENDATION (PLEASE CHECK APPROPRIATE BOX)								
CHANGE IN ADMISSION REQUIREMENTS		<input type="checkbox"/>	CHANGE IN COMPREHENSIVE EXAMINATION PROCEDURE		<input type="checkbox"/>	CHANGE IN COURSE REQUIREMENTS		<input checked="" type="checkbox"/>
CHANGE IN THE DESCRIPTION OF A SECTION IN THE GRADUATE CALENDAR			EXPLAIN:					
OTHER CHANGES		EXPLAIN:						
DESCRIBE THE <u>EXISTING</u> REQUIREMENT/PROCEDURE:								
Students must complete Psych 711 and Psych 712 in order to obtain a Master's degree.								

PROVIDE A DETAILED DESCRIPTION OF THE RECOMMENDED CHANGE (*Attach additional pages if space is not sufficient.*)

Students no longer need to complete Psych 711 and Psych 712 in order to obtain a Master's degree.

Students must complete Psych 711 and Psych 712 in order to obtain a Ph.D..

RATIONALE FOR THE RECOMMENDED CHANGE:

The primary reason for the change is to give first year students in our graduate program more time to get their research underway. We find that there is tremendous competition for external scholarships, and students are judged heavily on research productivity. Currently, students must complete 711 and 712 in the second semester of their first year if they want to obtain a Master's degree after their first year. We want them to have more flexibility with respect to the timing of this requirement, so that research can get underway in the first year of graduate school. We also believe that taking our 710 course along with the statistical analyses they will be doing for their own research is sufficient quantitative work for a Master's.

PROVIDE IMPLEMENTATION DATE: (*Implementation date should be at the beginning of the academic year*)

September, 2014

ARE THERE ANY OTHER DETAILS OF THE RECOMMENDED CHANGE THAT THE CURRICULUM AND POLICY COMMITTEE SHOULD BE AWARE OF? IF YES, EXPLAIN.

PROVIDE A DESCRIPTION OF THE RECOMMENDED CHANGE TO BE INCLUDED IN THE CALENDAR:

Current:

Students must complete *710, #711, #712 and 720 as well as a thesis to obtain a Master's degree.

Proposed:

Students must complete *710, ~~#711, #712~~ and 720 as well as a thesis to obtain a Master's degree.

CONTACT INFORMATION FOR THE RECOMMENDED CHANGE:

Name: Mel Rutherford Email: ruther@mcmaster.ca Extension: 27120 Date submitted: April 1, 2014

If you have any questions regarding this form, please contact the Assistant Secretary, School of Graduate Studies, cbyce@mcmaster.ca

SGS/2013



RECOMMENDATION FOR CHANGE IN GRADUATE CURRICULUM - FOR CHANGE(S) INVOLVING DEGREE PROGRAM REQUIREMENTS / PROCEDURES

IMPORTANT: PLEASE READ THE FOLLOWING NOTES BEFORE COMPLETING THIS FORM:

1. This form must be completed for **ALL** changes involving degree program requirements/procedures. **All** sections of this form **must** be completed.
2. An electronic version of this form (must be in MS WORD **not** PDF) should be emailed to the Assistant Secretary, School of Graduate Studies.
3. A representative from the department is **required to attend** the Faculty Curriculum and Policy Committee meeting during which this recommendation for change in graduate curriculum will be discussed.

DEPARTMENT	Mathematics and Statistics
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NAME OF PROGRAM	Masters of Science in Mathematics – Financial Mathematics Option (M-Phimac)
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PROGRAM DEGREE	Ph.D. ()	M.A. ()	M.A.Sc. ()	M.B.A. ()	M. Eng. ()	M.Sc. (XXX)	Diploma Program ()	Other (Specify)
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NATURE OF RECOMMENDATION (PLEASE CHECK APPROPRIATE BOX)

CHANGE IN ADMISSION REQUIREMENTS	<input type="checkbox"/>	CHANGE IN COMPREHENSIVE EXAMINATION PROCEDURE	<input type="checkbox"/>	CHANGE IN COURSE REQUIREMENTS	<input type="checkbox"/>
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CHANGE IN THE DESCRIPTION OF A SECTION IN THE GRADUATE CALENDAR	<input checked="" type="checkbox"/>	EXPLAIN: Course renumbering to better reflect nature of the courses
--	-------------------------------------	---

OTHER CHANGES	<input type="checkbox"/>	EXPLAIN:
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DESCRIBE THE EXISTING REQUIREMENT/PROCEDURE:

C. Financial Mathematics Option (M-Phimac)

The duration of this option is normally 12 months.

The candidate must complete the following graduate courses:

MATH *771 / Mathematics of Finance

MATH + *772 / Topics in Financial Mathematics

MATH *778 / Applied Computational Finance I
MATH *779 / Applied Computational Finance II
MATH *774 / The Mathematics of Credit Risk
MATH *775 / Portfolio Theory and Incomplete Markets
MATH *776 / Financial Markets
MATH *790 / Major Research Project
 Statistics *721 (or an alternate statistics course approved by the department)

PROVIDE A DETAILED DESCRIPTION OF THE RECOMMENDED CHANGE (*Attach additional pages if space is not sufficient.*)

The only change is in the last two requirements.

Math 790 / Major Research Project is to be replaced with Math 797 / Industrial Project

RATIONALE FOR THE RECOMMENDED CHANGE:

A version of Math 790 called Math 797 was created specifically for the students in the Financial Mathematics option in order to identify the differences in term of offering, as well as the difference in style, where the Financial Math project is more industrial in nature. Math 797 is completed during the summer term, from the beginning of May to the end of August.

PROVIDE IMPLEMENTATION DATE: (*Implementation date should be at the beginning of the academic year*)

As soon as practical

ARE THERE ANY OTHER DETAILS OF THE RECOMMENDED CHANGE THAT THE CURRICULUM AND POLICY COMMITTEE SHOULD BE AWARE OF? IF YES, EXPLAIN.

No

PROVIDE A DESCRIPTION OF THE RECOMMENDED CHANGE TO BE INCLUDED IN THE CALENDAR:

C. Financial Mathematics Option (M-Phimac)

The duration of this option is normally 12 months.

The candidate must complete the following graduate courses:

MATH *771 / Mathematics of Finance
MATH +*772 / Topics in Financial Mathematics

MATH *778 / Applied Computational Finance I
MATH *779 / Applied Computational Finance II
MATH *774 / The Mathematics of Credit Risk
MATH *775 / Portfolio Theory and Incomplete Markets
MATH *776 / Financial Markets
MATH *797 / Industrial Project

CONTACT INFORMATION FOR THE RECOMMENDED CHANGE:

Name: David Lozinski Email: lozinski@math.mcmaster.ca Extension: 23409 Date submitted: Oct 20, 2014

If you have any questions regarding this form, please contact the Assistant Secretary, School of Graduate Studies, cbryce@mcmaster.ca

SGS/2013



School of Graduate Studies

1280 Main Street West
Hamilton, Ontario, Canada
L8S 4L8

Phone 905.525.9140
Ext. 23679
<http://graduate.mcmaster.ca>

To : Graduate Council

From : Christina Bryce
Assistant Graduate Secretary

At its meetings on October 14th and November 11th 2014 the Faculty of Social Sciences Graduate Curriculum and Policy Committee approved the following recommendations.

Please note that these recommendations were approved the Faculty of Social Sciences Council for its meeting on November 20th, 2014

FOR APPROVAL OF GRADUATE COUNCIL:

Anthropology

-Change to Specialization Name

Economics

-Change to Calendar Information (Waivers)

Health, Aging and Society

-Change to Course Requirements (M.A.)

Sociology

-Delete Comprehensive Area
-Change Name of Research Field

FOR INFORMATION OF GRADUATE COUNCIL:

Anthropology

-New Courses:
-*746 Bioarchaeology
-*747 Biological Anthropology Ancient Biomolecules and Bioarchaeological Chemistry
-*748 Object Worlds: The Circulation and Value of Material Culture

Economics

-Course Description Changes
-*721 Microeconomic Theory I

- *727 Microeconomic Theory for Public Policy
- *728 Macroeconomic Theory for Public Policy
- *752 International Finance
- *753 Topics in International Economics
- *762 Econometrics II
- *774 Economic Policy Analysis II
- *784 Industrial Organization
- *785 Economics of Human Resource Policies

- Course Title and Description Change
 - *791 Topics in Advanced Health Economics

Globalization

- New Cross-listed Courses
 - *748 The Qur'an in a Global Context
 - *763 International Water Policy
 - *771 Politics of the Global South: and International Relations Perspective

Health, Aging and Society

- Course Title and Description Change
 - *702 Research Methods and Design in Studies of Health and Aging
- New Courses
 - *714 Qualitative and Historical Methods in Studies of Health and Aging
 - *715 Critical Perspectives in Health Studies

Labour Studies

- Course Description Change
 - *715 Methods

Political Science

- New Courses
 - *762 Comparative Political Economy
 - *763 International Water Policy
- Cross-list
 - *767 Politics of the Global South: an International Relations Perspective
- Title Change
 - *741 Comparative Politics of Social Movements and Political Parties
 - *748 Democracy and Diversity: Multicultural Policies in Comparative Perspective
 - *784 Statistical Analysis for Public Policy
- Course Cancellation
 - *747 Welfare States in Comparative Perspective

Religious Studies

-Course Cancellation

- *780 Topics in Religion and Society

-New Course

- *748 The Qur'an in a Global Context

Sociology

-New Courses

- *702 Selected Topics in Sociological Approaches to Social Psychology
- *711 Sociological Perspectives in Social Psychology
- *731 Supervised Research Course in Sociological Approaches to Social Psychology

-Delete Courses

- *708 Topics in Religion and Society
- *722 Sociology of Culture
- *744 Computer Applications in Qualitative Data Analysis
- *747 Welfare States in Comparative Perspective
- *757 History of Sociological Theory

Faculty of Social Sciences

- New Courses

- *700 The Use and Impacts of Social Science Research
- *701 Critical Approaches to Community Based Research



RECOMMENDATION FOR CHANGE IN GRADUATE CURRICULUM - FOR CHANGE(S) INVOLVING DEGREE PROGRAM REQUIREMENTS / PROCEDURES

IMPORTANT: PLEASE READ THE FOLLOWING NOTES BEFORE COMPLETING THIS FORM:								
<p>1. This form must be completed for ALL changes involving degree program requirements/procedures. All sections of this form must be completed.</p> <p>2. An electronic version of this form (must be in MS WORD not PDF) should be emailed to the Assistant Secretary, School of Graduate Studies.</p> <p>3. A representative from the department is required to attend the Faculty Curriculum and Policy Committee meeting during which this recommendation for change in graduate curriculum will be discussed.</p>								
DEPARTMENT		Anthropology						
NAME OF PROGRAM		M.A. and Ph.D. in Anthropology						
PROGRAM DEGREE	Ph.D. (X)	M.A. (X)	M.A.Sc. ()	M.B.A. ()	M. Eng. ()	M.Sc. ()	Diploma Program ()	Other (Specify)
NATURE OF RECOMMENDATION (PLEASE CHECK APPROPRIATE BOX)								
CHANGE IN ADMISSION REQUIREMENTS		<input type="checkbox"/>	CHANGE IN COMPREHENSIVE EXAMINATION PROCEDURE		<input type="checkbox"/>	CHANGE IN COURSE REQUIREMENTS		
CHANGE IN THE DESCRIPTION OF A SECTION IN THE GRADUATE CALENDAR			<input checked="" type="checkbox"/>	EXPLAIN: We would like to change the name of the specialization "The Anthropology of Health" to Culture, Health, and Disease.				
OTHER CHANGES		EXPLAIN:						
DESCRIBE THE <u>EXISTING</u> REQUIREMENT/PROCEDURE:								

PROVIDE A DETAILED DESCRIPTION OF THE RECOMMENDED CHANGE (*Attach additional pages if space is not sufficient.*)

No procedures or program requirements would change; it would just be a simple change of the program name.

RATIONALE FOR THE RECOMMENDED CHANGE:

Over the last ten years there has been a significant change in faculty members in the Department of Anthropology. The research interests and expertise of the current members is different to that when the name "The Anthropology of Health" was selected.

To more accurately reflect the research interests of current faculty and assist in marketing the program we would like to propose a change in the name to **Culture, Health, and Disease**.

PROVIDE IMPLEMENTATION DATE: (*Implementation date should be at the beginning of the academic year*)

September 2015.

ARE THERE ANY OTHER DETAILS OF THE RECOMMENDED CHANGE THAT THE CURRICULUM AND POLICY COMMITTEE SHOULD BE AWARE OF? IF YES, EXPLAIN.

No

PROVIDE A DESCRIPTION OF THE RECOMMENDED CHANGE TO BE INCLUDED IN THE CALENDAR:

Current wording (under "Areas of Specialization"):

"The McMaster Anthropology Department offers degrees in Archaeology, Cultural Anthropology, Physical Anthropology, and the Anthropology of Health."

Proposed wording:

"The McMaster Anthropology Department offers specializations in Archaeology, Cultural Anthropology, Physical Anthropology, and Culture, Health and Disease."

Current wording (under "Areas of Specialization"):

"The Anthropology of Health draws together core anthropology faculty and students interested in human biology, medical and physical anthropology. This program takes advantage of the many links to other health research areas at McMaster and beyond."

Proposed wording:

"Culture, Health, and Disease draws together core anthropology faculty and students across our sub-disciplines, with interests in cultural, historical, and biocultural thematic areas of focus. This program takes advantage of the many links to health research areas at McMaster and beyond".

Delete (under "Areas of Specialization"):

"The Department offers a Ph.D. degree in the fields of Cultural Anthropology, Archaeology,

Physical Anthropology and Anthropology of Health.”

Current wording (under “Anthropology, M.A.”):

“The M.A. program is intended to be holistic in scope, but students may specialize in any of the major fields of Anthropology, including Cultural, Physical, Archaeology, Anthropology of Health, and Linguistic Anthropology.”

Proposed wording:

“The M.A. program is intended to be holistic in scope, but students may specialize in any of the major fields of Anthropology, including Cultural; Physical; Archaeology; Culture, Health, and Disease; and Linguistic Anthropology.”

CONTACT INFORMATION FOR THE RECOMMENDED CHANGE:

Name: Megan Brickley Email: Brickley@mcmaster.ca Extension: 24256 Date submitted: October 1st 2014.

If you have any questions regarding this form, please contact the Assistant Secretary, School of Graduate Studies, cbruce@mcmaster.ca

SGS/2013



RECOMMENDATION FOR CHANGE IN GRADUATE CURRICULUM - FOR CHANGE(S) INVOLVING DEGREE PROGRAM REQUIREMENTS / PROCEDURES

IMPORTANT: PLEASE READ THE FOLLOWING NOTES BEFORE COMPLETING THIS FORM:

1. This form must be completed for **ALL** changes involving degree program requirements/procedures. **All** sections of this form **must** be completed.
2. An electronic version of this form (must be in MS WORD **not** PDF) should be emailed to the Assistant Secretary, School of Graduate Studies.
3. A representative from the department is **required to attend** the Faculty Curriculum and Policy Committee meeting during which this recommendation for change in graduate curriculum will be discussed.

DEPARTMENT	Economics
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NAME OF PROGRAM	Master's in Economics
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PROGRAM DEGREE	Ph.D. ()	M.A. (X)	M.A.Sc. ()	M.B.A. ()	M. Eng. ()	M.Sc. ()	Diploma Program ()	Other (Specify)
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NATURE OF RECOMMENDATION (PLEASE CHECK APPROPRIATE BOX)

CHANGE IN ADMISSION REQUIREMENTS	<input type="checkbox"/>	CHANGE IN COMPREHENSIVE EXAMINATION PROCEDURE	<input type="checkbox"/>	CHANGE IN COURSE REQUIREMENTS	<input type="checkbox"/>
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CHANGE IN THE DESCRIPTION OF A SECTION IN THE GRADUATE CALENDAR	<input type="checkbox"/>	EXPLAIN:
	<input checked="" type="checkbox"/>	<p>Under 'Additional Informaton'</p> <p>Replace "One (but not more than one) of these required courses may be waived if equivalent work has already been completed by the student in undergraduate course work."</p> <p>with</p> <p>"ECON *761 may be waived if equivalent work has already been completed by the student in undergraduate course work."</p>

OTHER CHANGES		EXPLAIN:
DESCRIBE THE <u>EXISTING</u> REQUIREMENT/PROCEDURE:		

PROVIDE A DETAILED DESCRIPTION OF THE RECOMMENDED CHANGE (<i>Attach additional pages if space is not sufficient.</i>)
RATIONALE FOR THE RECOMMENDED CHANGE: The recommended change reflects what has been practice in the department, i.e., course waiver exams have only ever been written for Econ 761, and it is also consistent what is described for our Master's in Economic Policy Program.
PROVIDE IMPLEMENTATION DATE: (<i>Implementation date should be at the beginning of the academic year</i>) September 2015.
ARE THERE ANY OTHER DETAILS OF THE RECOMMENDED CHANGE THAT THE CURRICULUM AND POLICY COMMITTEE SHOULD BE AWARE OF? IF YES, EXPLAIN.
PROVIDE A DESCRIPTION OF THE RECOMMENDED CHANGE TO BE INCLUDED IN THE CALENDAR:
CONTACT INFORMATION FOR THE RECOMMENDED CHANGE: Name: Katherine Cuff Email: cuffk@mcmaster.ca Extension: 23827 Date submitted: October 1, 2014

If you have any questions regarding this form, please contact the Assistant Secretary, School of Graduate Studies,
cbryce@mcmaster.ca

SGS/2013



RECOMMENDATION FOR CHANGE IN GRADUATE CURRICULUM - FOR CHANGE(S) INVOLVING DEGREE PROGRAM REQUIREMENTS / PROCEDURES

IMPORTANT: PLEASE READ THE FOLLOWING NOTES BEFORE COMPLETING THIS FORM:

1. This form must be completed for **ALL** changes involving degree program requirements/procedures. **All** sections of this form **must** be completed.
2. An electronic version of this form (must be in MS WORD **not** PDF) should be emailed to the Assistant Secretary, School of Graduate Studies.
3. A representative from the department is **required to attend** the Faculty Curriculum and Policy Committee meeting during which this recommendation for change in graduate curriculum will be discussed.

DEPARTMENT	Economics
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NAME OF PROGRAM	PhD in Economics
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PROGRAM DEGREE	Ph.D. (X)	M.A. ()	M.A.Sc. ()	M.B.A. ()	M. Eng. ()	M.Sc. ()	Diploma Program ()	Other (Specify)
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NATURE OF RECOMMENDATION (PLEASE CHECK APPROPRIATE BOX)

CHANGE IN ADMISSION REQUIREMENTS	<input type="checkbox"/>	CHANGE IN COMPREHENSIVE EXAMINATION PROCEDURE	<input type="checkbox"/>	CHANGE IN COURSE REQUIREMENTS	<input type="checkbox"/>
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CHANGE IN THE DESCRIPTION OF A SECTION IN THE GRADUATE CALENDAR	<input type="checkbox"/>	EXPLAIN:
	<input checked="" type="checkbox"/>	<p>Under 'Additional Informaton'</p> <p>Replace "A candidate who has taken courses equivalent to ECON *721, ECON *723 and/or ECON *761 at another university can petition the Chair of the Graduate Studies Committee to have these course requirements reduced." With</p> <p>"ECON *761 may be waived if equivalent work has already been completed by the student at another university. A student's claim to have completed equivalent work will be tested by examination at the beginning of the academic year."</p>

OTHER CHANGES		EXPLAIN:
DESCRIBE THE <u>EXISTING</u> REQUIREMENT/PROCEDURE:		

PROVIDE A DETAILED DESCRIPTION OF THE RECOMMENDED CHANGE (<i>Attach additional pages if space is not sufficient.</i>)
RATIONALE FOR THE RECOMMENDED CHANGE: The recommended change reflects what has been practice in the department and it is also consistent what we require for our graduate students in our Master's in Economic Policy Program.
PROVIDE IMPLEMENTATION DATE: (<i>Implementation date should be at the beginning of the academic year</i>) September 2015.
ARE THERE ANY OTHER DETAILS OF THE RECOMMENDED CHANGE THAT THE CURRICULUM AND POLICY COMMITTEE SHOULD BE AWARE OF? IF YES, EXPLAIN.
PROVIDE A DESCRIPTION OF THE RECOMMENDED CHANGE TO BE INCLUDED IN THE CALENDAR:
CONTACT INFORMATION FOR THE RECOMMENDED CHANGE: Name: Katherine Cuff Email: cuffk@mcmaster.ca Extension: 23827 Date submitted: October 1, 2014

If you have any questions regarding this form, please contact the Assistant Secretary, School of Graduate Studies,
cbryce@mcmaster.ca

SGS/2013



RECOMMENDATION FOR CHANGE IN GRADUATE CURRICULUM - FOR CHANGE(S) INVOLVING DEGREE PROGRAM REQUIREMENTS / PROCEDURES

IMPORTANT: PLEASE READ THE FOLLOWING NOTES BEFORE COMPLETING THIS FORM:

1. This form must be completed for **ALL** changes involving degree program requirements/procedures. **All** sections of this form **must** be completed.
2. An electronic version of this form (must be in MS WORD **not** PDF) should be emailed to the Assistant Secretary, School of Graduate Studies.
3. A representative from the department is **required to attend** the Faculty Curriculum and Policy Committee meeting during which this recommendation for change in graduate curriculum will be discussed.

DEPARTMENT	Health, Aging & Society
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NAME OF PROGRAM	Health & Aging
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PROGRAM DEGREE	Ph.D. ()	M.A. (X)	M.A.Sc. ()	M.B.A. ()	M. Eng. ()	M.Sc. ()	Diploma Program ()	Other (Specify)
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NATURE OF RECOMMENDATION (PLEASE CHECK APPROPRIATE BOX)

CHANGE IN ADMISSION REQUIREMENTS	<input type="checkbox"/>	CHANGE IN COMPREHENSIVE EXAMINATION PROCEDURE	<input type="checkbox"/>	CHANGE IN COURSE REQUIREMENTS	<input checked="" type="checkbox"/>
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CHANGE IN THE DESCRIPTION OF A SECTION IN THE GRADUATE CALENDAR	<input checked="" type="checkbox"/>	EXPLAIN: Remove sentence, "One of the four/two courses can/may be taken as an independent study with a faculty member (HLTH AGE *706 Independent Study)"
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OTHER CHANGES	EXPLAIN:
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DESCRIBE THE EXISTING REQUIREMENT/PROCEDURE:

A. Course Work and Research Paper Option (one year)

Students will be required to complete six (6) half courses, including:

i. HLTH AGE *701 Social Science Perspectives on Health and Aging, and HLTH AGE *702 Research Methods and Design in Studies of Health and Aging

ii. Four elective courses offered by Health, Aging and Society or by another department or academic unit (provided that permission has been obtained from those departments or academic units). One of the four courses can be taken as an independent study with a faculty member (HLTH AGE *706 Independent Study). Only two of the four elective courses may be taken in a department or academic unit other than Health, Aging and Society.

iii. A research paper (7500-8500 words, excluding references) supervised by a core or associate faculty member. The research paper will be read by the supervisor and another faculty member. (If the supervisor is an associate member, then the second reader must be a core faculty member selected by the supervisor in consultation with the student).

B. Course Work and Thesis Option (two years)

Students will be required to complete four (4) half courses, including:

i. HLTH AGE *701 Social Science Perspectives on Health and Aging, and HLTH AGE *702 Research Methods and Design in Studies of Health and Aging

ii. Two elective courses offered by Health, Aging and Society or by another department or academic unit (provided that permission has been obtained from those departments or academic units). One of the two courses may be taken as an independent study with a faculty member (HLTH AGE *706 Independent Study). Only one of the two elective courses may be taken in a department or academic unit other than Health, Aging & Society.

iii. A thesis that involves original and independent research (20,000-25,000 words excluding references) supervised by a core faculty member or an associate member if approved by the graduate committee. The thesis will be orally examined by a committee including the supervisor and two other faculty selected by the thesis supervisor in consultation with the student.

PROVIDE A DETAILED DESCRIPTION OF THE RECOMMENDED CHANGE (*Attach additional pages if space is not sufficient.*)

Recommended changes in bold and highlighted:

A. Course Work and Research Paper Option (one year)

Students will be required to complete six (6) half courses, including:

i. HLTH AGE *701 Social Science Perspectives on Health and Aging

ii. ONE of: HLTH AGE *702 Quantitative Research Methods in Studies of Health and Aging (former course name is Research Methods and Design in Studies of Health and Aging) OR HLTH AGE *714 Qualitative and Historical Methods in Studies of Health and Aging

iii. Four elective courses offered by Health, Aging and Society or by another department or academic unit (provided that permission has been obtained from those departments or academic units). ~~One of the four courses can be taken as an independent study with a faculty member (HLTH AGE *706 Independent Study).~~ Only two of the four elective courses may be taken in a department or academic unit other than Health, Aging and Society.

iv. A research paper (7500-8500 words, excluding references) supervised by a core or associate faculty member. The research paper will be read by the supervisor and another faculty member. (If the supervisor is an associate member, then the second reader must be a core faculty member selected by the supervisor in consultation with the student).

B. Course Work and Thesis Option (two years)

Students will be required to complete four (4) half courses, including:

i. HLTH AGE *701 Social Science Perspectives on Health and Aging

ii. ONE of: HLTH AGE *702 Quantitative Research Methods in Studies of Health and Aging (former course name is Research Methods and Design in Studies of Health and Aging) OR HLTH AGE *714 Qualitative and Historical Methods in Studies of Health and Aging

ii. Two elective courses offered by Health, Aging and Society or by another department or academic unit (provided that permission has been obtained from those departments or academic units). ~~One of the two courses may be taken as an independent study with a faculty member (HLTH AGE *706 Independent Study).~~ Only one of the two elective courses may be taken in a department or academic unit other than Health, Aging & Society.

iii. A thesis that involves original and independent research (20,000-25,000 words excluding references) supervised by a core faculty member or an associate member if approved by the graduate committee. The thesis will be orally examined by a committee including the supervisor and two other faculty selected by the thesis supervisor in consultation with the student.

RATIONALE FOR THE RECOMMENDED CHANGE:

One of HLTH AGE *702 OR HLTH AGE *714: To give a greater choice to students in terms of research methods (quantitative or qualitative/historical) that is of relevance to their research and/or interests.

Removal of sentence, "One of the courses can be taken as an independent study with a faculty member (HLTH AGE *706 Independent Study): This sentence should be removed because HLTH AGE *706 Independent Study is no longer a unique course for the department. Students now have a choice of two independent study-type courses: HLTH AGE *706 Independent Study and HLTH AGE *707 Reading Course.

PROVIDE IMPLEMENTATION DATE: (Implementation date should be at the beginning of the academic year)

September 2015

ARE THERE ANY OTHER DETAILS OF THE RECOMMENDED CHANGE THAT THE CURRICULUM AND POLICY COMMITTEE SHOULD BE AWARE OF? IF YES, EXPLAIN.

No

PROVIDE A DESCRIPTION OF THE RECOMMENDED CHANGE TO BE INCLUDED IN THE CALENDAR:

A. Course Work and Research Paper Option (one year)

Students will be required to complete six (6) half courses, which include:

i. HLTH AGE *701 Social Science Perspectives on Health and Aging

ii. ONE of: HLTH AGE *702 Quantitative Research Methods in Studies of Health and Aging OR HLTH AGE *714 Qualitative and Historical Methods in Studies of Health and Aging

iii. Four elective courses offered by Health, Aging and Society or by another department or academic unit (provided that permission has been obtained from those departments or academic units). Only two of the four elective courses may be taken in a department or academic unit other than Health, Aging and Society.

iv. A research paper (7500-8500 words, excluding references) supervised by a core or associate faculty member. The research paper will be read by the supervisor and another faculty member. (If the supervisor is an associate member, then the second reader must be a core faculty member selected by the supervisor in consultation with the student).

B. Course Work and Thesis Option (two years)

Students will be required to complete four (4) half courses, which include:

i. HLTH AGE *701 Social Science Perspectives on Health and Aging

ii. ONE of: HLTH AGE *702 Quantitative Research Methods in Studies of Health and Aging OR HLTH AGE *714 Qualitative and Historical Methods in Studies of Health and Aging

ii. Two elective courses offered by Health, Aging and Society or by another department or academic unit (provided that permission has been obtained from those departments or academic units). Only one of the two elective courses may be taken in a department or academic unit other than Health, Aging & Society.

iii. A thesis that involves original and independent research (20,000-25,000 words excluding references) supervised by a core faculty member or an associate member if approved by the graduate committee. The thesis will be orally examined by a committee including the supervisor and two other faculty selected by the thesis supervisor in consultation with the student.

CONTACT INFORMATION FOR THE RECOMMENDED CHANGE:

Name: Gavin Andrews Email: andrews Extension: 26390 Date submitted: Oct 28, 2014

If you have any questions regarding this form, please contact the Assistant Secretary, School of Graduate Studies, cbryce@mcmaster.ca

SGS/2013



RECOMMENDATION FOR CHANGE IN GRADUATE CURRICULUM - FOR CHANGE(S) INVOLVING DEGREE PROGRAM REQUIREMENTS / PROCEDURES

IMPORTANT: PLEASE READ THE FOLLOWING NOTES BEFORE COMPLETING THIS FORM:

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2. An electronic version of this form (must be in MS WORD **not** PDF) should be emailed to the Assistant Secretary, School of Graduate Studies.
3. A representative from the department is **required to attend** the Faculty Curriculum and Policy Committee meeting during which this recommendation for change in graduate curriculum will be discussed.

DEPARTMENT	Sociology
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NAME OF PROGRAM	Sociology
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PROGRAM DEGREE	Ph.D. (<input checked="" type="checkbox"/>)	M.A. (<input type="checkbox"/>)	M.A.Sc. (<input type="checkbox"/>)	M.B.A. (<input type="checkbox"/>)	M. Eng. (<input type="checkbox"/>)	M.Sc. (<input type="checkbox"/>)	Diploma Program (<input type="checkbox"/>)	Other (Specify)
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NATURE OF RECOMMENDATION (PLEASE CHECK APPROPRIATE BOX)

CHANGE IN ADMISSION REQUIREMENTS	<input type="checkbox"/>	CHANGE IN COMPREHENSIVE EXAMINATION PROCEDURE	<input type="checkbox"/>	CHANGE IN COURSE REQUIREMENTS	<input type="checkbox"/>
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CHANGE IN THE DESCRIPTION OF A SECTION IN THE GRADUATE CALENDAR	<input type="checkbox"/>	EXPLAIN:
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OTHER CHANGES	<input checked="" type="checkbox"/>	EXPLAIN: Deletion of a comprehensive area
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DESCRIBE THE EXISTING REQUIREMENT/PROCEDURE:

PhD candidates are required to take comprehensive examinations in two of the following areas: Political Sociology and Social Movements, Social Inequality; Social Psychology; Sociology of Education; Sociology of Gender and Sexualities; Sociology of Race and Ethnicity

<p>PROVIDE A DETAILED DESCRIPTION OF THE RECOMMENDED CHANGE (<i>Attach additional pages if space is not sufficient.</i>)</p> <p>Delete comprehensive area Sociology of Education</p>
<p>RATIONALE FOR THE RECOMMENDED CHANGE:</p> <p>Due to changing faculty complement and research areas, this comprehensive area can no longer be sustained.</p>
<p>PROVIDE IMPLEMENTATION DATE: (<i>Implementation date should be at the beginning of the academic year</i>)</p>
<p>ARE THERE ANY OTHER DETAILS OF THE RECOMMENDED CHANGE THAT THE CURRICULUM AND POLICY COMMITTEE SHOULD BE AWARE OF? IF YES, EXPLAIN.</p>
<p>PROVIDE A DESCRIPTION OF THE RECOMMENDED CHANGE TO BE INCLUDED IN THE CALENDAR:</p> <p>PhD candidates are required to take comprehensive examinations in two of the following areas: Political Sociology and Social Movements, Social Inequality; Social Psychology; Sociology of Education; Sociology of Gender and Sexualities; Sociology of Race and Ethnicity</p>
<p>CONTACT INFORMATION FOR THE RECOMMENDED CHANGE:</p> <p>Name: John Fox Email: jfox@mcmaster.ca Extension: 23604 Date submitted: September 30, 2014</p>

If you have any questions regarding this form, please contact the Assistant Secretary, School of Graduate Studies, cbryce@mcmaster.ca

SGS/2013



RECOMMENDATION FOR CHANGE IN GRADUATE CURRICULUM - FOR CHANGE(S) INVOLVING DEGREE PROGRAM REQUIREMENTS / PROCEDURES

IMPORTANT: PLEASE READ THE FOLLOWING NOTES BEFORE COMPLETING THIS FORM:								
1. This form must be completed for ALL changes involving degree program requirements/procedures. All sections of this form must be completed.								
2. An electronic version of this form (must be in MS WORD not PDF) should be emailed to the Assistant Secretary, School of Graduate Studies.								
3. A representative from the department is required to attend the Faculty Curriculum and Policy Committee meeting during which this recommendation for change in graduate curriculum will be discussed.								
DEPARTMENT		Sociology						
NAME OF PROGRAM		Sociology						
PROGRAM DEGREE	Ph.D. (<input checked="" type="checkbox"/>)	M.A. (<input type="checkbox"/>)	M.A.Sc. ()	M.B.A. ()	M. Eng. ()	M.Sc. ()	Diploma Program ()	Other (Specify)
NATURE OF RECOMMENDATION (PLEASE CHECK APPROPRIATE BOX)								
CHANGE IN ADMISSION REQUIREMENTS		<input type="checkbox"/>	CHANGE IN COMPREHENSIVE EXAMINATION PROCEDURE		<input type="checkbox"/>	CHANGE IN COURSE REQUIREMENTS		<input type="checkbox"/>
CHANGE IN THE DESCRIPTION OF A SECTION IN THE GRADUATE CALENDAR			<input type="checkbox"/>	EXPLAIN:				
OTHER CHANGES	<input checked="" type="checkbox"/>	EXPLAIN: Change in a research field within the graduate programme						
DESCRIBE THE EXISTING REQUIREMENT/PROCEDURE:								
The Department has the capability of supervising MA major papers and theses and PhD dissertations in the research areas of Education and Work; Gender, Sexuality and Family; Politics, Social Movements and Policy; Race, Ethnicity and Immigration; Social Inequality; and Social Psychology. These areas are broadly defined and a variety of approaches and topics are possible within each. Students normally select more narrowly focused topics under the general rubric of these areas.								

PROVIDE A DETAILED DESCRIPTION OF THE RECOMMENDED CHANGE (*Attach additional pages if space is not sufficient.*)

Change the research field from "Education and Work" to "Sociology of Work"

RATIONALE FOR THE RECOMMENDED CHANGE:

Due to changing faculty complement and research areas, the research field of "Education" can no longer be sustained. In contrast, recent hiring has improved the department's strength in the field of "Sociology of Work".

PROVIDE IMPLEMENTATION DATE: (*Implementation date should be at the beginning of the academic year*)

September 2015

ARE THERE ANY OTHER DETAILS OF THE RECOMMENDED CHANGE THAT THE CURRICULUM AND POLICY COMMITTEE SHOULD BE AWARE OF? IF YES, EXPLAIN.

PROVIDE A DESCRIPTION OF THE RECOMMENDED CHANGE TO BE INCLUDED IN THE CALENDAR:

The Department has the capability of supervising MA major papers and theses and PhD dissertations in the research areas of ~~Education and Work~~; Gender, Sexuality and Family; Politics, Social Movements and Policy; Race, Ethnicity and Immigration; Social Inequality; ~~and~~ Social Psychology; and **Sociology of Work**. These areas are broadly defined and a variety of approaches and topics are possible within each. Students normally select more narrowly focused topics under the general rubric of these areas.

CONTACT INFORMATION FOR THE RECOMMENDED CHANGE:

Name: John Fox Email: jfox@mcmaster.ca Extension: 23604 Date submitted: September 30, 2014

If you have any questions regarding this form, please contact the Assistant Secretary, School of Graduate Studies,
cbryce@mcmaster.ca

SGS/2013

The John Zeller MBA Academic Grant

Established in 2014 by John Zeller, MBA (Class of '84) and Karen Zeller in memory of her mother, Nonno Hjelmer. To be awarded to a student enrolled in the MBA program who has achieved notable academic standing and demonstrates financial need

The Pastor Enoch Adejare Adeboye Ontario Graduate Scholarship in Math and Statistics.

Established in 2014 by Redeemed Christian Church of God (RCCG) Canada Province 3 in honour of Pastor Enoch Adeboye to contribute to the funding of Ontario Graduate Scholarship programs at McMaster University. To be awarded by the School of Graduate Studies with preference given to a PhD student in the Department of Math and Statistics.

The Transportation Association of Canada Foundation and The Norman Esch Foundation Ontario Graduate Scholarship.

Established in 2013 by the Transportation Association of Canada Foundation and The Norman Esch Foundation to contribute to the funding of Ontario Graduate Scholarship programs at McMaster University. To be awarded by the School of Graduate Studies to 5 (five) full-time master's or doctoral student in the Faculty of Engineering. Preference given to students in the Department of Civil Engineering studying transportation.

The International Graduate Scholarship in History

Established in 2014 from funds donated anonymously. To be awarded by the School of Graduate Studies to an international graduate student in the Department of History based on the recommendation from the Chair of the Department of History.

The Zoltan D. Simo Academic Grant.

Established in 2014 by Zoltan Simo, MBA (Class of '71). To be awarded by the School of Graduate Studies to a domestic student enrolled in the MBA program who has a high Sessional Average and demonstrates financial need.

The Jean Crowe Scholarship

Established in 2014 by Jean Crowe. To be awarded by the Faculty of Health Sciences to a doctoral student within the School of Rehabilitation Sciences in the field of Physiotherapy who has completed at least one academic year of their doctoral studies, whose research is innovative and of clinical significance, and who has demonstrated academic excellence. Recipient to be selected by a committee that includes the Associate Dean SRS, Assistant Dean, SRS and another faculty member, at least one of whom is a physiotherapist.