

# Policy Document Framework

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## **Definitions**

There are many different definitions in use throughout MacEwan University (the “University”) both within and outside policy; however, the definitions provided below are for the sole purposes of this Framework.

*Board of Governors (“Board”)* – The governing body of MacEwan University responsible for overseeing and providing stewardship to the University in accordance with its mandate and responsible for the review and final approval of proposed Administrative and Governance Policies in accordance with this Framework, and includes a committee of the Board where approval authority has been delegated to the committee from the Board;

*Comprehensive Revision* – Any change to a Policy Document that is not a Minor Revision;

*Executive Officer* – The President, Vice-Presidents and equivalent positions;

*Framework* – This MacEwan University Policy Document Framework;

*General Faculties Council (“GFC”)* – The academic governing body of MacEwan University responsible for academic standards, integrity, policies, and programs, as well as scholarship, research, and creative activity at the University, and responsible for the review and final approval of proposed Academic Policies in accordance with this Framework;

*General Faculties Council Executive Committee (“GFC Executive Committee”)* – The standing committee of GFC that, among other things, considers and reports on policy matters relating to the GFC, reviews final drafts of proposed Academic Policies and makes recommendations to the GFC, and approves Academic Procedures, Standards and Guidelines;

*Guideline* – A statement which provides guidance for the implementation of Policy, Procedures and/or Standards and is aimed at fostering decisions or streamlining a particular process;

*Minor Revision* – A change to a Policy Document which does not affect the Policy Document’s rules, principles or intent, which changes would normally include position or department title changes, typographical errors such as punctuation or spelling, adding references to new Procedures or supporting documents, etc., but which may include other changes that serve to clarify perceived ambiguity in a Policy Document;

*Policy* – Statements of intent or principle which regulate, direct and control University programs and operations;

*Policy Area* – Specific policy types within each Policy Category;

*Policy Category* – Groups of policies, which include Academic, Administrative and Governance;

*Policy Document* – Documents subject to the terms of the University’s Policy Document Framework and which may be any one of following: Policy, Procedure, Standard, Guideline or code of conduct;

*Policy Repository* – The centralized repository of all University Policy Documents found on the University’s Policies website, and retained in electronic format, which serves as the authoritative source for the University’s Policies and is maintained by the Office of General Counsel;

*Policy Sponsor* – The Executive Officer who is responsible for the endorsement, and to ensure the creation, implementation, communication, review and maintenance, of a University Policy Document that falls under the Policy Sponsor’s jurisdiction;

*Policy Constituent* – Individual or group identified through the policy development process who may be impacted by a policy document, whose University role or professional expertise relates to the subject of a policy document, or whose legal or organizational mandate includes Policy Document review, and who, therefore, must be consulted prior to approval of the Policy Document;

*President’s Policy Committee (“PPC”)* – The standing committee comprised of the members of Executive Council (as may change from time to time) responsible for reviewing final drafts of certain proposed Administrative and Governance Policies and making recommendations to the Board, and approving certain Administrative and Governance Policies, and all Administrative and Governance Procedures, Standards and Guidelines in accordance with this Framework;

*Procedure* – A series of consecutive action steps related to a Policy that specifies how a particular process should be completed. Procedures include information on who, what, when, and where of the Policy;

*Responsible Office* – The employee, unit, committee, or area designated by the Policy Sponsor to develop and administer a Policy Document through all stages of the document life cycle (from initiation through to review);

*Standard* – Sets out the required and achievable level of performance that establishes necessary practice as may be established by applicable authorities, and against which performance must be measured;

*Unit* – The functional area or program within the University’s organizational structure which is under the leadership of an Executive Officer.

## **Appendices**

- A** Hierarchy of Documents – Overview of Accountabilities and Responsibilities
- B** Policy Document Development Process Chart

## 1.0 Introduction

MacEwan University (the “University”) is committed to teaching excellence and student success which is complemented and supported by the engagement of staff (includes administrators), faculty and students in its planning and governance processes. An effective integrated Policy Document Framework is an essential component in support of the mission to improve:

- the delivery of programs and services to students;
- support for faculty and staff who deliver programs and services; and
- the way the institution operates.

Policy Documents reflect an institution's position, principles, standards, and processes on key issues. The purpose of this Framework is to establish appropriate Policy Documents that provide direction to faculty, staff, students, volunteers, and others who act on behalf of the University, and to standardize the processes for developing and implementing clear, concise, well-written Policy Documents within the University. The Framework will assist members of the University community to understand and comply with legislative, regulatory, professional, and institutional requirements, expectations, and standards, both internal and external.

The Framework describes the Policy Document development process and defines the roles and responsibilities of all persons involved at every stage of the process. Policy Document development, approval and implementation involves collaboration among academic areas, operational areas, the Board, GFC, PPC, GFC Executive Committee, Policy Sponsors, Responsible Offices, Policy Constituents and the Office of General Counsel as owner of the Framework.

The Framework describes each element in the document cycle. These elements provide direction and guidance for complying with legislative and legal requirements, promoting best practices, mitigating risk, upholding academic values and integrity, and supporting industry and professional standards. More importantly, the elements ensure that engagement with all appropriate areas and Policy Constituents takes place in order to identify resources, infrastructure, communication, procedural change, and education necessary to support the development and implementation of Policy Documents and impact the direction of the University as a whole.

## 2.0 Policy Categories and Areas

The following three Policy Categories and more specific Policy Areas exist in the University:

### A. Administrative Policy Documents

Policy Areas:

- Ancillary Services;
- Employment;
- External Relations, Marketing and Communications;
- Finance;
- Fund Development and Alumni;
- General Operations;

- Information and Technology Management;
- Infrastructure;
- Legal, Risk and Controls; and
- Student Non-Academic Conduct and Administration;

(collectively, “Administrative Policy Documents”).

#### B. Academic Policy Documents

Policy Areas:

- Academic Credentials, Schedule and Calendar;
- Admissions, Transfer and Registration;
- Curricular – Credit and Non-Credit;
- External Education Opportunities;
- Faculty and Scholars;
- Recognition;
- Research and Scholarly Activity; and
- Student Academic Conduct, Services and Resources;

(collectively, “Academic Policy Documents”).

#### C. Governance Policy Documents

- University Governance; and
- University Organization;

(collectively, “Governance Policy Documents”).

Any historical policy categories and groupings have been reviewed, considered and incorporated as necessary into the policy categories and areas contained in this Framework.

### 3.0 Policy Document Hierarchy

The University adopts a Policy Document hierarchy that supports its governance and operational needs, and which provides adaptability and flexibility in the face of new and changing internal and external influences. Those influences include: (1) engagement with staff, faculty, students and others who are impacted by the requirements of a Policy Document; (2) audit reviews; (3) the University’s vision, mission, and values and core documents such as the strategic direction, strategic plan, including comprehensive institutional plans; (4) accrediting bodies; (5) academic program reviews; (6) research and other grant agreements and standards; (7) government direction; and (8) laws, acts and regulations.

While the term "policy" is often used generically to describe the type of document that provides direction and sets out the ground rules for operations, the complexity of the University dictates that a broad range of specific documents are necessary. The University’s Policy Document structure ensures:

- a hierarchy is established and allows a variety of document options that best support the needs of faculty, staff, senior leaders, students and the institution in general;
- document approvals that reflect the appropriate authority;
- the level and type of document which will result in the most successful outcome for identified issues;
- dependent on the specific need, documents within the hierarchy can be developed independently of one another, or as a suite of documents; and
- there is a consistent approach across all programs and units.

The following sections describe each Policy Document within the structure, the placement within the hierarchy, accountability, responsibility, approval authority, scope of application, and the review period. A complete description of the accountabilities and responsibilities is provided in Section 4.0 below.

Appendix “A” contextualizes components of the University’s Policy Framework within the hierarchy of Policy Documents, approval authorities and responsibilities.

### *1. Codes of Conduct*

The Employees’ Code of Conduct, Student Code of Conduct, and Board of Governors Code of Conduct outline the values, principles, and standards of conduct that guide employees’, students’ and Board members’ actions and interactions. The codes are principles-based and anchor the rules by which we govern ourselves, which rules include Policies, Procedures, Standards and Guidelines.

### *2. Policy*

Policies are statements of intent or principle which regulate, direct and control University programs and operations. Policies set out requirements that are fundamental or significant to the mandate and the overall institutional goals of the University. Each Policy sets out the institution's position on a specific subject. It provides a common frame of reference and direction by establishing minimum requirements and expectations. Requirements in a Policy may be further expanded upon through other Policy Documents such as Procedures, Standards, or Guidelines.

Policies may apply to the institution as a whole or to a specific Unit. As such, Policies may meet a University-wide requirement, an identified need for operational requirements on a specific subject matter for two or more Units, or can be limited to addressing the day-to-day operations or issues specific to a single Unit.

### *3. Procedure*

Procedures are documents that provide detailed step-by-step information necessary to fulfill requirements set out in, or to implement, a Policy. Procedures are associated with, and support, a higher-level Policy.

A Procedure may be applicable across the University or specific to one or more Units.

Procedures will proceed through the same development process as Policies, however they will be approved by the PPC and the GFC Executive Committee (as appropriate).

#### **4. Standard**

Standards set out the required and achievable level of performance that establishes necessary practice as may be established by applicable authorities, and against which performance must be measured.

Standards may be applicable across the University or specific to one or more Units.

Standards will proceed through a similar development process as Policies, however they will not be posted online for consultation and they will be approved by the PPC and the GFC Executive Committee (as appropriate).

#### **5. Guideline**

A Guideline is a statement which provides guidance for the implementation of Policy, Procedures and/or Standards and is aimed at fostering decisions or streamlining a particular process. It allows the opportunity to expand on the requirements set out in a higher level of Policy Document, government direction, legislation, accreditation, recommendation, or other similar influence, to meet the operational needs and provide direction. Guidelines establish a recommended course of action that aligns with best practice, but individuals are afforded a reasonable amount of professional judgment in complying with the provisions.

A Guideline may be applicable to one or more Units.

Guidelines will proceed through the same development process as Policies, however they will not be posted online for consultation and they will be approved by the PPC and the GFC Executive Committee (as appropriate).

### **4.0 ACCOUNTABILITIES AND RESPONSIBILITIES**

The accountability for Policy Documents is shared among the Board, GFC, Executive Officers, senior leaders, management and the individual employee. Each individual is accountable to the people of Alberta and to one another to ensure we comply with the requirements of the Policy Documents and support the University's mandate, mission, and values.

Responsibility for Policy Documents spans across the institution. The Board is responsible for ensuring that the appropriate governance, leadership, and administrative structures are in place. Executive Officers and management are responsible for ensuring the effective operation of those structures, and for informing individuals of the existence of these structures. The GFC is responsible for academic, standards, integrity, policies, and programs, as well as scholarship, research, and creative activity at the University. The University relies on individual accountability and the integrity of the individuals who provide services on its behalf to have an awareness of the structures, programs and Policy Documents, and to exercise sound judgment in the performance of their roles and responsibilities.

The Framework fully embraces the concept that Policy Document development and implementation are done in close alignment and collaboration with, and active participation of, faculty, staff, the PPC, the GFC Executive Committee, Policy Sponsors, Responsible Offices, and Policy Constituents at each stage of



the Policy Document's life cycle as a cornerstone of engagement to fully embrace the University's values.

The following section provides an overview of key participants and the role each plays in the Policy Document life cycle. Appendix "A" sets out an overview of accountabilities and responsibilities for the Policy Documents.

### *GFC*

The GFC is the academic governing body of MacEwan University which is responsible for academic standards, integrity, Policies, and programs, as well as scholarship, research, and creative activity at the University. The GFC is responsible for the review and final approval of proposed Academic Policies in accordance with this Framework.

### *Board of Governors ("Board")*

The Board is the governing body of MacEwan University which is responsible for overseeing and providing stewardship to the University in accordance with its mandate. The Board is responsible for the review and final approval of proposed Administrative and Governance Policies in accordance with this Framework, subject to instances where approval authority has been delegated by the Board to a committee of the Board or to the PPC.

### *Office of General Counsel*

The Office of General Counsel is the University office charged with stewardship of the Policy Document development process and of this Framework and maintaining an up to date and accurate central repository of University Policy Documents, both current and archived. This responsibility includes the management of standardized methods and processes as described in this Framework and tracking periodic reviews of Policy Documents.

The Office of General Counsel manages processes for the development of Policy Documents and is responsible for determining the overall organizational Policy Document strategies and processes to undertake to address issues for each Policy Area. This responsibility includes the recommendation of Policy Constituents to be consulted for each Policy Document under development or review. Policy Documents receive rigorous review by the Office of General Counsel to ensure adherence to Framework guidelines and standards, however the Office of General Counsel does not approve Policy Document content.

The Office of General Counsel is responsible for:

- overseeing and guiding the Policy Document cycle processes, including making recommendations on the most appropriate Policy Document to address an issue;
- assisting the Responsible Office in determining the appropriate Policy Constituents for a particular Policy Document;
- reviewing the consultation process undertaken by the Responsible Office for a particular Policy Document;
- maintaining the Policies website, including posting draft Policies, Procedures and proposed rescissions for general consultation with the University community and providing feedback received to Responsible Offices for their consideration; and

- ensuring appropriate endorsement and approvals are in place.

In keeping with its oversight role, the Office of General Counsel will maintain accurate listings of Policies and Procedures: 1) under development; 2) approved (current); and 3) rescinded.

### *President's Policy Committee ("PPC")*

The PPC is a standing committee comprised of the members of Executive Council (as may change from time to time) which is responsible for review of Administrative and Governance Policy Documents in accordance with this Framework and either approving the Policy Documents or making recommendations to the Board, as appropriate.

### *GFC Executive Committee*

The GFC Executive Committee is the standing committee which, among other things, considers and reports on Policy matters relating to the GFC, reviews final drafts of proposed Academic Policies and makes recommendations to the GFC in relation to same, and is responsible for the review and final approval of proposed Academic Procedures in accordance with this Framework.

### *Policy Sponsor*

The Policy Sponsor is the Executive Officer who has accountability for the subject matter addressed in a Policy Document. In certain circumstances where Executive Officers share accountability for the subject matter, there may be more than one Policy Sponsor for a particular Policy Document. The Policy Sponsor designates the Responsible Office for each Policy Document being brought forward in their area of responsibility and commits to ensuring that the infrastructure and resources necessary to support the requirements of a Policy Document, including resources related to education and changes in practice, and a communication plan with respect to promulgation, will be in place as necessary. In the case where the Responsible Office is a committee, the Policy Sponsor may designate certain committee members to carry out of the duties of the Responsible Office.

It is of critical importance to address issues at the outset of developing a Policy Document to ensure the requirements do not impose an administrative or financial burden on any one unit, program, or operational area without allowing for an opportunity to influence the outcome and seek equitable resolution. The Policy Sponsor is responsible for the proper handling of these issues in the event of an impasse or dispute during the Policy Document process. The Policy Sponsor must approve submissions to the Office of General Counsel related to Policy Documents.

### *Responsible Office*

The Responsible Office is accountable to the relevant Policy Sponsor. Responsibility for development of Policy Documents is primarily that of the Responsible Office who is the primary content expert during a Policy Document's development. The Responsible Office may be an individual, unit, area, program or committee, including a GFC standing committee. Dependent upon the type of Policy Document, it may be necessary for more than one program, unit, committee or area to act as the Responsible Office.

The Responsible Office may delegate to a lead or may work directly in preparing drafts for review and consultation, coordinating consultative feedback, in communicating and educating, and in planning the

implementation and evaluation strategies. A Responsible Office does not "own" the Policy Document as these are the records of the University. However, the Responsible Office is responsible for the development, content, and management of the Policy Document. With support from the Office of General Counsel and Policy Constituents, the Responsible Office will identify related legislation and University policy, evaluate potential risks and costs and any identify any implications for Policies already in existence or under development.

The Responsible Office is responsible for managing the processes for evaluation and makes arrangements for the operational activities associated with the evaluation of the Policy Document as identified during the development and consultation stages. If a significant issue related to the content is identified, the Responsible Office, under the direction of the Policy Sponsor, is responsible for taking remedial steps, including revision.

### *Policy Constituents*

Policy Constituents play a crucial role in the development and review of Policy Documents. As a normal practice, Policy Constituents are requested to act as the spokespersons for those programs, units and/or areas which are most significantly affected by the content of a Policy Document in terms of resources and/or compliance with various requirements. It is critical that the Policy Constituents engage with the programs, units and/or areas that they are representing to obtain as broad a range of viewpoints as possible. Prior to approval of a document, Policy Constituents are asked to provide feedback on the contents on a targeted basis as a measure of good governance to ensure the document adequately addresses the issue and establishes sound, practical, and achievable requirements. Moreover, the feedback identifies:

- any potential gaps or issues that must be addressed before implementation; and
- areas of concentration for communication, education, and practice change strategies.

The Office of General Counsel will assist the Responsible Office in identifying appropriate Policy Constituents.

## **5.0 POLICY DOCUMENT CYCLE ELEMENTS**

The distinction among the various types of Policy Documents is an important consideration, not only when deciding how best to address an issue, but also in determining accountability, assigning responsibility, and allocating resources. Regardless of the type of Policy Document selected, there are several essential elements in the cycle, the key component of which is the engagement and participation of faculty, staff and other Policy Constituents.

The Policy Document cycle elements ensure all types and levels of Policy Documents provide direction and guidance to staff, faculty and students in order to uphold legislative and legal requirements, promote best practices, manage risk, and support industry and professional standards. As well, the cycle elements result in Policy Documents which are clear, unambiguous, relevant, practical, and achievable. Generally, the elements apply to each type of Policy Document, but the level of involvement of sponsors and Policy Constituents varies depending on the specific type of Policy Document and the matter being addressed. Appendix "A" sets out the roles and responsibilities for the individuals involved in the process for each specific type of Policy Document for every element of the cycle.

The following is a brief description of the elements. It is important to note that although presented in a staged format, or "steps", the cycle elements require continuous consultation and collaboration that may require repeating one or more steps in the process.

### *1. Initiation (Identification of Policy Requirements)*

An issue or idea can arise at any level or from any area or individual within or external to the institution. Once identified, issues/ideas are typically presented to the Policy Sponsor to determine appropriate resolution. If, after consideration of the issue, the Policy Sponsor is of the opinion that a Policy Document may be required, they appoint the Responsible Office, who contacts the Office of General Counsel to clearly identify the issue and need for a Policy Document.

This element requires the identification of: 1) Current Policy which needs to be reviewed, updated or rescinded; 2) Policy under development which requires review or feedback from Policy Constituents; 3) Policy gaps where no current or approved Policy Document exists and where a Policy Document is required; 4) Any related Procedures to be revised or developed.

It is highly recommended that Procedures be developed and revised at the same time as the applicable Policy. The Responsible Office should take into consideration whether a related Procedure should be developed or revised, as the case may be.

### *2. Development*

The development process is a collaborative and iterative activity among faculty, staff, students, and Policy Constituents who have the content knowledge and expertise, the Responsible Office, and the Office of General Counsel. The Responsible Office provides content subject expertise to inform the subject content of the Policy Document; and the Office of General Counsel provides policy expertise to maintain the integrity of the Policy Document, ensuring consistent language, standardized format, and maintaining the processes in accordance with the provisions of the Framework; Policy Constituents provide feedback into the content of the Policy Document, ensuring alignment with applicable legislation, bylaws, professional standards, industry standards, and other requirements.

This stage may include developing new Policies, reviewing existing Policies scheduled for review, or revising Policies to address identified "gaps".

The development process involves several elements and tasks. Under the lead of the Responsible Office with support and direction from the Office of General Counsel, development includes an assessment of the issue to establish the overall plan for Policy Document preparation, benchmarking, consultation, the identification of resources, infrastructure, Policy Constituents, and drafting of the Policy Document. Key elements of the development process are described below:

#### *(a) Identification of Responsible Office(s)*

The Responsible Office acts as the primary content expert for the life of the Policy Document in recognition of their expertise and responsibility for the subject matter addressed in the Policy

Document. The Policy Sponsor will identify the Responsible Office for every Policy Document to be developed.

Once identified, the Responsible Office establishes a preliminary plan for development, including identification of potential Policy Constituents to develop the document, expected consultation process, timelines, and possible resource implications. The Responsible Office must have sufficient resources (i.e. experience and time) to conduct or coordinate the policy development process.

#### (b) Benchmarking

Benchmarking provides an opportunity to examine a range of policy alternatives and best practices and apply lessons learned by other institutions. The Responsible Office undertakes benchmarking and environmental scans to ensure compliance, consistency, and alignment with relevant internal and external influences.

#### (c) Identification of Policy Constituents

With the assistance of the Office of General Counsel, the Responsible Office will identify Policy Constituents to engage as a part of the consultation process. Where feedback is sought from faculty, the Policy Constituent will be the applicable standing committee of GFC. Where feedback is sought from students, the Policy Constituent will be the most appropriate member of the executive of the Students' Association of MacEwan University. Where feedback is sought from administration, the Policy Constituent will be the appropriate member of leadership from the administrative department or unit.

#### (d) Identification of Approving Body

With the assistance of the Office of General Counsel, the Responsible Office will identify the body responsible for approving the Policy Document. For new Administrative or Governance Policies, this will be the Board until such time as the approval authority has been delegated to another body. In conjunction with the final approval of a new Administrative or Governance Policy, the Board may delegate future approval of the policy to either a committee of the Board or to the PPC.

For revised Policy Documents, the approval authority will remain consistent from the last approval, unless authority has been specifically delegated by that approval body.

#### (e) Consultation

Genuine and comprehensive consultation is fundamental to the University Policy Document development cycle and underpins successful policy implementation. This is accomplished by bringing together Policy Constituents from an array of units, programs, and disciplines who have the subject matter expertise and knowledge to guide and inform a particular Policy Document and to have in place a structure that ensures resources fully support the successful implementation of a Policy Document.

Targeted consultation with Policy Constituents and, if required, external Policy Constituents ensures that broad organizational issues related to the Policy Document are identified early to minimize anticipated operational risks or problems associated with implementation. Policy Constituent consultation also assists in achieving acceptance and compliance with the Policy Document once implemented. Engagement and consultation is an iterative process. The level of engagement is guided by several

factors, including subject, impact on employees, resources, and infrastructure.

External consultation may be required on the proposed contents of a draft Policy Document. Comments may be sought from students, external institutions, and/or members of the public depending on the topic and relevance to the nature of the Policy Document.

Although it is at the discretion of the Responsible Office to set an appropriate process for consultation, the following provides an example of how meaningful consultation may be achieved over a period of no more than four weeks:

- Day 1: Responsible Office provides draft Policy Document to Policy Constituents providing two weeks for written comment;
- Day 15: Responsible Office reviews written comment and revises draft Policy Document as appropriate;
- Day 16: Responsible Office provides revised draft Policy Document to Policy Constituents with an offer to meet for review;
- Day 17-27: Responsible Office meets with Policy Constituents as requested;
- Day 28: Consultation closes and Responsible Officer reviews comments from meetings and revises draft Policy Document as appropriate.

Once targeted consultation has been completed, the Office of General Counsel posts draft Policies, Procedures, and proposed rescissions for ten (10) business days to the University Policies website for general consultation with the University community. During this period, individuals with a MacEwan network credential will be permitted to submit feedback on draft Policies, Procedures, and proposed rescissions, which will be provided to the Responsible Office by the Office of General Counsel for consideration prior to proceeding for endorsement and approval.

#### **(f) Drafting and Revising**

The Official Policy and Procedure Templates, found on the University's Policies website, provide the basis for drafting Policy Documents. The Responsible Office is primarily responsible for drafting a Policy Document.

The Responsible Office may revise draft Policy Documents, as appropriate, to reflect outcomes from the consultation processes prior to proceeding for endorsement and approval.

### **3. Endorsement and Approval**

A Policy Document may be "endorsed" prior to submission for formal "approval". Endorsement is the agreement of the relevant leadership teams or committees, and senior leaders identified during development, consultation, and engagement to secure support for the requirements set out in a Policy Document, and is guided by the subject matter and type of Policy Document.

Approval demonstrates the institution's commitment to uphold the requirements set out in a Policy Document. The authority for approval varies based on the type of Policy Document. The approval process will include revoking outdated or superseded policy versions (if any) and concurrent approval of new or updated policy in accordance with approval authorities outlined in this Framework.

The endorsement and approval levels for Policy Documents are defined in Appendix “A”. Comprehensive Revisions to an approved Policy Document require the same level of approval as the previously approved Policy Document. In circumstances where the Board has delegated approval of a policy to either a committee of the Board or the PPC, but that delegated body determines input from the Board is required or that approval of the policy subject matter better rests with the Board, the delegated body may direct the Responsible Office to send the policy to the Board for final approval.

In some circumstances, Policies may require approval from both governing bodies. This dual approval requirement will be identified by the Office of General Counsel through the Policy Document review and consultation process.

#### *4. Effective Date*

A Policy comes into full force and effect immediately upon approval by the appropriate body, unless the approving body approves an alternate effective date.

A Procedure comes into full force and effect upon approval by the PPC or GFC Executive, as appropriate, where the associated Policy has been approved and is in force. However, where a Procedure is approved in advance of its associated Policy, the approval of the Procedure will be contingent upon approval of the associated Policy and will take effect no earlier than the effective date of the associated Policy.

#### *5. Implementation*

Implementation of Policy Documents includes circulation to relevant organizational units/areas, University-wide communication (including inclusion in the Policy Repository), education, training, and practice change support. It is a complex undertaking that requires commitment, work, and resources. The Responsible Office is responsible for managing the implementation process, including resource management, communication and educational and practice change activities identified during the development and consultation stages.

##### *(a) Communication*

The Responsible Office works with the Office of Marketing and Communications to undertake any extended communication (for example, inclusion in student, staff and faculty news bulletins and briefings) and oversee educational and practice change activities identified during the development and consultation stages. Management and Unit leaders who receive the information regarding new or revised Policy Documents are responsible to ensure that others in the Unit also receive the information. The Responsible Office disseminates the information using a variety of available resources. The Office of General Counsel will upload approved Policy Documents on the official Policy Repository. Responsible Offices will upload links to approved Policy Documents to their respective websites (if any). Policy Documents are communicated and published by the Responsible Office through approved avenues within the University.

##### *(b) Education and Training*

The Responsible Office is responsible for ensuring appropriate education and training occurs on new or revised Policy Documents. This may involve: (1) presentations to committees, staff meetings or student groups, (2) conduct of information sessions, training programs and/or discussion groups; (3)

presentations at the annual Policies Forum hosted by the Office of General Counsel; and/or (4) conduct of professional development initiatives focused on implementation of relevant requirements.

### (c) Practice Change

The Responsible Office and all other applicable areas or units are responsible for initiating and overseeing any required practice or procedural change resulting from a new or revised Policy Document.

## 6. Evaluation

Evaluation is an important component to assess:

- success in achieving the desired outcomes identified during initiation and development; and
- compliance with the requirements.

It is a quality improvement step. At predetermined periods of time following implementation (generally a minimum 3 - 6 months), and immediately prior to the periodic review period, the Responsible Office, with assistance from Policy Constituents where appropriate, evaluates compliance with the requirements, the appropriateness, efficiency and effectiveness of the Policy Document to determine if the issue has been adequately addressed, whether the processes undertaken during the Policy Document's development were effective, and whether the desired outcomes have been achieved.

Policy implementation and compliance will be monitored by the Responsible Office to guide continuous improvement. Evaluation outcomes should be used to inform the formal review process.

## 7. Review (periodic and ad hoc) and Revision

The purpose of a review is to take an in depth look at existing Policy Documents to: 1) determine if a Policy Document is still needed or if it should be combined with another Policy Document or rescinded; 2) determine whether the purpose and goal of the Policy Document is still being met; 3) determine if changes are required to improve the effectiveness or clarity of the Policy Document; and 4) to ensure that appropriate education, monitoring and ongoing review of the Policy Document is occurring.

Periodic reviews provide a regular opportunity for careful consideration of existing Policy Documents. An ad hoc review may occur when changes are made to procedures, legislation, law, industry, standards, guidelines, or other areas.

The periodic review period is defined for each Policy Document in Appendix "A", or otherwise as directed by the Policy Sponsor. When a Policy is undergoing a periodic review, all associated Procedures must be also reviewed. Overdue periodic reviews will be monitored by the Office of General Counsel and Policy Sponsors will be notified of those Policy Documents which are overdue for review.

In addition to the scheduled periodic review, any Policy Document may be reviewed at any time, as necessary. If an ad hoc review results in Comprehensive Revisions to a Policy Document, that Policy Document's next periodic review date will be amended to take into account the date those Comprehensive Revisions were made.



The Office of General Counsel sends notification to the Policy Sponsor regarding the need for review for continued applicability or to address change. The Responsible Office and relevant Policy Constituents participate in the review to ensure the Policy Document remains relevant, current, and supports compliance.

The reviews will be undertaken through collaboration between the Responsible Office, and Policy Sponsor. Recommendations will be shared with the PPC and the GFC Executive Committee.

Where significant gaps or deficiencies are identified during the periodic or ad hoc review process by the Responsible Office, the Policy Document will flow through the development steps as indicated above.

## **6.0 RESOURCES**

- The University's Policies website has been developed to assist and support the Responsible Office in the Policy Document development process and includes documents and other information to be used in developing, reviewing, revising, or rescinding Policy Documents. Guides for each specific process relating to Policy and Procedure development, review, revision and rescission are posted on the website for reference by Responsible Offices. The website also houses the official Policy and Procedure templates and all current Policy Document review and approval forms. All Responsible Offices are expected to consult the Policies website in advance, and during, the Policy Document development process for guidance as necessary, and to ensure the most current forms and templates are being used.
- For a visual representation of the policy development process, refer to the Policy Document Development Process Chart attached as Appendix "B".

## **7.0 CONTACTS**

For further information regarding this Framework, please contact the Office of General Counsel.

## APPENDIX A

### MACEWAN UNIVERSITY HIEARCHY OF DOCUMENTS - Overview of Accountabilities and Responsibilities

Documents	MacEwan Accountability	Responsibility: Initiation	Responsibility: Development	Responsibility: Endorsement/ Approval	Responsibility: Implementation	Responsibility: Evaluation	Responsibility: Review (periodic and ad hoc) and Revision	Review Period (years)
Student Code of Conduct	GFC	Provost & Vice- President Academic	Provost & Vice- President Academic	GFC Executive/ GFC	Provost & Vice- President Academic	GFC Executive Committee	Provost & Vice- President Academic Office	5
Employee Code of Conduct	Board	Human Resources	Human Resources	EC/Board	Human Resources	EC	Human Resources	5
Board Code of Conduct	Board	Office of University Governance	Office of University Governance	EC/Board	Office of University Governance	Office of University Governance	Office of University Governance	5
Policy (Academic)	GFC	Responsible Office and/or Executive Officer	Responsible Office with Constituent Feedback	Policy Sponsor and GFC Executive Committee/GFC	Responsible Office	Responsible Office	Responsible Office	5
Policy (Administrative)	Board	Responsible Office and/or Executive Officer	Responsible Office with Constituent Feedback	Policy Sponsor or PPC/ Board or PPC as delegated	Responsible Office	Responsible Office	Responsible Office	5
Procedure (Academic)	Policy Sponsor	Responsible Office and/or Executive Officer	Responsible Office with Constituent Feedback	Policy Sponsor/ GFC Executive Committee	Responsible Office	Responsible Office	Responsible Office	5
Procedure (Administrative)	Policy Sponsor	Responsible Office and/or Executive Officer	Responsible Office with Constituent Feedback	Policy Sponsor/ PPC	Responsible Office	Responsible Office	Responsible Office	5
Standard (Academic)	Policy Sponsor	Responsible Office and/or Executive Officer	Responsible Office with Constituent Feedback	Policy Sponsor/ GFC Executive Committee	Responsible Office	Responsible Office	Responsible Office	3
Standard (Administrative)	Policy Sponsor	Responsible Office and/or Executive Officer	Responsible Office with Constituent Feedback	Policy Sponsor/PPC	Responsible Office	Responsible Office	Responsible Office	3
Guideline (Academic)	Policy Sponsor	Responsible Office and/or Executive Officer	Responsible Office with Constituent Feedback	Policy Sponsor/GFC Executive Committee	Responsible Office	Responsible Office	Responsible Office	3
Guideline (Administrative)	Policy Sponsor	Responsible Office and/or Executive Officer	Responsible Office with Constituent Feedback	Policy Sponsor/PPC	Responsible Office	Responsible Office	Responsible Office	3

**APPENDIX B**

**POLICY DOCUMENT DEVELOPMENT PROCESS**

**INITIATE**

**DEVELOP, ENDORSE, APPROVE**

**IMPLEMENT EVALUATE & REVIEW**

