

POLICY REVIEW PROCEDURE

PREAMBLE

The Continuous Improvement Cycle adopted by the OQA is the PDCA model: Plan → Do → Check → Act (Fig. 1). The model includes a process of review and redesign that completes the cycle by connecting Act to Plan. The elements of review include feedback, monitoring, data collection and analysis that inform the nature, extent and outcome of the review.

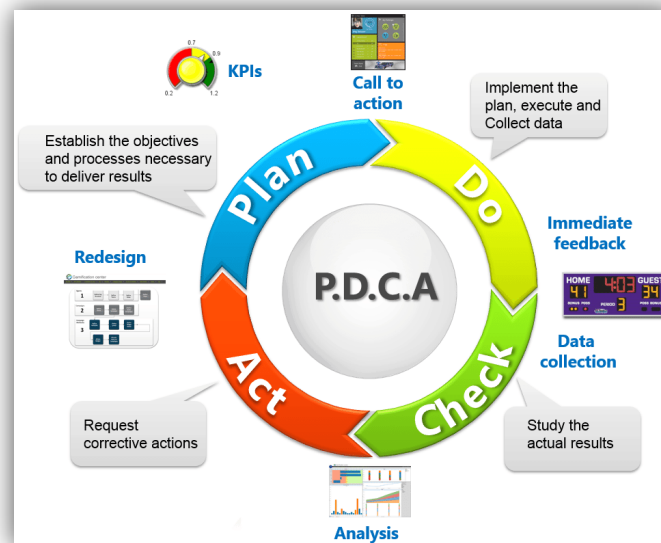


Figure 1. *PDCA model of the Continuous Improvement Cycle*

Source: <http://www.gameffective.com/gamification-continuous-process-improvement/>

Quality Assurance mechanisms in higher education establish periodic reviews of policies and, more frequently, the attendant regulations and procedures. These are often synchronized with accreditation cycles. Reviews may also be stimulated by policy gaps identified through consultation with governance units or stakeholders, both internal and external.

PURPOSE

The policies of an institution provide for consistency, transparency and equity in its operations. Informed by national legislation, requirements of the professions for which students are being prepared, standards of accrediting bodies and the institution's mission, vision and core values, policies indicate the institution's position and operations. The policies guide decisions and daily activities through regulatory and procedural documents that define the 'what', 'who' 'how to' and 'to whom' of the institution's operations, with appropriate flexibility for exceptional cases.

Policy reviews are to ensure that the policies address existing and emerging legislative needs of the institution as it grows, develops and responds to the needs of its stakeholders in achieving its vision and accomplishing its mission. Primarily, reviews consider the following:

Relevance/Purpose	Are the University College's strategic direction in achievement of the Mission and the inculcation of the Core Values reflected?
Currency	Is the present situation/needs of the institution and its stakeholders addressed? Is the policy still needed?
Clarity	Are all users and stakeholders consistently interpreting its content in similar ways? Does it unambiguously communicate that which the writer(s) intended? Does it articulate the institution's position in a manner that facilitates the development of regulations and procedures?
Compliance	What was the overall level of compliance with the policy since implementation/previous review? Where compliance was low, was this impacted by the way the policy is written?
Adequacy and Scope	Are all instances and all stakeholders addressed, with sufficient provision for extraordinary cases? How should the policy be amended to address concerns that have arisen since its implementation/previous review?
Consistency	Does the policy comply with the Laws of Jamaica and any applicable professional regulation or standard? Is it aligned with established and current policies and procedures of the University College?
Redundancy	Does this policy need to stand alone, or should it be combined with another policy? Are these areas already covered in other policies?

PERSONNEL

A Policy Review Committee (PRC) constituted for the purpose of review of an existing policy shall include at least three (3) members:

- i) **Accountable Officer** as stated on the policy (the policy custodian and committee chair)
- ii) **Quality Assurance (QA) Officer** with portfolio responsibility for the policy and/or the **OQA Research Assistant**, and
- iii) **Internal or External Consultant(s)** with expert knowledge of the policy subject matter or of the implications of its implementation.

Additional persons may include administrators whose portfolios are directly impacted by or most needful of the review and primary stakeholder representatives, such as lecturers and students.

For each policy review, the PRC will meet at least three times (Fig. 2). Each PRC may review up to three policies at a time.

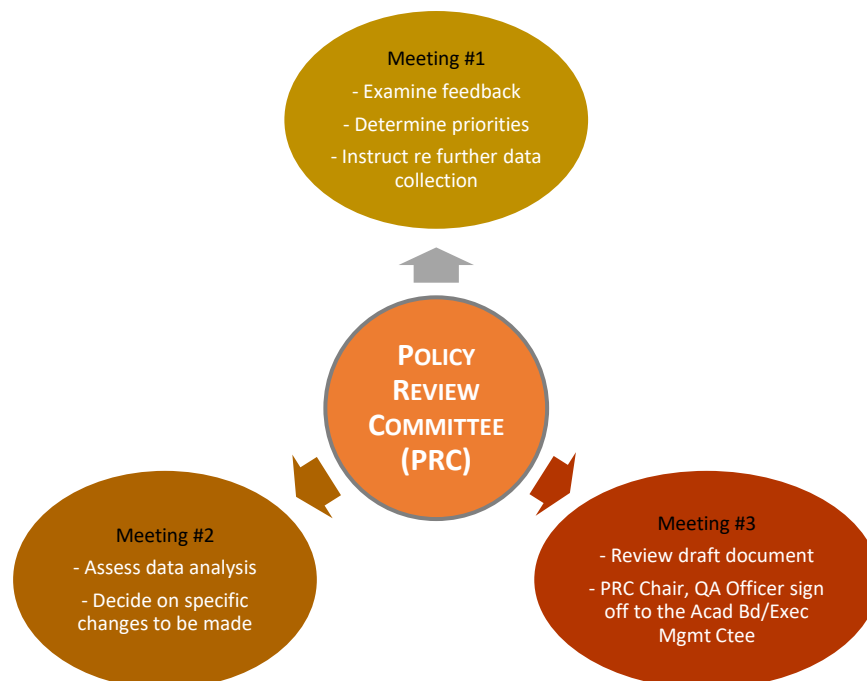


Figure 2. *Role of the Policy Review Committee (PRC) in the review process*

PROCESS

Feedback (Fig. 1) on a policy is channeled to the OQA from users, primarily through the designated email address or the members of the OQA Team. Copies of all documentation related to the regulations, processes and procedures emanating from the policy are provided to the OQA by the relevant departments and offices.

Formal monitoring of a new policy, i.e. being officially implemented for the first time, begins twelve months after the effective date of the policy, with various aspects scheduled in accordance with the relevant activities in the institution. For policies that have already been reviewed, the periodic reviews occur in five-year cycles. The formal review commences with the convening of the relevant PRC to examine the feedback received from stakeholders and prioritise the areas to be investigated.

The OQA, primarily through its Research Assistant, is responsible for developing, or outsourcing the development of, appropriate instruments and methodologies for:

- determining whether the most current regulations and procedural documents are those in use by the institution;
- assessing the institution's knowledge of the policy and/or procedures derived therefrom;
- measuring the effectiveness of the policy implementation, i.e. compliance; and
- identifying inadequacies or redundancies in the policy and/or procedures derived therefrom

Data from these investigations are analysed by the OQA Research Assistant, in conjunction with the QA officer on the relevant PRC, to categorise the findings. After final data collection, the PRC meets for the second time and, on the basis of the evidence and bearing other policies in mind, instructs on the specific material to be added, deleted or rephrased. Amendments are done by the PRC Chair in a Word version of the policy, using Track Changes and a footer added to indicate the date of the draft, then sent by email to the QA officer. The QA Officer accepts or rejects the changes, producing the first draft of the review within two weeks of receipt. This first draft of the review is circulated to members of the PRC, the head of the OQA and primary stakeholders no later than six months following the beginning of the formal monitoring process.

Stakeholders have two (2) weeks in which to submit feedback. Feedback is collated by the QA officer of that PRC, noting the number of persons (proportion of stakeholder

population?) that responded with meaningful comments, questions and suggestions (i.e. more than typographical, grammatical or syntax errors). Six (6) weeks after dissemination to the stakeholders, the PRC receives the updated/reviewed policy and the PRC Chair and QA Officer sign off on the review as an indication of its recommendation of the reviewed policy to the Academic Board/Executive Management Committee. Any resultant amendments to regulations and procedures, including forms and other documents, are made by the PRC and provided to relevant departments and offices so that they will be ready for the implementation of the reviewed policy. The reviewed policy is then presented to the Academic Board/Executive Management Committee for approval, with indications of the attendant amendments that have been to the regulations, processes and procedures.

The approved policy is dated appropriately as a revision or update and the policy submitted to the Board of Directors for ratification, following which it is posted on The Mico's official website. Bound hard copies of the policy are prepared for the Library, President, Vice Presidents, Deans, and the OQA. The community is advised through the Mico email system that the policy has been reviewed and is invited to view same on the website.

PRODUCT

During the process of review, the policy may be updated, revised or rescinded.

- Updating involves changes in style, format, grammar and/or correction of error.
- Revision involves substantial content change.
- Rescinding involves withdrawal of the policy from circulation.

Minor Revision and Updates

A minor revision does not affect a policy's rules, principles, or intent and is referred to as a policy update. A policy update does not require the formalized process a substantive revision does; however, it must follow a detailed submission and approval process.

Changes to a policy which would be considered minor and classify as a policy update include:

- adding definitions to increase understanding of the terms of the policy statement
- making corrections such as punctuation or spelling
- clarifying a point of the initial policy
- rearranging information for a better flow
- making changes to an attached procedure or attaching a new procedure to aid in the policy statement's implementation process
- adding guidelines

Substantive Revision

A substantive revision of a University College policy brings considerable and significant changes which affect the rules, principles or intent.

Changes to a policy involving one or more of the following, is considered substantive:

- changes in related laws and regulations
- change that alters the initial policy intent or objective
- modification or addition to the initial policy requirements
- procedures for implementing the policy change significantly

If it is determined to be a substantive revision, the process will follow as if it is a new policy.



Figure 3. Summary of the Policy Review Process