Accreditation Policies, Processes and Procedures

Canadian Information Processing Society

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1.0 Privacy Guidelines

1.1 Introduction

The purpose of this information is to provide the institution seeking accreditation with information on the handling of personal information by CIPS. The fundamental principals of this policy is that information collected on an individual must be kept secure, must be disposed of in a thorough manner, must be used only for those purposes for which it was collected, must only contain data relevant to the purpose for which it was collected and must be collected with the consent of the individual.

1.2 Reference

Additional information can be found in the "Privacy and Information Technology Paper: Implementation and Operational Guidelines" - www.cips.ca/papers/privacy/default.htm and in the Canadian Standards Association's (CSA's) Model Code for the Protection of Personal
Information (CAN/CSA - Q830 - 96). The federal government has also passed the *Personal Information Protection and Electronic Documents Act* in April 2000 which includes the CSA Standards as a schedule in the legislation. Beginning in 2004, this federal legislation will apply to all commercial transactions in provinces without similar legislation in place. The Ontario Government is now in a consultation process with respect to Ontario Privacy Act (see www.ccr.gov.on.ca)

1.3 Implementation

The Executive Director of the CIPS National organization is responsible for the protection of all personal information collected pertaining to individuals employed by the institution seeking accreditation.

In this regard the Executive Director will ensure that:

* Information on the collection of personal information be made available to institutions seeking accreditation status.

* All CIPS staff, volunteers, partners and contracted agencies involved with the handling of personal information collected from academic institutions, are provided with a copy of these operational guidelines.

* All CIPS staff, volunteers, partners and contracted agencies involved with the handling of personal information collected from academic institutions, are instructed regarding their responsibilities for ensuring that the guidelines are followed.

1.4 Type of Personal Information Collected

Detailed cv's of all faculty staff, interviews with students and faculty, student records, faculty salary information.

1.5 Purpose

Personal information provided by the institution is used solely by the CIPS national office, members of the Accreditation Councils, and members of the accreditation visitation teams for the purpose of:

1) assessing a faculty's ability to meet the accreditation criteria
2) performing an audit of Accreditation Councils ' procedures and processes.

Personal salary information may be used to built the data in the Computer Science Accreditation Council and Information Systems Accreditation Council's Comparison Database..

1.6 New Use Policy

Committees and or Council wishing to 1) use existing information for a new purpose or 2) collect additional personal information for existing purposes or for the introduction of a new purpose, must provide the following information to the Executive Director.

1. Identification of the purpose
2. Identification of the type of additional information to be collected (if additional information needs to be collected i.e. identify data elements and why each is required).
3. Identification of the expected changes in the level of privacy currently afforded i.e. will the collection of this information or new use of existing information be seen to be intrusive?
4. Identification of who (i.e. position and titles) would use the information.
5. Identification of options and measures, if any, available to individuals to allow them to re-establish their personal consent. This should include an identification of costs and efforts required.
6. Identification of information that should be provided to individuals to enable them to make informed decisions regarding the proposed new use or collection of new information.
7. Identification of how long the personal information should be retained and how it will be secured.
8. Identification of whether or not advance consultation should be undertaken with individuals to clarify privacy implications and identify options. This should include and identification on how this advance consultation would be undertaken and at what cost.
9. Identification of whether the privacy of non-users would be affected.
10. Identification of whether the new use is central to CIPS' core business.
11. Identification of whether third party access to the information is required to achieve program objectives.

1.7Approval Process

Where the proposed new use is not considered to change the existing level of privacy afforded by CIPS to individuals and where there are no additional (non budgeted costs) to the Society, the Executive Director has authority to grant approval. In all cases, consent of individuals will first be required before the new use can be implemented.

In all other cases, the Executive Director will bring the issues forward for approval by the National Board, or Executive Committee acting on the Board's behalf.

1.8 Third Party Contracts

When negotiating or contracting with third parties CIPS will seek to include the following provisions in any agreement:

(i) any personal information provided by CIPS must only be used for the defined purposes for which it has been provided;

(ii) the information provided must be adequately safeguarded;

(iii) the third party must immediately rectify, delete or update the data on receiving instructions from CIPS to do so;

(iv) the third party is liable for the use of the data;

(v) the third party is acting on behalf of CIPS when it receives and processes data;

(vi) CIPS will be compensated for any breach of these provisions.

When a third party is used by CIPS outside of a contractual arrangement, all attempts will be made to ensure that any personal information provided to the third party is safe guarded. Should any breaches occur, the use of the third party will be discontinued. Bonded personnel agencies will be used in cases where temporary help is required to assist with processing personal information.

In cases where members are referred by CIPS to services provided by other organizations, CIPS recognizes that it lacks the resources to thoroughly research the privacy policies of each organization. Members will be cautioned when visiting internet sites or dealing with other organizations to be mindful of the privacy principles.

Members will be encouraged to advise the National office of referrals that are made by the Society to organizations where privacy concerns arise. If 5 or more such complaints are received against any one organization, CIPS will notify the organization of the complaints and cease any further referrals until such time as the organization advises CIPS in writing that the issues have been dealt with.

1.9 Consent

By completing the institutional accreditation questionnaire, implied consent is given by the institutions on behalf of all persons listed in the questionnaire.

1.10 Security

A. *Effective Incoming Safeguards*

1. Courier: All accreditation related materials are to be placed immediately in the secure professional development office upon receipt.

B. *Effective Storage Safeguards*

1. All accreditation materials are kept in the secure professional development office while in use.
2. Accreditation visitation team members need to store materials at a safe location while in use.
3. Once accreditation process is completed, the accreditation materials are stored in secure location until the next accreditation visit.

C. *Need-to-Know Access*

1. Accreditation information is used only by staff and volunteers that are directly involved in processing the accreditation request.

2. Accreditation visitation members can only share personal information with members of their team.
3. Accreditation materials are marked "Confidential" and couriered to visitation team members.

D. *Prevention of Unauthorized Access*

1. Accreditation materials are stamped "Confidential" and materials to accreditation teams are couriered.
2. Access to accreditation materials in the office is restricted to the Executive Director and the Manager of Professional Standards.

3. Members of teams need to store applications in secure locations. When accreditation materials are accepted by team members' staff, all efforts need to made to secure materials.

E. *Training and Procedure Monitoring*

1. All staff will be required to read the privacy manual and agree to adhere to all policies and procedures. Executive Director may monitor staff compliance.
2. All volunteers will be required to read the privacy manual and agree to adhere to all policies and procedures. Accreditation Audits need to include a review of adherence to privacy policies and procedures.

F. *Information Sharing with Individuals*

1. Personal information can only be viewed and shared by accreditation team members.

G. *Information Sharing with Organizations*

1. No information is shared with other organizations.

I *Disposal of Information*.

1. All information containing personal information and that is no longer needed must be disposed of by means of shredding. Any other accreditation related materials, excluding accreditation reports, are to disposed off through regular disposal methods.
2. Upon completion of the visit, accreditation visitation team members need to ensure that materials are shredded at their location or are returned by courier to the National Office for shredding within 60 days after distribution of the final report to the educational institution.

1.11 Access

1. Access to personal information will be limited to the individual to whom the information applies and available until the Council has reached a final decision on accreditation.
2. Only written request for access to review personal information will be granted when they are accompanied by valid identification and sent to the CIPS National Office .
3. Request for access to personal information will be dealt within three (3) working days

1.12 Retention

1.Accreditation related materials containing personal information will be destroyed by shredding after completion of the program's next accreditation cycle (3 to 5 years). All other accreditation related materials will be discarded through regular disposal.
2. In the absence of a re-accreditation, accreditation related materials containing personal information will be destroyed after a written confirmation has been received by the National Office from the Department that it will not be seeking re-accreditation.

2.0 An Overview of the Accreditation Process

2.1 Accreditation Site Visit

To further streamline its processes and procedures, the Computer Science Accreditation Council (CSAC) decided on April 17, 2004 that it will be moving to a more structured accreditation process. All accreditation reviews will take place during the Fall and Winter, and reports are reviewed at the Council's Spring meeting in the subsequent year. Departments with programs not previously accredited therefore should, preferably, notify the Accreditation Secretariat over the Summer to assure that the accreditation visit will be able to take place during the following Fall or Winter.

The questionnaire completed by the educational institution will be evaluated on the basis of data submitted. It will be supplemented then by an on-site visit by the accreditation team. Normally, the visit takes two days and provides an opportunity to the team to assess the qualitative factors such as the learning environment, facilities, learning materials, quality of staff, and students. Before the end of the visit the team will prepare and deliver a verbal report at the exit meeting with the educational institution where each party will have the opportunity to ask questions about any concerns.

The following sample agenda should be used by the school to draft the final agenda. The final agenda is due **six weeks** prior to the visit. The team will be required to meet with the individuals holding the function or the responsibilities of those listed in the sample agenda. The sugggested times in the agenda are not fixed. The team is flexible and will work around the availability of the people they need to meet with.

The final agenda should include the names of the individual(s), their position, the room in which the meeting will take place, and the time of the meeting.

A private meeting room should be set up for the team during the period of the visit. The room should be large enough to facilitate the meetings with faculty. The one copy of the curriculum related accreditation materials (e.g. course contents, exams etc.) should be laid out in the private meeting room to allow readily to these materials by the team.

Anonymous transcripts should be made available to the team during prior to or during the visit. This will allow the team to check how students complete the program under review.

Faculty Meetings

All faculty members are required to meet with the team or a member of the team. Typically, this process is facilitated by splitting the faculty into groups of up to five members who then meet with one member of the team. The faculty meetings will take place in the team’s meeting room.

Senior Administrator Meetings

The team will visit the senior administrators in their offices.

Team Dinners

Team dinners are organized by the CIPS Secretariat or the Team Leader. Representatives from the educational institutions cannot attend the team's dinner.

2.2 Accreditation Report Process

The first draft report is forwarded to the educational institution. The educational institution then has the opportunity to comment on the written facts contained within the draft report. The educational institution is asked to complete the review within four weeks. After reviewing the educational institution's response, the Team Leader in co-operation with his team will then prepare a final report for submission to the Council. The Council will receive the accreditation report, the institution's response to the accreditation report, any further clarifying correspondence and other relevant information. Based on this information the Council will make a decision on accreditation.

2.3 Accreditation Decisions and Term

Accreditation of a program is granted for a specific period, usually three or five years. Full five year accreditation is granted if current conditions are found to be meeting the minimum requirements. If, for any reason, the future of a program appears precarious or definite weaknesses exist, the accreditation will be granted for the shorter period of three years. Factors that may limit the period of accreditation, include an inability to meet the Council's curriculum criteria, a need for significant additions or improvements in staff or equipment, an uncertainty as to Department or the educational institution's financial status, the nature of the administrative organization, etc.

Three Year Accreditation

If an evaluation indicates that the future of a program appears precarious or that there is/are definite weakness(es) or deficiencies exist, three year accreditation may be granted followed by an "interim review". The three year accreditation decision will be specific in terms of what criteria need to be satisfied before full accreditation is granted. The interim review of the three year accreditation can take on two forms:

a) **Interim Report**: The nature of the weakness is such that an on-site visit will not be required to evaluate the remedial actions taken by the institution. A report focusing on the remedial actions taken by the institution will be required.

b) **Interim Visit:** The nature of the weakness is such that an on-site visit will be required to evaluate the remedial actions taken by the institution.

The Interim Report and the Interim Visit may result in an extension of the accreditation period for an additional two years.

Not-to-Accreditation

A “Not-To-Accredit” decision indicates that a program has deficiencies such that the program is currently or continues to be (in the case of an Interim Visit or Report) in non-compliance with the applicable criteria.

After an Not-To-Accredit decision has been granted, a school can only request a reconsideration accreditation visit again once it has addressed all major deficiencies and has produced graduates from this new program.

Renewal of Accreditation

An accredited educational institution must apply for renewal of the accreditation after completing the five years term. The next accreditation application must be submitted to the CIPS Secretariat at least 12 months prior to the current accreditation termination date.

Revocation of Accreditation

If, during the period of accreditation, the Council has reason to believe that a program is no longer in compliance with the criteria, the institution will be notified of such reason and will be requested to provide a response. If the response is not adequate, Council may institute a revocation of the accreditation decision.

Revocation begins with the notification of the institution as to the reasons why the procedures are being implemented. An on-site one-day evaluation may be scheduled to determine the facts. The one-day review will include two team members. A comprehensive document showing the reasons for revocation will be prepared and provided to the institution for a response. If the institution’s response is not adequate, accreditation will be revoked. The institution is notified of such action together with a supporting statement showing the cause. Revocation constitutes in essence a Not-To-Accredit action and may be appealed.

2.4 The Appeal Process

Appeals, requests for reconsideration, and requests for a revisit may be done only in response to a Not-To-Accredit decision. Also, appeals or requests for reconsideration can be based only upon the grounds that the Not-To-Accredit decision of the Council was inappropriate because of errors of fact or failure to conform to the Council’s published criteria.

In lieu of an immediate appeal, an institution may first request a reconsideration. If such a request is denied, the institution may appeal the original Not-To-Accredit decision. Requests for reconsideration must be made in writing to the Chair of the Council within 30 days of receiving notification of the decision.

Appeals must also be made in writing to the Chair of the Council within 30 days of receiving notification of the decision or the notification of the denial of a request for reconsideration.

Reconsideration

A programs that has received a not-to-accredit action may be a candidate for a reconsideration if it can demonstrate that there were major, documented errors of fact in the information used by the Council in arriving at the not-to-accredit decision.

In such cases, the institution must submit a written request for reconsideration to the Chair of the Council within 30 days of receiving notification of the not-to-accredit action. This request must be accompanied by a report specifying the major, documented errors of fact and how such errors contributed to the decision, along with substantive documentation.

The Chair shall review the request for reconsideration and either accept or deny the request within 15 days of receipt of the request. If a revisit is not warranted, a statement of reasons will be accompany the letter from the Chair.

If an immediate revisit is warranted, the institution is deemed to have waived its right to an appeal either the original decision or the action that will result from the revisit. If the revisit is granted, the institution will be charged the regular visitation fee for the revisit.

If, following the immediate revisit, the Council, upon unanimous vote, judges that the institution is correct in its claim of substantive improvements, the Council may overturn the non-to-accredit decision and grant whatever accreditation action is deemed appropriate.

Appeal

A notice of appeal must be submitted in writing to the Chair of the Council within 30 days of receiving a notification of not-to-accredit. The submission must include the reasons why the decision is inappropriate because either errors of fact or failure of the Council to confirm to the published criteria.

The Chair of the Council will select three or more members or past members of the Council to serve as an appeal committee. The Chair will designate one of the committee members as Head of the committee.

The appeal committee will be provided with copies of all documentation that has been made available to the institution during the various phases of the accreditation cycle. The appeal committee will consider only the written materials submitted by the institution in determining its recommendation. Representatives from the institution may not attend the meetings with the appeal committee. Improvements made to a program subsequent to the completion of the initial team visit will not be considered by the appeal committee.

The appeal committee’s decision will be reported to the Council in writing by the appeal committee Head. The decision rendered by the appeal committee is advice it will give to the Council.The Council will review the appeal committee’s decision and then make the final decision on the appeal.

The institutions will be notified in writing of the decision, and the basis for the decision, within 15 days of the final decision.

2.5 ***Changes During Period of Accreditation***

It is the obligation of the institution to notify the Council of any significant changes that might affect the accreditation status of an accredited program including significant changes in:

- Program title
- Faculty
- Curricular Objectives
- Curricular Content
- Student Body
- Administration
- Institutional Facilities
- Institutional Commitment
- Institutional Financial Status.

A review process will be initiated as a result of the notification by the institutions. Th institution will be asked to provide information to the Council. The information does not need to be extensive but must provide sufficient detail about the change so the affect can be assessed. The Council will review the information within 15 days of receipt to determine if modification of the current accreditation is needed. The Council's decision will be based on the degree of certainty about whether the affected program continues to meet the appropriate accreditation decision. The institution will be notified of the Council determination in a timely manner.

If it is deemed that a revisit is required, and if an institution declines an immediate revisit, this shall be cause for revocation of accreditation of the program.

If an accredited program is terminated by the institution, accreditation by the Council is also automatically terminated.

2.6 Publication of Accreditation and Public Release Policy

A list of programs, which have been accredited by the Council, is published on the CIPS National website at www.cips.ca. Information as to whether a program or institution not on the accredited list has been under consideration by the Information Systems and Technology Accreditation Council will NOT be made available except to the appropriate officials of the institution in question.

The educational institution may use the accreditation term only while it is valid and only for the programs that are accredited.

The following suggested wording will be provided to the educational institution:

The following program(s) have been accredited by the Canadian Information Processing Society's (CIPS) CIPS, through its Accreditation Council. CIPS works with academic institutions to ensure that educational programs prepare students for the demands of the profession. Completion of an accredited program, assist graduates in pursuing the Information Systems Professional of Canada (I.S.P.) designation. More information about CIPS and the professional certification program can be obtained at http://www.cips.ca or (905) 602-1370.

Direct quotation in whole or part from any statement by the Council made to the institution in unauthorized. Correspondence and reports between the Council and the educational institution are confidential documents and should be released only to authorized personnel at the institution.

The educational institution must avoid any implication that programs offered are accredited under program criteria against which they have not been evaluated. Where sub-designation such as “option”, “concentration”, or similar are used for programs, the institution must clearly identify the program criteria under which accreditation has been obtained.

2.7 Educational Institution Site Visit checklist

2.7.1 Preparation for the Visit

1. Assign a site-visit co-ordinator who has extensive knowledge of the program, typically the program head or a senior member of the faculty. This person should plan out the proposed agenda in detail.

2. Ensure that faculty and staff along the route are available and appropriately prepared for the accreditation team visit since they only have approximately five to ten minutes to show their area to the accreditation team.

3. The students' interview, usually with the class nearest graduation, should be scheduled for about an hour and in an area where the class of students feel that they can speak openly about the program. Students should be advised in advance of the purpose of the interview.

4. Staff may be interviewed in groups or individually. The staff should be made aware of the purpose of interviews and the interviews should be scheduled so there is a minimum of disruption to scheduled classes.

5. Arrange an area for the meeting to take place between the team and the graduates, advisory committee and employers. A minimum of four of each is essential to ensuring an adequate sample. At the discretion of the team, this may be held as a lunch meeting. Although this is not the preferred method of meeting, a conference call can be scheduled with members of the advisory committee if members are unavailable to meet with the team during their visit. Lunch and conference call arrangements are expected to be provided by the educational institution.

6. The program head should notify staff and students of the visit date well in advance and provide information about accreditation.

7. A large review room should be designated for use by the accreditation team throughout the site visit. The course portfolios should be placed on tables around the room. The materials should be clearly labelled and in binders or file boxes.

2.7.2 Specific Actions During the Visit

1. The visit co-ordinator should be available to greet the accreditation team upon their arrival at the school.

2. Coffee and cold drinks should be provided to the team in their review room.

3. Ensure that lunch is prepared and ready to serve on time.

4. Staff and the visit co-ordinator should remain out of the review room unless invited in. However, the visit co-ordinator should be readily available to answer any team questions or get additional documents if they are required.

5. Be prepared to attend the necessary meetings.

6. Remain flexible and be prepared to have staff work late if the review falls behind on schedule.

7. Advise staff as to the purpose of the exit meeting. That is, it is not to debate the validity of the conclusion or to discuss how the educational agency will rectify the concerns and problems that have been found.