

**A GUIDE FOR  
TEAMS CONDUCTING  
COMPREHENSIVE EVALUATIONS**

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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 Innovation and 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. In addition to degree programs approved on recommendation of CAQC, Council's monitoring role also applies to degree programs approved by the Private Colleges Accreditation Board and to any approved degree program referred to it by the Minister.

Section 9 of the Programs of Study Regulation indicates that, if Council determines that an institution no longer meets minimum organizational requirements or an approved degree program no longer meets Council's standards of quality, it may recommend that an approved degree program be canceled. To fulfill its monitoring role, Council has adopted two forms of periodic evaluation – annual reporting and comprehensive evaluations.

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

### **Purpose of comprehensive evaluations**

Council normally conducts at least one comprehensive evaluation (a combined organizational and program(s) evaluation) of an institution offering approved degree programs in Alberta. The first evaluation will occur no sooner than in the sixth academic year after the institution begins offering its first approved degree program. A subsequent comprehensive evaluation may be conducted at Council's discretion.

The purposes of Council's comprehensive evaluation include the following:

- to determine whether an institution and its approved programs, including those offered collaboratively and/or off-campus, continue to meet organizational and program quality standards.
- to determine whether an institution has met or has made satisfactory progress towards meeting any commitments it made to Council regarding degree programs, staff, libraries, facilities or any other matter.
- to determine whether an institution has
  - (a) considered fully the comments, suggestions and recommendations of reports by evaluation teams, insofar as they have been supported by Council, and have responded satisfactorily to them; and
  - (b) developed suitable mechanisms to undertake its own self-evaluation.
- to provide a basis for judgments regarding
  - (a) the continuation of an approved degree program, including any Council requirements, if any, or
  - (b) the withdrawal of approval of a degree program or programs.

Council's comprehensive evaluation of each institution primarily consists of the following components:

1. the institution's self-study,
2. the report of the external evaluation team following a site visit, and
3. the response by the institution to the report of the external evaluation team.

Approximately one year before a comprehensive evaluation, Council notifies the institution of the impending evaluation and asks it to conduct an institutional self-study. The guidelines for self-studies are found in s. 5.1.2 of Council's *Handbook: Quality Assessment and Quality Assurance*. The self-study, which normally is to be submitted one year later, is a key document for Council and its comprehensive evaluation teams.

## **2. THE EXTERNAL EVALUATION TEAM**

As peer evaluation is an essential component of Council's evaluations, CAQC appoints an external evaluation team to assist it with the comprehensive evaluation. 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 how successful the institution has been in implementing and maintaining quality degree programs. Ultimately, this information will help Council decide on whether or not it recommends that the program be canceled as per section 9 of the Programs of Study Regulation.

### **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 C).

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 C.

## **3. THE VISIT**

### **Expectations of Council**

The team will assess the systems, processes and academic climate on the institution's campus and the extent to which they support quality degree programs; evaluate the historical outcomes of the approved programs; provide comment on the institution's proposed strategic plans for the future; and assess its capability and plans to undertake its own self-evaluation in the future.

Using Council's organizational and program assessment standards (Appendix B) and its Framework for Comprehensive Evaluation (Appendix A), the evaluators provide an independent opinion on:

- the extent to which the institution continues to meet Council's organizational standards;
- the extent to which the institution's approved degree programs meet Council's program quality standards;
- the extent to which the institution has met or has made satisfactory progress towards meeting any commitments it made to Council regarding approved degree programs, staff, libraries, facilities or any other matter;
- the extent to which the institution has satisfied any conditions set by Council;

- the extent to which the institution has considered fully and responded satisfactorily to the suggestions/recommendations of Council's evaluation teams if they were supported by Council; and
- the extent to which the institution has developed suitable mechanisms to undertake its own self-evaluation.

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 with respect to its organization and the approved degree programs. 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.

Overall, Council expects constructive criticism where that is warranted, and a fair presentation of the positive side of the institution's success in offering quality degree programs. 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 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 its website;
- the report of any previous comprehensive evaluation, if applicable, or the reports of the initial organizational and program evaluations, the institution's response to them, and the final recommendation of PCAB or CAQC;
- summary information from past annual reports;
- 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 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?

- Is there sufficient evidence about the achievements of students, graduates, staff and the institution to support a judgment on the institution's effectiveness in achieving its objectives for the approved programs?
- Has the institution met the specific conditions/expectations of PCAB or CAQC, if any were established?
- Is there adequate information about the teaching-learning environment?
- 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.

### **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 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 comprehensive evaluation process, and to the organizational and program assessment standards. 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. 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 comprehensive 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**

Using the self-study and insights gained from the site visit, the team is asked to write a report which will provide Council with information about the continuing academic merits of the approved degree programs offered by the institution and the adequacy of the systems and processes of the institution to support excellence in learning. As noted in the previous section titled "Expectations of Council", the team is asked to provide its judgement of the institution's success in offering quality degree programs, its capacity to undertake its own future self-evaluation, and its proposed strategic

plans for the future. As previously noted, overall, Council expects honest, constructive criticism where that is merited, and a fair presentation of the positive side of the institution's operations and programs.

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 Council's Framework for Comprehensive Evaluation (Appendix A). 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 or approved degree programs in Alberta and an institution's capacity to sustain them. All evaluation reports are prepared with the consent of the respective institutions and 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 – Whatever the format chosen, the report must contain a specific and clear recommendation with respect to whether the approved degree programs (some or all) should be reaffirmed and maintained, or whether Council should recommend to the Minister that the approved degree programs (some or all) be suspended or that the institution's approval be withdrawn. 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.

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.

Commendations – Council is also very interested to learn the strengths of the institution and its approved degree programs. Reports will typically highlight these commendations along with other favourable comments throughout the text.

Suggestions for improvement – Beyond this, Council is very interested to learn of any other suggestions the team has which would improve the quality of the programs being offered and/or which would rectify serious deficiencies which the team has identified (especially where the team feels that minimum standards are not being met). 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.

The report, which will help Council make decisions about the continuing status of the approved programs, is intended to facilitate constructive change by the institution. Before electronically submitting the report to the Secretariat, it should be checked to ensure that:

- It speaks directly to Council's organizational and program assessment standards.
- It has a clear recommendation along with the rationale (stated in terms of Council's organizational and program assessment standards) and evidence that the findings support the recommendation.
- It has provided sufficient attention to the positive aspects of the institution and its programs (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 (and therefore should not be cited as one of the authors) but does participate in the site visit and should be listed as a member of the team. 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.

In the case of a favourable judgement, Council will notify the institution and the Minister. If Council has concerns, it may specify remedial measures to be taken by the institution.

In the case of an unfavourable judgement, Council may recommend to the Minister that the programs be canceled and the approval for them be rescinded and notify the institution accordingly. Recommendations with respect to cessation of admission to the programs, notification to students and applicants, and arrangements whereby students in program can complete them, will also be provided following discussion with the institution.

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 comprehensive 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 10 categories in the self-study. The team will then 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: Information Services
- Category 8: Academic Policies and Records
- Category 9: Student Services
- Category 10: Physical Plant and Facilities

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 any electronic devices (e.g., laptop or tablet) 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 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  
19<sup>th</sup> Floor, Commerce Place  
10155 – 102 Street  
Edmonton, Alberta T5J 4G8  
Telephone: (780) 427-8921  
E-mail: [allison.peters@gov.ab.ca](mailto:allison.peters@gov.ab.ca)  
Web: [caqc.alberta.ca](http://caqc.alberta.ca)

## APPENDIX A

### Framework for Comprehensive Evaluation

#### Introduction

The purposes of the comprehensive evaluations by Council include the following:

- to determine whether an institution and its approved degree programs, including those offered collaboratively and/or off-campus, continue to meet organizational and program quality standards;
- to determine whether an institution has met or has made satisfactory progress towards meeting any commitments it made to Council regarding degree programs, staff, libraries, facilities or any other matter;
- to determine whether an institution has
  - (a) considered fully the comments, suggestions and recommendations of reports by evaluation teams, insofar as they have been supported by Council, and have responded satisfactorily to them;
  - (b) developed suitable mechanisms to undertake its own self-evaluation, including monitoring and improving program quality; and
  - (c) developed effective policies and processes for new degree proposal development and internal approval.; and
- to provide a basis for judgments regarding
  - (a) the continuation of an approved degree program, including any Council requirements, if any; or
  - (b) the withdrawal of approval of a degree program or programs.

Council will examine the report of the reviewers by category and determine whether or not standards continue to be met. The focal questions and criteria below are written in such a way as to both encourage and enable institutional improvement.

#### Evaluation Categories

The following 10 evaluation categories used in this Framework for Comprehensive Evaluation 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:

- Do 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, where applicable, the creation of knowledge and service to the community or related professions? How is this made manifest?
- Does the institution maintain an atmosphere in which academic freedom exists, and how does it demonstrate that it fosters an environment where students and academic staff can display a high degree of intellectual independence?
- Where adherence to a statement of faith and/or code of conduct might constitute a constraint upon academic freedom, are the institution's conditions of community membership clear prior to admission or employment?
- Is there evidence that academic activity is supported by policies, procedures and practices that encourage academic honesty and integrity?

### ***Category 2: Organization and Administration***

#### **Do 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?
- Has the institution designated an individual as having fiduciary or legal responsibility for the educational activities of the institution and as having 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***

#### **Do 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 and sustainable learning environment and to ensure that students can complete degree programs?



#### **Category 4: Curricula and Instruction**

**Have the curricula, program delivery, and quality assurance mechanisms achieved and appropriately assessed the desired learning outcomes? Is there evidence that graduates have met the expectations of the degree-level standards as expressed in the Canadian Degree Qualifications Framework? Do 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?**

*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?
- Are the institution's policies and processes, including its cyclical review processes, sufficiently rigorous 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 have ensured the ongoing quality of programs and learning outcomes?
- Is there evidence that graduates have met the expectations of the degree-level standards as expressed in the Canadian Degree Qualifications Framework?
- Do the institution's periodic program review policies and procedures normally include the advice of external experts, and has the institution indeed used the advice of these experts?
- Has the institution demonstrated that it understands and attends to the learning needs of students in the program, and supports their engaged and active learning?
- Has the institution met, or made sufficient progress in meeting, Council's expectations as noted in its outcomes letters when each degree program was approved?

#### **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 and evaluation of faculty and staff and has it created acceptable employment conditions through

implementing employment equity, promotion, termination and professional development policies and procedures for faculty and staff? How does the institution determine the professional development needs of its staff?

- Does the institution have a culture of scholarship appropriate for a degree granting institution, and how is that culture manifested? Has the culture of scholarship matured since the institution first achieved degree granting status?
- How well do the institution's policies and procedures support and facilitate engagement by academic staff in productive scholarship and/or research or creative activity? Does the institution systematically collect data in these activities to determine the level of engagement and does the institution recognize and celebrate the successes of its academic staff?

### **Category 6: Strategic Planning**

**Is 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?
- How well does the institution regularly review its non-academic areas?
- Does the institution sufficiently monitor the ongoing delivery of its programs and services, and is it responsive to problems and concerns that may arise?

### **Category 7: Information Services**

**How well do the institution's information services and systems support the degree programs offered? 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 degree programs offered, and are these consistent with the practice of other Canadian degree granting post-secondary institutions? Are student academic files being 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 admission, continuation and graduation policies consistent with its program objectives?
- Does the institution ensure that student academic 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;
  - systematic method for evaluation and awarding academic credit
  - clear and informative student enrollment agreements verifying student awareness of relevant policies;
  - support services;
  - payment requirements and refund policies;
  - financial assistance; and
  - transcript protection.

### **Category 9: Student Services**

**Is the provision of student services (such as counselling, extracurricular activities and residential accommodations) appropriate to the institution's mission and educational objectives, and do they effectively support the quality of the degree programs? Does the institution demonstrate integrity and ethical conduct in its relations with students? Are the institution's publications relevant and objective and do they effectively promote the institution and its programs?**

*Relevant organizational assessment standard:*

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

Criteria:

- Does the institution provide evidence that its student services effectively support the quality of the degree programs (e.g., surveys, tracking of retention)?

- Does the institution display a student focus that enables it to understand and meet the needs of its students?

**Category 10: Physical Plant and Facilities**

**Do the institution's physical resources, including laboratories, classrooms and specialized equipment, support the degree programming it is approved 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 degree programming in the program(s) it offers or proposes to offer?
- Does the institution have plans and methods for managing health and safety issues appropriate for the degree programming it offers?

## APPENDIX B

### CAQC's Organizational and Program Assessment Standards

#### 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.

## Quality Assessment Standards – Program

1. **Faculty and staff** – The program is supported by an appropriate number of suitably qualified academic faculty and instructional staff to develop and deliver the degree program. Faculty shall have an appropriate level of scholarly output and/or research or creative activity for the baccalaureate or graduate program involved. For programs with an applied or professional focus, faculty shall maintain continuing academic and professional competence and accreditation in their discipline or field, as appropriate

*With revisions to June 2021*

2. **Academic policies** – The program has academic policies such as those dealing with admissions, promotion and graduation requirements, mature students, credit transfer and prior learning assessment, appeals, and academic dishonesty consistent with the level of the degree program. It has established policies and procedures that outline the process by which transfer of academic credit is awarded. For programs involving work integrated learning, the institution must have policies and procedures which define the roles of the institution, employer, and student in the work integrated component of the program, and resources in place to effect these policies.

*With revisions to June 2021*

3. **Resource capacity** – The program is supported by the physical resources, both start-up and development, needed to assure the quality of the degree program. These include, where applicable, equipment, library and learning resources (physical and electronic), laboratories, computing facilities, shops, specialized equipment, etc., and work placements where this is a component of the program. There is an institutional commitment to maintaining and supplementing resources and equipment as needed to meet standards applicable to the field.

4. **Credential recognition** – The credential is or can be recognized and accepted by other post-secondary institutions, employers, and professional and licensing bodies, where applicable. There is an appropriate fit between the nomenclature of the credential and the content of the degree. The name of a degree should convey long-term meaning, and the content of the degree program should be consistent with the name.

*With revisions to June 2021*

5. **Program delivery** – Learning methodologies are the methods of delivery that will be used to achieve the desired learning outcomes at an acceptable level of quality. The institution must demonstrate that it has the expertise and resources to support the proposed methods of delivery and ensure their effectiveness. The institution should also demonstrate the ways in which it understands and attends to the learning needs of students in the program, and supports their engaged and active learning.

*Revised December 2011*

6. **Program content** – The program offers education of sufficient breadth and rigour to meet relevant national and international standards, and the content of the program, in both subject matter and outcome standards, is appropriate to the level of the degree program and the field of study. Its curriculum must be current and reflect the state of knowledge in the field, or fields in the case of interdisciplinary and multidisciplinary programs. The institution must have a process to maintain the currency of the program and the quality of its learning outcomes.



7. **Program structure** – The structure of the degree is such that there is an appropriate balance between core requirements and specialized courses, for example, between Arts and Science courses and discipline specific courses, and between the proposed program and existing programs.
8. **Program evaluation** – The program is subject to a formal, approved policy and procedure requiring a periodic review and improvement process. The policy and procedure includes assessment of the program against published standards (including the institution's own learning outcome standards for the program), and assessment of individual student work in the terminal stage of the program against program outcomes. Such assessments normally include the advice of external experts.
9. **Regulation and accreditation** – Learning outcomes and other requirements for graduation in programs leading to professions are designed to prepare students to meet the requirements of the relevant regulatory, accrediting, quality assurance or professional body.

## APPENDIX C

### 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.