

BOARD OF GOVERNORS Audit & Finance Committee

Monday, June 10, 2019 1:00 p.m. to 5:00 p.m. North Campus, ERC 3023

Toll-Free: 1-877-385-4099 Participant Passcode: 1028954#

Members: Nigel Allen (Chair), Doug Allingham, Stephanie Chow,

Dale MacMillan, Steven Murphy, Dietmar Reiner

Staff: Craig Elliott, Becky Dinwoodie, Cheryl Foy, Justin Gammage,

Doug Holdway, Lori Livingston, Brad MacIsaac, Pamela Onsiong

AGENDA

No.	Topic	Lead	Allocated Time	Suggested End Time
	PUBLIC SESSION			
1	Call to Order	Chair		
2	Agenda (M)	Chair		
3	Conflict of Interest Declaration	Chair		
4	Chair's Remarks	Chair		1:05 p.m.
5	President's Remarks	Steven Murphy	10	1:15 p.m.
6	Finance			
6.1	Fourth Quarter Financial Reports* (U)	Pamela Onsiong	15	1:30 p.m.
6.2	New Accounting Standards* (U)	Pamela Onsiong	10	1:40 p.m.
7	Investment Committee Oversight			
7.1	Quarterly Report	Stephanie Chow	5	1:45 p.m.
8	Project Updates		20	2:05 p.m.
8.1	New Building* (U)	Brad MacIsaac		
8.2	ACE Enhancement* (U)	Brad MacIsaac		
8.3	Campus Recreation & Wellness Centre Expansion* (U)	Brad MacIsaac		
8.4	AVIN (P)(U)	Justin Gammage		
8.5	Land Exchange (U)	Cheryl Foy/ Brad MacIsaac		

No.	Topic	Lead	Allocated Time	Suggested End Time
9	Risk, Compliance & Policy		30	2:35 p.m.
9.1	Annual Risk Management Report* (U)	Cheryl Foy		
9.2	Annual Policy Review & Compliance Update* (U)	Cheryl Foy		
9.3	Annual Insurance Report* (U)	Cheryl Foy		
10	Audit & Finance Committee Annual Board Report 2018-2019* (D)	Cheryl Foy	5	2:40 p.m.
11	Consent Agenda (M):	Chair		
11.1	Gender Change Policy*			
11.2	Minutes of Public Session of Meeting of April 15, 2019*			
12	Other Business	Chair		
13	Adjournment (M)	Chair	5	2:45 p.m.
	BREAK		10	
	NON-PUBLIC SESSION (material not publicly available)			2:55 p.m.
14	Call to Order	Chair		
15	Conflict of Interest Declaration	Chair		
16	President's Remarks	Steven Murphy	10	3:05 p.m.
	Debenture Update			
17	Audit			
17.1	Audit Findings Report* (U)	KPMG	20	3:25 p.m.
17.2	Draft Audited Financial Statements 2018-2019* (M)	KPMG/ Pamela Onsiong	20	3:45 p.m.
17.3	Internally Restricted Funds* (M)	Pamela Onsiong	10	3:55 p.m.
17.4	In Camera session with KPMG (all staff members to leave)	KPMG	15	4:10 p.m.
	KPMG Departs			
18	Annual Risk Management Report* (D) (confidential aspects)	Cheryl Foy	10	4:20 p.m.
19	Annual Debenture Governance Checklist* (U)	Cheryl Foy & Pamela Onsiong	10	4:30 p.m.
20	Investment Committee Oversight			
20.1	Amendment to Statement of Investment Policies & Asset Class Management Strategy* (D)	Stephanie Chow	15	4:45 p.m.
21	Consent Agenda (M):	Chair	5	4:50 p.m.
21.1	Minutes of Non-Public Session of Meeting of April 15, 2019*			
22	Other Business			
23	In Camera Session (M)			
24	Termination (M)			5:00 p.m.

Becky Dinwoodie, Secretary

D – Discussion M – Motion P – Presentation U – Update * Documents attached

Financial Update Report to Audit and Finance Committee For the year ended March 31, 2019

June 10, 2019

Ontario Tech University

2018 - 19 Operating Analysis (in '000 s) For the year ended March 31, 2019

						Ар	ril 1	., 2018 - Mar	ch 31	201	9			
		al Annual Budget	_	d Quarter Forecast		Actuals		v. (Unfav.) A vs. Budget \$			Fav. (Unfa Forecast vs. Bu / %	•	Fav. (Unfav.) A	
Revenue														
Grants		80,486		82,245		82,375		1,889	2%		1,759	2%	130	0%
Tuition		83,993		82,495		82,247		(1,746)	-2%		(1,498)	-2%	(248)	0%
Student Ancillary Other		12,163		12,981		12,541		378	3% 1%		818 463	7%	(440)	-3%
	<u> </u>	17,613	ć	18,076	ŕ	17,713	ŕ	100	0%			3%	(363)	-2%
Total Revenue	\$	194,254	\$	195,796	۶	194,876	\$	621	0%	1	\$ 1,542	1%	(920)	0%
Expenditures														
Academic Academic		76,295		74,685		74,203		2,093	3%		1,610	2%	483	1%
Academic Support		36,967		37,833		37,751		2,093 (785)	-2%		(867)	-2%	82	0%
Administrative		32,914		28,852		28,578		4,336	13%		4,063	12%	274	1%
Sub-total	\$	146,176	ċ	141,370	ċ	140,532	ċ	5,644	4%	_	\$ 4,806	3%		1%
Sub-total	Þ	140,170	Þ	141,370	Þ	140,552	Ģ	3,044	470	1	\$ 4,800	3%	\$ 656	170
Purchased Services		13,686		13,032		12,787		898	7%		654	5%	244	2%
Total Ancillary/Commercial		10,292		9,941		9,740		552	5%		351	3%	201	2%
Debenture Interest Expense		10,541		10,541		10,541		-	0%		-	0%	(0)	0%
Total Expenses	\$	180,695	\$	174,884	\$	173,600	\$	7,095	4%		\$ 5,811	3%	\$ 1,283	1%
Operating Contribution	\$	13,559	\$	20,912	\$	21,275	\$	7,716	57%		\$ 7,353	54%	\$ 363	2%
Expenses disclosed on the Balance Sheet														
Capital Expenses funded from Operations		7,028		9,685		9,623		(2,595)	-37%		(2,657)	-38%	62	1%
Principal Repayments - debenture/leases		6,531		6,531		6,531		(0)	0%		0	0%	(0)	0%
Net Surplus		0		4,696		5,121		5,121	N/A		4,696	N/A	425	9%
Other Disclosure: New Building														
Funded by: PY reserves		0		945		1,688		(1,688)	N/A		(945)	N/A	(743)	-79%

Reconciliation to Y/E audited FS:

Operating Contribution	\$ 21,275
Items not budgeted:	
Externally funded research donations and revenues	11,104
Externally funded research expenses	(9,225)
Non-cash transactions:	
Amortization of capital assets	(23,676)
Amortization of deferred capital contributions	9,238
Unrealized gain on investments	585
Capital grants accounted as deferred capital contributions on the Balance Sheet	(2,435)
Excess revenues over expenses - as per audited financial statements	\$ 6,867

2018 – 19 Year-End Operating Analysis

The year-end surplus, after capital expenses, debenture and lease payments, is \$5.1m against a \$4.7m year-end forecast surplus reported at the end of the 3rd Quarter for a net upside of \$0.4m

The operating budget does not include the start-up costs of the new A5 building and this is disclosed separately.

2018 – 19 Enrolment Update

FTE's	Annual Budget	3rd Quarter Forecast *	Actual **	Actual vs. Budget	Forecast vs. Budget	Actual vs. Forecast
Undergraduate						
Domestic	7,834	7,933	7,920	86	99	(13)
International	468	408	407	(61)	(60)	(1)
Graduate						
Domestic	379	430	430	51	51	0
International	172	148	148	(24)	(24)	0
Total FTE's	8,853	8,919	8,905	52	66	(14)

^{* 3&}lt;sup>rd</sup> Quarter Forecast is based on preliminary Feb 1, 2019 enrolment projection

Actual enrolment shows a positive net variance of 52 FTE against an original budget of 8,853 FTE. Current eligible undergraduate and graduate enrolment projection is within the \pm / - 3% of Ontario Tech University's corridor midpoint.

<u>Domestic</u> undergraduate and graduate increased 137 FTE resulting in additional tuition of \$0.6m. All faculties experienced growth above budget, except for the Faculty of Health Science (-48 FTE).

<u>International</u> undergraduate and graduate decreased 85 FTE with associated tuition decrease of \$2.0m mostly attributable to the Saudi impact. The overall result is a net \$1.4m decrease in actual tuition revenue. across all faculties, except for Faculty of Social Science and Humanities which is favourable to budget (7 FTE)

^{** 2018 – 19} Actual is based on Final Feb 1, 2019 official enrolment count to MTCU

2018 – 19 Year-End Operating Analysis (continued)

Core operating grant remains flat as under the new funding formula implemented by the Ministry in 2017 - 18, the funding for domestic students for the current year remains as at the 2016 - 17 level.

Revenues

<u>Grants</u> are favourable \$1.9m to budget and include \$1.1m of unbudgeted grant for the Greenhouse Gas Campus Retrofit Program (see offsetting Capital Expenses under **Expenses** section below), \$0.5m higher than budgeted Career Ready Fund grant, and other immaterial variances.

<u>Tuition fees</u> for the year are unfavourable \$1.7m against an original budget of \$84.0m due to the shortfall in international graduate and ungraduate students.

Student Ancillary fees are \$0.4m favourable to budget and includes:

- (i) \$0.8m favourable variance as reported in the Q3 forecast, pertaining to the accounting recognition of prior year deferred revenues to fund for the renovations of the soccer field. This is offset by,
- (ii) \$0.4m unfavourable actual variance to forecast due to lower than planned Technology Enriched Learning Environment (TELE) expenses leading to lower recognition of prior year revenues in the current year.

Expenses

Academic units are showing a positive variance of \$2.0m against budget, and includes:

- (i) \$1.6m favourable variance as reported in the Q3 forecast. This includes \$3.9m of full-time labour savings from open positions across all faculties, offset by \$1.4m increase in definite term contracts to backfill the full-time open positions, and \$0.9 m increase in operating expenses, funded by faculty carry forward funds. The increase in operating expenses includes start-up and professional funds and relocation costs for new faculty hires and investment in new instructional software.
- (ii) In addition, there is an additional \$0.4m positive actual variance to forecast due to lower than anticipated operating expense for 2 faculties.

2018 – 19 Year-End Operating Analysis (continued)

<u>Academic Support</u> units are unfavorable to budget \$0.8m, and includes an additional \$0.6m of higher than expected entrance scholarships and student access guarantee ("SAG") funding as mandated by the Ministry and other variances none exceeding \$0.5m.

Administrative units are showing a favourable variance of \$4.3m and includes \$3.5m release of planned operational and building reserves, \$0.8m electricity rebate for the prior year resulting from the introduction of The Fair Hydro Act 2017 on June 1, 2017, and \$0.5m labour savings to reflect open IT positions and the impact of Bill 148 repeal. These favourable variances are offset by \$0.7m additional investment in university branding initiatives, \$0.6m higher than anticipated legal fees and other immaterial variances.

<u>Purchased Services</u> is favourable \$0.9m primarily due to lower utilities rates in the current year associated with The Fair Hydro Act 2017.

Capital Expenses funded from Operations are unfavourable \$2.6m to budget, and includes \$1.1m of campus projects to reduce the University's greenhouse gas emission, fully funded by the Campus Retrofit Grant (see Grants under **Revenue** section above), \$0.8m investment in artificial turf for the soccer field (see Student Ancillary fees under **Revenue** section above) and other projects none exceeding \$0.5m.

Other disclosure: New Building

The start-up construction costs incurred for the project in 2018 - 19 are \$1.7m, all of which is funded through prior year internally restricted capital reserves.

ONTARIO TECH UNIVERSITY

Financial Update – Cash Flow Summary For the year ended March 31, 2019

CASH FLOW

The University administration uses a cash management forecasting model to manage its operating cash balances and operating short-term investment portfolios.

University cash balances are cyclical in nature with higher operating balances in September – November and January - March due to tuition fee collection from the fall and winter semester registration, and lower balances in December and during the early summer months.

The University has:

- A revolving operating LOC of up to \$17.0m, bearing interest at prime plus 0.25% with a Canadian chartered bank.
- A revolving operating LOC up to \$5.0m, bearing interest at prime plus 0.25% with IBM.

Cash Flow Update

- The University has not utilized its available line of credit at the end of the fiscal year.
- Short-term investments amounting to \$24.9m, are currently invested in 30-day cashable annual GIC's at BMO Nesbitt Burns.
- Operating cash balance, including short-term investments of \$24.9m, is \$49.7m at the end of the fiscal year.
- Externally and internally restricted cash balances (including Research, Advancement, Campus Childcare, Regent Theatre, and ACE) is \$12.2m at the end of the fiscal year.

ONTARIO TECH UNIVERSITY Cash Flow Summary for the year ended March 31, 2019

			Actual			Actual		Total Actual
		Apr - Jun 2018	Jul - Sep 2018	Oct - Dec 2018	Jan 2019	Feb 2019	Mar 2019	FY 2018-19
		\$ 000 s	\$ 000 s	\$ 000 s	\$ 000 s	\$ 000 s	\$ 000 s	\$ 000 s
Operating Beginning Cash Balance	A	24,570	4,617	28,803	11,385	33,404	28,937	24,570
Total Operating Inflows	В	38,467	67,781	33,283	38,452	9,114	11,780	198,877
Total Operating Outflows	С	(50,420)	(44,774)	(50,409)	(16,342)		(15,906)	
Net Operating Cash Flows	D=B+C	(11,953)	23,007	(17,126)	22,110	(4,306)	(4,126)	7,606
Total Operating Cash Available	E=A+D	12,617	27,624	11,677	33,495	29,098	24,811	32,176
New Building Outflows	F	0	0	(292)	(91)	(161)	(35)	(579)
Transfer (to) / from Short-term investments	G	(8,000)	1,179		, ,	, ,	` '	(6,821)
Operating Ending Cash Balance after New Building and transfer to STI	H=E+F+G	4,617	28,803	11,385	33,404	28,937	24,776	24,776
Total Internally and Externally Restricted Cash	1	11,831	10,828	12,041	12,273	12,361	12,212	12,212
Total Consolidated Cash Position	J=H+I	16,448	39,631	23,426	45,677	41,298	36,988	36,988

Total Cash Forecast as at MAR 31, 2019

Total Operating Cash after new building	24,776
Add: Short-term investments in GIC's	 24,924
Total Operating Cash and ST investments	\$ 49,700
Total Restricted Cash	\$ 12,212



COMMITTEE/BOARD REPORT

SESSION:		ACTION REQUESTED:						
Public Non-Public	x	Decision Discussion/Direction Information	 X					
TO: Audit and F	inance Committee							
DATE: June	10, 2019							
PRESENTED BY:	Pamela Onsiong							
	ccounting Standard Section 443 on-for-Profit Organizations	33 – Tangible Capital Asse	ets Held					

COMMITTEE/BOARD MANDATE:

The Committee has oversight over the financial affairs of the university, which includes receiving updates on new accounting standards and their impact on the University's financial reporting.

BACKGROUND/CONTEXT & RATIONALE:

In March 2018, the Accounting Standards Board (AcSB) issued changes in Part III (Accounting Standards for Not-for -Profit Organizations) of the CPA (Certified Professional Accountants) Canada Handbook.

This report focuses on the key changes of the new Section 4433 "Tangible Capital Assets Held by Non-for-Profit Organizations" (the "new standard") which replaces the existing Section 4431 of the Handbook, and its impact on the recognition, valuation and amortization of the University's capital assets.

The new standard is effective for annual periods beginning on or after January 1, 2019. Accordingly, the University will be required to apply the new standard for the first time in its annual financial statements for the year ending March 31, 2020 and hence apply for transactions starting April 1, 2019.

Although earlier application is permitted, the University will adopt the standard on a prospective basis.

The key changes of Section 4433 includes:

- 1) Componentization of a capital asset
- 2) Partial impairment of a capital asset

Componentization and impact on amortization:

Under the old section, componentization was not required.

The new standard now requires that the cost of a tangible capital asset made up of significant separable component parts, be allocated to the component parts when practicable and when estimates can be made of the lives of the separate components. Each component is then amortized separately on a straight-line basis over the estimated useful life of that component.

In reviewing the impact of the new standard on the University's capital asset classes and the amortization policy, and since we are applying the standard prospectively, componentization would be applied only to the University's new building construction (e.g. the new General Academic and Student Building).

The table below shows the components of a building with the current and revised useful lives (in years) that would be applicable under the new standard. This has been reviewed and agreed with the Office of Infrastructure and Sustainability (OCIS) who has oversight on all construction and maintenance projects at the University.

The result of componentization is an acceleration of amortization expense for those components whose useful lives have now been recognized to be less than the useful life of the building exterior.

Grouping	Building Information Modeling (BIM) for Building Products	Current useful life (in years)	Revised useful life (in years)
Building Shell	General Requirement	40	40
	Existing Conditions/Site preparation	40	40
	Concrete	40	40
	Masonry (bricks, building stone)	40	40
	Metals	40	40
	Openings (Windows and Exterior Doors)	40	40
	Wood, Plastics, and Composites	40	40
Roofing	Thermal and Moisture Protection (Roofing)	40	25
Interior Construction	Finishes	40	15
	Specialties	40	15
	Special Construction	40	15
	Communications	40	15
	Electronic Safety and Security	40	15
Fixed Equipments	Equipment	40	10
	Furnishings	40	10
Building Services Systems	Conveying Equipment (Elevators)	40	25
	Fire Suppression	40	25
	Plumbing	40	25
	Heating, Ventilating, and Air-Conditioning (HVAC)	40	25
	Integrated Automation	40	25
	Electrical	40	25
Site Work and Utilities	Earthwork	40	40
	Exterior Improvements	40	40
	Utilities/Site Services	40	40
	Transportation	40	40
	Material Processing and Handling Equipment	40	40
	Electrical Power Generation	40	40

Partial impairment

Under the new standard, and in addition to full impairment, the University will now need to consider <u>partial impairment</u> on tangible capital assets.

When conditions indicate that a tangible capital asset is impaired, the net carrying amount of the asset is written down to the asset's <u>fair value</u> or <u>replacement cost</u>. The University may choose <u>fair value</u> or <u>replacement cost</u> on an asset-by-asset basis. The write-downs of tangible capital assets are accounted for as expenses in the statement of operations.

Some examples of partial impairment as per section 4433 Part III of the CPA Canada Handbook include:

- A significant decrease in, or cessation of, the need for the services provided by the asset;
- A significant adverse change in the physical condition of the asset;
- A likely expectation of the sale or disposition of the asset before the end of its useful life.

Finance will liaise with budget holders to review proposals for partial impairment of capital tangible assets as part of the year-end reporting process.

Disclosure for partial impairment

The new standards do require additional information in the notes to the financial statements. In the period in which an impairment is recognized for a tangible asset, the University is required to disclose:

- Whether the impairment recognized is based on the asset's fair value or replacement cost
- A description of the impaired asset
- A description of the facts and circumstances leading to impairment; and
- If not separately presented on the face of the Statement of Operations, the amount of the impairment loss and the caption in the Statement of Operations that includes that loss.

RESOURCES REQUIRED:

N/A

New Building Project



Monthly Project Update 30 May 2019

New Building Update

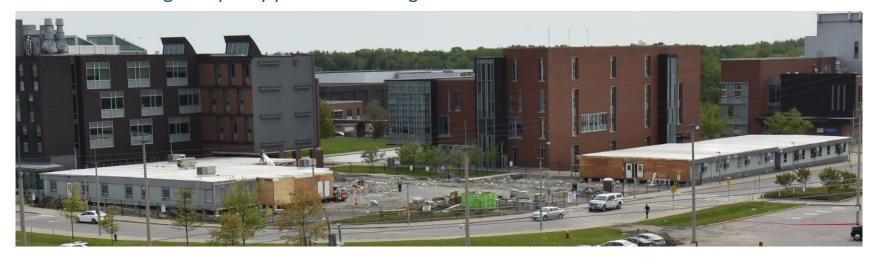
This Period Achievements

- Construction drawings and documentations at 70% progress
- Site Plan Approval comments issued by City Planning and under review
- Building Permit application under review with the City planning
- Tower Crane permit application under review with NAV Canada
- Design Assist Tenders (electrical, mechanical, curtain wall, forming and precast) awarded
- Procurement for elevators, concrete supply, roof anchors and site servicing bids received and under evaluation
- RFQs for other sub-trades and specialist suppliers issued
- Audio-Visual Bill of Material established and detailed design progressing
- Furniture value engineering exercise on going

Sub-projects Update

Portable Relocation

- Site servicing remaining works walkway and green space repair completed
- U5 & U6 portable decommissioning completed
- U6 portable and 11 modules of U5 were moved to staging area at F2 parking lot
- Footing works at F2 new location under construction
- Demolition and relocation permit issued from the City
- Portable relocation is track to substantial completion on 2 August
- Building occupancy planed from August 5 14 2019



F5 Parking Lot Extension

- Construction scope awarded to Boyle Excavating Ltd.
- PO and contract being processed

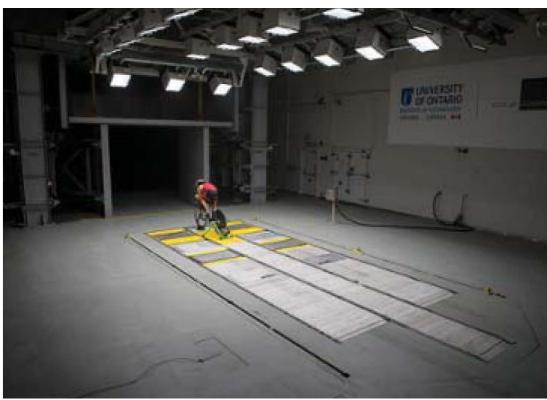
A&F Roll up Financial Summary as of 30 May 2019

PROJECT FINANCIAL SUMMARY	REPORT FOR MO	NTH ENDING	May 2019			
Sources of Funds - Cash fl	ow					
Description	Total Funding	Commited Todate	Actual YTD May 2019	May 2019	Estimate at	See
					Completion	Notes
UOIT					\$ -	
SIF					\$ -	
Advancement					\$ -	
Totals	\$ -	\$ -	\$ -	\$ -	\$ -	
Uses of Funds - Cash flow						
Description	Total Budget	Commited Todate	Actual YTD May 2019	1 May 2019 Fating		
					Completion.	
GMP Contract	\$39,996,403	\$39,996,403	\$ 868,735	\$ -	\$ 39,996,403	
FF&E	\$ 3,246,505	\$ -	\$ -	\$ -	\$ 3,246,505	
Soft Cost	\$ 1,940,732	\$ 1,400,327	\$ 626,960	\$ 17,355	\$ 1,940,732	
Portable Relocation	\$ 1,738,512	\$ 1,521,054	\$ 229,297	\$ 3,692	\$ 1,738,512	
New Parking (50% sharing)	\$ 327,848	\$327,848.16	\$ 31,783	\$ -	\$ 327,848	1
Contingencies	\$ 750,000		\$ -	\$ -	\$ 750,000	
	\$ -		\$ -			
Totals	\$48,000,000	\$43,245,632	\$ 1,756,776	\$ 21,047	\$ 48,000,000	
Notes:						
1. Construction cost for the						

ACE Enhancement Project

May 2019 Monthly Report

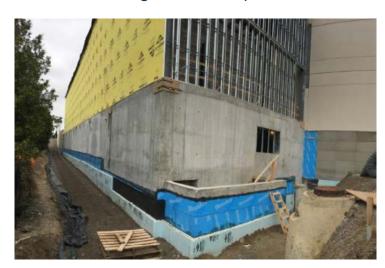




Progress Update (30 May 2019):

ACE Building Modification

- Basement & 1st slab concreted
- Basement Waterproofing and perimeter backfilling on going
- 1st level Steel Structure completed
- Siding studs and exterior sheathing installation on going
- Door Frames install ongoing
- Electrical, mechanical and plumbing installation on going
- Masonry wall on going
- Roofing works completed













Project is tracking to planned completion:

- Building Extension 31 July 2019
- Equipment Integration 30 September 2020

A&F Roll up Financial Report as of 30 May 2019

ACE ENHANCEMENT PROJECT	MA	Y 201 9						
Sources of Funds - Cash Flow								
Description	Т	otal Funding		ctual YTD /lay 2019	N	/lay 2019	Estimate at Completion	See Notes
FEDDEV	Ś	9,465,000	\$ 2	1,804,458	\$:	3,535,566	\$ 9,465,000	
PROVINCIAL	\$	1,500,000		L,350,000	· · · ·	3,000,000	\$ 1,500,000	
MAGNA	\$	1,000,000	\$		•••••		\$ 1,000,000	***************************************
THE GREENBRIAR FOUNDATION	\$	_	\$	25,000			\$ 25,000	1
UOIT	\$	500,000	\$	_			\$ 500,000	
Totals	\$	12,465,000	\$ 6	5,179,458	\$ 3	3,535,566	\$ 12,490,000	1
Uses of Funds - Cash Flow								
Description	7	Total Budget		ctual YTD Nay 2019	N	/lay 2019	Estimate at Completion	See Notes
							 Completion	Notes
Moving Ground Plane Integration into CWT	\$	3,350,000	\$	45,779	\$	35,506	\$ 3,350,000	
Aerodynamic Enhancements Required for MGP	\$	2,540,000	\$	178,094	\$	145,907	\$ 2,540,000	
Acoustics	\$	845,000	\$	50,162	\$	50,162	\$ 845,000	
Precision Measurement Capability	\$	1,850,000	\$	49,680	\$	44,595	\$ 1,850,000	
Chamber Modifications	\$	630,000	\$	74,644	\$	3,762	\$ 630,000	
Base Building Modifications	\$	3,645,000	\$:	1,514,515	\$	689,298	\$ 3,557,567	2
CO#1 Unforeseen Site Condition	\$	_	\$	44,769	\$	10,769	\$ 44,769	2
CO#2 Exhaust Louver	\$	_	\$	_	\$	_	\$ 1,536	3
CO#3 M&E System Issue	\$	-	\$	_	\$	_	\$ 3,937	2
CO#4 Ground water seepage	\$	-	\$	-	\$	-	\$ 35,203	2
CO#5 Modify existing door/electrical	\$	-	\$	_	\$	-	\$ 3,525	
Engineering and Project Management	\$	2,000,000	\$	550,763	\$	(10,561)	\$ 2,000,000	
CO#1 BBA Credit for Exhaust Louver			\$	(1,551)	\$	(1,551)	\$ (1,551)	3
							\$ -	
Totals	\$	14,860,000	\$ 2	2,506,855	\$	967,888	\$ 14,859,984	4
Notes:	-							
1. Unalloted Donations received from Donors								
2. Change Orders cost taken from within the Buil	ding	modification	bud	dget				
3. Cost offset for scope addition which was not cl	eari	n specs						
4. Cost variance (\$16) due to notes 3								

CRWC – Varsity Change Room Expansion

Project Update Presentation – May 2019







Progress Update (as of May 31 2019):

Varsity Change Room

- Detailed Design is complete
- Permit is under review with all comments already addressed. Anticipated receipt of permit June 4th 2019

Forecast Schedule (Next Step)

- Construction began May 14 2019
- Mobilization/Site set up completed
- Excavation began May 20 2019
- Plumbers have gone on strike which will affect the foundations works schedule (Impact to be evaluated over the next two weeks)
- Substantial Completion of the project Sept 7 2019

A&F Roll up Financial Report as of May 312019

CRWC VARSITY CHANGE R	OOM EXPAN	ISION				
PROJECT FINANCIAL SUMMA	ARY REPORT	FOR MONTH END	May 2019			
Sources of Funds - Cash flo	w					
Description		Total Funding	Actual YTD May 2019	May 2019	Estimate at Completion	See Notes
CRWC Reserve Fund		\$ 1,900,000	\$ 93,764	\$ 65,459	\$ 1,900,000	
					\$ -	
Totals		\$ 1,900,000	\$ 93,764	\$ 65,459	\$ 1,900,000	
Uses of Funds - Cash flow						
Description	Vendor	Reallocated Total	Actual YTD May 2019	May 2019	Estimate at	
					Completion	
Construction		\$1,645,000	\$0	\$0	\$1,845,351	
Design		\$140,000	\$85,764	\$65,459	\$137,535	
Permits		\$35,000	\$8,000	\$0	\$8,000	
Site Services		\$0	\$0	\$0	\$0	
FFE		\$100,000	\$0	\$0	\$100,000	
Contingencies		\$0	\$0	\$0	\$70,000	
		\$0			\$0	
Totals		\$1,970,000	\$93,764	\$65,459	\$2,160,887	



ANNUAL UNIVERSITY RISK MANAGEMENT REPORT

June 26, 2019

Prepared by:
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Jackie Dupuis, Director of Risk Management
Reviewed by the Risk Management Committee

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PART I - INTRODUCTION

The university Board asked the President to develop and implement a University Risk Management (URM) program at Ontario Tech. The President has assigned this responsibility to the University Secretary and General Counsel (USGC). Pursuant to the University *Risk Management Policy* ("RM Policy", Appendix A), the USGC is designated as the Chief Risk Officer.

The long-term goal for risk management is that Ontario Tech develop a culture of Risk Ownership. The RM Policy states:

The university is committed to fostering a culture of risk-ownership throughout the University. This does not mean that we avoid engaging in activities that have risks or that we avoid risk in our teaching and research and other activities we undertake for the University. It is recognized that both strategic and operational decisions and the work undertaken by faculty, staff and employees, all inherently involve risk.

To Ontario Tech, having a culture of Risk Ownership means that:

- i) Strategic and operational decisions are made with full awareness of the risks relevant to those decisions;
- ii) All members of the University community are aware of the organization's emphasis on URM and incorporate a proactive approach and awareness to managing risk in their individual roles¹.

As of June, 2019, Ontario Tech has engaged in a number of activities designed to continue to lay the foundation for the development of a culture of Risk Ownership.

¹ ONTARIO TECH Risk Management Policy, section 7, "Statements of Principle".

PART II – PROCESS AND STATUS UPDATE

1. HISTORICAL OVERVIEW

Ontario Tech is in its fourth year of developing and implementing a risk management program. The table below summarizes the key milestones achieved.

DATE	MILESTONES ACHIEVED
JUNE 2014	Board of Governors approved ONTARIO TECH's first Risk
	Management Policy after extensive consultation and discussion
JUNE 2015	Clarified risk roles and responsibilities
	 Consultation process with University academic and
	administrative leaders
	 Established Terms of Reference for Risk Management
	Committee
	Developed Risk Tools
	Approved a Risk Management Work Plan
JUNE 2016	 University-wide consultation process (>100 employees) to
	develop a grass roots and top down preliminary view of
	University risks
	 Twenty-four (24) first draft Risk Registers prepared
	Developed five risk categories and identified twenty-one risk
	drivers
	First Annual Risk Management Report presented to the Board
JUNE 2017	Developed a set of draft Risk Registers for the University
	 Analyzed, synthesized and organized all risks resulting in a lower number of risks
	 Clarified the process for Risk Owners and developed a reporting structure
	Integrated URM into strategic and planning processes
	Second Annual Risk Management Report presented to the Board
JUNE 2018	Developed a Risk Register process document
	Facilitated risk management training sessions to new Risk
	Owners and members of the university
	Finalized twenty (20) Risk Registers
	Developed a draft set of strategic risks
	 Finalized risk management metrics and presented first set of
	tracked metrics for risk management
	Defined a clear High and Extreme risk process and a list of High
	and Extreme Risks
	Third Annual Risk Management Report presented to Board
JUNE 2019	Developed a Repeatable Annual Risk Register process for Risk
	Owners

- Developed a Strategic Risks Risk Register Tool
- Developed a Risk Owner Reporting Tool for established High, Extreme, Foundational and Strategic Risks
- Assigned Risk Owners to the University High, Extreme, Foundational and Strategic Risks
- Completed eighteen (18) interim operational Risk Register reviews
- Finalized twenty-four (24) annual operational Risk Registers
- Finalized the Strategic Risk Register and presented first set of mitigation and treatment plans
- Finalized the University Continuity Policy (UCP) and developed a UCP Work Plan
- Updated and finalized the Risk Management Policy
- Drafted a University-Hosted Event Risk Management and Approval Directive
- Drafted a University Field Trip Risk Management and Approval Directive
- Drafted an Air Vehicles Directive
- Enhanced the Risk Management and Insurance website
- Facilitated risk management training sessions to new Risk
 Owners and members of the university
- Finalized an Insurance Work Plan
- Tracked risk management and insurance metrics and presented second set of metrics for risk management
- Fourth Annual Risk Management Report presented to Board

2. HOW DOES THE BOARD MEASURE URM PROGRESS?

As established in the university's first Annual Risk Report dated June, 2016, and as approved by the Board, Ontario Tech committed to providing this report annually to assist the Board in assessing the progress of the University Risk Management process. To that end, the Board adopted the following six measures of progress as recommended by The Association of Governing Boards, in partnership with United Educators²:

Measure 1: Each year the university should be able to demonstrate to the Board how the university has sustained URM as a priority.

Measure 2: Each year the Board should check on the leadership of URM and verify that URM is an important objective for that leader.

² From "A Wake-up Call: Enterprise Risk Management at Colleges and Universities Today", A Survey by the Association of Governing Boards of Universities and Colleges and United Educators, 2014, pp. 3 to 10 (Much of the language above is directly quoted from this document).

Measure 3: Each year the Board should engage in a discussion of the top strategic and operational risks facing the University and should understand how they are managed and monitored.

Measure 4: The Audit & Finance Committee should include risk management discussions on its work plan. The Board should devote time at one meeting annually to discuss the major risks facing the institution.

Measure 5: The University should continue to engage in ongoing orientation and Board training sessions including information about risks to the institution.

Measure 6: Each year the Board should be asked to comment on and assess the URM and the success (or not) of the stated URM goals and objectives. Generally, the Board should be satisfied that the URM is effectively identifying and enabling the management and mitigation of the major risks facing the university.

The remainder of this Report is intended to allow the Board to assess the university's 2018-19 progress in University Risk Management as against the adopted measures described above.

3. MEASURING 2018-2019 PROGRESS:

a. Measure 1 – How has the university sustained URM as a Priority?

The university has made good efforts to sustain URM in the current resource-constrained environment: Success in embedding URM into Ontario Tech's culture is evidenced by the integration of URM into strategic and planning processes. Integrated URM fosters the desired risk-informed culture across the University. Clearly defined structure, roles and accountability are critical to the success of the implementation.

In 2018-19, Ontario Tech has made progress against the goals assigned in 2018-2019.

i. Develop and Implement an Annual Repeatable Risk Register Process for Risk Owners

The Annual Repeatable Risk Register process for Risk Owners was drafted in consultation with the Risk Management Committee. The process was tested with Risk Owner feedback during the first proposed interim review which took place in October and November 2018. The Annual Repeatable Risk Register process has been established to support the Risk Owners in their mitigation strategies and engage additional oversight and communication where there is opportunity, facilitate those discussions, and brainstorm additional strategies or methods of mitigation and treatment. The Annual Repeatable Risk Register process supports the SLT High, Extreme, Risk Review Cycle process flow identified and established in 2017-18.

Nineteen (19) Risk Registers were reviewed as part of the first interim review under the newly established Annual Repeatable Risk Register Process for Risk Owners. The interim review generated additional discussions and communication across operations regarding risk.

A final draft of the Annual Repeatable Risk Register process is attached hereto as Appendix B and Appendix C collectively.

ii. Education and Training

Risk Management has made great progress in education and training. During the interim Risk Register review, all Risk Owners and SLT members were trained on the defined Annual Repeatable Risk Register Process, new to the Risk Register review for 2018-19. Risk Register training and education was facilitated by the risk management team to new Risk Owners and new leadership authorities of the University. In addition, those charged with supporting risk within their respective areas received additional training on risk identification and assessment on activities such as travel, on/off campus events, and placement injury process, and insurance.

Risk Management developed an International Travel Risks and Insurance presentation which shared common travel risks, possible insurance sources, pre-travel recommendations and risk assessment on countries abroad and University members' abilities while travelling. Education videos on risk have been made available to all members of the university in addition to information resources including a mobile app to support during travel. The presentation has been shared with faculty council and will continue as a method of education and training for international travel in the 2019-2020 academic year.

Great progress was made in enhancing the risk management portion of the Ontario Tech web page. A major focus of education and training continues to be around the development and enhancement of the risk management and insurance section. The objective of the website is to provide the University community with information and tools to support their engagement in URM. The website is populated with information about risk management and insurance, has links to tools and resources, and will continue to grow with additional resources and information.

There are two (2) projects currently underway to build efficiencies and streamline risk work and insurance requests by developing online reporting functionality.

This measurement will continue to be a priority focus in 2019-20. The site address is: https://usgc.uoit.ca/risk-management/index.php.

The Director of Risk Management supported the University in 2018-19 by providing risk assessment advice on 159 requests, attended 219 risk management specific meetings, and facilitated 30 risk management training sessions across the University.

iii. Support SLT and Board on Next Steps with Strategic Risks

There has been great progress with continuing to engage SLT in the discussion of Strategic Risks and Strategic Risk Management through the identification of Risk Owners, and mitigation activities, in order to finalize the Strategic Risk Plan.

The members of SLT met in November 2018, to propose the assignment of Risk Owners to the Strategic Risks finalized by SLT which were shared and discussed in detail with the Board of Governors during its Annual Retreat in May 2018. Each Risk Owner was charged with identifying mitigation strategies for each risk under their purview and reporting on the risk using the established Risk Owner Reporting Tool attached hereto as Appendix D. During the first quarter of 2019, members of SLT and delegated Risk Owners met with Risk Management with the objective of reporting on mitigation strategies and completing the Risk Owner Reporting Tool for each assigned risk.

In April 2019, each SLT member that was assigned risk ownership participated in an open discussion regarding the current and future mitigation strategies proposed for their assigned Strategic Risk. The Strategic Risk Register tool established for ongoing reporting is attached hereto as Appendix E. The updated tool reflecting these discussions is found as Confidential Attachment 1.

Strategic Risk work will continue as a priority in 2019-20.

iv. Develop Policies Identified as Foundational Risks

In 2017-18, there were two (2) Foundational Risks identified as facing the University. They were determined as **Compliance**, owned by the University Secretary and General Counsel, as well as **Financial Sustainability**, owned by Finance. SLT has determined these risks remain Foundational Risks in the 2018-19 academic year.

The University Secretary and General Counsel recently employed a Compliance and Copyright Officer who has been charged with developing a Work Plan for compliance and copyright risks challenging the University. The Work Plan will include mitigation strategies and treatment plans as well as the development of compliance and copyright related policies.

The development of policies for both the foundational risks will maintain as priority in 2019-20.

v. Annual Risk Management Report

This Annual University Risk Management Report dated June 26, 2019, fulfils this objective.

vi. Insurance Work Plan

An Insurance Work Plan was developed and imbedded into the risk plan to make up the Risk Management and Insurance Work Plan, which was approved by the Audit and Finance Committee in February 2019.

The Insurance Work Plan focused on the areas of:

 Reviewing the current University insurance landscape, identifying insurance gaps and opportunities for additional and/or reducing coverage;

The University property insurance policy carries a deductible for contents while in transit which is typically higher than the value of the university goods being shipped. This has resulted in the university procuring six (6) cargo policies for temporary transportation that occurred from the university to around the world.

The University's property policy carries a specified limit regarding new construction and renovations to already established university property. Due to the number of new construction projects taking place over the 2018-19 academic term, the University procured three (3) Builders All Risks policies and three (3) Wrap-Up Liability policies for these construction projects.

The student placement policy was reviewed with changes made to increase coverage to Ontario Tech students while participating in placement, experiential learning, research initiatives, and other such activities while on or off campus, anywhere in the world. The coverage also extends to include travel to and from the students placement location which is supplementary to their automotive insurance policy. This policy supports the students by providing enhanced coverage and increasing the availability of coverage to travel risks.

Developing procedures surrounding the use of University vehicles;

The development of the Use of University Vehicles Policy is currently underway. In the absence of an approved policy, the risk management website has been enhanced to support drivers of University vehicles with tips and resources on how to report a claim and risk considerations prior to travelling.

 Developing education surrounding travel insurance policies and eligibility of insurance while abroad;

The risk management team has been involved in several international travel meetings with other University operations charged to manage travel by students, staff and faculty. These discussions were surrounding available insurance coverage, insurance limitations, and risks associated with insurance limitations while traveling abroad. Risk

Management developed an international travel presentation which has been shared at faculty council meetings to educate the university community on insurance and risk.

The risk management website relating to international travel has been enhanced to show pre-travel registration and risk assessment considerations.

Enhancing the insurance section of the risk management website;

The insurance section of the website has received several notable changes such as a dedicated page to student placement programs, examples of policies available through the university, and the process of reporting an insurance claim. A resource page has been developed to assist University members in understanding the different types of insurance forms and documents required when planning events on and off campus.

• Enhancing documentation, follow up, and storage of certificates of insurance on contract agreements and campus events;

The office of Risk Management has identified and developed a formalized process for tracking all certificates of insurance through an application already established at the University called Legal Suite.

Additional insurance projects identified will be added to the Work Plan for action.

vii. Monitor and Record Risk Management Metrics

Metrics for risk and insurance were tracked over the 2018-19 academic year and are shared herein as Confidential Attachment 2.

Two additional metrics were added to the 2018-19 reported metrics to capture the frequency in which the risk management website received traffic or "hits" as well as questions received by the Office of Risk Management related to University risk management and insurance processes.

viii. Work with Academic Council on its Role with Risk Management

One of the priorities identified for 2018-2019 was to work with Academic Council regarding their role in risk. As part of the university's By-laws Implementation Plan, Academic Council has established a new Governance and Nominations Committee, which will be responsible for overseeing Academic Council's implementation of the new By-law No. 2. Given the importance of the development of Academic Council governance and the volume of work that will be required to implement the new By-law, the Academic risk work plan was deferred and will be considered as a priority in the 2019-20 academic year.

ix. Ontario Tech Operational Risk Register

Twenty-four (24) Risk Registers were finalized for 2018-19. The Provost register is currently on pause, pending the incoming Provost. Changes to risk ownership took place in some of the operational areas which led to opportunities of education and awareness on Risk Register related processes.

Two (2) new operational Risk Registers were introduced in 2018-19 for the University Ice Centre and Field House, and Learning and Innovation. In 2017-18 recent changes to risk ownership in the Office of Human Resources led to the deferral of the four (4) Risk Registers assigned to that area. In 2018-19 a thorough review of these registers was completed and three (3) were integrated into one (1) in order to simplify the process of reporting. The remaining register for Health and Safety in Research, was integrated with the Office of Research Risk Register. The International Travel Risk Register was integrated into the Student Life Risk Register due to structural changes to the operation. These changes in ownership assign the risk work to the appropriate Risk Owners at the University.

Continued Simplification and Synthesis: Since the risk team first cast a wide net to identify operational risks in 2015, work has been done to identify risk patterns, categories and overlaps. This has resulted in fewer listed risks. In continuation of the simplified exercise developed in 2016-17, the risks in 2018-19 are categorized as follows:

Risk Domain	Reported Risks 2015-16	Risks after Synthesis and Reorganization	2017-18 Synthesized Risks	2018-19 Synthesized Risks
Operational	165 draft risks	57 draft risks	39 Risks	41 Risks
Financial	36 draft risks	13 draft risks	7 Risks	7 Risks
Reputational	12 draft risks	3 draft risks	3 Risks	3 Risks
Compliance	40 draft risks	18 draft risks	10 Risks	12 Risks
Total:	253	91	59	63

Of the sixty-three (63) risks identified, fifty (53) of these risks were calculated as Medium, and ten (10) as High or Extreme. Low risks are considered local to the operation and, therefore, not included in the Annual Risk Management Report for 2018-19. It should be noted, eight (8) local risks were retired across the institution due to successful mitigation and preventative controls in place. A summary of the themes arising from the Medium Operational Risks identified by Risk Owners is attached as Appendix H.

Over the 2018-19 term, thirteen control (13) strategies and thirty (30) mitigation strategies were added to the registers in an effort to prevent, reduce, mitigate, or resolve risk at the University. The reported mitigation strategies and controls do not include those identified under new and emerging risks.

New and Emerging Risks: Collectively, there were twenty-one (21) new risks assigned to operational registers by Risk Owners across the University. Of these twenty-one (21), eleven

(11) are considered local to the operation, four (4) are new to a specific operational Risk Register however identified in other areas of the University and therefore not considered new institutional risks, and the remaining new risks for 2018-19 are listed as follows:

- Risks associated with PCI compliance;
- Risks associated with securing data and University equipment while travelling abroad;
- Risks associated with controlled goods;
- Risks associated with traveling between campus buildings and across intersections. This risk was identified by three (3) separate Risk Owners.

Each of these risks has been assigned a Risk Owner and mitigation strategies are currently underway.

The Risk Register for High, Extreme, and Foundational Risks: No Extreme Risks were identified. Of the seven (7) High risks identified in 2017-18, six (6) maintained their level of High risk in 2018-19. The risk associated with effective Partnership Management was reduced to a medium risk level as a result of the implementation of successful risk mitigation.

Three (3) additional High risks were identified and added to the High, Extreme, and Foundational Risk Register. Of these nine (9) risks, each risk level was calculated and determined to be equal at a risk factor of twelve (12). The nine (9) High risks were captured as follows:

Risk Owner: University Secretary and General Counsel

- Risks associated with information governance;
- Risks associated with an increasingly litigious environment;
- Risks associated with disruption causing impairment to the University's operation and Information Technology's (IT) infrastructure;
- Risks associated with failing to negotiate, manage, and implement contracts;
- Risks associated with failing to manage controlled goods.

Risk Owner: Human Resources

- Risks associated with a lack of training and support for front line staff addressing mental health issues.
- Risks associated with the failure to maintain effective labour relations;
- Risks associated with the failure to implement, monitor, and maintain infrastructure enabled to prevent or mitigate workplace accidents and injuries.

Risk Owner: All Faculties and ACE

- Risks associated with equipment failure, requiring replacement or repair.

Foundational Risks: In addition, the two (2) Foundational risks facing the University established in 2017-18 were maintained in 2018-19 as **Compliance**, owned by the University Secretary and General Counsel, as well as **Financial Sustainability**, owned by Finance.

x. Senior Leadership Team

The SLT is charged with setting the appropriate "tone at the top" to support risk management, and continue to oversee the implementation of risk management within their areas and ensure commitment to reporting risk activity.

The news here continues to be very positive. SLT engaged in discussions of risk assignment and mitigations strategies for the High, Extreme, Foundational, and Strategic risks charged against Ontario Tech.

The Provost (Interim) alongside the University Deans, carried out a meeting with the risk management team in an effort to share knowledge and identify institutional risks common across their operations to support the establishment of a Provostial Risk Register into the 2019-20 academic term. The assignment, mitigation, and treatment strategies of these assigned risks will be deferred until the appointment of the incoming University Provost which takes place later this year. The incoming Provost and risk management team have had positive discussions about supporting the URM within the academic leadership team which is crucial to the success of URM.

xi. Risk Management Committee

The Risk Management Committee (RMC) was struck to oversee the successful integration and execution of URM with direct reporting responsibility to the Board of Governors. Committee members are chosen based on their skill set and functional knowledge. In the 2018-19 academic year, the RMC was charged with conducting regular meetings to discuss risk and risk management with a focus on the integration of risk management best practices, and in this regard, they have fulfilled this objective.

In 2018-19, the Risk Management Committee has provided input on a series of risk management directives and policies such as the University-Hosted Event Directive, University Field Trip Directive, Air Vehicles Directive, the University Continuity Policy, and Risk Management Policy renewal.

The Risk Management Committee has finalized an effective Annual Repeatable Risk Register Review Process for Risk Owners.

The RMC is composed of the following individuals from across the University:

Cheryl Foy (Chair), Jacquelyn Dupuis (Risk Management), Paul Bignell (IT), Matthew Mackenzie (External Relations), Alison Burgess (Research), Alison Baulk (Finance), Stephen Thickett (Student Life), Tyler Frederick (FSSH), Connie Thurber (FHS), Lori May (F.Ed), Tanya Mayorga (OCIS), and Maureen Calhoun (Health and Safety).

In 2018-19, the RMC met five times.

b. Measure 2: Does URM have an Assigned Leader?

URM is assigned to the University Secretary and General Counsel, a vice president who reports to the President. Advancing URM was a primary objective in 2018-19 and will continue as a priority for the University Secretary and General Counsel.

c. Measure 3: Has the Board discussed the top strategic and operational risks facing the University?

At the AGM in May 2018, the Board spent a day and a half discussing strategic and foundational risks facing the University. Over this past year there has been excellent progress made in moving the strategic plan forward. The Board has received regular progress updates to the status of the plan.

d. Measure 4: URM is a part of A&F work plan and Board annual discussion

URM is part of the 2018-19 Audit and Finance Work Plan. There are regular discussions and reports presented on risk management and insurance as noted in the attached Confidential Attachment 3.

The Audit and Finance Committee received reports on risk on November 19, 2018 and February 20, April 17, and June 10, 2019. The Board has received reports and has been involved in risk management discussions on November 29, 2018, and February 28 and April 24, 2019.

e. Measure 5: Has Ontario Tech provided Board training sessions about University risk?

In addition to the general discussions about risk, Board professional development sessions typically focus on risk areas for the University. In the 2018-19 year, the Chief Risk Officer conducted an orientation specifically focused on risk management for the recently appointed Board members.

f. Measure 6: Board assessment of URM Activity

At the Annual General Meeting (AGM) each year, the Board receives an annual report and is asked to comment on the progress of URM. The purpose of this 2019 report is to secure the Board's comment and direction on URM progress in 2018-19.

PART III – GOING FORWARD

4. 2019 – 2020 GOALS AND OBJECTIVES

Advancement of the goal of embedding URM into a higher education culture is evidenced by the integration into strategic and planning processes. Integrated URM will foster the desired risk-informed culture across the University. Clearly defined structure defines accountability and is critical to the success of the implementation. In order to have clearly defined structure, there needs to be clearly defined responsibilities.

The focus in for 2019-20 objectives is in three areas:

- 1. Strategic and Foundational Risks:
 - a. The development of a process to map operational risks to strategic risks;
- 2. Risk Management Implementation:
 - a. Continue to support and train Risk Owners in the management and mitigation of risk;
 - b. Continue to support Risk Owners reporting on risk work; and
 - c. Design and implementing additional processes and tools to assist Risk Owners;
- 3. Insurance Implementation:
 - a. Support the University community by developing insurance related tools and applications;

Office of Risk Management

(Chief Risk Officer and Director of Risk Management)

Support SLT and the Board in developing a plan to assess the University's risk appetite

Continue with Education and Training through maintenance and enhancement of the Risk

Management Website; Continue to facilitate risk management training sessions related to

implementation of URM; Develop Frequently Asked Questions and procedural documents to

increase support, risk understanding and expectations

Continue to enhance and push the strategic risk plan forward

Continue to support SLT and Board with connecting the strategic risks to those identified within the operational risk register

Develop related policies identified as Foundational Risks to the University through the Risk Register review process

Prepare the 2019-20 Annual Risk Report to the Board and Audit and Finance Committee

Continue to monitor and record the Metrics of the University

Work with Academic Council to scope its potential role in risk management

Senior Leadership Team

Set the Tone at the Top – Continue to demonstrate support for the implementation of URM Continue to oversee the implementation of risk management within their areas and ensure commitment to reporting risk activity

Continue to engage in discussion of Strategic Risks and Strategic Risk Management through alignment of risks to risks identified at the operational level

Support the development and establishment of a University risk appetite

Continue to report to the Board on the Management of the Strategic and Operational Risk Plan

Risk Management Committee

Conduct regular meetings to discuss risk and risk management, and focus on the integration of risk management best practices

Research risk appetite processes and procedures currently available in the PSE against the operational areas of Ontario Tech

Establish risk education and awareness training, and identify areas within the committee members peer groups to attend these training sessions

5. CONCLUSION

Please refer to the letter of the Chief Risk Officer for the summary and highlights of this Report.

Appendix A. - Risk Management Policy



Classification	LCG 1116
Framework Category	Legal, Compliance and
	Governance
Approving Authority	Board of Governors
Policy Owner	University Secretary
Approval Date	June 18, 2014; Editorial amendment January 17, 2019
Review Date	January 2022
Supersedes	

RISK MANAGEMENT POLICY

PURPOSE

- 1. The purpose of this Policy is to establish the foundation for a University Risk Management ("URM") program which ensures that Risk management is an integral part of the University's core strategy and integrated into all key activities and/or functions. The URM program establishes a Risk management framework which will provide a proactive and consistent approach to ensuring that Risk is considered when decisions are made at all levels of the organization and, in turn, assists the University to operate within its capacity and willingness to take Risk. The URM program further establishes a commitment to raise awareness surrounding Risk management and provide guidance to all levels of the University.
- **2. Objectives:** The overall objectives of the Risk Management Policy are to:
 - **2.1.** Formalize a consistent approach to identifying, assessing, measuring, managing communicating and mitigating Risks to the University's strategic plan and priorities and to the University's operations in an effort to reduce uncertainty; and
 - **2.2.** Assist the University to make better informed decisions and promote accountability for Risk management with stakeholders and University Members at all levels.

DEFINITIONS

3. For the purposes of this Policy the following definitions apply:

"University Risk Management ("URM")" means a consistent, coordinated, integrated approach to identify, assess, measure, manage, communicate and mitigate significant and material Risks to the University achieving its strategic objectives

"Risk" means the uncertainty of outcomes against planned objectives. This concept can be applied to strategic objectives as well as all operational activities within the University. While the application of the definition may change with different University Members, the concept should not change.

"Risk Assessment" means a formalized, systematic ranking and prioritizing of identified Risks, using a likelihood/consequence framework.

"Risk Appetite" means the University's willingness to accept Risk. Risk Appetite may also be viewed as the acceptable deviation from expected outcomes.

"University Member" means any individual who is:

- Employed by the University;
- Registered as a student, in accordance with the academic regulations of the University;
- Holding an appointment with the University, including paid, unpaid and/or honorific appointments; and/or
- Otherwise subject to University policies by virtue of the requirements of a specific policy (e.g. Booking and Use of University Space) and/or the terms of an agreement or contract.

SCOPE AND AUTHORITY

- **4.** This Policy applies to all University Members and extends to all functions and activities.
- **5.** The University Secretary, or successor thereof, is the Policy Owner and is responsible for overseeing the implementation, administration and interpretation of this Policy.

POLICY

This Policy and the associated documents will describe the specific responsibilities for those groups and individuals expected to support the implementation and maintenance of the URM program. In addition, all University Members are expected to support the management of Risk and the success of the URM program at the University.

6. Risk Framework

- **6.1.** Effective Risk management across the institution will result in increased stability, safety and security and prosperity for University Members. This Policy and the associated documents create the Risk management framework developed specifically to fit the governance structure and culture of the University. The framework is aligned with the strategic priorities of the University and incorporates leading practices, tailored to the University's needs and culture.
- **6.2.** The framework is intended to support the University in identifying, assessing, measuring, managing, reporting and mitigating significant and material Risks. The ultimate goal of the framework is to assist the University in achieving its strategic priorities and operational objectives through better management and understanding of Risk.

6.3. The framework provides:

- Formalized process and approach to executing URM;
- Clearly defined accountabilities for execution of URM;
- Improved Risk management communication; and
- Consistency in Risk management.

7. Risk Governance Structure

- **7.1. Oversight:** The responsibility to oversee the University's URM program resides with the University's Board of Governors ("Board"). The Audit and Finance Committee is delegated to carry out this oversight responsibility on the part of the Board and to report annually to the Board on the status of the URM.
- **7.2. Direction:** The University's President and Vice-Chancellor is responsible to provide direction to ensure the University's strategic priorities remain the ultimate focus of all University Members.
- **7.3. Risk Parameters:** The Risk Appetite will be determined by the University's President and Vice-Chancellor along with the Senior Leadership Team ("SLT") and ultimately approved by the Board. The Risk Appetite will be reviewed no less than once annually.

7.4. Risk Owners:

a) Chief Risk Officer: The University's President will designate a member of SLT to serve as Chief Risk Officer. The Chief Risk Officer will, among the members of the SLT, have responsibility for the coordination of SLT's Risk management activities. The Chief Risk Officer will act as primary advisor on Risk to the Board and to the President and Vice-Chancellor. The Chief Risk Officer will serve as Chair of the University's Risk Management Committee ("RMC") and will have accountability for that Committee's work.

- b) Senior Leadership Team ("SLT"): SLT as a group is responsible for the management of all institutional and operational Risks, the overall success of URM, and the integration of the URM program into the core operational and strategic decision framework of the University. Individual members of the SLT will act as the primary owners of Risks and Risk management at the University. Each SLT member will delegate responsibility for Risk management to functional leaders within that SLT member's area of responsibility.
- c) Administrative Leadership Team (ALT): ALT will act in an advisory role in respect of various aspects of the URM program. ALT will work to ensure that the URM program is integrated into the planning work of the University.

8. Risk Management Committee ("RMC")

8.1. The Risk Management Committee will hold responsibility for the successful integration and execution of the URM framework. Operational implementation and maintenance of the URM program will be conducted with oversight and guidance from SLT. The Committee will also be responsible for facilitating the Risk identification and Risk Assessment process at the Senior Leadership Team and functional leadership levels, consolidating that information and finalizing the institutional Risk profile for the Board. This committee will be a skills-based

committee comprised of individuals who are best able to help the University fulfil its URM objectives.

9. Statements of Principle

The University adopts the following statements of principle for application in the implementation of this Policy:

9.1. Risk Culture: The University is committed to fostering a culture of Risk ownership throughout the University. This does not mean that we avoid engaging in activities that have Risk or that we avoid Risk in our teaching and research and other activities we undertake for the University. It is recognized that both strategic and operational decisions and the work undertaken by University Members, all inherently involve Risk.

To the University, having a culture of Risk ownership means that:

- a) Strategic and operational decisions are made with full awareness of the Risks relevant to those decisions;
- All University Members are aware of the organization's emphasis on URM incorporate a proactive approach and awareness to managing Risk in their individual roles.

- 9.2. Communication: A key principle of a successful URM program is regular communication. The Board and Senior Leadership Team are committed to developing a communication plan to ensure that those who require information to support the URM program receive it. The University's Risk Management Policy, goals and objectives will be made available to all University Members and it will be expected that each member reads and understands the Risk management philosophy and outlined framework.
- **9.3. No Reprisal:** The University will not discharge, discipline, demote, suspend, threaten or in any manner discriminate against any officer or employee based on any good faith and lawful actions of such employee to responsibly and carefully report Risk issues using the channels provided by the University.
- 9.4. The University is committed to academic freedom. MONITORING AND REVIEW
- 10. This Policy will be reviewed as necessary and at least every three years. The Risk Management Committee, or successor thereof, is responsible to monitor and review this Policy.

RELEVANT LEGISLATION

11. This section intentionally left blank.

RELATED POLICIES, PROCEDURES & DOCUMENTS

12. University-Hosted Event Risk Management and Approval Directive

Field Trip Risk Management and Approval Directive

Risk Management Committee Terms of Reference

Appendix B. – Annual Repeatable Risk Register Process for Risk Owners - Narrative

Risk Register – Risk Owner and Risk Management Annual Repeatable Review Process

Individual Departmental/Faculty
Risk Register
Annual Repeatable Process for Risk Owners

This document is to assist Risk Owners of the University understand the annual repeatable risk process for the Risk Registers.

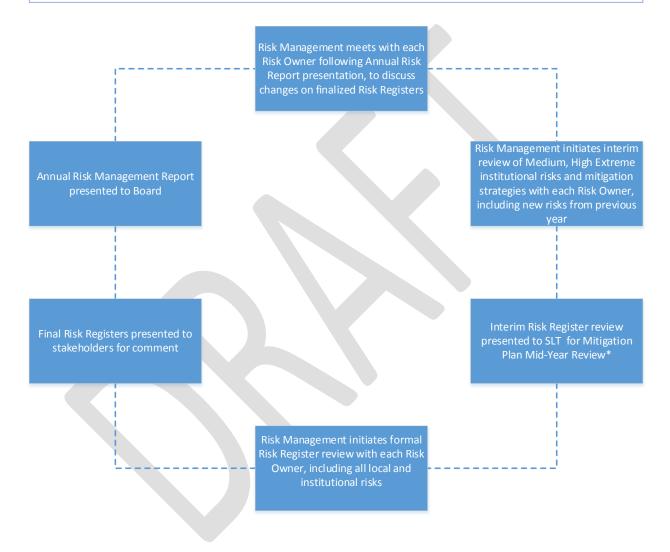
- Risk Management connects with each Risk Owner immediately following the Annual Board report. The purpose of this
 discussion is to:
 - I. Share the finalized Risk Registers and outline any changes to risk;
 - II. Encourage ongoing conversations between the local Risk Owner and institutional oversight Risk Owner(s);
 - III. Encourage ongoing review of local risks;
 - IV. Set expectations for the upcoming interim review.
- 2. Risk Management initiates with each Risk Owner an interim review of the medium / high / extreme institutional risks, to capture any changes and/or additions in the risk landscape. The purpose of the interim review is to:
 - I. Support Risk Owner's in their mitigation strategies and engage additional oversight and/or communication where there is opportunity;
 - II. Brainstorm additional strategies or methods of control/and/or mitigation;
 - III. Update changes to the Risk Register, which may include new risks identified without action from the previous year;
 - IV. Local risks are not included in the interim review unless the calculated risk level(s) is increased.
- 3. Details of the Interim Risk Register review are shared with the Senior Leadership team for their comments, and completion of the Mid-Year Review on High / Extreme Risks*.
 - Each Risk Owner will receive an updated version of their operational Risk Register for the upcoming Annual Risk Register review.
- **4.** Risk Management initiates the Annual Risk Register review with each Risk Owner. The purpose of the Annual Risk Register review is to:
 - I. Update all risks associated with each Risk Owner's functional area, in preparation for the Annual Risk Report;
 - II. Support Risk Owners in their mitigation strategies and engage additional oversight and/or communication where there is opportunity;
 - Drafted Risk Registers for current term follow outlined process of approval after Risk Management/Risk Owner review.
- **5.** Final Risk Registers presented to key stakeholders for comment.
- **6.** Annual Risk Management Report presented to Board.

Appendix C. – Annual Repeatable Risk Register Process for Risk Owners - Narrative – Process Flow

Risk Register – Risk Owner and Risk Management Annual Repeatable Review Process

Individual Departmental/Faculty Risk Register Annual Repeatable Process for Risk Owners

This document is to assist Risk Owners of the University understand the annual repeatable risk process for the Risk Registers.



Appendix D. – Assignment and Mitigation Tool for High, Extreme, Foundational and Strategic Risk Reporting



Date:

	Identified Risk:		Reference No.:
	Risk Owner:		
Risk Level: High ☐ Extreme ☐	Foundational ☐ Strategic	☐ Risk Register Cald	culated Risk Level:
Risk Description:			
Drivers:			
Potential Impacts:			
Current Risk Mitigation Plan:			
Strategic Pillars and Priorities	Impacted		
Priorities:			
Pillars:			
Future Risk Mitigation Strateg	ies:		
Signature of Risk Owner			

Appendix E. – Strategic Risk Register Tool – Final

			STRATEGIC	STRATEGIC RISK REGISTER 2018-2019	R 2018-2019				
	Strategic Pillars:	CHALLENGE: We v	Strategic Pillars: CHALLENGE: We will produce and inspire future leaders who have real-world skillsets.	Strategic Priorities:	Sticky Campus	Reimagined Partnerships			
		INNOVATE: We will	INVOVATE: We will create new approaches, partnerships, and solutions to improve society. CONNECT: We will build lasting relationships to make the University a remarkable place for		Tech University	Sharing Our Story			
			Risk Identification					Ц	Risk Treatment Risk Assignment
Reference	Establish Risk Context (Describes the institutional environment, behaviors that affect the way the risk arises and the way it should be managed. What do we need to take into account and what are the objectness.)	Identification of Strategic Risks		Impact of Risk to the Institution	Strategic Pillars and Priorities	Current Controls and Mitigation Plans	L 1-5 C 1-5 Factor	Calculated Risk Level	or Mitigation

Appendix F. – 2018-19 High, Extreme, Foundational and Strategic Risk Owners

	Strategic Risks	Proposed Risk Owner
1.a	Stakeholder Relations / Engagement – Internal – Students	AVP – Student Life
1.b	Stakeholder Relations / Engagement – Internal – Employees	AVP – Human Resources
2.	Stakeholder Relations / Engagement - External	VP – External Relations and Advancement
3.	Academic and Non-academic Staff Engagement	AVP – Human Resources
4.	Student Experience / Culture	AVP – Student Life
5.	Leadership	President
6.	Campus Wellbeing	AVP – Human Resources
7.	Brand	VP – External Relations and Advancement
8.	Innovation	VPRII
9.a	Physical Infrastructure	CFO
9.b	Virtual Infrastructure	Provost
10.	Partnership Success with Durham College	President
11.	Disruption – From within PSE sector	President
12.	Disruption – From outside PSE sector	President
	High Risks	Proposed Risk Owner
1.	Information Governance	University Secretary and General Counsel
2.	Increasing Litigious Environment	University Secretary and General Counsel
3.	Disruption (UCP) to operations and IT infrastructure	University Secretary and General Counsel
4.	Failure to Negotiate, Manage, Implement Contracts	University Secretary and General Counsel
5.	Partnerships	VP – External Relations and Advancement
6.	Lack of Training Associated with Mental Health Issues	AVP – Human Resources
7.	Equipment Failure, Requiring Replacement / Repair	CFO (Budget Working Group)
	Foundational Risks	Proposed Risk Owner
1.	Compliance	University Secretary and General Counsel
2.	Financial Sustainability	CFO

Appendix G. – 2018-19 Operational Risk Owners

Finance Office of Campus Infrastructure and Sustainability Regent Theatre University Secretary and General Counsel External Relations and Advancement Research	John Komar Craig Elliott Ken Bright Kevin Arbour Cheryl Foy Susan McGovern
Office of Campus Infrastructure and Sustainability Regent Theatre University Secretary and General Counsel External Relations and Advancement	Ken Bright Kevin Arbour Cheryl Foy
Office of Campus Infrastructure and Sustainability Regent Theatre University Secretary and General Counsel External Relations and Advancement	Ken Bright Kevin Arbour Cheryl Foy
Regent Theatre University Secretary and General Counsel External Relations and Advancement	Kevin Arbour Cheryl Foy
University Secretary and General Counsel External Relations and Advancement	Cheryl Foy
External Relations and Advancement	
	Susan McGovern
Research	
	Jennifer Freeman
*Provost's Office	Robert Bailey
Office of Campus Safety	Tom Lynch
Student Life	Olivia Petrie
**Ice Centre and Soccer Field House	Scott Barker
Library	Catherine Davidson
Desistana	Jan Ctalian
	Joe Stokes
	Catherine Drea
	Susan Forbes
Information Technology	Paul Bignell
Human Resources	Jamie Bruno
Faculty Risk Registers	Risk Owner
School of Graduate and Postdoctoral Studies	Langis Roy
Business and Information Technology	Michael Bliemel
Education	Maurice DiGiuseppe
Energy Systems and Nuclear Science	Akira Tokuhiro
Engineering and Applied Science	Tarlochan Sidhu
Health Sciences	Lori Livingston
Science	Greg Crawford
Social Science and Humanities	Peter Stoett
	Office of Campus Safety Student Life **Ice Centre and Soccer Field House Library Registrar Learning and Innovation Teaching and Learning Information Technology Human Resources Faculty Risk Registers School of Graduate and Postdoctoral Studies Business and Information Technology Education Energy Systems and Nuclear Science Engineering and Applied Science Health Sciences Science

^{*}Foundation for register captured in March 19, 2019 SAT meeting, deferred until new incoming Provost takes office

^{**}Restructured reporting channel: for integration into Student Life Risk Register

Appendix H. – Operational Risk Themes

In keeping with the Board's direction and mandate to oversee risk, the Board's role regarding operational risk is to ensure that there is a process for identifying and managing those risks. In the Annual Report, the annual processes are described. The Senior Leadership Team and the Audit & Finance Committee requested that the Board also be apprised of the themes arising from the operational risks identified by the Risk Owners. This Appendix H provides a summary of those themes with examples of the nature of the risks included within each theme.

Theme: Stakeholder Success/ Management

- 1. Student Experience
- 2. Effective management of student mental health
- 3. Effective management of student misconduct
- 4. Students financial incentives and support
- 5. Attraction and retention of employees
- 6. Government
- 7. Community relations
- 8. Partner relations

Theme: Financial

- 1. Asset management
- 2. Fund raising
- 3. Failure to fund key initiatives: Entrepreneurship
- 4. Government funding
- 5. Technology maintaining and staying up to date
- 6. Enrolment and competition
- 7. Tuition
- 8. Research Revenue

Theme: Academic

- 1. Programming mix
- 2. Quality research
- 3. Adequate support for researchers
- 4. Maintaining academic standards
- 5. Academic Integrity (Faculty and Student)
- 6. Faculty workload management
- 7. Quality Assurance processes
- 8. Changing standards/expectations

Theme: Organizational Effectiveness

- 1. Effective and engaged board
- 2. Contract compliance
- 3. Regulatory compliance
- 4. Administrative law compliance
- 5. Policy and process gaps
- 6. Communication
- 7. Effective use of internal resources

Theme: Ancillary operations

- 1. Financial impact
- 2. Liability

Theme: Culture

1. Maintaining collegiality and civility

Theme: Disruption

- 1. Lack of Business Continuity plan
- 2. Equipment or Technology Failure

Theme: Safety and Security

- 1. Workplace safety
- 2. Information Technology security
- 3. International Travel
- 4. Campus travel between buildings

Theme: Shared Campus Model



COMMITTEE REPORT

SESSION:		ACTION REQUESTED:	
Public Non-Public		Decision Discussion/Direction Information	
TO:	Audit and Finance Committee		
DATE:	June 10, 2019		
FROM:	Cheryl Foy, University Secretary	& General Counsel	
SUBJECT:	Policy Update Report		

COMMITTEE MANDATE:

- In accordance with its Terms of Reference, the Audit and Finance Committee (A&F) is responsible for overseeing the internal systems and control functions of the university.
- As part of this responsibility, A&F receives regular reports on policy development and approvals at the University, in accordance with the Policy Framework.

BACKGROUND/CONTEXT & RATIONALE:

- The purpose of this Report is to provide a supplement to the update given to the Committee in April on the status of Policy from March 1, 2018 to May 31, 2019, which includes the period since the approval of amendments to the Policy Framework on June 27, 2018. Over the past year, 22 new or amended policy instruments have been approved by approval authorities in accordance with the Policy Framework. A complete list was provided as part of supporting documentation in April.
- In response to questions from Board members about policy priorities, attached is an updated list of Policy Projects in Progress, as well as those that have been approved and those that are currently inactive.
- For ease of reference, the tables below track support of policy instrument development provided by the Compliance and Policy Office over the past four years. We note a significant increase in the past year.

TABLE 1: Overall Policy Support 2015-16 to 2018-19

Year	Drafting	Recommendations	Consultation
2015-16	17	23	18
2016-17	6	11	5
2017-18	8	28	29
2018-19	23	35	42

TABLE 2: Policy Support by Unit March 1, 2018 to March 1, 2019

Unit	Drafting	Recommendations	Advice
University Secretary	15		
and General Counsel			
Student Life	4	5	1
Research Services		13	7
Communications and	1		2
Marketing			
Centre for Institutional		4	2
Quality Enhancement			
External Relations		1	
Finance		3	3
Human Resources	2	2	1
IT Services			2
Graduate Studies			8
Registrar's Office		4	14
Teaching and		3	
Learning			

COMPLIANCE WITH POLICY/LEGISLATION:

The report considers the University's policy instruments in development under the Policy Framework. The Policy and Compliance Office provides support to key policy work to ensure legislative compliance. The office also advises policy leads on steps to take to ensure compliance with the Policy Framework.

SUPPORTING DOCUMENTATION

• List of Policy Projects in Progress, Approved Policies & Currently Inactive Policies



List of Policy Projects in Progress (DRAFT)

	ACTIVE POLICIES							
Title	Unit	Policy Lead	Type of Project	Category	Next Step	Mandatory Consultation and Approval Path		
PCI Compliance Policy/ies	UOIT-IT/DC-IT	Reem Ali	New	LCG	Drafting	PAC/OC/AC/ALT/BC/BOG		
IT Security Policy/ies	UOIT-IT/DC-IT	TBD	New / Substantive Amendments	LCG	Drafting	PAC/OC/AC/ALT/BC/BOG		
Acceptable Use of Technology	ITS	Andre	Substantive Amendment	LCG	Initial consultation (IT)	PAC/OC/ALT/AC/BC/BOG		
Code of Ethics and Conduct	USGC	Andre Luzhetskyy	New	LCG	Initial consultation with HR	PAC/OC/ALT/AC/BC/BOG		
Visiting Scholar	International Office	Carolyn Yeo	New	TBD	Initial Consultation	PAC/OC/AC/ALT/President		
International Travel for Faculty and Staff Policy	International Office	Carolyn Yeo	New	ADM	Initial Consultation	PAC/OC/AC/ALT/President		
Volunteer	USGC	Jacquelyn Dupuis	New Policy	LCG	Drafting	PAC/OC/AC/ALT/BC/BOG		
Research Volunteer	TBD	Greg Crawford	New	ADM	Initial Consultation			
Naming of Physical University Assets	C&M	Rich Seres Kristen Boujos	Substantive Amendment 2 New PI	LCG	Drafting (delayed to next PAC)	OC/PAC/AC/ALT/BC/BOG		
Policy and Procedures for Philanthropic gifts to University	Advancement Office	Yvonne Stefanin	New	ADM	Initial Consultation	PAC/OC/AC/ALT/President		
Workplace Accommodations	HR	Jamie Bruno	New	LCG	Drafting			
Concussions policy	USGC	Jacquelyn Dupuis/Jessica Salt	New (under Risk)	ADM	Initial Consultation	PAC/OC/AC/ALT/President		
Responding to the Death of a	OSL		Substantive	ADM	Olivia to take to new	OC/AC/PAC delib/ALT		
Student Procedure		Olivia Petrie	Amendment		Provost in June			
Institutional Quality Assurance Process Policy & 4 procedures	CIQE	Nichole Molinaro	Substantive Amendment 4 new Procedures	ACD	Deliberation GSC and CPRC (May 28)	BC/BOG/OC/CPRC/GSC/AC		



Academic Calendar Migration	SGPS and UGS	Nichole and Kimberley	Mainly Editorial	ACD	Deliberation with GSC CPRC (May 28)	BC/BOG/OC/CPRC/GSC/AC
Air Vehicle Approval Directive	USGC	Jacquelyn	New – Directive	LCG	PAC May 28	PAC/OC/AC/ALT/President
		Dupuis	(under Risk)		OC (May 29-June 7)	
Animal Care Policy (6	Research	Janice Moseley	Substantive	LCG	AC (June 25) and ALT	OC/ALT/RB/AC/BC/BOG
instruments)			Amendment		(Aug 20) for in person	
			New PI (4 Procedures)		consultation Online	
					Consultation (Apr 26-	
					May10)	
Research Ethics	Research	Janice Moseley	Substantive	LCG	PAC Assessment	PAC/OC/RB/AC/ALT/BC/BOG
			Amendment		(delayed to next PAC)	
Poster	C&M	TBD	New	ADM	On Hold	PAC/OC/AC/ALT/President
Gender Identification	RO	Joe Stokes	New	LCG	A&F - Deliberation	BC/BOG (June 10 A&F June 26 BOG)
Contract Management Policy &	USGC	Cheryl Foy	Substantive	LCG	Policy Review	AC/SLT/BC/BOG
Procedures			Amendment			
Signing Authority Policy &	Finance	Craig Elliot	Substantive	LCG	Policy Review	AC/SLT/BC/BOG
Procedures & Register			Amendment			
Intellectual Property	Research	TBD	Amendment	LCG	With Legal Counsel	
			APPROVED	POLICIES		
Title	Unit	Policy Lead	Type of Project	Category	Next Step	Mandatory Consultation and Approval Path
Course Nomenclature	CIQE	Nichole	Amendment	ACD	Academic Council –	AC (April 23)
		Molinaro			approved and posted	
Program Nomenclature	CIQE	Kimberley	Amendment	ACD	Academic Council –	AC (April 23)
		McCartney-			approved and posted	
		Young				

Course Nomenclature	CIQE	Nichole	Amendment	ACD	Academic Council –	AC (April 23)
		Molinaro			approved and posted	
Program Nomenclature	CIQE	Kimberley	Amendment	ACD	Academic Council –	AC (April 23)
		McCartney-			approved and posted	
		Young				
Fees and Charges Graduate and	SGPS and UGS	Nichole and	Amendment	ADM	Approved by president	PAC/OC/AC/ALT/President
Undergrad		Kimberley, Joe			May 24	
		Stokes				
Smoke Free Campus	HR	Jamie Bruno	Substantive	ADM	Jamie to confirm	PAC/OC/AC/ALT/President
(Cannabis Legalization)			Amendment/Policy		approval by president,	ALT Apr 11 – presented by Olivia P. on behalf of
			Review			Jamie



					obtain latest copy and	
					post to Policy Library.	
Student Sexual Violence	OSL	Olivia Petrie	Amendment	LCG	Approved and posted	BC April 17/BOG April 24
			CURRENTLY INAC	TIVE POLICI	ES	
Student Conduct & Investigation	OSL	Olivia Petrie	Substantive Amendment New PI	LCG	On hold until SSV approved	PAC/AC/ALT/BC/BOG
Student Judicial Committee	OSL	Olivia Petrie	New	LCG	On hold until SSV approved	
Accommodations related to Sexual Violence	OSL	Heather Leckey	New – Directive under SSV Policy	LCG	Draft complete; no consultation has occurred.	OC/PAC/AC/ALT/President Needs separate approval
Policy Against Violence, Harassment and Discrimination in the Workplace	HR	Jamie Bruno	Policy Review	LCG	Reviewed at GNHR November 2018, latest version posted on Policy Library	Health and Safety
Academic Schedule Guidelines	Registrar	Kristen Boujos	New	ADM	VP- Approval	Approval All that needs to happen is provost needs to review and approve
Radiation Safety	Research	Jennifer Freeman	Amendment – TBD	LCG	AC Fall 2019	OC/AC/A&F/BOG
Biosafety	Research	Jennifer Freeman	Amendment – TBD	LCG	Revising working draft.	OC/AC/A&F/BOG
Responsible conduct of research	Research	Jennifer Freeman	Amendment – TBD	LCG	No consultation.	
Research entities	Research	Jennifer Freeman	Amendment – TBD	LCG	Revising working draft. No consultation.	
Conflict of Interest in Research	Research	Jennifer Freeman	Amendment – TBD	LCG	Revising working draft. No consultation.	
Indirect Cost of Research	Research	Jennifer Freeman	Amendment New Procedure	ADM	Revising working draft. Informal Consultation	



					with Research Working Group and Deans.	
Ownership of Research Equipment	Research	Jennifer Freeman	New		Revising working draft. Informal Consultation with Research Working Group, Research Board and Deans.	
Indirect Cost of Research	Research	Jennifer Freeman	Amendment New Procedure	ADM		
Ownership of Research Equipment	Research	Jennifer Freeman	New			
Adjuncts	TBD	TBD			Not sure this was on my list. Unclear who the policy owner is – Provost? It does need updating.	
Canada Research Chair Procedures	Research	Jennifer Freeman	New (5 procedures)	TBD	Mandatory Consultation Draft procedures complete but need parent policy.	TBD
International Travel Procedures	TBD	TBD	New	TBD	Initial Consultation	TBD
Accessibility Policy	FSSH	Allyson Earner Wesley Crichlow	Substantive Amendment	LCG	Initial Consultation	TBD
Field Trip Risk Management and Directive	USGC	Jacquelyn Dupuis	New – Directive (under Risk)	LCG		ALT/President
University Event Risk Management and Approval Guidelines	USGC	Jacquelyn Dupuis	New – Directive (under Risk)	LCG	PAC Assessment	PAC/OC/AC/ALT/President
Digital Learning Resources	CIQE	Nichole Molinaro	New	ACD	AC Committees	CPRC/GSC/AC



Flag Usage	C&M	Melissa Levy	New	ADM	Online Consultation	OC/AC/ALT/President
Administrative Leave	HR	Krista Secord	New	ADM	PAC Assessment	OC /AC/ALT/President
Review of Alleged Breach of Confidentiality Directive (under Code of Ethics?)	HR	Andre Luzhetskyy	New	LCG	PAC Assessment When Andre finishes draft code of ethics include this directive under it during approval	OC /AC/ALT/President
Academic Integrity	TLC	Rupinder Brar Deborah Treftlin	Substantive Amendment	LCG	Consultation Follow up when Rupinder returns from Leave	PAC/ OC /CPRC/GSC/AC/ALT/BC/BOG
Convocation Arrangements - Graduand Family Member	RO	Kristen Boujos	New	ADM	Consultation/Drafting Project has stalled - Follow up	ALT/ OC /CPRC/GSC/AC
Procedures for Review of Academic Standing	FHSci	Lori Livingston	New	Lomig ADM	Consultation	Faculty Council/Dean
Committee and Working Group Approval	USGC	Niall O'Halloran	New	LCG	PAC Assessment	OC/ALT/AC/BC/BOG
Policy Review Guidelines	USGC	Niall O'Halloran	New	LCG	Online Consultation	OC/AC/President
Policy Drafting Guidelines	USGC	Niall O'Halloran	New	LCG	Online Consultation	OC/AC/President
Procurement	Finance	Kevin Jones	Amendment	LCG	Drafting	
Board Ethics	USGC	TBD	New	Board	Drafting	
PHIPA Privacy and Health Record Access and Custody Procedure	USGC	Niall O'Halloran	New	LCG	Drafting	PAC/OC/AC/ALT/BC/BOG
Directive for Recording of Lectures	OSL	Heather Leckey	New (Procedure under Accessibility Policy)	LCG	Policy Assessment	PAC/OC/AC/ALT/BC/BOG



Directive for Memory Aids	OSL	Heather Leckey	New (Directive under Accessibility Policy)	LCG	, AC Apr 24	PAC/OC/AC/ALT/President
Service Animals Procedure	OSL	Heather Leckey	Amendment (Procedure under Accessibility Policy)	LCG	Drafting	PAC/OC/AC/ALT/BC/BOG
Lactation Space Policy	OSL	Akeisha Lari	New	TBD	Drafting	
Procedures for Managing Allergies on Campus	OSL	Heather Leckey	New	LCG	Drafting	TBD Have reviewed a draft in August 2018. Heather has not asked for advice on this policy yet though.
Administrative Unit Review	CIQE	Nichole Molinaro	New	TBD	Initial Consult	This policy stalled out around
Fit for Duty (Cannabis Legalization)	HR	Joanne Evans	New	ADM	On hold	PAC/UAC/OC/AC/President Originally intended for approval alongside the other cannabis legalization policy instruments. On hold due to the intersection with accommodation procedures for employees.
UOIT Library Use Policy	Library	TBD	Amendment	TBD	Parking Lot	
Emergency Preparedness plan	USGC	TBD	Editorial Amendment	TBD	Parking Lot	
Anti-Violence for Visitors and Volunteers	TBD	TBD	New	TBD	Parking Lot	
Fitness to Study	OSL	TBD	New	TBD	Parking Lot	
Halloween Attire		TBD	New	TBD	Parking Lot	
Medical Notes	RO	TBD	New	TBD	Parking Lot	
Meeting with Students	TBD	TBD	New	TBD	Parking Lot	
Umbrella Policy on Violence, Sexual Violence, Harassment and Discrimination		TBD	New	TBD	Parking Lot	
Video Surveillance Policy		TBD	New	TBD	Parking Lot	
Communications	C&M	TBD	New	ADM	Parking Lot	



COMMITTEE REPORT

SESSION:		ACTION REQUESTED:	
Public Non-Public		Decision Discussion/Direction Information	
TO:	Audit and Finance Committee		
DATE:	June 10, 2019		
FROM:	Cheryl Foy, University Secretary	& General Counsel	
SUBJECT:	Annual Insurance Report		

COMMITTEE MANDATE:

- The Audit and Finance Committee (A&F) has responsibility for finance and risk management. In support of this mandate, the Committee receives for consideration an Annual Insurance Report.
- This is an opportunity for the committee to consider the adequacy of the university's insurance program.

BACKGROUND/CONTEXT & RATIONALE:

- The university insurance program is overseen by the University Secretary and General Counsel with the assistance of the Director of Risk Management.
- Appropriate insurance is a key component of effective risk management.
- The insurance update presented on June 18, 2018 to the A&F committee outlined the insurance objectives for 2018-19, which included the development of an Insurance Work Plan. The Insurance Work Plan includes:
 - Reviewing the current University insurance landscape and identifying gaps and opportunities for additional and/or reduced coverage;
 - Developing procedures for the use of University vehicles;
 - Educating the university community on travel insurance policies and eligibility of insurance while abroad;

- o Enhancing the insurance section of the risk management website; and
- Enhancing documentation, follow up, and storage of certificates of insurance on contract agreements and campus events.
- The University Secretary and General Counsel (USGC) has made great progress against these objectives as set out in the fourth Draft Annual University Risk Management Report.

PROPOSED PROCESS

- The USGC will continue to work through the 2018-19 objectives and provide updates to the committee.
- The USGC will develop and deliver to the committee an Insurance Work Plan for the 2019-20 academic year.

COMPLIANCE WITH POLICY/LEGISLATION:

 Article 13.1 of the university's By-law No. 1 provides for the indemnification of Governors and employees, and further protection of governors is stipulated under Article 13.2. The insurance coverage provided supports these legal requirements.

NEXT STEPS:

 A&F to review the attached Annual Insurance Report and comment on the adequacy of the insurance portfolio.

SUPPORTING DOCUMENTATION

Annual Insurance Report

Insurance Update

Presentation to the Audit and Finance Committee

June 10, 2019

By: Cheryl Foy



CURIE Policies and Coverage

General Liability	Covers the legal liability and defense costs arising from bodily injury and property damage		
Policy Applies to:	 Accidents occurring in the buildings or on the grounds or at activities related to the university on a world-wide basis Personal injury Sport activities Professional malpractice Sudden and accidental pollution Tenants' legal liability, etc. 		
Coverage and Limitations	\$50,000,000 per occurrence		



CURIE Policies and Coverage, continued

Errors and Omission	The CURIE policy will indemnify against allegations of wrongdoing in four main areas		
Policy Applies to:	 Governors, Directors and Officers, including employees while carrying out their normal duties on behalf of the University Professional Malpractice for rendering or failing to render sound professional advice Fiduciary liability arising from employees acting as Trustees for University Pension Plans Employee benefit liability, arising out of the administration of the various university benefits programs 		
Coverage and Limitations	Combined \$50,000,000 limit between primary and excess deductible is \$1,000 on Employee Benefits only, subject to policy exclusions		



CURIE Policies and Coverage, continued

Property	Insures against all risks of direct physical loss or damage primary of \$5,000,000 and excess up to \$1,250,000,000 limit per loss with a *\$50,000 deductible
Policy Applies to:	All Risks physical damage property Business interruption and extra expense Earthquake Flood
Coverage and Limitations	Extra expense endorsement \$5,000,000 Earthquake – subject to 3% or subject to the following deductibles; minimum \$250,000 and a maximum of \$5,000,000 (except BC and Quebec) Flood – subject to a 2% minimum \$100,000 deductible

*Increase in insurable values resulting in increase in deductible



Marsh Policies

- Machinery Breakdown
- Crime
- Automobile
- Non Owned Automobile
- Garage Automobile
- Marine
- Special Crime
- Nuclear Liability
- Umbrella Liability
- Cyber Liability
- Student Work Placement
- *Ad hoc Cargo



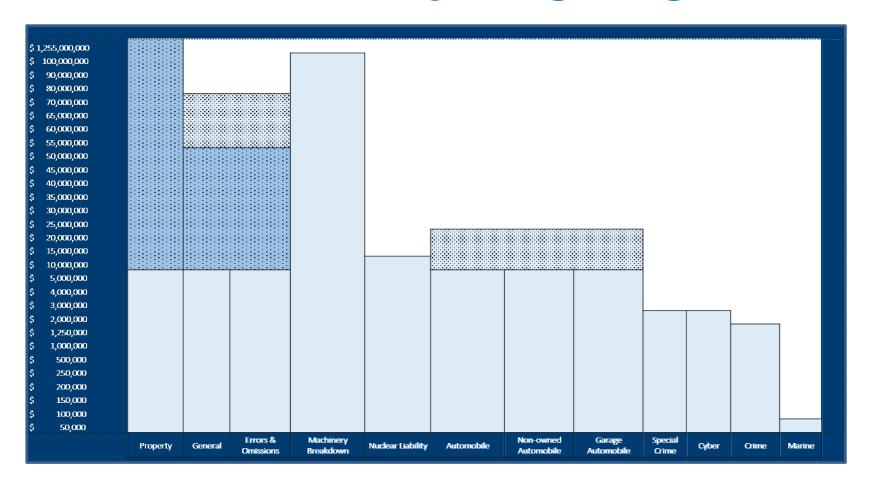
Sutton Policies and Coverage

Special Risk Travel	Provides major medical benefits for incidents resulting in injury , while on an authorized trip outside of Ontario
Policy Applies to:	Medical Evacuation & Repatriation Security Advice and Evacuation Travel Assistance
Coverage and Limitations	\$1,250,000 lifetime \$250,000 air ambulance/repatriation \$100,000 political evacuation Coverage responds within the first 60 days travel

Student Work Placement	Provides medical coverage for students in university programs that are not eligible for WSIB, MASED coverage		
Policy Applies to:	University approved work placement or volunteer position		
Coverage and Limitations	\$150,000 principal sum for accidental death and dismemberment \$100,000 permanent total disability – maximum 104 weeks		



UOIT Insurance Layering Diagram





Audit & Finance Committee

2018-2019 Annual Report



2018-2019 Work Plan

MANDATE-DRIVEN PRIORITIES

Financial Statements 2018-19

- Quarterly reporting & year-end financial reporting
- Credit rating update

Audited Financial Statements 2018-19

- Engagement Audit Plan
- Receipt of Pension Plan Audit Report
- Audited financial statements
- Receipt of Audit Findings Report
- Debenture overview & updates

Investment Committee Oversight

Receipt of quarterly reports

Budget for 2019-20

- Update on assumptions, targets & outcomes
- 10-year financial model & forecasting
- Recommendation of 2019-2020 budget
- Recommendation of endowment disbursement

Student fees

Recommendation of tuition & ancillary fees for 2020-2021



2018-2019 Work Plan

Risk Management & Compliance

- Progress updates for Risk Management, Privacy Compliance & Pension Governance
- URM Annual Report
- Annual governance review
- Annual Insurance Report
- Annual policy & compliance review

Capital Projects & Acquisitions

- New building project business case & contract for approval
- MGP updates
- Vaso's Field upgrade updates
- AVIN updates
- Laptop procurement approval 2019-2020
- TELE program updates

Policy Development & Review

- Statement of Investment Policies (SIP) review
- Contract Management & Signing Authority Policy review
- Use of External Auditor for Non-Audit Services Policy review
- Continuity Policy
- University Code of Ethics
- President Expenses Approval Policy



Accomplishments

Terms of Reference

Recommended updates to committee Terms of Reference

Financial

- Committee reviewed & discussed quarterly reports, allowing for ongoing assessment of opportunities & risks
- Recommended Audited Financial Statements for approval
- Audited financial statements for the university's Pension Plan were presented to the committee by KPMG
- Recommended disbursement of up to \$600,000 from the Endowment Funds to be distributed as student awards in 2019-20

Policy

- Recommended Freedom of Expression Policy for approval by the Board of Governors
- Approved Procedure For On-Campus Medical Cannabis Use By Students



Accomplishments

Policy

- Recommended the university's Continuity Policy for approval by the Board of Governors
- Reviewed Use of External Auditor for Non-Audit Services Policy
- Reviewed Expendable Funds Policy
- recommended Gender Change Policy for approval by the Board of Governors

Investment Committee Oversight

- Received a quarterly report from the Investment Committee
- Recommended amendments to the Statement of Investment Policies & Asset Class Management Procedures to allow implementation of a market neutral strategy

Budget for 2018-19

Recommended the 2019-20 budget for approval by the Board

Student Fees

recommended the 2019-20 tuition & ancillary fees amendments for approval by the Board



Accomplishments

Risk Management & Compliance

- Oversight of the continued development of the University Risk Management (URM) framework
- Recommended the annual URM Report for receipt by the Board
- Oversight of privacy and contract compliance

Capital Projects, Acquisitions, & Divestments

- Recommended approval of the design and construction of the New Building
- Oversight of completion of Vaso's Field project



In Progress

Budget

Cash management & forecasting

Financial

 Transition of TELE program from laptops to bring your own device (BYOD)

Risk Management & Compliance

- Continued development of URM program
- Implementation of University Continuity Management Policy & program

Contracts

Implementation of the Contract Management & Legal Suite systems



In Progress

Policy Development & Review

- Oversight of the Contract Management & Signing Authority Policy review
- Continued oversight of policy development & implementation of Policy Framework

Records Management

 Continued oversight of implementation & development of Records Management System



Future Planning

Capital Projects

- Continued oversight of the ACE Enhancement project
- Continued oversight of the New Building project
- Continued oversight of CRWC expansion project
- Continued oversight of AVIN project

Risk Management & Compliance

Legal Suite

- Oversight of:
 - continued expansion of functionality of Legal Suite
 - monitoring policy development and review through the database

Policy

- Development of University Code of Ethics
- Development of President Expenses Approval Policy



Future Planning

Risk Management & Compliance

Privacy

 Oversight of the development of the University's privacy policies, procedures, assessment & education

Legislative Compliance

Oversight of University's AODA & CASL compliance initiatives

Records Management

 Oversight of implementation & development of Records Management System





COMMITTEE REPORT

SESSION:		ACTION REQUESTED:		
Public Non-Public		Decision Consultation Information		
TO:	Audit & Finance Committee			
DATE:	June 10, 2019			
FROM:	Joe Stokes, Registrar			
SUBJECT:	Gender Change Policy - Student			

COMMITTEE MANDATE:

- In accordance with the university's Policy Framework, the Board of Governors is responsible for approving Legal, Compliance and Governance (LCG) policies.
- The Change of Gender Policy falls in the LCG category.
- We are seeking the committee's recommendation of the Change of Gender Policy for approval by the Board of Governors.

PURPOSE OF POLICY INSTRUMENT:

 The Purpose of this policy is to provide guidelines for students who wish to change their gender identity on their official student record.

CONSULTATION:

- Academic Council
- President's Equity Task Force
- University Student Union
- Policy Advisory Committee
- Administrative Leadership Team
- Office of Student Life
- School of Graduate and Postdoctoral Studies
- Office of the Registrar
- University Secretariat

List of Consultation Dates:

September 2018 - February 2019

Comments received and response:

• Initially this policy was presented to the President's Equity Task Force (PET), and it was suggested that the gender change procedures be recommendations for students who wish to change their gender identity. However, after consultation with the Policy Advisory Committee and the secretariat, it was decided that the university should not be recommending what a student can do with respect to their gender identity. The subsequent edits removed the language around recommendation, and moved to a procedure that follows the legal gender change process within the province of Ontario. This change was communicated back to PET and endorsed before coming to Academic Council.

COMPLIANCE WITH POLICY/LEGISLATION:

 This policy is in line with requirements of the Province of Ontario for changing sex designation on official documents, and provides a pathway for students to change their gender designation on all official University documents, including transcripts and OSAP.

NEXT STEPS:

- June 4, 2019 Audit and Finance Committee meeting for recommendation.
- June 26, 2019 Board of Governors meeting for approval.

SUPPORTING REFERENCE MATERIALS:

Change Of Gender Policy (Student)



Classification Number	LCG XXXX	
Framework Category	Legal, Compliance and Governar	
Approving Authority	Board of Governors	
Policy Owner	Registrar	
Approval Date		
Review Date	DRAFT FOR REVIEW	
Supersedes		

CHANGE OF GENDER POLICY (STUDENT)

PURPOSE

1. The purpose of this Policy is to set out the requirements for Students who wish to change their Gender Designation on the official Student Record.

DEFINITIONS

- **2.** For the purposes of this Policy the following definitions apply:
 - "Gender Identity" means the personal sense of one's own gender.
 - **"Student"** means any individual registered as a student, in accordance with the academic regulations of the University.
 - "Student Record" means the official student record as recorded in the student information system.
 - "Gender Designation" means the demographic data within the Student Record relating to gender. Within the University's student information system, gender may be recorded as F (female), M (male) or X (unspecified).

SCOPE AND AUTHORITY

- **3.** This Policy applies to all Students enrolled, or who have been enrolled at the university.
- 4. The Registrar, or successor thereof, is the Policy Owner and is responsible for overseeing the implementation, administration and interpretation of this Policy.

POLICY

The University recognizes the need to support Students in changing their Student Record to conform to their Gender Identity. Changing Gender Designation at the University without a corresponding change in provincial records could result in negative impacts for a Student. Students wishing to change their Gender Designation may do so in one of two ways.

- 5. Changing Gender Designation with a legal change of gender
 - **5.1.** The University collects Gender Designation to fulfil statistical reporting requirements, and for document matching purposes. A legal Gender Designation change will ensure that a Student will not experience challenges in receiving

- financial aid, that the student's transcript will reflect their Gender Identity and that the University's Student Record will match provincial educational records.
- **5.2.** Students who have legally changed their gender with the province or other authority where their birth is registered may request to change their Gender Designation on their official Student Record through the office of the Registrar.
- **5.3.** Upon completion of a Gender Designation change on the official Student Record, all records will be updated to reflect this change, and a notice will be sent to applicable staff on a need-to-know basis to ensure recognition of the change.

6. Limited Gender Designation change without a legal change of gender

6.1. Students who have not obtained a legal gender change may request a change to their preferred name and Gender Designation on their Student Record on an individual case basis. A limited Gender Designation change will not affect the student's official transcript, degree parchment or any submissions or statistical reporting to the government, and may impact payments through OSAP. A notice will be sent to applicable staff on a need-to-know basis to ensure recognition of the change.

7. Confidentiality

7.1. The University recognizes the sensitivity of requests related to Gender Identity under this Policy. The office of the Registrar will set out a procedure for making requests and designate a single point of contact to manage and fulfil requests under this policy to ensure confidentiality.

MONITORING AND REVIEW

8. This Policy will be reviewed as necessary and at least every three years. The Registrar, or successor thereof, is responsible to monitor and review this Policy.

RELEVANT LEGISLATION

9. This section intentionally left blank

RELATED POLICIES, PROCEDURES & DOCUMENTS

10. This section intentionally left blank



BOARD OF GOVERNORS AUDIT & FINANCE COMMITTEE

PUBLIC SESSION 2:00 p.m. - 4:10 p.m., ERC 3023

Attendees: Nigel Allen (Chair), Doug Allingham, Stephanie Chow (via videoconference),

Dale MacMillan (via teleconference), Steven Murphy

Staff: Kay Ali, Robert Bailey, Becky Dinwoodie, Cheryl Foy, Doug Holdway, Brad

MacIsaac, Pamela Onsiong

Guest: Mike Eklund, Kimberly Nugent

1. Call to Order

The Chair called the meeting to order at 2:00 p.m.

2. Agenda

It was noted that P. Onsiong will be presenting for Craig Elliott and D. Holdway will be presenting for Justin Gammage.

Upon a motion duly made by D. Reiner and seconded by S. Murphy, the Agenda was approved as amended.

3. Conflict of Interest Declaration

There were no conflict of interest declarations.

4. Chair's Remarks

The Chair kept his remarks brief.

5. President's Remarks

The President shared that the launch of the new brand was well received internally and externally. Institutions from across the globe sent positive feedback. The launch was the first stage in a long process. The university also announced its partnership with OCAD that morning.

(D. Allingham & M. Eklund joined at 2:04 p.m.)

The institutions will work together to give our students the opportunity to study at both campus locations. The partnership is kicking off with six projects this summer. The partnership reflects the focus on continuing to develop a well-rounded tech university.

6. Finance

6.1 2019-2020 Budget

R. Bailey discussed the strategic focus of the budget presentation, which was included in the meeting material. The university budget is about strategy and planning as opposed to only numbers. He discussed the importance of maintaining focus on the university's values (e.g. additional \$3.7M allocated to people in 2019-2020 budget despite the budget cuts). R. Bailey presented the core performance targets defined in SMA2 and advised that the university is performing well against those metrics.

(C. Foy joined at 2:17 p.m.)

There was a discussion regarding how the number of students graduating with experiential learning is calculated. B. MacIsaac advised that it is easy to do for some programs, such as engineering and nursing.

Budget development is the outcome of the strategic planning process. Sustainable budget development is a key aspect of integrated academic and operational planning. Strategy drives budget as opposed to the other way around. P. Onsiong reviewed the budget development process. She highlighted the effect of the government's tuition reduction. It was emphasized that strategic reductions were made to the budget as opposed to across-the-board cuts. P. Onsiong reviewed the key budget assumptions and responded to questions from committee members.

It was clarified that there is approximately \$20M in reserve for deferred maintenance and it is restricted if not used in its entirety. It was also highlighted that the Regent Theatre is showing a surplus for the first time. A member commented that the graph was very helpful in reviewing the budget as it clearly identifies where the deficits lie. There is a \$3.6M increase in full-time labour. R. Bailey added that the \$900,000 decrease in part-time labour is primarily a result of conversion to full-time labour. There are significant fixed costs in operating expenses and carry-forward expenses.

B. MacIsaac responded to questions from committee members. A question was asked about the student ancillary fees opt-out and how the university will be responding. He informed the committee that when a student chooses to opt out of ancillary fees, the opt-out page will have a detailed explanation of what services those fees help provide. There was a discussion about the risk of not meeting the enrolment targets. There was also a discussion regarding the risk of any further government funding reductions.

The committee also discussed what the tuition framework might look like in year three. B. MacIsaac advised that they are anticipating an inflationary increase, at best.

Upon a motion duly made by D. Allingham and seconded by D. Reiner, the Audit and Finance Committee recommended the 2019-2020 budget, as presented, for approval by the Board of Governors.

D. Allingham thanked the university team who worked on the budget; the team did a great job under challenging circumstances. He expressed appreciation for the continued focus on students and the student experience.

6.2 10-Year Financial Plan

P. Onsiong delivered the 10-year forecast presentation, which was included in the meeting material. There was a discussion about the forecast process. P. Onsiong reviewed the common elements of the long-term forecast, as well as the variable factors. The committee was presented with the worst case, best case, and most likely scenarios. R. Bailey added that these scenarios are in the context of a conservative envelope.

6.3 2019-2020 Tuition Fees Amendment

B. MacIsaac presented the proposed amended tuition fees for 2019-2020. He explained the change in the government's framework for calculating the tuition reductions.

Upon a motion duly made by D. Allingham and seconded by D. Reiner, the Audit and Finance Committee recommended the updated 2019-2020 tuition fees for approval by the Board of Governors.

6.4 2019-2020 Ancillary Fees Breakdown

B. MacIsaac reviewed the 2019-2020 ancillary fees breakdown. He advised that approximately thirty dollars per student would be eligible for opt-out. Since most students register at the end of June and start of July, we will have a better sense of the percentage of students opting out around then. Before opting out, students will be given a description of the services those fees support.

7. Project Updates

7.1 New Building

B. MacIsaac advised the committee that through the design-assist process, the new building project budget is now within the \$48M budget. The university has a locked in price with the contractors as long we sign back by April 30. He reminded the committee that there was only one change-order with the SIRC building and they will be working to minimize the changes to the new building once the project begins. The portable move will be completed over the next 2 months and is expected to be complete by August 15. B. MacIsaac confirmed that Eastern would be responsible for the subcontractor budgets going forward. He also confirmed that no contingency was used for the SIRC project.

7.2 Land Exchange

C. Foy provided an update on the status of the land exchange with the City of Oshawa. The university has been working with the City on the land diligence and finalizing the agreement. The archaeological site conditions have been completed, as well as the title search. An updated valuation must be completed before the transfer agreement can be finalized and the deal closed. She responded to questions from the committee.

7.3 ACE Enhancement

P. Onsiong reviewed the ACE Enhancement update, which was circulated as part of the meeting material.

7.4 Campus Recreation & Wellness Centre Expansion (CRWC)

- P. Onsiong delivered an update on the status of the CRWC expansion project, which is on track for construction to start next month.
- (D. MacMillan joined at 3:16 p.m. and O. Petrie arrived at 3:18 p.m.)

7.5 AVIN

D. Holdway delivered the AVIN project presentation, which was also included in the meeting material. The AVIN project is building momentum on research, outreach and marketing opportunities. We hosted an AVIN conference in March, which was a huge success. The focus moving forward will be on establishing new partnerships. D. Holdway discussed the challenge of meeting the 2018 spending plan and commended the work of Justin Gammage as Director of AVIN. He responded to questions from the committee. There was a discussion regarding staff training to respond to autonomous vehicle fires.

- 8. Risk, Compliance & Policy
- 8.1 Policy:
- (a) Student Sexual Violence Policy & Procedures
- O. Petrie discussed the extensive consultation process throughout the review of the policy. Based on the recommendations of the Advisory Committee on Student Sexual Violence Prevention and Support ("Advisory Committee"), they have come up with a fully redeveloped policy. R. Bailey commented that he was impressed with the level of engagement of the Advisory Committee and the amount of work done to arrive at the recommendations. The Advisory Committee's recommendations were accepted by the Provost. The feedback received on the redeveloped policy are set out in the accompanying report. O. Petrie confirmed that those students who expressed concern during the initial policy implementation were involved in the review process.
- O. Petrie met with representatives from Durham College (DC), who are also conducting a review of their sexual violence policy. She shared our redeveloped policy with them to assist with their review. The Director of Campus Safety was also involved in the review process. O. Petrie responded to the committee's questions. There was a discussion regarding government's expectation of review. C. Foy referred the committee to the proposed change in Appendix A, which would be able to accommodate what the government might request. C. Foy also explained how the policy would apply if an incident involves an individual on campus who is not a member of the university or DC. Scenarios have been used to test how the policy would cover various situations. She also advised that the university does not have unrestricted jurisdiction over respondents, especially when they are no longer students of the university.

Upon a motion duly made by N. Allen and seconded by D. Reiner, the Audit and Finance Committee recommended the amended Student Sexual Violence Policy and Procedures for approval by the Board of Governors, as presented.

8.2 Compliance & Risk Management Update

- C. Foy provided a risk management update. She advised the committee that the current focus is on high risks and strategic risks. Time is allocated at the upcoming meeting of the senior leadership team ("SLT") to review and confirm the high-risk register, which will be included in the annual report to the Board. SLT will also confirm who the risk owners are, who will then be responsible for mitigation plans.
- C. Foy also provided a compliance update. The Board has been interested in establishing a compliance program over the past few years. She informed the committee that there is now a compliance person in place, whose initial focus will be on copyright compliance and a few other high priority projects. C. Foy responded to questions from the committee. She explained the process for identifying high risks.

9. Consent Agenda:

Upon a motion duly made by D. Allingham and seconded by S. Murphy, the Audit and Finance Committee approved the following items on the Consent Agenda:

- 9.1 Minutes of Public Session of Meeting of February 20, 2019
- 10. For Information:
- 10.1 Policy Activity Update
- 11. Other Business

12. Adjournment

There being no other business, upon a motion duly made, the public session of the meeting adjourned at 3:45 p.m.

Becky Dinwoodie, Secretary