



Technology
Accreditation
Canada

Agrément en
Technologie du
Canada

National Program Accreditation Manual for Administrators



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1.0 Introduction

Welcome to Technology Accreditation Canada (TAC)! Technology Accreditation Canada (TAC) is a bold, world class accreditation organization, delivering accreditation services for the engineering technology and applied science profession in Canada. TAC was established by Technology Professionals Canada (TPC) to revitalize the national accreditation process for technician and technologist programs.

1.1 TAC Vision, Mission and Values

Vision – Trusted excellence in engineering technology and applied science accreditation.

Mission - To deliver world class accreditation for the technology profession in Canada, based on best practices and promoting the highest quality of education in engineering technology and applied science.

We value;

Integrity - We aim to be fair, honest and transparent in all that we do, basing our judgments on sound evidence. We demonstrate high ethical standards. We keep our promises and commitments.

Passion - We are passionate about our business, customers and stakeholders. We take pride in our work. We have a passion to excel in everything we do. We aim for flawless delivery and learn from our mistakes.

Respect - We treat each other, our customers, team members and stakeholders with honesty and respect. We respect differences, support diversity and value the contributions of others. We are open and approachable about the work we do and how we do it, believing this encourages trust and confidence.

Accountability - We take ownership and accountability for our decisions and actions. We are dedicated to being a socially and environmentally responsible corporate citizen. We are committed to the long-term sustainability of our assets and business.

Innovation - We encourage creativity and open-minded thinking, continually exploring new and better ways to solve problems and create value. We have the courage to challenge the status-quo. We embrace and enable change.

1.2 Spirit of TAC

Through accreditation, TAC is committed to partnering with educational institutions to ensure students receive a quality education that meets the standards of Canada's engineering technology profession.

1.3 Purpose of Manual

The purpose of this manual is to provide administrators with information and tools required to understand and implement the TAC's national program accreditation process.

2.0 Accreditation

Accreditation is the act of granting credit or recognition that maintains suitable standards. The process of accreditation is recognized worldwide as an objective method of assessment and an important tool to identify program strengths and challenges.

2.1 TAC National Program Accreditation

TAC accredited programs represent excellence in education, directly embodying the standards of the engineering technology profession.

The TAC national program accreditation model was developed in direct response to findings made by the Canadian Standards Association (CSA) after performing a comprehensive, independent review of technology accreditation practices that existed at the time measured against best practices from other jurisdictions and sectors.

TAC accreditation measures an educational institution's engineering technology or applied science program against the standards in the National Accreditation Components, including the learning outcomes in the Canadian Technology Accreditation Criteria (CTAC).

The process for accreditation is detailed in the following section.

2.2 Accreditation Categories

TAC has a number of accreditation categories, recognizing the variety of engineering and applied science programs offered.

Standard – a stand alone technician or technology program

Joint – a technician and technology program with significant overlap (at least 80% common courses overall and 67% common courses in the second year)

Aligned – two technician or two technology programs with significant overlap (at least 80% common courses overall and 67% common courses in the final year)

Program Stream – one program with one or two common years and two or more streams in with final year with at least 67% of the courses common

Program Options – a standard program with co-op and/or fast track options

2.3 Accreditation Program Key Features

National program accreditation through TAC is based on an open, fair and transparent process, and has the following key features;

- Evaluation by a trained and skilled audit team, with industry or academic experience, approved by educational institution
- Site visit
- Detailed feedback to the educational institution throughout process
- Program accreditation is determined by the audit team
- Copy of audit report provided with recommendation and identification of best practices
- Accreditation granted for 5 years

2.4 Achieving Accreditation

In order to achieve TAC accreditation status, a program must be compliant with all National Accreditation Components, including showing that graduates have reliably demonstrated achievement of the majority of the learning outcome indicators (LOIs) for all the program general learning outcomes (PGLOs) and achievement of the majority of the LOIs for each of five most important program discipline learning outcomes (PDLOs).

Once an educational institution's program has been accredited, this achievement will be announced publicly, posted as an accredited program on the TAC website. The educational institution will be provided TAC's National Accredited Program logo for promotional purposes.



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2.5 Accreditation Benefits

- Program accreditation demonstrates a commitment to delivering a high quality of education for assurance and pride.
- Accreditation creates an opportunity for continuous improvement.

- Accreditation provides a team building opportunity.
- Accreditation can be leveraged to differentiate your program to attract students.
- Graduates from TAC accredited programs are generally fast tracked to professional status by provincial professional regulators.

2.6 National Accreditation Components

The National Accreditation Components are the standards by which an engineering technology or applied science program are measured against for the purposes of national program accreditation.

The National Accreditation Components can be found as Appendix 1.

2.7 Canadian Accreditation Technology Criteria

Canadian Technology Accreditation Criteria (CTAC) are the engineering technology profession's national learning outcome standards and are used by accreditation bodies, provincial professional associations, educational institutions, government agencies, industry and others for various purposes. TAC uses CTAC for the purposes of national program accreditation.

CTAC for each engineering technology and applied science discipline is comprised of the eight (8) program general learning outcomes, found in the technician and technologist PGLO, plus program discipline learning outcomes (PDLOs), found in the discipline specific CTAC.

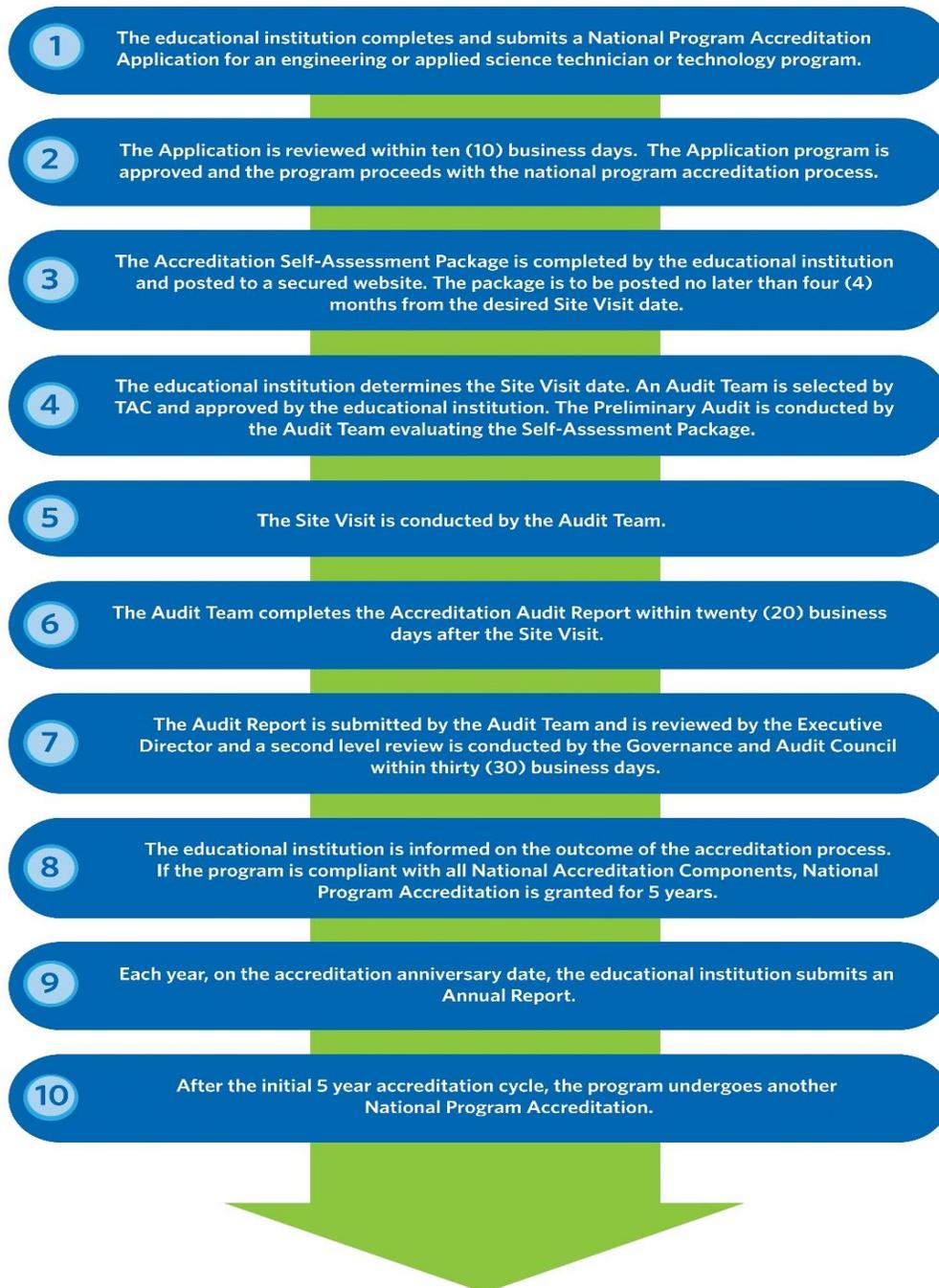
Each PGLO and PDLO contains a number of Learning Outcome Indicators (LOIs), which are examples, illustrating, defining and clarifying the level of performance to be achieved. Some LOIs have additional sub-points which are indicated in italics. A program may, within reason, include greater or fewer LOIs than those included in each CTAC.

The 37 CTAC can be found on the TAC website.

3.0 TAC National Program Accreditation Process

The National Program Accreditation process for a standard accreditation is outlined in the following sections. Unique steps in the process for other categories of accreditations are detailed in sections 3.9 and 3.10.

National Accreditation Program Process Chart



3.1 Accreditation Application

1. The Educational Institution completes the Accreditation Application Form and submits it to TAC along with the required fee.
2. The Accreditation Application Form is reviewed within ten (10) business days by the Executive Director. One of three decisions is made:
 - (1) the program is approved to proceed to the next stage of the accreditation process;
 - (2) the program is required to revise the application;
 - (3) or the program is not allowed to proceed with accreditation.
3. The educational institution is sent a letter indicating which of these three decisions has been made.
4. The Executive Director informs the appropriate PPA that the Accreditation Application Form has been received.

The following documents pertain to this stage of the accreditation process:

- TACNAC 004 Accreditation Application Form
- TACNAC 005 Positive Accreditation Application Response Letter
- TACNAC 006 Revisions Accreditation Application Response Letter
- TACNAC 007 Denial Accreditation Application Response Letter

3.2 Accreditation Self-Assessment Package

1. If the educational institution receives approval to proceed to the next stage of the accreditation process, the institution is also sent the Accreditation Self-Assessment Package and all tables that need to be completed as part of the self-assessment process.
2. The educational institution completes the Accreditation Self-Assessment Package. Online, email, or telephone assistance is offered to the educational institution if required and requested.
3. The educational institution posts the Accreditation Self-Assessment Package and all required documentation, including program information, course outlines and available student work, to a secure institution website. The posting of the information should indicate the date and time on which the documentation is posted.
4. The Accreditation Self-Assessment Package should be complete and posted to the secure website at least four (4) months prior to the date that the educational institution has requested for the Accreditation Site Visit.

5. Once the Self-Assessment Package and accompanying documentation has been posted to the secure website, the Educational Institution notifies the Executive Director and provides the username and password required for access to the secure institution website by the accreditation audit team. The audit team will need access to the secure website for the duration of the audit process right up until the audit report is issued. Additionally, the secure website should be maintained after accreditation is received, for the duration of the five year accreditation cycle. This will provide an accreditation history for the educational institution and staff to follow when it comes time for the next accreditation cycle.
6. No changes should be made to the documentation after it has been posted to the secure website without clear communication in writing to TAC.
7. The educational institution also submits a request for a Site Visit date that is at least four (4) months in the future.

The following documents pertain to this stage of the accreditation process:

- TACNAC 008 Accreditation Next Steps
- TACNAC 009 Accreditation Renewal Self-Assessment Package Letter
- TACNAC 010 Accreditation Self-Assessment Package
- TACNAC 011 Table 1 Enrollment and Graduation Data
- TACNAC 012 Table 2 Course Discipline Learning Outcomes
- TACNAC 013 Table 3 Program Discipline Learning Outcomes
- TACNAC 014 Table 4 Course General Learning Outcomes
- TACNAC 015 Table 5 Program General Learning Outcomes
- TACNAC 016 Table 6 Student Work Review Form
- TACNAC 017 Table 7 Technology Report Review Form
- TACNAC 018 Table 8 Faculty Qualifications (Program Areas of Focus)
- TACNAC 019 Table 9 Faculty Qualifications (Other Faculty)
- TACNAC 020 Table 10 Faculty Workload (Program Areas of Focus)

Note: It must be stressed to the program seeking accreditation that the effectiveness of the audit team's information gathering and review is only as good as the materials provided by the program. The onus is on the program to fully disclose all information and materials relevant to the process to the Audit Team.

3.3 Audit Team

1. The Executive Director appoints the audit team from individuals listed in the auditor registry.
2. The audit team is selected based upon:
 - Technical suitability (subject matter expertise).

- Availability.
 - Location.
 - Avoidance of conflict of interest.
3. The auditors are selected in discussion with the appropriate PPA.
 4. The audit team consists of a Lead Auditor and two additional auditors. At least one auditor will be a subject matter expert (SME). The lead auditor may or may not be an SME. The goal is to have a well-balanced audit team in terms of expertise, industry experience, and auditing experience. If necessary, an additional SME may be brought in to the audit process as a resource at the discretion of the Lead auditor and in consultation with the Executive Director.
 5. At least one of the three audit team members must be from the province in which the educational institution is located. At least one of the three audit team members must be from outside the province in which the educational institution is located.
 6. An auditor-in-training may also be assigned to the audit team. No more than two auditors-in-training may be assigned to an audit team. Auditors-in-training may be from the same province in which the educational institution is located or from outside of the province.
 7. The educational institution is advised of the audit team members. The educational institution either approves the audit team or requests changes. Only changes requested based upon perceived conflict of interest are considered. Any request for a change to the audit team must be provided to the Executive Director in writing no more than ten (10) days after the educational institution receives notification of the audit team.
 8. The audit team is finalized.
 9. The PPA is notified of the final audit team.

The following documents pertain to this stage of the accreditation process:

- TACNAC 035 Audit Team Confirmation Letter for educational institution
- TACNAC 036 Audit Team Confirmation Letter for PPA

3.4 Preliminary Audit

1. The timeframe for the preliminary audit is a minimum of four (4) months.
2. The lead auditor establishes contact with the designated educational institution accreditation contact person. The Executive Director and Accreditation Coordinator are copied on all communication with the educational institution. Communication with the educational institution is crucial to the success of preliminary audit. The

importance of the lead auditor's role in this communication cannot be stressed enough.

3. The audit team reviews all of the components of the Self-Assessment Package.
4. The lead auditor contacts the educational institution if any components are missing or if the audit team has any questions about the information and items submitted. The Executive Director and Accreditation Coordinator are copied on this communication. The more complete the information that the audit team has during the preliminary audit the easier the site visit will be.
5. The audit team notes down any components that are Not Compliant in TACNAC 025 Accreditation Audit Report. The audit team notes down any recommended improvements and best practices. Finally, the audit team also notes on a separate paper or in a separate document any questions that need to be addressed during the site visit.
6. The audit team reaches a consensus about the quality of the Self-Assessment Package prior to the site visit and any issues evident in the material submitted. If there is no consensus the Executive Director is notified. Consensus may be facilitated by the Executive Director, the GAC and/or consultation with another lead auditor who is a subject matter expert.
7. Should there be any issues of non-compliance evident at this stage of the audit process the lead auditor brings these issues to the attention of educational institution. The educational institution can then address the issues prior to the site visit or during the site visit. The Executive Director and Accreditation Coordinator are copied on this communication.
8. The lead auditor prepares the audit team for the site visit. The audit team confirms questions they will ask and areas that they will investigate based upon the preliminary audit.

The following document pertains to this stage of the accreditation process:

- TACNAC 025 Accreditation Audit Report

3.5 Site Visit

1. The site visit date is finalized by the Accreditation Coordinator based upon the requested time frame from the educational institution and the availability of the audit team.

2. A Site Visit Preparation Letter and Site Visit Schedule are sent via e-mail to the educational institution two (2) months ahead of time by the Accreditation Coordinator.
3. It must be stressed that the effectiveness of the audit team’s information gathering and review during the site visit is only as good as the materials provided by the program and the people (faculty, students, alumni, employers, advisors) made available during the site visit. The onus is on the educational institution to ensure that the audit team has as much information as possible during the site visit.
4. It must also be stressed that communication is the key to a successful site visit. The audit team will communicate openly and honestly with the educational institution staff, faculty and students. While it is preferable to interview graduating students in person, interviews may be conducted via teleconference.
5. The exit Interview is a formal face-to-face platform in which to conclude the Site Visit step of the accreditation process. The Exit Interview allows the Audit Team to provide a positive final impression of the accreditation process, regardless of the final decision on accreditation. Additional details can be found in the Exit Interview Guidelines (TACNAC 044).
6. The audit team conducts the site visit following the agreed upon site visit schedule and using all of the documents submitted by the educational institution.

Accreditation Site Visit Schedule

Time	Activity & Particulars
8:00 - 8:30 am	Breakfast with Alumni, Employers, Program Advisory Committee members, Dean, Program Chair and Coordinator
8:30 - 9:00 am	Program Advisory Committee/Employer Interview <ul style="list-style-type: none"> • The purpose of the interview is to gauge the external perception of the program in the local labour market to ensure that this perception aligns with program marketing materials and program objectives. • At least 3 Program Advisory Committee members and at least 3 representatives (H.R. and/or technical) from companies who have hired recent graduates. Optimally, those representing employers have hired graduates from the program.
9:00 - 9:30 am	Alumni Interview <ul style="list-style-type: none"> • The purpose of the interview is to gauge the graduate experience in the workforce after completion of the program and to ensure that this experience aligns with program marketing materials and program objectives. • At least 5 alumni to attend.

9:30 - 10:45 am	<p>Program Information Session</p> <ul style="list-style-type: none"> • The purpose of the information session is to provide; <ul style="list-style-type: none"> ○ 1) an overview of the program including its history, program options, unique program features, careers that graduates can pursue (10-15 minutes) ○ 2) a brief overview of each of the 5 most important program discipline learning outcomes selected (5-8 minutes each outcome) • Program Coordinator to present program overview. • Please allow time for questions and answers.
10:45 – 11:15 am	<p>Student Interview</p> <ul style="list-style-type: none"> • The purpose of the interview is to gauge the student experience in the program and to ensure that this experience aligns with program marketing materials and program objectives. • At least 5 current students to attend.
11:15 – 12:00 pm	<p>Tour of Facilities</p> <ul style="list-style-type: none"> • The purpose of the tour is for a detailed review the state of the facilities including labs, library, research, academic and career resources and to review the health and safety processes and procedures specific to courses in the program.
12:00 – 1:00 pm	<p>Lunch with Program Administrators and Institution Representatives</p> <ul style="list-style-type: none"> • Lunch for the audit team with institution representatives (i.e. VP of Academics, quality assurance staff), program administrators (i.e. Dean, Chair and Coordinator) and any others involved with or interested in the audit process.
1:00 – 2:30 pm	<p>Faculty Interviews</p> <ul style="list-style-type: none"> • The purpose of the faculty interviews is to gauge the faculty experience in the program and to ensure that this experience aligns with program marketing materials and program objectives. • 5 current faculty teaching the culminating courses to attend. If one or more is not available, substitute with other faculty teaching a course that contributes to one of the program discipline learning outcomes.
2:30 – 3:00 pm	<p>Audit Team Preparation for Program Administrator Interview</p>
3:00 – 3:30 pm	<p>Program Administrator Interview</p> <ul style="list-style-type: none"> • The purpose of the program administrator interview is to discuss the value of accreditation, for the audit team to communicate any missing information or required changes to be made to the self-assessment form and/or tables. The interview also provides an opportunity for the program administrators to ask any questions of the audit team about the audit process. • Program Chair and Coordinator to attend.
3:30 – 4:00pm	<p>Audit Team Deliberation</p>
4:00 – 4:30 pm	<p>Exit Meeting with Program Administrators and Institution Representatives</p> <ul style="list-style-type: none"> • The purpose of the exit interview is for the lead auditor to provide verbal feedback on the audit thus far, including disclosing Not Compliant items that require resolution, identification of unique program features, best practices and recommendations for improvement. Additionally, timelines are detailed for the next steps of the audit process. The interview also

	<p>provides an opportunity for program administrators and institution representatives to ask questions of the audit team.</p> <ul style="list-style-type: none"> • Institution representatives (i.e. VP of Academics, quality assurance staff), program administrators (i.e. Dean, Chair and Coordinator) and any others involved with or interested in the audit process to attend.
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The following documents pertain to this stage of the accreditation process:

- TACNAC 021 Accreditation Site Visit Preparation Letter
- TACNAC 022 Accreditation Site Visit Schedule
- TACNAC 044 Site Visit Exit Interview Guidelines

3.6 Site Visit Confirmation

1. A Site Visit Confirmation Letter is sent via e-mail to the educational institution two weeks ahead of time by the Accreditation Coordinator.
2. A Site Visit Reminder Letter is sent via e-mail one week ahead of time by the Accreditation Coordinator.

The following documents pertain to this stage of the accreditation process:

- TACNAC 023 Accreditation Site Visit Confirmation Letter
- TACNAC 024 Accreditation Site Visit Reminder Letter

3.7 Audit Report

1. The audit team completes the Audit Report. The timeframe for completing the Audit Report is within twenty (20) business days from the date of the site visit, on the basis that all materials, including student work, and information has been provided by the educational institution.
2. The audit team determines one of three outcomes for the accreditation process:
 - (1) the program receives accreditation;
 - (2) the program is required to make revisions within a timeframe designated by the Audit Team (not to exceed 6 months) in order to receive accreditation;
 - or
 - (3) the program is denied accreditation.
3. If the audit team cannot reach an agreement about the accreditation outcome, the Executive Director is notified. A meeting with the audit team, the Executive Director and the Governance and Audit Council (GAC) is held in order to reach an accreditation decision.

4. The audit team signs the last page of the Audit Report (TACNAC 025) to indicate that they have read the report in detail, agree with its content and agree with the accreditation decision. The Audit Report is submitted to the Executive Director by the lead auditor.

Reviews

5. The Executive Director reviews the Audit Report for completeness and value to the institution. Once reviewed the Report is submitted to the GAC for a Second Level Review.
6. The GAC reviews the report to ensure the audit team has followed proper process.
7. The Executive Director, GAC or the Board of Directors may change the decision of the audit team.
8. The timeframe for the review of the Audit Report by the Executive Director and for the Second Level Review is thirty (30) business days.
9. Once the Second Level Review is complete the Audit Report and corresponding communication is forwarded to the educational institution.

Communication of Decision

10. If accreditation has been awarded an Accreditation Approval Letter and a copy of the Audit Report are sent to the educational institution. Copies are also forwarded to the PPA. Note that accreditation is awarded for a period of five (5) years, after which time the program applies for accreditation again. Notice of the accreditation is placed on the TAC website.
11. If the program is required to make revisions within a timeframe designated by the Audit Team, an Accreditation Revisions Required Letter is sent to the educational institution along with a copy of the Audit Report. Copies are also forwarded to the PPA. If the revisions are not completed in the designated timeframe accreditation is denied.
12. If the program is denied accreditation, an Accreditation Denial Letter is sent to the educational institution along with a copy of the Audit Report. Copies are also forwarded to the PPA.

The following documents pertain to this stage of the accreditation process:

- TACNAC 030 Accreditation Approval Letter
- TACNAC 031 Accreditation Revisions Required Letter
- TACNAC 032 Accreditation Denial Letter

3.8 Accreditation Process Evaluation

1. An evaluation of the accreditation process, including the auditors, is completed by the educational institution immediately after the accreditation letter is sent. Auditors evaluations are also conducted. The auditors are evaluated by the lead auditor. The lead auditor is evaluated by the auditors. If there is an auditor-in-training in the audit team, he or she is evaluated by the lead auditor as part of the auditor training process.
2. All evaluations are forwarded to the Executive Director who then determines if any immediate follow-up action is required specific to the audit that was just completed either with the auditors or with the educational institution.
3. All evaluations are done online using Survey Monkey.

The following documents pertain to this stage of the accreditation process:

- TACNAC 026 Customer Satisfaction Survey
- TACNAC 028 Auditor Evaluation by Lead Auditor
- TACNAC 028.1 Auditor-in-Training Evaluation by Lead Auditor
- TACNAC 029 Auditor Evaluation of Lead Auditor

3.9 Accrediting Joint and Aligned Programs

1. The following chart provides the steps in the accreditation process for joint or aligned programs. The steps of the accreditation process are in the left hand column, with particulars for these accreditation types in the right hand column.

Accreditation Step	Particulars
The educational institution completes and submits an Accreditation Application Form for the programs.	<ul style="list-style-type: none"> • One Accreditation Application Form is completed, indicating which category of accreditation (i.e. Joint, Aligned) • The educational institution submits the courses from each of the two programs for TAC to understand the commonality.
The Accreditation Application Form is reviewed	<ul style="list-style-type: none"> • To qualify for the accreditation category, the definition must be met. See Appendix 2 Glossary of Accreditation Terms. • If the definition is met, the application is approved to proceed with the national accreditation process.
The Accreditation Self-Assessment Package is completed and posted by the educational institution.	<ul style="list-style-type: none"> • One Accreditation Self-Assessment Package is completed by the educational institution. • Clearly note in the Self-Assessment Package comments which are unique to each program (i.e. program history)

	<ul style="list-style-type: none"> Separate tables 1, 2, 3, 4, 5, 8, 9, 10 for each program must be provided.
An audit team is selected. A preliminary audit is conducted by the audit team.	<ul style="list-style-type: none"> A four-person Audit Team is formed. The Audit Team is divided into two sub-teams, of two auditors each. Each sub-team is assigned a program. Each sub-team conducts a separate preliminary audit.
A site visit is conducted by the audit team.	<ul style="list-style-type: none"> The two audit sub-teams conduct the site visit on the same day. See the site visit schedule below for the activities which will be completed jointly or separately.
The audit team completes the Audit Report .	<ul style="list-style-type: none"> The two sub-teams complete two separate Audit Reports.
The Audit Reports are reviewed.	<ul style="list-style-type: none"> The two Audit Reports are reviewed by the Executive Director and the GAC.
National Program Accreditation	<ul style="list-style-type: none"> If all the National Accreditation Components are met, National Program Accreditation is issued for each program for five (5) years. A copy of each audit report is provided to the educational institution.

Site Visit Schedule for Joint or Aligned Program Accreditation

Time	Activity	Together or Separate?
8:00 – 8:30 am	Breakfast with Alumni, Employers, Advisors	This activity is to be completed together.
8:30 – 9:00 am	Program Advisor/Employer Interview	This activity can be completed together if there is one Program Advisory Committee (PAC) for the two programs. If there are two PACs, two separate interviews should take place.
9:00 – 9:30 am	Alumni Interview	This activity may be completed together though there must be sufficient input from alumni from both programs.
9:30 – 10:30 am	Program Information Session	The program overview can be completed together. The overview of the discipline learning outcomes and culminating courses two programs are then described separately.
10:30 – 11:00 am	Student Interviews	This activity should be completed separately.
11:00 –	Tour of Facilities	This activity should be completed

12:00 pm		together.
12:00 – 1:00 pm	Lunch with Program and Institution Representatives	This activity is to be completed together.
1:00 – 2:30 pm	Faculty Interview	This activity is to be completed separately.
2:30 – 3:00 pm	Audit Team Preparation for Program Administrator Interview	This activity is to be completed separately.
3:00 – 3:30 pm	Program Administrator Interview	This activity may be completed together.
3:30 – 4:00 pm	Audit Team Deliberation	This activity is to be completed separately.
4:00 – 4:45 pm	Exit Meeting with Program and Institution Representatives	This activity is to be completed together.

3.10 Program Streams and Options

1. Accreditation for program streams and options follows the same process as a standard accreditation with the exception of the following.
2. Though one Accreditation Self-Assessment Package is completed by the educational institution, separate tables 1, 2, 3, 4, 5, 8, 9, 10 for each stream or option must be provided (unless the tables are exactly the same).

3.11 Withdrawal from the Accreditation Process

1. The educational institution can withdraw from the accreditation process at any time prior to receiving the Audit Report by notifying the Executive Director in writing. The financial penalty for withdrawing from the accreditation process will be determined by the Executive Director.

3.12 Appeals Process

1. If accreditation is denied the educational Institution can appeal the decision and the Audit Report by filing an Appeal Request (TACNAC 033a) to the Executive Director within four (4) weeks of the date on the Accreditation Denial Letter. The appeal request requires the educational institution to indicate the components for which they feel the accreditation process was not followed and to provide an explanation. The only grounds for an appeal are if the accreditation process was not followed.

2. The Executive Director forwards the request for appeal to the GAC for consideration. The Executive Director informs the audit team of the appeal request. The audit team may request that a representative be allowed to address the concerns within the appeal with the GAC.
3. The GAC considers the appeal based only on whether the accreditation process was correctly followed by the audit team. No other grounds for appeal will be considered.
4. Once a decision is made, the GAC sends the educational institution an Appeal Response Letter (TACNAC 033b)

The following documents pertain to this stage of the accreditation process:

- TACNAC 033a Appeal Request
- TACNAC 033b Appeal Response Letter

3.13 Annual Reporting

1. Educational institutions complete and submit an Annual Report (TACNAC 034a) for the accredited program to the Executive Director on the anniversary of their accreditation each year to update TAC on any program changes related to the National Accreditation Components. The educational institution indicates the components for which there are changes. The Executive Director will share this report with the PPA.
2. All program changes with respect to the National Accreditation Components must be disclosed to TAC in the Annual Report.
3. The Executive Director reviews the Annual Report and notes the changes indicated. The following changes are specifically noted and for these a subject matter expert, preferably from the original accreditation audit, will review the changes:
 - Changes to program or course content.
 - Changes to the number of hours spent on program or course content.
 - Changes to program or course delivery that affect the program or course outcomes.
4. Once the Annual Report has been reviewed, the Executive Director will send an Annual Report Response Letter (TACNAC 034b) to the educational institution. In the event that program changes reported in the Annual Report are determined to affect the program's compliance with the requirements of the National Accreditation Components, the Executive Director will indicate the corrections required and a designated timeframe in which the corrections need to be made. The Executive Director will also indicate that if the revisions are not completed in the designated

timeframe, accreditation will be removed. A copy of the Annual Report Response Letter will be forwarded to the PPA.

The following documents pertain to this stage of the accreditation process:

- TACNAC 034a Annual Report
- TACNAC 034b Annual Report Response Letter

3.14 Accreditation Renewal Process

1. Educational institutions are required to maintain the secure website from their accreditation process for five years as a record and history of the accreditation process. The Annual Reporting process also provides educational institutions with a history of changes to their program during the accreditation cycle.
2. The Accreditation Coordinator sends the educational institution an Accreditation Renewal One-Year Reminder Letter one year before the expiry of the program's accreditation. Included in this letter are the Accreditation Self-Assessment Package and instructions on how to complete the package.
3. If the educational institution has not started the process for the next accreditation cycle six months before the expiry of their current accreditation, the Accreditation Coordinator sends the educational institution an Accreditation Renewal Six-Month Renewal Reminder letter.

The following documents pertain to this stage of the accreditation process:

- TACNAC 009a Accreditation Renewal One-Year Reminder Letter
- TACNAC 009b Accreditation Renewal Six-Month Reminder Letter
- TACNAC 010 Self-Assessment Package

4.0 National Program Accreditation Continuous Improvement Procedures

4.1 Auditor Registry

1. All auditors who complete the training process and qualify as auditors are included in the auditor registry. The auditor registry is a list of all trained and approved auditors, including their location and their subject matter expertise.
2. The approved auditor registry is reviewed on an annual basis, at the end of the organization's financial/planning year, by the Executive Director. Each auditor is contacted to ensure that he or she wants to remain on the auditor registry. Each auditor's contact information and qualifications are confirmed or updated as necessary.
3. During the review of the auditor registry the Executive Director notes if any new auditors are required in specific locations or with specific subject matter expertise. PPAs are contacted to suggest auditors-in-training in their province if the Executive Director identifies the need for new auditors.

4.2 Auditor Performance Review Procedures

1. Throughout each year all auditor evaluations (from educational institutions, lead auditors and auditors) are collated by the Accreditation Coordinator.
2. At the end of each year, the Executive Director reviews the collated auditor evaluations.
3. The Executive Director identifies trends in the collated auditor evaluations that indicate a need for changes to the auditor training, to the audit process or to the auditing documentation. These trends are forwarded to the Board or the Governance and Audit Council as appropriate for consideration.
4. The Executive Director identifies trends in the collated auditor evaluations of individual auditors (if the auditors have completed multiple audits in that year) that indicate a need for additional training for the auditor or an individual discussion with the auditor.

4.3 National Program Accreditation Components Continuous Improvement Procedures

1. An annual review of the National Program Accreditation Components will be conducted for continuous improvement purposes. The annual review will be conducted by the Executive Director in consultation with the Board and the GAC at the end of the financial/planning year. The annual review will be based upon the collated auditor evaluations from the past year as well as data and anecdotes provided by the Executive Director.
2. Every five (5) years a Comprehensive Review of the National Program Accreditation Components will be completed for continuous improvement purposes. The review will be completed at the end of that financial/planning year. The Comprehensive Review will be based upon the following data:
 - Collated auditor evaluations from the past five (5) years.
 - A survey to auditors on the current version of the auditor registry.
 - A survey to PPAs.
 - A survey to educational institutions that have TAC accredited programs.
 - A survey to employers that employ engineering technicians and technologists and applied scientists.

The surveys will ask the respondents to comment on the relevance of the National Program Accreditation Components to the current industry requirements. The surveys will be developed by the Executive Director in consultation with the Board and GAC.

3. At the end of the Comprehensive Review, the Board and GAC will determine revisions, if any, that are required to the National Program Accreditation Components.
4. At the end of the Comprehensive Review, a revised version of the National Program Accreditation Components will be issued if revisions are required. The revised components will be publicized on the TAC website, and communicated to all educational institutions with accredited programs and all PPAs.
5. Any accreditations in progress at the time of the issuance of the revised National Program Accreditation Components resulting from the Comprehensive Review will be completed under the version of the components in place at the time of the submission of the Accreditation Application Form.
6. If, during the Annual Review, any urgent changes to the National Program Accreditation Components are identified by the Executive Director, in consultation with the Board and the GAC, a Comprehensive Review will be initiated, regardless of where TAC is in the five-year continuous improvement review cycle.

4.4 National Program Accreditation Process Continuous Improvement Procedures

1. An annual review of the National Program Accreditation process will be conducted for continuous improvement purposes. The annual review will be conducted by the Executive Director in consultation with the Board and the GAC at the end of the financial/planning year. The Annual Review will be based upon the collated auditor evaluations from the past year as well as data and anecdotes provided by the Executive Director.
2. Every five (5) years a Comprehensive Review of the National Program Accreditation process will be completed for continuous improvement purposes. The review will be completed at the end of that financial/planning year. The Comprehensive Review will be based upon the following data:
 - Collated auditor evaluations from the past five (5) years.
 - A survey to auditors on the current version of the auditor registry.
 - A survey to PPAs.
 - A survey to educational institutions that have TAC accredited programs.

The surveys will ask the respondents to comment on the efficiency and effectiveness of the National Program Accreditation process. The surveys will be developed by the Executive Director in consultation with the Board and GAC.

3. At the end of the Comprehensive Review, the Board and GAC will determine revisions, if any, that are required to the National Program Accreditation process.
4. At the end of the Comprehensive Review, a revised version of the National Program Accreditation process will be issued if revisions are required. The revised process will be publicized on the TAC website, and communicated to all Educational Institutions with accredited programs and all PPAs.
5. Any accreditations in progress at the time of the issuance of the revised National Program Accreditation process resulting from the Comprehensive Review will be completed under the version of the process in place at the time of the submission of the Accreditation Application Form.
6. If, during the Annual Review, any urgent changes to the National Program Accreditation process are identified by the Executive Director, in consultation with the Board and the GAC, a Comprehensive Review will be initiated, regardless of where TAC is in the five-year continuous improvement review cycle.

5.0 Accreditation Roles and Responsibilities

The following are the roles and responsibilities of those individuals/groups involved in the national program accreditation process.



5.1 Board of Directors

The Board of Directors is responsible for oversight of the accreditation of technician and technology programs. It consists of representation from Provincial Professional Associations, industry and academia. The Board approves the processes by which the accreditation is granted, including the establishment of the standards, the determination of auditor competency, the appropriate composition of the audit team and the documentation supporting the audit process.

5.2 Governance and Audit Council (GAC)

The GAC is responsible for the evaluation and monitoring of governance structures and processes, including policy development and processes for Board monitoring/oversight of operations. The GAC validates that the accreditation and audit processes were followed through a second level review and an annual review. The GAC also has oversight of the appeals process.

5.3 Standards Council

The Standards Council (SC) ensures the development and maintenance of national standards to be used for accreditation and in support of the Professional Provincial Association certification process. The Council is the conduit for information and issues related to the development and revision of the national standards.

5.4 Provincial Professional Association (PPA)

The PPAs are key stakeholders in the TAC national program accreditation process. A representative of the appropriate PPA participates as an observer in site visits for programs in that province. The PPAs are acknowledged in TAC presentations to colleges and accreditation site visits as a key partner in the audit and accreditation process. The PPAs nominate candidates to be auditors and participate in discussions to assign auditors to audit teams. The PPAs also receive a copy of the Audit Report for programs in that province.

5.5 Executive Director

The Executive Director reports to the Board of Directors. The Executive Director is responsible for:

- approving Accreditation Application Forms;
- appointing the lead auditor for each program accreditation;
- appointing the Auditors for each program accreditation in discussion with the appropriate PPA;
- ensuring there is no conflict of interest for either the lead auditor and auditors;
- ensuring the educational institution has not identified a conflict of interest for either the lead auditor or auditors and resolving any conflict of interest situation identified;
- monitoring communication between the lead auditor and the educational institution as the site visit is set up and implemented;
- reviewing the Accreditation Audit Report for clarity and accuracy and liaising with the lead auditor in the event any changes are required;
- approving the Accreditation Audit Report;
- forwarding the Accreditation Audit Report to the GAC for second level review;
- forwarding the Accreditation Audit Report to the appropriate PPA for notification.
- forwarding the Accreditation Audit Report to the educational institution.

5.6 Accreditation Coordinator

The Accreditation Coordinator reports to the Executive Director. The Accreditation Coordinator is responsible for:

- accepting and forwarding Accreditation Application Forms to the Executive Director when deemed complete;
- generating all correspondence for educational Institutions with regards to accreditation applications;
- maintaining all accreditation files;
- monitoring the communication between educational institutions and lead auditors as site visits are scheduled and implemented;

- preparing and forwarding the site visit correspondence to the educational institution;
- preparing and forwarding the results of the accreditation process to the educational institution.

5.7 Lead Auditor

The Lead Auditor is appointed by and reports to the Executive Director for the completion of a specific program accreditation or audit.

A Lead Auditor must:

- Be certified or licensed by the relevant Provincial Professional Association.
- Have at least five (5) years of work experience in his or her discipline.
- Have performed at least three (3) TAC audits or the equivalent.
- Have positive Auditor Evaluations from the stakeholders (Lead Auditor, educational institution, PPA) in the three (3) TAC audits or the equivalent.
- Have completed the Auditor Training.
- Be on the Auditor Registry.

Additional desirable qualifications for a Lead Auditor include:

- Leadership or management experience.
- Other auditing or quality management experience or training, for example internal auditing or ISO auditing.

The Lead Auditor is responsible for:

- Completing Auditor training process.
- Being the point of contact for the educational institution during the preparation for and implementation of the site visit.
- Ensuring that all components of the Self-Assessment Package are complete.
- Finalizing the site visit schedule with the educational institution.
- Copying the Executive Director and Accreditation Coordinator on all correspondence with the educational institution in preparation for the site visit.
- Making final decisions with respect to the site visit implementation.
- Scheduling audit team tasks.
- Facilitating the auditor communications for materials required for the audit (course outlines, samples, etc.).
- Leading the site visit.
- Coordinating completion of the Accreditation Audit Report (TACNAC 025) with the audit team members.
- Ensuring that all audit team members sign the first page of the Accreditation Audit Report and the Auditor Declaration on the last page of the Accreditation Audit Report.
- Answering any questions about clarity and accuracy in the Accreditation Audit Report from the Executive Director.

- Providing feedback on the auditors and auditors-in-training to the Executive Director.
- Signing off on final approval of an Auditor-in-Training to become an auditor.

Note: The importance of the Lead Auditor in communicating throughout the entire audit process cannot be underestimated. The lead auditor communicates with the Educational Institution about documents submitted in the Self-Assessment Package, the schedule for the site visit, the results of the site visit (in the exit Interview), and any follow-up documentation required. The Lead Auditor also communicates with the educational institution about the progress of the audit, specifically identifying areas of non-compliance as the audit process unfolds. The educational institution should not have any surprises during the audit process.

5.8 Auditor

An Auditor is appointed by the Executive Director after discussion with the Provincial Professional Association and with consideration of avoiding any conflict of interest in the audit process.

An Auditor must:

- Be certified or licensed by the relevant Provincial Professional Association.
- Have at least five (5) years of work experience in his or her discipline.
- Have preferably participated in at least one (1) TAC audit as an Auditor-in-Training.
- Have completed the Auditor Training.
- Be on the Auditor Registry.

An Auditor reports to the Lead Auditor. An Auditor is responsible for:

- Completing auditor training process.
- Completing the initial review of the Self-Assessment Package as part of the audit team.
- Completing the site visit as part of an audit team, reporting to the Lead Auditor.
- Participating in the completion of the Accreditation Audit Report.
- Participating in the final decision on the accreditation of the program.
- Signing the first page of the Accreditation Audit Report and the Auditor Declaration on the last page of the Accreditation Audit Report.
- Providing feedback on the lead auditor to the Executive Director.

5.9 Auditor-in-Training

An Auditor-in-Training is nominated by the Provincial Professional Association to complete the auditor training process and to become a part of the national registry of Auditors, the Auditor Registry.

In order to be nominated to become a part of the auditor registry an individual must:

- Be certified or licensed by the relevant Provincial Professional Association.
- Have at least two (2) years of experience in their discipline.

The Auditor-in-Training reports to the Lead Auditor. An Auditor-in-Training is responsible for:

- Completing auditor training process.
- Signing the Auditor Policy Declaration.
- Completing and submitting audit forms and attending the site visit as an observer, in order to learn how to be an auditor.
- Asking questions as the audit and site visit progresses in order to fully understand the audit process.

5.10 Auditor Documents

The following documents pertain to auditors, lead auditors and auditors-in-training:

- TACNAC 040 Auditor-in-Training Approval Form
- TACNAC 041 Auditor Policy Declaration
- TACPOL-7 Auditor Code of Conduct
- TACPOL-8 Auditor Conflict of Interest Policy
- TACPOL-9 Auditor Confidentiality Policy
- TACPOL-13 Expense Policy
- TACPOL-14 Acceptance of Gifts Guidelines
- TACCPOL-15 Auditor Dress Code Guidelines

Appendix 1

National Accreditation Components

The National Accreditation Components are the standards by which an engineering technology or applied science program are measured against for the purposes of national program accreditation.

Component A: Program Background Information

A.1 Program History: The program has a documented history of educational delivery in the designated technician and technologist fields.

A.2 Program Option Names and Descriptions: The program has clear names and descriptions for all program options.

A.3 Program and Option Instructional Delivery Modes: The program option and instructional delivery modes are described.

A.4 Program Organizational Structure: The program has a clear, logical and documented program administrative structure as illustrated in an organizational chart with descriptions of roles and responsibilities. A description of the relationship between the program administration and institutional administration is documented.

A.5 Program Enrollment Numbers: Enrollment numbers are documented.

A.6 Program Graduate Numbers: Program graduate numbers are documented.

A.7 Program Graduate Employment and Further Education Numbers: Program graduate employment and further education numbers are documented.

Component B: Student Policies

B.1 Program Admission Policies: Policies related to program admission requirements based on secondary school courses and grades are documented and available to all applicants. Policies for other admission paths (i.e. mature students) are documented and available to applicants.

B.2 Policies for Monitoring Student Progress: Policies used to monitor student progress each semester to ensure that prerequisite course credits have been obtained are documented and accessible to students.

B.3 Academic Policies and Procedures: Institutional and/or departmental policies on plagiarism, cheating, grade appeals are documented and accessible to students.

B.4 Student Transfer Policies: Articulation and transfer agreements for the program and options are documented and accessible to students.

B.5 Co-op and/or Internship Policies: Policies and procedures for co-op placement and internships, including how to obtain a placement, ensure placement is relevant to the area of study, placement assessment and options if a placement opportunity is not secured, are documented and accessible to students.

B.6 Graduation Requirements: Graduation policies, including graduation requirements, passing grades for courses, overall program average grade, number of credits, are documented and accessible to students.

Component C: Program Policies

C.1 Program Development Policies and Procedures: Policies and procedures for program and course development, including timelines, institutional processes and governance are documented. There is documented evidence of program and course changes which are understood by all faculty members and program administration.

C.2 Program Continuous Improvement Policies: Policies for program continuous improvement are documented. Periodic program assessments, producing recommendations for improvements to the curriculum and/or student success, are documented.

C.3 External Program Input: A Program Advisory Committee (PAC) exists. Names and contact information for PAC members is documented. Minutes from PAC meetings over the past (3) three years are documented. Reports from any other external bodies which have reviewed the program over the past three (3) years are documented.

Component D. Program and Course Information

D.1 Program Description Documents: Printed and online calendar information, brochures, program handbooks and web-based information about the program are available to all interested in the program.

D.2 Program Objectives: Program educational objectives are documented and accessible to students. Program educational objectives fit the mission statement of the educational institution.

D.3 Course Outlines: Course outlines are documented for all courses, including those in the program options, and are accessible to students. Course outlines include course ID, title, description, pre-requisites, co-requisites, objectives, learning outcomes, grading scheme, required textbooks or other learning materials, instructional delivery modes, scheduled instructional contact hours, credits, relationship of course outcomes to program outcomes, policies and procedures for submitting student work, grade required for successful credit, methods of assessment (assignments, tests, projects) and date of last revision of course outline.

D.4 Transcript and Diploma: An accurate and complete transcript is provided to students at the end of each semester. An accurate and complete diploma is provided to students upon completion of the program.

D.5 Scholarship and Bursary Information: Scholarships and bursaries are available to applicants applying to and students enrolled in the program. Scholarship and bursary information, including award criteria, application procedure and awarded amounts, is accessible to applicants and students.

Component E: Program Outcomes

E.1 Program Discipline Learning Outcomes: The program must show that students have reliably demonstrated achievement of the program's five (5) most important discipline learning outcomes, specific to the technician or technologist level.

E.2 Program General Learning Outcomes: The program must show that students have reliably demonstrated achievement of all eight (8) of the general learning outcomes, specific to the technician or technologist level.

E.3 Student Work: Student work, including tests, exams, assignments, contribute to the program discipline learning outcomes. Student work and marking schemes clearly match the demonstrable learning outcomes listed in the course outlines.

E.4 Technology Reports (for Technologist Programs only): The program must show that students have reliably demonstrated achievement of GY01 and LOI 1.1 to 1.9. A Technology Report is evaluated by the educational institution. A tracking and marking scheme is documented to show each author's contribution to all aspects of the Report, where a program allows for multiple authors.

Component F. Faculty

F.1 Faculty Qualifications: Policies and procedures are documented for hiring qualified faculty. There is documented evidence that the program follows these policies and procedures, including required academic qualifications, teaching and work experience, professional certifications and professional development.

F.2 Faculty Workload: Policies and procedures are documented for faculty teaching workload, preparation and assessment marking, class and lab sizes. There is documented evidence the policies and procedures are followed.

Component G. Facilities, Resources and Other Student Support

G.1 Offices, Classrooms and Labs: Office and classroom space, lab facilities, meeting rooms for faculty and students, office and lab support staff are sufficient to meet the needs of the students and faculty.

G.2 Maintenance and Upgrade of Facilities: Procedures and processes are documented to maintain and upgrade the tools, equipment, computing resources and laboratories used by students and faculty. There is documented evidence the policies and procedures are followed.

G.3 Health and Safety Procedures: Health and safety procedures for all facilities are documented and accessible. Processes for training students and staff in the health and safety procedures are documented and accessible. There is documented evidence that these student and staff training procedures are followed. Appropriate health and safety warnings are clearly displayed in relevant facilities.

G.4 Student Research and Library Resources: Library and online resources are sufficient for students to conduct the required research for course assignments, projects and reports.

G.5 Student Academic Resources and Support: Course related resources and faculty support are available to students for coursework, homework, research and lab projects.

G.6 Student Career Resources and Support: Resources, advisors and other institutional support are available for student career counselling and guidance.

Appendix 2

2017 Fees

Program Application Fee (one time only)*	\$500 +tax
Accreditation Fee (Five Year Accreditation Cycle)	\$4,500 +tax
Payment Schedule	
Submission of Application	\$500 +tax
Upon granting of accreditation	\$2,000 +tax
1 st anniversary date of accreditation	\$500 +tax
2 nd anniversary date of accreditation	\$500 +tax
3 rd anniversary date of accreditation	\$500 +tax
4 th anniversary date of accreditation	\$500 +tax

*The Application Fee is a one-time only charge of \$500+tax payable at the time of initial application for national accreditation. If the program has previously been nationally accredited by another Canadian technology accrediting agency, the application fee will be waived.

Multiple Accreditation Discount

Educational institutions submitting multiple applications simultaneously may receive a discount to the accreditation fee.

No. of Programs	Discount
2 to 5 inclusive	10%
6 to 10	15%
11 plus	20%

Appendix 3

Accreditation Glossary of Terms

The following terms are used throughout the accreditation process.

Aligned Programs: A category of accreditation defined as 2 technician or 2 technology programs with at least 80% common courses overall and at least 67% common in the final year

CTAC: The Canadian Technology Accreditation Criteria are the set of learning outcomes used in the audit of an engineering technology or applied science program for the purposes of national program accreditation.

Demonstrable Learning Outcome: A measure of how a program actually determines that students have achieved the Discipline or General Learning Outcome as indicated in the course outlines.

EI: Educational Institution whose program is undergoing accreditation.

GAC: Governance and Audit Council. The GAC is a group within Technology Accreditation Canada that is responsible, among other things, for the appeals stage of the accreditation process.

General Learning Outcomes: The core competencies that are general to all technician and technologist programs.

Joint Programs: A category of accreditation defined as 1 technician and 1 technology program with at least 80% common courses overall and at least 67% common in the second year

Learning Outcome Indicator: A measure of how a program could determine that students have achieved the Discipline or General Learning Outcome as indicated in the course outlines.

NAC: The National Accreditation Components are the standards by which an engineering technology or applied science program is measured against for the purposes of national program accreditation.

PPA: Provincial Professional Association, one of the provincial organizations that comprise Technology Accreditation Canada.

Program Discipline Learning Outcomes: The core competencies that comprise a technician or a technologist program.

Program Learning Outcomes: Program Learning Outcomes are divided into two categories: Discipline Learning Outcomes and General Learning Outcomes.

Program Options: A category of accreditation defined as have a standard program plus a co-op or fast track option.

Program Streams: A category of accreditation defined as 1 program with one or two common years and two or more streams in with final year with at least 67% of the courses common.

Standard: A category of accreditation defined as a technician or technology program.

TAC: Technology Accreditation Canada.

TPC: Technology Professionals Canada.

TR: Technology Report, a project that students in the final year of their technologist program must complete.