

**A GUIDE FOR
TEAMS CONDUCTING
ORGANIZATIONAL EVALUATIONS
(Resident Alberta Institutions)**

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1. INTRODUCTION

The Campus Alberta Quality Council (CAQC) is responsible for assessing all degree program applications from all post-secondary institutions wishing to offer degree programs in Alberta and making recommendations to the Minister of Advanced Education with respect to program approval. It also is responsible for monitoring approved degree programs to ensure they continue to meet Council's conditions and standards of institutional and program quality.

All applications for new degree programs to be offered in Alberta are to the Minister of Advanced Education. The two stage approval process is outlined in Appendix A of this Guide.

System Coordination Review – The first stage of the program approval process is a system coordination review by the Ministry to determine the need and impact of such a program on the post-secondary system in Alberta. Once that review is completed and a recommendation made to the Minister, the Minister may then refer the proposal to CAQC.

CAQC Review – CAQC's full review includes two phases, an *organizational evaluation* to determine the institution's readiness to implement and sustain the degree program and a *program evaluation* to look at the quality of the proposed program. Any institution proposing to offer a precedent-setting degree program, or one at a level that is new to it (e.g., first graduate program) will normally go through both stages of review. Not all applications are subjected to a full review. In certain cases, the institution may apply for a partially expedited review and move directly to the program evaluation stage. Council's review process culminates in a recommendation to the Minister.

Peer evaluation is an essential component of Council's evaluation. To assist in the assessment of an institution's application for a degree program, CAQC appoints an external evaluation team to provide independent opinion with respect to the organizational evaluation. The team's review of the application documentation, and its on-site appraisal and report to CAQC, are expected to aid Council's understanding of the relative strengths and weaknesses of the institution's readiness to implement and sustain degree programs of the type and level for which the institution is applying.

When an organizational evaluation is necessary, Council requires the institution to conduct a self-study. The guidelines for self-studies are found in Council's *Handbook: Quality Assessment and Quality Assurance*. The self-study is a key document for organizational evaluation teams.

The purpose of *A Guide for Teams Conducting Organizational Evaluations* is to provide guidance to members of the organizational evaluation team in planning and conducting its activities.

2. THE EXTERNAL EVALUATION TEAM

Using the institution's self-study and insights gained from a site visit to the applicant institution, the external evaluation team provides a thoughtful assessment of the applicant institution's readiness and capacity to offer and sustain the proposed programs. Using Council's organizational assessment standards (Appendix B) and its *Framework for Organizational Evaluation* (Appendix C), the evaluators provide an independent opinion on:

- the extent to which the systems and processes of the institution are clearly established to achieve excellence in learning outcomes,
- the extent to which the institution has created sustainable processes within the organization,

- the extent to which its financial and operational resources are adequate to sustain the learning processes students will experience,
- the link between students' experiences and demonstrable needs, and
- for private institutions, an assessment of risk to help determine Council's financial security requirements should the program be approved.

This information will help Council decide on the disposition of the application.

Recruitment and appointment of the evaluation team

Council appoints the members of the evaluation team and designates one of them as the chair. Although the final decision regarding the composition of the evaluation team rests with Council, the institution, as well as Council members and the CAQC Secretariat, may suggest persons they would like to have included on the team provided there are no conflicts of interest. The complete list of nominees is sent to the institution and Council members for comment prior to recruitment. Council reserves the right to add other potential reviewers if recruitment to a particular date proves to be difficult. Once the team is recruited and its membership ratified by Council, the institution is informed. It is important that potential members of the evaluation team declare any conflict of interest at the time of their nomination (see Code of Conduct in Appendix D).

Once Council has ratified the membership, members will be notified and will be asked to sign a Letter of Agreement (LOA). This Guide serves as an addendum to that LOA.

Size and composition

Normally, the team will consist of three or four external (peer) experts, although the size and composition will vary depending on the applicant institution. The Manager of the CAQC Secretariat, or designate, may act as an advisory member of the team.

Roles

Chair

The chair bears overall responsibility for finalizing the site visit; will speak for the team; will assess the expertise and experience of team members and decide their assignments; will consult with team members to ensure they are comfortable with the assignments; will assume responsibility for the preparation and production of the final report to Council; and will present the team's findings (normally by telephone) at one of Council's meetings. With respect to the site visit schedule, the CAQC Secretariat Advisor will work with the institution to prepare a first draft of the site visit schedule and then will act as the liaison with the institution to make changes as instructed by the chair and team members.

Members

Team members will be responsible for specific functions, as determined by the chair. Receiving a specific assignment does not preclude the need for each member to review the entire documentation.

CAQC Secretariat Advisor

To facilitate the team's work, the CAQC Secretariat Advisor will coordinate the review and serve as an advisory member of the team during the site visit, will work with the institution to prepare a draft schedule for the site visit for consideration by the chair of the team, and will be the liaison with the institution with respect to logistics and information requests of the team prior to the site visit. During the site visit, this individual will liaise with the institutional contact should the team seek

further information or clarification. This member will have access to all material relevant to the external evaluation and will take part in the team's orientation and discussions, but will not be involved in writing the report. After the site visit, the Advisor will receive the team's report and forward it to the institution for response.

Conduct

Evaluation team members must respect the confidential nature of the information submitted by the institution and restrict the use of this information to their work in relation to Council. All material must be shredded or returned to the CAQC Secretariat when the activity for which it was required is completed. As well, team members are reminded that any records in the custody or under the control of Council are subject to the *Freedom of Information and Protection of Privacy (FOIP) Act*. This includes the report of the external evaluation team to Council, as well as the institution's response to the report. During the recruitment process, Council relies on the personal and professional integrity of individuals to declare if there is any potential conflict of interest. At the orientation meeting with the CAQC Chair or designate, all team members will be asked to sign a copy of the Code of Conduct, which is found in Appendix D.

3. THE VISIT

Expectations of Council

Without intending to restrict the scope of the team's review, Council expects to have drawn to its attention what, in the opinion of the team, are the strengths and weaknesses of the institution's application with respect to its organization. As well, Council would like to be informed of any opportunities the team perceives for improving the organization, including suggestions for overcoming any perceived weaknesses or shortcomings.

Council is expecting a clear assessment of the institution's capacity to mount and sustain the quality of the proposed graduate program(s). In making that assessment, Council expects the team to use its 14 organizational assessment standards found in Appendix B and the following eleven categories of the framework tool found in Appendix C of this Guide.

1. Mission/Mandate, Educational Objectives and Academic Freedom
2. Organization and Administration
3. Financial Structure
4. Curricula and Instruction
5. Academic Staff
6. Strategic Planning
7. Learning Resources and Services
8. Academic Policies and Records
9. Student Services and the Student Experience
10. Physical Plant and General Facilities
11. Institutional Communications

For each category, the evaluation team is expected to look for the approach taken by the institution, the way in which the approach is deployed within the institution and the results of such deployment.

Overall, Council expects constructive criticism where that is warranted, and a fair presentation of the positive side of the institution's proposal. It is important to stress that the team's report is to be made to Council and not to the institution.

Date and length of the external evaluation team visit

The external evaluation team visit to the institution normally will take place when classes are in progress, at a time convenient to the institution and the team, and normally will take one and one half or two days. If not already determined at the time of appointment of the team, the date(s) for the visit will be determined by the Secretariat in consultation with the team chair and members and the institution vice-president academic or designate. A meeting of the team including an orientation meeting with Council's Chair will precede the time on campus. The meeting normally takes place at the hotel the evening before the start of the site visit.

Preparation for the visit

Normally, team members will receive a set of materials from the CAQC Secretariat, including the following:

- the institution's *Self-Study*, including important ancillary documents (such as the *Faculty/Staff Handbook*),
- the institution's current calendar or a link to it on their website,
- applicable correspondence between the Council and the institution, and
- information about Campus Alberta and its six-sector model.

Team members are encouraged to study the material and familiarize themselves with Council's assessment standards and *Framework for Organizational Evaluation* in advance of the orientation meeting. Some teams agree to make contact with each other via e-mail or telephone prior to the first face-to-face meeting. When reviewing these documents, team members are encouraged to ask themselves questions such as those listed below.

- Is there anything that requires further clarification?
- What additional information is desirable?
- What are the key questions that need to be addressed during the visit and in which interview session?
- Who are the principal people to be interviewed?
- How can the team best be deployed in conducting the evaluation?

The Secretariat Advisor should be informed of the need for any additional or clarifying information well in advance of the team's initial meeting.

By being prepared, team members will be better able to take systematic notes during the visit, develop insights based on their site visit observations, and participate with focus in the team deliberations. A scorebook is provided as a tool to assist reviewers.

Establishing the site visit schedule

As noted earlier, prior to the visit, the CAQC Secretariat Advisor will work with the institution's vice-president academic or designate to establish a first draft of the site visit schedule for review by the chair and team members. They may identify other groups or specific individuals with whom they wish to meet. Specific areas for discussion or the assessment standards to be addressed will be

identified for each interview session. These are intended only as a guide as often the responses to questions lead to other topics or issues.

During the visit, the team will wish to interview faculty, administrators, students and alumni. Depending on the type of review, they may also wish to meet with support/collaborating staff and examine facilities (library, computer labs, etc.) and other resources, and analyze relevant institutional policies and practices. The team's expectations need to be made clear prior to the site visit. Typically the team will operate as a single group, but, at the discretion of the team, they may split into subgroups to hold concurrent sessions with more interviewees within the time on campus.

The institution may be responsible for the selection of students, alumni and faculty to be interviewed in line with parameters established by the team. In other cases, the team may ask that some or all of the faculty or students self-select or be selected by their representative organizations. Some teams may wish to have open sessions designated on the schedule when faculty or other interested people can make an appointment (or drop-in) for brief interviews (e.g., 10 minutes) with the team. Such open sessions allow for specific input to be provided by individuals outside the groups and categories identified by the institution and team. If a team wishes to have an open session, the opportunity should be advertised by the institution in advance of the visit and a schedule established. Normally, the team asks that administration not attend interview sessions with students/alumni and faculty.

If a tour of the facility is arranged and there are time restrictions, the team may wish to suggest that the tour be limited by naming specific areas they wish to see.

Conduct of the visit

(a) Team orientation and meeting with CAQC Chair

Prior to the on-campus visit, the CAQC chair, or designate, and Secretariat Advisor, will meet with the team to provide an orientation to the work of the CAQC, to the organizational evaluation process, and to the *Framework for Organizational Evaluation*. As well, the CAQC Chair will alert members to any matters of particular concern to Council and answer questions the team might have. Any uncertainties the team members have about Council's policies, procedures or standards should be discussed and, if possible, removed. The CAQC Chair will indicate when the team's report to CAQC is due, which is typically within three weeks of the site visit. This meeting normally takes place the evening before the on-campus visit.

(b) Initial meeting of the team

Following the orientation meeting the team will continue meeting. This meeting is critical as it provides team members with an opportunity to share preliminary impressions, review the team's schedule, identify issues to be raised during each interview session, review individual assignments and discuss the format and preparation of their report. All members should come to the meeting fully prepared for the visit by having a list of questions emanating from the documentation and a list of the organization's strengths and weaknesses. (The *Scorebook* in Council's "red binder" can be a useful preparation tool.) Members can then determine the most appropriate questions to ask in each interview session.

(c) Site visit interviews

As noted earlier, the team will likely wish to interview faculty, administrators, support/collaborating staff, and students and alumni; examine facilities and resources; and

analyze relevant institutional policies and practices. The team's chair might begin each interview session by framing the objectives of the interview and posing an open-ended question. This could then be followed by more specific, probing questions and final statements confirming impressions. The questions should evoke analysis and dialogue. Team members should avoid preceding a question with a wordy preamble, stringing a number of questions together, making too many references to how things are done at the member's home campus, or presenting a monologue.

The team should create an atmosphere of genuine dialogue by acting as colleagues and peers rather than as inspectors or interrogators.

Members are encouraged to take careful notes of each interview session as they will be invaluable when writing the report.

(d) *Team conferences*

Throughout the day, time should be scheduled when the team can meet *in camera* to share findings and identify questions that may require a deeper investigation. These sessions also provide time for the team to remind itself of the focus of subsequent interviews.

Normally, the team will informally debrief over dinner on the first evening of the site visit.

At or near the end of the visit, the team should have a "wrap-up" conference *in camera* to reach consensus about the probable substance of the external evaluation report in preparation for the exit meeting.

(e) *Exit meeting with senior officials*

Before leaving the campus, the team will meet with senior officials (often the president and VPA, or their designates) to provide an opportunity for response to outstanding questions that may have arisen during the visit. As well, the exit meeting provides an opportunity for the team to advise the institution of the principal elements of the report without referring to the team's actual recommendation. It is highly desirable that the report not contain any major surprises of which the institution was not informed by the team before it leaves campus.

At the end of the meeting, the Secretariat Advisor will outline Council's expectations with respect to the next steps in the review process.

(f) *Final team conference*

After the exit meeting, the team should meet one last time before leaving the institution. This meeting will provide an opportunity for the team to begin preparing the report by

- considering any additional information pertinent to its task,
- making decisions on the form and substance of the report,
- reaching consensus concerning the significant strengths and weaknesses which will be communicated to Council, and
- confirming individual responsibilities and timelines for discharging them.

Normally the team will have access to a computer and projector to begin drafting portions of the report before the team leaves the campus. The Secretariat will provide an electronic outline of the report which is designed to clearly show that the report is addressing Council's standards and criteria.

(g) *Contact with the institution*

It is inappropriate for the chair or any member of the evaluation team to visit the campus prior to the site visit unless the institution and Secretariat have first been advised.

During or after the organizational evaluation process, team members should not independently give any member of the institution feedback or advice regarding the evaluation. If an individual or individuals from the institution attempt(s) to contact a team member for advice or feedback regarding the evaluation, they should be referred to Council's Chair or Secretariat. As well, team members should not make contact with individuals at the institution to discuss the outcome of the evaluation. The CAQC Secretariat will handle any such discussions.

4. REPORT OF THE EVALUATION TEAM

Nature of the report

As previously noted, the team's report is to Council, not the institution. The team will determine the format of its report, although it is recommended that the report follow the template provided by the Secretariat, while taking into consideration the expectations of Council noted earlier. Typically the report provides a brief summary of the institution, the material reviewed, and when the site visit took place. This could be followed by a section providing an assessment of the institution based on each of Council's 14 organizational standards (Appendix B) followed by a section outlining the team's assessment using the eight categories found in the *Framework for Organizational Evaluations* (Appendix C). Within each section, affirmations, commendations and areas for improvement might be presented. The site visit schedule should always be attached as an addendum to the report: it can be affixed by the Secretariat once the report is submitted electronically.

The title page will contain the following statement:

Reports of CAQC's evaluation teams are prepared exclusively for the purpose of evaluating the quality of proposed post secondary degree programs in Alberta and with consent of the respective institutions. All evaluation reports are based upon CAQC's policies, procedures and standards which are available to all participants of the review process. Reports of Council's evaluation teams are only one form of information considered during the program approval process in Alberta, and Council may not accept or endorse all recommendations or comments contained in these reports.

Recommendation – The report must contain a specific and clear recommendation with respect to the applicant institution's readiness to implement and sustain the level and type of degree program(s) being proposed in order to help Council determine if the application can be moved to the program evaluation phase. The recommendation must be supported by substantive comments and documentation of the team's findings. If there are any caveats or conditions on the recommendation, they should be clearly stated as such along with their rationale.

Examples:

- *Positive recommendation* – The Organizational Evaluation Team has concluded through its investigation that the institution has sufficient organizational procedures, planning and structures in place to implement and sustain degree programs. Therefore, we

recommend that Council move the application to the program evaluation phase of CAQC's review process.

- *Positive recommendation with conditions* – The Organizational Evaluation Team has concluded through its investigation that the institution has sufficient organizational procedures, planning and structures in place to meet most of Council's organizational assessment standards for degree programming. Therefore, we recommend that Council move the application to the program evaluation phase of CAQC's review process. However, we recommend that the institution address the following areas of concern while the program evaluation is taking place and report on them to CAQC by the time that CAQC is considering the results of the program evaluation:
 - Clear articulation of a statement on academic freedom that includes procedures to ensure that the principles of natural justice are followed in the event of an alleged violation of the policy.
- *Negative recommendation* – The Organizational Evaluation Team has concluded through its investigation that the institution does not have sufficient organizational procedures, planning and structures in place to implement and sustain degree programs and therefore recommends that the application not be moved to the program evaluation stage. We have concluded that the institution does not meet Council's organizational assessment standards for degree programming in the following areas:
 - The institution does not have appropriate strategic policies and processes in place to enable it to prepare appropriately for offering undergraduate degree programs.
 - The institution has not provided sufficient evidence of its commitments with respect to support and facilitation of academic staff in scholarly activities.

Affirmations – A subset of the recommendation might be affirmations. These are areas the team believes require improvement which have already been identified by the institution as needing attention or which the institution is already committed to doing. Some affirmations may be conditions to the recommendation.

Examples:

- The team affirms the institution's commitment to undertake retention studies and develop benchmark data against comparable post-secondary institutions.
- The team affirms the institution's commitment to finalizing its draft plans to provide enhanced support to faculty for research and scholarly activities.

Commendations – Council is also very interested to learn the strengths of the institution's case. Reports will typically highlight these commendations along with other favourable comments throughout the text.

Suggestions for improvement – Where reviewers have identified areas that need improvement, they should clearly be stated as suggestions rather than requirements/conditions. Where possible or appropriate, reviewers are encouraged to offer possible approaches to addressing the areas of improvement rather than requiring specific actions that must be followed.

Before electronically submitting the report to the Secretariat, it should be checked to ensure that:

- It speaks directly to Council's organizational assessment standards.
- It has a clear recommendation along with the rationale (stated in terms of Council's organizational assessment standards) and evidence that the findings support the recommendation.

- It has provided sufficient attention to the positive aspects of the application (commendations) as well as any areas of concern.
- It carefully distinguishes between the team's suggestions for improvement and any conditions on which a positive recommendation is based.
- It does not raise any issues that were not addressed during the site visit. However, if a new issue is presented in the report, the issue should be clearly identified as not having been discussed during the site visit.

Preparation of the report

The members of the team will determine their relative roles and responsibilities in preparing the report. Typically, the chair writes the introductory and concluding sections of the report and edits the contributions of other members. The Secretariat Advisor will not be involved in the writing of the report but does participate in the site visit and should be listed as a member of the team, but should not be cited as one of the authors of the report. As well, when listing names of team members in the report, any institutional affiliation of members should not be included.

The chair will send a draft of the report to each team member for comment prior to its submission to Council, normally within three weeks. The team chair is required to send an electronic version of the report to the Secretariat when it is finalized at which time the Secretariat will append the final site visit schedule.

Distribution of the report

Upon receipt of the report, the CAQC Secretariat will forward a copy to the applicant institution with a request that comments on the report be made in writing to Council, normally within two weeks. A copy of the institution's response will be forwarded to the evaluation team when it is received.

Consideration of the report and response to it

The chair of the external evaluation team will be asked to speak to the report at a meeting of Council (normally via telephone). Similarly, representative(s) of the institution may be asked to be on standby should Council need them to answer questions following the meeting with the chair.

Subsequently, if the organizational evaluation results are satisfactory to Council, the institution will be advised and the degree program proposal(s) will be the subject of a program evaluation. If the institution does not satisfy Council's requirements, the institution and Minister will be advised. Members of the external evaluation team will be informed of Council's recommendation(s).

5. ARRANGEMENTS

Communication

As soon as the team has been recruited and the team's membership ratified by Council, the members will receive communication from the CAQC Secretariat Manager informing them of the preliminary arrangements, and the names of the other members of the team and Secretariat Advisor. This e-mail also asks for important information (home address, name of consulting company if preferred, etc.) that is needed for the Letter of Agreement, which outlines the expectations of Council and the Ministry. Throughout the planning of the site visit, the Secretariat Advisor will be in contact with team members regarding travel and accommodation and scheduling of the site visit. Team members can also expect to hear from the team chair regarding any preferences and suggestions that the chair may have concerning the work of the team.

Materials provided to members of the external evaluation team

Each member of the team will be provided with the materials noted earlier in this document. Of particular importance for organizational evaluations is the institutional self-study. The self-study serves three purposes:

- (a) For an institution, it provides a very useful analysis of its objectives, resources, students and achievements and of the relationships between and among them that is valuable for the institution's strategic planning and improvement.
- (b) For the Council and its evaluators, it provides the detailed information by which they are able to enhance their understanding of the institution's organizational processes and outcomes.
- (c) It reveals the strengths, weaknesses and potential of an institution with respect to the achievement of its purposes and objectives. Thus, the self-study indicates to both Council and the institution the areas that require change or improvement in relation to its degree granting operations, and promotes open communication.

Institutions are expected to address each of the following 11 categories in the self-study and measure them against Council's organizational standards. The team will then examine the extent to which the systems and processes of the institution are clearly established to achieve excellence in learning outcomes:

Category 1: Mission/Mandate Educational Objectives and Academic Freedom

Category 2: Organization and Administration

Category 3: Financial Structure

Category 4: Curricula and Instruction

Category 5: Academic Staff

Category 6: Strategic Planning

Category 7: Learning Resources and Services

Category 8: Academic Policies and Records

Category 9: Student Services and the Student Experience

Category 10: Physical Plant and General Facilities

Category 11: Institutional Communications

The nature of the self-study is to be comparative, reflective, and outcome oriented. Where possible it should include feedback from students, alumni, transfer institutions, employers, and graduate programs. The self-study should be attentive to the institution's current place in the broader Alberta educational context and should address any concerns identified in previous reviews, where applicable.

The site visit

As noted earlier, before the evaluation visit occurs, a detailed schedule for the visit will be arranged by the Secretariat in consultation with the team and institution. The schedule will include plans for team members to interview students/alumni, faculty, administrators and governance board members, as well as to observe facilities, examine records (excluding individual records of students) and assess resources. It is important that the expectations for each activity are identified for the institution prior to the visit.

For the meeting with the CAQC Chair prior to the campus visit, the Secretariat normally will reserve a meeting room in the hotel.

The institution will have arranged a suitable meeting room at the institution for the exclusive use of the external evaluation team where they can review materials, meet in camera and interview institutional representatives. If additional information is being provided via the internet, computers should be also available, along with the telephone number of a technology support person. The room is to be locked when team members are elsewhere. Members should inform the Secretariat Advisor if they plan to use their laptop during the interviews so that the institution can arrange for extension cords and, if needed, access to the Internet.

Parking arrangements and campus maps will be provided, as will meals and snacks. If any team member has dietary restrictions, he/she should let the Secretariat Advisor know so the information can be provided in advance to the institution.

Accommodations and expenses

Each team member is responsible for making his/her own travel arrangements in time for the orientation meeting. Unless there is compelling reason to do otherwise, the Secretariat will arrange for all out-of-town members to stay in the same hotel. If guest rooms are to be provided on campus, the institution will make reservations for the team and inform the Secretariat. Each team member should ensure the Secretariat is aware of travel arrangements, including arrival and departure times, and all members are expected to attend the orientation meeting with the CAQC Chair.

Team members' honoraria and reasonable travel expenses (i.e., economy air fare), including transportation, meals and lodging, will be paid by CAQC. (Costs of the review are then billed to the applicant institution.) The Secretariat Advisor will inform the team if the institution has arranged with the hotel to direct bill it for members' accommodation costs. When the report has been received by CAQC, members will need to send an invoice to the Secretariat Senior Manager. The invoice should:

- state the contract number and address of the contractor,
- include a separate item for the honoraria being claimed as per contract,
- include a separate item for the total expenses being claimed as per contract (as all GST/HST must be removed, the honoraria has been adjusted to provide compensation), and
- include any relevant receipts for allowable expenses (i.e., accommodation, transportation and meals).
 - It is important that you keep your taxi receipts, boarding passes, restaurant bills, etc., in order to make the claim.
 - Please note that there cannot be any reimbursement for alcoholic beverages. Consequently, the government requires that, in the case of meals, receipts that itemize the food items purchased be submitted rather than the credit card statement.

In the case of the team chair, an interim invoice may be submitted when the report is forwarded to CAQC. The chair's final invoice can then be submitted after speaking to the report at a CAQC meeting.

Hospitality

Although not encouraged or expected, institutions may wish to make arrangements for hospitality. If such is the case, it should only happen after consultation with the team chair and the CAQC Secretariat.

Feedback

After the report and the institution's response to it have been considered by Council and the outcome determined, the Secretariat will ask each evaluator to respond to a questionnaire designed to assist Council in improving the evaluation process and, specifically, to identify any 'best practices' that can be used as an 'exemplar' to be shared with other applicants. The institution is also asked to complete a similar questionnaire.

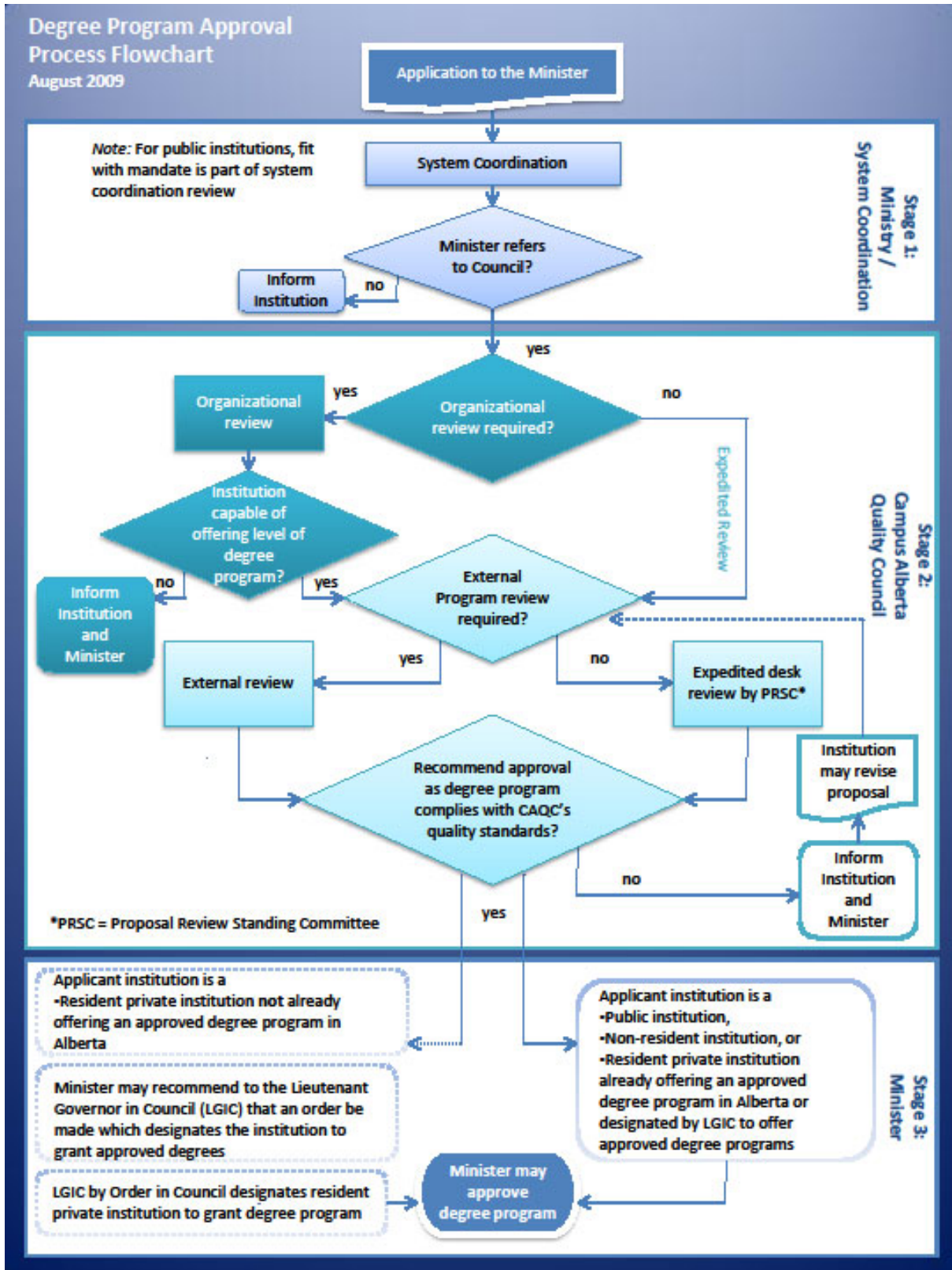
Additional information

Requests for additional information and/or questions of clarification may be directed at any time to the Manager of the CAQC Secretariat:

Allison Peters, Manager, Campus Alberta Quality Council Secretariat
19th Floor, Commerce Place
10155 – 102 Street
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Telephone: (780) 427-8921
E-mail: allison.peters@gov.ab.ca
Web: caqc.alberta.ca

APPENDIX A

Approval Process for New Degree Programs



Expedited Review Process Description

Types of Reviews

Reviews by Council may proceed in one of three ways:

- a. Full Review – for applicants proposing to offer a first degree or a first degree at a new level. Council will conduct both an organizational review and a program review using external evaluators for both organizational and program reviews.
- b. Partially Expedited Review – when Council determines that it can omit the organizational review but will conduct a program review using external evaluators. In certain cases, Council reserves the right to include elements of an organizational review within the program review.
- c. Fully Expedited Review – when Council determines that neither an organizational review nor program review using Council-appointed external evaluators is needed. The Proposal Review Standing Committee (PRSC) and the Secretariat will do a desk review.

Eligibility for an Expedited Review

An applicant institution may formally request a partially or fully expedited review of a proposed program and must make its case based on Council's criteria for such a review. The Proposal Review Standing Committee (PRSC) normally acts on Council's behalf to review requests for expedited reviews, and to conduct desk reviews of proposals accorded fully expedited reviews.

The purpose of an expedited review is to reduce the length of time it takes for Council to carry out its assessment, recognizing that the extent of review and the amount of information required for approval should in each case reflect the type of proposal and the experience of the applicant institution with new degree program development, implementation, and monitoring.

If the case presented is not accepted, the application will be subject to a full review or partially expedited review, where the Council will appoint external evaluators. Applicants considering seeking partially or fully expedited reviews are encouraged to consult the CAQC Secretariat prior to making the request.

A. Partially Expedited Review

A request for a partially expedited review will be considered if one of the following criteria is met:

1. an applicable organizational review has been conducted and the results have been found satisfactory by Council, or
2. Council has moved the institution to an audit status as Council's main mechanism to monitor the institution's on-going quality of approved degree programs.

B. Fully Expedited Review

A request for a fully expedited review will be considered on its own merits, and only if an institution meets one of the criteria for a partially expedited review. Council's willingness to conduct a fully expedited review in the same discipline at one level (e.g., a concentration in a 3 year BA) does not constitute a precedent for a fully expedited review at another (e.g., a major in a 4 year BA). An institution will not normally be eligible for a fully expedited review if the degree is considered precedent setting either for that institution or for the system. Examples of precedent-setting proposals are those that involve the institution offering a degree at a higher level than it offers or involving a subject area that the institution does not offer at the proposed

level. In the process of considering a fully expedited review request, PRSC commences a desk review of the proposal. If that desk review identifies issues that PRSC cannot resolve without a site visit by a review team, a full review or a partially expedited review with a review team will be commissioned by Council. In addition to meeting the criterion for a partially expedited review, the following are the criteria to be met:

1. The proposal is for
 - a new major/specialization/concentration (e.g., History) in an already approved degree program (e.g., BA,) that has been offered across a range of disciplines within that degree in the institution, thus demonstrating that the institution has a successful track record in implementing similar new programs within that degree, or
 - a new degree program that builds on an existing major/specialization currently offered under another program and is at the same level (e.g., Bachelor of International Studies where a BA with a major in International Relations exists), or
 - a new degree program that is at the same level and/or in a related discipline to degrees already being offered by the institution, but is not considered precedent setting either for that institution or for the system (e.g., an institution is proposing a doctorate in chemistry and already offers several other science doctorates).
2. An appropriate number of continuing, qualified academic staff are in place in the department/discipline.
3. The proposal clearly identifies an appropriate set of program learning outcomes for students, and describes the policies and procedures that are in place or under development for assessing them and for applying this assessment for the purposes of curriculum review and program improvement.
4. Degree nomenclature of the proposed program accurately and clearly conveys to stakeholders (e.g., students, prospective employers, academic institutions) the content of the proposed program.
5. Program scale is well within the capacity and the resources of the institution to implement and sustain the program.
6. Evidence of risk assessment both with respect to risks to existing programs and to the program under review (e.g., unexpected enrolment issues, inability to procure staff) is presented and no financial concerns are apparent.
7. Internal vetting and quality assurance practices, including those for post implementation review, are well established and clearly documented. The use of independent academic experts by the institution to review the full proposal (Parts A and B) prior to submission to Council benefits program development and provides the judgment of experts whose specialized knowledge may not be found among the members of PRSC. For these reasons, an external review is expected. The full external assessment report(s) and the institution's response must accompany the proposal and request, and should describe the materials made available to reviewers and the basis for its decision as to whether or not a site visit was carried out. If an institution chooses not to engage external reviewer(s), it must justify its decision. In engaging external experts, institutions should be guided by Council's guideline on Independent Academic Experts (see Appendix G of CAQC Handbook).

APPENDIX B

CAQC Quality Assessment Standards - Organizational

In making its recommendation to the Minister, the *Post-secondary Learning Act* requires the Campus Alberta Quality Council to consider the ability of institutions to deliver and sustain high quality degree programs. To meet this goal, all degree programs recommended by the council must offer an education of sufficient breadth and rigour to meet national and international standards of programs at recognized post-secondary institutions.

Organizational Assessment Standards

1. **Mandate and mission** – The organization has a clearly articulated and published mandate (public institutions) or mission (private institutions) and academic goals statement, approved by the governing board and appropriate for a degree-granting institution, and has academic policies and standards that support the organization's mission and educational objectives to ensure degree quality and relevance. The mission includes a commitment to the dissemination of knowledge through teaching and, where applicable, the creation of knowledge and service to the community or related professions.
2. **Governance and administrative capacity** – The organization has the legal characteristics and the leadership, through a governance structure and administrative capacity, necessary to organize and manage a reputable, effective and high quality degree-granting institution.
3. **Academic freedom and integrity** – The organization maintains an atmosphere in which academic freedom exists. Students and academic staff display a high degree of intellectual independence. Academic integrity is supported by a commitment to educate faculty, staff, and students, and by policies, procedures and practices that include clear definitions and disciplinary processes.
With revisions to June 2022
4. **Academic policies** – The organization has published admission, continuation and graduation policies consistent with the objectives of its programs and has the capacity to ensure that academic records of students are secure.
5. **Organizational policies, strategic planning and periodic review** – The organization has appropriate policies and processes in place to assess the effectiveness, continuous growth and improvement of its educational programs and services, including a strategic planning process (both for short and long range plans) that enables the organization to respond in a focused, effective and innovative way to the challenges of its environment and constituents. Policies and procedures are in place which address internal curriculum development, assessment and improvement of teaching effectiveness, academic integrity, and periodic program review to ensure the ongoing quality of its programs and learning outcomes. Such assessments normally include the advice of external experts.
With revisions to December 2021

6. **Financial planning and resources** – The organization has the financial management procedures, resources and appropriate planning to provide a stable learning environment and to ensure that students can complete the degree program.
7. **Ethical conduct** – The organization values, upholds, and supports academic integrity and ethical conduct as critical to excellence in academic work, demonstrated by the relevant policies and practices by which it conducts its business. It has fair and ethical policies in place governing admissions and recruitment of students, and a systematic method for evaluating and awarding academic credit. The organization understands that academic integrity is open to threats and puts procedures and policies in place to guard against these threats.

With revisions to December 2021

8. **Faculty and staff** – The organization has the human resources, including appropriately qualified faculty and instructional staff, necessary to achieve its mission and academic goals. The organization has policies and procedures with respect to appointment, evaluation, employment conditions including employment equity, promotion, termination and professional development for faculty and staff.

Revised to add “including employment equity”, March 2008

9. **Information services and systems** – The organization has the information services and learning resources to support the academic programs for students and faculty, as well as an established method of setting priorities with respect to their acquisition. The institution is committed to maintaining and supplementing them as needed. As well, the organization has the systems in place to gather and analyze data, which are used for planning and decision-making purposes. It establishes specific performance indicators and benchmarks by which programs and academic units are assessed.

10. **Student services and student protection** – The organization values and upholds integrity and ethical conduct in its relations with students through the availability of full, accurate and truthful material regarding its mission and goals; history; governance and academic structure; program and subject descriptions; faculty and administrator credentials; entrance requirements including credit transfer and prior learning assessment policies; robust policies to support academic and research integrity; clear and informative student enrollment agreements verifying student awareness of relevant policies; support services; payment requirements and refund policies; financial assistance; and transcript protection.

With revisions to December 2021

11. **Dispute resolution** – The organization has policies for dealing with disputes between the organization and its students, the organization and its faculty, and between faculty and students where complaints, grievances, and/or disputes of students, faculty, staff and administration are dealt with in accordance with the principles of natural justice.
12. **Scholarly and research support** – The organization has policies and procedures in place to support and facilitate engagement by academic staff in scholarship and, where appropriate, research or creative activity.
13. **Physical plant** – The organization has the facilities, including laboratories, classrooms, technology and specialized equipment, as well as the existence of plans and methods

for managing health and safety issues, appropriate to support degree programming in the program(s) it offers or proposes to offer.

14. **Graduate program policies** – Organizations proposing graduate programs have policies, structures and mechanisms in place appropriate to graduate studies and research

APPENDIX C

Framework for Organizational Evaluation

Introduction

Institutions wishing to offer a first undergraduate degree must be evaluated for their ability to implement and sustain degree programs at that level.

The organizational evaluation is intended to examine the extent to which the systems and processes of the institution are clearly established to achieve excellence in learning. That is, the evaluation will establish the extent to which the institution has created sustainable processes, the extent to which its financial and operational resources are adequate to sustain the learning processes students will experience, and the link between students' experiences and demonstrable needs.

The organizational evaluation and its accompanying self-study serves three purposes:

1. For an institution, it provides a very useful analysis of its objectives, resources, students and achievements and of the relationships among them that is valuable for the institution's strategic planning and improvement.
2. For the Council and its evaluators, it provides the detailed information whereby they become familiar with the institution and can assess whether the institution meets Council's organizational standards.
3. It reveals the strengths, weaknesses and opportunities of an institution in relation to the achievement of its purposes and objectives. Thus, the self-study indicates to both the Council and the institution the areas with respect to which the institution must change and improve.

The following 11 evaluation categories used in this Framework coincide with those of the self-study. For each of these categories, the evaluation team will be looking for the approach taken by the organization, the way in which the approach is deployed within the organization, and the results of such deployment.

Category 1: Mission/Mandate, Educational Objectives and Academic Freedom

Do the institution's academic policies support the published mandate/mission and academic goal statements? Does the institution maintain an atmosphere in which academic freedom exists?

Relevant organizational assessment standards:

- #1 – *Mandate and mission*
- #3 – *Academic freedom and integrity*

Criteria:

- Does the organization have a clearly articulated and published mandate or mission and academic goals statement, approved by the governing board and appropriate for a degree-granting institution?
- Will the academic policies and standards supporting the institution's mandate/mission and educational objectives ensure degree quality and relevance?

- Does the mission include a commitment to the dissemination of knowledge through teaching and scholarship, where applicable, the creation of knowledge, and service to the community or related professions? How is this made manifest?
- Does the institution have an academic freedom policy and procedures, and how does it demonstrate that it fosters an environment where students and academic staff can display a high degree of intellectual independence?
- Is there evidence that academic activity is supported by policies, procedures and practices that encourage academic honesty and integrity?

Category 2: Organization and Administration

Will the institution's governance and organizational structures support and promote a high quality degree-granting institution?

Relevant organizational assessment standards:

- #2 – *Governance and administrative capacity*
- #7 – *Ethical conduct*
- #11 – *Dispute resolution*

Criteria:

- Does the institution have administrative capacity, through its leadership and governance structure, capable of organizing and managing a reputable, effective and high quality degree-granting institution?
- Does the institution have a governing board with the authority to carry out the mandate/mission of the institution, and does it operate as an independent policy-making body? Are a majority of its members without any contractual, employment or ownership interest in the institution?
- Does the institution's governing board have adequate provisions for appropriate academic staff participation in academic decision making, and for faculty, staff, students and administrators to be involved in the development of institutional policies?
- Has the institution designated an individual as having fiduciary or legal responsibility for the educational activities of the institution and who has the status of a corporate officer (or its equivalent) as defined in the *Companies Act*?
- Does the institution have effective policies for dealing with disputes between the organization and its students, between the organization and its faculty, and between faculty and students?
- How well are complaints, grievances, and/or disputes of students, faculty, staff and administration dealt with? Is there evidence that the principles of natural justice apply?
- Does the institution demonstrate that it values and upholds integrity and ethical conduct by having and following the relevant policies and practices by which it conducts its business?

Category 3: Financial Structure

Will the institution's financial management procedures and resources provide a stable learning environment to ensure that students can complete their degree program? Do the institution's planning mechanisms assist in this endeavour?

Relevant organizational assessment standard:

- #6 – *Financial planning and resources*

Criteria:

- Does the institution have the appropriate financial management procedures, resources and appropriate planning to provide a stable learning environment and to ensure that students can complete the degree program(s)?
- Does the institution have the appropriate resources and data to forecast revenue, enrolments, expenditures, and capital needs?

Category 4: Curricula and Instruction

Will the curricula, program delivery, and quality assurance mechanisms achieve the desired learning outcomes? Will the procedures assessing the effectiveness and continuous improvement of academic programs, as well as curriculum development policies and procedures, achieve the ongoing quality of programs and learning outcomes? Does the institution have robust mechanisms for promoting and supporting effective teaching and learning practices? Is it apparent that program decisions are made with quality in mind?

Relevant organizational assessment standard:

- #5 – *Organizational policies, strategic planning and periodic review*

Criteria:

- Is the internal program approval process transparent and does it have mechanisms to ensure that modifications and improvements in program design can be made?
- Has the institution's strategic planning process (both for short and long range plans) enabled the organization to respond in a focused, effective and innovative way to the challenges of its environment and constituents?
- Has the institution provided evidence that it will be able to use its policies and processes to assess the effectiveness, growth and improvement of its degree programs and services?
- What evidence is there that the policies and procedures designed to address internal curriculum development and periodic program review will ensure the ongoing quality of programs and learning outcomes?
- Does the institution have a systematic mechanism to develop and assess learning outcomes, and to use that assessment for program development, review and quality improvement purposes?
- Does the institution have a systematic mechanism to develop, nurture, assess, and reward effective practices of teaching and learning?
- Do the institution's periodic program review policies and procedures normally include the advice of external experts?

Category 5: Academic Staff

Does the institution have appropriate faculty and staff to assist the institution in achieving its mission and academic goals and programs? Do the institution's policies and procedures with respect to appointment, promotion, termination and professional development for faculty and staff serve to achieve the institution's mission and academic goals?

Relevant organizational assessment standards:

- #8 (*Faculty and staff*)
- #12 (*Scholarly and research support*)

Criteria:

- Does the institution have the necessary human resources, including appropriately qualified faculty and instructional staff, to achieve its mission and academic goals?
- Does the institution have policies and procedures to deal effectively with appointment, evaluation, employment conditions including employment equity, promotion, termination and professional development for faculty and staff? In the case of the latter, how does the institution determine the professional development needs of its staff?
- Is there evidence that the institution will be able to develop a culture of scholarship appropriate for a degree granting institution?
- Does the institution provide academic staff with clear expectations regarding what constitutes scholarship?
- How well do the institution's policies and procedures support and facilitate engagement by academic staff in scholarship and/or research or creative activity?

Category 6: Strategic Planning

Are the institution's planning processes integrated and comprehensive and do they effectively link the various planning initiatives (program, staffing, facilities, marketing, etc)?

Relevant organizational assessment standard:

- #5 – *Organizational policies, strategic planning and periodic review*

Criteria:

- Does the institution use the systems it has in place to gather and analyze data to effectively plan and make decisions?
- Has the institution established sufficient and appropriate performance indicators and benchmarks to assess its programs and academic units, and to act on its assessments?
- Does the institution have a formal approved policy and procedure requiring the periodic review of all units and/or operations to occur on a cyclical basis, and does it include assessment by external experts?
- Does the institution have a strategic plan or planning document that outlines the institution's major directions, and does it include an executive summary highlighting the main priorities?
- Does the institutional strategic plan support quality teaching and learning?
- Is there evidence that the planning process reflects and supports the institution's mission, and does the institution explain how the strategic plan guides decision-making at the institution?
- Is there evidence that the institution integrates academic, financial and facilities planning into its overall comprehensive planning process?

- Is it known who at the institution has major responsibility for coordinating institution-wide planning, who else participates, and how various stakeholders are involved in the process?
- Is the timeframe or length of the planning cycle specified?
- Is there information about how the planning process is disseminated and understood throughout the institution?
- Does the institution explain how environmental scanning or a similar mechanism is used to update the strategic plan, and to ensure that the plan remains current?

Category 7: Learning Resources and Services

How well will the institution's information services and systems support the proposed degree programming? Are the methods for establishing priorities for the acquisition of new resources and the maintenance of existing resources appropriate?

Relevant organizational assessment standard:

- #9 (*Information services and systems*)

Criteria:

- Do the institution's information services and learning resources effectively support the academic programs for students and faculty?
- Is there an established method of setting priorities with respect to the acquisition of these services and resources, and are staff and students satisfied with how these priorities are set?
- Is there a demonstrated commitment on the part of the institution to maintaining and supplementing its information services and learning resources as needed?

Category 8: Academic Policies and Records

How consistent are the institution's admissions, continuation and graduation policies with the objectives of the proposed degree programming, and are these consistent with the practice of other Canadian degree granting post-secondary institutions? Are student academic files accurately and securely maintained? How well do any applicable academic policies and records include consideration of any programs delivered collaboratively and/or off-campus?

Relevant organizational assessment standards:

- #4 – *Academic policies*
- #7 – *Ethical conduct*
- #10 – *Student services and student protection*

Criteria:

- Are the institution's published recruitment, admission, continuation and graduation policies consistent with its programming objectives?
- Does the institution ensure that student academic records and alumni records are secure?
- Does the institution demonstrate that it values and upholds integrity and ethical conduct as it relates with students through the availability of full, accurate and truthful material regarding the following:
 - mission and goals;
 - history;
 - governance and academic structure;

- program and subject descriptions;
- faculty and administrator credentials;
- admissions requirements including credit transfer and prior learning assessment policies;
- residence requirements;
- systematic method for evaluation and awarding academic credit;
- clear and informative student enrollment agreements verifying student awareness of relevant policies;
- academic behavior (attendance, completion of assignments, plagiarism, etc.);
- evaluation of students (methods, grading system and grading distribution, examination policy, appeal process, etc.);
- academic probation and academic honours;
- communication of academic policies to students and academic staff, and future plans regarding academic policies and records;
- support services;
- payment requirements and refund policies;
- financial assistance; and
- transcript protection.

Category 9: Student Services and the Student Experience

Is the provision of student services appropriate to the institution's mission and educational objectives, guided by appropriate policies and practices related to students' security, rights and responsibilities, and are the supports for student services adequately communicated to students? Will these provisions effectively support the quality of the proposed degree programming?

Relevant organizational assessment standard:

- #10 – *Student services and student protection*

Criteria:

- Does the institution maintain sound policies and practices relating to the services it provides, such as supports for indigenous students, counselling, residences, athletics, recreation, student government, clubs and other extracurricular activities, food, health services, and financial aid. Does it adequately inform students about these policies and practices?
- Does the institution offer appropriate supports for student mental health and well-being?
- Does the institution include key elements or outcomes on student transcripts to create a comprehensive record of the student experience?
- Does the institution have appropriate policies and practices for supporting and protecting students concerning such matters as equality and diversity, anti-bullying, disability, gender, race, sexual orientation, and the handling of complaints regarding sexual harassment and assault?
- Does the institution have future plans and priorities regarding student services, and does it have a process for periodic review of student services for continuous improvement?
- To what extent does the institution view the quality of the student experience as being very important?

Category 10: Physical Plant and General Facilities

Do the institution's physical resources, including laboratories, classrooms and specialized equipment, support the degree programming it proposes to offer? Do the institution's plans and methods adequately manage health and safety issues?

Relevant organizational assessment standard:

- #13 – *Physical plant*

Criteria:

- Are the institution's facilities, including laboratories, classrooms, technology and specialized equipment, appropriate to support the degree programming it proposes to offer?
- Do the physical spaces appropriately support the learning environment?
- Does the institution have policies and practices regarding utilization and maintenance of its physical plant?
- Does the institution have future plans and priorities regarding the physical plant?
- Does the institution have plans and methods for managing health and safety issues appropriate to support degree programming in the program(s) it offers or proposes to offer?

Category 11: Institutional Communications

Do the institutional communications and promotional material accurately describe the institution and its programs, and how students can access them? Are the institution's communications relevant and objective and do they effectively promote the institution and its programs?

Relevant organizational assessment standard:

- #10 (*Student services and student protection*)

Criteria:

- Do the institutional communications and promotional material accurately describe the institution and its programs, and how students can access them?
- Are the institution's communications relevant and objective and do they effectively promote the institution and its programs?
- Does the institution have policies regarding the production of institutional communications?

APPENDIX D

Campus Alberta Quality Council Code of Conduct for Reviewers

Purpose

The purpose of this Code is to establish rules of conduct to govern the professional and ethical responsibilities of reviewers engaged by the Campus Alberta Quality Council (CAQC) as it carries out its stated responsibilities for organizational, program and comprehensive reviews.

The Code is based on the principles of integrity, honesty, openness and concern for the public interest. It is designed to maintain the effectiveness of CAQC as a whole and to ensure the fairness of all CAQC procedures and decision making. It addresses common situations that reviewers may experience as they carry out their responsibilities, while recognizing that not all situations can be anticipated. All reviewers have a responsibility to consider appropriate standards of behavior and to conduct themselves in an ethical and professional manner. The Code assumes that it is not only the actual situation but also the *perception* others may have of it that may lead to a perception of bias or conflict of interest.

To Whom Does the Code Apply?

The Code applies to all reviewers appointed by CAQC to enable it to make informed recommendations and decisions about approval and monitoring of degree programs.

When is This Code Applicable?

The Code governs the conduct of reviewers from the date of appointment. It also includes the continuing responsibilities of reviewers after the completion of their terms with respect to decisions made by CAQC while the person was a reviewer.

General Rules of Conduct

All reviewers shall complete a statement attesting that they have read and agreed to the statements included in the Code of Conduct.

Sample Statement

I, _____, have been appointed as a member of an external evaluation team reporting to the Campus Alberta Quality Council. I have read and understand the CAQC Code of Conduct for Reviewers.

I agree to comply fully and to the best of my ability with the provisions of the Code.

Dated at _____ this _____ day of _____ .

Reviewers should be committed to the principles and practices of quality assurance in post-secondary education. When considering the program proposal, or other matters referred to them, reviewers shall make their recommendations on the merits of the information available, and shall consider the information provided in good faith and to the best of their ability, not being concerned with the prospect of disapproval from any person, institution, or community.

Reviewers shall be sensitive to issues of gender, race, language, culture and religion that may affect the conduct of a review, the recommendations considered by Council, or a decision.

a. Confidentiality

A reviewer shall agree that all information related to a review, including information provided by an applicant institution, is confidential and shall treat such information in strict confidence and with the care and security required to ensure that the information is not disclosed without CAQC's prior written consent. A reviewer will not use the information provided for any purpose outside that of undertaking work for CAQC.

A reviewer must respect the confidential nature of third-party information submitted by the applicant and restrict the use of this information to CAQC work. Reviewers shall return (or attest that they have shredded) all material used in assessing applications when the activity for which it was required is completed. All electronic copies of confidential material should be disposed of within a term specified by agreement between the reviewer and the Ministry.

"Information" means all information, data, material and documents obtained by a reviewer before, during, or after the review and includes program proposals, institutional self-studies, information obtained during a site visit and all other information furnished or disclosed to him/her by CAQC, the Secretariat or an institution whether directly or indirectly, in written, oral, magnetic, electronic or other forms.

The confidentiality requirement set out in this Code does not apply to any part of the information which is in the public domain at the date of disclosure to the reviewer or which after that date enters the public domain, other than by any act or failure to act on the part of the reviewer.

A reviewer shall, at all times, adhere to the intent and requirements of Alberta's *Freedom of Information and Protection of Privacy Act* which applies to all information, material and records relating to, or obtained, created, maintained, submitted or collected during the course of a review.

b. Conflict of Interest

A reviewer must avoid any conflict of interest or appearance of conflict of interest that might impair, influence or impugn the independence, integrity or impartiality of CAQC. Conflict of interest is any interest, relationship, association or activity that is incompatible with a reviewer's responsibilities as an impartial assessor. Reviewers shall ensure that they:

- (i) conduct their duties with impartiality and disqualify themselves from dealing with anyone with whom a prior relationship could bring their impartiality into question;
- (ii) refrain from furthering their private interests;
- (iii) avoid accepting any commission, discount, allowance, payment, gift (other than a small token gift) or other benefit that is connected, directly or indirectly, with the performance of their duties related to the review, that causes, or would appear to cause, a conflict of interest;
- (iv) have no financial interest in the business of a third party that causes, or would appear to cause, a conflict of interest in connection with the performance of their duties related to the review; if such financial interest is acquired during the term as identified in the agreement between a reviewer and CAQC, the reviewer shall promptly declare it to CAQC;

- (v) decline to participate in a review for CAQC that involves a party or representative with whom they were formerly in a significant professional relationship until a period of 12 months has elapsed since the termination of that relationship. A significant professional relationship includes, but is not limited to, employment or consulting, collaboration on a project, supervision of students in the program, and providing expert advice during development of a proposal; and
- (vi) do not participate in any advisory council or implementation committee for programs or institutions they have reviewed for CAQC for six months from the time of the Minister's decision.

The Chair shall ask all potential reviewers to indicate, prior to appointment, whether they have any reason to be in a conflict of interest if they were to review a given program or institution. A reviewer with a conflict of interest in regards to an application must decline to serve as a reviewer. If unsure whether a conflict of interest exists, the reviewer shall inform the Chair about his/her circumstances. The Chair will determine whether a conflict of interest exists and will inform a reviewer of his/her decision.

c. Public Statements

A reviewer shall not make public statements, orally or in writing, on any issues with respect to the institution or program he/she was involved in reviewing. In cases where it is not clear what a reviewer may say publicly about an issue, discretion should be used, and the reviewer should consult with the CAQC Chair or the Secretariat.

A reviewer shall refrain from communicating with the media regarding the deliberations or decisions of CAQC. All inquiries from the media or other parties shall be referred to the CAQC Chair or the Secretariat.

Reviewers should review carefully CAQC's *Policy on Release of Information*, especially section B, which outlines the responsibilities of reviewers. The policy is available on CAQC's website.