



**BOARD OF GOVERNORS**  
**Audit & Finance Committee**

Wednesday, November 20, 2019  
2:00 p.m. to 5:00 p.m.  
North Campus, ERC 3023  
Toll-Free: 1-877-385-4099 Public Passcode: 1028954#

**Members:** Nigel Allen (Chair), Doug Allingham, Stephanie Chow,  
Dale MacMillan, Steven Murphy, Dietmar Reiner

**Staff:** Shay Babb, Paul Bignell, Becky Dinwoodie, Cheryl Foy, Justin Gammage,  
Les Jacobs, Lori Livingston, Brad Maclsaac, Pamela Onsiong, Olivia Petrie,  
Bobbi-Jean White & Reagen Travers (KPMG)

**AGENDA**

No.	Topic	Lead	Allocated Time	Suggested Start Time
	<b>PUBLIC SESSION</b>			
1	Call to Order	Chair		
2	Agenda (M)	Chair		
3	Conflict of Interest Declaration	Chair		
4	Chair's Remarks	Chair	5	2:05 p.m.
5	President's Remarks	Steven Murphy	10	2:10 p.m.
6	<b>Finance</b>			
6.1	Second Quarter Financial Reports* (U)	Pamela Onsiong	15	2:20 p.m.
6.2	2019-2020 Enrolment (U)	Brad Maclsaac	5	2:35 p.m.
6.3	Budget Assumptions, Targets & Outcomes* (D)	Pamela Onsiong, Lori Livingston & Brad Maclsaac	15	2:40 p.m.
7	<b>Investment Committee Oversight</b>			
7.1	Quarterly Report	Stephanie Chow	5	2:55 p.m.
8	<b>Project Updates</b>		20	3:00 p.m.
8.1	New Building* (U)	Brad Maclsaac		
8.2	ACE Enhancement* (M)	Brad Maclsaac		
8.3	Campus Recreation & Wellness Centre Expansion* (U)	Brad Maclsaac		
8.4	AVIN (U)	Les Jacobs		

No.	Topic	Lead	Allocated Time	Suggested Start Time
<b>9</b>	<b>Risk, Compliance &amp; Policy</b>		25	3:20 p.m.
9.1	Risk, Compliance & Policy Update* (U)	Cheryl Foy		
9.2	Freedom of Expression Annual Report* (U)	Lori Livingston & Cheryl Foy		
	<b>Policy</b>			
9.3	<b>AODA Policy Instruments:</b> (a) Accessibility Policy* (M) (b) Procedures for Accommodating Employees with Disabilities* (M) (c) Procedures for Accommodating Students with Disabilities* (M) (d) Procedure for Use of Service Animals* (M)	Cheryl Foy & Olivia Petrie		
9.4	<b>Payment Card Industry (PCI) Compliance Policy Instruments:</b> (a) Information Security Policy* (M) (b) PCI Sustainability Policy* (M) (c) PCI Sustainability Procedure* (M)	Paul Bignell		
<b>10</b>	<b>Consent Agenda (M):</b>	Chair	5	3:45 p.m.
10.1	Terms of Reference Review*			
10.2	Minutes of Public Session of Meeting of June 10, 2019*			
<b>11</b>	<b>Other Business</b>	Chair		
<b>12</b>	<b>Adjournment (M)</b>	Chair		3:50 p.m.
<b>BREAK</b>			<b>10</b>	
	<b>NON-PUBLIC SESSION (material not publicly available)</b>			<b>4:00 p.m.</b>
<b>13</b>	<b>Call to Order</b>	Chair		
<b>14</b>	<b>Conflict of Interest Declaration</b>	Chair		
<b>15</b>	<b>Audit</b>		20	4:05 p.m.
15.1	Year End Auditor's Management Letter (U)	Pamela Onsiong		
15.2	Engagement Audit Plan* (U)	KPMG		
15.3	Pension Plan Audit Findings Report* (U)	KPMG		
15.4	Pension Plan Financial Statements* (U)	KPMG		
	<b>KPMG Departs</b>			
<b>16</b>	<b>President's Remarks</b>	Steven Murphy	10	4:25 p.m.
	• Debenture Update			
<b>17</b>	<b>Risk, Compliance &amp; Policy (confidential aspects)</b>			
17.1	Privileged & Confidential Legal Compliance Update*	Cheryl Foy	10	4:35 p.m.
<b>18</b>	<b>Consent Agenda (M):</b>	Chair	5	4:45 p.m.
18.1	Minutes of Non-Public Session of Meeting of June 10, 2019*			
18.2	2019-2020 Work Plan*			
<b>19</b>	<b>Other Business</b>			
<b>20</b>	<b><i>In Camera</i> Session (M)</b>			4:50 p.m.
<b>21</b>	<b>Termination (M)</b>			5:00 p.m.

**Financial Update  
Report to the Audit and Finance Committee  
For 6 months ending September 30, 2019**

**November 20, 2019**

**ONTARIO TECH UNIVERSITY**  
**Financial Update – Report to Audit and Finance Committee – November 20, 2019**  
**For 6 months ending September 30, 2019**  
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*Consolidated Financial Statements of*

**ONTARIO TECH UNIVERSITY**

*For 6 months ending September 30, 2019*

**ONTARIO TECH UNIVERSITY**  
**Consolidated Statement of Financial Position**  
**As at September 30, 2019**

	<u>Sep 30, 2019</u>	<u>Sep 30, 2018</u>	<u>YOY Variance</u>	<u>Mar 31, 2019</u>
<b>ASSETS</b>				
<b>CURRENT</b>				
Cash and cash equivalents	\$ 37,893,736	\$ 40,155,109	\$ (2,261,373)	\$ 45,236,989
Short-Term Investments	24,924,246	24,625,200	299,046	16,924,256
Grant receivable	8,332,211	7,612,022	720,190	8,669,628
Other accounts receivable	39,955,821	40,100,952	(145,131)	7,231,096
Prepaid expenses and deposits	2,521,412	1,706,848	814,564	2,166,750
Inventories	465,112	929,096	(463,984)	133,344
	<b>114,092,538</b>	<b>115,129,227</b>	<b>(1,036,689)</b>	<b>80,362,063</b>
INVESTMENTS	<b>28,010,771</b>	<b>26,301,813</b>	<b>1,708,958</b>	<b>26,809,201</b>
CAPITAL ASSETS	<b>392,659,869</b>	<b>392,651,445</b>	<b>8,424</b>	<b>392,097,220</b>
<b>TOTAL ASSETS</b>	<b>\$ 534,763,179</b>	<b>\$ 534,082,486</b>	<b>\$ 680,693</b>	<b>\$ 499,268,484</b>
<b>LIABILITIES</b>				
<b>CURRENT AND LONG-TERM LIABILITIES</b>				
Accounts payable and accrued liabilities	26,092,507	22,798,032	3,294,475	29,614,038
Deferred revenue	72,113,643	72,495,866	(382,223)	20,299,865
	<b>98,206,150</b>	<b>95,293,898</b>	<b>2,912,252</b>	<b>49,913,903</b>
LONG TERM DEBT	<b>548,755</b>	<b>672,774</b>	<b>(124,019)</b>	<b>550,063</b>
OBLIGATIONS UNDER CAPITAL LEASE	<b>37,282,197</b>	<b>37,888,140</b>	<b>(605,943)</b>	<b>37,596,349</b>
DEBENTURE DEBT	<b>161,236,208</b>	<b>167,211,025</b>	<b>(5,974,816)</b>	<b>164,270,307</b>
DEFERRED CAPITAL CONTRIBUTIONS	<b>159,723,067</b>	<b>159,506,705</b>	<b>216,362</b>	<b>161,099,203</b>
	<b>456,996,378</b>	<b>460,572,542</b>	<b>(3,576,164)</b>	<b>413,429,825</b>
<b>Net Assets</b>				
UNRESTRICTED		-	-	-
NET ASSETS, excluding current year surplus	<b>63,995,371</b>	57,128,164	6,867,207	57,128,164
ENDOWMENTS	<b>22,500,614</b>	21,197,256	1,303,358	21,843,288
CURRENT YEAR DEFICIT	<b>(8,729,184)</b>	(4,815,476)	(3,913,708)	6,867,207
	<b>77,766,801</b>	<b>73,509,944</b>	<b>4,256,857</b>	<b>85,838,659</b>
<b>TOTAL LIABILITIES AND NET ASSETS</b>	<b>\$ 534,763,179</b>	<b>\$ 534,082,486</b>	<b>\$ 680,693</b>	<b>\$ 499,268,484</b>

**ONTARIO TECH UNIVERSITY**  
**Consolidated Statement of Operations**  
**For the quarter ended September 30, 2019**

	<u>Sep 30, 2019</u>	<u>Sep 30, 2018</u>	<u>YOY Variance</u>
<b>REVENUE</b>			
Grants - operating & research	\$ 38,233,841	\$ 37,105,015	1,128,826
Grant - debenture	6,750,000	6,750,000	-
Donations - operating & research	395,712	535,537	(139,825)
Student tuition fees	26,491,193	26,339,869	151,324
Student ancillary fees	7,603,704	8,291,453	(687,749)
Revenue from purchased services	1,715,859	1,940,812	(224,953)
Other income	4,957,053	4,753,962	203,090
Amortization of deferred capital contributions	4,683,125	4,487,148	195,977
Interest revenue	532,994	410,004	122,990
Unrealized gain on investments	514,266	753,481	(239,215)
	<b>91,877,747</b>	<b>91,367,281</b>	<b>510,465</b>
<b>EXPENSES</b>			
Salaries and benefits	54,341,979	50,943,240	3,398,738
Student aid, financial assistance and awards	6,195,973	5,519,915	676,059
Supplies and expenses	14,217,890	13,964,768	253,123
Purchased Services	6,398,218	6,262,087	136,131
Professional fees	855,573	843,981	11,592
Interest expense - Long Term Debt	6,710,806	6,921,456	(210,650)
Interest expense - Other	78,255	76,649	1,606
Amortization of capital assets	11,766,565	11,572,178	194,387
Loss on disposal of assets	41,671	78,484	(36,813)
	<b>100,606,931</b>	<b>96,182,758</b>	<b>4,424,173</b>
<b>Excess of expenses over revenues</b>	<b>\$ (8,729,184)</b>	<b>\$ (4,815,476)</b>	<b>\$ (3,913,708)</b>

**ONTARIO TECH UNIVERSITY**  
**Consolidated Statement of Cash Flows**  
**As at September 30, 2019**

	<u>Sep 30, 2019</u>	<u>Sep 30, 2018</u>
<b>NET (OUTFLOW)/INFLOW OF CASH RELATED TO THE FOLLOWING ACTIVITIES</b>		
<b>OPERATING</b>		
Excess of expenses over revenues	(8,729,184)	(4,815,476)
Items not affecting cash:		
Amortization of capital assets	11,766,565	11,572,178
Amortization of deferred capital contributions	(4,683,125)	(4,487,148)
Unrealized gain on investments	(514,266)	(753,481)
Loss on disposal of assets	41,671	78,484
	<u>(2,118,340)</u>	<u>1,594,556</u>
Working Capital		
Grant and other accounts receivable	(32,387,308)	(32,007,875)
Prepaid expenses and deposits	(354,662)	(87,801)
Inventories	(331,768)	(687,463)
Accounts payable and accrued liabilities	(3,521,531)	(3,023,201)
Deferred revenue	51,813,778	52,916,219
	<u>13,100,169</u>	<u>18,704,436</u>
<b>INVESTING</b>		
Purchase of capital assets	(12,370,886)	(4,714,409)
Investments	(8,687,293)	(7,866,779)
Endowment contributions	657,326	156,828
	<u>(20,400,853)</u>	<u>(12,424,360)</u>
<b>FINANCING</b>		
Repayment of long term debt	(3,035,406)	(2,860,169)
Repayment of obligations under capital leases	(314,152)	(279,209)
Deferred capital contributions	3,306,989	1,444,950
	<u>(42,569)</u>	<u>(1,694,428)</u>
<b>NET CASH (OUTFLOW) / INFLOW</b>	<b>(7,343,253)</b>	<b>4,585,649</b>
<b>CASH BALANCE, BEGINNING OF YEAR</b>	<b>45,236,989</b>	<b>35,569,460</b>
<b>CASH BALANCE, END OF PERIOD</b>	<b>\$ 37,893,736</b>	<b>\$ 40,155,109</b>



**ONTARIO TECH UNIVERSITY****Financial Update – Report to Audit and Finance Committee – November 20, 2019****For 6 months ending September 30, 2019**

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**CONSOLIDATED STATEMENT OF FINANCIAL POSITION****Assets**

Cash and short-term investments decrease of \$2.0m includes a decrease of \$4.5m mainly attributable to capital spending on the new building offset by \$2.5m increase in externally funded research funds.

Grant receivable balance of \$8.3m includes \$6.2m Collaborative Nursing (CN) grant funded on a slip-year basis (PY balance \$3.5m receivable in CY and CY balance \$2.7m receivable in next FY) and \$2.1m of external research grants, all of which are current.

Grant receivable increase of \$0.7m relates mostly to an increase in CN grant associated with YOY growth.

Other accounts receivable includes student and trade receivables. Balance of \$39.9m includes \$36.4m of student A/R (\$2.1m for spring 2019 and prior, \$4.3m for fall 2019 and \$30.0m for future winter 2020 semester for which payment is due Jan 2020), other current receivables comprising \$0.7m sales tax recoverable, \$0.6m trade receivables, \$0.5m ACE and other balances, none exceeding \$0.5m.

Prepaid Expenses and deposits increase of \$0.8m includes \$0.5 for Blackboard license (Learning Management System) for the year Oct 2019 – Sep 2020. This invoice was received after the reporting quarter in the prior year.

Investment balance of \$28.0m relates to endowed funds held at PH&N. The year-over-year increase of \$1.7m is comprised of new in-year donations \$1.3m, net investment income \$0.4m, M2M unrealized gain \$0.6m, offset by bursary disbursements \$0.6m.

Capital assets balance includes net additions of \$22.0m, offset by accumulated amortization of \$22.0m in the last 12 months.

Net additions comprise \$11.7m of construction-in-progress (Moving Ground Plane \$5.1m, new building \$5.3m, basketball change rooms \$1.3m), \$4.5m major equipment and FF&E, \$3.8m building and lab renovations and net \$2.0m computer equipment and laptops.

**Liabilities**

Accounts payable and accrued liabilities increased \$3.3m due to timing of recording and payment of invoices. This includes \$1.8m in trade payables including construction invoices, \$0.7m of student ancillary fees billed to students on behalf of third parties, and other immaterial variances.

Deferred Revenue relate to revenues deferred to subsequent periods as these have not yet been earned at the end of the reporting quarter or will be recognized as revenue in the period in which related expenses are incurred.

Balance of \$73.5m comprises \$54.2m deferred tuition representing 3 months of fall fees and all of winter term fees not earned at the end of the quarter, and \$19.2m of revenues billed or received and not yet spent at the end of the reporting quarter (\$7.7m of externally funded research revenues, \$6.4m of student ancillary fees, \$3.1m of expendable donations, and \$2.0m of miscellaneous deferred revenues).

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**CONSOLIDATED STATEMENT OF FINANCIAL POSITION (continued)**

Decrease in deferred revenues of \$0.4m includes \$2.3m increase in deferred research of which \$1.3m include new external grants, \$0.5m increase in deferred ancillary fees of which \$1.1m relates to TELE fees due to lower laptop purchases as a result of all remaining students, except 1<sup>st</sup> year Engineering, going “BYOD” as of the start of the new academic year, offset by decrease in deferred capital investment in athletics.

These increases are offset by a \$3.2m net decrease in deferred tuition fee, attributable to \$5.0m decrease in domestic tuition as a result of the 10% cut in tuition fees, offset by an increase of \$1.8m in deferred international tuition due to YOY growth of 99 FTE.

Decrease in obligations under capital lease represents the principal lease repayments for 61 Charles and 55 Bond in the last 12 months.

Decrease in long-term debenture debt of \$6.0m relates to the principal repayment and resulting drawdown of the debt in the last 12 months. This debt is fully payable in October 2034.

Deferred capital contributions balance includes new capital grants and donations of \$9.7m received in the last 12 months, offset by \$9.5m amortization into revenues of capital grants and donations received since inception of the University.

New grants and donations received include \$5.8m grants for the Moving Ground Plane, \$1.8 for the AVIN project, \$1.8m grants for various capital projects, and \$0.3m donation received for SIRC.

**CONSOLIDATED STATEMENT OF OPERATIONS**

**Revenue** increased \$0.5m (1.0%) over the prior year. Significant variances include:

Operating grant increase of \$1.1m, of which \$0.6m pertains to external research grants and \$0.5m in other miscellaneous operating grants. There is no additional grant funding from the Province for domestic enrolment growth.

Student ancillary fee decrease of 0.7m includes a decrease of \$1.1m in TELE ancillary fees as a result of all remaining faculties, except 1<sup>st</sup> year Engineering, going BYOD coupled with relatively lower TELE revenue recognized due to decrease in laptop purchases. This decrease is offset by a net increase of \$0.6m in deferred revenue recognized in the current year for capital investment in athletics and other immaterial variances.

**Expenses** increased \$4.4m (4.4%) over the prior year. Significant variances include:

Salaries and benefits increase of \$3.4m includes \$2.2m for faculty and staff annual salary increases, \$0.8m for net new hires (8 faculty and 10 non-faculty) and promotions, and \$0.4m increase in limited term contracts for sessionals and student work study programs.

Student aid, financial assistance and awards increase of \$0.7m is mostly attributable to an increase in entrance scholarships as more students met the requirements for these scholarships for the current academic year.

**ONTARIO TECH UNIVERSITY****Financial Update – Report to Audit and Finance Committee – November 20, 2019****For 6 months ending September 30, 2019****II. FINANCIAL METRICS**

The Ministry has adopted 5 financial metrics to assist with assessing university financial health and sustainability.

The table below shows Ontario Tech University’s forecast metrics for fiscal year 2019 - 20 and the actuals for the 2 fiscal years 2018 – 19 and 2017 - 18. Also included are the average comparator and average sector metrics for fiscal year 2017 - 18 (latest published data). The average comparator includes the data for what are considered as “small” universities based on student FTE (“Full-time equivalents”), and includes seven universities: Algoma, Lakehead, Laurentian, Nipissing, OCADU, Trent and Ontario Tech University.

Financial Metrics	Forecast	Actual	Actual	Average comparator	Average sector
	2019 - 20	2018 - 19	2017 - 18	2017 - 18	2017 - 18
Net Income/Loss Ratio (1)	0.4%	3.3%	7.2%	1.8%	5.4%
Net Operating Revenues Ratio (2)	7.5%	11.6%	8.3%	2.6%	8.3%
Primary Reserve Ratio (days) (3)	35	62	53	31	115
Interest Burden Ratio (4)	7.0%	7.6%	8.2%	3.0%	2.2%
<b>(b) IBR w MTCU funding</b>	<b>1.6%</b>	<b>1.7%</b>	<b>1.8%</b>	<b>n/a</b>	<b>n/a</b>
Viability Ratio (5)	10.7%	17.9%	14.1%	15.1%	4204.6%

**Financial Metrics Analysis**

1. **Net Income / Loss ratio** - tracks the trend in the University’s net earnings.

Based on the current projection of a net operating surplus \$1.0m (see Section III “2019-20 Operating Forecast Summary” on Pages 9 - 12), it is forecast that the University’s net earnings ratio will be positive in the current fiscal year. This ratio is less favourable than in the prior years due to lower revenues as a result of a 10% cut in tuition fees and no additional funding for domestic growth from the Province, coupled with increased labour costs in the current year.

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**II. FINANCIAL METRICS (continued)**

**2. Net Operating Revenues ratio** – indicates the extent to which the University is generating positive cash flows in the long-run to be financially sustainable.

With stable revenues projected, the University continues to experience positive operating and working capital and, therefore, a stable net operating revenues ratio.

**3. Primary Reserve ratio** – indicates the University’s financial strength and flexibility by determining the number of days Ontario Tech University could function using its resources that are can be expended without restrictions.

Primary reserve ratio is less favourable than in the prior years due to a deterioration in the net expendable assets as a result of lower forecast operating net surplus attributable to the tension on the revenue v/s the expense side, coupled with the release of \$15.0m in internally restricted reserves for investment in the new building.

**4. Interest Burden ratio (“IBR”)** – indicates the University’s debt affordability and the cost of servicing debt

Ontario Tech University’s interest burden continues to improve as it pays back its long-term debt obligations without entering into any new debt. The cost of servicing its debt is above the comparator due to its relatively higher debt obligations.

**4b. Interest Burden with MTCU funding ratio** – the “IBR” has been re-stated to reflect an annual “institution-specific” grant of \$13.5m from the Ministry to fund the University’s debenture debt. Therefore, interest expense on the debenture has been removed from the total interest expense, used in the calculation of “IBR”.

Including the impact of the Ministry funding, the University’s interest burden ratio is more favourable than the average comparator and average sector ratios.

**5. Viability ratio** - determines Ontario Tech University’s financial health, as it indicates the funds on hand to settle its long-term obligations.

Although the University’s debt obligations are decreasing, the viability ratio is less favourable than in the prior years due to the deterioration in its net expendable assets.

**ONTARIO TECH UNIVERSITY****Financial Update – Report to Audit and Finance Committee – November 20, 2019****For 6 months ending September 30, 2019****II. FINANCIAL METRICS (continued)****(1) Net Income/Loss Ratio**

$$\frac{\text{Total Revenues less Total Expenses}}{\text{Total Revenues}}$$

*Measures the percentage of revenues that contribute to net assets. The objective is to track trends in net earnings*

**(4) Interest Burden Ratio**

$$\frac{\text{Interest Expense}}{\text{Total Expenses - Depreciation}}$$

*Indicates debt affordability as it examines the percentage of total expenses used to cover the University's cost of servicing debt*

**(2) Net Operating Revenues Ratio**

$$\frac{\text{Cash flow from Operating Activities}}{\text{Total Revenues}}$$

*Indicates the extent to which the University is generating positive cash flow in the long-run to be financially sustainable.*

**(5) Viability Ratio**

$$\frac{\text{Expendable Net Assets}}{\text{Long-Term Debt}}$$

*Determines financial health as it indicates the funds on hand to settle its long-term obligations. Long-Term Debt is total external long-term debt, excluding the current portion of debt.*

**(3) Primary Reserve Ratio**

$$\frac{\text{Expendable Net Assets}}{\text{Total Expenses}} \times 365 \text{ days}$$

*Indicates the University's financial strength and flexibility by determining the number of days it can function using only its resources that can be expended without restrictions. Expendable net assets include: Unrestricted surplus (deficit), internally restricted net assets and endowments.*

## Ontario Tech University

### III. Management Reporting - 2019 - 20 Operating Forecast Summary (in '000 s) For the year ending March 31, 2020

The table below shows the variance of the year-end forecast vs the approved budget

April 1, 2019 - March 31, 2020				
	Total Annual Budget	Y/E Forecast	Fav. (Unfav.) Budget vs. Forecast \$ / %	
<b>Revenue</b>				
Grants	81,084	80,693	(391)	0%
Tuition	79,944	79,226	(718)	-1%
Student Ancillary	11,709	13,435	1,725	15%
Other	18,072	18,915	843	5%
<b>Total Revenue</b>	<b>\$ 190,810</b>	<b>\$ 192,268</b>	<b>\$ 1,458</b>	<b>1%</b>
<b>Expenditures</b>				
Academic/ACRU	76,856	77,709	(853)	-1%
Academic Support	36,946	37,698	(752)	-2%
Administrative	33,576	30,314	3,262	10%
<b>Sub-total</b>	<b>\$ 147,378</b>	<b>\$ 145,721</b>	<b>1,657</b>	<b>1%</b>
<b>Purchased Services</b>	<b>12,109</b>	<b>11,584</b>	<b>524</b>	<b>4%</b>
<b>Total Ancillary/Commercial</b>	<b>10,460</b>	<b>10,161</b>	<b>299</b>	<b>3%</b>
<b>Debenture Interest Expense</b>	<b>10,541</b>	<b>10,157</b>	<b>385</b>	<b>4%</b>
<b>Total Expenses</b>	<b>\$ 180,488</b>	<b>\$ 177,624</b>	<b>\$ 2,865</b>	<b>2%</b>
<b>Operating Contribution</b>	<b>\$ 10,322</b>	<b>\$ 14,645</b>	<b>\$ 4,323</b>	<b>42%</b>
<b>Expenses disclosed on the Balance Sheet</b>				
Capital Expenses	3,717	7,010	(3,293)	-89%
Principal Repayments - debenture/leases	6,605	6,605	0	0%
<b>Net Operating Surplus</b>	<b>\$ 0</b>	<b>\$ 1,030</b>	<b>\$ 1,030</b>	<b>N/A</b>
<b>Other disclosure - Funded by Prior Year reserves</b>				
New Building		\$ 15,500	\$ (15,500)	N/A
Capital Campaign		\$ 1,189	\$ (1,189)	N/A
<b>Reconciliation to Y/E forecast GAAP FS:</b>				
			\$	
<b>Net forecast contribution from Operations</b>		<b>14,645</b>		
<b>Items not budgeted:</b>				
Externally funded research revenues (donation, grant, other)		<b>12,574</b>		
Externally funded research expenses		<b>(11,489)</b>		
<b>Non-cash transactions:</b>				
Amortization of capital assets		<b>(23,434)</b>		
Amortization of deferred capital contributions		<b>9,364</b>		
Unrealized gain on investments		<b>500</b>		
<b>Capital revenues a/c as Deferred Capital Contributions on the balance sheet</b>		<b>(824)</b>		
<b>Excess revenues over expenses - as per GAAP Financial Statements</b>		<b>\$ 1,336</b>		

**ONTARIO TECH UNIVERSITY****Financial Update – Report to Audit and Finance Committee – November 20, 2019****For 6 months ending September 30, 2019****III. 2019 - 20 Operating Forecast Summary**

Based on the Sep Day 10 enrolment data, the operating budget, after capital expenses and principal debenture and lease repayments, shows a net operating surplus of \$1.0m at the end of the fiscal year.

The variances of the year-end forecast to the approved budget are explained below.

**Enrolment**

	<b>2019 - 20 Approved Budget</b>	<b>2019 - 20 Sep Day 10</b>	<b>Variance to Approved Budget</b>
<b>FTE's</b>			
<b>Undergraduate</b>			
Domestic	7,923	7,905	-18
International	488	476	-12
<b>Graduate</b>			
Domestic	414	465	51
International	189	177	-12
<b>Total FTE's</b>	<b>9,014</b>	<b>9,023</b>	<b>9</b>

Sep Day 10 enrolment count shows a net positive variance of 9 FTE against an original budget of 9,014 FTE. Current eligible undergraduate and graduate enrolment projection is within the +/- 3% of Ontario Tech University's corridor midpoint.

Domestic undergraduate and graduate increased net 39 FTE. International undergraduate and graduate decreased 24 FTE against the approved budget, and resulting in a total net decrease of \$0.3m in forecast tuition revenue.

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 at the 2016 – 17 level.

**ONTARIO TECH UNIVERSITY****Financial Update – Report to Audit and Finance Committee – November 20, 2019****For 6 months ending September 30, 2019**

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**III. 2019 - 20 Operating Forecast Summary (continued)****Revenues**

Total revenues are \$1.5m favourable to budget. Significant variances include:

- 1) \$0.7m unfavourable variance in tuition, attributable to \$0.3m decrease in tuition revenues due to lower than forecast international enrolment, and \$0.4m decrease in ELC (English Learning Center) fees due to lower than anticipated summer students.
- 2) Student ancillary fees are \$1.7m favourable to budget and includes \$1.9m of prior year deferred revenues that will be recognized in the current year for the construction of the basketball change rooms (see offsetting “Capital Expenses” below) and other immaterial variances.
- 3) Other revenue are favourable to budget \$0.9m and include \$0.6m of higher than anticipated investment income, \$0.3m additional revenues from the AOOM (Advanced Operations Overview for Managers) program, offset by a decrease of \$0.5m in ACE revenues as a result of much lower than anticipated GM US utilization of the ACE facilities, and other immaterial variances.

The increase in AOOM revenues and decrease in ACE are offset by a related increase / decrease in expenses.

**Expenses**

Total operating expenses are favourable \$2.9m. Significant variances include:

Academic/ACRU units are showing a negative variance of \$0.9m as the budget included \$1.4m of faculty incentive savings that were not implemented, \$0.5m increase in faculty expenses (all of which are funded by additional revenues), offset by net \$1.0m labour savings from current open positions.

Academic Support units are \$0.7m unfavorable to budget and includes \$0.5m of entrance scholarships as a higher than expected students met the minimum requirements for these scholarships, and other immaterial variances.

Administrative units are showing a favourable variance to budget of \$3.3m. This includes \$2.5m release of planned building reserves, \$0.6m labour savings in Facilities, IT and ancillary services, \$0.3m in electricity savings and other immaterial variances.

**Capital Expenses**

Capital Expenses funded from Operations are unfavourable \$3.2m to budget, and includes \$1.9m of capital investments in the new basketball change rooms (funded by deferred revenues), and \$1.3m cost overrun in the Moving Ground Plane project in the current year.



**ONTARIO TECH UNIVERSITY****Financial Update – Report to Audit and Finance Committee – November 20, 2019****For 6 months ending September 30, 2019**

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**Summary**

The operating contribution is \$4.3m favourable to budget. This is offset by a higher than expected capital investment of \$3.3m (of which \$1.9m is funded by prior year deferred revenues), for a net forecast operating surplus of \$1.0m. Consistent with the prior years, and at year-end, Management will make a recommendation to the Committee to restrict any actual surplus for student initiatives and future campus projects.

The forecast surplus on a GAAP (generally accepted accounting principle) basis, after adjusting for non-cash transactions and for items that are not included in the budget, is \$1.3m.

**ONTARIO TECH UNIVERSITY**  
**Financial Update – Report to Audit and Finance Committee – November 20, 2019**  
**For 6 months ending September 30, 2019**

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#### **IV. CASH FLOW FORECAST**

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 the following credit facilities:

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

#### **Cash Flow Update**

- The University has not utilized its available line of credit as at the end of the reporting quarter.
- The University currently holds \$24.9m of its operating cash surplus in short-term investments, of which \$10.0m are invested in 6-month GIC's with the remaining \$14.9m in 30-day cashable GIC's.
- **Operating cash balance**, including short-term investments of \$24.9m, is projected at **\$37.6m** at the end of the fiscal year.
- **Externally and internally restricted cash balances** (including Research, Advancement, Campus Childcare, Regent Theatre, and ACE) is projected at **\$12.7m** at the end of the fiscal year.

## ONTARIO TECH UNIVERSITY

## Cash Flow Forecast Summary for the year ended March 31, 2020

	Actual		Forecast						Total Forecast	
	Apr - Jun 2019	Jul - Sep 2019	Oct 2019	Nov 2019	Dec 2019	Jan 2020	Feb 2020	Mar 2020	FY 2019 - 20	
	\$ 000 s	\$ 000 s	\$ 000 s	\$ 000 s	\$ 000 s	\$ 000 s	\$ 000 s	\$ 000 s	\$ 000 s	
Operating Beginning Cash Balance	A	31,599	18,399	30,104	21,057	12,250	5,007	23,443	16,682	31,599
Total Operating Inflows	B	37,889	66,080	16,210	8,339	9,685	36,557	8,451	12,335	195,546
Total Operating Outflows	C	(49,752)	(50,305)	(23,894)	(15,425)	(15,222)	(16,505)	(13,592)	(14,713)	(199,408)
Net Operating Cash Flows	D=B+C	(11,863)	15,775	(7,684)	(7,086)	(5,537)	20,052	(5,141)	(2,378)	(3,862)
Total Operating Cash Available	E=A+D	19,736	34,174	22,420	13,971	6,713	25,059	18,302	14,304	27,737
New Building Outflows	F	(1,337)	(4,070)	(1,363)	(1,721)	(1,706)	(1,616)	(1,620)	(1,631)	(15,064)
Operating Ending Cash Balance after New Building	H=E+F+G	18,399	30,104	21,057	12,250	5,007	23,443	16,682	12,673	12,673
Total Internally and Externally Restricted Cash	I	14,957	14,450	14,486	14,309	14,709	15,581	15,451	12,700	12,700
Total Consolidated Cash Position	J=H+I	33,356	44,554	35,543	26,559	19,716	39,024	32,133	25,373	25,373

## Total Cash Forecast as at MAR 31, 2020

Total Operating Cash after new building	12,673
Add: Short-term investments in GIC's	24,924
Total Operating Cash and ST investments	<u>\$ 37,597</u>

Total Restricted Cash	<u>\$ 12,700</u>
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# A&F Budget and Planning Update November 20, 2019



Pamela Onsiang  
Acting CFO

Lori Livingston  
Provost

Brad MacIsaac  
AVP Planning

# 2019-20 – Strategic Reductions

Agenda Item 6.3

in 000's Dept	2019-20 variable budget expenses Total	Budget Reductions		Total Reduction %	
		19/20	20/21	19/20	20/21
Faculty of ESNS	4,126	(161)	(242)	(3.9%)	(5.9%)
Faculty of Business and IT	13,200	(447)	(389)	(3.4%)	(2.9%)
Fac. of Social Science & Hum	10,636	(392)	(579)	(3.7%)	(5.4%)
Faculty of Education	4,992	(163)	(236)	(3.3%)	(4.7%)
Faculty of Health Sciences	13,696	(351)	(408)	(2.6%)	(3.0%)
Faculty of EAS	14,318	(459)	(699)	(3.2%)	(4.9%)
Faculty of Science	13,001	(334)	(501)	(2.6%)	(3.9%)
Graduate Studies	1,919	(73)	(73)	(3.8%)	(3.8%)
Outsourced Electives	490	(198)	(350)	(40.4%)	(71.4%)
<b>Total Academic/ACRU</b>	<b>76,377</b>	<b>(2,578)</b>	<b>(3,478)</b>	<b>(3.4%)</b>	<b>(4.6%)</b>
Office of the Provost	665	(54)	(54)	(8.1%)	(8.1%)
Planning and Analysis	4,236	(734)	(698)	(17.3%)	(16.5%)
Research, Innovation	2,250	(73)	(124)	(3.3%)	(5.5%)
Registrar	6,754	(287)	(396)	(4.2%)	(5.9%)
Tuition Set Aside	-	-	-		
Student Life	1,886	(202)	(138)	(6.7%)	(5.2%)
Library	4,538	(160)	(276)	(3.5%)	(6.1%)
IT - TELE	-	-	-		
<b>Total Academic Support</b>	<b>20,330</b>	<b>(1,510)</b>	<b>(1,685)</b>	<b>(7.4%)</b>	<b>(8.3%)</b>
Secretariat/ General Counsel	1,697	(94)	(94)	(5.5%)	(5.5%)
President	964	(77)	(77)	(8.0%)	(8.0%)
Finance	3,314	(121)	(166)	(3.7%)	(5.0%)
Central Operations	3	-	-		
OCIS/Leased Space	6,767	(241)	(338)	(3.6%)	(5.0%)
IT (excluding TELE)	3,422	(70)	(58)	(2.1%)	(1.7%)
External Relations	4,696	(231)	(231)	(4.9%)	(4.9%)
Human Resources	2,560	(96)	(71)	(3.7%)	(2.8%)
<b>Total Administrative</b>	<b>23,424</b>	<b>(931)</b>	<b>(1,036)</b>	<b>(4.0%)</b>	<b>(4.4%)</b>
<b>Total Purchased Services</b>	<b>14,890</b>	<b>(595)</b>	<b>(596)</b>	<b>(4.0%)</b>	<b>(4.0%)</b>
ACE - Non-Commercial	493	(26)	(41)	(5.2%)	(8.2%)
<b>Total Ancillary/Comm Exp</b>	<b>493</b>	<b>(26)</b>	<b>(41)</b>	<b>(5.2%)</b>	<b>(8.2%)</b>
<b>Total base variable budget</b>	<b>135,513</b>	<b>(5,640)</b>	<b>(6,834)</b>	<b>(4.2%)</b>	<b>(5.0%)</b>

# 2020-21 Budget Assumptions Agenda Item 6.3

- Enrolment levels – limited growth based on population increase
  - 35.6% grant; 42.0% tuition; 6.0% ancillary

	2017-18	2018-2019	e2019-2020	e2020-2021
Domestic Intake	2315	2462	2461	2631
International Intake	99	152	135	240
<b>Undergraduate - FFTEs</b>				
Domestic Total	7936	7920	7905	7732
International Total	435	407	476	601
<b>Graduate - FTEs</b>				
Domestic (Incl. deregulated)	413	430	465	410
International	143	148	177	214
<b>Total - FTEs</b>	<b>8927</b>	<b>8905</b>	<b>9023</b>	<b>8956</b>

- Domestic Tuition Freeze/ Propose increase yr 1 International 10%

	2019-2020	2019-20 System Average	2019-20 System Median
BCom	\$23,224	\$32,156	\$28,362
BEng, BEng & Mgmt	\$27,307	\$35,638	\$34,384
BSc, Computer Science	\$22,187	\$29,169	\$27,242

- Grant funding from the Province set at 2016/17 levels

	2020-21	2021-22	2022-23	2023-24	2024-25
Notional Allocation	\$ 12,9	\$ 19,1	\$ 25,2	\$ 31,4	\$ 34,5

- Compensation increases and other fixed cost estimates as forecast

# Budget Rollover 2020-21

<b>TOTAL REVENUES</b>	<b>193,019,317</b>
<b>TOTAL BASE EXPENSES</b>	<b>(189,859,697)</b>
<b>BUDGET SURPLUS BEFORE ASKS</b>	<b>\$ 3,159,620</b>
<b>OTO Asks</b>	
Capital - OCIS	(2,376,000)
Capital - IT	(1,600,000)
Building reserves & deferred maintenance	(2,500,000)
Operational reserves	(1,000,000)
Food Services investment	(250,000)
Bookstore Investment	(205,000)
University priority fund	(1,000,000)
Estimated salary savings	1,000,000
<b>BUDGET DEFICIT AFTER ASKS</b>	<b>\$ (4,771,380)</b>

# Discussion – Budget Process

**BUDGET DEFICIT AFTER ASKS**

<b>\$</b>	<b>(4,771,380)</b>
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**POTENTIAL REDUCTIONS**

Travel and PD cuts - 50% of \$1.0m

\$	500,000
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Potential shared services savings

	100,000
--	---------

Reduce capital projects

	500,000
--	---------

Reduce university priority fund

	400,000
--	---------

Delay hire of open positions

	750,000
--	---------

Increase revenues (CL, ancillary)

	200,000
--	---------

Other ?

**NET DEFICIT**

<b>\$</b>	<b>(2,321,380)</b>
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# New Building Project



## October Project Update 5 November 2019

# New Building Update

## This Period Achievements

- Tower Crane Erected
- Drilling dewatering wells completed
- Site dewatering on-going
- Footing excavation on-going
- Footings form & rebar works on-going
- Mechanical & electrical rough-in works in the tunnel progressing
- Procurement of architectural sub trades on-going
- Site Plan Approval – 3<sup>rd</sup> submissions comments from the city issued
- Project Submittals and RFI on going



# Forecast Schedule

## New Building (Next period)

- Permanent dewatering system design
- Continue excavation works
- Continue foundation works
- Continue mechanical rough-in works
- Construction schedule compression and fast tracking
- Continue Submittals review and approvals
- Continue RFI responses
- Continue Sub-trades and suppliers procurement
- Procurement of electrical items and mechanical equipments
- Branding and signage design
- Security System design
- Continue with Building permit and SPA submissions and comments

# Sub-projects Update



## Portable Relocation

### This Period Reporting

- Deficiency clearing in progress
- Close out documentations under review
- Property on construction lien

### Forecast

- Complete deficiency rectification
- Finalize documentations
- Release construction lien
- Hold back release

## F5 Parking Lot Extension

### Forecast

- Close out documentations
- Holdback release



### **Site Safety:**

- Nothing to report this period

### **Change Orders:**

- Nothing to report this period

### **Procurement Summary:**

- Roofing, Drywall and Ceiling works bid packages issued
- Miscellaneous metal works package under bid evaluation

### **Financial Summary:**

- Total committed amount to date \$43.673M
- Total project expense to date \$5.985M
- Breakdown of Sources and Uses of funds next slide



# A&F Roll up Financial Summary as of 1 November 2019

NEW BUILDING						
PROJECT FINANCIAL SUMMARY REPORT FOR MONTH ENDING				OCTOBER 2019		
Sources of Funds - Cash flow						
Description	Total Funding	Committed To date	Actual YTD Oct 2019	Oct 2019	Required Funding till Completion	See Notes
Ontario Tech			\$ -		\$ -	
SIF			\$ -		\$ -	
Advancement			\$ -		\$ -	
<b>Totals</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 48,000,000</b>	
Uses of Funds - Cash flow						
Description	Total Budget	Committed To date	Actual YTD Oct 2019	Oct 2019	Estimate at Completion	
GMP Contract	\$ 39,996,403	\$ 39,996,403	\$ 3,272,587	\$ 458,862	\$ 39,996,403	
FF&E	\$ 3,246,505	\$ -	\$ -	\$ -	\$ 3,246,505	
Soft Cost	\$ 1,940,732	\$ 1,548,959	\$ 723,936	\$ 42,872	\$ 1,940,732	
Portable Relocation	\$ 1,738,512	\$ 1,527,488	\$ 1,323,420	\$ 60,333	\$ 1,738,512	
New Parking (50% sharing)	\$ 327,848	\$ 327,848	\$ 564,040	\$ 45,820	\$ 327,848	1
Contingencies	\$ 750,000	\$ 205,796	\$ 101,347	\$ 9,579	\$ 544,204	
U5 U/G service and shutdown		\$ 48,764	\$ 48,764	\$ -	\$ 48,764	
UL Sanitary pipe Relocation		\$ 17,787	\$ 17,787	\$ -	\$ 17,787	
U5 City compliances		\$ 25,218	\$ 25,218	\$ -	\$ 25,218	
F5 Compliances		\$ 9,579	\$ 9,579	\$ 9,579	\$ 9,579	
U5 Accessibility		\$ 5,677	\$ -	\$ -	\$ 5,677	
U5 Footing & Ramp		\$ 103,543	\$ -	\$ -	\$ 103,543	
U5 Deficiency Backcharge		\$ (4,771)	\$ -	\$ -	\$ (4,771)	
<b>Totals</b>	<b>\$ 48,000,000</b>	<b>\$ 43,673,045</b>	<b>\$ 5,985,331</b>	<b>\$ 617,466</b>	<b>\$ 48,000,000</b>	
Notes:						
1. Construction cost for the F5 parking lot extension is equally shared with the College						
1. October 2019 amount and Actual YTD is actual cost incurred						

# ACE Enhancement Project

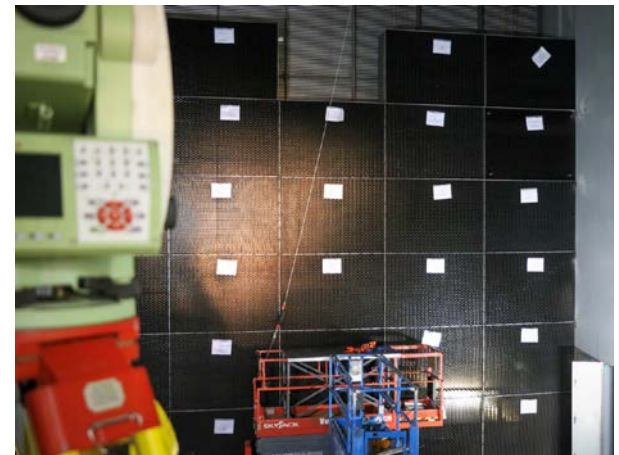
## OCTOBER 2019 Monthly Report



## Progress Update (30 October 2019) :

### Moving Ground Plane (MGP) Integration into CWT

- Engineering ongoing with MGP model for CWT integration
- MGP outside platform being modified in Port Colborne JTL Fabrication yard
- MGP software control engineering progressing
- Aerodynamics honeycomb flow straighteners installation – completed
- Boundary layer removal system engineering on going
- Acoustic treatment engineering in progress
- Transfer door at 1<sup>st</sup> floor engineering in progress
- Air compressors manufacturing on going (~anticipated delivery 2019 December)
- Cooling system engineering and RFP underway





## **Progress Update (30 October 2019) :**

### **ACE Building Modification – Client Offices**

- 5<sup>th</sup> floor renovation schematic design completed
- 5<sup>th</sup> floor renovation detail design development in progress

### **Project schedule tracking:**

- Building Extension – completed
- Equipment Integration – 30 September 2020

## **Site Safety:**

- Nothing to report – no incident on site this period

## **Change Orders:**

- Nothing to report this period

## **Procurement Summary:**

- Nothing to report this period

## **Financial Summary:**

- No Funding received this period
- Total Funding received to date \$6.3M
- Actual Cash Flow expense to date \$5.5M
- Committed Funding to date \$12.49M
- Forecast project cost at completion \$14.86M
- Cash flow Breakdown of Sources and Uses of funds next slide.

# A&F Roll up Financial Report as of 31 October 2019

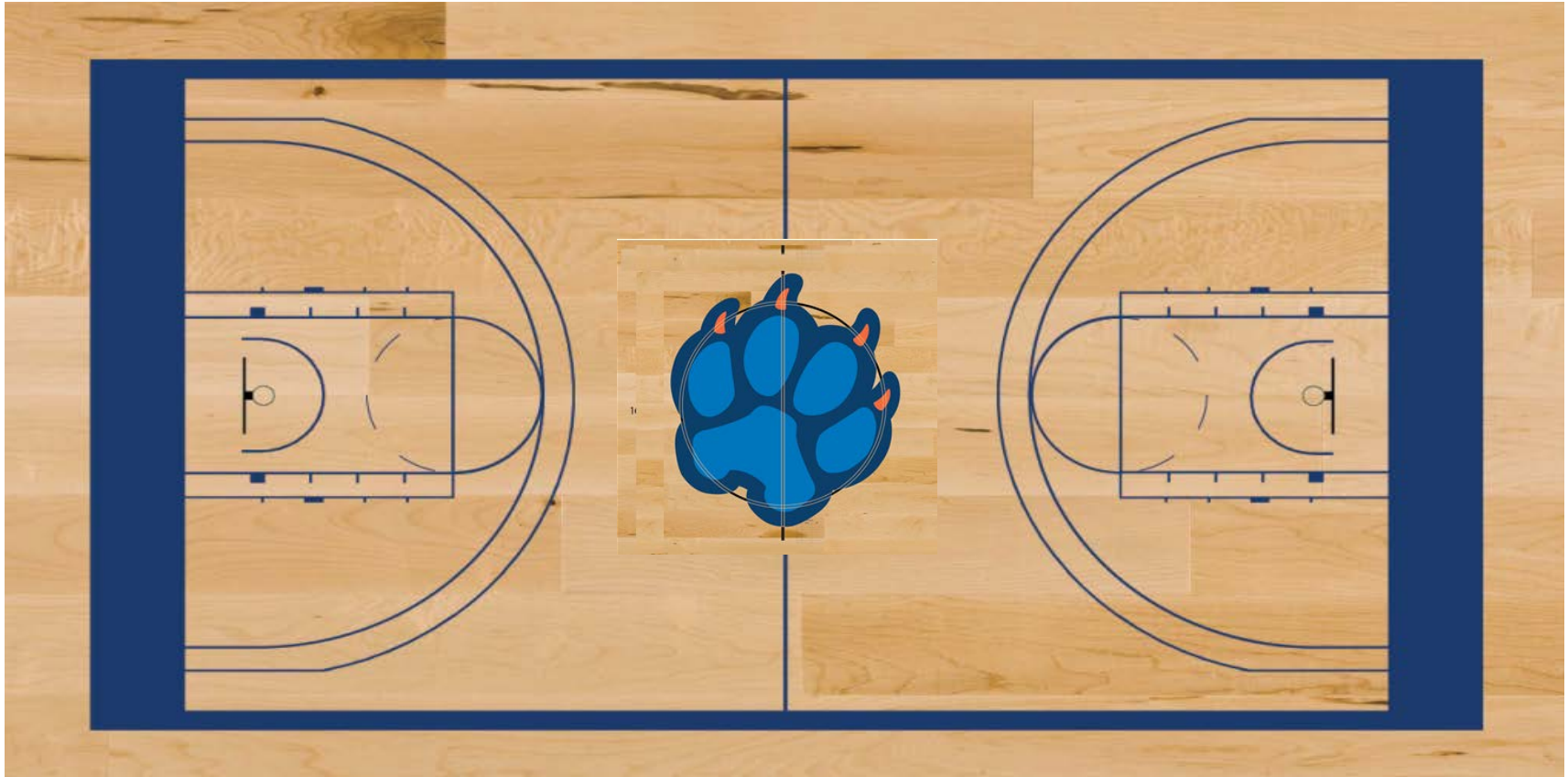
ACE ENHANCEMENT PROJECT		OCTOBER 2019			
<b>Sources of Funds - Cash Flow</b>					
Description	Total Funding	Actual YTD Oct 2019	Oct 2019	Estimate at Completion	See Notes
FEDDEV	\$ 9,465,000	\$ 4,928,587	\$ -	\$ 9,465,000	
PROVINCIAL	\$ 1,500,000	\$ 1,350,000	\$ -	\$ 1,500,000	
MAGNA	\$ 1,000,000	\$ -	\$ -	\$ 1,000,000	
THE GREENBRIAR FOUNDATION	\$ -	\$ 25,000	\$ -	\$ 25,000	<sup>1</sup>
ONTARIO TECH	\$ 500,000	\$ -	\$ -	\$ 500,000	
<b>Totals</b>	<b>\$ 12,465,000</b>	<b>\$ 6,303,587</b>	<b>\$ -</b>	<b>\$ 12,490,000</b>	<b><sup>1</sup></b>
<b>Uses of Funds - Cash Flow</b>					
Description	Total Budget	Actual YTD Oct 2019	Oct 2019	Estimate at Completion	See Notes
Moving Ground Plane Integration into CWT	\$ 3,350,000	\$ 526,267	\$ (12,009)	\$ 3,350,000	
Aerodynamic Enhancements Required for MGP	\$ 2,540,000	\$ 266,386	\$ 13,239	\$ 2,540,000	
Acoustics	\$ 845,000	\$ 183,170	\$ (4,028)	\$ 845,000	
Precision Measurement Capability	\$ 1,850,000	\$ 467,002	\$ 58,051	\$ 1,850,000	
Chamber Modifications	\$ 630,000	\$ 175,069	\$ -	\$ 630,000	
Base Building Modifications	\$ 3,645,000	\$ 2,961,119	\$ 46,989	\$ 3,461,039	<sup>2</sup>
CO#1 Unforeseen Site Condition	\$ -	\$ 44,769		\$ 44,769	<sup>2</sup>
CO#2 Exhaust Louver	\$ -	\$ 1,536		\$ 1,536	<sup>3</sup>
CO#3 M&E System Issue	\$ -	\$ 3,937		\$ 3,937	<sup>2</sup>
CO#4 Ground water seepage	\$ -	\$ 35,203		\$ 35,203	<sup>2</sup>
CO#5 Modify existing door/electrical	\$ -	\$ 3,525		\$ 3,525	<sup>2</sup>
CO#6 Sanitary system, backfill, power	\$ -	\$ 88,998	\$ 48,892	\$ 88,998	<sup>2</sup>
CO#7 Mechanical Coordination	\$ -	\$ 4,129	\$ 4,129	\$ 4,129	<sup>2</sup>
CO#8 Cash Allowance reconciliation		\$ 3,401	\$ 3,401	\$ 3,401	<sup>2</sup>
Engineering and Project Management	\$ 2,000,000	\$ 755,505	\$ 40,988	\$ 2,000,000	
CO#1 BBA Credit for Exhaust Louver		\$ (1,551)		\$ (1,551)	<sup>3</sup>
<b>Totals</b>	<b>\$ 14,860,000</b>	<b>\$ 5,518,464</b>	<b>\$ 199,650</b>	<b>\$ 14,859,984</b>	<b><sup>4</sup></b>

**Notes:**

1. Unallotted Donations received from Donors
2. Change Orders cost taken from within the Building modification budget
3. Cost offset for scope addition which was not clear in specs
4. Cost variance (\$16) due to notes 3

# Ontario Tech Varsity Change Room Expansion

## Project Update Presentation – October 2019



## Progress Update (as of October 31 2019)

### Ontario Tech Varsity Change Room:

- Occupancy Granted Oct 30/19
- Consultants reviews completed Oct 29/19
- All systems completed 100%
- Substantial completion obtained Oct 31/19
- Landscaping 85% complete





## Forecast Schedule (Next Step):

- Construction began May 14 2019
- Landscaping for temporary walkway to be completed first week of Nov
- Deficiency items to be cleaned up by the second week of Nov
- Basketball Milestones: Season Opener Oct 18 2019  
Home Opener Nov 03 2019



## **Site Safety:**

- Nothing to report – no incident on site this period
- Temporary pedestrian pathways with signage have been installed, along with a covered walk way into the CRWC
- Health and safety advised of a complaint of Tar smell within the CRWC during the roofing install. Extra fans were placed in the entrance vestibules to prevent the contamination

## **Change Orders:**

- CO#1 totals -\$(54,209) which includes BBA CO#'s 1,2,3,6
- CO#2 totals - \$48,036 which includes BBA CO#'s 4,7,8,9.
- CO#3 totals - \$25,288 which includes BBA CO#'s 10,11.
- CO#4 totals - \$18,659 which includes BBA CO#'s 12,13,14,15,16,17,18, and original PO alternate price credit

## **Procurement Summary:**

- A purchase order for design was issued to BBA on Jan 32 2019
- A letter of Intent was issued to JJ McGuire on May 10 2019
- Purchase order for Construction issued to JJ McGuire on June 11 2019
- FFE items 85% procured through Scott Barker and Team

## **Financial Summary:**

- Refer to attached report below

# A&F Roll up Financial Report as of October 31 2019

ONTARIO TECH VARSITY CHANGE ROOM EXPANSION						
PROJECT FINANCIAL SUMMARY REPORT FOR MONTH ENDING <b>October 2019</b>						
<b>Sources of Funds - Cash flow</b>						
Description		Total Funding	Actual YTD October 2019	Oct 2019	Estimate at Completion	See Notes
CRWC Reserve Fund		\$ 1,900,000	\$ 858,535	\$ 303,805	\$ 2,042,859	
					\$ -	
<b>Totals</b>		<b>\$ 1,900,000</b>	<b>\$ 858,535</b>	<b>\$ 303,805</b>	<b>\$ 2,042,859</b>	
<b>Uses of Funds - Cash flow</b>						
Description	Vendor	Reallocated Total	Actual YTD October 2019	Oct 2019	Estimate at Completion	
Construction	JJ McGuire	\$1,725,000	\$708,642	\$294,498	\$1,884,414	
Design	BBA	\$140,000	\$129,300	\$9,307	\$137,846	
Permits	City of Oshawa	\$35,000	\$20,593	\$0	\$20,600	
Site Services	JJ McGuire	\$0	\$0	\$0	\$0	
FFE	CRWC	\$0	\$0	\$0	\$0	
Contingencies	Ontario Tech U		\$0	\$0	\$0	
		\$0			\$0	
<b>Totals</b>		<b>\$1,900,000</b>	<b>\$858,535</b>	<b>\$303,805</b>	<b>\$2,042,859</b>	





**COMMITTEE REPORT**

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**SESSION:**

Public   
 Non-Public

**ACTION REQUESTED:**

Decision   
 Discussion/Direction   
 Information

Financial Impact  Yes  No      Included in Budget  Yes  No

**TO:**                      Audit & Finance Committee

**DATE:**                 November 20, 2019

**PRESENTED BY:**    Cheryl Foy, University Secretary and General Counsel

**SUBJECT:**             Compliance, Risk and Policy Update

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**COMMITTEE MANDATE:**

- The Audit and Finance Committee is responsible for overseeing risk management, and other internal systems and control functions at the university. This oversight includes receiving regular reports from management on areas of significant risk to the university including regulatory matters, as well as policy development and approvals at the university, in accordance with the Policy Framework.

**BACKGROUND/CONTEXT & RATIONALE:**

- The purpose of this Report is to provide the Committee with an update on the status of compliance, risk and policy development activity being undertaken by the Secretariat.

*Compliance Update*

- The university took the next step in the development of a compliance framework by hiring a compliance officer who started in March 2019.
- The compliance program is intended to assess and support the university's compliance with laws, regulations, policies, standard operating procedures and best practices and will further support and facilitate good governance and ethics.
- Broadly, there are five major areas of compliance focus that have been identified thus far – Research, Health & Safety, Privacy & Information Management, Financial and Employment/Human Rights.

## 2019/2020 PRIORITIES:

- The compliance program will focus on 4 priorities for the 2019/2020 academic year, including:
  - **Compliance Manual** – Developing a manual that contains the policies that address compliance risks that the university is exposed to and also refers to specific legislation, rules and regulations;
  - **Trade Compliance** – Conducting a compliance review related to the university’s compliance with Controlled Goods legislation and updating existing policies, procedures and guidance (as required);
  - **Copyright Compliance** – Working with stakeholders to review and update existing copyright policies and procedures (as required); further develop a copyright compliance framework with stakeholders that includes training, compliance monitoring and communication to university members.
  - **Occupational Health & Safety** – Review the existing OHS framework; identify gaps in policy and procedures and develop a compliance plan for addressing gaps.

## Sticky Campus

- “Compliance Builds Trust” and trust is earned through actions. A compliance program is an internal checks and balances system that demands a consistent approach to compliance risks while maintaining high ethical standards. This is achieved by the university complying with applicable laws and its own policies to create a positive impact and welcoming environment to all within the university community. This will, in turn, continue to make Ontario Tech a safe, diverse, and “sticky” place.
- This report considers the university’s compliance obligations under various legislation including:
  - *Accessibility for Ontarians With Disabilities Act*, 2005, SO 2005, c 11
  - *Controlled Goods Regulations*, SOR/2001-32
  - *Copyright Act*, RSC 1985, c C-42
  - *Defence Production Act*, R.S.C. 1985, c D-1
  - *Freedom of Information and Protection of Privacy Act*, RSO 1990, c F.31
  - *Integrated Accessibility Standards*, O Reg 191/11
  - *Occupational Health and Safety Act*, RSO 1990, c O.1
  - *Rowan’s Law (Concussion Safety)*, 2018, SO 2018, c 1

## Risk Management Update

- The University is currently in the process of finalizing the Interim Annual Risk Register Review with the Office of Risk Management. The Operational Risk Owners have been engaged in conversation and progress has been made in connection to mapping the Operational Risks to the University’s Strategic Risks. Upon conclusion of the Interim Annual Risk Register Review, SLT will review and consider refining and clarifying the Strategic Risk definitions, and establish their alignment to the President’s five strategic pillars.
- The Office of Risk Management continues to work closely with the University Risk Owners, facilitating conversations between Operational Risk Owners who carry shared oversight of the mitigation and treatment of institutional risks.

- An update to the final Interim Annual Risk Register Review will be shared at the next committee meeting.
- Progress has also been made in the development of additional tools and procedures to support the Risk Owners in their risk work. The Office of the President recently approved the following three risk management directives:
  - Air Vehicle Directive
  - Field Trip Directive
  - University-Hosted Event Directive
- Risk Management is currently developing an instruction presentation to provide awareness and guidance of these directives to Risk Owners and their operations.

### *Policy Update*

- The Secretariat continues to support and facilitate a significant amount of policy work as the university community strives for clarity and efficiency. The cross-functional Policy Advisory Committee led by the Secretariat meets regularly to ensure appropriate consultation and to oversee policy development and prioritization of policies. The attached spreadsheet provides an update on 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.

### **NEXT STEPS:**

- Committee to review the report and provide feedback and/or concerns.

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### **Attachments:**

1. Policy Spreadsheet (Public session)
2. Confidential Legal and Compliance Update (For discussion in Non-public session)

### **SUPPORTING REFERENCE MATERIALS:**

- Sample Internal Privacy Breach Report Form
- Sample Privacy Risk Mitigation Form
- 2019 AODA Compliance Report

**List of Policy Projects in Progress (Updated November 11, 2019)**

ACTIVE POLICIES						
Title	Unit	Policy Lead	Type of Project	Category	Next Step	Mandatory Consultation and Approval Path
<b>Course Evaluations Policy</b>	TLC	Susan Forbes	Policy Review	ACD	Initial consultation	OC/ALT/USC/GSC/AC
<b>Accessibility Policy</b>	USGC Office	Shay Babb Sehrish Saeedi	Substantive Amendment	LCG	OC(Oct 8 to Oct22) ALT(Oct16) AC (Oct 22) ALT(Nov 12) A&F-delib(Nov 20) BOG-approv (Nov 28)	PAC/OC/AC/ALT/BC/BOG
<b>Audit policy</b>	ACD	Joe Stokes	New Policy	ACD	OC (Oct 1 to Oct 15) ALT (Nov 12) USGC and GSC (January) AC-approv (February)	OC/ALT/USC/GSC/AC
<b>Procedures for accommodating students with disabilities</b>	Student Accessibility	Heather Leckey	Substantive Amendment-Policy Review	LCG	OC(Oct 8 to Oct22) ALT(Oct16) AC (Oct 22) ALT(Nov 12) A&F-approv(Nov 20)	PAC/OC/AC/ALT/BC
<b>Procedures for accommodating employees with disabilities</b>	USGC Office	Jamie Bruno Beth Partlow	New	LCG	OC(Oct 8 to Oct22) ALT(Oct16) AC (Oct 22) ALT(Nov 12) A&F-approv(Nov 20)	PAC/OC/AC/ALT/BC
<b>Automobile policy and directive</b>	USGC	Jacquelyn Dupuis	New	LCG	PAC(Nov 5) OC (Nov 19 to Dec 3) AC (Nov 26) ALT (Dec 10)	PAC/OC/AC/ALT/BC/BOG

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<b>Fleet directive</b>	USGC	Jacquelyn Dupuis	New	LCG	Drafting/Initial Consultation	PAC/OC/AC/ALT/President
<b>PCI Compliance Policy/ies</b>	UOIT-IT/DC-IT	Reem Ali	New	LCG	OC (Sept 3 to 17) AC (Sept 24) ALT (October 16) A&F(Nov 20) BOG(Nov 28)	PAC/OC/AC/ALT/BC/BOG
<b>IT Security Policy/ies</b>	UOIT-IT/DC-IT	Reem Ali	New / Substantive Amendments	LCG	OC (Sept 3 to 17) AC (Sept 24) ALT (October 16) A&F(Nov 20) BOG(Nov 28)	PAC/OC/AC/ALT/BC/BOG
<b>Acceptable Use of Technology</b>	ITS	Andre Luzhetskyy	Substantive Amendment	LCG	PAC (December) OC (December) AC (January)	PAC/OC/ALT/AC/BC/BOG
<b>Code of Ethics and Conduct and Alleged Breach of Confidentiality Directive</b>	USGC	Andre Luzhetskyy /Becky Dinwoodie	New	LCG	Drafting	PAC/OC/ALT/AC/BC/BOG
<b>Academic Integrity</b>	TLC	Susan Forbes	Substantive Amendment	LCG	Initial consultation	OC /ALT/USC/GSC/AC
<b>Visiting Scholar</b>	International Office	Carolyn Yeo	New	TBD	Initial Consultation	PAC/OC/AC/ALT/President
<b>International Travel for Faculty and Staff Policy</b>	International Office	Carolyn Yeo	New	ADM	Initial Consultation	PAC/OC/AC/ALT/President
<b>Volunteer</b>	USGC	Jacquelyn Dupuis	New Policy	LCG	Draft complete; Initial consultation	PAC/OC/AC/ALT/BC/BOG
<b>Building Naming policy</b>	C&M	Richard Seres	New	ADM	OC(Oct 8 to 29) PAC (Oct 15) AC(Nov 26) ALT(Dec 10, 2019) President-approval	PAC/OC/AC/ALT/President

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<b>Policy and Procedures for Philanthropic gifts to University</b>	Advancement Office	Yvonne Stefanin	New	ADM	Initial Consultation	PAC/OC/AC/ALT/President
<b>Workplace Accommodations</b>	USGC	Sehrish Saeedi	New	LCG	Drafting	PAC/OC/ALT/AC/BC/BOG
<b>Concussions policy</b>	Student Accessibility Office	Jacquelyn Dupuis/Jessica Salt	New (under Risk)	ADM	Initial Consultation	PAC/OC/AC/ALT/President
<b>Directive for Memory Aids</b>	OSL	Heather Leckey	New (Directive under Accessibility Policy)	LCG	PAC (Apr 3) AC (Apr 24) ALT (Nov 12)	PAC/OC/AC/ALT/President
<b>Service Animals Procedure</b>	OSL	Heather Leckey	Amendment (Procedure under Accessibility Policy)	LCG	PAC (Sept 10) OC (Oct 22 to Nov 5) AC (Oct 22) ALT(Nov 12) A&F(Nov 20) BOG (Nov 28)	PAC/OC/AC/ALT/BC/BOG
<b>Designated and Controlled Substances policy</b>	USGC	Jacquelyn Dupuis/Maureen Calhoun	New (under Risk)	LCG	Initial Consultation	PAC/OC/AC/ALT/BC/BOG
<b>Procurement policy</b>	Finance	Greg Edwards	Amendment	LCG	Policy Review	PAC/OC/AC/ALT/BC/BOG
<b>Responding to the Death of a Student Procedure</b>	OSL	Olivia Petrie	Substantive Amendment	ADM	OC (Sept 3 to 17) AC (Sept 24) PAC (Oct 15) PAC-delib (Nov 5) ALT-approv (Nov 12)	OC/AC/PAC delib/ALT
<b>Institutional Quality Assurance Process Policy &amp; 4 procedures</b>	CIQE	Nichole Molinaro	Substantive Amendment 4 new Procedures	ACD	USC and GSC for recommendation(Sept) AC-approv (Oct 22) Quality Council-ratification	BC/BOG/OC/USC/GSC/AC
<b>Academic Calendar Migration</b>	SGPS and UGS	Nichole and Kimberley	Mainly Editorial	ACD	USC and GSC for recommendation(Sept)	BC/BOG/OC/USC/GSC/AC

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					AC (Oct 22)	
<b>Animal Care Policy (6 instruments)</b>	Research	Janice Moseley	Substantive Amendment New PI (4 Procedures)	LCG	OC (Apr 26-May10) AC (June 25) ALT (Sept 10) RB (Oct 10) A&F (Feb 19, 2020) BOG (Feb 27, 2020)	OC/ALT/RB/AC/BC/BOG
<b>Research Ethics</b>	Research	Janice Moseley	Substantive Amendment	LCG	PAC Assessment (delayed to next PAC)	PAC/OC/RB/AC/ALT/BC/BOG
<b>Poster</b>	OSL	Olivia Petrie	New	ADM	PAC (Sept 10) OC (Oct 1-28) AC (Oct 22) PAC-delib (Nov 5) ALT-approv (Nov 12)	OC/AC/PAC delib/ALT
<b>Contract Management Policy &amp; Procedures</b>	USGC	Cheryl Foy Melissa Gerrits	Substantive Amendment	LCG	Policy Review	AC/SLT/BC/BOG
<b>Signing Authority Policy &amp; Procedures &amp; Register</b>	Finance	Craig Elliot	Substantive Amendment	LCG	Policy Review	AC/SLT/BC/BOG
<b>Intellectual Property</b>	Research	TBD	Amendment	LCG	With Legal Counsel	
<b>Procedures to Investigate &amp; Respond to Allegations of Violence, Sexual Violence, Harassment &amp; Discrimination by Governors &amp; Senior Leaders</b>	USGC	Cheryl Foy	New	LCG	Initial consultation	PAC/OC/AC/ALT/BC
<b>APPROVED POLICIES</b>						
<b>Title</b>	<b>Unit</b>	<b>Policy Lead</b>	<b>Type of Project</b>	<b>Category</b>	<b>Next Step</b>	<b>Mandatory Consultation and Approval Path</b>
<b>Air Vehicle Approval Directive</b>	USGC	Jacquelyn Dupuis	New – Directive (under Risk)	LCG	ALT (Sept 10)	PAC/OC/AC/ALT/President

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					President appr. Sept 13; Posted to Policy Library	
<b>Field Trip Risk Management and Directive</b>	USGC	Jacquelyn Dupuis	New – Directive (under Risk)	LCG	ALT (Sept 10) President appr (Sept 13)	ALT/President
<b>University-Hosted Event Risk Management and Approval Guidelines</b>	USGC	Jacquelyn Dupuis	New – Directive (under Risk)	LCG	ALT (Sept 10) President approv. Sept 13; Posted to Policy Library	PAC/OC/AC/ALT/President
<b>Digital Learning Resources</b>	CIQE	Nichole Molinaro	New	ACD	AC Committees AC approved June 25- posted to Policy Library	USC/GSC/AC
<b>Gender Identification</b>	RO	Joe Stokes	New	LCG	BOG approved June 26 posted to Policy Library	BC/BOG (June 10 A&F June 26 BOG)
<b>Smoke Free Campus (Cannabis Legalization)</b>	HR	Jamie Bruno	Substantive Amendment/Policy Review	ADM	Approved by president June 13 2019 – Uploaded to Policy Library	PAC/OC/AC/ALT/President ALT Apr 11 – presented by Olivia P. on behalf of Jamie
<b>Academic Schedule Guidelines</b>	Registrar	Kristen Boujos	New	ADM	VP- Approval Uploaded to Policy Library	Approval <b>Provost approved June 13, 2019</b>
<b>Course Nomenclature</b>	CIQE	Nichole Molinaro	Amendment	ACD	Academic Council – approved and posted	AC (April 23)
<b>Program Nomenclature</b>	CIQE	Kimberley McCartney-Young	Amendment	ACD	Academic Council – approved and posted	AC (April 23)
<b>Fees and Charges Graduate and Undergrad</b>	SGPS and UGS	Nichole and Kimberley, Joe Stokes	Amendment	ADM	Approved by president May 24	PAC/OC/AC/ALT/President
<b>Student Sexual Violence</b>	OSL	Olivia Petrie	Amendment	LCG	Approved and posted	BC April 17/BOG April 24

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CURRENTLY INACTIVE POLICIES						
<b>Student Conduct &amp; Investigation</b>	OSL	Olivia Petrie	Substantive Amendment New PI	LCG	On hold until SSV approved	PAC/AC/ALT/BC/BOG
<b>Student Judicial Committee</b>	OSL	Olivia Petrie	New	LCG	On hold until SSV approved	
<b>Naming of Physical University Assets</b>	C&M/Advancement	TBD	Substantive Amendment 2 New PI	LCG	Initial consultation-on hold	PAC/OC/AC/ALT/BC/BOG
<b>Accommodations related to Sexual Violence</b>	OSL	Heather Leckey	New – Directive under SSV Policy	LCG	Draft complete; no consultation has occurred.	OC/PAC/AC/ALT/President <b>Needs separate approval</b>
<b>Radiation Safety</b>	Research	Jennifer Freeman	Amendment – TBD	LCG	AC Fall 2019	OC/AC/A&F/BOG
<b>Biosafety</b>	Research	Jennifer Freeman	Amendment – TBD	LCG	Revising working draft.	OC/AC/A&F/BOG
<b>Responsible conduct of research</b>	Research	Jennifer Freeman	Amendment – TBD	LCG	No consultation.	
<b>Research entities</b>	Research	Jennifer Freeman	Amendment – TBD	LCG	Revising working draft. No consultation.	
<b>Conflict of Interest in Research</b>	Research	Jennifer Freeman	Amendment – TBD	LCG	Revising working draft. No consultation.	
<b>Indirect Cost of Research</b>	Research	Jennifer Freeman	Amendment New Procedure	ADM	Revising working draft. Informal Consultation with Research Working Group and Deans.	
<b>Ownership of Research Equipment</b>	Research	Jennifer Freeman	New		Revising working draft. Informal Consultation with Research Working Group, Research Board and Deans.	
<b>Indirect Cost of Research</b>	Research	Jennifer Freeman	Amendment New Procedure	ADM		

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<b>Ownership of Research Equipment</b>	Research	Jennifer Freeman	New			
<b>Adjuncts</b>	TBD	TBD			Not sure this was on my list. Unclear who the policy owner is – Provost? It does need updating.	
<b>Canada Research Chair Procedures</b>	Research	Jennifer Freeman	New (5 procedures)	TBD	Mandatory Consultation Draft procedures complete but need parent policy.	TBD
<b>International Travel Procedures</b>	TBD	TBD	New	TBD	Initial Consultation	TBD
<b>Flag Usage</b>	C&M	Melissa Levy	New	ADM	Initial Consultation-on hold	OC/AC/ALT/President
<b>Administrative Leave</b>	HR	Krista Hester	New	ADM	Initial Consultation-on hold	OC /AC/ALT/President
<b>Convocation Arrangements - Graduated Family Member</b>	RO	Kristen Boujos	New	ADM	Consultation/Drafting	ALT/ OC /USC/GSC/AC
<b>Procedures for Review of Academic Standing</b>	FHSci	Lori Livingston	New	Lomig ADM	Consultation	Faculty Council/Dean
<b>Committee and Working Group Approval</b>	USGC	Niall O’Halloran	New	LCG	PAC Assessment	OC/ALT/AC/BC/BOG
<b>Policy Review Guidelines</b>	USGC	Niall O’Halloran	New	LCG	Online Consultation	OC/AC/President
<b>Policy Drafting Guidelines</b>	USGC	Niall O’Halloran	New	LCG	Online Consultation	OC/AC/President
<b>Board Ethics</b>	USGC	TBD	New	Board	Drafting	
<b>PHIPA Privacy and Health Record Access and Custody Procedure</b>	USGC	Niall O’Halloran	New	LCG	Drafting	PAC/OC/AC/ALT/BC/BOG

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<b>Directive for Recording of Lectures</b>	OSL	Heather Leckey	New (Procedure under Accessibility Policy)	LCG	Policy Assessment	PAC/OC/AC/ALT/BC/BOG
<b>Lactation Space Policy</b>	OSL	Akeisha Lari	New	TBD	Drafting	
<b>Procedures for Managing Allergies on Campus</b>	OSL	Heather Leckey	New	LCG	Drafting	TBD
<b>Administrative Unit Review</b>	CIQE	Nichole Molinaro	New	TBD	Initial Consult	
<b>Fit for Duty (Cannabis Legalization)</b>	HR	Jamie Bruno	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.
<b>UOIT Library Use Policy</b>	Library	TBD	Amendment	TBD	Parking Lot	
<b>Emergency Preparedness plan</b>	USGC	TBD	Editorial Amendment	TBD	Parking Lot	
<b>Anti-Violence for Visitors and Volunteers</b>	TBD	TBD	New	TBD	Parking Lot	
<b>Fitness to Study</b>	OSL	TBD	New	TBD	Parking Lot	
<b>Halloween Attire</b>		TBD	New	TBD	Parking Lot	
<b>Medical Notes</b>	RO	TBD	New	TBD	Parking Lot	
<b>Meeting with Students</b>	TBD	TBD	New	TBD	Parking Lot	
<b>Umbrella Policy on Violence, Sexual Violence, Harassment and Discrimination</b>		TBD	New	TBD	Parking Lot	
<b>Video Surveillance Policy</b>		TBD	New	TBD	Parking Lot	
<b>Communications</b>	C&M	TBD	New	ADM	Parking Lot	

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# Internal Privacy Breach Report Form

To:	File
From:	
CC:	
Date:	
SUBJECT:	

<b>Date of Initial Report</b>		
<b>Name and Department of the Initial Reporter</b>		
<b>Institution Contact who can answer questions about the incident</b>		
<b>Date Incident Occurred</b>		
<b>Date Incident Ended</b>		
<b>Date Incident was Discovered</b>		
<b>DESCRIPTION OF INCIDENT</b>		
<input type="checkbox"/> <b>Loss</b>	<input type="checkbox"/> <b>Unauthorized access</b>	<input type="checkbox"/> <b>Unauthorized disclosure</b>
<b>Total Number of individuals affected</b>		
<b>Discovery of the Incident</b>		
<b>Description of the Incident and the causes:</b>		
<b>Personal Information involved</b>		

<b>Possible harms that may occur as a result of the incident</b>	
<b>Risk of Harm that may occur as a result of the incident</b>	
<b>RISK MITIGATION</b>	
<b>Steps taken to reduce the risk of harm to affected individuals</b>	<ul style="list-style-type: none"> <li>•</li> </ul>
<b>Corrective Actions</b>	<ul style="list-style-type: none"> <li>•</li> </ul>

# Privacy Risk Mitigation Report

To:	
From:	
CC:	
Date:	
SUBJECT:	

<b>Date of Initial Report:</b>	
<b>Name and Department of the Initial Reporter:</b>	
<b>Institution Contact who can answer questions about the breach:</b>	
<b>Summary of the Incident and the causes:</b>	
<b>Possible harms that may occur as a result of the incident</b>	
<b>Risk Mitigation:</b>	
<b>Steps taken to reduce the risk of harm to affected individuals:</b>	

**Corrective Actions**

<i>Immediate Actions</i>	<i>Status</i>
<ul style="list-style-type: none"><li>•</li></ul>	
<ul style="list-style-type: none"><li>•</li></ul>	

***Recommendations***

1. .

***Legal Opinion (FYI only)***

External Counsel provided a legal opinion regarding this incident and it is summarized below:

Organization category	Designated Public Sector	Number of employees range	50+
Filing organization legal name	University of Ontario Institute of Technology		
Filing organization business number (BN9)	859248049		

Fields marked with an asterisk (\*) are mandatory.

**B. Understand your accessibility requirements**

Before you begin your report, you can learn about your accessibility requirements at [ontario.ca/accessibility](http://ontario.ca/accessibility)

Additional accessibility requirements apply if you are:

- [a library board](#)
- [a producer of education material \(e.g. textbooks\)](#)
- [an education institution \(e.g. school board, college, university or school\)](#)
- [a municipality](#)

**C. Accessibility compliance report questions**

**Instructions**

Please answer each of the following compliance questions. Use the Comments box if you wish to comment on any response.

If you need help with a specific question, click the help links which will open in a new browser window. Use the link on the left to view the relevant AODA regulations and the link on the right to view relevant accessibility information resources.

**Foundation requirements**

1. Does your organization have written accessibility policies and a statement of commitment? \*  Yes  No  
[Read O. Reg. 191/11 s. 3: Establishment of accessibility policies](#) [Learn more about your requirements for question 1](#)

Comments for question 1

2. Has your organization established, implemented and maintained a multi-year accessibility plan and posted it on your organization's website? \*  Yes  No  
[Read O. Reg. 191/11 s. 4: Accessibility plans](#) [Learn more about your requirements for question 2](#)

Comments for question 2

3. Has your organization completed a review of its progress implementing the strategy outlined in its accessibility plan and documented the results in an annual status report posted on the organization's website? \*  Yes  No  
[Read O. Reg. 191/11 s. 4\(1\), 4\(3\): Accessibility plans](#) [Learn more about your requirements for question 3](#)

Comments for question 3

4. Did your organization consult with people with disabilities when establishing, reviewing and updating its multi-year accessibility plan? \*  Yes  No  
[Read O. Reg. 191/11 s. 4\(2\): Accessibility plans](#) [Learn more about your requirements for question 4](#)

Comments for question 4



5. Does your organization provide the appropriate training on the Integrated Accessibility Standards Regulation and the Human Rights Code as it pertains to persons with disabilities? \*  Yes  No  
[Read O. Reg. 191/11 s. 7: Training](#) [Learn more about your requirements for question 5](#)

Comments for question 5

6. Has your organization established and documented a process to receive and respond to feedback on how its goods or services are provided to persons with disabilities, including actions that your organization will take when a complaint is received? \*  Yes  No  
[Read O. Reg. 191/11 s. 80.50: Feedback process required](#) [Learn more about your requirements for question 6](#)

Comments for question 6

7. Does your organization ensure that its feedback processes are accessible to persons with disabilities by providing or arranging accessible formats or communication supports, upon request, and do you notify the public of this accessible feedback policy? \*  Yes  No  
[Read O. Reg. 191/11 s. 11: Feedback](#) [Learn more about your requirements for question 7](#)

Comments for question 7

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### Information and communications

8. Does your organization have a process to provide accessible formats and communication supports for persons with disabilities in a timely manner and at no more than the cost for other persons who ask for the same information, and do you notify the public of this accessible information policy? \*  Yes  No  
[Read O. Reg. 191/11 s. 12: Accessible formats and communications supports](#) [Learn more about your requirements for question 8](#)

Comments for question 8

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### Employment

9. Does your organization notify its employees and the public about the availability of accommodations in its recruitment process? \*  Yes  No  
[Read O. Reg. 191/11 s. 22-24: Recruitment](#) [Learn more about your requirements for question 9](#)

Comments for question 9

10. Does your organization notify successful applicants of its policies for accommodating employees with disabilities during offers of employment? \*  Yes  No  
[Read O. Reg. 191/11 s. 24: Notice to successful applicants](#) [Learn more about your requirements for question 10](#)

Comments for question 10

11. Does your organization develop and have in place a written process for the development of documented individual accommodation plans for employees with disabilities? \*  Yes  No  
[Read O. Reg. 191/11 s. 28: Documented individual accommodation plans](#) [Learn more about your requirements for question 11](#)

Comments for question 11

## Transportation

12. Does your organization provide transportation services? \*  Yes  No  
(If Yes, you will be required to answer an additional question.)

[Read O. Reg. 191/11 Part IV: Transportation standards](#)

[Learn more about your requirements for question 12](#)

- 12.a. Does your organization conduct employee and volunteer accessibility training on the safe use of accessibility equipment and features of your transportation vehicles? \*  Yes  No

[Read O. Reg. 191/11 s. 36: Accessibility training](#)

[Learn more about your requirements for question 12.a](#)

Comments for  
question 12.a

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## Design of public spaces

13. Since your organization last reported on its accessibility compliance, has your organization constructed new or redeveloped existing off-street parking facilities that it intends to maintain? \*  Yes  No  
(If Yes, you will be required to answer an additional question.)

[Read O. Reg. 101/11 Part IV.1: Design of public spaces standards](#)

[Learn more about your requirements for question 13](#)

- 13.a. When constructing new or redeveloping off-street parking facilities that your organization intends to maintain, does it ensure that the off-street parking facilities meet the accessibility requirements as outlined in sections 80.32 – 80.37 of the IASR? \*  Yes  No

[Read O. Reg. 80.32-37: Accessible parking](#)

[Learn more about your requirements for question 13.a](#)

Comments for  
question 13.a

- 
14. Since your organization last reported on accessibility compliance, has your organization constructed new or redeveloped existing outdoor public spaces that it intends to maintain? \*  Yes  No  
(If Yes, you will be required to answer additional questions.)

[Read O. Reg. 191/11 Part IV.1: Design of public spaces standards](#)

[Learn more about your requirements for question 14](#)

- 14.a. When constructing new or redeveloping existing outdoor play spaces, did your organization consult with the public and persons with disabilities on the needs of children and caregivers, and if you represent a municipality did your organization consult with the municipal advisory committee where one was established as outlined in s. 80.19 of the Integrated Accessibility Standards Regulation? \*  Yes  No

[Read O. Reg. 191/11 s. 80.19: Outdoor play spaces](#)

[Learn more about your requirements for question 14.a](#)

Comments for  
question 14.a

- 14.b. Does your organization's multi-year accessibility plan include procedures for preventative and emergency maintenance of the accessible elements in public spaces, and for dealing with temporary disruptions when accessible elements required under the Integrated Accessibility Standards Regulations Part IV are not in working order? \*  Yes  No

[Read O. Reg. 191/11 s. 80.44: Maintenance of accessible elements](#)

[Learn more about your requirements for question 14.b](#)

Comments for  
question 14.b

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## Customer service

15. In your policies, practices and procedures, does your organization permit persons with disabilities to keep their service animals with them on the parts of your premises that are open to the public or other third parties, except where the animal is excluded by law? If excluded by law, does your organization have alternate ways for people with service animals to access and use your goods, services or facilities?  Yes  No

[Read O. Reg. 191/11 s. 80.47\(1-3\): Use of service animals and support persons](#)

[Learn more about your requirements for question 15](#)

Comments for  
question 15

## General requirements

16. Other than the requirements cited in the above questions, is your organization complying with all applicable requirements for the **information and communications standards** in effect under the Integrated Accessibility Standards Regulation? \*  Yes  No

[Read O. Reg. 191/11 Part II: Information and communications standards](#)

[Learn more about your requirements for question 16](#)

Comments for question 16

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17. Other than the requirements cited in the above questions, is your organization complying with all applicable requirements for the **employment standards** in effect under the Integrated Accessibility Standards Regulation? \*  Yes  No

[Read O. Reg. 191/11 Part III: Employment standards](#)

[Learn more about your requirements for question 17](#)

Comments for question 17

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18. Other than the requirements cited in the above questions, is your organization complying with all applicable requirements for the **transportation standards** in effect under the Integrated Accessibility Standards Regulation? \*  Yes  No

[Read O. Reg. 191/11 Part IV: Transportation standards](#)

[Learn more about your requirements for question 18](#)

Comments for question 18

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19. Other than the requirements cited in the above questions, is your organization complying with all applicable requirements for the **design of public spaces standards** in effect under the Integrated Accessibility Standards Regulation? \*  Yes  No

[Read O. Reg. 101/11 Part IV.1: Design of Public Spaces standards](#)

[Learn more about your requirements for question 19](#)

Comments for question 19

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20. Other than the requirements cited in the above questions, is your organization complying with all applicable requirements for the **customer service standards** under the Integrated Accessibility Standards Regulation? \*  Yes  No

[Read O. Reg. 191/11 Part IV.2: Customer service standards](#)

[Learn more about your requirements for question 20](#)

Comments for question 20

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21. Other than the requirements cited in the above questions, is your organization complying with all general requirements in effect under the Integrated Accessibility Standards Regulation? \*  Yes  No

[Read O. Reg. 191/11 Part I: General requirements](#)

[Learn more about your requirements for question 21](#)

Comments for question 21

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## REPORT

**TO:** Higher Education Quality Council of Ontario (HEQCO)  
**FROM:** Lori Livingston, Provost and Vice President, Academic  
**DATE:** August 28, 2019  
**SUBJECT:** Ontario Tech University Freedom of Expression Policy Annual Report 2019

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### History

This report has been written in response to the memorandum dated June 12, 2019, received from the Higher Education Quality Council of Ontario, requesting the submission of a Free Speech Annual Report. In the absence of a specified form of report, the University has prepared the Report in the form of a memorandum and trust that you will find this satisfactory.

Please find the University's responses below related to questions found on page 2&3 of the June 12, 2019 memorandum:

### Institutional Culture & Policies

- In the wake of the government's requirement for institutional free speech policies, has there been ongoing debate or dialogue on campus with regard to freedom of speech?

Yes, the University conducted a robust consultation process regarding free speech the proposed policy, which included sessions with the following groups on the specified dates:

- Board of Governors Orientation Session (October 4, 2018)
  - Policy Advisory Committee (September 17 & October 25, 2018)
  - Online Community Consultation (October 12-October 22, 2018)
  - Academic Council (September 25, October 23, & November 27, 2018)
  - Administrative Leadership Team (November 13, 2018)
  - University Student Union (November 1, 2018)
  - Audit and Finance Committee (November 19, 2018)
  - Board of Governors (November 29, 2018)
  - Senior Leadership Team (August 26, 2019)
- Have institutional practices changed as a result of the free speech policy? For example, has the new free speech policy led to a re-examination or amendment of other institutional policies? If yes, please describe.

As the promotion of freedom of expression has long been a university focus and central to university values, institutional practices have not changed significantly. During the development of the new Freedom of Expression Policy, the effect on other institutional policies was considered and policies affected were identified.

No significant amendments were required to any other policy instruments. The Freedom of Expression Policy ties into and informs the administration and application of the following policy instruments at the University:

- Student Conduct Policy
  - Policy on Recognition of Student Organizations
  - Student Association Accountability Policy
  - Safe Disclosure Policy
  - Safe Disclosure Procedure
  - Harassment and Discrimination Policy
  - Policy Against Violence, Harassment and Discrimination in the Workplace
  - Procedures to Prevent and Address Violence, Harassment and Discrimination in the Workplace
- Now that your free speech policy has been in effect for a period of time, have any issues emerged that would cause you to re-evaluate or amend your existing policy? If so, please describe.

No issues have emerged. The University has committed to reviewing the policy and its content as needed and at least every three years in accordance with its policy framework practices. An initial review will be conducted within the first year of its implementation (review set for November 2019).

#### Events

- To the best of your ability, please provide an estimate of the number of non-curriculum events that have been held at the institution since January 1, 2019.
- To the date of this Annual Report, there have been just over three hundred non-curriculum events held at the institution since January 1, 2019.
- Is there a designated office at the institution where members of the institutional community (or guests) are directed when there is a free speech related question or complaint about an event on campus?

Yes, as outlined in the Freedom of Expression Policy, the following direction is provided:

- General complaints related to Freedom of Expression in University Space or the Online University Environment under this policy can be submitted to the Office of the Provost for resolution.
- Complaints related to decisions made by the University under this Policy are covered by the University's Safe Disclosure Policy. In other words, a complaint that the Freedom of Expression Policy has been improperly administered would be processed under the University's Safe Disclosure Policy and would be considered by the University's General Counsel.
- Complaints related to the activities of recognized student organizations are covered by the University's Policy on Recognition of Student Organizations.

- Complaints regarding conduct by Employees in contravention of the Freedom of Expression Policy are covered under the following applicable policy instruments:
  - Harassment, violence or discrimination complaints are investigated under the Policy Against Harassment, Violence and Discrimination in the Workplace, and in accordance with any applicable collective agreements.
  - Other violations can be addressed by the procedures for receiving and resolving complaints in section 9.1, in accordance with any applicable collective agreements.
  
- How did your institution navigate free speech related cost and/or safety concerns related to event on campus?

All events on campus are approved through a risk management framework, which includes discussions with the Office of Security and Emergency Management as necessary. No events gave rise to free speech related costs and/or safety concerns in the past year.

- To your knowledge, were there any instances where a non-curriculum event did not proceed due to these concerns?

No

### Complaints

- Have any organized campus events or incidents on campus – curricular or non-curricular – caused members of the institutional community (or guests) to make an official complaint about free speech on campus?

No

- If there has been a complaint (or more than one), please describe:
  - What were the issues under consideration? Identify and points of contention (e.g., security costs, safety student unions and/or groups, operational requirements, etc.).  
NA
  - How did the institution manage the free speech incident? Was the complaint addressed using the procedures set out in the policy? Did the policy/institutional process “work”? How were issues in contention resolved?  
NA
  - Were there instances where members of the institutional community (or guests) sought redress or interpretation regarding the policy and/or requests for assistance with compliance?  
NA
  - To your knowledge, were there any free speech complaints forwarded to Ontario Ombudsman?  
Not to our knowledge.

Please include the following data for any free speech-related official complaints received by the institution:

- Number of complaints received under the free speech policy relating to non-curricular events and to curricular events.  
0
- Number of complaints reviewed that were dismissed.  
0
- Number of complaints or incidents where the institution determined that the free speech policy was not followed appropriately.  
0
- Number of complaints or incidents under the free speech policy which resulted in the institution applying disciplinary measures.  
0

Should there be additional questions, please feel free to contact the Provost's office via email at [provost@uoit.ca](mailto:provost@uoit.ca).

Sincerely,



Lori A. Livingston, PhD  
Provost and Vice-President, Academic

**Freedom of Speech on Campus**  
**2019 Annual Report to the Ontario Government**  
by the  
**Higher Education Quality Council of Ontario**

**Introduction**

On August 30, 2018 Ontario Premier Doug Ford formally announced that each of the province's colleges and universities would, by January 1, 2019, develop and implement a free speech policy that meets a minimum standard prescribed by the government.

The policies were to be based on the [University of Chicago's Statement on Principles of Free Expression](#). Government asked that institutions include the following elements:

- A definition of freedom of speech
- That universities and colleges should be places for open discussion and free inquiry
- That institutions should not attempt to shield students from ideas or opinions that they disagree with or find offensive
- That members of the institution are free to criticize and contest views expressed on campus, but may not interfere with the freedom of others to express their views
- That speech that violates the law or constitutes harassment or threat is not allowed

The policies were also to address administrative mechanisms whereby members of the college or university community could raise and resolve free speech issues. Any complaint that remained unsolved could be referred to the Ontario Ombudsman.

To monitor implementation of the initiative, the Higher Education Quality Council of Ontario (HEQCO) was tasked by government to review institutions' progress in developing and implementing their free speech policies. Institutions were instructed to develop, post and submit to HEQCO an annual report on the implementation of their free speech policies starting in September 2019. HEQCO's role in ensuring the success of the government's free speech initiative was summarized in a Dec. 14, 2019 memo by then Deputy Minister George Zegarac of the Ministry of Colleges and Universities (MCU):

A recent regulatory amendment to O. Reg. 336/06 made under the Higher Education Quality Council of Ontario Act, 2005 gives HEQCO the function to research and evaluate how free speech is addressed at each postsecondary institution and across the postsecondary sector, as well as provide reports and recommendations to the Minister on the results of such research and evaluation.



This is our first annual report, based on the institutional implementation reports posted across the province. As it is the inaugural report, it is divided into two components. The first is our review of the January 2019 launch of the policies and of the policies themselves. The second is our review of institutions' September 2019 reports on the implementation of the policies over the first eight months of operation.

## **A. Successful Launch of Institutional Policies**

All public colleges and universities posted free speech policies in January 2019. The 24 colleges opted to cooperatively develop a single policy, which was adopted by all institutions, albeit with customization in regard to administrative mechanisms unique to each college. The universities' approach was institutionally driven. All but three of the universities developed new policies or revised existing ones to accommodate the government's conditions and timeline. Those three institutions had pre-existing policies that, upon review, they left in place.

The consequent policies are varied, both in construction and wording, but our assessment is that they reflect the University of Chicago principles articulated by government. Many of the policies reveal thoughtful, reflective consideration and sensitivity to the importance of free speech.

Appendix A provides a link to each institution's policy, as posted on institutional websites.

### An observation

After careful consideration of the University of Chicago principles, we would like to highlight a fundamental component of that document that is not evident in all of the Ontario policies, perhaps because it was not included in the ministry's list of minimal conditions.

As we understand it, the essential principle of the University of Chicago position is that freedom of speech explicitly and unequivocally takes precedence over civility and respect in public discourse. The *University of Chicago Report of the Committee on Freedom of Expression* states:

Although the University greatly values civility, and although all members of the University community share in the responsibility for maintaining a climate of mutual respect, concerns about civility and mutual respect can never be used as a justification for closing off discussion of ideas, however offensive or disagreeable those ideas may be to some members of our community.

Although the mandatory minimum requirements set out by government are based on the University of Chicago principles, the government did not explicitly require a statement identifying the hierarchy of free speech over civility.

If the underlying principle of the University of Chicago position is the fundamental supremacy of free speech over civility, we note that there is ambiguity in the face of some of the published policies with regard to this principle. Some of the university policies refer to respect, civility and the role of the institution as a place for free and open dialogue, but do not explicitly acknowledge the dominance of free speech within that context. Our concern is that a failure to do so undercuts the very essence of the

principle. In other cases, the policies include statements that appear to articulate the hierarchy of principles, only to be followed with language that could be interpreted as contradictory to it.

We flagged this as an issue to watch for as implementation of the new policies began on campus. We were curious as to whether the tension between free speech and civility might surface as an issue as academic communities began to interpret and apply the policies to real life situations. This appears not to have been the case in the first eight months under the new policies. We will simply continue to be mindful of this potential issue.

## **B. First Annual Implementation Reports**

HEQCO asked institutions to respond to a series of questions to inform our report to government. We asked institutions to tell us about institutional culture with regard to free speech, identify any institutional policies that had been impacted/revised because of the free speech policy, report on the number of events held on campus, and summarize any free speech complaints or issues and whether they were resolved.

We also encouraged institutions to use this first annual report to provide supporting or contextual information, such as institutional history and culture with regard to free speech policy and practice, as well as lessons learned through the process of developing a free speech policy, or from its implementation over the first eight months.

All publicly funded colleges and universities submitted and posted their implementation reports in September 2019. Appendix B provides the relevant links to institutional websites.

We note that there was considerable variance in the form, organization and level of detail in this first cycle of annual reporting. Nonetheless, we were able to assemble a comprehensive picture of the implementation journey across the province in the first eight months under the new requirements. Highlights from the institutional implementation reports are as follows:

### The policies after eight months

As noted above, all institutions posted their free speech policies in January 2019. To date, none has been identified as requiring amendment due to issues or complications raised during the implementation. The college sector has scheduled a system-level review of its common free speech policy for fall 2019. A number of universities have also indicated that their freedom of speech policy is subject to pre-scheduled policy review windows. We consider regular review to be a best practice, even if no issues have been raised.

A number of institutions reported that they had completed or were still completing collateral development work associated with the new free speech policies. Predominantly, this relates to reviews of other policies to ensure alignment (for example, policies with regard to the booking of space, student conduct, and harassment and discrimination).

Some institutions report no ongoing dialogue on campus regarding free speech since the implementation of the new policy. Others report ongoing reflection about free speech and attendant

matters such as hate speech and safe spaces (for example, speakers and expert panels, public debate forums, institutional free speech websites).

There is almost no mention of media interest or coverage about institutional policies or their implementation.

#### Events on campus

We asked for a sense of the volume of non-curriculum (i.e., not directly attached to an academic program) events at colleges and universities. Collectively, the institutions reported in excess of 40,000 events, an estimate we know to be conservative as some institutions noted that they lacked a robust centralized logging system to capture all such activity across their campus locations. Clearly, Ontario's postsecondary institutions host a substantial volume of events aimed at fostering dialogue and discourse for both their internal and external communities.

We asked about cancellations of events due to concerns about safety or the costs of security. Only one cancellation for safety and security concerns was identified in the period from January through August 2019.

Some institutions took the time to summarize in their reports the risk-management assessment processes they have in place in order to identify and deal with safety and security risks. We believe formal risk-assessment processes to be a best practice.

#### Complaints and issues

Each institutional free speech policy has associated procedures regarding the lodging and resolution of a free speech related complaint. Twenty-one formal complaints were reported across the system, and all of these were, to the involved institutions' knowledge and understanding, resolved internally.

The Premier's August 30, 2018 announcement stated that any complaint against an institution that remained unresolved may be reported to the Ontario Ombudsman. No institution reported knowledge of a referral of a free speech complaint to the Ombudsman. It should be noted that under the Ombudsman Act, Ombudsman investigations are conducted in private (s. 18(2)). Furthermore, the Ombudsman is obligated to inform the institution only in the event that he or she decides to proceed with an investigation (s. 18 (1)). On its website, the Ombudsman's office further states, "Complaints are often resolved without need to contact the relevant organization." So, institutions may not know if a complaint has been lodged against them with the Ombudsman.

#### Housekeeping tips

We would like to share two lessons learned from this first annual report cycle to improve and streamline the process next year (September 2020):

1. While we specified the content to be covered in institutional reports, we did not issue a reporting template. We wanted to give institutions some freedom of expression, with latitude to customize their institutional narrative, and not just respond to a list of requirements. We discovered from their inquiries that many institutions pine for a template. We discovered that absent a template, some institutions did not touch on all the reporting

elements in their narrative that we had specified. We also discovered that for us, the easiest reviews were of submissions that simply treated our list of items as a template.

Next year, we will issue a template.

2. The first year of any new reporting requirement inevitably reveals room for improvement. Definitions (e.g., what is an event?) may not be consistently interpreted. Data (i.e., how many events were held) may not be collected. We will incorporate additional guidance into our instructions next year and share our requirements earlier so institutions can ready themselves for data collection and response. That said, we believe this first cycle of reporting was sufficiently robust and complete to allow us to prepare a province-wide report with confidence, as we have done.

### **Our Concluding Observations**

HEQCO's task is to report on the implementation of the government's free speech initiative, not to pass judgement on or to police institutions.

That said, it is our conclusion that the initial roll out of the free speech initiative across Ontario colleges and universities has met government objectives.

We look forward to submitting our second report next year at this time.

## Appendix A: Institutional Freedom of Speech Policies

UNIVERSITIES	
Algoma	<a href="https://employees.algomau.ca/services/wsDocuments/4158">https://employees.algomau.ca/services/wsDocuments/4158</a>
Brock	<a href="https://brocku.ca/policies/wp-content/uploads/sites/94/Freedom-of-Expression-Policy.pdf">https://brocku.ca/policies/wp-content/uploads/sites/94/Freedom-of-Expression-Policy.pdf</a>
Carleton	<a href="https://carleton.ca/secretariat/wp-content/uploads/Freedom-of-Speech.pdf">https://carleton.ca/secretariat/wp-content/uploads/Freedom-of-Speech.pdf</a>
Guelph	<a href="https://www.uoguelph.ca/secretariat/policy/1.2">https://www.uoguelph.ca/secretariat/policy/1.2</a>
Hearst	<a href="http://www.uhearst.ca/docs/politique-sur-la-liberte-dexpression.pdf">http://www.uhearst.ca/docs/politique-sur-la-liberte-dexpression.pdf</a>
Lakehead	<a href="https://www.lakeheadu.ca/faculty-and-staff/policies/general/node/49726">https://www.lakeheadu.ca/faculty-and-staff/policies/general/node/49726</a>
Laurentian	<a href="https://laurentian.ca/policy-freedom-of-speech">https://laurentian.ca/policy-freedom-of-speech</a>
McMaster	<a href="https://op.mcmaster.ca/wp-content/uploads/2018/10/Guidance-for-Event-Organizers_FINAL_8Jun18.pdf">https://op.mcmaster.ca/wp-content/uploads/2018/10/Guidance-for-Event-Organizers_FINAL_8Jun18.pdf</a>
Nipissing	<a href="https://nipissingu.ca/sites/default/files/2018-12/Free%20Speech%20Policy%20-%20Dec%202018.pdf">https://nipissingu.ca/sites/default/files/2018-12/Free%20Speech%20Policy%20-%20Dec%202018.pdf</a>
OCADU	<a href="https://www2.ocadu.ca/internal-update/ocad-university-freedom-of-expression-statement-and-policies">https://www2.ocadu.ca/internal-update/ocad-university-freedom-of-expression-statement-and-policies</a>
Ottawa	<a href="https://www.uottawa.ca/administration-and-governance/policy-121-statement-free-expression">https://www.uottawa.ca/administration-and-governance/policy-121-statement-free-expression</a>
Ontario Tech U	<a href="https://usgc.uoit.ca/policy/freedom-of-expression-policy.php">https://usgc.uoit.ca/policy/freedom-of-expression-policy.php</a>
Queen's	<a href="https://www.queensu.ca/secretariat/policies/administration-and-operations/free-expression-queens-university-policy">https://www.queensu.ca/secretariat/policies/administration-and-operations/free-expression-queens-university-policy</a>
Ryerson	<a href="https://www.ryerson.ca/freedom-of-speech/">https://www.ryerson.ca/freedom-of-speech/</a>
Toronto	<a href="http://www.governingcouncil.utoronto.ca/Assets/Governing+Council+Digital+Assets/Policies/PDF/ppmay281992.pdf">http://www.governingcouncil.utoronto.ca/Assets/Governing+Council+Digital+Assets/Policies/PDF/ppmay281992.pdf</a>
Trent	<a href="https://www.trentu.ca/governance/sites/trentu.ca.governance/files/documents/Free%20Speech%20Policy%20-%20ACCESSIBLE.pdf">https://www.trentu.ca/governance/sites/trentu.ca.governance/files/documents/Free%20Speech%20Policy%20-%20ACCESSIBLE.pdf</a>
Waterloo	<a href="https://uwaterloo.ca/secretariat/policies-procedures-guidelines/policies/policy-8-freedom-speech-0">https://uwaterloo.ca/secretariat/policies-procedures-guidelines/policies/policy-8-freedom-speech-0</a>
Western	<a href="https://www.uwo.ca/univsec/pdf/policies_procedures/section1/mapp154.pdf">https://www.uwo.ca/univsec/pdf/policies_procedures/section1/mapp154.pdf</a>
Wilfrid Laurier	<a href="https://www.wlu.ca/about/discover-laurier/freedom-of-expression/index.html">https://www.wlu.ca/about/discover-laurier/freedom-of-expression/index.html</a>
Windsor	<a href="https://lawlibrary.uwindsor.ca/Presto/content/Detail.aspx?ctID=OTdhY2QzODgtNjhYi00ZWY0LTg2OTUtNmU5NjEzY2JkMWYx&amp;rID=OTg=&amp;qrs=RmFsc2U=&amp;q=KFVuaXZlcnNpdHlfb2ZfV2luZHNvcl9DZW50cmFsX1BvbGljaWVzLkFsbFRleHQ6KGV4cHJlc3Npb24pKQ==&amp;ph=VHJ1ZQ==&amp;bckToL=VHJ1ZQ==&amp;rtrc=VHJ1ZQ==">https://lawlibrary.uwindsor.ca/Presto/content/Detail.aspx?ctID=OTdhY2QzODgtNjhYi00ZWY0LTg2OTUtNmU5NjEzY2JkMWYx&amp;rID=OTg=&amp;qrs=RmFsc2U=&amp;q=KFVuaXZlcnNpdHlfb2ZfV2luZHNvcl9DZW50cmFsX1BvbGljaWVzLkFsbFRleHQ6KGV4cHJlc3Npb24pKQ==&amp;ph=VHJ1ZQ==&amp;bckToL=VHJ1ZQ==&amp;rtrc=VHJ1ZQ==</a>
York	<a href="https://secretariat-policies.info.yorku.ca/policies/free-speech-statement-of-policy/">https://secretariat-policies.info.yorku.ca/policies/free-speech-statement-of-policy/</a>

<b>COLLEGES</b>	
Algonquin	<a href="https://www.algonquincollege.com/policies/files/2019/01/ADO7_Upholding-Free-Speech-v2.pdf">https://www.algonquincollege.com/policies/files/2019/01/ADO7_Upholding-Free-Speech-v2.pdf</a>
Boréal	<a href="http://www.collegeboreal.ca/wp-content/uploads/2018/12/C-5-Maintien-du-droit-a-la-liberte-dexpression.pdf">http://www.collegeboreal.ca/wp-content/uploads/2018/12/C-5-Maintien-du-droit-a-la-liberte-dexpression.pdf</a>
Cambrian	<a href="https://cambriancollege.ca/wp-content/directory/policies/Corporate%20Policies/General%20Administration/General%20Operations/Cambrian%20Statement%20on%20Upholding%20Free%20Speech.pdf">https://cambriancollege.ca/wp-content/directory/policies/Corporate%20Policies/General%20Administration/General%20Operations/Cambrian%20Statement%20on%20Upholding%20Free%20Speech.pdf</a>
Canadore	<a href="https://cdn.agilitycms.com/canadore-college/Attachments/about-us/policies/Free%20speech%20policy%20statement%202018.pdf">https://cdn.agilitycms.com/canadore-college/Attachments/about-us/policies/Free%20speech%20policy%20statement%202018.pdf</a>
Centennial	<a href="https://p.widencdn.net/ajx9gc/ac100-25-free-speech-policy">https://p.widencdn.net/ajx9gc/ac100-25-free-speech-policy</a>
Conestoga	<a href="https://cms.conestogac.on.ca/sites/corporate-websites/policies/PDFDocuments/Presidents%20Office/Free%20speech%20policy%20-%20English%20version.pdf">https://cms.conestogac.on.ca/sites/corporate-websites/policies/PDFDocuments/Presidents%20Office/Free%20speech%20policy%20-%20English%20version.pdf</a>
Confederation	<a href="http://www.confederationcollege.ca/sites/default/files/uploads/department/ch1-s1-17_free_speech_0.pdf">http://www.confederationcollege.ca/sites/default/files/uploads/department/ch1-s1-17_free_speech_0.pdf</a>
Durham	<a href="https://durhamcollege.ca/wp-content/uploads/322-upholding-free-speech.pdf">https://durhamcollege.ca/wp-content/uploads/322-upholding-free-speech.pdf</a>
Fanshawe	<a href="https://www.fanshawec.ca/sites/default/files/legacy/oldfanshawe/sites/default/files/assets/policies/pdf/c305.pdf">https://www.fanshawec.ca/sites/default/files/legacy/oldfanshawe/sites/default/files/assets/policies/pdf/c305.pdf</a>
George Brown	<a href="https://www.georgebrown.ca/news/free-speech-policy/">https://www.georgebrown.ca/news/free-speech-policy/</a>
Georgian	<a href="https://www.georgiancollege.ca/wp-content/uploads/CS-001-Free-Speech-policy-and-procedure.pdf">https://www.georgiancollege.ca/wp-content/uploads/CS-001-Free-Speech-policy-and-procedure.pdf</a>
Humber	<a href="https://humber.ca/legal-and-risk-management/policies/general-administration/policy-statement-on-upholding-free-speech.html">https://humber.ca/legal-and-risk-management/policies/general-administration/policy-statement-on-upholding-free-speech.html</a>
La Cité	<a href="https://www.collegelacite.ca/directives/humaines/rh-13">https://www.collegelacite.ca/directives/humaines/rh-13</a>
Lambton	<a href="https://www.lambtoncollege.ca/custom/Pages/Policies/Policy.aspx?id=2147523917">https://www.lambtoncollege.ca/custom/Pages/Policies/Policy.aspx?id=2147523917</a>
Loyalist	<a href="https://www.loyalistcollege.com/policy-statement-on-upholding-free-speech/">https://www.loyalistcollege.com/policy-statement-on-upholding-free-speech/</a>
Mohawk	<a href="https://www.mohawkcollege.ca/about-mohawk/leadership-and-administration/policies-and-procedures/policy-statement-on-upholding">https://www.mohawkcollege.ca/about-mohawk/leadership-and-administration/policies-and-procedures/policy-statement-on-upholding</a>
Niagara	<a href="https://www.niagaracollege.ca/practices/view/general-operations/free-speech/">https://www.niagaracollege.ca/practices/view/general-operations/free-speech/</a>
Northern	<a href="http://www.northernc.on.ca/docs/pdfs/Policy_on_Free_Speech_Dec17_2018.pdf">http://www.northernc.on.ca/docs/pdfs/Policy_on_Free_Speech_Dec17_2018.pdf</a>
Sault	<a href="https://www.saultcollege.ca/AboutUs/PDF/Policies/Statement%20of%20Commitment%20-%20Freedom%20of%20Expression.pdf">https://www.saultcollege.ca/AboutUs/PDF/Policies/Statement%20of%20Commitment%20-%20Freedom%20of%20Expression.pdf</a>
Seneca	<a href="http://www.senecacollege.ca/about/policies/free-speech-policy.html">http://www.senecacollege.ca/about/policies/free-speech-policy.html</a>
Sheridan	<a href="https://policy.sheridanc.on.ca/">https://policy.sheridanc.on.ca/</a>
S. S. Fleming	<a href="https://department.flemingcollege.ca/hr/working-at-fleming/policies-and-procedures/">https://department.flemingcollege.ca/hr/working-at-fleming/policies-and-procedures/</a>
St. Clair	<a href="http://www.stclaircollege.ca/boardandstaff/corporatedocuments/scc_policy_5-22.pdf">http://www.stclaircollege.ca/boardandstaff/corporatedocuments/scc_policy_5-22.pdf</a>
St. Lawrence	<a href="https://www.stlawrencecollege.ca/about/college-reports-and-policies/free-speech-policy/">https://www.stlawrencecollege.ca/about/college-reports-and-policies/free-speech-policy/</a>

## Appendix B: 2019 University and College Freedom of Speech Annual Reports

<b>UNIVERSITIES</b>	
Algoma	<a href="https://www.algomau.ca/wp-content/uploads/2019/08/2019-08-26-Algoma-University-Annual-Report-Implementation-of-Freedom-of-Expression-Policy-Policy-AD4-December-21-2018.pdf">https://www.algomau.ca/wp-content/uploads/2019/08/2019-08-26-Algoma-University-Annual-Report-Implementation-of-Freedom-of-Expression-Policy-Policy-AD4-December-21-2018.pdf</a>
Brock	<a href="https://brocku.ca/free-speech/wp-content/uploads/sites/195/Brock-University-Annual-Report-on-Freedom-of-Expression-Jan-July-2019.pdf">https://brocku.ca/free-speech/wp-content/uploads/sites/195/Brock-University-Annual-Report-on-Freedom-of-Expression-Jan-July-2019.pdf</a>
Carleton	<a href="https://carleton.ca/senate/wp-content/uploads/Final-Free-Speech-Annual-Report-August-1-2019.pdf">https://carleton.ca/senate/wp-content/uploads/Final-Free-Speech-Annual-Report-August-1-2019.pdf</a>
Guelph	<a href="https://www.uoguelph.ca/freedom-of-expression/FOE-Annual-Report-September-3-2019.pdf">https://www.uoguelph.ca/freedom-of-expression/FOE-Annual-Report-September-3-2019.pdf</a>
Hearst	<a href="http://www.uhearst.ca/sites/default/files/downloads/rapport-udeh-sur-la-politique-concernant-la-liberte-dexpression.pdf">http://www.uhearst.ca/sites/default/files/downloads/rapport-udeh-sur-la-politique-concernant-la-liberte-dexpression.pdf</a>
Lakehead	<a href="https://www.lakeheadu.ca/sites/default/files/uploads/108/documents/FreeExpressionPolicy-Lakehead-AnnualReport-HECQO-30Aug2019.pdf">https://www.lakeheadu.ca/sites/default/files/uploads/108/documents/FreeExpressionPolicy-Lakehead-AnnualReport-HECQO-30Aug2019.pdf</a>
Laurentian	<a href="https://laurentian.ca/assets/files/Freedom-of-Speech.pdf">https://laurentian.ca/assets/files/Freedom-of-Speech.pdf</a>
McMaster	<a href="https://op.mcmaster.ca/wp-content/uploads/2019/08/FoE_McMaster-Annual-Report_15Aug19.pdf">https://op.mcmaster.ca/wp-content/uploads/2019/08/FoE_McMaster-Annual-Report_15Aug19.pdf</a>
Nipissing	<a href="https://www.nipissingu.ca/sites/default/files/2019-09/Free%20Speech%20Report%20-%20HEQCO.pdf">https://www.nipissingu.ca/sites/default/files/2019-09/Free%20Speech%20Report%20-%20HEQCO.pdf</a>
OCADU	<a href="https://www.ocadu.ca/Assets/documents/OCAD+U+Freedom+of+Expression+Annual+Report+2019.pdf">https://www.ocadu.ca/Assets/documents/OCAD+U+Freedom+of+Expression+Annual+Report+2019.pdf</a>
Ottawa	<a href="https://www.uottawa.ca/vice-president-academic/sites/www.uottawa.ca.vice-president-academic/files/uottawa_report_2019_final_eng.pdf">https://www.uottawa.ca/vice-president-academic/sites/www.uottawa.ca.vice-president-academic/files/uottawa_report_2019_final_eng.pdf</a>
Ontario Tech U	<a href="https://shared.uoit.ca/shared/uoit/documents/uoit-publications/freedom_of_expression_2019_report.pdf">https://shared.uoit.ca/shared/uoit/documents/uoit-publications/freedom_of_expression_2019_report.pdf</a>
Queen's	<a href="https://www.queensu.ca/secretariat/sites/webpublish.queensu.ca.uslclwww/files/files/Free%20Speech%20Reporting%202018-19.pdf">https://www.queensu.ca/secretariat/sites/webpublish.queensu.ca.uslclwww/files/files/Free%20Speech%20Reporting%202018-19.pdf</a>
Ryerson	<a href="https://www.ryerson.ca/content/dam/freedom-of-speech/Ryerson-FreeSpeechReportbackFINAL.pdf">https://www.ryerson.ca/content/dam/freedom-of-speech/Ryerson-FreeSpeechReportbackFINAL.pdf</a>
Toronto	<a href="http://freespeech.utoronto.ca/wp-content/uploads/U.-Toronto-2019-Freedom-Speech-Annual-Report.pdf">http://freespeech.utoronto.ca/wp-content/uploads/U.-Toronto-2019-Freedom-Speech-Annual-Report.pdf</a>
Trent	<a href="https://www.trentu.ca/president/free-speech-policy">https://www.trentu.ca/president/free-speech-policy</a>
Waterloo	<a href="https://uwaterloo.ca/secretariat/annual-report-re-policy-8-freedom-speech-2019">https://uwaterloo.ca/secretariat/annual-report-re-policy-8-freedom-speech-2019</a>
Western	<a href="https://www.uwo.ca/ipb/publicaccountability/documents/HEQCO_FoE_report_08-19.pdf">https://www.uwo.ca/ipb/publicaccountability/documents/HEQCO_FoE_report_08-19.pdf</a>
Wilfrid Laurier	<a href="https://wlu.ca/about/discover-laurier/freedom-of-expression/assets/resources/annual-report-on-free-speech-policy-2019.html">https://wlu.ca/about/discover-laurier/freedom-of-expression/assets/resources/annual-report-on-free-speech-policy-2019.html</a>
Windsor	<a href="http://www.uwindsor.ca/provost/sites/uwindsor.ca.provost/files/freedom_of_expression_implementation_annual_report_university_of_windsor.pdf">http://www.uwindsor.ca/provost/sites/uwindsor.ca.provost/files/freedom_of_expression_implementation_annual_report_university_of_windsor.pdf</a>
York	<a href="https://secretariat.info.yorku.ca/files/Freedom-of-Speech-Annual-Report-2019.pdf">https://secretariat.info.yorku.ca/files/Freedom-of-Speech-Annual-Report-2019.pdf</a>

<b>COLLEGES</b>	
Algonquin	<a href="https://www.algonquincollege.com/reports/files/2019/09/2019-HEQCO-Freedom-of-Speech-Annual-Report-FINAL-Algonquin-College.pdf">https://www.algonquincollege.com/reports/files/2019/09/2019-HEQCO-Freedom-of-Speech-Annual-Report-FINAL-Algonquin-College.pdf</a>
Boréal	<a href="http://www.collegeboreal.ca/wp-content/uploads/2019/08/Rapport-annuel-sur-la-libert%C3%A9-d'expression-2018-19.pdf">http://www.collegeboreal.ca/wp-content/uploads/2019/08/Rapport-annuel-sur-la-libert%C3%A9-d'expression-2018-19.pdf</a>
Cambrian	<a href="https://cambriancollege.ca/wp-content/uploads/2019/08/FreeSpeech_AnnualReport_19.pdf">https://cambriancollege.ca/wp-content/uploads/2019/08/FreeSpeech_AnnualReport_19.pdf</a>
Canadore	<a href="https://cdn.agilitycms.com/canadore-college/Attachments/about-us/policies/Annual%20Free%20Speech%20Report.pdf">https://cdn.agilitycms.com/canadore-college/Attachments/about-us/policies/Annual%20Free%20Speech%20Report.pdf</a>
Centennial	<a href="https://p.widencdn.net/dkaxll/Centennial-College-Free-Speech-Annual-Report_2019">https://p.widencdn.net/dkaxll/Centennial-College-Free-Speech-Annual-Report_2019</a>
Conestoga	<a href="https://cms.conestogac.on.ca/sites/corporate-websites/about/College%20Reports/Free%20Speech%20Report%202019.pdf">https://cms.conestogac.on.ca/sites/corporate-websites/about/College%20Reports/Free%20Speech%20Report%202019.pdf</a>
Confederation	<a href="https://www.confederationcollege.ca/sites/default/files/uploads/department/ch1-s1-17_heqco_letter.pdf">https://www.confederationcollege.ca/sites/default/files/uploads/department/ch1-s1-17_heqco_letter.pdf</a>
Durham	<a href="https://durhamcollege.ca/wp-content/uploads/free-speech-policy-annual-Report.pdf">https://durhamcollege.ca/wp-content/uploads/free-speech-policy-annual-Report.pdf</a>
Fanshawe	<a href="https://www.fanshawec.ca/sites/default/files/uploads/strategicplan/free_speech_annual_report_2019.pdf">https://www.fanshawec.ca/sites/default/files/uploads/strategicplan/free_speech_annual_report_2019.pdf</a>
George Brown	<a href="https://www.georgebrown.ca/policies/freedom-of-expression/">https://www.georgebrown.ca/policies/freedom-of-expression/</a>
Georgian	<a href="https://www.georgiancollege.ca/wp-content/uploads/Georgian-College-Free-Speech-Annual-Report-August-2019.pdf">https://www.georgiancollege.ca/wp-content/uploads/Georgian-College-Free-Speech-Annual-Report-August-2019.pdf</a>
Humber	<a href="https://humber.ca/sites/default/files/uploads/documents/annual_report_on_freedom_of_speech.pdf">https://humber.ca/sites/default/files/uploads/documents/annual_report_on_freedom_of_speech.pdf</a>
La Cité	<a href="https://www.collegelacite.ca/documents/10315/14318779/La_Cite_-_Rapport_annuel_Liberte_expression.pdf/c7250cda-4f04-e9cd-3414-074bb3d8eb9e">https://www.collegelacite.ca/documents/10315/14318779/La_Cite_-_Rapport_annuel_Liberte_expression.pdf/c7250cda-4f04-e9cd-3414-074bb3d8eb9e</a>
Lambton	<a href="https://www.lambtoncollege.ca/uploadedFiles/LambtonCollege/Content/About_Us/Our_College/College_Reports_and_Plans/Free%20Speech%20Annual%20Report.pdf">https://www.lambtoncollege.ca/uploadedFiles/LambtonCollege/Content/About_Us/Our_College/College_Reports_and_Plans/Free%20Speech%20Annual%20Report.pdf</a>
Loyalist	<a href="https://www.loyalistcollege.com/wp-content/uploads/2019/09/Freedom-of-Speech-Report-2019.pdf">https://www.loyalistcollege.com/wp-content/uploads/2019/09/Freedom-of-Speech-Report-2019.pdf</a>
Mohawk	<a href="https://www.mohawkcollege.ca/about-mohawk/leadership-and-administration/policies-and-procedures/policy-statement-on-upholding">https://www.mohawkcollege.ca/about-mohawk/leadership-and-administration/policies-and-procedures/policy-statement-on-upholding</a>
Niagara	<a href="https://www.niagaracollege.ca/wp-content/uploads/Free-Speech-Annual-Report-to-HEQCO.pdf">https://www.niagaracollege.ca/wp-content/uploads/Free-Speech-Annual-Report-to-HEQCO.pdf</a>
Northern	<a href="http://www.northern.on.ca/wp-content/uploads/2019/09/2019-Free-Speech-Annual-Report-Northern-College.pdf">http://www.northern.on.ca/wp-content/uploads/2019/09/2019-Free-Speech-Annual-Report-Northern-College.pdf</a>
Sault	<a href="https://www.saultcollege.ca/AboutUs/PDF/Policies/Sault%20College%20Free%20Speech%20Report.pdf">https://www.saultcollege.ca/AboutUs/PDF/Policies/Sault%20College%20Free%20Speech%20Report.pdf</a>
Seneca	<a href="https://www.senecacollege.ca/about/reports/free-speech/">https://www.senecacollege.ca/about/reports/free-speech/</a>
Sheridan	<a href="https://www.sheridancollege.ca/about/administration-and-governance.aspx">https://www.sheridancollege.ca/about/administration-and-governance.aspx</a>
S. S. Fleming	<a href="https://flemingcollege.ca/PDF/Fleming-College-Free-Speech-Annual-Report.pdf">https://flemingcollege.ca/PDF/Fleming-College-Free-Speech-Annual-Report.pdf</a>
St. Clair	<a href="http://www.stclaircollege.ca/boardandstaff/corporatedocuments/Free-Speech-Annual-Report-2019.pdf">http://www.stclaircollege.ca/boardandstaff/corporatedocuments/Free-Speech-Annual-Report-2019.pdf</a>
St. Lawrence	<a href="https://www.stlawrencecollege.ca/about/college-reports-and-policies/free-speech-policy/">https://www.stlawrencecollege.ca/about/college-reports-and-policies/free-speech-policy/</a>



# COMMITTEE REPORT

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**SESSION:**

Public   
 Non-Public

**ACTION REQUESTED:**

Decision   
 Consultation   
 Information

**TO:** Audit & Finance Committee (A&F)

**DATE:** November 20, 2019

**FROM:** Cheryl Foy, University Secretary & General Counsel

**SUBJECT:**

1. ACCESSIBILITY POLICY
2. PROCEDURES FOR ACCOMMODATING EMPLOYEES WITH DISABILITIES
3. PROCEDURES FOR ACCOMMODATING STUDENTS WITH DISABILITIES

**AUDIT & FINANCE COMMITTEE MANDATE:**

- Under the University’s Act, section 9 (1), the Board of Governors has the power: “to establish academic, research, service and institutional policies and plans and to control the manner in which they are implemented”. The university’s Policy Framework is a key institutional policy that delegates the Board’s power, establishing categories of policy instruments with distinct approval pathways.
- Under the Policy Framework, the Board of Governors is the approval authority for this policy and A&F is the approval authority for the related procedures.
- We are submitting this report and policy documents to A&F to request:
  - (a) the committee’s recommendation of the Accessibility Policy for approval by the Board; and
  - (b) the committee’s approval of the related procedures.

**BACKGROUND/CONTEXT & RATIONALE:**

- The directorate, who enforces *Accessibility for Ontarians with Disabilities Act* (AODA) accessibility compliance requirements, requires organizations to submit accessibility compliance reports. The report is a self-assessment of the organizations’ status with all provincial accessibility requirements.
- AODA requirements came into force on January 1, 2010 with a staggered implementation since that time, requiring policies, procedures, processes and plans.
- The Office of University Secretary and General Counsel (USGC) is currently working towards completing the 2019 AODA Compliance Report that is due on or before December 31, 2019. The last report having been filed in December 2017.
- As part of this requirement, USGC and Student Accessibility Services are revising the Accessibility Policy and the Procedures for Accommodating Students with Disabilities, respectively. While HR has developed a new procedure to provide accommodations for employees with disabilities at the University.

- Notable changes include: a new and robust feedback process that allows Ontario Tech to receive and respond to feedback about our accessibility program in a variety of ways. The Feedback Accessibility Form which will be available on the OntarioTech website. Employees and Students can use this accessible form to submit feedback/comments on any accessibility related matters. All feedback/comments will be submitted to aoda@ontariotechu.ca to the Office of the University Secretary and General Counsel. Our office will also accept feedback in person, by phone and by mail. Our office will be responsible for tracking all feedback received through this channel for reporting purposes, directing any issues to the respective departments, documenting resulting actions, and monitoring their progress to ensure future compliance.
- A cross-functional Accessibility Working Group will be re-established with members from the university community. The Accessibility Working Group's mandate will be to steer accessibility policy, procedures and training through the review of best practices, university feedback and alignment with the university's overall strategic initiatives.

## **CONSULTATION PROCESS:**

### **List of Consultation Dates:**

- Online Consultation, October 8 to 28, 2019
- Policy Advisory Committee, October 15, 2019
- Administrative Leadership Team, October 16, 2019 – in person consultation
- Audit & Finance Committee, November 20 – recommendation of policy & approval of procedures
- Board of Governors, November 28 - approval

### **Comments received and response:**

#### General (all policy instruments)

- Ensuring Definitions section is updated to reflect the terms defined in associated legislation; ensure policy and procedures use same definitions.
- Align language relating to working towards an inclusive University environment in both procedures.

#### Accessibility policy

- Policy Owner changed to University Secretary and General Counsel (USGC) office.

#### Procedures for Accommodating Employees with disabilities

- Define “essential duties”
- Add mention of privacy and confidentiality of information shared during accommodation process
- Add mention of timing relating to responding to accommodation requests.
- Greater clarity on point that all medical documentation must be submitted directly to disability management service provider.
- Ensure job applicants are required to contact Human Resources directly regarding accommodation needs during selection process, not the Executive Assistant or Hiring Manager to decrease risk of discriminatory claims.

#### Procedures for Accommodating Students with disabilities

- Define “essential requirements” and “essential competencies”
- Define how Deans will determine “undue hardship” by requiring that they must consult with SAS and the USGC office before reaching a final decision.

**IMPLICATIONS:**

- In order to demonstrate the University's compliance with AODA and its regulation, the University's Accessibility policies and procedures has been reviewed and revised.

**COMPLIANCE WITH POLICY/LEGISLATION:**

- *Accessibility for Ontarians with Disabilities Act, 2005, S.O. 2005*
- *Freedom of Information and Protection of Privacy Act, R.S.O. 1990, c. F.31*
- *Human Rights Code, R.S.O. 1990, c. H.19*
- *Integrated Accessibility Standards Regulation, O. Reg. 191/11*

**NEXT STEPS:**

- The policy will be presented to the Board of Governors for approval on November 28, 2019.

**MOTIONS:**

- (a) *That the Audit and Finance Committee hereby recommends the Accessibility Policy, as presented, for approval by the Board of Governors.*
- (b) *That the Audit and Finance Committee hereby approves the Procedures for Accommodating Employees with Disabilities and Procedures for Accommodating Students with Disabilities, as presented.*

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**SUPPORTING REFERENCE MATERIALS:**

- Accessibility policy
- Procedures for accommodating employees with disabilities
- Procedures for accommodating students with disabilities



Classification	LCG 1103
Framework Category	Legal, Compliance & Governance
Approving Authority	Board of Governors
Policy Owner	University Secretary
Approval Date	DRAFT-for review
Review Date	DRAFT September 2019
Supersedes	Accessibility Policy, June 2010

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## ACCESSIBILITY POLICY

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### 1. PURPOSE

This policy affirms the OntarioTech University's commitment to promoting an accessible environment for work, study and in an effort to meet the requirements as set out in the *Ontario Human Rights Code* and the *Accessibility for Ontarians with Disabilities Act (AODA)* and associated regulations.

### 2. DEFINITIONS

For the purposes of this Policy the following definitions apply:

"Accessible Formats" may include, but are not limited to, large print, recorded audio and electronic formats, braille and other formats usable by persons with disabilities.

"Accommodation" means an adaptation or adjustment made to enable a person with a disability to demonstrate the essential competencies of their program/profession or fulfill the essential requirements of a particular course and/or program. The requirement, qualification or factor must be reasonable and bona-fide in the circumstances. Accommodations are specific to each individual and may include, but are not limited to:

- Human support services such as sign language interpreters, readers, classroom assistants etc.
- Assistance obtaining class notes
- Books and materials in an accessible format
- Disability related counselling and support
- Test and exam accommodations (e.g., extra time, technology, software)
- Access to specialized software, such as text-to-speech or speech-to-text
- Specialized support from a Learning Strategist and/or Assistive Technologist (i.e. technical aids and assistive devices)
- Workstation and/or office modifications
- Job redesign
- Flexible or alternative work schedules
- Temporary re-assignments

~~"Accommodation" means an adaptation or adjustment made to enable a person with a disability to perform the essential duties or requirements of the position. The requirement, qualification or factor must be reasonable and bona-fide in the circumstances. Accommodation may include, but is not limited to:~~

- ~~• Human support services such as sign language interpreters, readers, etc.~~
- ~~• Technical aids and assistive devices~~
- ~~• Workstation and/or office modifications~~
- ~~• Job redesign~~

- ~~• Flexible or alternative work schedules~~
- ~~• Temporary re-assignments~~

“Barrier” means anything that prevents a person with a disability from fully participating in all aspects of society because of his or her disability, including a physical barrier, an architectural barrier, an information or communications barrier, an attitudinal barrier, a technological barrier, a policy or a practice.

“Communication Supports” may include, but are not limited to, captioning, alternative and augmentative Communication Supports, plain language, sign language and other supports that facilitate effective communications.

“Disability” means:

- a) Any degree of physical disability, infirmity, malformation or disfigurement that is caused by bodily injury, birth defect or illness and, without limiting the generality of the foregoing, including diabetes mellitus, epilepsy, and any degree of paralysis, amputation, lack of physical coordination, blindness or visual impediment, deafness or hearing impediment, or physical reliance on a guide dog or on a wheel chair or other remedial appliance or device;
- b) A condition of mental impairment or developmental Disability;
- c) A learning disability, or a dysfunction in one or more of the processes involved in understanding or using symbols or spoken language;
- d) A mental disorder; or
- e) An injury or disability for which benefits were claimed or received under the *Workplace Safety and Insurance Act*.

“Disability” should be interpreted in broad terms. It includes both present and past conditions, as well as a subjective component, namely, one based on perception of disability.

“Disability” covers a broad range and degree of conditions, some visible and some not visible. A disability may have been present from birth, caused by an accident, or developed over time.

There are physical, mental and learning disabilities, mental disorders, hearing or vision disabilities, epilepsy, mental health disabilities and addictions, environmental sensitivities, and other conditions.

Disability is an evolving concept; a disability may be the result of combinations of impairments and environmental barriers, such as attitudinal barriers, inaccessible information, an inaccessible built environment or other barriers that affect people’s full participation in society.

“Employee” means all paid full and part-time staff, temporary, seasonal, contract, faculty, student employees at Ontario Tech.

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“Essential Competencies” means the knowledge, skills, judgement, values, beliefs etc. that are essential to the course/program/degree/profession that a student must be able to demonstrate.

“Essential Requirements” means the knowledge and skills that must be acquired or demonstrated in order for a student to successfully meet the learning objectives of a particular course and/or program.

“Human Resources Leader” means the person below the President, with responsibility for the Human Resources portfolio.

“Undue Hardship” as defined in the *Ontario Human Rights Code* prescribes three considerations in assessing whether an accommodation could cause undue hardship: Cost; Outside Sources of Funding; and Health and Safety Considerations. Additional information is available on the Ontario Human Rights Commission website (URL: [www.ohrc.on.ca](http://www.ohrc.on.ca)).

### 3. POLICY

OntarioTech University is committed to creating a campus community that is inclusive of all individuals and ensures equal opportunity among its members to achieve success in their academic and/or employment endeavours. The university recognizes that successful learning and employment outcomes are the result of a shared responsibility and commitment on the part of students, faculty and staff, and expects that all members of the community will advance the ongoing development of an environment that is accessible and inclusive, while actively working to identify, remove and prevent barriers to persons with disabilities up to the point of undue hardship.

To that end, OntarioTech University is committed to achieving the following accessibility goals as required by the *Accessibility for Ontarians with Disabilities Act (AODA)* and associated regulations:

- a) **Access to Goods and Services:** Providing access to goods and services in a manner that respects the dignity and independence of persons with disabilities, integrated to the extent possible with services provided to others, and offered in a way that gives persons with disabilities an opportunity to benefit from these services that is equal to service that is given to others. For further information please refer to the University’s Accessible Customer Service Policy.
- b) **Information and Communications:** Providing university information and communications to persons with disabilities upon request in Accessible Formats, or with communications supports, in a timely manner that takes into account their accessibility needs, at a cost that is no more than the cost to other persons, and in consultation with the person making the request to determine its suitability.
- c) **Websites and Web Content:** Ensuring that the internet websites that are accessible to the public, and the web content on those sites, conform to the World Wide Web Consortium Web Content Accessibility Guidelines (WCAG) 2.0 in accordance with the AODA standards.

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- d) **Educational Resources:** Providing educational or training resources offered by the university to persons with disabilities in an accessible format that takes into account their accessibility needs, where notification of need is given.
- e) **Individualized Accommodations:** For students with disabilities, the university provides reasonable academic accommodations in accordance with the University's Procedures on Academic Accommodation for Students with Disabilities. For employees with disabilities, the university provides individualized accommodation in accordance with the Procedures for Accommodation for Employees with Disabilities. Each person with a disability will be considered individually, on a case-by-case basis and every attempt will be made to provide disability-related accommodation up to the point of undue hardship.
- f) **Library Resources:** Providing, procuring or acquiring by other means upon request print, digital or multimedia resources or materials in an accessible or conversion ready format for a person with a Disability.
- g) **Public Information:** Making emergency procedures, plans and public safety information available to the public and upon request providing that information in an accessible format or with appropriate Communication Supports.
- h) **Accessibility Training:** Requiring the completion of accessibility training for all employees, volunteers and others who deal with members of the public or other third parties and every person who participates in developing the policies, practices and procedures governing the provision of goods or services to members of the public or other third parties. For further information please refer to the University's Accessible Customer Service Policy.
- i) **Education and Awareness:** Providing educational programs to employees appropriate to their duties that support the goals of the AODA and the *Human Rights Code* as it pertains to persons with disabilities, including accessible program or course delivery and instruction.
- j) **Procurement:** Incorporating accessibility criteria and features when procuring or acquiring goods, services and facilities. For more information, please refer to the University's Procurement of Goods and Services Policy, Procedures and Guidelines.
- k) **Transportation:** Providing accessible vehicles or equivalent services upon request where transportation services are provided.
- l) **Accessibility Plan:** Establishing and implementing a multi-year accessibility plan that outlines OntarioTech University's strategy to prevent and remove barriers to meet the requirements of the AODA regulations within the specified timelines. In developing the plan, the university will broadly consult with

members of the university community, including persons with disabilities. The plan will be posted on the university website. The university's progress in achieving its goals will be monitored and documented on an annual basis, and reviewed and updated every five years

- m) **Feedback process:** Encouraging individuals to provide feedback to the university on its efforts to meet goods and service delivery expectations while responding to the requests of individuals with disabilities. Feedback about this Policy or its implementation can be submitted by telephone, in person, in writing or in electronic format (*See the Feedback Accessibility Form*).

The Office of the University Secretary and General Counsel (USGC) is responsible for tracking and monitoring all feedback, relaying any comments/concerns to the respective departments and detailing resulting actions, as applicable.

The University will ensure the feedback process is accessible to persons with disabilities by providing, or arranging for the provision of, accessible formats and communication supports, on request.

Note: For policy or legislative inquiries, please contact [aoda@ontariotechu.ca](mailto:aoda@ontariotechu.ca)

Privacy will be respected and all feedback will be reviewed for possible action that can be taken to improve University services. Feedback received will be redirected to the appropriate contact person within the relevant unit of the University, as appropriate.

- n) Where possible, complaints will be addressed immediately. However, some complaints may require more effort to address, and must be reviewed for action, possibly involving a number of elements within the University. Every effort will be made to provide the acknowledgement of feedback in a timely and effective manner. The acknowledgement will indicate how the matter will be addressed and when the individual will be notified of the outcome. The University will follow up on any actions arising from the feedback and the timeframe for implementation will be provided as part of the notification of outcome. Feedback/responses will be in a format that is accessible to the individual.
- o) **Accessibility Working Group:** Establishing and supporting a working group to monitor the university's progress in achieving the goals set out in the multi-year accessibility plan and to identify and recommend changes to remove or prevent barriers to persons with disabilities.
- p) **Policies, Procedures and Communication Methods:** Reviewing the university's policies, procedures and methods of communication on a regular basis to ensure that they continue to take into account the needs of persons with disabilities.

#### 4. SCOPE AND AUTHORITY

This policy applies to all members of the OntarioTech University community, including students, faculty, staff, volunteers, governors, contractors, consultants and visitors to the campus who



share in the responsibility to foster an environment that is accessible and inclusive, and to identify, remove and prevent barriers to persons with disabilities. Unit heads are additionally responsible for providing support, guidance and education while ensuring compliance with this policy.

The Office of University Secretary and General Counsel ~~The Human Resources Leader or successor thereof~~, is the Policy Owner and is responsible for overseeing the implementation, administration and interpretation of this Policy.

The Office of University Secretary and General Counsel is responsible for the interpretation and administrative direction of this policy and its associated policies and procedures to ensure their compliance with the broader regulatory requirements.

**5. PROCEDURES**

The University will continue to review and develop policies, procedures and regulations to promote the ongoing creation of an accessible environment for work and study and to meet the requirements as set out in the *Ontario Human Rights Code* and the *Accessibility for Ontarians with Disabilities Act* (AODA) and associated regulations.

**6. MONITORING AND REVIEW**

These Procedures will be reviewed as necessary and at least every three years. The Provost and Vice-President Academic, or successor thereof, is responsible to monitor and review these Procedures.

**7. RELEVANT LEGISLATION**

*Accessibility for Ontarians with Disabilities Act, 2005, S.O. 2005*

*Human Rights Code, R.S.O. 1990, c. H.19*

*Integrated Accessibility Standards Regulation, O. Reg. 191/11*

*Freedom of Information and Protection of Privacy Act, R.S.O. 1990, Chapter F.31*

**8. RELATED POLICIES, PROCEDURES AND RESOURCES**

OntarioTech Feedback Accessibility Form

OntarioTech University Academic Accommodations for Students with Disabilities Procedures

OntarioTech University Procedures for Accommodation of Employees with Disabilities

OntarioTech University Accessible Customer Service Policy

OntarioTech University Procurement Policy and Procedures



## FEEDBACK ACCESSIBILITY FORM

For any feedback regarding the accessibility of OntarioTech's goods and services, including documents and accessible format requests, please complete the form below.

Note: If you wish to be contacted, please enter your name and contact information.

**Name:**

**Email or Phone Number:**

**Affiliation with OntarioTech University:**

- Student
- Staff
- Faculty
- Alumni
- Visitor

**Please give us your feedback or comments:**

Ontario Tech University protects your privacy and your personal information. Your personal information will not be shared with any other parties or used for any other purpose than for communicating with you regarding the comments or concerns that you have raised. We will make all every reasonable efforts to address concerns or complaints immediately.

**SUBMIT**

**HELP**

If you are experiencing difficulties completing this form, please submit your feedback using the following alternative methods:

- via email to [aoda@ontariotechu.ca](mailto:aoda@ontariotechu.ca);
- by telephone at 905.721.2000 ext. 6752 (Shay Babb, Copyright & Compliance Officer)
- by mail to 2000 Simcoe Street North, Oshawa, Ontario L1G 0C5, Canada
- in person to 61 Charles Street, Oshawa, Ontario L1H 4X8, 3<sup>rd</sup> floor, DTA 343.

DRAFT



Classification Number	
Parent Policy	Accessibility Policy
Framework Category	Legal, Compliance and Governance
Approving Authority	
Policy Owner	
Approval Date	DRAFT-for review
Review Date	DRAFT-September 2019
Supersedes	

## PROCEDURES FOR ACCOMMODATING EMPLOYEES AND JOB APPLICANTS WITH DISABILITIES

### PURPOSE

1. Consistent with the OntarioTech’s Policy on Accessibility and its commitment to creating a University community that is inclusive of all individuals, this document is designed to inform and guide in the provision of reasonable accommodations for employees and job applicants with disabilities.

### DEFINITIONS

2. For the purposes of these Procedures the following definitions apply:

“Accommodation” means an adaptation or adjustment made to enable a person with a disability to demonstrate the essential duties of their program/profession or fulfill the essential competencies of a particular course and/or program. The requirement, qualification or factor must be reasonable and bona-fide in the circumstances. Accommodations are specific to each individual and may include, but are not limited to:

- Human support services such as sign language interpreters, readers, classroom assistants etc.
- Assistance obtaining class notes
- Books and materials in an accessible format
- Disability related counselling and support
- Test and exam accommodations (e.g., extra time, technology, software)
- Access to specialized software, such as text-to-speech or speech-to-text
- Specialized support from a Learning Strategist and/or Assistive Technologist (i.e. technical aids and assistive devices)
- Workstation and/or office modifications
- Job redesign
- Flexible or alternative work schedules
- Temporary re-assignments

“Barrier” means anything that prevents a person with a disability from fully participating in all aspects of society because of his or her disability, including a physical barrier, an architectural barrier, an information or communications barrier, an attitudinal barrier, a technological barrier, a policy or a practice.

“Communication Supports” may include, but are not limited to, captioning, alternative and augmentative Communication Supports, plain language, sign language and other

supports that facilitate effective communications.

“Disability” means:

a) Any degree of physical disability, infirmity, malformation or disfigurement that is caused by bodily injury, birth defect or illness and, without limiting the generality of the foregoing, including diabetes mellitus, epilepsy, and any degree of paralysis, amputation, lack of physical coordination, blindness or visual impediment, deafness or hearing impediment, or physical reliance on a guide dog or on a wheel chair or other remedial appliance or device;

b) A condition of mental impairment or developmental disability;

c) A learning disability, or a dysfunction in one or more of the processes involved in understanding or using symbols or spoken language;

d) A mental disorder; or

e) An injury or disability for which benefits were claimed or received under the *Workplace Safety and Insurance Act*.

“Disability” should be interpreted in broad terms. It includes both present and past conditions, as well as a subjective component, namely, one based on perception of disability.

Disability covers a broad range and degree of conditions, some visible and some not visible. A disability may have been present from birth, caused by an accident, or developed over time.

There are physical, mental and learning disabilities, mental disorders, hearing or vision disabilities, epilepsy, [mental health disabilities and addictions](#), environmental sensitivities, and other conditions.

Disability is an evolving concept; a disability may be the result of combinations of impairments and environmental barriers, such as attitudinal barriers, inaccessible information, an inaccessible built environment or other barriers that affect people’s full participation in society

“Employee” means all paid full and part-time staff, temporary, seasonal, contract, faculty, student Employees at Ontario Tech.

“Essential Duties” means the vital or indispensable aspects of a job.

“Human Resources Leader” means the person below the President, with responsibility for the Human Resources portfolio.

“Manager” means an individual who has full supervisory responsibility for an Employee, or is responsible for making hiring decisions.

“Undue Hardship” as defined in The Ontario Human Rights Code prescribes three considerations in assessing whether an accommodation could cause undue hardship:

Cost; Outside Sources of Funding; and Health and Safety Considerations. Additional information is available on the Ontario Human Rights Commission website (URL: [www.ohrc.on.ca](http://www.ohrc.on.ca)).

## **SCOPE AND AUTHORITY**

- 3.** These Procedures apply to any University Employee with a Disability (i.e. full-time, part-time, temporary, seasonal, contract, faculty, student Employees), volunteers and job applicants with disabilities as well as faculty and staff at Ontario Tech who share responsibility for fostering an accessible and inclusive environment, and for identifying, preventing and removing barriers for those mentioned above. . The Human Resources department is additionally responsible for providing support, guidance and education to ensure compliance with these procedures.
- 4.** The Human Resources Leader, or successor thereof, is the Policy Owner and is responsible for overseeing the implementation, administration and interpretation of these Procedures.

## **PROCEDURES**

### **5. General Regulations**

- 5.1.** Employees seeking Accommodation must make their requests to Human Resources (HR) department in a timely manner, and provide relevant documentation to verify the effect of their Disability and to allow the University to determine appropriate Accommodations.
- 5.2.** The University will ensure the dignity and privacy of Employees with disabilities is respected by only requiring documentation relating to functional limitation associated with the disability, rather than the details of the diagnosis.
- 5.3.** In cases where the Employee is in the process of obtaining appropriate documentation, the HR department will consider in good faith and on a case-by-case basis whether interim Accommodation measures can be implemented temporarily.
- 5.4.** The University will endeavor to respond to all disability-related accommodation requests in a timely manner.
- 5.5.** Accommodation decisions will be made in accordance with the Ontario Human Rights Code and associated policies. Accommodations will be provided in a way that respects the dignity of employees, volunteers and job applicants with disabilities and encourages integration and equality of opportunity.

### **6. Employees**

- 6.1.** The need for Accommodation is identified by an Employee at the earliest possible opportunity. While a request for Accommodation is generally raised by an Employee, it is also recognized that a Manager, health care provider, union representative, or other source may raise an Accommodation issue.

- 6.2.** Ontario Tech is committed to protecting the privacy of Employees with disabilities. At the same time, sufficient information relating to the functional limitation associated with the disability is required to reasonably evaluate and respond to an Employee's request for accommodation. The Employee with the disability will submit the necessary medical documentation and forms to the University's Disability management service provider for assessment. The Disability management service provider will review the medical information submitted and communicate to the Human Resources (HR) representative the Employee's functional limitations associated with the disability. Once the disability-related needs are confirmed with the Disability management service provider, the HR representative will work with the Employee and the Manager to facilitate the Accommodation request.
- 6.3.** In order to determine Accommodation needs, the Employee is expected to actively participate in the Disability management process and consultations with both the Manager, HR representative and the Disability management service provider. Active participation includes completion of required Disability management forms and submission of necessary medical documentation. The Employee with the Disability is also expected to assist in securing appropriate Accommodation, accepting an offer of Accommodation that meets their needs, even if it is not their preferred Accommodation option and facilitating the implementation of an Accommodation plan.
- 6.4.** The Employee will complete the required forms provided by the Disability management service provider and submit supporting medical documentation as necessary and requested by the Disability management service provider. All medical documentation must be submitted by the Employee directly to Disability management service provider.
- 6.5.** The Disability management service provider may request any additional medical documentation to assist in determining the appropriate Accommodation requirements. In such cases, the Employee will sign the necessary consent forms to permit enquiries and release of information. Information obtained will be maintained in accordance with the policy provisions concerning confidentiality. The Disability management service provider will ensure that there is sufficient and appropriate medical information to validate the functional limitations and restrictions to make the appropriate Accommodation assessment.
- 6.6.** Under normal circumstances, it will be the responsibility of the HR representative to develop an Accommodation plan for the Employee that satisfies the University's duty to accommodate. The efforts involved to develop a plan will first focus on the Employee's existing position; however, where necessary and applicable, the University's duty to accommodate may involve a vacant or encumbered position elsewhere in the University. In some cases, it will not be possible to accommodate an Employee's needs because such Accommodation will cause undue hardship to the University. For example, the duty to accommodate does not extend so far as to require employers to create a position for an Employee who is otherwise incapable

of performing the Essential Duties of their existing job or of some other existing position; this would amount to Undue Hardship.

- 6.7.** The HR representative, will consult with the Employee, the Manager, and Disability management service provider to develop an Accommodation plan, and consider the following questions:
- What aspects of the job function are impacted by the Employee’s disability?
  - Would removing the function fundamentally change the job?
  - Is the function marginal or incidental to the job purpose?
  - Is the job specialized, so that the person in the job is hired for their expertise to accomplish the function?
  - Is the function actually accomplished by all current incumbents?
  - Does the incumbent spend a substantial amount of time accomplishing the function?
  - Would the consequences be serious if the function was not accomplished?
  - Are there a limited number of Employees available among whom the function can be distributed?

- 6.8.** The Accommodation plan will specify the details of the Accommodation including the following:
- who is responsible;
  - who will be involved (including co-workers, if applicable);
  - the time lines for putting the Accommodation in place;
  - the duration; and
  - the nature of follow-up evaluation.

In cases of job duty modification a regular review(s) should be carried out by the Manager and followed up in writing to all appropriate parties.

- 6.9.** If applicable, the HR representative will consult with the Health and Safety Officer and/or Campus Safety and Security Services regarding any health and safety issues.
- 6.10.** The HR representative will determine whether the support of other resources (i.e. external Disability service providers) is necessary, and facilitate contact with them on specific issues.
- 6.11.** The HR representative will consider the Employee’s preferred Accommodation measure. Where multiple Accommodation measures are identified that each meet the Employee’s disability-related Accommodation needs, the manager, in consultation with the HR representative, may select the Accommodation measure that results in the least disruption and/or cost to the employer.
- 6.12.** The HR representative will provide a centralized coordinating function in terms of resolving, and monitoring all Employee Accommodation issues within the University.



- 6.13.** In the instance that HR representative is unable to resolve an Accommodation issue, or before determining that Accommodation cannot be made because it would constitute an undue hardship, the HR representative will consult with the Office of the University Secretary and General Counsel (USGC).
- 7. Job Applicants**
- 7.1.** The job applicant will notify the HR representative of any disability-related Accommodation needs or requests. The HR representative will be responsible for providing reasonable and appropriate Accommodation. The HR representative will identify whether further consultation is required on a case-by-case basis to ensure an appropriate Accommodation is provided.
- 7.2.** If a job applicant indicates the need for Accommodation upon acceptance of a job offer, the steps to be taken for Accommodation will follow the procedures for Employees, as described above.

#### **MONITORING AND REVIEW**

- 8.** These Procedures will be reviewed as necessary and at least every three years. The Human Resources Leader, or successor thereof, is responsible to monitor and review these Procedures.

#### **RELEVANT LEGISLATION**

*Human Rights Code, R.S.O. 1990, c. H.19*

*Accessibility for Ontarians with Disabilities Act, 2005, S.O. 2005*

*Integrated Accessibility Standards Regulation, O. Reg. 191/11*

*Freedom of Information and Protection of Privacy Act, R.S.O. 1990, Chapter F.31*

#### **RELATED POLICIES, PROCEDURES & DOCUMENTS**

OntarioTech Feedback Accessibility Form

OntarioTech Accessibility Policy

OntarioTech University Academic Accommodations for Students with Disabilities Procedures



Classification number	
Parent Policy	Accessibility Policy
Framework Category	Legal, Compliance and Governance
Approving Authority	Senior Leadership Team
Policy Owner	Vice-President, Academic and Provost
Approval Date	DRAFT- for review
Review Date	DRAFT- September 2019
Last Updated	DRAFT- September 2019

## PROCEDURES FOR ACADEMIC ACCOMMODATION FOR STUDENTS WITH DISABILITIES

### PURPOSE

1. Consistent with the OntarioTech's Policy on Accessibility and its commitment to creating a campus community that is inclusive of all individuals, this document is designed to inform and guide in the provision of reasonable academic Accommodations for qualified students with disabilities in light of the essential requirements of the University's courses and programs.

### DEFINITIONS

For the purposes of this Policy the following definitions apply:

"Accessible Formats" may include, but are not limited to, large print, recorded audio and electronic formats, braille and other formats usable by persons with disabilities.

"Accommodation" means an adaptation or adjustment made to enable a person with a disability to demonstrate the essential requirements of their program/profession or fulfill the essential competencies of a particular course and/or program. The requirement, qualification or factor must be reasonable and bona-fide in the circumstances. Accommodations are specific to each individual and may include, but are not limited to:

- Human support services such as sign language interpreters, readers, classroom assistants etc.
- Assistance obtaining class notes
- Books and materials in an accessible format
- Disability related counselling and support
- Test and exam accommodations (e.g., extra time, technology, software)
- Access to specialized software, such as text-to-speech or speech-to-text
- Specialized support from a Learning Strategist and/or Assistive Technologist (i.e. technical aids and assistive devices)
- Workstation and/or office modifications
- Job redesign
- Flexible or alternative work schedules
- Temporary re-assignments

"Barrier" means anything that prevents a person with a disability from fully participating in all aspects of society because of his or her disability, including a physical barrier, an architectural barrier, an information or communications barrier, an attitudinal barrier, a technological barrier, a policy or a practice.

“Communication Supports” may include, but are not limited to, captioning, alternative and augmentative Communication Supports, plain language, sign language and other supports that facilitate effective communications.

“Disability” means:

a) Any degree of physical disability, infirmity, malformation or disfigurement that is caused by bodily injury, birth defect or illness and, without limiting the generality of the foregoing, including diabetes mellitus, epilepsy, and any degree of paralysis, amputation, lack of physical coordination, blindness or visual impediment, deafness or hearing impediment, or physical reliance on a guide dog or on a wheel chair or other remedial appliance or device;

b) A condition of mental impairment or developmental disability;

c) A learning disability, or a dysfunction in one or more of the processes involved in understanding or using symbols or spoken language;

d) A mental disorder; or

e) An injury or disability for which benefits were claimed or received under the *Workplace Safety and Insurance Act*.

Disability should be interpreted in broad terms. It includes both present and past conditions, as well as a subjective component, namely, one based on perception of disability.

Disability covers a broad range and degree of conditions, some visible and some not visible. A disability may have been present from birth, caused by an accident, or developed over time.

There are physical, mental and learning disabilities, mental disorders, hearing or vision disabilities, epilepsy, [mental health disabilities and addictions](#), environmental sensitivities, and other conditions.

Disability is an evolving concept; a disability may be the result of combinations of impairments and environmental barriers, such as attitudinal barriers, inaccessible information, an inaccessible built environment or other barriers that affect people’s full participation in society.

“Essential Competencies” means the knowledge, skills, judgement, values, beliefs etc. that are essential to the course/program/degree/profession that a student must be able to demonstrate.

“Essential Requirements” means the knowledge and skills that must be acquired or demonstrated in order for a student to successfully meet the learning objectives of a particular course and/or program.

“Undue Hardship” as defined in the *Ontario Human Rights Code* prescribes three considerations in assessing whether an Accommodation could cause undue hardship: Cost; Outside Sources of Funding; and Health and Safety Considerations. Additional information is available on the Ontario Human Rights Commission website (URL:

[www.ohrc.on.ca](http://www.ohrc.on.ca)).

## SCOPE AND AUTHORITY

2. These Procedures apply to students, faculty and staff at OntarioTech who share responsibility for fostering an accessible and inclusive environment, and for identifying, preventing and removing barriers to students with disabilities enrolled in academic courses and programs. Student Accessibility Services is additionally responsible for providing support, guidance and education to ensure compliance with these procedures.
3. The Provost and Vice-President Academic, or successor thereof, is the Policy Owner and is responsible for overseeing the implementation, administration and interpretation of these Procedures.

## PROCEDURES

### 4. General Regulations

- 4.1. Students with disabilities may request to be considered for formal academic Accommodation in accordance with the *Ontario Human Rights Code* (OHRC) and the *Accessibility for Ontarians with Disabilities Act* (AODA). Students seeking Accommodation must make their requests through the Student Accessibility Services (SAS) office in a timely manner, and provide relevant documentation to verify the effect of their Disability and to allow the University to determine appropriate Accommodations.
- 4.2. Accommodation decisions will be made in accordance with the OHRC and associated policies as well as AODA Act. Accommodations will be consistent with and supportive of the Essential Competencies and academic integrity of courses and programs, and provided in a way that respects the dignity of students with disabilities and encourages integration and equality of opportunity. Reasonable academic Accommodation may require instructors to exercise creativity and flexibility in responding to the needs of students.
- 4.3. Academic Accommodations may include adjustments to the way information is presented in a specific course or the manner in which student knowledge is evaluated. Academic accommodations are meant to provide an equitable academic experience for students with disabilities and enable them to have the opportunity to learn and demonstrate their knowledge.

### 5. Students requiring academic Accommodations

- 5.1. Students with disabilities who require Accommodations shall, in a timely manner in relation to their Disability needs, provide the appropriate medical and/or psychological documentation concerning the status and effect of their Disability as required by OntarioTech's SAS Office. Documentation that is not provided in a timely fashion or in the required form may delay or prevent the implementation of an academic Accommodation for a particular course. In cases where student is in the process of obtaining appropriate documentation, SAS will consider in good faith and on a case-by-case basis whether interim Accommodation measures can be implemented temporarily. For specific information regarding the timelines and

registration procedures please visit the Student Accessibility Services website at <https://studentlife.ontariotechu.ca/services/accessibility/index.php>

## **6. Academic Accommodation plans**

- 6.1.** SAS will work in cooperation with students and their instructors to identify the Essential Competencies of the courses, and to determine reasonable and suitable Accommodation measures to allow students an equal opportunity to meet those requirements while maintaining the academic integrity of a course or program.
- 6.2.** SAS will prepare a notice of Accommodation for the student that verifies that the student is registered with SAS and is entitled to Accommodation, and outlines the proposed Accommodation plan. SAS will rely on the support of various faculty/staff members to coordinate and successfully implement the student's plan. Possible supports that may be recommended by SAS include but are not limited to: testing Accommodations, assistance in obtaining class notes, course material in alternative formats, disability-specific academic strategies, classroom assistance and Disability advocacy support.
- 6.3.** Students should meet with their Student Accessibility Counsellor prior to the start of the term to have their notice of Accommodation sent to their instructors to ensure that they have the best possible opportunity for academic success. Counsellors, students and instructors all have an obligation to participate in a meaningful dialogue in the search for and implementation of measures that are demonstrably required to accommodate the disability-related needs of students.

## **7. Protection of privacy**

- 7.1.** OntarioTech is concerned with protecting the privacy of students with disabilities. At the same time, the University needs sufficient information to reasonably evaluate and respond to a student's request for Accommodation. For this reason, students are required to provide to Student Accessibility Services information concerning the nature of their disability-related needs.
- 7.2.** At times the Accommodation process may require that a student disclose such information to staff and faculty outside of Student Accessibility Services on the basis that they "need-to-know" this information to perform their duties under the policies and procedures at the University. All personal information disclosed to such staff or faculty will be governed by the OntarioTech guidelines on the protection of privacy.

## **8. Resolution of academic Accommodation plans**

- 8.1.** In cases where there is disagreement between the instructor and the student on the Accommodation plan and/or its implementation, the instructor will contact the student's counsellor from Student Accessibility Services to explore alternative forms of academic Accommodation as appropriate to the objectives and requirements of the course. If issues remain unresolved, the issue will be escalated to the Dean of the Faculty.
- 8.2.** The Dean will consult with SAS before rendering a decision. Any decision to deny a request for Accommodation or that otherwise has a potential of creating a legal risk to the university must be referred to the Office of the University Secretary and General Counsel prior to being implemented.

## **MONITORING AND REVIEW**

9. These Procedures will be reviewed as necessary and at least every three years. The Provost and Vice-President Academic, or successor thereof, is responsible to monitor and review these Procedures.

## **RELEVANT LEGISLATION**

10. *Accessibility for Ontarians with Disabilities Act, 2005, S.O. 2005*  
*Human Rights Code, R.S.O. 1990, c. H.19*  
*Integrated Accessibility Standards Regulation, O. Reg. 191/11*  
Ontario Human Rights Commission Policy on Guidelines on accessible education (2004)  
*Freedom of Information and Protection of Privacy Act, R.S.O. 1990, Chapter F.31*

## **RELATED POLICIES, PROCEDURES & DOCUMENTS**

11. OntarioTech Feedback Accessibility Form  
OntarioTech University Procedures for Accommodation of Employees with Disabilities  
OntarioTech Accessibility Policy  
Academic Regulations, Undergraduate Academic Calendar

# COMMITTEE REPORT



**SESSION:**

Public   
 Non-Public

**ACTION REQUESTED:**

Decision   
 Consultation   
 Information

**TO:** Audit and Finance Committee (A&F)

**DATE:** November 20, 2019

**FROM:** Olivia Petrie, Assistant Vice-President, Student Life

**SUBJECT:** PROCEDURE FOR THE USE OF A SERVICE ANIMAL BY STUDENTS WITH DISABILITIES

**A&F MANDATE:**

- Under section 9(1) of the university’s Act, the Board of Governors has the power “to establish academic, research, service and institutional policies and plans and to control the manner in which they are implemented”. The university’s Policy Framework is a key institutional policy that delegates the Board’s power, establishing categories of policy instruments with distinct approval pathways.
- Under the Policy Framework, A&F is the approval authority for this procedure and we are seeking the committee’s approval of same.

**PURPOSE OF POLICY INSTRUMENT:**

- The purpose of this procedure is to set out conditions for the use of Service Animals on the University of Ontario Institute of Technology (Ontario Tech) property owned or leased (“University property”) to identify their presence and ensure the ongoing safety of all members of the campus community. This procedure was developed under the scope of the Accessibility for Ontarians with Disabilities Act (AODA) and the Ontario Human Rights Code in a manner consistent with the Ontario Tech Policy on Accessibility and its commitment to creating a campus community that is inclusive of all individuals.

**CONSULTATION:**

**List of Consultation Dates:**

- Policy Compliance Officer, on-going through January-April 2019
- Policy Advisory Committee, September 10, 2019
- Academic Council, October 22, 2019
- Online Consultation (Oct 22 to Nov 5)
- Administrative Leadership Team, November 12, 2019

**Comments received and response:**

- Policy Advisory Committee sought clarity on whether this policy applies to pets on campus
  - This policy does not include pets. Cheryl F. to take this to SLT to see if there is interest in developing a policy which would permit pets on campus and discuss who should lead this.
  - Removed all reference to pets in procedures
- Policy Advisory sought clarity as to whether individuals new to campus would be removed if they failed to follow the outlined process
  - In alignment with AODA legislation, this policy indicates that Ontario Tech welcome service animals. In an effort to help University members with disabilities maintain independence, access to Ontario Tech property will not be denied. University members will be able to keep their service animals with them anywhere they need to go, except in places where the law excludes service animals, and opportunities for education and information sharing about existing University policy will be conducted with dignity and respect to the individual.
- Updated definition of service animal to be consistent with O. Reg. 191/11: INTEGRATED ACCESSIBILITY STANDARDS
- Concerns about process on managing competing rights with respect to receiving complaints about service animals
  - Added language on issues where any University Members having concerns relating to particular Service Animal will be dealt on case by case basis and added reference to OHRC's Policy on competing human rights as one of the documents that will be considered in this process.
- Issues relating to making a long and cumbersome process for having service animals assessed and approved through requiring Public Assessment to be completed which is not a legislative requirement and requirement of registering service animals on an annual basis.
  - Removed requirement of completion of Public Assessment of Service Animal – any issues relating to public safety concerns relating to a service animal will be dealt with on case by case basis. Where the authority has reasonable doubt regarding the ability of service animal to exhibit positive behaviour in public spaces, further supporting documentation maybe requested.
  - Removed requirement of registering service animals on annual basis.

**COMPLIANCE WITH POLICY/LEGISLATION:**

- Ontario Human Rights Code, R.S.O. 1990, Chapter H.19
- Ontario Human Rights Commission Policy on Guidelines on accessible education (2004)
- O. Reg. 191/11: INTEGRATED ACCESSIBILITY STANDARDS
- Freedom of Information and Protection of Privacy Act, R.S.O. 1990
- Ontario Occupational Health and Safety Act, R.S.O. 1990, Chapter 0.1.
- Accessibility for Ontarians with Disabilities Act, 2005, S.O. 2005



**NEXT STEPS:**

- Upon receiving the approval of A&F, the revised policy instrument will be posted to the policy library.

**MOTION:**

*That the Audit and Finance Committee hereby approves the Procedure for the Use of a Service Animal by Students with Disabilities, as presented.*

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**SUPPORTING REFERENCE MATERIALS:**

- Procedure for Use of Service Animals by Students with Disabilities



Classification	LCG 1103.02
Parent Policy	Accessibility policy
Framework Category	Legal, Compliance and Governance
Approving Authority	Audit and Finance Committee
Policy Owner	Vice-President, Academic and Provost
Approval Date	DRAFT September 2019
Review Date	
Supersedes	

## PROCEDURE FOR THE USE OF A SERVICE ANIMAL BY STUDENTS WITH DISABILITIES

### PURPOSE

1. The purpose of this procedure is to set out conditions for the use of Service Animals on the University of Ontario Institute of Technology (Ontario Tech) property owned or leased (“University property”) to identify their presence and ensure the ongoing safety of all members of the campus community. This procedure was developed under the scope of the Accessibility for Ontarians with Disabilities Act (AODA) and the Ontario Human Rights Code in a manner consistent with the UOIT Policy on Accessibility and its commitment to creating a campus community that is inclusive of all individuals.

### DEFINITIONS

2. For the purposes of these Procedures the following definitions apply:

“**Service Animal**” means an animal that is required for a person with a disability that is either:

- Readily identified as one that is being used by the person for reasons relating to the person’s disability, as a result of visual indicators such as the vest or harness worn by the animal; or
- Requires the person with a disability to provide documentation from one of the following regulated health professionals confirming that the person requires the animal for reasons relating to the disability:
  - A member of the College of Audiologists and Speech-Language Pathologists of Ontario.
  - A member of the College of Chiropractors of Ontario.
  - A member of the College of Nurses of Ontario.
  - A member of the College of Occupational Therapists of Ontario.
  - A member of the College of Optometrists of Ontario.
  - A member of the College of Physicians and Surgeons of Ontario.
  - A member of the College of Physiotherapists of Ontario.
  - A member of the College of Psychologists of Ontario.
  - A member of the College of Registered Psychotherapists and Registered Mental Health Therapists of Ontario. O. Reg. 165/16, s. 16.
    - The disability can be visible or invisible. The Service Animal is readily identifiable with visual indicators such as a vest or harness. Please refer

to section 10.1 for further clarification and definition of the functions of a Service Animal.

**“Handler”** means an individual who, as a result of a disability, requires the assistance of a Service Animal and has charge of the Service Animal.

**“Emotional Support Animal”** means an animal that maybe used as part of a medical treatment plan, but has no specialized training or function with respect to fulfilling a person’s disability-related needs. The University is not required to provide accommodations for Emotional Support Animals as it is for Service Animals.

**“Authority”** means the functional area that is responsible for validating documentation, approving, registering and managing the use of Service Animals on University Property by University Members and visitors.

**“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**

3. These Procedures apply to Service Animals on University property.
4. These Procedures apply to all University Members or visitors to University property.
5. The Vice-President, Academic and Provost, or successor thereof, is the Policy Owner and is responsible for overseeing the implementation, administration and interpretation of these Procedures.
6. Student Accessibility Services (SAS) is the Authority responsible for administering the procedures for students who require Service Animals on University property.
7. Human Resources (HR) is the Authority responsible for administering the procedures for employees or those holding appointments with the University who require Service Animals on University property.

## **PROCEDURES**

8. In order to provide an accessible learning and working environment, the University is committed to the development and implementation of procedures that enable the University community to understand and support the Handler and their Service Animal while on campus. It is also important that both the Handler and University Members understand their rights and responsibilities in this regard.
9. Where Service Animals are not permitted on or in a particular campus location or building due to health and safety laws or requirements, the University will provide alternate support to permit access to goods and services, or provide reasonable accommodation for the University Member.

**10. Distinction between Service Animals and Emotional Support Animals:**

- 10.1. Service Animals are animals that are:
  - a) Readily identified as a Service Animal that is being used by the person for reasons relating to the person’s disability through the use of visual indicators such as a vest or harness worn by the animal; and
  - b) Specifically trained to perform tasks for a person with a disability such as, but not limited to:
    - i. Guiding people who are blind or visually impaired;
    - ii. Alerting people who are deaf or hearing impaired;
    - iii. Pulling wheelchairs for those with limited mobility;
    - iv. Alerting and protecting a person who is having a seizure;
    - v. Performing other specialized tasks (diabetic, medical, severe allergy alert);
    - vi. Reminding a person to take their medication;
    - vii. Providing comfort and reducing symptoms related to a person’s disability in certain situations

11. Service Animals are working animals.

12. In instances where an Emotional Support Animal, meets the criteria for Service Animal as described in section 10.1, the University will strive to provide accommodation for the animal on University property.

**13. Process for Service Animal Approval and Notification**

- 13.1. Any University Member having a Service Animal on University property should be directed to the appropriate Authority.
- 13.2. In order to bring a Service Animal on University Property on an ongoing basis, the University Member is required to submit satisfactory supporting documentation to the appropriate Authority demonstrating their requirement for a Service Animal to assist with their disability-related needs.

13.3. University members requiring the use of a Service Animal will need to register with the appropriate Authority and update any documentation that has an expiry date. They will not need to obtain new documentation year over year unless their disability related needs change and alternative means of support is required, or where the animal who provides services changes such that their record with the appropriate Authority no longer matches.

13.4. The Authority will validate the submitted documentation and make reasonable efforts to notify University Members who may be affected by the presence of a Service Animal before approval.

13.5. The University understands that the presence of certain Service Animals may affect other University Members due to environmental sensitivities, allergies, phobias or other concerns. For this reason, the Handler will be requested to consent to having of individuals who will work with or attend class with a Service Animal notified of their presence, and such consent shall not to be unreasonably withheld. This notification will not contain any confidential information about the nature of the Handler's disability.

13.6. Concerns about the effect of a Service Animal on a University Member must be directed to the Authority for resolution, not the Handler directly. The Authority will assess the impact on the University Member on a case-by-case basis and consider the following principles and obligations when balancing the conflicting interests:

- a) The legal obligation permitting the use of Service Animals under the AODA;
- b) The duty to accommodate under the Ontario Human Rights Code (OHRC); and
- c) The approach outlined in OHRC's Policy on Competing Human Rights as applied to all parties.

13.7. The means for resolving concerns may include creating distance between the Service Animal and the individual with a concern, changes in scheduling or altered cleaning regimens due to the presence of a Service Animal, or other such accommodations as may be appropriate to the circumstances.

#### **14. Supporting Documentation**

14.1. Supporting documentation for a Service Animal must meet all of the following requirements:

- a) Ontario Tech's Service Animal Recommendation form must be completed by one of the following practitioners: physician, occupational therapist, ophthalmologist, audiologist, psychologist, or psychiatrist.
- b) Documentation must be dated and include the practitioner's credentials, contact information and signature.
- c) The practitioner must provide a detailed explanation of the need for the Service

Animal as it relates specifically to the functional impairment caused by University Member's disability, and indicate the specific tasks or functions that the Service Animal performs.

- d) Documentation that the Service Animal has been vaccinated and is properly licensed as required by Ontario law and/or city by-law. Dogs, cats and ferrets also require rabies vaccinations.
- e) Additional documents maybe requested in instances where the Authority has reasonable doubt regarding the Service Animals capacity to be in public spaces

15. For University Members who have a concern about the effect of a Service Animal on a University Member, the supporting documentation, supporting documentation will be requested as deemed necessary. **Service Animal Behaviour**

15.1. The Handler is responsible at all times for all aspects of behaviour and management of the Service Animal on all University property including:

- a) Any cleaning as well as any costs associated with cleaning that may result from the Service Animal.
- b) Ensuring that any feces is cleaned up immediately and disposed of in an appropriate receptacle.
- c) The Service Animal must demonstrate positive and pro-social behaviour at all times while on University property.

**16. Care of Service Animals**

16.1. The Handler is responsible for the following:

- a) Maintaining the crate or cage of the Service Animal, if it is to be crated or caged. The crate/cage must be the appropriate size, secure, in good repair and well ventilated. The health and welfare of the Service Animal and for providing food, water, bathroom and exercise breaks in a timely manner
- b) Keeping the Service Animal clean and groomed at all times.
  - Cleaning up and disposing of any animal waste in a timely manner.

**17. Animals on Campus**

17.1. Service Animals will:

- a) Be accompanied by the Handler at all times
- b) Remain in close proximity to the Handler, and restrained on a leash, in a cage, or under the physical control of the Handler; unless being unrestrained is necessary to perform their tasks or functions.
- c) Registered with Campus ID and their identification number will link them to the banner number of their handler. The following nomenclature will be used: "SAXXXXXXXXXX."

- 17.2. If at any time any Animal becomes aggressive or is deemed by the appropriate Authority to pose an unmanageable threat to the health and safety of University Members or visitors, the Authority will require the Handler to remove the Animal from University property or impose conditions on the Animal's continued presence.
- 17.3. There are some University locations where Animals are prohibited by law (i.e., food service preparation spaces, wet labs). These spaces will be navigated on a case-by-case basis in discussion with lab coordinators, supervisors and the appropriate Authority.
- 17.4. There are some extensions of the learning environment where it may not be possible to allow a Service Animal such as clinical placements in a health-care setting. These situations will be navigated on case-by-case basis in discussion with placement supervisors and the appropriate Authority.

## 18. Responsibilities

- 18.1. University supervisors, managers, directors and Faculty administrators are responsible for the enforcement of this procedure and compliance within their work units.
- 18.2. Faculty members are responsible for the enforcement of this procedure in their classrooms and laboratories. For students with disabilities, faculty members will consult with SAS if a student is non-compliant with this policy and SAS will determine if the student is permitted to use or continue to use a Service Animal on campus.
- 18.3. Campus Security is responsible for the enforcement of this procedure on all University property and will assist managers, directors and faculty members with the enforcement of this procedure as necessary.
- 18.4. Human Resources and Student Accessibility Services are the Authority for employees and students respectively. The Authority is responsible for:
  - a) Maintaining documentation authorizing Service Animals.
  - b) Providing notification to University Members who may be impacted by the presence of a Service Animal.
  - c) Advising supervisors, managers, directors, Faculty administrators, faculty members and Campus Security and assisting them in ensuring compliance with and enforcement of this procedure.
  - d) Approving the use of Service Animals on University property by means of validating documentation and processing accommodation request.
  - e) Assessing and resolving any complaints or issues related to the use of Service Animals on University property.

## 19. Protection of Privacy

19.1. The University is committed to protecting the privacy of all University Members, including students with disabilities. At the same time, the University needs sufficient information to reasonably evaluate and respond to a student's request for accommodation. For this reason, students are required to provide to Student Accessibility Services information concerning the nature of their disability-related needs.

19.2. At times the accommodation process may require that a student disclose such information to staff and faculty outside of Student Accessibility Services on the basis that they "need-to-know" this information to perform their duties under the policies and procedures at the University. All personal information disclosed to such staff or faculty will be governed by the University's Access to Information and Protection of Privacy Policy.

### **MONITORING AND REVIEW**

20. These Procedures will be reviewed as necessary and at least every three years. The Provost and Vice President Academic, or successor thereof, is responsible to monitor and review these Procedures.

### **RELEVANT LEGISLATION**

21. Ontario Human Rights Code, R.S.O. 1990, Chapter H.19

Ontario Human Rights Commission Policy on Guidelines on accessible education (2004)  
*Freedom of Information and Protection of Privacy Act*, R.S.O. 1990

*Ontario Occupational Health and Safety Act*, R.S.O. 1990, Chapter O.1.

*Accessibility for Ontarians with Disabilities Act*, 2005, S.O. 2005

*Integrated Accessibility Standards Regulation*, O. Reg. 191/11

### **RELATED POLICIES, PROCEDURES & DOCUMENTS**

22. Accessibility Policy

Procedures for Academic Accommodation for Students with Disabilities

Academic Regulations, Undergraduate Academic Calendar

Policy on the Care and Use of Animals in Research and Teaching

Booking and Use of University Space Policy

Booking and Use of University Space Procedure

Service Animal Request Form



# SERVICE ANIMAL RECOMMENDATION

This form is to be completed by an appropriate licensed medical professional (e.g. family doctor, psychiatrist, psychologist or psychological associate) who is eligible to practice in Ontario and recommends a service animal under the *Accessibility for Ontarians with Disabilities Act*. At UOIT, all sections of the form must be completed carefully and objectively to ensure accurate assessment of the student’s disability-related needs and are asked to present the information to Student Accessibility Services.

STUDENT INFORMATION			
First Name:		Last Name:	
Date of Birth: (dd/mm/yyyy)		Student Number:	

SERVICE ANIMAL INFORMATION			
Animal’s Name		Animal’s Date of Birth or Approximate Age	
Species		Approximate Size & Weight	
Identifying Characteristics			

PROFESSIONAL CONSIDERATIONS
1. Is this individual a patient you have assessed? <input type="checkbox"/> Yes <input type="checkbox"/> No
2. What type of disability does this person experience (not necessarily diagnosis): e.g. vision, hearing, mental health, medical condition, etc.?
3. What activities does the individual have difficulty or is unable to perform without the use of their service animal?

4. What functions does the service animal provide?

5. Is this recommendation consistent with your scope of practice as defined by your profession's regulatory college (i.e. connected to a diagnosis or area of treatment you are legally permitted to offer in Ontario?)  Yes  No

6. Have you reviewed with the patient of any potential risks that might be associated with bringing the animal into various public spaces?  Yes  No

Examples include:

- Loud or crowded environments, and places where there is a significant amount of noise, activity or novel stimuli
- Encountering people who are afraid of the animal
- Situations where the animal draws unwanted attention
- Times when the animal behaves inappropriately
- What will happen in emergencies and inclement weather
- Moments when the animal (or its welfare) are inconvenient

7. Is the patient adequately equipped emotionally, psychologically and socially to manage the behavior of the animal and any reasonably foreseeable responses from the public to the animal's behavior/presence?  Yes  No

8. Is there anything else we need to know?

The student named in this document has a medical condition that is disabling, and is not a short-term, common illness, or a routine experience such as stress.

I have answered all of the questions in this document based on my clinical assessment and recommend the service animal described.

<b>CERTIFICATE OF AUTHORIZED PROFESSIONAL</b>		
Full Name:		<b>Office Stamp / Business Card</b>
Position:		
Employer:		
Designation:		
Registration #:		
Email Address:		
Phone Number:		
Signature:		
Date:		

I have read and understood all of this information and I have participated in the assessment in good faith

<b>STUDENT AGREEMENT</b>	
Signature:	
Date:	



**COMMITTEE REPORT**

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**SESSION:**

Public   
 Non-Public

**ACTION REQUESTED:**

Decision   
 Discussion/Direction   
 Information

Financial Impact  Yes  No      Included in Budget  Yes  No

**TO:** Audit and Finance Committee of the Board of Governors (A&F)

**DATE:** November 20, 2019

**PRESENTED BY:** Paul Bignell, Executive Director – IT Services

**SLT LEAD:** Pamela Onsiong, Acting Chief Financial Officer

**SUBJECT:** Policies and Procedures required for Payment Card Industry (PCI) Data Security Standard (PCI DSS) Compliance

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**COMMITTEE MANDATE:**

Under the university’s Act, section 9 (1), the Board has the power: “to establish academic, research, service and institutional policies and plans and to control the manner in which they are implemented”. The university’s Policy Framework is a key institutional policy that delegates the Board’s power, establishing categories of policy instruments with distinct approval pathways.

Under the Policy Framework, the Board is the approval authority for this policy and A&F is the approval authority for the related procedures.

We are seeking the committee’s:

- (a) recommendation for Board approval of the Information Security Policy and PCI Sustainability Policy; and
- (b) approval of the PCI Sustainability Procedures.

**BACKGROUND/CONTEXT & RATIONALE:**

The PCI DSS was established in 2006 to protect the major global credit card transaction processors from financial exposure due to merchants’ security practices. PCI DSS sets stringent standards for how credit card information is received, processed and stored.

The credit card consortia focused on merchants with the heaviest volumes first, and is now turning its attention to the lightest merchant category – the category that includes the university.

In 2016, Durham College and the university jointly launched a project to secure PCI DSS compliance. Pursuit of compliance has entailed, among other things, remediating merchant processes, minimizing the amount of information technology infrastructure that is exposed to credit card transactions, and establishing tighter security controls and processes.

Durham College and the university will be positioned to apply for certification of compliance in January. We will need to have achieved compliance by the time our agreement with transaction acquirer Chase Paymentech expires in August 2020.

For Ontario Tech, the policies and procedures that must be formalized are

- Information Security Policy
- PCI Sustainability Policy
- PCI Sustainability Procedures

Our assessor – MNP – has reviewed the draft policies and procedures and has indicated that they are sufficient to meet requirements for certification.

#### **RESOURCES REQUIRED:**

No additional resources are required. Costs to achieve compliance are within budget. Ontario Tech costs to maintain compliance – e.g. periodic network penetration testing, annual staff training, network security service subscriptions – are approximately \$65K/year and are a cost of maintaining the ability to process credit cards.

#### **IMPLICATIONS:**

Acceptance of the recommendation will remove policy and procedures from risks to PCI DSS compliance.

At this point, the primary risk to timing of PCI DSS compliance is the availability of new point of sale terminals from Chase Paymentech. While we do not have a committed delivery date, Chase assures us that we are at the top of their delivery queue.

#### **ALIGNMENT WITH MISSION, VISION, VALUES & STRATEGIC PLAN:**

Our students, staff and partners expect that we will continue to be able to process credit card transactions reliably and securely.

#### **ALTERNATIVES CONSIDERED:**

These policies and procedures are a necessary condition to achieve compliance.

The one alternative considered was to expand the scope of the Information Security policy to address the topic more broadly – for example, addressing topics such as privacy and data management. It was decided that it would be prudent to establish this

narrower policy now in support of PCI DSS compliance, and enhance the policy in the future.

#### CONSULTATION:

Date	Document Name	Description of Consultation	Comments received and response
June 25, 2019	Presentation on PCI Compliance	Academic Council	No comments.
June 27, 2019	Presentation on PCI Compliance	Policy Advisory Committee.	<p>Will training be offered to third party members i.e. parents wanting to pay their child's tuition using credit card. Response: Scope of PCI Compliance policy is the receiver of credit card information; training for third parties (i.e. guidelines on how to protect credit card data) can be arranged at a later date.</p> <p>Can accountability be ensured with DC providing IT services to OntarioTech? Response: Service Level Agreement contains an indemnity clause where one party commits to compensate the other of any harm, liability or loss arising out of a contract.</p>
September 3 – 17, 2019	All policy instruments	Review by Online Community	None
September 10, 2019	All policy instruments	Policy Advisory Committee	<ul style="list-style-type: none"> <li>Expand "PCI" acronym in title of documents.</li> <li>Does Information Security policy apply to payments made via wire transfers; does it apply to all information at the University? Response: This policy does cover all information at the university, and can be broadened at a future date.</li> <li>Policy states exemptions will be provided but not what kind. Response: Exemptions will be provided by Chief Financial Officer on case-by-case basis.</li> </ul>
September 24, 2019	All policy instruments	Academic Council	In definition of "cardholder data", specify person who has a credit card not credit.
October 2019	All policy instruments	Senior Leadership Team	None

#### COMPLIANCE WITH POLICY/LEGISLATION:

The three documents and underlying concepts have been reviewed with Secretariat staff.

**NEXT STEPS:**

1. The Policies will be submitted for final approval by the Board of Governors on November 28, 2019.
2. The project team will be pleased to provide an update at A&F's convenience.

**MOTIONS FOR CONSIDERATION:**

1. *That the Audit and Finance Committee hereby recommends the Information Security Policy and PCI Sustainability Policy, as presented, for approval by the Board of Governors.*
2. *That the Audit and Finance Committee hereby approves the PCI Sustainability Procedures, as presented.*

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**SUPPORTING REFERENCE MATERIALS:**

1. Information Security Policy
2. PCI Sustainability Policy
3. PCI Sustainability Procedures



Classification Number	
Framework Category	Legal, Compliance, and Governance
Approving Authority	Board of Governors
Policy Owner	
Approval Date	DRAFT September 2019
Review Date	
Supersedes	

## POLICY TITLE

Information Security

## PURPOSE

1. This Policy is the cornerstone of the university's information security program. It establishes the concept that information is an asset and the property of University of Ontario Institute of Technology. All information technology users are required to protect this asset.

## 2. DEFINITIONS

**“Information Assets”** means any information that is printed or written on paper, stored electronically, transmitted by post or using electronic means, shown on visual media, or spoken in conversation.

**“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.

**“Information Owner”** means an individual that has administrative control over the information and has been officially designated as accountable for a specific information asset dataset.

**“Information Custodian”** is a person who has technical control over an information asset dataset, usually IT Services.

**“Cardholder Data Environment” or “(CDE)”** means the segmented area of the network which encompasses applications, hardware, and network services in the transmission, processing, or storing of cardholder data.



## **SCOPE AND AUTHORITY**

- 3.** This Policy applies to:
  - 3.1.** All University Members who are able to create and share information using University computing resources, and to any person or organization that handles University information and data regardless of their affiliation with or function within the University.
  - 3.2.** All information within the custody and control of the University, including the Cardholder Data Environment (CDE). Any activity aimed at the manipulation, transportation or use of information is subject to this policy throughout its life cycle.
- 4.** The Executive Director - Information Technology Services, or successor thereof, is the Policy Owner and is responsible for overseeing the implementation, administration and interpretation of this Policy.

## **POLICY**

- 5.** The University is committed to the security of information, both within the University and in communications with third parties.
- 6.** In securing information, it is essential that the following characteristics of information are preserved and maintained:
  - 6.1.** Confidentiality: ensuring that information is accessible only to those authorized to have access;
  - 6.2.** Integrity: safeguarding the accuracy and completeness of information and processing methods;
  - 6.3.** Availability: ensuring that authorized users will have access to information and associated assets when required.
- 7.** Information security training will be available to all employees at the start of employment, and at least yearly thereafter.
- 8.** Information Owners are responsible for properly classifying information in terms of their confidentiality, integrity and availability.
- 9.** Information Owners and Information Custodians shall work together to ensure adequate access measures are in place to protect information and IT resources from loss or unauthorized access.

- 10.** Information Owners and Information Custodians shall work together to ensure the integrity of information is maintained by protecting against unauthorized modification.
- 11.** Information Owners and Information Custodians shall work together to protect confidential information from unauthorized disclosure.
- 12.** All University Members may only have access to the confidential information that is required to perform their roles. They shall protect the confidentiality of the information to which they have access.
- 13.** An IT operational information security incident response procedure must be in place, reviewed and tested.
- 14.** Roles and Responsibilities
  - 14.1.** Managers are responsible for implementing the policy and ensuring staff compliance in their respective departments.
  - 14.2.** IT Services shall:
    - 14.2.1.** Maintain detection and prevention controls to protect against malicious software and unauthorised access to networks and systems.
    - 14.2.2.** Be responsible for creating, updating, and auditing information security plans, policies and procedures on an annual basis.
    - 14.2.3.** In cooperation with departmental system managers, administrators and users, be responsible for providing information security training.
  - 14.3.** All University Members handling University related information or using University information systems shall:
    - 14.3.1.** Be required to observe this Policy and these Regulations and are responsible for the consequences of their actions regarding computing security practices
    - 14.3.2.** Be in part responsible for protecting University information from unauthorized access, modification, destruction or disclosure.
    - 14.3.3.** Report immediately to the IT services any observed or suspected security incidents where a breach of this policy has occurred.
  - 14.4.** System administrators are responsible for administering user account authentication and account management.
  - 14.5.** The Executive Director - Information Technology Services is responsible for monitoring and enforcing this policy.
- 15.** Accessibility for Ontarians with Disabilities Act considerations
  - 15.1.** Accessibility for Ontarians with Disabilities Act (AODA) standards have been considered in the development of this policy.
- 16.** Consequence of Non-compliance:

- 16.1.** Non-compliance could affect the University’s ability to conduct business, respond to requests for information, be transparent and accountable, and ensure confidentiality and privacy of personal information. This would be a risk to the University both financially and to its reputation in the community.
- 16.2.** Failure to comply with this policy could result in loss of access to the University’s information technology services and equipment, disciplinary action up to and including suspension or termination of an employee, and/or legal action that could result in criminal or civil proceedings.

#### **MONITORING AND REVIEW**

- 17.** This Policy will be reviewed as necessary and at least every three years. The Executive Director - Information Technology Services, or successor thereof, is responsible to monitor and review this Policy.

#### **RELEVANT LEGISLATION**

- 18.** “This section intentionally left blank”.

#### **RELATED POLICIES, PROCEDURES & DOCUMENTS**

- 19.** Acceptable use of Technology Policy  
PCI Sustainability Policy  
PCI Sustainability procedure



Classification Number	
Framework Category	Legal, Compliance, and Governance
Approving Authority	Board of Governors
Policy Owner	
Approval Date	DRAFT September 2019
Review Date	
Supersedes	

## POLICY TITLE

Payment Card Industry (PCI) Sustainability

## PURPOSE

1. The purpose of this Policy is to establish the foundations required for the University of Ontario institute of Technology to maintain compliance with the Payment Card Industry (PCI) Data Security Standard (DSS), and maintain the integrity of the PCI Cardholder Data Environment.

## DEFINITIONS

For the purposes of this Policy the following definitions apply:

**“Authentication”** means verifying the identity of an individual, device, or process.

Authentication typically occurs through the use of one or more authentication factors such as a password, passphrase, a token device, smart card or a biometric.

**“Cardholder Data”** means the full information displayed on a credit card including the Primary Account Number, or the full Primary Account Number along with Cardholder name, Expiration date or Service code.

**“Cardholder Data Environment”** or **“CDE”** means the segmented area of the network which encompasses applications, hardware, and network services in the transmission, processing, or storing of cardholder data.

**“Finance”** means the organization under the direction of the Chief Financial Officer

**“Hardened”** means a secured computer system.

**“Merchant”** means a department, faculty or vendor using payment processing technologies deployed on the University of Ontario Institute of Technology networks.

**“Multi Factor Authentication”** or **“MFA”** means a method of authenticating a user whereby at least two factors are verified. These factors include something the user has (such as a smart card or dongle), something the user knows (such as a password, passphrase, or PIN) or something the user is or does (such as fingerprints, other forms of biometrics, etc.).

**“Password”** means the string of characters that serve as an authenticator of the user.

**“PCI DSS”** means Payment Card Industry Data Security Standard.

**“PCI Zone”** means anything that is in scope for PCI DSS compliance.

**“Role-Based Access Control”** means a system of permissions where access to a specific resource is defined by permissions assigned to specific roles; a role is given to a user based on their position/needs in relation to the organization.

**“Unauthorized Network Equipment”** means unauthorized devices connected to the network that poses a significant risk to the organization.

**“Vulnerability”** means a type of weakness in a computer system, in a set of procedures, or in anything that leaves information security exposed to a condition or an activity that have a

potential to cause information or information processing resources to be intentionally or accidentally lost, modified, exposed, made inaccessible, or otherwise affected to the detriment of the organization.

“**Workstation**” means a computer dedicated to a user or group of users engaged in business or professional work.

### **SCOPE AND AUTHORITY**

2. This Policy applies to all Merchants using payment processing technologies deployed on the University of Ontario Institute of Technology networks, whether used by employees, students, vendors, contractors or business partners. Exemptions from this policy will be permitted only if approved in advance and in writing by the Chief Financial Officer.
3. The Chief Financial Officer, or successor thereof, is the Policy Owner and is responsible for overseeing the implementation, administration and interpretation of this Policy.

### **POLICY**

4. Finance shall ensure that the following activities are performed
  - 4.1. Ensure that payments taken over the phone leverage the PCI DSS acceptable third-party solution.
  - 4.2. Regularly, and prior to the annual PCI DSS compliance assessment, update inventory of critical PCI related technology such as cash registers and pin pads.
  - 4.3. Maintain a list of Merchants whose products are used to process credit card payments on behalf of the university. Ensure the service providers' PCI DSS compliance is monitored regularly, and prior to the annual assessment.
  - 4.4. Secure written agreements with Merchants that includes an acknowledgement that Merchants will maintain all applicable PCI DSS requirements to the extent the Merchant handles, has access to, or otherwise stores, processes, or transmits the customer's Cardholder Data or sensitive Authentication data, or manages the customer's Cardholder Data Environment on behalf of a customer.
  - 4.5. Ensure there is an established process for engaging PCI related Merchants including proper due diligence prior to engagement.
  - 4.6. Ensure new Merchants wanting to accept credit card information on campus are not allowed to process electronic transactions using the campus network infrastructure. New Merchants should use cellular enabled pin pads for in person transactions wherever possible. Exceptions need approval from the Executive Director - Information Technology Services.
  - 4.7. Ensure that if Cardholder Data is available through remote-access technologies, appropriate precautions are taken.

- 4.7.1.** Personnel with a valid business need to see Cardholder Data must be authorized by Chief Financial Officer.
- 4.7.2.** Copying, moving, or storing Cardholder Data onto local hard drives and removable electronic media is prohibited.

**5.** Finance will ensure that Merchants responsible for PCI account access shall perform the following activities as needed:

- 5.1.** Creating, controlling and managing user accounts that can access the CDE.
  - 5.1.1.** Every user must use a unique user ID and a personal secret Password for access to campus information systems and networks.
  - 5.1.2.** User accounts must be created with the lowest required access level appropriate for the user, following the Role-Based Access Control principle.
  - 5.1.3.** User privileges are to be reviewed on a regular basis and removed if the privileges are no longer required.
  - 5.1.4.** Mechanisms such as tokens, digital certificates, or other means of Multi Factor Authentication may be used in addition to Passwords for the identification and Authentication of users, and must also be unique to each user.
  - 5.1.5.** Where possible, users must be forced to change their Password when they first log on to the system.

**6.** Finance shall ensure the following activities are performed as needed:

- 6.1.** User accounts are only to remain active for the period required for users to fulfill their responsibilities.
- 6.2.** Central IT accounts of staff will be disabled once the staff no longer appear on payroll.
- 6.3.** Password Aging Rule
  - 6.3.1.** Administrators who operate their own systems associated with the Cardholder Data Environment (CDE) are responsible for implementing a process to force Aging of Passwords at least every 90 days.
- 6.4.** Merchants processing credit cards shall perform the following activities on a regular basis:
  - 6.4.1.** Ensure that they understand the PCI standards .
  - 6.4.2.** Inspect pin pad devices for signs of tampering or substitution such as broken seals or incorrect serial numbers.
  - 6.4.3.** Ensure that credit card information at rest is encrypted if electronic, and physically secured if on paper.
  - 6.4.4.** Ensure that Multi Factor Authentication is used to access payment workstations remotely.

7. IT Services shall ensure that the following activities are performed on a regular basis
  - 7.1. Ensure that the network and data flow diagram(s) accurately reflect the network architecture.
  - 7.2. Ensure that the Credit Card Data information in transit is secure and encrypted within the campus infrastructure.
  - 7.3. Review firewall and router rulesets pertaining to the PCI Zone at least every six months.
  - 7.4. Regularly, and prior to the annual assessment, update inventory of all CDE locations, hardware / software / applications and networks.
  - 7.5. Update configuration standards as necessary and ensure the Workstations used are Hardened and comply with the PCI Standard.
  - 7.6. Review Vulnerabilities in a timely fashion once the software publisher provides security alerts.
  - 7.7. Install applicable vendor-supplied patches: critical within one month, non-critical within three months for all IT Assets in the CDE.
  - 7.8. Scan for the presence of all Unauthorized Network Equipment in the PCI Zone.
  - 7.9. Ensure that Multi Factor Authentication is used to administer or access payment Workstations remotely
    - 7.9.1. All remote-access technologies must be configured to automatically disconnect sessions after 30 minutes of inactivity.
    - 7.9.2. All remote-access technologies and associated accounts used by Merchants to access the CDE must be activated only when needed, with immediate deactivation after use. Activating these remote-access paths and accounts requires submitting a request to the IT Service Desk.
  - 7.10. Engage and manage an Approved Scanning Vendor (ASV) to conduct external vulnerability scanning.
  - 7.11. Review, and update as necessary, the organization's information security related policies, procedures, and standards from a PCI perspective.
8. IT Services shall ensure that the following activities are performed on a regular basis
  - 8.1. Confirm the location(s) of the CDE and flow of Cardholder Data and ensure that they are included in the PCI DSS scope, including backups.
  - 8.2. Review compensating controls to ensure that they are properly documented and are still applicable.
  - 8.3. Conduct a formal threat risk assessment at least annually and upon significant changes to the environment (for example, acquisition, merger, relocation, etc.).
  - 8.4. Conduct an awareness program for Merchants, confirm they have read and understand the policy/procedures.

#### **MONITORING AND REVIEW**

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

**RELEVANT LEGISLATION**

10. This section intentionally left blank.

**RELATED POLICIES, PROCEDURES & DOCUMENTS**

11. Information Security Policy
12. Acceptable Use of Technology Policy
13. PCI Sustainability Procedure





Classification Number	
Parent Policy	
Framework Category	Legal, Compliance & Governance
Approving Authority	Audit and Finance Committee
Policy Owner	
Approval Date	DRAFT September 2019
Review Date	
Supersedes	

## PAYMENT CARD INDUSTRY (PCI) SUSTAINABILITY PROCEDURE

### PURPOSE

1. The purpose of these Procedures is to identify the account management requirements for the compliance with the Payment Card Industry Data Security Standard (PCI DSS Compliance).

### DEFINITIONS

For the purposes of these Procedures the following definitions apply:

“**Authentication**” means verifying the identity of an individual, device, or process. Authentication typically occurs through the use of one or more authentication factors such as a password, passphrase, a token device, smart card or a biometric.

“**Cardholder Data**” means the full Primary Account Number, or the full Primary Account Number along with Cardholder name, Expiration date or Service code.

“**Cardholder Data Environment**” or “**CDE**” means the segmented area of the network that encompasses applications, hardware, and network services in the transmission, processing, or storing of cardholder data.

“**Finance**” means the organization under the direction of the Chief Financial Officer.

“**Hardened**” means a secured computer system.

“**Merchant**” means a department, faculty or vendor using payment processing technologies deployed on the University of Ontario Institute of Technology networks.

“**Multi Factor Authentication**” or “**MFA**” means a method of authenticating a user whereby at least two factors are verified. These factors include something the user has (such as a smart card or dongle), something the user knows (such as a password, passphrase, or PIN) or something the user is or does (such as fingerprints, other forms of biometrics, etc.).

“**Password**” means the string of characters that serve as an authenticator of the user.

“**PCI DSS**” means Payment Card Industry Data Security Standard.

“**PCI Zone**” means anything that is in scope for PCI DSS compliance.

**“Remote Access”** means access to computer networks from a remote location. Remote access connections can originate either from inside the company’s own network or from a remote location outside the company’s network. An example of technology for remote access is VPN.

**“Role-Based Access Control”** means a system of permissions where access to a specific resource is defined by permissions assigned to specific roles; a role is given to a user based on their position/needs in relation to the organization.

**“Unauthorized Network Equipment”** means unauthorized devices connected to the network that poses a significant risk to the organization.

**“Virtual Private Network” or “VPN”** means computer network in which some of connections are virtual circuits within some larger network, such as the Internet, instead of direct connections by physical wires. The end points of the virtual network are said to be tunneled through the larger network when this is the case.

**“Vulnerability”** means a type of weakness in a computer system, in a set of procedures, or in anything that leaves information security exposed to a condition or an activity that have a potential to cause information or information processing resources to be intentionally or accidentally lost, modified, exposed, made inaccessible, or otherwise affected to the detriment of the organization.

**“Workstation”** means a computer dedicated to a user or group of users engaged in business or professional work.

## SCOPE AND AUTHORITY

2. This Policy applies to all Merchants using payment processing technologies deployed on the University of Ontario Institute of Technology networks, whether used by employees, students, vendors, contractors or business partners. Exemptions from this policy will be permitted only if approved in advance and in writing by the Chief Financial Officer.
3. The Chief Financial Officer, or successor thereof, is the Policy Owner and is responsible for overseeing the implementation, administration and interpretation of this Policy.
  - 3.1. The Chief Financial Officer is responsible for ensuring that the appropriate policies and procedures are in place to handle credit card data securely and that the critical PCI technology inventory is updated.
  - 3.2. Finance is responsible for keeping a PCI related list of Merchants and ensure that new vendors are not permitted to use the campus network to process payment transactions.
4. Executive Director - Information Technology Services is responsible for:

- 4.1. Ensuring policies regarding PCI Sustainability are carried out; confirming that diagrams, technology inventories, vulnerability list, and policy maintenance is done regularly as dictated by PCI DSS.
- 4.2. Reviewing, monitoring, and updating compensation controls, security policy, conducting formal risk assessments, running awareness and training programs, and ensuring service provider compliance.
- 4.3. Approval, deployment, and use of critical devices, Multi Factor Authentication implementation, and arranging for the documentation of critical device inventory, configuration of critical devices, and Remote Access technologies and reviewing firewall and router rule sets.
- 4.4. Ensuring the running and maintaining anti-virus software and scans, deactivating user accounts (including third-party accounts) as dictated by PCI DSS, internal and external security/vulnerability scans, testing for unauthorized access and access points, and updating CDE location and flow diagrams.

## PROCEDURES

### 5. Authentication

All users of systems in the PCI Zone are required to follow strict password management procedures. In some cases, these requirements will be implemented by the owners of the relevant systems. In others, it will be the responsibility of the user to ensure these procedures are followed. The procedures below are the bare minimum requirement. If a system has procedures which are more restrictive than those outlined below, continue with the more restrictive procedures.

- 5.1. Initial Passwords or Password Resets.
  - a) Passwords for new user accounts or after a password reset must be set to a unique random value.
  - b) The unique random value password must be changed on first use. If possible, this will be required by the system. If the user is not prompted by the system to modify the password, it is their responsibility to change the password.
  - c) Users must follow best practices for secure passwords. Examples can be found at <http://servicedesk.dc-uoit.ca>
- 5.2. Password Aging Rule
  - a) System owners and administrators are responsible for ensuring users change their passwords at least every 90 days.
  - b) Limit password reuse such that a user's last six passwords are unique.
- 5.3. Multi Factor Authentication
  - a) In addition to passwords, there will be situations where Multi Factor Authentication is required. The following scenarios require Multi Factor Authentication:

- a. An administrator is accessing the CDE from anywhere other than the server console.
  - b. A user is accessing the CDE through a Virtual Private Network tunnel (VPN).
- b) Users are required to contact IT services to obtain Multi Factor Authentication access if either of the situations above apply to them.

#### 5.4. Re-Authentication

- a) Any time a user steps away from a workstation that has access to the CDE, they should lock their computer to prevent inadvertent access by another user. At a minimum, screensavers that lock the computer should start after at most 15 minutes of inactivity, requiring re-authentication to access the system.
- b) Systems should also have session time-outs, which require a user to re-authenticate.

#### 5.5. PCI Account Access and Management

Managers responsible for PCI account access and management are responsible for:

- a) Reviewing accounts regularly.
- b) Generating a report that contains the following types of accounts, and remediate as necessary
  - Locked accounts
  - Disabled accounts
  - Accounts with passwords exceeding the maximum age
  - Accounts with passwords that never expire
  - Accounts that cannot be associated with a business owner
- c) Revoking Access
  - a. User credentials and other authentication methods need to be revoked as soon as possible upon an employee's departure.
  - b. Upon review of accounts – quarterly or more frequently - inactive accounts must be deactivated.
  - c. Accounts must be locked out after 6 unsuccessful authentication attempts.

#### 5.6. Monitoring Inappropriate Account Usage

- a) System owners and administrators are responsible for ensuring that old accounts are not being used.
- b) System owners and administrators must monitor account usage to identify dormant accounts, and determine appropriate action for those accounts.

- c) System owners and administrators must monitor any attempts to use deactivated accounts.

#### **MONITORING AND REVIEW**

6. These Procedures will be reviewed in one year from approval date and at least every three years thereafter. The Executive Director - Information Technology Services, or successor thereof, is responsible to monitor and review these Procedures.

#### **RELEVANT LEGISLATION**

7. "This section intentionally left blank"

#### **RELATED POLICIES, PROCEDURES & DOCUMENTS**

8. Payment Card Industry (PCI) Sustainability Policy
9. Information Security Policy
10. Acceptable Use of Technology Policy



**COMMITTEE REPORT**

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<b>SESSION:</b>		<b>ACTION REQUESTED:</b>	
Public	<input checked="" type="checkbox"/>	Decision	<input checked="" type="checkbox"/>
Non-Public	<input type="checkbox"/>	Discussion/Direction	<input type="checkbox"/>

**TO:** Audit & Finance Committee (A&F)

**DATE:** November 20, 2019

**FROM:** Cheryl Foy, University Secretary & General Counsel

**SUBJECT:** Review of A&F Terms of Reference

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**COMMITTEE MANDATE:**

- As part of the committee’s mandate, it must conduct a periodic review of its Terms of Reference (ToR) and recommend revisions to the Board when appropriate.
- We are seeking the committee’s recommendation of the proposed amendments to the A&F ToR.

**BACKGROUND/CONTEXT & RATIONALE:**

- We reviewed A&F’s ToR in the context of the new brand, as well as any comments received since they were last updated in November 2018.
- The proposed amendments are editorial in nature.

**COMPLIANCE WITH POLICY/LEGISLATION:**

- this is compliant with the Act and By-laws

**NEXT STEPS:**

1. If A&F supports the proposed amendments to the its ToR, the amended version will be presented to the Board for approval on November 28, 2019.

**MOTION:**

*That the Audit & Finance Committee (A&F) hereby recommends the proposed amendments to the A&F Terms of Reference, as presented, for approval by the Board of Governors.*

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**SUPPORTING REFERENCE MATERIALS:**

- blacklined version of A&F Terms of Reference

## **BOARD OF GOVERNORS Audit and Finance Committee**

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### **1. TERMS OF REFERENCE**

The Audit and Finance Committee is a standing committee of the ~~UOIT~~-university's Board of Governors and is responsible for overseeing the financial affairs of the university with respect to all auditing, financial reporting and internal systems and control functions, budget approvals, risk management, and other internal and external audit functions and activities at the university. The Committee will report and make recommendations to the Board of Governors regarding these and other related matters.

The Committee shall also consider such other matters that are delegated to the Committee by the ~~UOIT~~ Board of Governors, including special examinations as may be required from time to time, and if appropriate retain special counsel or experts to assist.

Specifically, the Audit and Finance Committee shall have the following responsibilities:

#### **a. Finance**

- i) Ensuring fiscal responsibility with respect to the financial resources of the university, including:
  - 1) Reviewing and recommending approval of the annual operating budgets, capital budgets, tuition fees and ancillary fees;
  - 2) Reviewing on a quarterly basis financial statements and financial performance against budget;
  - 3) Reviewing policies on financial administration and recommending their approval by the Board;
  - 4) Reviewing and monitoring all long-term debt and providing recommendations as appropriate; and
  - 5) Providing financial oversight for major capital projects, auxiliary operations, and structures.

#### **b. Audit and Financial Reporting**

- i) Ensuring that appropriate financial controls, reporting processes and accountabilities are in place at the university, including:
  - 1) Appointing the external auditor, and approving the fee for such service;

- 2) Reviewing the external auditor's letter of engagement, independence, and the scope of services;
  - 3) Reviewing the external auditor's comprehensive audit plan, scope of the examination, and the nature and level of support to be provided by the internal audit function;
  - 4) Meeting with the external auditor, independent from management, to review audit results and when planning the upcoming audit year;
  - 5) Assessing the performance of the external audit function; and
  - 6) Providing an avenue of communication between the external auditor, management and the Board of Governors.
- ii) Reviewing and recommending to the Board approval of the university's annual audited financial statements, as well as reviewing significant findings or recommendations submitted by the external auditor.
  - iii) Overseeing the provision of internal and external audit functions at the university, including annual reviews, area specific evaluations, functional assessments and process appraisals
- c. Risk Management**
- i) Reviewing and approving the risk management process at the university that ensures that appropriate processes are in place to determine management's risk parameters and risk appetite.
  - ii) Monitoring and ensuring that appropriate processes are in place to identify, report and control areas of significant risk to the university and ensuring that appropriate mitigative actions are taken or planned in areas where material risk is identified.
  - iii) Receiving regular reports from management on areas of significant risk to the university, including but not limited to legal claims, development (fundraising activities), environmental issues, health, safety and other regulatory matters.

## **2. MEETINGS**

The Committee shall meet at least four (4) times per year, or otherwise at the Committee's discretion. In accordance with the UOIT-university's Act and the Board of Governors Meeting Policy and Procedures, the Committee shall conduct three types of Meetings as part of its regular administration: Public, Non-Public and *In Camera* (when required).

## **3. MEMBERSHIP**

The Committee shall be composed of:



- Between three (3) and seven (7) external governors
- Up to three (3) elected governors

At least one member of the committee shall have an accounting designation or related financial experience.

All members of the committee shall be financially literate and have the ability to read and understand the university's financial statements, or must be able to become financially literate within a reasonable period of time after his/her appointment to the Committee. In this regard, the Chief Financial Officer or other financial expert will ensure that each new member receives appropriate training in reading and understanding the financial statements.

#### **4. QUORUM**

Quorum requires that half of the Committee members entitled to vote be present.



**BOARD OF GOVERNORS**  
**AUDIT & FINANCE COMMITTEE**

**MINUTES OF THE MEETING OF JUNE 10, 2019**  
**PUBLIC SESSION**  
**1:00 p.m. – 2:45 p.m., ERC 3023**

**Attendees:** Nigel Allen (Chair), Stephanie Chow (*via teleconference*), Dale MacMillan (*via teleconference*), Steven Murphy (*via teleconference*), Dietmar Reiner

**Staff:** Becky Dinwoodie, Cheryl Foy, Doug Holdway, Brad MacIsaac, Pamela Onsiong

**Regrets:** Doug Allingham

**Guests:** Bobbi-Jean White and Reagen Travers (KPMG)

**1. Call to Order**

The Chair called the meeting to order at 1:05 p.m.

**2. Agenda**

As the President was delayed in another meeting, it was suggested that his remarks be deferred until later in the meeting. S. Chow also requested the removal of agenda item 20.1 (Amendment to Statement of Investment Policies & Asset Class Management Strategy).

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

**3. Conflict of Interest Declaration**

There were no conflict of interest declarations.

**4. Chair's Remarks**

The Chair welcomed B. White from KPMG to the meeting. He noted it was the last committee meeting of the year and he thanked the committee members for all of their work this year.

**5. President's Remarks (deferred)**

## 6. Finance

### 6.1 Fourth Quarter Financial Reports

P. Onsiong reviewed the fourth quarter financial reports with the committee and responded to the committee's questions. She noted 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 third quarter for a net upside of \$0.4m. She also advised that the surplus funds are available for restriction.

### 6.2 New Accounting Standards

P. Onsiong provided an overview of the new accounting standards, which are 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 new standard 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. P. Onsiong used the new building project as an example. 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.

P. Onsiong responded to the committee's questions. She clarified that the new standard will apply only to new construction and not retroactively. There was also a discussion regarding how "practicable" is defined. The new building project would meet the definition of "practicable" as the project manager will work with the construction company to separate out the components. In terms of equipment, the university does not really have the expertise in-house to isolate equipment value. The shorter lifespan of equipment in the institution would be captured (included as a 10-year amortization in the financial statements).

(S. Murphy joined at 1:20 p.m.)

## 7. Investment Committee Oversight Quarterly Report

S. Chow delivered the Investment Committee's quarterly report. She informed the committee that the university's endowment investment balance was sitting at just under \$27M and it performed just slightly behind benchmark in the last quarter. For the full cycle of 3-5 years, the portfolio performed over 100 basis points over the benchmark (+1.16 and +1.28). PH&N also provided the committee with an educational session on the central bank monetary tools used to help stimulate the economy.

## 5. President's Remarks

The President thanked the committee members for their participation in the recent Board retreat. He also noted that many governors attended this year's Convocation ceremonies and thanked everyone for their involvement.

## 8. Project Updates

### 8.1 New Building

B. MacIsaac provided an update on the progress of the new building project, a report of which was included in the meeting material. He also updated the committee on the status of the plumbers and sheet metal workers strikes.

### 8.2 ACE Enhancement

B. MacIsaac updated the committee on the status of the ACE enhancement project. The ACE facility will be down for approximately three weeks; in order to minimize the impact on the budget, the down time was accounted for in the budget. The project is tracking to planned completion:

- building extension – 31 July 2019
- equipment integration – 30 September 2020

### 8.3 Campus Recreation & Wellness Centre (CRWC) Expansion

B. MacIsaac delivered an update and discussed the CRWC expansion project. He explained the \$250,000 difference between the estimated cost and the bids coming in. He confirmed that this has been accounted for in the 2019-2020 budget.

### 8.4 AVIN

D. Holdway provided an update on the AVIN project, a presentation of which was included in the meeting material.

### 8.5 Land Exchange

C. Foy provided an update on the land exchange with the City of Oshawa. She confirmed that the archaeological reports are complete and the valuation report is almost finished. Upon finalization of the valuation, the land exchange can proceed. The goal is to bring the final agreement to the Board for approval at the meeting on June 26.

## 9. Risk, Compliance & Policy

### 9.1 Annual Risk Management Report

C. Foy summarized the development of the form of the Annual Risk Management Report, which was first presented to the Board in 2017. The goal is to develop a risk culture so that risk is considered during the decision-making process. She reviewed the key sections of the report. A suggestion was made to expand the section on metrics. C. Foy responded that the next steps include an increased emphasis on metrics. This year, the focus was on strategic risks and creating a risk tool. A number of reporting tools have been created. C. Foy commented that good progress has been made on strategic risks, but there remains more work to do on clarifying them - it remains a draft list of strategic risks.

C. Foy reviewed the focus for 2019-2020, which includes continuing to implement risk management (training risk owners); insurance implementation (educating university community); and determining the risk appetite of the university. She responded to questions from the committee

She clarified that they would be aligning the strategic risks with the university's strategic objectives. She also informed the committee that a new Copyright and Compliance Officer was recently hired and one of their priorities is to understand controlled goods on campus and the university's related obligations. C. Foy also discussed the work completed on developing the Business Continuity Management (BCM) Policy. They are developing a BCM work plan for 2019-2020 and regular updates will be on A&F's work plan.

There was a discussion regarding the assignment of risks to the President. C. Foy advised that the organizational reality is that the director of ACE reports directly to the President. S. Murphy added that he is aware that it is an anomalous reporting structure, which might change upon the arrival of the VP Research and Innovation. It is preferable for the President not to be identified as a risk owner.

## 9.2 Annual Policy Review & Compliance Update

C. Foy delivered the annual policy review and compliance update. She advised that during the Policy Framework review, she committed to providing the committee with an annual update on the types of policies that are being developed, revised, and approved. She confirmed that the list of policy activity has been updated since the last committee meeting.

## 9.3 Annual Insurance Report

C. Foy provided an overview of the university's insurance program. She reviewed the insurance coverage for the university, which was included in the meeting material. She responded to questions from the committee. She advised that the university puts our insurers on notice approximately 6-10 times per year of potential claims. Property claims have been the primary source of claims. The university submits approximately 1-2 property claims per year. There was also a discussion regarding the university's cyberliability coverage.

## 10. Audit & Finance Committee Annual Board Report 2018-2019

C. Foy presented the draft annual report to the committee for review and comment before being presented to the Board. A comment was made on the amount of work that was accomplished this year. There was a discussion regarding whether it would be reasonable to get everything done over the next year.

## 11. Consent Agenda:

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

11.1 Gender Change Policy

11.2 Minutes of Public Session of Meeting of April 15, 2019

## 12. Other Business

D. Reiner shared OPG's recent announcement that their corporate campus will be moving to Clarington, with construction to start next year. The target for opening the campus is 2024.

### 13. Adjournment

*Upon a motion duly made by D. Reiner and seconded by S. Chow, the public session adjourned at 2:29 p.m.*

Becky Dinwoodie, Secretary

DRAFT