



BOARD OF GOVERNORS
Governance, Nominations & Human Resources Committee (GNHR)

Tuesday, March 30, 2021

2:00 p.m. – 4:15 p.m.

[Videoconference](#)

Toll-Free: 1.888.240.2560 Meeting ID: 847 015 730

Members: Maria Saros (Chair), Lisa Edgar, Laura Elliott, Mitch Frazer, Francis Garwe, Kori Kingsbury, Steven Murphy, Dietmar Reiner, Trevin Stratton

Staff: Jamie Bruno, Becky Dinwoodie, Cheryl Foy, Lori Livingston

AGENDA

No.	Topic	Lead	Allocated Time	Suggested Start Time
	PUBLIC SESSION – 2:00 p.m.			
1	Call to Order	Chair		
2	Agenda (M)	Chair		
3	Conflict of Interest Declaration	Chair		
4	Chair's Remarks	Chair		
5	President's Remarks	Steven Murphy	5	2:10 p.m.
6	Governance:			
6.1	Strategic Discussion: Governance EDI Strategy	Chair	20	2:15 p.m.
6.2	Annual Board & Committee Practices Assessment* (D)	Cheryl Foy	10	2:35 p.m.
7	Consent Agenda (M):	Chair	5	2:45 p.m.
7.1	Accommodation Policy*			
7.2	Respectful Campus Policy*			
7.3	Procedures to Prevent and Address Discrimination and Harassment By or Against Employees*			
7.4	Minutes of the Meeting of January 28, 2021*			
8	For Information:			
8.1	Annual Pension Plan Report*			
9	Other Business	Chair		

No.	Topic	Lead	Allocated Time	Suggested Start Time
10	Adjournment (M)	Chair		2:50 p.m.
	BREAK		10	
	NON-PUBLIC SESSION – 3:00 p.m. (material not publicly available)			
11	Call to Order	Chair		
12	Conflict of Interest Declaration	Chair		
13	President's Remarks	Steven Murphy	5	3:05 p.m.
14	Governance			
14.1	Durham College Board Engagement (U)	Dietmar Reiner	10	3:10 p.m.
15	Nominations			
15.1	Election Results* (M)	Cheryl Foy	5	3:20 p.m.
15.2	Committee Assignments* (M)	Cheryl Foy	10	3:25 p.m.
15.3	Board membership and leadership succession update* (U)	Chair	10	3:35 p.m.
16	Human Resources			
16.1	Labour Relations & Human Resources Update* (M)	Jamie Bruno & Cheryl Foy	15	3:45 p.m.
17	Consent Agenda (M):			4:00 p.m.
17.1	Minutes of the Meeting of January 28, 2021*			
18	Other Business	Chair		4:05 p.m.
19	<i>In Camera</i> Session	Chair		
20	Termination (M)	Chair		4:15 p.m.

Becky Dinwoodie, Secretary

COMMITTEE REPORT

SESSION:

Public
Non-Public

ACTION REQUESTED:

Decision
Discussion/Direction
Information

TO: Governance, Nominations & Human Resources Committee

DATE: March 30, 2021

PREPARED BY: Becky Dinwoodie, Associate University Secretary & Judicial Officer

SUBJECT: Board & Committee Practices Assessments 2020 - 2021

COMMITTEE MANDATE:

- In accordance with the Governance, Nominations & Human Resources Committee's (GNHR) Terms of Reference, the committee is responsible for developing, implementing & monitoring procedures for assessing the effectiveness of the Board and its committees.
- We are seeking the committee's direction with respect to the timing and means of completing the Board and Committee Practices Assessments for 2020-2021.

BACKGROUND:

Annual Board Practices Assessment

- As a result of comments made during the 2014-2015 assessment process, the Committee conducted a substantive review of the assessment form in March 2017.
- The updated form was used to conduct the 2016-2017 and 2017-2018 assessments. As directed by the committee, those annual assessments were conducted by distributing and collecting the assessments by e-mail.
- The OnBoard portal was implemented in 2018. OnBoard has the functionality to conduct surveys, monitor the responses, and compile the responses into a report.
- GNHR directed that the 2018-2019 annual assessment be completed using OnBoard.
- The assessments were conducted during the month of May, which allowed the committee to review the results & make recommendations prior to the June AGM.

- The response rates for the past several years are:
 - 2019-2020: 18/19 governors (95% - all by OnBoard)
 - 2018-2019: 18/20 governors (90% - 13 by OnBoard & 5 by e-mail)
 - 2017-2018: 20/23 governors (87%) (by e-mail)
 - 2016-2017: 20/24 governors (83%) (by e-mail)
 - 2014-2015: 90% (conducted by online poll immediately prior to a Board meeting)
 - 2013-2014: 46%
- The 2015-2016 online poll assessment was not conducted due to timing constraints at meetings.
- In addition to evaluating Board effectiveness, the information collected from the assessment is used to guide the upcoming year's governance priorities.

Annual Committee Practices Assessment

- As part of the university's governance plan, an annual committee practices assessment (CPA) was developed and implemented by GNHR in 2020.
- As directed by GNHR, the CPA was conducted primarily through the OnBoard portal (10/13), with the other governors sending their completed assessment by e-mail.
- 13/19 governors completed the assessment (68%).

Recommendation:

- We recommend continuing to use OnBoard to conduct the 2020-2021 Annual Board and Committee Practices Assessments and that governors be asked to complete the assessment after the April Board meeting so that the results may be collected in time for GNHR to review at the May meeting.

COMPLIANCE WITH POLICY/LEGISLATION:

- Conducting the assessments supports GNHR's fulfilment of its mandate under the Terms of Reference.

NEXT STEPS:

1. Based on the committee's direction, the Office of the University Secretary & General Counsel will update the assessments in the portal.
2. The Chair of GNHR will inform the Board of the assessment process at the Board meeting on April 22 and the surveys will open.
3. The USGC will provide GNHR with a summary of the results for review at the GNHR meeting on May 27.

SUPPORTING REFERENCE MATERIALS:

- Board Practices Assessment Form
- Committee Practices Assessment Form



BOARD OF GOVERNORS 2020-2021 Board Practices Assessment

This Board Practices Assessment Questionnaire is designed to assist the Board to evaluate its own effectiveness. The questions provide an opportunity for Governors to indicate whether the structure and conduct of meetings, and the information and support received enable them to participate effectively in the governance of the University. Understanding this information will provide key information for improving Board processes.

This year the Board Practices Assessment will be conducted through the OnBoard portal.

The questionnaire is a mix of multiple-choice and short-answer questions based on the following categories:

- Board Effectiveness
- Structure of the Board
- Board Meetings
- Individual Board Involvement

In each category, we ask you to indicate your agreement with a series of statements based on the following scale:

- 1 – Strongly Agree
- 2 – Agree
- 3 – Neither Agree nor Disagree
- 4 – Disagree
- 5 – Strongly Disagree
- 6 – NR (No response – if you cannot comment on a statement).

The responses you submit will be seen only by the Secretary and Chair of the Board and will be held in strict confidence. The Secretary will collate the responses to the assessment form and the Chair will present the results to the Board, without attribution, for information and discussion.

Please complete the assessment as soon as possible and by no later than **May 14** in order to allow time for the results to be compiled and presented to the Governance, Nominations and Human Resources Committee at their meeting on **May 27**.

Board Effectiveness

In this section of the assessment, please indicate your level of agreement for how each of the following contributes to the effectiveness of the Board in its practices and performance.

1. The Board as a whole has a clear understanding of the University's mission.
2. The Board as a whole has a clear understanding of the University's strategic plan.
3. The University's strategic goals are clear.
4. The University's strategic goals serve as a useful guide to the Board in the deliberations and policy making decisions.
5. The Board is provided with adequate information at meetings for effective decision-making.
6. The Board is provided with adequate resources prior to meetings for effective decision-making.
7. The Board has sufficient engagement with Academic Council.
8. The Board has effective engagement with Academic Council.
9. The Board understands the distinction between the responsibilities of its role and the role of the administration.
10. The Board has the opportunity to discuss matters of critical importance before decisions are made.
11. The Board has the opportunity to ask questions of critical importance before decisions are made.
12. The Board ensures that members receive reports on how our organization has used its financial resources.
13. The Board knows the major challenges facing this university.
14. The Board knows the major opportunities facing this university.
15. The Board schedules sufficient time to discuss long term strategic issues.
16. Evaluation and reporting of Board performance is useful in improving the practices of the Board.

In this section, please provide a short-answer response to the following:

17. In my view, the Board's most significant achievement in the past year was:
18. In my view, the most important thing the Board could do to improve its effectiveness is:
19. Please provide any feedback regarding the statements above or any additional comments and suggestions you would like to provide.

Structure of the Board

In this section of the assessment, please indicate your level of agreement with each of the following statements regarding the structure of the Board and its Committees.

1. The Board has an effective committee structure for its needs.
2. The Board makes good use of its committees.
3. The level of delegation of authority to the Board Committees is appropriate.
4. Board committees act appropriately within the delegation of authority (i.e. routine matters are resolved and significant matters are properly recommended to the Board).
5. Work done at the committee level can be relied on when considering items brought forward to the Board for review and approval.
6. The Board has an effective orientation program for newly elected Board members.
7. The Board has a diversity of representation (gender, ethnicity, profession).
8. The Board has effective recruitment strategies to assess needs for, identify and attract new Board members.

Please provide a short-answer response to the following:

9. Please provide any feedback regarding the statements above or any additional comments and suggestions you would like to provide.

Board meetings

In this section of the assessment, please indicate your level of agreement with each of the following statements regarding the function of the Board meetings.

1. Board meetings are strategic.
2. Board meetings focus on priority issues.
3. Discussions are informative.
4. Discussions are productive.
5. Discussions occur in a respectful manner.
6. The meeting documentation provides adequate information for preparation prior to a meeting.
7. The agenda is well-planned so that the Board is able to get through all necessary business.
8. Board members are well apprised of issues prior to making a decision.

Please provide a short-answer response to the following:

9. Please provide any feedback regarding the statements above or any additional comments and suggestions you would like to provide.

Individual Board Involvement

In this section of the assessment, please indicate your level of agreement with each of the following statements regarding your individual involvement in the Board.

1. My abilities fit well with the strategic demands facing the University.
2. My abilities are being used effectively in my role(s) on the Board.
3. My abilities are being used effectively in my role(s) on the Board's committees.
4. My abilities are being used effectively to support the University's government relations strategy.
5. My abilities are being used effectively to support the University's advancement strategy.
6. My time is well-utilized at Board and committee meetings.
7. I read the minutes, reports and other materials in advance of Board and Committee meetings.
8. I am familiar with what is in the University's Act, By-Laws and governing policies.
9. When I have a different opinion than the majority, I raise it.
10. I support Board decisions once they are made even if I do not agree with them.
11. I have taken advantage of opportunities made available to Governors to interact with faculty and students during my term.
12. I believe that I am able to contribute effectively to the Board's work.
13. I believe that I am able to contribute effectively to the University.
14. Overall my experience as a Board member has been positive.

Please provide a short-answer response to the following:

15. Please provide any feedback regarding the statements above or any additional comments and suggestions you would like to provide.



BOARD OF GOVERNORS 2020-2021 Committee Practices Assessment

Terms of reference for Board committees are available online: [Terms of Reference](#).

This Board Committee Effectiveness Survey collects committee members' views about committee effectiveness and performance. It uses various questions to rate committee effectiveness within five areas:

- leadership and engagement;
- committee structure and mandate;
- meeting facilitation and effectiveness;
- committee work and results; and
- individual contributions to committee efficacy.

Committee members are asked to carefully reflect on each question and answer based on their experience.

In each category, we ask you to indicate your agreement with a series of statements based on the following scale:

- 1 – Strongly Agree
- 2 – Agree
- 3 – Neither Agree nor Disagree
- 4 – Disagree
- 5 – Strongly Disagree
- 6 – NR (No response – if you cannot comment on a statement).

The responses you submit will be seen only by the Secretary and Chair of the Board and will be held in strict confidence. The Secretary will collate the responses to the assessment form and the Chair will present the results to the Board, without attribution, for information and discussion.

Please complete the assessment as soon as possible and by no later than **May 14** in order to allow time for the results to be compiled and presented to the Governance, Nominations and Human Resources Committee at their meeting on **May 27**.

I serve on the following committee(s):

Audit & Finance
Executive
Governance, Nominations & Human Resources
Investment
Strategy & Planning

Committee Effectiveness

1. The mandate of the Committee is clearly set out in the Terms of Reference.
2. The Committee's Terms of Reference continue to be appropriate.
3. The Committee orientation was helpful.
4. I have a clear understanding of the committee's mandate.
5. The Committee, as a whole, has a clear understanding of its mandate.
6. The Committee is effective in carrying out its mandate.
7. The Committee has the opportunity to discuss matters of critical importance before decisions are made.
8. The Committee has the opportunity to ask questions of critical importance before decisions are made.
9. Overall, the Committee functions effectively.

In this section, please provide a short-answer response to the following:

10. In my view, the Committee's most significant achievement in the past year was:
11. What are the Committee's greatest strengths?
12. In my view, the most important thing the Committee could do to improve its effectiveness is:
13. Please provide any feedback regarding the statements above or any additional comments and suggestions you would like to provide.

Committee Structure

1. The Committee has the appropriate number of members.
2. The Committee is composed of members who have the appropriate expertise and experience to help the Committee advance its mandate.

Committee Meetings

1. The number of Committee meetings is adequate to fulfill the Committee's responsibilities.
2. Committee meetings are strategic.
3. Committee meetings focus on priority issues.
4. Committee members arrive prepared for meetings.

5. Meetings are conducted in a way that supports meaningful member participation.
6. The Committee is focused on oversight and policy, not on operational detail.
7. Committee members ask relevant questions with respect to the Committee's oversight responsibilities.
8. Discussions occur in a respectful manner.
9. The Committee is provided with adequate information at meetings for effective decision-making.
10. The Committee is provided with adequate resources prior to meetings for effective decision-making.
11. The meeting material is received sufficiently in advance to adequately prepare for meetings.
12. Presentations are interesting and helpful.
13. The agenda is well-planned so that the Committee is able to get through all necessary business.
14. Committee members are well apprised of issues prior to making a decision.

Please provide a short-answer response to the following:

15. Please provide any feedback regarding the statements above or any additional comments and suggestions you would like to provide.

COMMITTEE REPORT

SESSION:

Public

ACTION REQUESTED:

Decision
Discussion/Direction
Information

Financial Impact Yes No

Included in Budget Yes No

TO: Governance, Nominations and Human Resources Committee (GNHR)

DATE: March 30, 2021

SLT LEAD: Cheryl Foy, University Secretary and General Counsel

SUBJECT: Accommodation Policy

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.
- In accordance with its Terms of Reference, one of GNHR’s mandate includes the establishment of human resources policy instruments.
- **Request:** We are seeking the committee’s recommendation of the Accommodation Policy for approval by the Board of Governors.

BACKGROUND/CONTEXT & RATIONALE:

The Secretariat plays a significant role in advancing the strategic objective of creating a sticky campus. This work is done with a focus on initiatives to improve the culture within which students learn and employees work. The Accommodation Policy is an equity, diversity and inclusion initiative and was created to fill a policy gap – while the University has procedures for disability-related accommodation requests and processes, applicable human rights legislation requires accommodation on multiple other grounds (“Protected Grounds”). While the university has received and responded to requests on several of these Protected Grounds, there are currently no policy instruments to assist university members seeking to be accommodated on these Protected Grounds or to assist those involved in responding to such requests.

ALIGNMENT WITH MISSION, VISION, VALUES & STRATEGIC PLAN:

- This policy supports the university's values of integrity and respect by demonstrating the institution's commitment to working towards a barrier-free and inclusive campus environment.
- By promoting an inclusive and equitable culture at the university, this policy also supports the strategic pillar of creating a "sticky campus". In order to create a "sticky campus", the university community must feel welcome and included.

CONSULTATION:

- Policy Advisory Committee (Consultation - November 2020)
- Online Consultation (Consultation – December 18, 2020 – January 18, 2021)
- Academic Council (Consultation - February 23, 2021 – March 3, 2021)
- Governance, Nomination and Human Resources Committee (Consultation - January 28, 2021; Approval – March 30, 2021)
- Board of Governors (Approval – April 22, 2021)

Consultation Comments and Response to Date

Accommodation Policy

- We received feedback from individuals questioning the definitions of specific Protected Grounds that are included in the definitions section (e.g. disability, sex, creed, etc.). Specifically, the questions tended to focus on where the definitions came from and whether the level of detail provided is necessary.
- **Response:** We have clarified in the Policy instrument which of the definitions come directly from the Ontario Human Rights Code. Where the definition is not included in the Code, we have defined the terms in a manner consistent with the [approach/guidance of the?] Ontario Human Rights Commission or by referring to how the terms have been interpreted in jurisprudence. Our goal is to provide sufficient detail so that University Members can understand how the Protected Grounds may result in instances where accommodation may be needed.
- We received feedback that the Definitions section of the Policy was too extensive, that the definitions were confusing and too lengthy. There was a suggestion that some of the detail should be included in separate guidelines.
- **Response:** Revisions have been made in attempts to address the feedback related to the Definitions section of the Policy; specifically, attempts were made to make the section more concise where possible and appropriate. However, it should also be noted that the policy instruments will not be standalone. Web-based tools, and training will follow. As this is a new policy, we erred on the side of including more rather than less. We have aimed for a clear and succinct document that nonetheless provides the necessary information to ensure University Members know their rights, responsibilities and obligations – this is particularly important since the University has never had a stand-alone accommodation policy previously. Once the Human Rights Policy framework is established, the Human Rights Office will begin to focus on additional informational supports and resources for the Campus community and as we roll

those out we will revisit the content of the policy instrument during regularly scheduled reviews.

- We received feedback about the prominence of definitions in the policy (e.g., at the beginning of the policy). The individual asked whether the definitions could be placed at the end or as an appendix to the policy.
- **Response:** The policy adheres to the University's existing Policy template and framework. With that said, the USGC's office has commenced a review of standard practice and will return to the Board with findings at a later date.
- A member asked why job applicants are called out in the policy.
- **Response:** Job applicants are protected against discrimination under the Ontario Human Right Code's employment provisions. As such, job applicants are entitled to accommodation during the application process. The Accessibility for Ontarians with Disabilities Act (AODA) also includes provisions requiring that employers accommodate job applicants on the ground of disability.
- A member states that the definition of "Disability" is ableist in tone. For example, it was suggested that the term "deafness" should be capitalized.
- **Response:** We have clarified in the policy instrument that the definition of "Disability" comes directly from the Code. Regardless we have capitalized "Deafness" as requested by the member. Although we will retain the legal definition of disability from the Code, the Human Rights Office is dedicated to the use of more inclusive language in the development of its website content and informational resources.
- We received feedback questioning the use of "Ontario Tech University" in the policy documents rather than UOIT.
- **Response:** University members have been given feedback to use Ontario Tech University in Policy instruments rather than UOIT.

MOTION:

That the Governance, Nominations and Human Resources Committee hereby recommends the Accommodation Policy for approval by the Board of Governors, as presented.

NEXT STEPS:

- Approval by the Board of Governors (April 22).

SUPPORTING REFERENCE MATERIALS:

- clean and blacklined Accommodation Policy



Classification Number	<i>To be completed by the Policy Office</i>
Framework Category	Legal, Compliance and Governance
Approving Authority	Board of Governors
Policy Owner	University Secretary and General Counsel
Approval Date	DRAFT FOR CONSULTATION
Review Date	
Supersedes	

ACCOMMODATION POLICY

PURPOSE

- The purpose of this Policy is to:
 - ~~Establish the University's eCommitment the University to working towards a~~ barrier-free and inclusive campus environment; and,
 - Demonstrate compliance with the obligations and responsibilities, required of the University under its Respectful Campus Policy and by the *Ontario Human Rights Code* (“*the Code*”), the *Accessibility for Ontarians with Disabilities Act* (AODA), and the *Workplace Safety and Insurance Act*.

DEFINITIONS

“**Accommodation Measures**” are adaptations or adjustments that ~~are may be~~ required to enable ~~an employee to perform his or her essential job responsibilities effectively and/or a service recipient to participate fully in their academic pursuits~~ full participation. Accommodation Measures may include, but are not limited to:

- Human support services such as sign language interpreters, readers, etc.
- Technical aids and assistive devices
- ~~Modification of testing/exam requirements~~
- Workstation and/or office modifications
- Flexible or alternative work/assignment schedules
- Temporary re-assignments

“**Barriers**” include attitudes (stereotypes or prejudices), designs, policies, practices and rules- that prevent full participation of individuals or groups on the basis of a protected Ground. ~~when applied in the same way to everyone without accommodation~~

“**Creed**” is not defined in the Code, but courts and tribunals often refer to creed as religious beliefs and/or practices. As creed is not clearly defined, the following characteristics have been relied on when considering whether a belief system is a creed under the Code:

- It is sincerely, freely, and deeply held
- Is integrally linked to a person’s identity, self-definition, and fulfilment
- Is a particular and comprehensive, overarching system of belief that governs one’s conduct and practices

- Addresses ultimate questions of human existence, including ideas about life, purpose, death, and the existence or non-existence of a creator and/or a higher or different order of existence
- Has some nexus/connection to an organization or community that professes a shared system of belief.

~~Not every belief, opinion, expression, practice, or matter of conscience is a creed under the Code. Further, practices/observances which are hateful, incite hatred or violence against other individuals/groups, or contravene criminal laws are not protected by the Code.~~

“Disability” is defined in the Code as means:

- any degree of physical disability, infirmity, malformation or disfigurement that is caused by bodily injury, birth defect or illness and includes diabetes mellitus, epilepsy, a brain injury, any degree of paralysis, amputation, lack of physical coordination, blindness or visual impediment, ~~D~~deafness or hearing impediment, muteness or speech impediment, or physical reliance on a guide dog or other animal or on a wheelchair or other remedial appliance or device;
- a condition of mental impairment or a development disability;
- a learning disability, or dysfunction in one or more of the processes involved in understanding or using symbols or spoken language;
- a mental disorder; or
- an injury or disability for which benefits were claimed or received under the insurance plan established under the *Workplace Safety and Insurance Act*.

“Duty to Accommodate” refers to the obligation to eliminate the disadvantage, to the point of undue hardship, caused by barriers that exclude individuals or groups protected under the Code from participating in all aspects of their employment, academic endeavors, or use of facilities and housing or their receipt of services from the University on campus. ~~Failure to meet the Duty to Accommodate is a form of discrimination. There is a procedural obligation to explore all accommodation options, and a substantive obligation to implement an accommodation that is reasonable. Every accommodation request must be fully considered, and may be refused only if no Code-related need is substantiated or if undue hardship can be demonstrated.~~

“Family Status” is defined in the Code as the status of being in a parent and -child relationship. It, and includes any relationship that is equivalent to the care, responsibilities and commitment of a parent to a child. ~~“Parent” includes any person acting in the position of parent to a child, including biological, adoptive, foster, step-parents, legal guardians, or even a friend or family member who has taken responsibility for the care of a child whose parent(s) is not able to raise the child.~~ An adult child who is responsible for the care of a parent (e.g., providing elder care) is also in a relationship that is included in the definition of family status. In order to trigger a Family Status accommodation, the child/parent must be under the supervision or control of the University Member, there must be an essential need or legal obligation that flows from the relationship and the impact must create real disadvantages to the parental-child relationship and the responsibilities that flow from it (i.e. it is not trivial, insubstantial or merely a negative impact).

~~An assessment of whether a Family Status request triggers the University’s Duty to Accommodate:~~

- ~~Includes whether the child/parent is under the care and/or supervision of the individual~~
- ~~Includes whether the need is based on an essential or legal obligation which flows from the parent-child relationship~~
- ~~Includes whether the rule/requirement creates real disadvantage to the parent-child relationship and the responsibilities that flow from it (i.e. it is not trivial, insubstantial, or merely a negative impact)~~
- ~~May include a consideration of whether the individual made reasonable efforts to meet their child/parent obligations through alternative solutions that are reasonably accessible~~

“Functional Limitations” refer to the specific effect(s) an individual’s code related needs/obligations impact their ability to access services, facilities and housing and or perform the essential requirements of their academic or employment pursuits. For example, an employee is unable to lift objects greater than 10 pounds due to a disability, or a student will be late for class because they are a single parent and need to drop off their child to daycare at a specific time.

“Gender Identity & Gender Expression” are not defined in the Code. Gender Identity is the gender that people identify with or how they perceive themselves, which may be different from their birth-assigned sex. Gender identity is linked to a sense of self, the sense of being woman, man, both, neither or anywhere along the gender spectrum (non-binary). Gender Expression is the way people communicate or express their gender identity publicly; often through behaviour and physical appearance, e.g., dressing, the length and style of hair, or by emphasizing, de-emphasizing or changing physical characteristics. Chosen names and preferred pronouns are also ways in which people express gender. Gender Identity and Gender Expression are completely separate from sexual orientation.

~~All employees, job applicants and service recipients have a right to be treated with respect and dignity, dress in accordance with and be identified by and referred to as their self-identified or expressed gender.~~ Accommodations on the ground of gender identity or gender expression may be sought relating to:

- Pronouns
- Name and Gender title changes
- Transitioning
- Gender affirming surgery
- Washroom Access
- Locker Room/Change Facilities

“Interim Accommodations” are temporary Accommodation Measures that are implemented on a good-faith basis while an accommodation request is under review and are typically reserved for complex cases that may require more time or specialist input to determine whether Accommodation is required and/or to identify and choose appropriate long-term Accommodation Measures.

"Person(s) of Authority" includes any person who has charge of a workplace, authority over another Employee or authority in the administration of education. Anyone who supervises an Employee at Ontario Tech University is a Person of Authority. For the purposes of this policy, Faculty members, and ~~Teaching Assistants and Faculty Leadership~~ (e.g. Deans, Associates Deans, etc.) are also considered Persons of Authority vis-à-vis their relationship to students.

"Protected Ground(s)" are the grounds contained in the Ontario Human Rights Code under which individuals are protected against discrimination and harassment. All University Members are protected under the following Grounds: "race, ancestry, place of origin, colour, ethnic origin, citizenship, creed, sex, sexual orientation, gender identity, gender expression, age, Record of Offences, marital status, family status or disability." Employees are additionally protected under the ground "record of offences."

~~Protected Grounds for Students include "race, ancestry, place of origin, colour, ethnic origin, citizenship, creed, sex, sexual orientation, gender identity, gender expression, age, Record of Offences, marital status, family status or disability," and any additional protected grounds that are added to the Ontario Human Rights Code by way of statutory amendment. Protected Grounds for Employees are the same, but include the additional ground of "record of offences."~~

"Sex (Including Pregnancy and Breastfeeding)" ~~is not specifically defined in the Code, the ground of "sex,"~~ but it is considered to be related to a person's biological sex, male or female. ~~The Code makes it against the law to discriminate against someone or to harass them because of sex, including pregnancy and breastfeeding. Pregnancy includes the process from conception up to the period following childbirth.~~ Special needs and circumstances that may be experienced as a result of pregnancy are also included within the definition of sexpregnancy. Special needs can relate to circumstances arising from:

- breastfeeding
- miscarriage or stillbirth
- abortion
- conditions which result directly or indirectly from an abortion/miscarriage or stillbirth
- fertility treatments/ other interventions to get pregnant
- medical complications resulting from pregnancy
- recovery from childbirth
- ~~breastfeeding~~
- postpartum depression

"Undue Hardship" ~~as defined in the 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).~~ refers to the scope in which an organization's Duty to Accommodate extends. In most cases, organizations must take all reasonable steps to determine if an individual can be accommodated. However, the Duty to Accommodate does not extend to cases in which Undue Hardship can be demonstrated. The three factors under the Code that can be

considered in determining undue hardship are, Cost, Outside Sources of Funding and Health and Safety requirements.

“**University Member**” means any individual who:

- is employed by the University or holds an appointment with the University, including paid, unpaid and/or honorific appointments (“**Employee**”);
- is registered as a student, in accordance with the academic regulations of the University (“**Student**”); and/or,
- Is 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

2. The University Secretary and General Counsel is the Policy Owner. The Policy Owner is responsible for overseeing the implementation, administration, interpretation and application of this Policy.
3. This Policy applies to all University Members in all aspects of their engagement with the University.
- ~~2. This Policy applies to all University Members, including Employees (i.e. full time, part-time, temporary, seasonal, contract workers), volunteers and job applicants, as well as individuals who receive services from the University, e.g. all Students, and/or those that are permitted to use University facilities.~~
- ~~3. The University Secretary and General Counsel is the Policy Owner and is responsible for the interpretation and administrative direction of this policy and its associated policies and procedures to ensure their compliance with regulatory requirements.~~
4. This Policy does not override or diminish the rights provided to Employees under applicable Collective Agreements. Collective Agreements will supersede this Policy to the extent there is a conflict.

POLICY

5. Ontario Tech University is committed to promoting an environment where everyone has an equal opportunity to contribute to their fullest potential and where all are treated with sensitivity, fairness and respect. The University recognizes its duty to accommodate to the point of undue hardship and commits itself to an accommodation process that reflects the principles of dignity, and privacy, inclusion and individualization and inclusion.
- ~~6.~~
- ~~5. Ontario Tech University is We are committed to fully exploring all requests for accommodation in good faith, and to providing reasonable accommodation up to the point of Undue Hardship, when the need for accommodation has been established unless the accommodation would alter a bona fide occupational or academic requirement and/or undue hardship can be demonstrated.~~

7. Ontario Tech University will consider on a case-by-case basis whether Interim Accommodations can be implemented during the exploration of accommodation requests.

8. Where there are multiple ways to provide accommodation without incurring Undue Hardship, the University reserves the right to accommodate in the manner most consistent with the University's operational and academic requirements.

6.9. The Duty to Accommodate: General Principles

~~In order to meet the needs of individuals affected,~~ The University's approach to providing accommodations will be based on the following principles:

a) **Individualization:** ~~designing accommodation to meet the specific circumstances of each Employee, job applicant and Student.~~ Accommodation is assessed and delivered on an individual basis for persons who make their needs known. Each request must be considered individually in order to meet the specific circumstances of the individual seeking accommodation. ~~assess appropriate accommodation. Requests for accommodation must be dealt with in a timely manner so individuals can fully participate in all aspects of employment, use of facilities and receipt of services, except where evidence does not support the need for accommodation or where undue hardship can be demonstrated.~~

b) **Dignity:** ~~Requests for accommodation must be dealt with in a~~ respectful and timely manner so individuals can fully participate in all aspects of employment, academic endeavors and in the use of facilities and housing and receipt of services, ~~except where evidence does not support the need for accommodation or where undue hardship can be demonstrated.~~ **and**

c) **Privacy:** individuals must be accommodated in ways that respect their ~~dignity~~ and right to privacy. Information relating to specific requests for accommodation will be treated as confidential and will only be used for the purpose of assessing and implementing accommodation options and solutions.

~~e) Partnership and Consultation:~~ The consideration of accommodation requests and the search for reasonable accommodation measures will involve the person requiring the accommodation and a Person of Authority. Consultations with third parties with specialized expertise in the development of the accommodation plan may also be required (e.g. the Human Rights Office, Student Accessibility Services and Human Resources~~medical practitioners~~).

~~ed) Inclusion: intentional design helps ensure~~ The University is committed to ensuring its programs, policies, practices, facilities, services, communications and systems ~~are designed intentionally are designed and administered~~ to foster the full integration of diverse individuals and groups protected under the Code. Periodic~~The~~ proactive reviews of existing policies, rules, practices and procedures to identify and eliminate barriers to access and inclusion can also promote a more inclusive campus while helping to minimize the need for individualized accommodations. ~~Intentional design and systemic assessments minimize the need for individual assessments/accommodations.~~

e) **Respect** for confidentiality and dignity and the unique circumstances of each University Member. See comment above re: Dignity and Privacy.

f) **Written accommodation plans:** ~~in cases involving disability accommodation, written accommodation plans will be developed in accordance with the requirements of the Accessibility for Ontarians with Disabilities Act.~~

7.10. Making a Request for Accommodation

Although accommodation requests are most commonly made on the grounds of Disability, Family Status, Creed, Sex (more specifically related to pregnancy ~~and breast-feeding~~) and Gender Identity & Gender Expression, requests for accommodation can be made based upon any Protected Ground.

It is typically the responsibility of the University Member to make their Protected Ground ~~Code~~-related needs known. Reach out to a relevant Person of Authority for information and assistance and/or to commence the accommodation process. [Note: The University has specialized procedures for Students and Employees related to making disability-related accommodation requests.] For accommodation requests related to all other Protected Grounds, speak to a Person of Authority (e.g. your manager, your Professor, a Dean, etc.)

A detailed, written account of your Code-related needs will assist the Person of Authority to understand your situation and will likely expedite the accommodation process. If appropriate and available, provide supporting documentation that verifies the need for accommodation (e.g. a medical form, a child's daycare schedule or a custody agreement). Those requesting accommodation should focus on the Functional Limitations that are impacting their ability to work, participate academically or access other services, facilities or housing, and should avoid requesting specific Accommodation Measures at the outset.

Any University Member may book a consultation meeting with The Human Rights Office for additional information related to this policy instrument or for advice related to their specific circumstances.

8.11. Receiving a Request for Accommodation

~~Accommodation requests on the basis of a Disability must be handled in a manner consistent with obligations detailed in the relevant procedures for Students or Employees. Student Accessibility Services manages Disability related accommodation requests from Students and Human Resources manages similar requests from Employees.~~

~~For all other accommodation requests, Except in relation to disability-related requests, Persons of Authority will determine whether appropriate Functional Limitations have been identified in consultation with experts as necessary, and if not, will ask the requester to identify appropriate Functional Limitations. Persons of Authority are tasked with receiving and responding to requests for accommodation. When in receipt of a request for accommodation, Once the functional limitations are identified, the Person of Authority will determine whether the need for accommodation has been verified.~~

If there is evidence to support the need for accommodation, the Person of Authority will identify and select appropriate accommodation measures in consultation with the individual seeking accommodation. If, on the other hand, the assessment concludes that accommodation is not required, the Person of Authority will advise the individual in writing.

Persons of Authority are encouraged to consult with the Human Rights Office for advice and assistance. In any event, if the Person of Authority concludes that accommodation is not required, they must consult with the Human Rights Office prior to informing the individual.

9.12. Dispute Resolution

The University has Dispute Resolution procedures to handle allegations of discrimination. University Members who have concerns about the manner in which their request for accommodation has been handled should consult the Respectful Campus Policy and related procedures.

ROLES AND RESPONSIBILITIES

10.13. All University Members

1. 1. Are responsible for familiarizing themselves with this Policy
- 1.2. Will build and maintain positive and productive relationships and demonstrate Respect in their interactions; and,
- 2.3. Will engage the accommodation process in good-faith and in a cooperative manner, which includes making their needs known in a timely fashion, providing additional information about their individualized needs when requested and being open to all reasonable Accommodation Measures.

11.14. Persons of Authority

1. Are responsible for ~~familiarizing themselves with this Policy and will ensure~~ University Members under their authority are aware of this Policy and its associated procedures;
2. Will respond to requests for Accommodation in good faith, in accordance with related Ontario Tech University policies and procedures, and in consultation with relevant stakeholders;
3. Will handle requests for accommodation on the ground of “Disability” consistent with applicable procedures for Students and Employees;
4. Will process requests for accommodation related to all other Protected Grounds pursuant to requirements under this policy, ensuring the University meets its Duty to Accommodate up to the point of undue hardship; and,
5. Will cooperate with relevant stakeholders in the process of identifying and implementing reasonable Accommodation Measures.

12.15. Human Rights Office

1. Is responsible for the interpretation and administrative direction of this policy and its associated policies and procedures to ensure their compliance with regulatory requirements;
2. Will assist University Members to understand their rights and obligations under this policy and provide advice and/or direction; and,
3. Will assist Persons of Authority to assess requests for accommodation and explore reasonable Accommodation Measures.

13.16. Human Resources

1. Is responsible for administering the “Procedures for Accommodating Employees and Job Applicants with Disabilities;” and,
2. Will assist Persons of Authority to implement Accommodation Measures in the workplace.

14.17. Student Life

1. Is responsible for administering the “Procedures for Academic Accommodation for Students with Disabilities;” and,
2. Will assist Persons of Authority to implement Accommodation Measures for students.

MONITORING AND REVIEW

15.18. This Policy will be reviewed as necessary and at least every three years. The University Secretary and General Counsel, or successor thereof, is responsible to monitor and review this Policy.

RELEVANT LEGISLATION

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

Accessibility for Ontarians with Disabilities Act, 2005, S.O. 2005
Workplace Safety and Insurance Act

RELATED POLICIES, PROCEDURES & DOCUMENTS

17.20. Accessibility Policy

Procedures for Accommodating Employees and Job Applicants with Disabilities
Procedures for Academic Accommodation for Students with Disabilities
Respectful Campus Policy

[Ontario Human Rights Commission \(Policies and Guidelines\)](#)

Classification Number	<i>To be completed by the Policy Office</i>
Framework Category	Legal, Compliance and Governance
Approving Authority	Board of Governors
Policy Owner	University Secretary and General Counsel
Approval Date	DRAFT FOR CONSULTATION
Review Date	
Supersedes	

ACCOMMODATION POLICY

PURPOSE

- The purpose of this Policy is to:
 - Commit the University to a barrier-free and inclusive campus environment; and,
 - Demonstrate compliance with the obligations and responsibilities, required of the University under its Respectful Campus Policy and by the *Ontario Human Rights Code* (“*the Code*”), the *Accessibility for Ontarians with Disabilities Act* (AODA), and the *Workplace Safety and Insurance Act*.

DEFINITIONS

- “Accommodation Measures”** are adaptations or adjustments that are required to enable full participation. Accommodation Measures may include, but are not limited to:

 - Human support services such as sign language interpreters, readers, etc.
 - Technical aids and assistive devices
 - Workstation and/or office modifications
 - Flexible or alternative work/assignment schedules
 - Temporary re-assignments

“Barriers” include attitudes (stereotypes or prejudices), designs, policies, practices and rules that prevent full participation of individuals or groups on the basis of a protected Ground

“Creed” is not defined in the Code, but courts and tribunals often refer to creed as religious beliefs and/or practices. As creed is not clearly defined, the following characteristics have been relied on when considering whether a belief system is a creed under the Code:

- It is sincerely, freely, and deeply held
- Is integrally linked to a person’s identity, self-definition, and fulfilment
- Is a particular and comprehensive, overarching system of belief that governs one’s conduct and practices
- Addresses ultimate questions of human existence, including ideas about life, purpose, death, and the existence or non-existence of a creator and/or a higher or different order of existence
- Has some nexus/connection to an organization or community that professes a shared system of belief.

“Disability” is defined in the Code as:

- any degree of physical disability, infirmity, malformation or disfigurement that is caused by bodily injury, birth defect or illness and includes diabetes mellitus, epilepsy, a brain injury, any degree of paralysis, amputation, lack of physical

coordination, blindness or visual impediment, Deafness or hearing impediment, muteness or speech impediment, or physical reliance on a guide dog or other animal or on a wheelchair or other remedial appliance or device;

- a condition of mental impairment or a development disability;
- a learning disability, or dysfunction in one or more of the processes involved in understanding or using symbols or spoken language;
- a mental disorder; or
- an injury or disability for which benefits were claimed or received under the insurance plan established under the *Workplace Safety and Insurance Act*.

“Duty to Accommodate” refers to the obligation to eliminate the disadvantage, to the point of undue hardship, caused by barriers that exclude individuals or groups protected under the Code from participating in all aspects of their employment, academic endeavors, or use of facilities and housing on campus. Failure to meet the Duty to Accommodate is a form of discrimination.

“Family Status” is defined in the Code as the status of being in a parent and child relationship. It includes any relationship that is equivalent to the care, responsibilities and commitment of a parent to a child. An adult child who is responsible for the care of a parent (e.g., providing elder care) is also in a relationship that is included in the definition of family status. In order to trigger a Family Status accommodation, the child/parent must be under the supervision or control of the University Member, there must be an essential need or legal obligation that flows from the relationship and the impact must create real disadvantages to the parental-child relationship and the responsibilities that flow from it (i.e. it is not trivial, insubstantial or merely a negative impact).

“Functional Limitations” refer to the specific effect(s) an individual’s code related needs/obligations impact their ability to access services, facilities and housing and or perform the essential requirements of their academic or employment pursuits. For example, an employee is unable to lift objects greater than 10 pounds due to a disability, or a student will be late for class because they are a single parent and need to drop off their child to daycare at a specific time.

“Gender Identity & Gender Expression” are not defined in the Code. Gender Identity is the gender that people identify with or how they perceive themselves, which may be different from their birth-assigned sex. Gender identity is linked to a sense of self, the sense of being woman, man, both, neither or anywhere along the gender spectrum (non-binary). Gender Expression is the way people communicate or express their gender identity publicly; often through behaviour and physical appearance, e.g., dressing, the length and style of hair, or by emphasizing, de-emphasizing or changing physical characteristics. Chosen names and preferred pronouns are also ways in which people express gender. Gender Identity and Gender Expression are completely separate from sexual orientation.

Accommodations on the ground of gender identity or gender expression may be sought relating to:

- Pronouns
- Name and Gender title changes
- Transitioning

- Gender affirming surgery
- Washroom Access
- Locker Room/Change Facilities

“Interim Accommodations” are temporary Accommodation Measures that are implemented on a good-faith basis while an accommodation request is under review and are typically reserved for complex cases that may require more time or specialist input to determine whether Accommodation is required and/or to identify and choose appropriate long-term Accommodation Measures.

"Person(s) of Authority" includes any person who has charge of a workplace, authority over another Employee or authority in the administration of education. Anyone who supervises an Employee at Ontario Tech University is a Person of Authority. For the purposes of this policy, Faculty members, and Faculty Leadership (e.g. Deans, Associates Deans, etc.) are also considered Persons of Authority vis-à-vis their relationship to students.

"Protected Ground(s)" are the grounds contained in the Ontario Human Rights Code under which individuals are protected against discrimination and harassment. All University Members are protected under the following Grounds: “race, ancestry, place of origin, colour, ethnic origin, citizenship, creed, sex, sexual orientation, gender identity, gender expression, age, Record of Offences, marital status, family status or disability.” Employees are additionally protected under the ground “record of offences.”

“Sex (Including Pregnancy)” is not specifically defined in the Code, but is considered to be related to a person’s biological sex, male or female. Special needs and circumstances that may be experienced as a result of pregnancy are also included within the definition of sex. Special needs can relate to circumstances arising from:

- breastfeeding
- miscarriage or stillbirth
- abortion
- conditions which result directly or indirectly from an abortion/miscarriage or stillbirth
- fertility treatments/ other interventions to get pregnant
- medical complications resulting from pregnancy
- recovery from childbirth
- postpartum depression

“Undue Hardship” refers to the scope in which an organization’s Duty to Accommodate extends. In most cases, organizations must take all reasonable steps to determine if an individual can be accommodated. However, the Duty to Accommodate does not extend to cases in which Undue Hardship can be demonstrated. The three factors under the Code that can be considered in determining undue hardship are, Cost, Outside Sources of Funding and Health and Safety requirements.

“University Member” means any individual who:

- is employed by the University or holds an appointment with the University, including paid, unpaid and/or honorific appointments (“**Employee**”);
- is registered as a student, in accordance with the academic regulations of the University (“**Student**”); and/or,
- Is 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. The University Secretary and General Counsel is the Policy Owner. The Policy Owner is responsible for overseeing the implementation, administration, interpretation and application of this Policy.
4. This Policy applies to all University Members in all aspects of their engagement with the University.
5. This Policy does not override or diminish the rights provided to Employees under applicable Collective Agreements. Collective Agreements will supersede this Policy to the extent there is a conflict.

POLICY

6. Ontario Tech University is committed to promoting an environment where everyone has an equal opportunity to contribute to their fullest potential and where all are treated with sensitivity, fairness and respect. The University recognizes its duty to accommodate to the point of undue hardship and commits itself to accommodation that reflects the principles of dignity, privacy, individualization and inclusion.
7. Ontario Tech University is committed to fully exploring all requests for accommodation in good faith, and to providing reasonable accommodation when the need for accommodation has been established unless the accommodation would alter a bona fide occupational or academic requirement and/or undue hardship can be demonstrated.
8. Ontario Tech University will consider on a case-by-case basis whether Interim Accommodations can be implemented during the exploration of accommodation requests.
9. Where there are multiple ways to provide accommodation without incurring Undue Hardship, the University reserves the right to accommodate in the manner most consistent with the University’s operational and academic requirements.

10. The Duty to Accommodate: General Principles

The University’s approach to providing accommodations will be based on the following principles:

- a) **Individualization:** Accommodation is assessed and delivered on an individual basis for persons who make their needs known. Each request must be considered individually in order to meet the specific circumstances of the individual seeking accommodation.

b) **Dignity:** Requests for accommodation must be dealt with in a respectful and timely manner so individuals can fully participate in all aspects of employment, academic endeavors and in the use of facilities and housing.

c) **Privacy:** individuals must be accommodated in ways that respect their right to privacy. Information relating to specific requests for accommodation will be treated as confidential and will only be used for the purpose of assessing and implementing accommodation options and solutions. The consideration of accommodation requests and the search for reasonable accommodation measures will involve the person requiring the accommodation and a Person of Authority. Consultations with third parties with specialized expertise in the development of the accommodation plan may also be required (e.g. the Human Rights Office, Student Accessibility Services and Human Resources).

e) **Inclusion:** The University is committed to ensuring its programs, policies, practices, facilities, services, communications and systems are designed intentionally to foster the full integration of diverse individuals and groups protected under the Code. Periodic proactive reviews of existing policies, rules, practices and procedures to identify and eliminate barriers to access and inclusion can also promote a more inclusive campus while helping to minimize the need for individualized accommodations.

11. Making a Request for Accommodation

Although accommodation requests are most commonly made on the grounds of Disability, Family Status, Creed, Sex (more specifically related to pregnancy) and Gender Identity & Gender Expression, requests for accommodation can be made based upon any Protected Ground.

It is typically the responsibility of the University Member to make their Protected Ground-related needs known. Reach out to a relevant Person of Authority for information and assistance and/or to commence the accommodation process. [Note: The University has specialized procedures for [Students](#) and [Employees](#) related to making disability-related accommodation requests.]

A detailed, written account of your Code-related needs will assist the Person of Authority to understand your situation and will likely expedite the accommodation process. If appropriate and available, provide supporting documentation that verifies the need for accommodation (e.g. a medical form, a child's daycare schedule or a custody agreement). Those requesting accommodation should focus on the Functional Limitations that are impacting their ability to work, participate academically or access other services, facilities or housing, and should avoid requesting specific Accommodation Measures at the outset.

Any University Member may book a consultation meeting with The Human Rights Office for additional information related to this policy instrument or for advice related to their specific circumstances.

12. Receiving a Request for Accommodation

Except in relation to disability-related requests, Persons of Authority will determine whether appropriate Functional Limitations have been identified in consultation with

experts as necessary, and if not, will ask the requester to identify appropriate Functional Limitations. Once the functional limitations are identified, the Person of Authority will determine whether the need for accommodation has been verified.

If there is evidence to support the need for accommodation, the Person of Authority will identify and select appropriate accommodation measures in consultation with the individual seeking accommodation. If, on the other hand, the assessment concludes that accommodation is not required, the Person of Authority will advise the individual in writing.

Persons of Authority are encouraged to consult with the Human Rights Office for advice and assistance. In any event, if the Person of Authority concludes that accommodation is not required, they must consult with the Human Rights Office prior to informing the individual.

13. Dispute Resolution

The University has Dispute Resolution procedures to handle allegations of discrimination. University Members who have concerns about the manner in which their request for accommodation has been handled should consult the Respectful Campus Policy and related procedures.

ROLES AND RESPONSIBILITIES

14. All University Members

1. Are responsible for familiarizing themselves with this Policy
2. Will build and maintain positive and productive relationships and demonstrate Respect in their interactions; and,
3. Will engage the accommodation process in good-faith and in a cooperative manner, which includes making their needs known in a timely fashion, providing additional information about their individualized needs when requested and being open to all reasonable Accommodation Measures.

15. Persons of Authority

1. Are responsible for ensuring University Members under their authority are aware of this Policy and its associated procedures;
2. Will respond to requests for Accommodation in good faith, in accordance with related Ontario Tech University policies and procedures, and in consultation with relevant stakeholders;
3. Will handle requests for accommodation on the ground of "Disability" consistent with applicable procedures for Students and Employees;
4. Will process requests for accommodation related to all other Protected Grounds pursuant to requirements under this policy, ensuring the University meets its Duty to Accommodate up to the point of undue hardship; and,
5. Will cooperate with relevant stakeholders in the process of identifying and implementing reasonable Accommodation Measures.

16. Human Rights Office

1. Is responsible for the interpretation and administrative direction of this policy and its associated policies and procedures to ensure their compliance with regulatory requirements;
2. Will assist University Members to understand their rights and obligations under this policy and provide advice and/or direction; and,
3. Will assist Persons of Authority to assess requests for accommodation and explore reasonable Accommodation Measures.

17. Human Resources

1. Is responsible for administering the “Procedures for Accommodating Employees and Job Applicants with Disabilities;” and,
2. Will assist Persons of Authority to implement Accommodation Measures in the workplace.

18. Student Life

1. Is responsible for administering the “Procedures for Academic Accommodation for Students with Disabilities;” and,
2. Will assist Persons of Authority to implement Accommodation Measures for students.

MONITORING AND REVIEW

19. This Policy will be reviewed as necessary and at least every three years. The University Secretary and General Counsel, or successor thereof, is responsible to monitor and review this Policy.

RELEVANT LEGISLATION

20. Human Rights Code, R.S.O. 1990, c. H.19
Accessibility for Ontarians with Disabilities Act, 2005, S.O. 2005
Workplace Safety and Insurance Act

RELATED POLICIES, PROCEDURES & DOCUMENTS

21. Respectful Campus Policy
Accessibility Policy
Procedures for Accommodating Employees and Job Applicants with Disabilities
Procedures for Academic Accommodation for Students with Disabilities
[Ontario Human Rights Commission \(Policies and Guidelines\)](#)

COMMITTEE REPORT

SESSION:

Public

ACTION REQUESTED:

Decision
Discussion/Direction
Information

Financial Impact Yes No

Included in Budget Yes No

TO: Governance, Nominations and Human Resources Committee (GNHR)

DATE: March 30, 2021

SLT LEAD: Cheryl Foy, University Secretary and General Counsel

SUBJECT: Respectful Campus Policy Instruments

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.
- In accordance with its Terms of Reference, one of GNHR's mandate includes the establishment of human resources policy instruments.

Request: We are seeking:

- (a) the committee's recommendation of the Respectful Campus Policy for approval by the Board of Governors; and
- (b) the committee's approval of the related Procedures to Prevent and Address Discrimination and Harassment By or Against Employees.

BACKGROUND/CONTEXT & RATIONALE:

The Secretariat plays a significant role in advancing the strategic objective of creating a sticky campus. This work is done with a focus on initiatives to improve the culture within which students learn and employees work. Several years ago, the Secretariat began to focus on how the university improves its culture by increasing its capacity to manage conflict and promote respect. The purpose of the Respectful Campus Policy is to communicate the University's Human Rights responsibilities and obligations in a central

document that applies to all University Members. The Policy combines an existing student policy (which has not been updated since 2004 and is out of date) with a policy that applies only to employees. In addition, the policy places a greater emphasis on preventing harassment and discrimination by addressing disrespect and microaggressions and placing greater emphasis on informal dispute resolution processes such as mediation. While the principles and obligations described in the policy apply to all University Members (with the exception of workplace harassment), the dispute resolution procedures for employees and students will remain separate. The Policy is accompanied by the employee procedures and the student procedures will be forthcoming shortly.

ALIGNMENT WITH MISSION, VISION, VALUES & STRATEGIC PLAN:

- These policy documents support the university's values of integrity and respect by demonstrating the university's commitment to establishing a safe, inclusive, and equitable culture at the institution.
- By promoting a respectful, inclusive, and equitable culture at the university, these policy documents also support the strategic pillar of creating a "sticky campus". If we want the university community to want to spend time on campus, they must feel protected and be familiar with their various rights, roles, responsibilities and obligations as they relate to preventing and responding to all forms of harassment and discrimination. We must also move toward more constructive ways of resolving disputes earlier and in less adversarial ways.

CONSULTATION:

- Policy Advisory Committee (Consultation - November 2020)
- Faculty Association (Consultation - November 2020)
- Online Consultation (December 18, 2020 – January 18, 2021)
- Joint Health and Safety Committee (Consultation - January 21, 2021 – February 19, 2021)
- Academic Council (Consultation - February 23, 2021 – March 3, 2021)
- Governance, Nomination and Human Resources Committee (Consultation - January 28, 2021; Recommendation – March 30, 2021)
- Board of Governors (Approval – April 22, 2021)

Consultation Comments and Response

Respectful Campus Policy

- We received feedback that including job applicants in the definition of employee "does not make sense" and is "overreach."
- **Response:** Job applicants are protected against discrimination and harassment under the employment provisions of the Ontario Human Rights Code.
- We received feedback suggesting that "Microaggression" should not be defined in the Policy because it is "commentary" and "overreach."
- **Response:** The purpose of including a definition for Microaggression is to inform the campus community that there are types of behaviour like Microaggressions and disrespectful behaviour that may fall below the threshold of harassment, but are nonetheless harmful and require action on the part of Persons of Authority. Including this definition is consistent with the policy goal of creating a culture of

- respectful engagement and preventing harassment and discrimination by addressing various forms of conflict early and effectively. Inclusion of the definition also sends the message that inappropriate behaviour will not be tolerated, e.g. racism, sexism, ableism, transphobia, islamophobia, etc. This is of particular importance to members of the University community who come from traditionally marginalized communities.
- We received feedback that the definition of “Harassment” is too long with too much commentary. It was suggested that we use the legal definition of harassment instead.
 - **Response:** The legal definitions are included in the definition of “Discriminatory Harassment,” “Workplace Harassment” and “Sexual Harassment.” The use of the term “Harassment” in the policy instrument is to denote where all types of harassment are being referred to. The definition of “Harassment” is meant to provide a less legalistic and more colloquial understanding of what specific actions may or may not amount to harassment.
 - We received feedback suggesting that paragraphs 9-12 are commentary and not necessary.
 - **Response:** We believe there is value in setting out broadly the University’s principles and expectations as they relate to Human Rights. We also believe that there is value in providing guidance to the community about how Human Rights and Respect should be considered in relation to particular circumstances that are unique to academic environments.
 - We received feedback questioning the need to include information in the policy regarding privacy obligations since the University has other policies that already set out these obligations (paragraph 13.11).
 - **Response:** Because human rights reports and requests for accommodation on human rights grounds often require the disclosure of sensitive information it is appropriate to include a paragraph about the importance of maintaining private and confidential information collected under the policy in a manner consistent with our Privacy and Records Management policies.
 - We received feedback that there should be more references within the Policy to Collective Agreement protections. It was also pointed out that the Policy does not reference academic freedom.
 - **Response:** paragraph 7 of the policy notes that the policy and related procedures do “not override or diminish the rights provided to Employees under applicable Collective Agreements,” which includes the right to academic freedom under the FA Collective Agreement. Regardless, a reference to academic freedom was added to paragraph 7 for greater clarity.
 - We received feedback that there is a discrepancy with the scope and authority sections in the Policy and Procedure.
 - **Response:** The discrepancy was purposeful. The policy is for all university members; the procedures are for employees only. Further procedural instruments will come that will address students.
 - We received feedback that the Policy does not reference bullying, with the suggestion that the Policy only covers harassing behavior if it is linked to a protected ground under the Ontario Human Rights Code.

Respectful Campus Procedures (for Employees)

- We received feedback suggesting that the definitions section should be omitted from the Procedures in favour of simply referencing the definitions from the policy.
- **Response:** replicating definitions in a procedural document is standard in University policy instruments: including the definitions in the procedure is consistent with current and past practice and existing policy direction. Please note, however, that the Policy Office plans to work on displaying the policies in such a way that the definition section would be removed and viewers able to click on the defined term each time they encounter it in a policy instrument if they want to look up the word.
- We received feedback questioning the need to include information in the procedure regarding the handling of confidential information when the University has other policies that already set out these obligations (paragraph 7).
- **Response:** Because human rights reports and related investigation processes often require the disclosure of sensitive information it is appropriate to include a detailed section about how confidentiality will be maintained during reporting and dispute resolution processes. This is to ensure that individuals who are considering coming forward with a report of harassment or discrimination are not dissuaded because of fears about how their personal and private information may be used. Furthermore, it is important that the same individuals are aware of instances when the information provided may need to be shared.
- A member asked about the use of the term “Administrative Fairness” rather than “Procedural Fairness” or just “Natural justice.”
- **Response:** We’ve chosen for the purposes of the policy instrument to use “Administrative Fairness” as set out in the definitions section and to use it consistently.

MOTIONS:

- (a) *That the Governance, Nominations and Human Resources Committee hereby recommends the Respectful Campus Policy, as presented, for approval by the Board of Governors.*
- (b) *That the Governance, Nominations and Human Resources Committee hereby approves the Procedures to Prevent and Address Discrimination and Harassment By or Against Employees, as presented.*

NEXT STEPS:

- Respectful Campus Policy will be presented to the Board of Governors for approval on April 22.

SUPPORTING REFERENCE MATERIALS:

- clean & blacklined Respectful Campus Policy
- clean & blacklined Procedures to Prevent and Address Discrimination and Harassment By or Against Employees



Classification Number	<i>To be completed by the Policy Office</i>
Framework Category	Legal, Compliance and Governance
Approving Authority	Board of Governors
Policy Owner	University Secretary and General Counsel
Approval Date	DRAFT FOR CONSULTATION
Review Date	
Supersedes	

RESPECTFUL CAMPUS POLICY

PURPOSE

1. The Respectful Campus Policy (the “Policy”) outlines Ontario Tech University’s commitment to promote and sustain a respectful and inclusive campus in accordance with the Ontario Human Rights Code (the “Code”), the Accessibility for Ontarians with Disabilities Act, and the Occupational Health and Safety Act (OHSA). The purpose of the Policy is to ensure the campus community is familiar with their various rights, roles, responsibilities and obligations as they relate to preventing and responding to all forms of Harassment and Discrimination.

DEFINITIONS

2. For the purposes of this Policy and associated procedures, the following definitions apply:

“Barriers” include attitudes (stereotypes or prejudices), policies, practices, rules and designs that prevent full participation of individuals or groups on the basis of a Protected people Ground. ~~from fully participating in employment and service provision. Systemic barriers are formal or informal policies, practices or rules which, when applied in the same way to everyone without accommodation, may have the effect of excluding or restricting the participation of some individuals and/or groups. Individuals and groups can experience discrimination as a result of physical (building design), attitudinal (stereotypes or prejudices) or systemic barriers.~~

“Complainant” refers to an individual ~~who is alleged to have experienced Harassment and/or Discrimination or~~ who has filed a Rreport regarding an alleged breach of this policy.

“Discrimination” is a distinction, without lawful justification, whether intentional or not, which has the effect of denying benefits to, or otherwise disadvantaging, an individual on the basis of a Protected Ground (defined below). Discrimination may involve direct actions that are discriminatory on their face, or it may involve rules, practices or procedures that appear neutral, but have the effect of disadvantaging one or more groups of people.

“Discriminatory Harassment” means engaging in a course of vexatious comment or conduct, ~~against a University Member in the course of employment or receipt of service,~~ based on any Protected Ground, that is known or ought reasonably to be known to be unwelcome. Discriminatory Harassment may include, for example, taunting or mocking

someone's race, ridiculing an individual's disability or targeting others with sexual, gender-based or homophobic slurs.

"Disrespect" is behavior that falls short of Harassment, but nevertheless has harmful impacts on the campus environment, e.g. rude, inconsiderate and passive aggressive behavior. Disrespect, if left unaddressed, can escalate to Harassment or Discrimination.

"Duty to Accommodate" refers to the obligation to eliminate the disadvantage, to the point of undue hardship, caused by barriers that exclude individuals or groups protected under the Code from participating in all aspects of their employment, academic endeavors, or use of facilities and housing or their receipt of services from the on campus University. Failure to meet the Duty to Accommodate is a form of discrimination. For more on the Duty to Accommodate see the University's Accommodation Policy.

"Employee" means job applicants and individuals performing services directly on the University's behalf, including administrative staff members, Faculty, volunteers and contract employees. Students who are employed during the course of their studies, are "Employees" for the purposes of this Policy when they are engaged in employment activities, but not otherwise.

"Faculty" includes a Faculty Member at Ontario Tech University, and includes those with both limited term and indefinite term appointments, as well as those with paid, unpaid and honorific appointments. For greater certainty, "Faculty" also includes visiting scholars and emeritus professors.

"Harassment" is the term used in this policy instrument to represent all forms of harassment: Discriminatory Harassment, Workplace Harassment and Sexual Harassment.

For greater certainty, Harassment is objectionable and unwanted behaviour that is verbally ~~or physically~~ abusive, vexatious or hostile, that is without reasonable justification, and that creates a hostile or intimidating environment for working, learning or living. Harassment may be intentional or unintentional. While harassment usually consists of repeated acts, a single serious incident that has a lasting harmful effect may also constitute harassment.

Harassing behaviour includes, but is not limited to cumulative demeaning or intimidating comments, gestures or conduct; verbal aggression or yelling; bullying; threats to a person's employment or educational status, person or property; persistent comments or conduct, including ostracism or exclusion of a person, that undermines an individual's self-esteem so as to compromise their ability to achieve work or study goals; abuse of power, authority or position; sabotage of a person's work; humiliating initiation practices; hazing; calling someone derogatory names; spreading of malicious rumours or lies; or making malicious or vexatious complaints about a person.

Harassment does not include the exercise of appropriate managerial or supervisory direction, including performance management and the imposition of discipline; constructive criticism; respectful expression of differences of opinions; reasonable changes to assignments or duties; correction of inappropriate ~~student~~ behaviour; interpersonal conflict; instructional techniques such as irony, conjecture, and refutation, or assigning readings or other instructional materials that advocate controversial positions; and single incidents of thoughtless, petty or foolish words or acts that cause fleeting harm.

"JHSC" means the Joint Health & Safety Committee(s) at Ontario Tech University.

"Mediation" is a structured process in which parties in dispute are assisted by a third-party to engage in dialogue~~discuss a dispute~~ and attempt to arrive at a mutually agreeable resolution. Mediation is a voluntary process and can only proceed if all parties involved agree to participate. ~~Depending on the circumstances, mediation may result in a signed agreement summarizing the agreed upon terms of settlement.~~

"Microaggression" means a comment or action that negatively targets a group based on a Protected Ground (e.g. a racist, sexist or homophobic comment). Microaggressions may be intentional or accidental, but are nonetheless harmful and stigmatizing to a certain group of people. If allowed to go unchallenged, Microaggressions may escalate to Harassment and/or Discrimination

"Person(s) of Authority" include, for the purposes of this policy and related procedures, any person who has charge of a workplace, authority over another Employee or authority in the administration of education. ~~Anyone who supervises an Employee at Ontario Tech University is a Person of Authority including supervisors, managers, Faculty members, Teaching Assistants, senior management and Faculty Leadership (e.g. Deans, Associates Deans, etc.) are also considered Persons of Authority vis-à-vis their relationship to students.~~

"Poisoned Environment" is a form of indirect Discriminatory Harassment ~~that creates real or perceived inequalities.~~ It occurs when comments or conduct (including comments or conduct that are condoned or allowed to continue when brought to the attention of a Person of Authority), ridicule or demean a person or group based upon a Protected Ground. The comments or conduct need not be directed at a specific person, and may be from any person, regardless of position or status.

"Protected Ground(s)" are the grounds contained in the Ontario Human Rights Code under which individuals are protected against discrimination and harassment. All University Members are Pprotected under the following Grounds: ~~for Students include~~ "race, ancestry, place of origin, colour, ethnic origin, citizenship, creed, sex, sexual orientation, gender identity, gender expression, age, ~~Record of Offences,~~ marital status, family status and/or disability," ~~and any additional protected grounds that are added to the Ontario Human Rights Code by way of statutory amendment. Protected Grounds for Employees are additionally the same, but include the additional protected under the ground of "record of offences."~~

"Report" refers to information about Harassment and/or Discrimination that is reported under the applicable procedures.

"Reprisal" includes retaliation, coercion, dismissal, threats or intimidation of anyone who in good faith: raises complaints or concerns, exercises their rights, or participates in a remedial process under this Policy.

"Respect" is a standard of interpersonal communication and behaviour characterized by self-restraint and consideration for others. ~~Disrespect is behavior that falls short of Harassment, but nevertheless has harmful impacts on the campus environment, e.g. rude, inconsiderate and passive aggressive behavior. Disrespect, if left unaddressed, can escalate to Harassment or Discrimination.~~

"Respondent" refers to anyone who is alleged to have engaged in behaviours of Harassment and/or Discrimination or who is the subject of a report regarding a breach of this policy.

"Sexual Harassment" means,

1. engaging in a course of vexatious comment or conduct because of sex, sexual orientation, gender identity or gender expression, where the course of comment or conduct is known or ought reasonably to be known to be unwelcome, or
2. making a sexual solicitation or advance where the person making the solicitation or advance is in a position to confer, grant or deny a benefit or advancement and the person knows or ought reasonably to know that the solicitation or advance is unwelcome.

Sexual Harassment includes but is not limited to, sexually suggestive or obscene remarks or gestures, negative stereotypical comments based on gender, sex or sexual orientation, gender identity and gender expression, ~~and showing or sending pornography.~~

“University Member” means any individual who:

- is employed by the University or holds an appointment with the University, including paid, unpaid and/or honorific appointments (**“Employee”**);
- is registered as a student, in accordance with the academic regulations of the University (**“Student”**); and/or
- Is 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.

“Workplace” means any place where Employees engage in any facet of employment activity (e.g. recruitment, training, evaluation and development), including employment activities online, outside the normal place of work, and employment activities that occur outside of normal working hours.

“Workplace Harassment” means,

1. engaging in a course of vexatious comment or conduct against an Employee in a workplace that is known or ought reasonably to be known to be unwelcome, and/or
2. Workplace Sexual Harassment ~~_ (defined as Sexual Harassment against an Employee in the workplace).~~

SCOPE AND AUTHORITY

3. The University Secretary and General Counsel is the Policy Owner. The Policy Owner is responsible for overseeing the implementation, administration, interpretation and application of this Policy.
4. The Policy Owner will ensure the Policy is reviewed as often as is necessary, and in any event, at least annually, in consultation with all appropriate departments and the JHSC(s), and in accordance with the University’s Policy Framework and relevant Collective Agreements.
5. This Policy applies to all University Members in all aspects of their engagement with the University.
6. Ontario Tech University has a [Student Sexual Violence Policy](#), which sets out a framework for ensuring that students who experience sexual violence are directed to appropriate supports and services and that includes a set of procedures that are completely student-driven; meaning students decide if they want to file a formal report or

to participate in informal or formal resolution options. Sexual Harassment, as defined under this policy is also defined as Student Sexual Violence when perpetrated by or against a student. ~~As such, there is necessarily overlap between the two policies in the event that a student alleges sexual violence against an Employee or an employee alleges sexual harassment by a student. In that case,~~ all of the rights, roles, responsibilities and obligations established under the Student Sexual Violence Policy will ~~be applied~~ to the Student Complainant, ~~whereas and~~ this Policy and its related procedures will be applied to ~~the Respondent Employees, including Respondents who are Students acting in the capacity as a University Employee (e.g., Teaching Assistants).~~ Such overlap will also occur in the event that an Employee alleges Sexual Harassment by a Student.

7. This Policy ~~and its corresponding Procedures~~ does not override or diminish the rights provided to Employees under applicable Collective Agreements, ~~including the right to academic freedom afforded to Faculty.~~ Collective Agreements will supersede this Policy to the extent there is a conflict.
8. This Policy does not preclude University Members from pursuing resolution through external resources and processes, including those offered by the Human Rights Legal Support Centre, the Human Rights Tribunal of Ontario and the Ontario Labour Relations Board.

POLICY

9. The University promotes a campus environment that is equitable, inclusive and accessible, and does not tolerate, ignore or condone Discrimination or Harassment by or against anyone. ~~The University is committed to providing a campus environment in which all University Members are treated with dignity, and to fostering a climate of understanding and mutual respect for the value of each individual.~~
10. ~~In the context of an academic community, responsibility for maintaining a respectful campus falls on all University members.~~ The University is committed to providing a campus environment in which all University Members are treated with dignity, and to fostering a climate of understanding and mutual respect. ~~Excellence in learning, research and work in the university community is fostered by promoting the freest possible exchange of information, ideas, beliefs and opinions in diverse forms, and it necessarily includes dissemination and discussion of controversial topics and unpopular points of view. However, Freedom of expression and freedom of inquiry must be exercised responsibly, in ways that demonstrate active concern and respect for others, including their ability to participate meaningfully in the exchange of information, ideas, beliefs and opinions (refer to the University's Freedom of Expression Policy). Respect for the value of freedom of expression and promotion of free inquiry are central to the University's mission.~~
11. ~~However, these freedoms cannot exist without an equally vigorous commitment to recognition of and respect for the freedoms of others, and concern for the well-being of every member of the university community. Excellence in scholarship, teaching and employment activities flows from active concern and respect for others, including their ability to participate meaningfully in the exchange of information, ideas, beliefs and opinions.~~

~~12.11.~~ Therefore, freedom of expression and freedom of inquiry must be exercised responsibly, in ways that recognize and respect the dignity of others, having careful regard to the dynamics of different relationships within the university environment, such as between professor and student, or supervisor and employee. The University will maintain a A respectful campus ~~is a climate environment~~ in which the human dignity of each individual is valued, and the diverse perspectives, ideas and experiences of all members of the community are able to flourish. While misunderstandings and conflicts will occur in a complex, demanding and diverse campus environment where collaboration is essential to success, early and informal approaches to resolution should be sought whenever possible and appropriate.

~~13.12.~~ To promote a respectful campus environment:

~~13.1.12.1.~~ The University will ensure that procedures are in place for the prevention of, and response to Harassment, Discrimination and other breaches of this policy.

~~13.2.12.2.~~ The University will provide information, instruction and assistance to University Members with respect to Harassment and Discrimination.

~~13.3.12.3.~~ The University will ~~provide ensure~~ Persons of Authority ~~are provided~~ with information and instruction that will enable them to recognize, assess and address Harassment and Discrimination, and to understand how to respond appropriately when such incidents are alleged. The University will also ~~provide ensure that~~ Persons of Authority with information and instruction that will enable them to understand their role in preventing incidents of Harassment and Discrimination by effectively and quickly addressing disrespectful behavior, Microaggressions and any other behaviours that issues negatively impacting group cohesion, in an effective and timely manner. quickly

~~13.4.12.4.~~ Any University Member who believes they have been harassed or discriminated against, or have witnessed Harassment or Discrimination, is expected to make good faith efforts to resolve their concerns depending on the circumstances, and/or Report the situation in a timely manner.

~~13.5.12.5.~~ The University will administer the processes set out in applicable procedures responding to Reports fairly and promptly, with adequate regard to the unique circumstances of each particular case, and in a manner that prioritizes the dignity and privacy of individuals involved.

~~13.6.12.6.~~ Where applicable and appropriate, the University will make available informal dispute resolution processes such as Mediation in an attempt to resolve ~~the~~ disputes and underlying conflict at the heart of a Report.

~~13.7.12.7.~~ The University will inform and update Complainants, Respondents and relevant Persons of Authority (as appropriate) about the status of dispute resolution processes as they progress.

~~12.8.~~ University Members are protected against Reprisal for submitting a Report in good faith, or for participating in a related dispute resolution process. ~~This protection does not apply to a University Member who submits a Report that is determined to be frivolous or vexatious, or who exhibits bad faith and/or refuses to cooperate in the course of an investigation.~~ A University Member who believes they have been penalized for submitting a Report in good faith,

or for participating in a related investigation, may pursue the allegation of Reprisal by submitting a Report, and/or may pursue a Reprisal complaint through external processes.

~~13.8-12.9.~~ Reprisal This protection does not apply to a University Member who submits a Report that is determined to be frivolous or vexatious, or who exhibits bad faith and/or refuses to cooperate in the course of an investigation; each of which are considered breaches of this policy.

~~13.9-12.10.~~ _____ The University will respect the privacy of individuals involved in Reports and investigations, ensuring information about a Report is not disclosed, except to the extent necessary to investigate, take corrective action, implement measures to protect the health and safety of University Members and/or restore the learning/work environment, or as otherwise required by law.

~~13.10-12.11.~~ _____ Personal Information collected under this Policy will be used only for the purposes of administering this Policy, and will be disclosed only on a need-to-know basis, to the extent disclosure is required to fulfill the University's legal obligations under the *Human Rights Code*, the *Occupational Health & Safety Act*, and any other applicable law and/or legal obligations, including any applicable collective agreement. Subject to applicable law, Personal Information collected, used and disclosed under this Policy will otherwise be kept confidential, and will be stored and disposed of in accordance with *Freedom of Information and Protection of Privacy Act* and Ontario Tech University's *Records Management Policy*.

~~13.11-12.12.~~ _____ University Members who engage in Harassment and/or Discrimination, Reprisal or other breaches of this policy will be held accountable and may be subject to disciplinary measures, up to and including termination of employment or academic expulsion.

ROLES AND RESPONSIBILITIES

~~14.13.~~ All University Members

~~13.1.~~ _____ Have a shared responsibility for ~~creating and~~ maintaining a respectful environment that is free from Harassment and Discrimination.

~~14.1-13.2.~~ Are responsible for familiarizing themselves with this Policy and related procedures;

~~14.2-13.3.~~ _____ Will refrain from engaging in Harassment, Discrimination, acts of Reprisal or other breaches of this policy.

~~14.3-13.4.~~ _____ Will build and maintain positive and productive relationships and demonstrate Respect in their interactions.

~~14.4-13.5.~~ _____ Will work cooperatively and constructively to resolve conflicts they encounter and seek assistance from a Person of Authority, as appropriate, regarding any escalating conflict they are unable to resolve themselves.

~~14.5-13.6.~~ _____ Will complete all required Discrimination and Harassment instruction and training within established timelines

~~14.6-13.7.~~ Will exercise rights under this Policy in good faith using prescribed channels. For more information on reporting Harassment and Discrimination, refer to the procedures for Employees [\[link\]](#) and Students [\[link\]](#).

~~14.7-13.8.~~ Will participate in and cooperate with the Reporting Process and/or any related investigation, including respecting confidentiality obligations.

~~14.8-13.9.~~ Will comply with the corrective measures imposed by the University under this Policy, subject to relevant collective agreements and other appeal rights.

15.14. Persons of Authority

Persons of Authority are responsible for supporting Ontario Tech University in its duty to create and maintain a respectful environment that is free from Harassment and Discrimination. Therefore, Persons of Authority have additional obligations in addition to the expectations for all University Members (above). Persons of Authority:

~~15.1-14.1.~~ Will cultivate a respectful and inclusive environment where people feel safe to raise concerns;

~~15.2-14.2.~~ Will ~~actively monitor the campus environment to~~ ensure expected standards under this Policy are adhered to, including addressing and resolving Microaggressions and other disrespectful behavior should they occur;

~~15.3-14.3.~~ Will lead by example, acting with Respect and modelling positive relationship building and constructive conflict resolution skills in dealings with all University Members, and in particular, those under their authority;

~~15.4-14.4.~~ Are responsible for ~~familiarizing themselves with this Policy and related procedures, and will ensure~~ University Members under their authority are aware of this Policy and its associated procedures;

~~15.5-14.5.~~ Will avoid the appearance of favoritism and unfairness by following and promoting adherence to evidence-based decision-making and the principles of non-Discrimination outlined in this Policy;

~~15.6-14.6.~~ Will consider seriously each incident, concern or Report brought forward by taking immediate action to stop any Discrimination, Harassment or other inappropriate behavior, whether the subject of a formal complaint or not, by following policies and procedures to the extent necessary to ensure compliance (note: a Person of Authority cannot agree “to do nothing,” even when that is requested by a University Member);

~~15.7.~~ Will respond to requests for Accommodation in accordance with related Ontario Tech University policies and procedures, and in consultation with appropriate stakeholders;

~~15.8-14.7.~~ Will inform ~~and consult senior people leaders, Human Resources and/or~~ the Human Rights Office ~~about~~ regarding all activities related to Discrimination and Harassment or other concerns and Reports related to this Policy; and,

~~15.9-14.8.~~ Will cooperate with the Human Rights Office to implement recommendations and restore areas under their authority that have been disrupted by alleged or actual Policy violations, or complaint resolution processes.

16.15. Human Rights Office

15.1. ~~The Human Rights Office will take primary responsibility for updating related procedures applicable to Employees and Students, ensuring that all related procedures are reviewed as often as is necessary, and in any event, at least annually, in consultation with all appropriate departments and the JHSC(s), and in accordance with the University's Policy Framework and relevant collective agreements. Is responsible for the interpretation and administrative direction of this policy and its associated policies and procedures to ensure their compliance with regulatory requirements and will take primary responsibility for updating related procedures applicable to Employees and Students, ensuring that all related procedures are reviewed as often as is necessary in consultation with all appropriate departments.~~

16.1.

16.2.15.2. The Human Rights Office will oversee dispute resolution processes, determine needs and engage specialist support, as necessary, for investigation, fact finding, Mediation or other interventions required to restore the campus to a positive and productive environment, including:

- a) receiving and responding to Reports from all University Members while ensuring Reports are responded to appropriately using informal and formal dispute resolution methods in a timely and equitable manner, as outlined in this Policy and in related procedures;
- b) ensuring the appropriate departments and/or individuals are advised of a Report, where appropriate; and,
- c) ensuring the outcome of an investigation under this Policy, is communicated in writing to Complainant(s), Respondent(s) and relevant Persons of Authority to support corrective and restorative measures.

16.3.15.3. The Human Rights Office is also responsible for:

- a) ensuring that copies of this Policy and related procedures are posted on a University website; and,
- b) Submitting an Annual Report to the Board of Governors Directors about statistics and trends in human rights complaint activities and other program initiatives

17.16. Human Resources

17.1.16.1. Human Resources is primarily responsible for the following overseeing compliance obligations under with the *Occupational Health & Safety Act*, including:

- a) providing Employees with appropriate information and instruction with respect to Workplace Harassment, including notifying them of this Policy and its related procedures;
- b) ensuring all Persons of Authority are provided with information and instruction that will enable them to recognize, assess and address Workplace Harassment in their respective workplaces, and will ensure Persons of Authority are aware of this Policy and related procedures;

- c) ensuring that copies of this Policy and employment-related procedures are posted on the established health and safety bulletin boards where it is likely to come to the attention of Employees; and,
- d) ensuring the corrective actions taken as a result of an investigation (if any), are communicated in writing to Complainant(s) and Respondent(s) who are Employees;

~~17.2.16.2.~~ Human Resources is also responsible for:

- a) providing Employees and Persons of Authority with appropriate information and instruction with respect to Discrimination and Discriminatory Harassment, including notifying them of this Policy and its related procedures;
- b) Assisting Persons of Authority, in consultation with the Human Rights Office, to address Microaggressions and other disrespectful behaviors that occur in the employment context; and,
- c) Assisting Persons of Authority to implement corrective and restorative measures in areas under their authority that have been disrupted by alleged or actual Policy violations, or complaint resolution processes.

~~18.17.~~ Student Life

~~18.1.17.1.~~ Student Life is responsible for:

- a) Providing Students with appropriate information with respect to Discriminatory Harassment and Discrimination, including notifying them of this Policy and its related procedures; and,
- b) Assisting Persons of Authority, in consultation with Human Resources and/or the Human Rights Office, to address Microaggressions and other disrespectful behaviors that occur in the academic or on-campus housing context.

MONITORING AND REVIEW

~~19.18.~~ This Policy will be reviewed as necessary and at least every year. The University Secretary and General Counsel, or successor thereof, is responsible to monitor and review this Policy.

RELEVANT LEGISLATION

~~20.19.~~ Human Rights Code, R.S.O. 1990, c. H.19

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

Occupational Health and Safety Act, R.S.O. 1990, c O.1, as amended

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

RELATED POLICIES, PROCEDURES & DOCUMENTS

[21-20](#). [NTD: Policy Superseded]Academic Accommodation for Students with Disabilities
[\[Procedures\]](#)

Access to Information and Protection of Privacy Policy

Accessibility [\[Policy\]](#)

Accessible Customer Service [\[Policy\]](#)

Accommodation for Employees and Job Applicants with Disabilities [\[Procedures\]](#)

Change of Gender [\[Policy\]](#)

Exempt Academic Staff [\[Policy\]](#) [NTD: Employment policy]

Exempt Academic Staff Employment (Deans, Associate Deans and Teaching Staff
Governors [\[Procedures\]](#) [NTD: Employment policy]

Freedom of Expression [\[Policy\]](#)

Limited Term Academic Associates [\[Procedures\]](#) [NTD: Employment policy]

Emergency Management Plan and Procedures

Fair Processes Policy

Non-Academic Staff Policies

Student Sexual Violence Policy and Procedures

Procedures to Prevent and Address Harassment and Discrimination in the Workplace
[NTD: name tbc]

Harassment and Discrimination Procedures for Students [NTD: name tbc]

Records Management Policy

Joint Health and Safety Committee Terms of Reference

Occupational Health and Safety Management System

Student Conduct Policy

Medical Cannabis Use by Students [\[Procedures\]](#)

Service Animals [\[Procedures\]](#)

Use of Memory Aids by Students with Disabilities [\[Directives\]](#)Use of Audio Recording of
Lectures by Students with Disabilities [\[Directives\]](#)

Procedures for Accommodating Employees and Job Applicants with Disabilities
Procedures for Academic Accommodation for Students with Disabilities
Respectful Campus Policy



Classification Number	<i>To be completed by the Policy Office</i>
Framework Category	Legal, Compliance and Governance
Approving Authority	Board of Governors
Policy Owner	University Secretary and General Counsel
Approval Date	DRAFT FOR CONSULTATION
Review Date	
Supersedes	

RESPECTFUL CAMPUS POLICY

PURPOSE

1. The Respectful Campus Policy (the “Policy”) outlines Ontario Tech University’s commitment to promote and sustain a respectful and inclusive campus in accordance with the Ontario Human Rights Code (the “Code”), the Accessibility for Ontarians with Disabilities Act, and the Occupational Health and Safety Act (OHSA). The purpose of the Policy is to ensure the campus community is familiar with their various rights, roles, responsibilities and obligations as they relate to preventing and responding to all forms of Harassment and Discrimination.

DEFINITIONS

2. For the purposes of this Policy and associated procedures, the following definitions apply:
 - “**Barriers**” include attitudes (stereotypes or prejudices), policies, practices, rules and designs that prevent full participation of individuals or groups on the basis of a Protected Ground.
 - “**Complainant**” refers to an individual who has filed a Report regarding an alleged breach of this policy.
 - “**Discrimination**” is a distinction, without lawful justification, whether intentional or not, which has the effect of denying benefits to, or otherwise disadvantaging, an individual on the basis of a Protected Ground (defined below). Discrimination may involve direct actions that are discriminatory on their face, or it may involve rules, practices or procedures that appear neutral, but have the effect of disadvantaging one or more groups of people.
 - “**Discriminatory Harassment**” means engaging in a course of vexatious comment or conduct based on any Protected Ground, that is known or ought reasonably to be known to be unwelcome. Discriminatory Harassment may include, for example, taunting or mocking someone’s race, ridiculing an individual’s disability or targeting others with sexual, gender-based or homophobic slurs.
 - “**Disrespect**” is behavior that falls short of Harassment, but nevertheless has harmful impacts on the campus environment, e.g. rude, inconsiderate and passive aggressive behavior. Disrespect, if left unaddressed, can escalate to Harassment or Discrimination.
 - “**Duty to Accommodate**” refers to the obligation to eliminate the disadvantage, to the point of undue hardship, caused by barriers that exclude individuals or groups protected under the Code from participating in all aspects of their employment, academic

endeavors, or use of facilities and housing on campus. Failure to meet the Duty to Accommodate is a form of discrimination. For more on the Duty to Accommodate see the University's Accommodation Policy.

"Employee" means job applicants and individuals performing services directly on the University's behalf, including administrative staff members, Faculty, volunteers and contract employees. Students who are employed during the course of their studies, are "Employees" for the purposes of this Policy when they are engaged in employment activities, but not otherwise.

"Faculty" includes a Faculty Member at Ontario Tech University, and includes those with both limited term and indefinite term appointments, as well as those with paid, unpaid and honorific appointments. For greater certainty, "Faculty" also includes visiting scholars and emeritus professors.

"Harassment" is the term used in this policy instrument to represent all forms of harassment: Discriminatory Harassment, Workplace Harassment and Sexual Harassment.

For greater certainty, Harassment is objectionable and unwanted behaviour that is verbally abusive, vexatious or hostile, that is without reasonable justification, and that creates a hostile or intimidating environment for working, learning or living. Harassment may be intentional or unintentional. While harassment usually consists of repeated acts, a single serious incident that has a lasting harmful effect may also constitute harassment.

Harassing behaviour includes, but is not limited to cumulative demeaning or intimidating comments, gestures or conduct; verbal aggression or yelling; bullying; threats to a person's employment or educational status, person or property; persistent comments or conduct, including ostracism or exclusion of a person, that undermines an individual's self-esteem so as to compromise their ability to achieve work or study goals; abuse of power, authority or position; sabotage of a person's work; humiliating initiation practices; hazing; calling someone derogatory names; spreading of malicious rumours or lies; or making malicious or vexatious complaints about a person.

Harassment does not include the exercise of appropriate managerial or supervisory direction, including performance management and the imposition of discipline; constructive criticism; respectful expression of differences of opinions; reasonable changes to assignments or duties; correction of inappropriate behaviour; interpersonal conflict; instructional techniques such as irony, conjecture, and refutation, or assigning readings or other instructional materials that advocate controversial positions; and single incidents of thoughtless, petty or foolish words or acts that cause fleeting harm.

"JHSC" means the Joint Health & Safety Committee(s) at Ontario Tech University.

"Mediation" is a structured process in which parties in dispute are assisted by a third-party to engage in dialogue and attempt to arrive at a mutually agreeable resolution. Mediation is a voluntary process and can only proceed if all parties involved agree to participate.

"Microaggression" means a comment or action that negatively targets a group based on a Protected Ground (e.g. a racist, sexist or homophobic comment). Microaggressions may be intentional or accidental, but are nonetheless harmful and stigmatizing to a certain group of people. If allowed to go unchallenged, Microaggressions may escalate to Harassment and/or Discrimination

"Person(s) of Authority" include, for the purposes of this policy and related procedures, any person who has charge of a workplace, authority over another Employee or authority in the administration of education, including supervisors, managers, senior management and Faculty leadership (e.g. Deans, Associates Deans, etc.).

"Poisoned Environment" is a form of indirect Discriminatory Harassment. It occurs when comments or conduct (including comments or conduct that are condoned or allowed to continue when brought to the attention of a Person of Authority), ridicule or demean a person or group based upon a Protected Ground. The comments or conduct need not be directed at a specific person, and may be from any person, regardless of position or status.

"Protected Ground(s)" are the grounds contained in the Ontario Human Rights Code under which individuals are protected against discrimination and harassment. All University Members are protected under the following Grounds: "race, ancestry, place of origin, colour, ethnic origin, citizenship, creed, sex, sexual orientation, gender identity, gender expression, age, marital status, family status and disability." Employees are additionally protected under the ground "record of offences."

"Report" refers to information about Harassment and/or Discrimination that is reported under the applicable procedures.

"Reprisal" includes retaliation, coercion, dismissal, threats or intimidation of anyone who in good faith: raises complaints or concerns, exercises their rights, or participates in a remedial process under this Policy.

"Respect" is a standard of interpersonal communication and behaviour characterized by self-restraint and consideration for others.

"Respondent" refers to anyone who is alleged to have engaged in behaviours of Harassment and/or Discrimination or who is the subject of a report regarding a breach of this policy.

"Sexual Harassment" means,

1. engaging in a course of vexatious comment or conduct because of sex, sexual orientation, gender identity or gender expression, where the course of comment or conduct is known or ought reasonably to be known to be unwelcome, or
2. making a sexual solicitation or advance where the person making the solicitation or advance is in a position to confer, grant or deny a benefit or advancement and the person knows or ought reasonably to know that the solicitation or advance is unwelcome.

Sexual Harassment includes but is not limited to, sexually suggestive or obscene remarks or gestures, negative stereotypical comments based on gender, sex or sexual orientation, gender identity and gender expression.

"University Member" means any individual who:

- is employed by the University or holds an appointment with the University, including paid, unpaid and/or honorific appointments ("**Employee**");
- is registered as a student, in accordance with the academic regulations of the University ("**Student**"); and/or

- Is 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.

"Workplace" means any place where Employees engage in any facet of employment activity (e.g. recruitment, training, evaluation and development), including employment activities online, outside the normal place of work, and employment activities that occur outside of normal working hours.

"Workplace Harassment" means,

1. engaging in a course of vexatious comment or conduct against an Employee in a workplace that is known or ought reasonably to be known to be unwelcome, and/or
2. Workplace Sexual Harassment - defined as Sexual Harassment against an Employee in the workplace.

SCOPE AND AUTHORITY

3. The University Secretary and General Counsel is the Policy Owner. The Policy Owner is responsible for overseeing the implementation, administration, interpretation and application of this Policy.
4. The Policy Owner will ensure the Policy is reviewed as often as is necessary, and in any event, at least annually, in consultation with all appropriate departments and the JHSC(s), and in accordance with the University's Policy Framework and relevant Collective Agreements.
5. This Policy applies to all University Members in all aspects of their engagement with the University.
6. Ontario Tech University has a [Student Sexual Violence Policy](#), which sets out a framework for ensuring that students who experience sexual violence are directed to appropriate supports and services and that includes a set of procedures that are completely student-driven; meaning students decide if they want to file a formal report or to participate in informal or formal resolution options. Sexual Harassment, as defined under this policy is also defined as Student Sexual Violence when perpetrated by or against a student. In the event that a student alleges sexual violence against an Employee or an employee alleges sexual harassment by a student, all of the rights, roles, responsibilities and obligations established under the Student Sexual Violence Policy will apply to the Student and this Policy and its related procedures will be applied to Employees.
7. This Policy and its corresponding Procedures do not override or diminish the rights provided to Employees under applicable Collective Agreements, including the right to academic freedom afforded to Faculty. Collective Agreements will supersede this Policy to the extent there is a conflict.
8. This Policy does not preclude University Members from pursuing resolution through external resources and processes, including those offered by the Human Rights Legal Support Centre, the Human Rights Tribunal of Ontario and the Ontario Labour Relations Board.

POLICY

9. The University promotes a campus environment that is equitable, inclusive and accessible, and does not tolerate, ignore or condone Discrimination or Harassment by or against anyone.
10. The University is committed to providing a campus environment in which all University Members are treated with dignity, and to fostering a climate of understanding and mutual respect. Excellence in the university community is fostered by promoting the freest possible exchange of information, ideas, beliefs and opinions in diverse forms, and it necessarily includes dissemination and discussion of controversial topics and unpopular points of view. However, [Freedom of expression](#) and freedom of inquiry must be exercised responsibly, in ways that demonstrate active concern and respect for others, including their ability to participate meaningfully in the exchange of information, ideas, beliefs and opinions (refer to the University's [Freedom of Expression Policy](#)).
11. The University will maintain a respectful campus environment in which the human dignity of each individual is valued, and the diverse perspectives, ideas and experiences of all members of the community are able to flourish. While misunderstandings and conflicts will occur in a complex, demanding and diverse campus environment where collaboration is essential to success, early and informal approaches to resolution should be sought whenever possible and appropriate.
12. To promote a respectful campus environment:
 - 12.1. The University will ensure that procedures are in place for the prevention of, and response to Harassment, Discrimination and other breaches of this policy.
 - 12.2. The University will provide information, instruction and assistance to University Members with respect to Harassment and Discrimination.
 - 12.3. The University will provide Persons of Authority with information and instruction that will enable them to recognize, assess and address Harassment and Discrimination, and to understand how to respond appropriately when such incidents are alleged. The University will also provide Persons of Authority with information and instruction that will enable them to effectively and quickly address disrespectful behavior, Microaggressions and any other behaviours that negatively impact group cohesion.
 - 12.4. Any University Member who believes they have been harassed or discriminated against, or have witnessed Harassment or Discrimination, is expected to make good faith efforts to resolve their concerns depending on the circumstances, and/or Report the situation in a timely manner.
 - 12.5. The University will administer the processes set out in applicable procedures responding to Reports fairly and promptly, with adequate regard to the unique circumstances of each particular case, and in a manner that prioritizes the dignity and privacy of individuals involved.
 - 12.6. Where applicable and appropriate, the University will make available informal dispute resolution processes such as Mediation in an attempt to resolve disputes and underlying conflict at the heart of a Report.

- 12.7. The University will inform and update Complainants, Respondents and relevant Persons of Authority (as appropriate) about the status of dispute resolution processes as they progress.
- 12.8. University Members are protected against Reprisal for submitting a Report in good faith, or for participating in a related dispute resolution process. A University Member who believes they have been penalized for submitting a Report in good faith, or for participating in a related investigation, may pursue the allegation of Reprisal by submitting a Report, and/or may pursue a Reprisal complaint through external processes.
- 12.9. Reprisal protection does not apply to a University Member who submits a Report that is determined to be frivolous or vexatious, or who exhibits bad faith and/or refuses to cooperate in the course of an investigation; each of which are considered breaches of this policy.
- 12.10. The University will respect the privacy of individuals involved in Reports and investigations, ensuring information about a Report is not disclosed, except to the extent necessary to investigate, take corrective action, implement measures to protect the health and safety of University Members and/or restore the learning/work environment, or as otherwise required by law.
- 12.11. Personal Information collected under this Policy will be used only for the purposes of administering this Policy, and will be disclosed only on a need-to-know basis, to the extent disclosure is required to fulfill the University's legal obligations under the *Human Rights Code*, the *Occupational Health & Safety Act*, and any other applicable law and/or legal obligations, including any applicable collective agreement. Subject to applicable law, Personal Information collected, used and disclosed under this Policy will otherwise be kept confidential, and will be stored and disposed of in accordance with *Freedom of Information and Protection of Privacy Act* and Ontario Tech University's *Records Management Policy*.
- 12.12. University Members who engage in Harassment and/or Discrimination, Reprisal or other breaches of this policy will be held accountable and may be subject to disciplinary measures, up to and including termination of employment or academic expulsion.

ROLES AND RESPONSIBILITIES

13. All University Members

- 13.1. Have a shared responsibility for maintaining a respectful environment that is free from Harassment and Discrimination.
- 13.2. Are responsible for familiarizing themselves with this Policy and related procedures;
- 13.3. Will refrain from engaging in Harassment, Discrimination, acts of Reprisal or other breaches of this policy.
- 13.4. Will build and maintain positive and productive relationships and demonstrate Respect in their interactions.
- 13.5. Will work cooperatively and constructively to resolve conflicts they encounter and seek assistance from a Person of Authority, as appropriate, regarding any escalating conflict they are unable to resolve themselves.

- 13.6. Will complete all required Discrimination and Harassment instruction and training within established timelines
- 13.7. Will exercise rights under this Policy in good faith using prescribed channels. For more information on reporting Harassment and Discrimination, refer to the procedures for Employees [\[link\]](#) and Students [\[link\]](#).
- 13.8. Will participate in and cooperate with the Reporting Process and/or any related investigation, including respecting confidentiality obligations.
- 13.9. Will comply with the corrective measures imposed by the University under this Policy, subject to relevant collective agreements and other appeal rights.

14. Persons of Authority

Persons of Authority are responsible for supporting Ontario Tech University in its duty to create and maintain a respectful environment that is free from Harassment and Discrimination. Therefore, Persons of Authority have additional obligations in addition to the expectations for all University Members (above). Persons of Authority:

- 14.1. Will cultivate a respectful and inclusive environment where people feel safe to raise concerns;
- 14.2. Will ensure expected standards under this Policy are adhered to, including addressing and resolving Microaggressions and other disrespectful behavior should they occur;
- 14.3. Will lead by example, acting with Respect and modelling positive relationship building and constructive conflict resolution skills in dealings with all University Members, and in particular, those under their authority;
- 14.4. Are responsible for ensuring University Members under their authority are aware of this Policy and its associated procedures;
- 14.5. Will avoid the appearance of favoritism and unfairness by following and promoting adherence to evidence-based decision-making and the principles of non-Discrimination outlined in this Policy;
- 14.6. Will consider seriously each incident, concern or Report brought forward by taking immediate action to stop any Discrimination, Harassment or other inappropriate behavior, whether the subject of a formal complaint or not, by following policies and procedures to the extent necessary to ensure compliance (note: A Person of Authority cannot agree “to do nothing,” even when that is requested by a University Member);
- 14.7. Will inform the Human Rights Office about all activities related to Discrimination and Harassment or other concerns and Reports related to this Policy; and,
- 14.8. Will cooperate with the Human Rights Office to implement recommendations and restore areas under their authority that have been disrupted by alleged or actual Policy violations, or complaint resolution processes.

15. Human Rights Office

- 15.1. The Human Rights Office Is responsible for the interpretation and administrative direction of this policy and its associated policies and

procedures to ensure their compliance with regulatory requirements and will take primary responsibility for updating related procedures applicable to Employees and Students, ensuring that all related procedures are reviewed as often as is necessary in consultation with all appropriate departments.

15.2. The Human Rights Office will oversee dispute resolution processes, determine needs and engage specialist support, as necessary, for investigation, fact finding, Mediation or other interventions required to restore the campus to a positive and productive environment, including:

- a) receiving and responding to Reports from all University Members while ensuring Reports are responded to appropriately using informal and formal dispute resolution methods in a timely and equitable manner, as outlined in this Policy and in related procedures;
- b) ensuring the appropriate departments and/or individuals are advised of a Report, where appropriate; and,
- c) ensuring the outcome of an investigation under this Policy, is communicated in writing to Complainant(s), Respondent(s) and relevant Persons of Authority to support corrective and restorative measures.

15.3. The Human Rights Office is also responsible for:

- a) ensuring that copies of this Policy and related procedures are posted on a University website; and,
- b) Submitting an Annual Report to the Board of Governors about statistics and trends in human rights complaint activities and other program initiatives

16. Human Resources

16.1. Human Resources is responsible for the following compliance obligations under the *Occupational Health & Safety Act*.

- a) providing Employees with appropriate information and instruction with respect to Workplace Harassment, including notifying them of this Policy and its related procedures;
- b) ensuring all Persons of Authority are provided with information and instruction that will enable them to recognize, assess and address Workplace Harassment in their respective workplaces, and will ensure Persons of Authority are aware of this Policy and related procedures;
- c) ensuring that copies of this Policy and employment-related procedures are posted on the established health and safety bulletin boards where it is likely to come to the attention of Employees; and,
- d) ensuring the corrective actions taken as a result of an investigation (if any), are communicated in writing to Complainant(s) and Respondent(s) who are Employees;

16.2. Human Resources is also responsible for:

- a) providing Employees and Persons of Authority with appropriate information and instruction with respect to Discrimination and Discriminatory Harassment, including notifying them of this Policy and its related procedures;
- b) Assisting Persons of Authority, in consultation with the Human Rights Office, to address Microaggressions and other disrespectful behaviors that occur in the employment context; and,
- c) Assisting Persons of Authority to implement corrective and restorative measures in areas under their authority that have been disrupted by alleged or actual Policy violations, or complaint resolution processes.

17. Student Life

17.1. Student Life is responsible for:

- a) Providing Students with appropriate information with respect to Discriminatory Harassment and Discrimination, including notifying them of this Policy and its related procedures; and,
- b) Assisting Persons of Authority, in consultation with Human Resources and/or the Human Rights Office, to address Microaggressions and other disrespectful behaviors that occur in the academic or on-campus housing context.

MONITORING AND REVIEW

18. This Policy will be reviewed as necessary and at least every year. The University Secretary and General Counsel, or successor thereof, is responsible to monitor and review this Policy.

RELEVANT LEGISLATION

19. Human Rights Code, R.S.O. 1990, c. H.19
 Accessibility for Ontarians with Disabilities Act, 2005, S.O. 2005
 Occupational Health and Safety Act, R.S.O. 1990, c O.1, as amended
 Freedom of Information and Protection of Privacy Act, R.S.O. 1990, c F. 31

RELATED POLICIES, PROCEDURES & DOCUMENTS

20. [NTD: Policy Superseded]Academic Accommodation for Students with Disabilities
[\[Procedures\]](#)

Access to Information and Protection of Privacy Policy

Accessibility [\[Policy\]](#)

Accessible Customer Service [\[Policy\]](#)

Accommodation for Employees and Job Applicants with Disabilities [\[Procedures\]](#)

Change of Gender [\[Policy\]](#)

Exempt Academic Staff [Policy] [NTD: Employment policy]

Exempt Academic Staff Employment (Deans, Associate Deans and Teaching Staff Governors [Procedures] [NTD: Employment policy]

Freedom of Expression [Policy]

Limited Term Academic Associates [Procedures] [NTD: Employment policy]

Emergency Management Plan and Procedures

Fair Processes Policy

Non-Academic Staff Policies

Student Sexual Violence Policy and Procedures

Procedures to Prevent and Address Harassment and Discrimination in the Workplace [NTD: name tbc]

Harassment and Discrimination Procedures for Students [NTD: name tbc]

Records Management Policy

Joint Health and Safety Committee Terms of Reference

Occupational Health and Safety Management System

Student Conduct Policy

Medical Cannabis Use by Students [[Procedures](#)]

Service Animals [Procedures]

Use of Memory Aids by Students with Disabilities [[Directives](#)]

Use of Audio Recording of Lectures by Students with Disabilities [[Directives](#)]

Procedures for Accommodating Employees and Job Applicants with Disabilities

Procedures for Academic Accommodation for Students with Disabilities

Classification Number	<i>To be completed by the Policy Office</i>
Parent Policy	Respectful Campus Policy
Framework Category	Legal, Compliance and Governance
Approving Authority	Audit and Finance Committee
Policy Owner	University Secretary and General Counsel
Approval Date	DRAFT FOR CONSULTATION
Review Date	
Supersedes	

PROCEDURES TO PREVENT AND ADDRESS DISCRIMINATION AND HARASSMENT BY OR AGAINST EMPLOYEES

PURPOSE

1. The purpose of this procedure is to establish a dispute resolution framework for the prevention and handling of Employee-based Reports of Harassment, Discrimination and/or Reprisal; ensuring the University effectively addresses and responds to these Reports consistent with legislative obligations.

DEFINITIONS

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

“Administrative Fairness” means that the procedures used in the investigation and decision-making processes adhere to the following elements:

- The Complainant, if any, is given a full and fair opportunity to raise allegations and provide relevant and material evidence in support of those allegations;
- The Respondent knows what the allegations are issue is and receives enough information to provide a meaningful response;
- The Respondent is given a full and fair opportunity to defend against the allegations and provide relevant and material evidence rebutting those allegations;
- The parties receive adequate notice of the nature of the proceedings and of the issue to be decided.
- The parties have a right to an impartial decision maker and freedom from bias
- The decision maker is required to consider all of the relevant evidence and information pertaining to a specific case.
- The decision-making processes run in a timely fashion
- The parties Respondent haves a right to a support person and/or representation during dispute resolution meeting; and
- The parties are provided the reasons for the decision.

“Balance of Probabilities” means an investigative standard that must be met to determine whether a violation of the policy has occurred based on a finding that “it was more likely than not” that the offence at issue was committed by the Respondent. This is a lower standard than beyond a reasonable doubt, but more than mere suspicion.

“Complainant” refers to an individual who is alleged to have experienced Discrimination, Harassment and/or Reprisal.

"Discrimination" is a distinction, without lawful justification, whether intentional or not, which has the effect of denying benefits to, or otherwise disadvantaging, an individual on the basis of a Protected Ground (defined below). Discrimination may involve direct actions that are discriminatory on their face, or it may involve rules, practices or procedures that appear neutral, but have the effect of disadvantaging one or more groups of people.

"Discriminatory Harassment" means engaging in a course of vexatious comment or conduct, against a University Member in the course of employment or receipt of service, based on any Protected Ground, that is known or ought reasonably to be known to be unwelcome. Discriminatory Harassment may include, for example, taunting or mocking someone’s race, ridiculing an individual’s disability or targeting others with sexual, gender-based or homophobic slurs.

"Employee" means job applicants and individuals performing services directly on the University’s behalf, including administrative staff members, Faculty, volunteers and contract employees. Students who are employed during the course of their studies, are “Employees” for the purposes of this Policy when they are engaged in employment activities, but not otherwise. ~~means any individual employed by the University, including but not limited to Employees who are members of a bargaining unit and Employees who are not. Students who are employed during the course of their studies, are “Employees” for the purposes of this Policy when they are engaged in employment activities, but not otherwise.~~

“Extenuating Circumstances” means circumstances outside of the investigator’s control that result in delays in the dispute resolution processes described in this procedure. Extenuating circumstances include, but are not limited to, having multiple witnesses, difficulty in scheduling interviews, availability of resource persons or materials, time of year, involvement of law enforcement or existence of a judicial hearing, or other circumstances that may arise through the course of the investigation.

“Faculty” includes a Faculty Member, or previous Faculty Member, at Ontario Tech University, and includes those with both limited term and indefinite term appointments, as well as those with paid, unpaid and honorific appointments. For greater certainty, “Faculty” also includes visiting scholars and emeritus professors.

“Harassment” Is the term used in this policy instrument to represent all forms of harassment: Discriminatory Harassment, Workplace Harassment and Sexual Harassment.

“Interim Measures” means temporary measures designed to prevent additional acts of Harassment or Discrimination and/or to protect the safety of the Complainant or others. Interim Measures are instituted at any point following a Report and prior to a determination being made under this Policy. Interim Measures take into consideration the severity of the allegations and the varying risks associated with the potential for subsequent acts of Harassment or Discrimination. Examples of interim measures include, but are not limited to, For example, an Employee may be transferred to a different work location, placed on administrative leave

pending the outcome of an investigation, and/or no contact orders may be required to refrain from interacting with the Complainant or other witnesses.

"Investigation" means a part of the Dispute Resolution Process in which the University conducts a systematic inquiry into allegations.

"Investigator" means an individual who has the required training and experience to conduct a fair and objective Investigation.

"Mediation" is a structured process in which parties in dispute are assisted by a third-party to discuss a dispute and attempt to arrive at a mutually agreeable resolution. Mediation is a voluntary process and can only proceed if all parties involved agree to participate. Depending on the circumstances, mediation may result in a signed agreement summarizing the agreed upon terms of settlement.

"JHSC" means the Joint Health & Safety Committee(s) at Ontario Tech University.

"Person(s) of Authority" include, for the purposes of this Procedure, any person who has charge of a workplace, authority over another Employee or authority in the administration of education, including supervisors, managers, senior management and Faculty leadership (e.g. Deans, Associates Deans, etc.).

~~**"Person(s) of Authority"** includes any person who has charge of a workplace, authority over another Employee or authority in the administration of education. Anyone who supervises an Employee at Ontario Tech University is a Person of Authority. Faculty members, Teaching Assistants and Faculty Leadership (e.g. Deans, Associates Deans, etc.) are also considered Persons of Authority vis-à-vis their relationship to students.~~

"Protected Ground(s)" are the Grounds contained in the Ontario Human Rights Code under which individuals are protected against discrimination and harassment. All University Members are protected under the following Grounds: "race, ancestry, place of origin, colour, ethnic origin, citizenship, creed, sex, sexual orientation, gender identity, gender expression, age, marital status, family status and disability.," Employees are additionally protected under the ground "record of offences." ~~**"Protected Ground(s)"** are the grounds contained in the Ontario Human Rights Code under which individuals are protected against discrimination and harassment. Protected Grounds for Students include "race, ancestry, place of origin, colour, ethnic origin, citizenship, creed, sex, sexual orientation, gender identity, gender expression, age, marital status, family status or disability," and any additional protected grounds that are added to the Ontario Human Rights Code by way of statutory amendment. Protected Grounds for Employees are the same, but include the additional ground of "record of offences."~~

"Report" refers to a complaint of Harassment, Discrimination and/or Reprisal made by or against a University Employee.

"Reprisal" includes retaliation, coercion, dismissal, threats or intimidation of anyone who in good faith: raises complaints or concerns, exercises their rights or participates in a remedial process under ~~this~~ the Respectful Campus Policy.

"Respondent" refers to anyone who is alleged to have engaged in Harassment, Discrimination or Reprisal in a Report.

"Sexual Harassment" means,

1. engaging in a course of vexatious comment or conduct because of sex, sexual orientation, gender identity or gender expression, where the course of comment or conduct is known or ought reasonably to be known to be unwelcome, or
2. making a sexual solicitation or advance where the person making the solicitation or advance is in a position to confer, grant or deny a benefit or advancement and the person knows or ought reasonably to know that the solicitation or advance is unwelcome.

Sexual Harassment includes but is not limited to, sexually suggestive or obscene remarks or gestures, and negative stereotypical comments based on gender, sex or sexual orientation, gender identity and gender expression, ~~and showing or sending pornography~~. For the purposes of this Procedure the term "Sexual Harassment" includes incidents of [Student Sexual Violence](#) involving an Employee.

"Student" includes any student who is registered, or was previously registered, at Ontario Tech University.

"University Member" means any individual who:

- is employed by the University or holds an appointment with the University, including paid, unpaid and/or honorific appointments ("**Employee**");
- is registered as a student, in accordance with the academic regulations of the University ("**Student**"); and/or
- Is 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.

"Workplace" means any place where Employees engage in any facet of employment activity (e.g. recruitment, training, evaluation and development), including employment activities online, outside the normal place of work, and employment activities that occur outside of normal working hours.

"Workplace Harassment" means,

1. engaging in a course of vexatious comment or conduct against an Employee in a Workplace that is known or ought reasonably to be known to be unwelcome, and/or
2. Workplace Sexual Harassment (defined as Sexual Harassment against an Employee in the workplace).

SCOPE AND AUTHORITY

3. The University Secretary and General Counsel is the Policy Owner. The Policy Owner is responsible for overseeing the implementation, administration, interpretation and application of these Procedures.

4. The Policy Owner will ensure the Procedures are reviewed as often as is necessary, and in any event, at least annually, in consultation with all appropriate departments and the JHSC(s), and in accordance with the University's Policy Framework and relevant Collective Agreements.

~~3.~~

4.5. This Procedure applies to Reports made by or against Employees in the Workplace. This procedure necessarily overlaps with other University procedures that are concerned with preventing and addressing incidents of Harassment, Discrimination and Reprisal. Ontario Tech University will administer the overlap according to the following principles:

4.1.5.1. This procedure will be applied to all incidents in which an Employee has allegedly experienced Harassment, Discrimination or Reprisal to ensure the University satisfies its commitment to, and its obligations under, legislation and collective agreements.

4.2.5.2. Where it is alleged that a Student has, in their capacity as a Student, engaged in Harassment against an Employee, then the matter will be addressed in conjunction with the relevant Student procedures [\[hyperlink\]](#).

4.3.5.3. Allegations involving a Student who is also an Employee of the University, and who allegedly engaged in Harassment, Discrimination or Reprisal in the course of their employment, will be handled under this Policy instrument.

4.4.5.4. Where an individual, other than a University Member, is alleged to have engaged in Harassment or Discrimination against an Employee, Human Resources and/or the Office of Campus Safety will consult with Members at risk, and other Members if necessary, to determine and implement reasonable measures to protect the health and safety of its Employees. Because the University does not have the jurisdiction to compel statements from members of the general public, or to impose sanctions upon them, it will not normally conduct a formal Investigation in such cases.

5.6. This procedure is a mechanism for alternative dispute resolution. It does not preclude complainants from pursuing resolution through external resources and processes, including those offered [through grievance arbitration, or](#) by the Human Rights Legal Support Centre, the Human Rights Tribunal of Ontario- and the Ontario Labour Relations Board-. However, The Human Rights Office may not accept a complaint or may halt dispute resolution processes under this procedure if a complainant decides to pursue external processes or grievance mechanisms on the same or similar matter unless an Investigation is legislatively required.

PROCEDURE

6.7. Confidentiality: Information collected under this procedure will be used only for the purposes of administering [therelated](#) policy instruments and may be disclosed only on a need-to-know basis to the extent required to fulfill the University's legal obligations. Personal Information collected, used and disclosed under this procedure will otherwise be kept confidential. To this end:

6.1.7.1. All individuals involved in this procedure will be advised of their duty to maintain the confidentiality of all information disclosed to them in this procedure, including any Personal Information disclosed to them.

6.2.7.2. Personal Information obtained during the Reporting Process will not be disclosed except to the extent that disclosure is necessary for the purposes of investigating Reports, taking corrective action, protecting the health and safety of members of the University community, or as otherwise required by law. For example,

information may be shared with the Office of Campus Safety if this is necessary to protect an individual.

6.3.7.3. Complainants and Respondents who are Employees will be advised of the outcome of an Investigation and the corrective actions taken, if any.

6.4.7.4. All records will be maintained in a confidential file, including all related communications, memoranda, reports, statements and evidence. Reasonable steps will be taken to protect against unauthorized access to such documents. These records will be retained, and disposed of, in accordance with the Freedom of Information and Protection of Privacy Act and Ontario Tech University's Records Management Policy.

7.8. **Reprisal.** Any Reprisal, or expressed or implied threat of Reprisal, for making and pursuing a Report under this procedure is itself considered a breach of the corresponding Policy. Any individual experiencing Reprisal may file a Report, and that Report will be processed under this procedure.

8.9. **Right to a Support Person(s).** Individuals who attend an interview or meeting in an investigation under this procedure may be accompanied by a support person. The role of a support person is to provide moral support. Individuals who choose to attend an interview with a support person must choose a support person who is not otherwise connected to the matter under Investigation (such as e.g. a witness or fellow Complainant) and will notify the investigator of their support person's name at least 24 hours prior to the meeting interview. In the case of an Employee who is a member of a bargaining unit, the support person may be a union representative. During an investigativethe interview, a support person will not be permitted to make legal submissions or arguments on behalf of the individual, or to disrupt the interview. In any event, individuals who are being interviewed must answer the interview questions themselves.

9.10. **Safety is Paramount:** Ontario Tech University has an overriding obligation to protect the safety of all University Members. When a University Member is at risk of imminent harm, we reserve the right to investigate and respond appropriately, independent of a Complainant's and/or Respondent's course of action under this procedure.

10.11. **Support Services:** The Employee Family Assistance Program has appropriate support services for Employees who experience Harassment, Discrimination and/or Reprisal or to assist Employees who are involved in dispute resolution processes described in this Procedure.

PREVENTATIVE MEASURES

11.12. **Training:** Human Resources will ensure information and instruction is provided to Employees regarding Harassment, Discrimination and Reprisal. Training programs are available on the Health and Safety Website. (~~<http://healthandsafety.ontariotechu.ca/>~~)

12.13. **Range of Dispute Resolution Options:** Several options to resolve Harassment and Discrimination concerns are available for Complainants. Informal approaches can foster prompt resolution and prevent escalation; particularly when concerns are raised expeditiously. These are opportunities for parties to resolve a dispute, ensure the Workplace is free from Harassment and Discrimination and address broader issues that caused or contributed to the dispute.

13.14. Talk to the person about their behaviour: Where appropriate, Complainants are expected to make good faith efforts to attempt to resolve matters themselves before filing a complaint. If a person feels they are experiencing Harassment or Discrimination, they should immediately make known to the person responsible that the conduct is unwelcome or offensive. It is important that this message be clear and unambiguous. When presented with a legitimate concern, University Members are expected to make reasonable adjustments to their behaviour to resolve the matter. If addressing the person responsible could lead to safety risks, or is not appropriate, Complainants may pursue other resolution options outlined in these procedures.

14.15. Consultation: Employees may benefit from having expert information and advice before deciding how to proceed with a concern related to this procedure. Complainants can consult a Person of Authority or may make an appointment with the Human Rights Office. Consultations are confidential and can provide advice, assistance, coaching, and referrals to assist Complainants.

REPORTING

15.16. The Reporting Process

Incidents of Harassment, Discrimination and/or Reprisal should be promptly reported to a Person of Authority and/or the Human Rights Office, and no later than one (1) year after the last incident of alleged harassment, discrimination or reprisal. If the Report is related to an Employee in the Human Rights Office, the report should be directed to the University's General Counsel, in which case the General Counsel will have the responsibilities assigned to the Human Rights Office below.

Step 1 – Submitting a Report

16.1. A "Report", and the corresponding "Reporting Process", is initiated when an individual completes the Report form (website here; Appendix X) that is available from the Human Rights Office.

16.2. Person(s) of Authority who witness or are made aware of incidents of Harassment, Discrimination and/or Reprisal must initiate a Report to the Human Rights Office.

15.1-16.3. The Human Rights Office will, on its own initiative, initiate a Report when it receives information regarding an incident of Harassment, Discrimination and/or Reprisal in the Workplace, unless such a Report has already been submitted by an individual.

Step 2 – Interim Measures

15.2. Upon receiving a Report, the University will immediately determine whether Interim Measures are necessary, considering the severity of the allegations, and the potential risks to University Members. ~~For example, an Employee may be transferred to a different work location, placed on administrative leave pending the outcome of an investigation, or may be required to refrain from interacting with the~~

~~Complainant or other witnesses. Normally, a Complainant will not be required to interact with a Respondent during the Reporting Process or a related Investigation.~~

~~15.3.16.4.~~ Further Interim Measures will be implemented where reasonable and appropriate in the circumstances. Person(s) of Authority, the Complainant, Respondent, the Office of Campus Safety or any other relevant stakeholder, may be consulted on a confidential basis, to determine appropriate Interim Measures.

Step 3 – Assessment

~~15.4.16.5.~~ The Human Rights Office will review the Report and determine if the conduct alleged in the Report would amount to Discrimination, Harassment and/or Reprisal. This determination will be based on an assumption that all of the alleged facts were true. If the allegations set out in the Report would not, if true, amount to Discrimination, Harassment and/or Reprisal, the Human Rights Office will respond to the individual submitting the Report in writing, usually within 360 days, advising that the Report has been reviewed, and that the information provided does not support an allegation of Discrimination, Harassment and/or Reprisal under the Respectful Campus Policy. The individual submitting the Report will also be advised that the Human Rights Office may reconsider the Report if additional and significant information is provided. If there is another process or resource at the University that would be more appropriate for the subject matter of the Report, the individual will be advised of this alternative process.

~~15.5.16.6.~~ If, on the other hand, the information provided would, assuming the alleged facts were true, support a finding that Discrimination, Harassment and/or Reprisal had occurred, the following dispute Resolution options will be considered.

Step 4 – Informal Resolution

~~16.7.~~ Where appropriate, an informal resolution process, such as Mediation, can be pursued if the Complainant and Respondent consent to an informal resolution processes being pursued and to its format (Note: informal resolution options are not available related to allegations of Workplace Harassment, which require an investigation).

~~16.8.~~ Where those involved in the informal resolution process reach an agreed resolution, that resolution will become binding.

~~15.6.16.9.~~ Once an informal resolution process has commenced, the Investigation may be delayed for a maximum period of 30 calendar days, after which, unless a resolution has been reached ~~and approved~~, the Investigation will be re-commenced.

Step 5 – Investigation

~~15.7.16.10.~~ An Investigation will be conducted if informal resolution options are not appropriate in the circumstances or were not successful in resolving the dispute. The purpose of an Investigation is to: gather evidence and witness statements; weigh the evidence; make findings of fact based on the evidence; and, produce an

Investigative report. In an investigation under this Procedure, the Investigator must make a determination having weighed the evidence on a Balance of Probabilities that either: (1) a policy breach occurred; or (2) a policy breach did not occur.

~~15.8.16.11.~~ The Human Rights Office will ensure an Investigation process that is appropriate in the circumstances and that complies with Administrative Fairness requirements. At this stage, consideration will be given to whether the investigation will be conducted internally or externally. ~~Under no circumstances will an investigation be conducted by an individual who was directly involved in the events in issue, or by an individual whose involvement would give rise to a conflict of interest or a perception of a conflict of interest. No individual who was involved in or who has a personal stake in the events in issue will be involved in an investigation (other than as a witness).~~ The Human Rights Office will review the collective agreement(s) of any individuals involved in the Report, and will ensure the procedural rights granted to those individuals under their respective collective agreements are maintained.

~~15.9.16.12.~~ The Human Rights Office will ensure the complainant and respondents ~~Employees~~ involved in an Investigation, and their respective bargaining agent(s), where applicable, are informed of the investigation process that will be adopted in each particular case. ~~At a minimum, any investigation will provide a reasonable opportunity for the parties to understand the allegations, and to submit relevant information.~~

Step 6 – Determination & Corrective Action

~~15.10.16.13.~~ _____ The Human Rights Office will ensure that the results of the investigation are brought to the attention of, and reviewed by, the appropriate Person(s) of Authority.

~~15.11.16.14.~~ _____ In the event that the Investigation found a breach of policy, the investigator will make recommendations to adequately resolve the inappropriate behavior and restore the Workplace. Human Resources will advise the Person(s) of Authority with respect to appropriate corrective measures, if any, to be taken, including measures aimed at preventing Reprisal.

~~15.12.16.15.~~ _____ Where an Employee is found to have engaged in acts of Harassment, Discrimination and/or Reprisal, corrective measures may include non-disciplinary actions (e.g. education) or disciplinary measures (e.g. a written reprimand, a suspension or termination). Human Resources will ensure such reasonable steps are taken to prevent a recurrence.

~~15.13.16.16.~~ _____ Employees that are members of a bargaining unit shall have any corrective measure(s) imposed in accordance with applicable collective agreement requirements.

~~15.14.16.17.~~ _____ Information about investigation outcomes or corrective actions will be provided in accordance with the procedural requirements of any relevant collective agreement and any applicable laws. At the conclusion of an investigation, The Human Rights Office will ensure that any Complainant and any Respondent are informed, in writing, of the outcome of the investigation. Human Resources will

ensure that any corrective actions taken or that will be taken are communicated to the Complainant (Employee) and Respondent (Employee) in writing.

~~15.15.16.18.~~ The Relevant Person(s) of Authority will be responsible for implementing recommendations (including corrective action) in consultation and with the support of Human Resources.

MONITORING AND REVIEW

~~16.17.~~ This Procedure will be reviewed as necessary and at least every year. The University Secretary and General Counsel, or successor thereof, is responsible to monitor and review this Policy.

RELEVANT LEGISLATION

~~17.18.~~ Human Rights Code, R.S.O. 1990, c. H.19

Occupational Health and Safety Act, R.S.O. 1990, c O.1, as amended

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

RELATED POLICIES, PROCEDURES & DOCUMENTS

~~18.~~ ~~[NTD: Policy Superseded]Academic Accommodation for Students with Disabilities [Procedures]~~

Academic Staff Employment Policies

Access to Information and Protection of Privacy Policy

Emergency Management Plan and Procedures

Fair Processes Policy

Non-Academic Staff Policies

~~Policy Against Violence, Harassment and Discrimination in the Workplace~~The Respectful Campus Policy

Policy to Prevent and Respond to Sexual Violence for Students

Procedures for Responding to Incidents of Sexual Violence

Records Management Policy

Joint Health and Safety Committee Terms of Reference

Occupational Health and Safety Management System

Student Conduct Policy

Ontario Tech-Durham College Threat Assessment Procedures

Work Refusal Procedures

~~Workplace Violence Incident Report~~

Classification Number	<i>To be completed by the Policy Office</i>
Parent Policy	Respectful Campus Policy
Framework Category	Legal, Compliance and Governance
Approving Authority	Audit and Finance Committee
Policy Owner	University Secretary and General Counsel
Approval Date	DRAFT FOR CONSULTATION
Review Date	
Supersedes	

PROCEDURES TO PREVENT AND ADDRESS DISCRIMINATION AND HARASSMENT BY OR AGAINST EMPLOYEES

PURPOSE

1. The purpose of this procedure is to establish a dispute resolution framework for the prevention and handling of Employee-based Reports of Harassment, Discrimination and/or Reprisal; ensuring the University effectively addresses and responds to these Reports consistent with legislative obligations.

DEFINITIONS

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

“Administrative Fairness” means that the procedures used in the investigation and decision-making processes adhere to the following elements:

- The Complainant, if any, is given a full and fair opportunity to raise allegations and provide relevant and material evidence in support of those allegations;
- The Respondent knows what the allegations are and receives enough information to provide a meaningful response;
- The Respondent is given a full and fair opportunity to defend against the allegations and provide relevant and material evidence rebutting those allegations;
- The parties receive adequate notice of the nature of the proceedings and of the issue to be decided.
- The parties have a right to an impartial decision maker and freedom from bias
- The decision maker is required to consider all of the relevant evidence and information pertaining to a specific case.
- The decision-making processes run in a timely fashion
- The parties have a right to a support person and/or representation during dispute resolution meeting; and
- The parties are provided the reasons for the decision.

“Balance of Probabilities” means an investigative standard that must be met to determine whether a violation of the policy has occurred based on a finding that “it was more likely than not” that the offence at issue was committed by the Respondent. This is a lower standard than beyond a reasonable doubt, but more than mere suspicion.

“Complainant” refers to an individual who is alleged to have experienced Discrimination, Harassment and/or Reprisal.

"Discrimination" is a distinction, without lawful justification, whether intentional or not, which has the effect of denying benefits to, or otherwise disadvantaging, an individual on the basis of a Protected Ground (defined below). Discrimination may involve direct actions that are discriminatory on their face, or it may involve rules, practices or procedures that appear neutral, but have the effect of disadvantaging one or more groups of people.

"Discriminatory Harassment" means engaging in a course of vexatious comment or conduct, against a University Member in the course of employment or receipt of service, based on any Protected Ground, that is known or ought reasonably to be known to be unwelcome. Discriminatory Harassment may include, for example, taunting or mocking someone’s race, ridiculing an individual’s disability or targeting others with sexual, gender-based or homophobic slurs.

"Employee" means job applicants and individuals performing services directly on the University’s behalf, including administrative staff members, Faculty, volunteers and contract employees. Students who are employed during the course of their studies, are “Employees” for the purposes of this Policy when they are engaged in employment activities, but not otherwise.

“Extenuating Circumstances” means circumstances outside of the investigator’s control that result in delays in the dispute resolution processes described in this procedure. Extenuating circumstances include, but are not limited to, having multiple witnesses, difficulty in scheduling interviews, availability of resource persons or materials, time of year, involvement of law enforcement or existence of a judicial hearing, or other circumstances that may arise through the course of the investigation.

“Faculty” includes a Faculty Member, or previous Faculty Member, at Ontario Tech University, and includes those with both limited term and indefinite term appointments, as well as those with paid, unpaid and honorific appointments. For greater certainty, “Faculty” also includes visiting scholars and emeritus professors.

“Harassment” is the term used in this policy instrument to represent all forms of harassment: Discriminatory Harassment, Workplace Harassment and Sexual Harassment.

“Interim Measures” mean temporary measures designed to prevent additional acts of Harassment or Discrimination and/or to protect the safety of the Complainant or others. Interim Measures are instituted at any point following a Report and prior to a determination being made under this Policy. Interim Measures take into consideration the severity of the allegations and the varying risks associated with the potential for subsequent acts of Harassment or Discrimination. Examples of interim measures include, but are not limited to, transfer to a different work location, administrative leave, and no contact orders.

“Investigation” means a part of the Dispute Resolution Process in which the University conducts a systematic inquiry into allegations.

“Investigator” means an individual who has the required training and experience to conduct a fair and objective Investigation.

“Mediation” is a structured process in which parties in dispute are assisted by a third-party to discuss a dispute and attempt to arrive at a mutually agreeable resolution. Mediation is a voluntary process and can only proceed if all parties involved agree to participate. Depending on the circumstances, mediation may result in a signed agreement summarizing the agreed upon terms of settlement.

"JHSC" means the Joint Health & Safety Committee(s) at Ontario Tech University.

"Person(s) of Authority" include, for the purposes of this Procedure, any person who has charge of a workplace, authority over another Employee or authority in the administration of education, including supervisors, managers, senior management and Faculty leadership (e.g. Deans, Associates Deans, etc.).

"Protected Ground(s)" are the Grounds contained in the Ontario Human Rights Code under which individuals are protected against discrimination and harassment. All University Members are protected under the following Grounds: “race, ancestry, place of origin, colour, ethnic origin, citizenship, creed, sex, sexual orientation, gender identity, gender expression, age, marital status, family status and disability.,” Employees are additionally protected under the ground “record of offences.”

"Report" refers to a complaint of Harassment, Discrimination and/or Reprisal made by or against a University Employee.

“Reprisal” includes retaliation, coercion, dismissal, threats or intimidation of anyone who in good faith: raises complaints or concerns, exercises their rights or participates in a remedial process under the Respectful Campus Policy.

“Respondent” refers to anyone who is alleged to have engaged in Harassment, Discrimination or Reprisal in a Report.

"Sexual Harassment" means,

1. engaging in a course of vexatious comment or conduct because of sex, sexual orientation, gender identity or gender expression, where the course of comment or conduct is known or ought reasonably to be known to be unwelcome, or
2. making a sexual solicitation or advance where the person making the solicitation or advance is in a position to confer, grant or deny a benefit or advancement and the person knows or ought reasonably to know that the solicitation or advance is unwelcome.

Sexual Harassment includes but is not limited to, sexually suggestive or obscene remarks or gestures, and negative stereotypical comments based on gender, sex or sexual orientation, gender identity and gender expression. For the purposes of this Procedure the term “Sexual Harassment” includes incidents of [Student Sexual Violence](#) involving an Employee.

“Student” includes any student who is registered, or was previously registered, at Ontario Tech University.

“University Member” means any individual who:

- is employed by the University or holds an appointment with the University, including paid, unpaid and/or honorific appointments (“**Employee**”);
- is registered as a student, in accordance with the academic regulations of the University (“**Student**”); and/or
- Is 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.

"Workplace" means any place where Employees engage in any facet of employment activity (e.g. recruitment, training, evaluation and development), including employment activities online, outside the normal place of work, and employment activities that occur outside of normal working hours.

"Workplace Harassment" means,

1. engaging in a course of vexatious comment or conduct against an Employee in a Workplace that is known or ought reasonably to be known to be unwelcome, and/or
2. Workplace Sexual Harassment (defined as Sexual Harassment against an Employee in the workplace).

SCOPE AND AUTHORITY

3. The University Secretary and General Counsel is the Policy Owner. The Policy Owner is responsible for overseeing the implementation, administration, interpretation and application of these Procedures.
4. The Policy Owner will ensure the Procedures are reviewed as often as is necessary, and in any event, at least annually, in consultation with all appropriate departments and the JHSC(s), and in accordance with the University’s Policy Framework and relevant Collective Agreements.
5. This Procedure applies to Reports made by or against Employees in the Workplace. This procedure necessarily overlaps with other University procedures that are concerned with preventing and addressing incidents of Harassment, Discrimination and Reprisal. Ontario Tech University will administer the overlap according to the following principles:
 - 5.1. This procedure will be applied to all incidents in which an Employee has allegedly experienced Harassment, Discrimination or Reprisal to ensure the University satisfies its commitment to, and its obligations under, legislation and collective agreements.
 - 5.2. Where it is alleged that a Student has, in their capacity as a Student, engaged in Harassment against an Employee, then the matter will be addressed in conjunction with the relevant Student procedures [hyperlink].
 - 5.3. Allegations involving a Student who is also an Employee of the University, and who allegedly engaged in Harassment, Discrimination or Reprisal in the course of their employment, will be handled under this Policy instrument.
 - 5.4. Where an individual, other than a University Member, is alleged to have engaged in Harassment or Discrimination against an Employee, Human Resources and/or the Office of Campus Safety will consult with Members at risk, and other Members if necessary, to determine and implement reasonable measures to protect the health

and safety of its Employees. Because the University does not have the jurisdiction to compel statements from members of the general public, or to impose sanctions upon them, it will not normally conduct a formal Investigation in such cases.

6. This procedure is a mechanism for alternative dispute resolution. It does not preclude complainants from pursuing resolution through external resources and processes, including those offered through grievance arbitration, or by the Human Rights Legal Support Centre, the Human Rights Tribunal of Ontario and the Ontario Labour Relations Board. However, The Human Rights Office may not accept a complaint or may halt dispute resolution processes under this procedure if a complainant decides to pursue external processes or grievance mechanisms on the same or similar matter unless an Investigation is legislatively required.

PROCEDURE

7. **Confidentiality:** Information collected under this procedure will be used only for the purposes of administering the policy instrument and may be disclosed only on a need-to-know basis to the extent required to fulfill the University's legal obligations. Personal Information collected, used and disclosed under this procedure will otherwise be kept confidential. To this end:
 - 7.1. All individuals involved in this procedure will be advised of their duty to maintain the confidentiality of all information disclosed to them in this procedure, including any Personal Information disclosed to them.
 - 7.2. Personal Information obtained during the Reporting Process will not be disclosed except to the extent that disclosure is necessary for the purposes of investigating Reports, taking corrective action, protecting the health and safety of members of the University community, or as otherwise required by law. For example, information may be shared with the Office of Campus Safety if this is necessary to protect an individual.
 - 7.3. Complainants and Respondents who are Employees will be advised of the outcome of an Investigation and the corrective actions taken, if any.
 - 7.4. All records will be maintained in a confidential file, including all related communications, memoranda, reports, statements and evidence. Reasonable steps will be taken to protect against unauthorized access to such documents. These records will be retained, and disposed of, in accordance with the Freedom of Information and Protection of Privacy Act and Ontario Tech University's Records Management Policy.
8. **Reprisal.** Any Reprisal, or expressed or implied threat of Reprisal, for making and pursuing a Report under this procedure is itself considered a breach of the corresponding Policy. Any individual experiencing Reprisal may file a Report, and that Report will be processed under this procedure.
9. **Right to a Support Person(s).** Individuals who attend an interview or meeting under this procedure may be accompanied by a support person. The role of a support person is to provide moral support. Individuals who choose to attend an interview with a support person must choose a support person who is not otherwise connected to the matter under Investigation (such as a witness or fellow Complainant) and will notify the investigator of their support person's name at least 24 hours prior to the meeting. In the case of an Employee who is a member of a bargaining unit, the support person may be a union representative. During an

investigative interview, a support person will not be permitted to make legal submissions or arguments on behalf of the individual, or to disrupt the interview. In any event, individuals who are being interviewed must answer the interview questions themselves.

10. **Safety is Paramount:** Ontario Tech University has an overriding obligation to protect the safety of all University Members. When a University Member is at risk of imminent harm, we reserve the right to investigate and respond appropriately, independent of a Complainant's and/or Respondent's course of action under this procedure.
11. **Support Services:** [The Employee Family Assistance Program](#) has appropriate support services for Employees who experience Harassment, Discrimination and/or Reprisal or to assist Employees who are involved in dispute resolution processes described in this Procedure.

PREVENTATIVE MEASURES

12. **Training:** Human Resources will ensure information and instruction is provided to Employees regarding Harassment, Discrimination and Reprisal. Training programs are available on the [Health and Safety Website](#).
13. **Range of Dispute Resolution Options:** Several options to resolve Harassment and Discrimination concerns are available for Complainants. Informal approaches can foster prompt resolution and prevent escalation; particularly when concerns are raised expeditiously. These are opportunities for parties to resolve a dispute, ensure the Workplace is free from Harassment and Discrimination and address broader issues that caused or contributed to the dispute.
14. **Talk to the person about their behaviour:** Where appropriate, Complainants are expected to make good faith efforts to attempt to resolve matters themselves before filing a complaint. If a person feels they are experiencing Harassment or Discrimination, they should immediately make known to the person responsible that the conduct is unwelcome or offensive. It is important that this message be clear and unambiguous. When presented with a legitimate concern, University Members are expected to make reasonable adjustments to their behaviour to resolve the matter. If addressing the person responsible could lead to safety risks, or is not appropriate, Complainants may pursue other resolution options outlined in these procedures.
15. **Consultation:** Employees may benefit from having expert information and advice before deciding how to proceed with a concern related to this procedure. Complainants can consult a Person of Authority or may make an appointment with the Human Rights Office. Consultations are confidential and can provide advice, assistance, coaching, and referrals to assist Complainants.

REPORTING

16. The Reporting Process

Incidents of Harassment, Discrimination and/or Reprisal should be promptly reported to a Person of Authority and/or the Human Rights Office, and no later than one (1) year after the last incident of alleged harassment, discrimination or reprisal. If the Report is related to an Employee in the Human Rights Office, the report should be directed to the University's General Counsel, in which case the General Counsel will have the responsibilities assigned to the Human Rights Office below.

Step 1 – Submitting a Report

- 16.1.** A “Report”, and the corresponding “Reporting Process”, is initiated when an individual completes the Report form (website here; Appendix X) that is available from the Human Rights Office.
- 16.2.** Person(s) of Authority who witness or are made aware of incidents of Harassment, Discrimination and/or Reprisal must initiate a Report to the Human Rights Office.
- 16.3.** The Human Rights Office will, on its own initiative, initiate a Report when it receives information regarding an incident of Harassment, Discrimination and/or Reprisal in the Workplace, unless such a Report has already been submitted by an individual.

Step 2 – Interim Measures

- 16.4.** Upon receiving a Report, the University will immediately determine whether Interim Measures are necessary, considering the severity of the allegations, and the potential risks to University Members. Interim Measures will be implemented where reasonable and appropriate in the circumstances. Person(s) of Authority, the Complainant, Respondent, the Office of Campus Safety or any other relevant stakeholder, may be consulted on a confidential basis, to determine appropriate Interim Measures.

Step 3 – Assessment

- 16.5.** The Human Rights Office will review the Report and determine if the conduct alleged in the Report would amount to Discrimination, Harassment and/or Reprisal. This determination will be based on an assumption that all of the alleged facts were true. If the allegations set out in the Report would not, if true, amount to Discrimination, Harassment and/or Reprisal, the Human Rights Office will respond to the individual submitting the Report in writing, usually within 30 days, advising that the Report has been reviewed, and that the information provided does not support an allegation of Discrimination, Harassment and/or Reprisal under the Respectful Campus Policy. The individual submitting the Report will also be advised that the Human Rights Office may reconsider the Report if additional and significant information is provided. If there is another process or resource at the University that would be more appropriate for the subject matter of the Report, the individual will be advised of this alternative process.
- 16.6.** If, on the other hand, the information provided would, assuming the alleged facts were true, support a finding that Discrimination, Harassment and/or Reprisal had occurred, the following dispute Resolution options will be considered.

Step 4 – Informal Resolution

- 16.7.** Where appropriate, an informal resolution process, such as Mediation, can be pursued if the Complainant and Respondent consent to an informal resolution processes being pursued and to its format (Note: informal resolution options are

not available related to allegations of Workplace Harassment, which require an investigation).

- 16.8.** Where those involved in the informal resolution process reach an agreed resolution, that resolution will become binding.
- 16.9.** Once an informal resolution process has commenced, the Investigation may be delayed for a maximum period of 30 calendar days, after which, unless a resolution has been reached, the Investigation will be re-commenced.

Step 5 – Investigation

- 16.10.** An Investigation will be conducted if informal resolution options are not appropriate in the circumstances or were not successful in resolving the dispute. The purpose of an Investigation is to: gather evidence and witness statements; weigh the evidence; make findings of fact based on the evidence; and, produce an Investigative report. In an investigation under this Procedure, the Investigator must make a determination having weighed the evidence on a Balance of Probabilities that either: (1) a policy breach occurred; or (2) a policy breach did not occur.
- 16.11.** The Human Rights Office will ensure an Investigation process that is appropriate in the circumstances and that complies with Administrative Fairness requirements. At this stage, consideration will be given to whether the investigation will be conducted internally or externally. The Human Rights Office will review the collective agreement(s) of any individuals involved in the Report, and will ensure the procedural rights granted to those individuals under their respective collective agreements are maintained.
- 16.12.** The Human Rights Office will ensure the complainant and respondents involved in an Investigation, and their respective bargaining agent(s), where applicable, are informed of the investigation process that will be adopted in each particular case.

Step 6 – Determination & Corrective Action

- 16.13.** The Human Rights Office will ensure that the results of the investigation are brought to the attention of, and reviewed by, the appropriate Person(s) of Authority.
- 16.14.** In the event that the Investigation found a breach of policy, the investigator will make recommendations to adequately resolve the inappropriate behavior and restore the Workplace. Human Resources will advise the Person(s) of Authority with respect to appropriate corrective measures, if any, to be taken, including measures aimed at preventing Reprisal.
- 16.15.** Where an Employee is found to have engaged in acts of Harassment, Discrimination and/or Reprisal, corrective measures may include non-disciplinary actions (e.g. education) or disciplinary measures (e.g. a written reprimand, a suspension or termination). Human Resources will ensure such reasonable steps are taken to prevent a recurrence.

- 16.16.** Employees that are members of a bargaining unit shall have any corrective measure(s) imposed in accordance with applicable collective agreement requirements.
- 16.17.** Information about investigation outcomes or corrective actions will be provided in accordance with the procedural requirements of any relevant collective agreement and any applicable laws. At the conclusion of an investigation, The Human Rights Office will ensure that any Complainant and any Respondent are informed, in writing, of the outcome of the investigation. Human Resources will ensure that any corrective actions taken or that will be taken are communicated to the Complainant (Employee) and Respondent (Employee) in writing.
- 16.18.** The Relevant Person(s) of Authority will be responsible for implementing recommendations (including corrective action) in consultation and with the support of Human Resources.

MONITORING AND REVIEW

- 17.** This Procedure will be reviewed as necessary and at least every year. The University Secretary and General Counsel, or successor thereof, is responsible to monitor and review this Policy.

RELEVANT LEGISLATION

- 18.** Human Rights Code, R.S.O. 1990, c. H.19
Occupational Health and Safety Act, R.S.O. 1990, c O.1, as amended
Freedom of Information and Protection of Privacy Act, R.S.O. 1990, c F. 31

RELATED POLICIES, PROCEDURES & DOCUMENTS

Respectful Campus Policy
Accommodation Policy
Accommodation for Employees and Job Applicants with Disabilities
Academic Staff Employment Policies
Access to Information and Protection of Privacy Policy
Emergency Management Plan and Procedures
Fair Processes Policy
Non-Academic Staff Policies
Policy to Prevent and Respond to Sexual Violence for Students
Procedures for Responding to Incidents of Sexual Violence
Records Management Policy
Joint Health and Safety Committee Terms of Reference
Occupational Health and Safety Management System
Student Conduct Policy

Ontario Tech-Durham College Threat Assessment Procedures
Work Refusal Procedures

BOARD OF GOVERNORS

Governance, Nominations & Human Resources Committee (GNHR)

Minutes of the Public Session of the Meeting of January 28, 2021

2:00 – 3:00 p.m., Videoconference

Members: Maria Saros (Chair), Lisa Edgar, Laura Elliott, Mitch Frazer, Steven Murphy, Dietmar Reiner

Regrets: Francis Garwe, Kori Kingsbury, Trevin Stratton

Staff: Jamie Bruno, Cheryl Foy, Lori Livingston, Susan McGovern

Guests: Chelsea Bauer, Mike Eklund, Hannah Scott

1. Call to Order

The Chair called the meeting to order at 2:02 p.m.

2. Agenda

Upon a motion duly made by L. Edgar and seconded by L. Elliott, the Agenda was approved as presented.

3. Conflict of Interest Declaration

There were no conflict of interest declarations.

4. Chair's Remarks

The Chair wished everyone a Happy New Year and hopes everyone is keeping safe in light of the increasing COVID numbers. She noted that the committee has an ambitious agenda, which has been structured to encourage strategic discussion. She thanked C. Foy and B. Dinwoodie for structuring the meeting in this new format. The Chair reminded the members that the committee's role is one of oversight and strategic focus and encouraged members to keep their comments at that level.

5. President's Remarks

The President also acknowledged the Board Chair and Secretariat for their work on structuring the agenda in a way to fulfill the governors' fiduciary obligations and to ensure there is more time for discussion rather than presentation. It is a tight agenda and it is focused on making the most of our governors' time in an effective way. This is part of the university's continued efforts to improve our governance processes. The President noted that as GNHR is responsible for governance, this is the best place to discuss the Board's strategy and objectives with respect to EDI and to develop recommendations for consideration by the full Board.

6. Governance

6.1 Strategic Discussion: Strategic goals for Board Governance EDI Strategy

The Chair remarked that concurrent with the COVID-19 crisis, we have also been witnessing a crisis of racism, hatred and violence across North America. Equity, diversity, and inclusivity (EDI) are fundamental values that define our institution. In order to demonstrate the Board's commitment to systemic change to organizational structures that continue to marginalize communities, one of the Board's priorities for this year is to develop a governance EDI strategy for the Board. The committee should consider what role the committee and the Board should be playing in advancing EDI. This is in addition to the Board's oversight role of EDI initiatives at the institution.

The Chair reminded the committee members that they are responsible for overseeing this initiative and advising the Board accordingly. The Chair provided an overview of the committee's preliminary discussion of EDI at the October meeting. One of the comments that stood out from that discussion was that the institution should be a leader in this area for the broader community.

The Chair framed the strategic discussion by asking the committee to focus on identifying the Board's goals for the Board itself in the area of EDI so that the senior leadership of the university can support the Board in the achievement of those goals. Once the Board finalizes its goals for EDI, the Office of the University Secretary will support the Board through research and planning work.

The Chair kicked off the discussion by asking the committee members what role they see the Board playing in EDI at the institution, keeping in mind their responsibility for oversight and not operations. The committee's discussion included the following comments and feedback:

- EDI is incredibly important for the institution;
- reviewing the report of the President's Equity Taskforce (PET) presented at the December Board meeting was helpful;

- continuous professional development and learning should be the starting point so that Board members have a common understanding about what a university should look like;
- should identify goals with respect to outcomes: staff hiring, policies, Board member composition;
- suggestion to review the PET report in more detail;
- incorporate continued PD for the Board to help increase the governors' EDI knowledge
- oversight of the university's metrics in order to determine whether we are making progress;
- additional educational resources would be helpful;
- would be helpful for the Board to better understand what the university already has in place - what targets/metrics are in place and identify gaps;
- there can also be some confusion with respect to terminology (e.g. multiculturalism);
- must also take EDI into account with respect to communications and the Board's relationship with stakeholders;
- important to identify desired outcomes and metrics in order to help assess improvement and success;
- given the nature of the institution and presence we have in the community, there will likely be an onus to achieve outcomes sooner rather than later and be seen as a leader;
- seeing an increased focus on EDI metrics in corporations, as well;
- reference to the PET report that recommended developing a university-wide EDI strategic action plan – will be helpful for the Board to understand the university's development of the plan - in terms of oversight, it would be beneficial for the Board to review the plan;
- ensure that expenditures and budget are reviewed with a lens to support EDI initiatives, as well as policy development;
- the Board has a role to play in terms of stakeholder relations in terms of EDI (e.g. procurement and the types of organizations that the university deals with);
- there should be short and long-term strategies;
- EDI must be integrated into everything we do and must work with the unique culture of Ontario Tech;
- this is an incredible opportunity – there is room for improvement, but there are many things that the university already does in this space - our students model this very well;
- the Board needs to set the tone for the entire university - if done well, this will make Ontario Tech the best in class.

The Chair then asked the committee for their thoughts on the Board's role, including succession, renewal, and recruitment, which are unique responsibilities for GNHR. The committee shared the following comments:

- when it comes to succession planning and recruitment, EDI goals should be built into these processes;
- the Board will require a broader reach for recruitment to ensure diverse populations are included;
- the needle has already been moved with respect to gender diversity but there is still room for improvement with respect to racial diversity;
- suggestion to incorporate EDI into the interview process – GNHR can be more methodical in composing the interview panel (e.g. if the candidate is female, ensure there are at least two female governors on the interview panel);

The Chair thanked the committee members for the robust discussion and looks forward to continuing the discussion at the February Board PD session. She informed the committee that an external facilitator would be leading the session.

7. Review of Board Committee Structure

D. Reiner discussed his priorities as Board Chair, which includes how to continue to increase governor engagement and focus on strategy. Through his conversations with governors, there seems to be alignment on this. D. Reiner remarked that the timing is right due to the breadth of capability and experience of the Board members and the set of challenges facing the institution. It is important to consider how the university comes through these challenges as a leader.

As we review our committee structure, in order to have fruitful strategic discussions, it will be important for the senior leadership team to bring forward the right items for discussion that align with the university's long-term goals. This will require adjustments to committee agendas to ensure there is sufficient time for discussion. It will also be important to consider whether matters are being reviewed by the correct committee. After having an opportunity to look across the committees' work, GNHR may develop some recommendations for consideration by the Board.

D. Reiner noted that the proposal is simply fine tuning the good practices that are already in place. The Chair thanked D. Reiner, S. Murphy and C. Foy for their work on continuous improvement. A member commented that they have observed some instances where governors are getting into the weeds a bit too much and suggested using questions to guide discussions. Another member agreed that the structure of agendas is a good starting point and welcomed other suggestions that staff might have to assist the Board in their work.

8. Policy Consultation:

C. Foy highlighted that the Accommodation and Respectful Workplace Policies, included for written consultation, are important policies with respect to EDI. She reminded GNHR that policies are brought to the Board to ensure they are the types of policy statements that we want to make as an institution. She discussed how these policy instruments in particular promote a "sticky campus".

8.1 Proposed Amendments to:

- (a) Board of Governors Recruitment, Appointment and Leadership Policy**
- (b) By-law No. 1**
- (c) Board of Governors Procedures for the Election of Administrative Staff, Student, and Teaching Staff Governors**
- (d) Exempt Academic Staff Employment Policy & Deans, Associate Deans and Teaching Staff Governors Procedures**

C. Foy provided an overview of the proposed amendments to the By-law and policy documents arising out of the arbitration decision. She reviewed the key findings of the arbitrator and walked through the key amendments being proposed as a result of the decision. C. Foy responded to questions from the committee. She advised that the amendments address the implications of the decision and more clearly set out the expectations of governors. The Chair encouraged the committee to share any additional comments they might have with C. Foy.

9. Consent Agenda:

Upon a motion duly made by L. Elliott and seconded by L. Edgar, the Consent Agenda was approved.

9.1.Minutes of the Meeting of October 22, 2020

9.2.Election Process 2021

10. Policy Documents for Written Feedback:

- 10.1. Accommodation Policy**
- 10.2. Respectful Campus Policy & Procedures to Prevent and Address Discrimination and Harassment By or Against Employees**

11. Adjournment

Upon a motion duly made by S. Murphy, the public session adjourned at 2:52 p.m.

Becky Dinwoodie, Secretary

COMMITTEE REPORT

SESSION:

Public
Non-Public

ACTION REQUESTED:

Decision
Discussion/Direction
Information

TO: Governance, Nominations & Human Resources Committee (GNHR)

DATE: March 20, 2021

PRESENTED BY: Jamie Bruno, Chief Work Transformation and Organization Culture Officer

SUBJECT: 2020 DCP Pension Governance Compliance Report

COMMITTEE MANDATE:

As part of GNHR's oversight of the university's human resources policies, strategies and plans, the Senior Administration (Pension & Benefits) Sub-Committee (SASC) provides the committee with an annual report on compliance with respect to the University of Ontario Institute of Technology Pension Plan Governance Structure and Pension Plan Processes.

The SASC is presenting the 2020 Pension Governance Compliance Report for the committee's review as part of their oversight role.

BACKGROUND/CONTEXT & RATIONALE:

Ontario Tech University is the sole sponsor of the university's pension plan. The pension plan is a member-investment directed defined contribution pension plan (DCPP) registered with the Financial Services Regulatory Services and the Canada Revenue Agency, and governed by the *Pension Benefits Act (Ontario)* and the *Income Tax Act, Canada*, respectively.

The SASC exercises overall responsibility for the proper administration of the DCP, and administration and investment of the fund. SASC's responsibilities are carried out by three members of senior management:

- Assistant Vice-President, Human Resources
- Vice-President, Administration
- University Secretary and General Counsel

The SASC is also responsible for reporting to GNHR and certifying that all aspects of the *University of Ontario Institute of Technology Pension Plan Governance Structure and Pension Plan Processes* have been met.

With respect to the year January 1 – December 31, 2020, SASC certifies that the responsibilities and processes set out in the accompanying report have been fulfilled and completed, unless indicated in yellow

NEXT STEPS:

1. The attached report will be distributed to the Board of Governors at the meeting on April 22, 2021 for information.

SUPPORTING REFERENCE MATERIALS:

- 2020 Annual Pension Plan Governance Report



**THE UNIVERSITY OF ONTARIO INSTITUTE OF TECHNOLOGY DEFINED CONTRIBUTION
PENSION PLAN
GOVERNANCE COMPLIANCE CERTIFICATE**

Ontario Tech University sponsors the University Of Ontario Institute Of Technology Pension Plan, Registration No. 1087808 (the "Plan"). The Plan is a member-investment directed defined contribution pension plan registered with the Financial Service Regulatory Authority Ontario and the Canada Revenue Agency governed by the Pension Benefits Act (Ontario) (the "PBA") and the Income Tax Act ("ITA"), Canada, respectively.

The Senior Administration (Pension & Benefits) Sub-Committee (SASC) exercises overall responsibility for the proper administration of the Plan and administration and investment of the Fund.

The SASC's responsibilities are carried out by three members of senior management, the Head of Human Resources, (Effective December 18, 2018 AVP, HR), the Chief Financial Officer (CFO) (Effective November 16, 2020 VP, Administration) and the General Counsel (GC). The main responsibility for the Plan and Fund lies with the President and the Pension & Benefits Staff which report to him/her.

The SASC (or member thereof) is responsible for reporting to the Governance, Nominations & Human Resources Committee of the Ontario Tech University Board of Governors and for certifying that all aspects of the University of Ontario Institute of Technology Pension Plan Governance Structure and the Plan Governance Processes have been met.

With respect to the Year January 1, 2020 to December 31, 2020 the SASC hereby certifies that the responsibilities and processes listed in the accompanying ten (10) Pension Governance Checklists have been fulfilled and completed unless indicated in yellow.

Jamie Bruno,
Assistant Vice-President, Human Resources

DATED the 8 day of February, 2021.

Brad MacIsaac

Digitally signed by Brad MacIsaac
DN: cn=Brad MacIsaac, o=OntarioTech, ou=Planning
& Analysis, email=brad.macisaac@uoit.ca, c=CA
Date: 2021.02.08 11:21:05 -0500

Brad MacIsaac, VP Administration

DATED the 8 day of February, 2021.

Cheryl Foy,
University Secretary and General Counsel, Office of the President

DATED the 8 day of February, 2021.

BOARD OF GOVERNORS

As the guiding mind of the University of Ontario Institute of Technology (Ontario Tech University), the Board is the legal plan administrator and, as such, has general oversight responsibility for the administration of the Plan and the administration and investment of the Fund. The Board has established a governance system for the Plan and Fund, which delegates most of the functions relating to the Plan to the Senior Leadership Team (SLT). The Board plays an oversight role vis-à-vis the Plan, with its main responsibilities being to receive and consider reports from the Governance, Nominations & Human Resources Committee and the Audit & Finance Committee (to which the SLT reports) and to approve Plan design changes recommended by the Governance, Nominations & Human Resources Committee. The Board also appoints the auditor for the Plan and receives reports on risk management issues from the Audit & Finance Committee. The Board may also receive submissions from the Pension & Benefits Committee if that Committee feels that it is necessary to bring a matter directly to the Board's attention.

Board of Governors Checklist January 1, 2020 to December 31, 2020

No.	Item	Completion Date ¹	Action Required/ Taken/Comments
1.	Establishes and updates the governance system for the Plan on the recommendation of the Governance, Nominations & Human Resources Committee	November 2013	As required
2.	Approves design changes to the Plan ² on the recommendation of the Governance, Nominations & Human Resources	2020 N/A	
3.	Appoints the Plan auditor	2020 N/A	None
4.	Receives annual report from the Governance, Nominations & Human Resources Committee	March	At least annually
5.	Receives and considers reports from the Audit Committee	November	
6.	May receive submissions directly from the Pension & Benefits Committee	2020 N/A	None

Green-completed
Yellow-in progress
Red-outstanding

¹ If a matter is not required to be addressed in a given year, “N/A – 20—“ is indicated in this column so it is clear that someone turned their mind to whether the item was relevant.

² Design Changes are any changes other than changes that are required by legislation (changes required by legislation are approved by SASC). The annual report from the Governance, Nominations & Human Resources Committee should reference any amendments that were approved by SASC.

GOVERNANCE, NOMINATIONS & HUMAN RESOURCES COMMITTEE

The Governance, Nominations & Human Resources Committee exercises an oversight role with respect to the SLT, a committee of senior management to which is assigned responsibility for most administrator and employer functions relating to the Plan, including all day-to-day operational matters. The Committee's main function is to receive and consider reports from the SLT/SASC with respect to the administration of the Plan and the administration and investment of the Fund, as well as with respect to certain employer-related matters including the budget for the Plan. The Governance, Nominations & Human Resources Committee is also responsible for ensuring that the Board receives appropriate reporting on pension-related matters and makes recommendations to the Board on Plan design changes. The Governance, Nominations & Human Resources Committee may receive submissions from the Pension & Benefits Committee if that Committee feels that it is necessary to bring a matter directly to the Committee's attention.

Governance, Nominations & Human Resources Committee Checklist

January 1, 2020 to December 31, 2020

No.	Item	Completion Date	Action Required/ Taken/Comments
1.	Receives and considers reports from SLT/SASC on matters relating to the, administration and governance of the Plan and Fund	November March 2021	At least annually Pension Financial Statements; Pension Audit results & #2 below SIPP Pending approval at GNHR meeting
2.	Receives and considers reports from SLT*/SASC on investment options offered under the Plan	March	Statement of Investment Policies & Procedures (SIPP) removing money market fund and adding Guaranteed Daily Interest Account (GDIA)
3.	Receives and considers reports from the SLT/SASC on employer-related matters, including the operational budget for the Plan	November	At least annually includes # 2 SIPP above
4.	May receive submissions directly from the Pension & Benefits Committee	None	
5.	Considers Plan design changes and makes recommendations to the Board.	2020 N/A	None
6.	Ensures that the appropriate reporting on pension-related matters is made to the Board.	April 2021	Pending recommendation from GNHR to the Board Expected completion date At least annually -as listed in #1 above
7.	Make changes to the Accountability Tool	2020 N/A	

 Green-completed

 Yellow-in progress

 Red-outstanding

AUDIT & FINANCE COMMITTEE

The Audit Committee has been assigned certain risk management functions and oversees the Plan audit. In carrying out its functions, it works with the SASC and particularly the CFO.

Audit Board of Governors Checklist

January 1, 2020 to December 31, 2020

& Finance Committee No.	Item	Completion Date	Action Required/ Taken/Comments
1.	Performs risk management functions in relation to the Plan and Fund as part of its ERM responsibilities	November	In accordance with the Committee's normal practices
2.	Oversees pension audit as part of the audit of University of Ontario Institute of Technology (Ontario Tech University) pension plan	September	Done
3.	Receives reports from SLT/SASC/CFO on audit and risk management matters	November	Done
4.	Reports to the Board on risk management and audit issues	November	None reported in Pension Audit

Green-completed

Yellow-in progress

Red-outstanding

SENIOR LEADERSHIP TEAM (SLT)

The SLT is responsible for high level oversight of the sponsor, administration and investment functions. The SLT carries out its functions through a sub-committee, the SASC. As such, the SLT, as a committee of the whole, serves mainly as a resource for SASC (i.e., as a sounding board and/or to get input on issues which could have an impact on the University as a whole), receives reports and recommendations from the SASC, and ensures that appropriate reporting is made to the Governance, Nominations & Human Resources and Audit Committees of the Board. Finally, the SLT may receive submissions from the Pension & Benefits Committee if that Committee feels that it is necessary to bring a matter directly to the SLT's attention.

SLT Checklist

January 1, 2020 to December 31, 2020

No.	Item	Completion Date	Action Required/ Taken/Comments
1.	Receives reports from SASC	Ongoing	SLT meetings held weekly updates provided as required
2.	Considers Plan design changes and makes recommendations to the Governance, Nominations & Human Resources Committee	No plan design changes March	Amendments to the Plan Text –none Recommendation to GNHR via the Statement of Investment Policies & Procedures (SIPP) to remove Money Market (MM) fund and replace it with Guaranteed Interest Daily Account (GDIA)
3.	Ensures that appropriate reporting is made to the Governance, Nominations & Human Resources Committee	Ongoing	SLT meetings held weekly updates provided as required & includes SIPP above #2
4.	May receive submissions directly from the Pension & Benefits Committee	2020 N/A	None

Green-completed

Yellow-in progress

Red-outstanding

Senior Administration Sub-Committee (SASC)

The SASC exercises overall responsibility for the proper administration of the Plan and administration and investment of the Fund as well as certain employer-related responsibilities.

SASC's responsibilities are carried out by three members of senior management, the VP, HR & Services¹ the Chief Financial Officer (CFO)⁷ and the General Counsel (GC). The main responsibility for the Plan and Fund lies with the VP, HR & Services and P&B Staff report to him/her.

One of the main responsibilities of SASC is to oversee the activities of P&B Staff, which has primary responsibility for the day-to-day operations of the Plan. SASC ensures that the appropriate policies for the governance of the Plan and Fund are in place, appoints service providers, executes service contracts, and approves Plan amendments, deals with any material regulatory issues and reports to the SLT, the Governance, and Nominations & Human Resources as necessary or required.

Another key responsibility of SASC is to participate in meetings of the Pension & Benefits Committee and to serve as a liaison between the Pension & Benefits Committee and the SLT.

As a sub-committee of SLT, SASC (or a member thereof) is responsible for reporting is to the Governance, Nominations & Human Resources and Audit Committees of the Board.

SASC Checklist January 1, 2020 to December 31, 2020

No.	Item	Party Responsible	Completion Date	Action Required/ Taken/Comments
1.	Reviewing and approving the completed checklists/reports of P&B Staff	AVP, HR ¹ & Services	February 2021	Pending SASC meeting & approval
2.	Approving and executing Plan amendments and signing any related regulatory filings.	AVP, HR & Services/GC ² or delegate	2020 None	No plan text amendments required Regulatory filings do not require signatures therefore submitted with FSRA via FSRA ⁶ portal online.
3.	Approving and signing all annual regulatory filings	VP, HR& Services/GC ² or delegate	October September November	Annual Information Return (AIR) – reviewed & filed with FSRA Form 7- Contribution Summary-reviewed and filed with Sun Life (custodian) Financial Statements filed with FSRA

No.	Item	Party Responsible	Completion Date	Action Required/ Taken/Comments
4.	Approves, reviews and amends SIPP	VP, HR & Services/ GC, CFO ³	February	Statement of Investment Policies and Procedures (SIPP) amended to remove Money Market fund and add GDIA to investment fund line up filed with FSRA
5.	Selecting third party service providers and negotiating and executing contracts.	VP, HR& Services/CFO	December	RFP conducted for Pension Investment Consultant – Contract awarded to Mercer Canada
6.	Liaising with the Audit Committee in connection with the Plan audit; reviewing, approving and signing financial statements.	CFO ⁷ /VP,HR& Services	November	Approved & signed
7.	(a) Chairing the Pension & Benefits Committee and preparing the agenda	VP, HR& Services (or delegate)	April & October	Preparation of Agenda Approval of Minutes
	(b) Attending the Pension & Benefits Committee	CFO (or delegate)	April & October	Year End & Semi-Annual Pension Investment Performance meeting and discussions.
8.	Receiving and reviewing reports from P&B Staff regarding the performance of third party service providers	VP, HR & Services or delegate	March, September	Mercer Canada Investment Reports
			December	Sun Life
9.	Establishing service standards/benchmarks based on recommendations from P & B Staff	VP, HR & Services or delegate	April & October	Meetings with SASC as required. Mercer provides investment benchmarks and conducts annual and semi-annual investment performance analysis.

No.	Item	Party Responsible	Completion Date	Action Required/ Taken/Comments
10.	Receiving and reviewing reports from P&B Staff regarding investment performance (and or having in-person meetings with provider(s) and consultants)	VP, HR & Services or delegate	<p>Q1- April Q2- July Q3 – October Q4-January 2021</p> <p>March & September December</p>	<p>Quarterly Rates of Return/Pension statements provided to all pension plan members with economic outlooks in written & video format. Investment performance posted to HR Pension website and available on Plan member website at SLF. Bi-annual meetings with Mercer (Pension Investment consultant) and subsequent attendance at P & B Committee</p> <p>Mercer Canada</p> <p>Annual Pension Report/Meeting with Sun Life</p>
11.	Receiving and reviewing member communication and education initiatives <i>(continued on next page)</i>	VP, HR & Services or delegate	<p>January to December</p> <p>Ongoing</p> <p>April</p> <p>April</p> <p>May</p>	<p>My Money at Work 2020 Financial Wellness Webinars series (Sun Life)</p> <p>HR Pension Website Resources</p> <p>Communication to all Plan Members with resources in response to volatile markets - COVID-19</p> <p>Pension investment option change campaign- removal of Money Market fund replaced with new Guaranteed Daily Interest Account (GDIA) & Fund Sheet</p> <p>Pension & Benefits at a Glance ; Non-Union Faculty; Staff –Non-</p>

No.	Item	Party Responsible	Completion Date	Action Required/ Taken/Comments
			<p>June</p> <p>August</p> <p>October</p> <p>Q1- April Q2- July Q3 – October Q4-January 2020</p> <p>November</p>	<p>Union; FA; OPSEU & Executive</p> <p>Presentation deck for 2020 Spring webinar and ancillary materials re: Fund Change from Money Market to GDIA.</p> <p>Targeted communication to members with GIC & GDIA amounts nearing \$100k, for enrolment in SLF Trust to afford protection against unlikely event of SLF default.</p> <p>Presentation deck for 2020 Fall Webinar</p> <p>Quarterly Rates of Return/Pension statements provided to all pension plan members with economic outlooks. Quarterly data posted to Ontario Tech University Pension website.</p> <p>Sun Life Max Review- Financial Literacy e-mail campaign to all members to review pension portfolios (Financial Literacy Month)</p>
12.	Reviewing and approving the annual expense budget	VP, HR& Services/GC ¹	April	In accordance with normal practice

No.	Item	Party Responsible	Completion Date	Action Required/ Taken/Comments
13.	Considering and approving P&B Staff's recommendations with respect to Plan design changes; initiating recommendations with respect to Plan design changes as required.	VP, HR& Services/CFO	2020 N/A	
14.	Considering and approving P&B Staff's recommendations with respect to development of new policies and changes to existing policies; initiating policy development as required.	VP, HR& Services/GC,CFO ²	February	Statement of Investment Policies & Procedures (SIPP) removing money market fund and adding Guaranteed Daily Interest Account (GDIA)
15.	Dealing with material regulatory issues.	VP, HR& Services/GC	2020 N/A	None
16.	Working with the Audit Committee to address risk management issues	VP, HR & Services/GC ³	2020 N/A	None
17.	Overseeing governance review using Canadian Association of Pension Supervisor Authorities (CAPSA) governance tool	CFO/ VP, HR & Services ⁴	Ongoing and annual review February	SASC meetings SASC Compliance Certification
18.	Preparing and delivering report(s) to the a) SLT	GC/ VP, HR & Services ⁵	Ongoing Meetings with P & B Staff February & October a) Weekly	Updates provided by P & B Staff to AVP HR and SASC SASC Committee Meeting Reporting as required

No.	Item	Party Responsible	Completion Date	Action Required/ Taken/Comments
	b) Governance, Nominations & Human Resources Committee		b) March	Money Market fund and replace with Guaranteed Daily Interest Account (GDIA) & Statement of Investment Policies & Procedures (SIPP) approval an; 2019 Annual Pension Governance Report & Certification
	c) Audit Committee		c) October	Pension Financial Statements & Pension Audit Report
	d) Board		d) November	Pension Financial Statements & Pension Audit Report
			d) April	Statement of Investments Policies & Procedures (change from MM to GDIA fund)
			d) November	Pension Financial Statements & Pension Audit Report
19.	Ensuring that the Accountability Tool is completed on an annual basis and maintaining a record of the completed Checklists	VP, HR & Services/CG/CFO	January 2021	SASC annual review and compliance certification to the Board

Green- completed, **Yellow-** in progress, **Red-** outstanding

1. New AVP, HR joins the University on December 18, 2017. Prior to this date from April 1, 2011 to Dec 17, 2017 the University's Provost and Vice-President Academics served as the head of HR.
2. GC plays an advisory role on an as needs basis.
3. GC and CFO play an advisory role on an as needed basis.
4. VP, HR & Services plays an advisory role on an as needs basis
5. VP, HR & Services plays an advisory role on an as needs basis
6. Effective June 8, 2019, the Financial Services Regulatory Authority of Ontario (FSRA) assumed regulatory duties of the Financial Services Commission of Ontario (FSCO) and the Deposit Insurance Corporation of Ontario (DICO).
7. New VP, Administration position effective November 19, 2020 incorporates former position of CFO position

Pension & Benefits (P & B) Committee

The Pension & Benefits Committee serves in an advisory capacity with respect to the Plan. The composition of the P&B Committee and other procedural matters are set out in the P&B Committee Terms of Reference, a copy of which is attached to this Accountability Tool.

The mandate of the P&B Committee includes oversight with respect to the administration, communication and investment management of the Plan. This includes the ability to make recommendations to SASC to amend and interpret the provisions of the Plan as well as to make recommendations to SASC with respect to the specific matters identified in the P&B Committee Terms of Reference.

P&B Committee Checklist

January 1, 2020 to December 31, 2020

No.	Item	Party Responsible	Completion Date	Action Required/ Taken/Comments
1.	Developing Agenda	VP, HR & Services (or delegate)	March & September	Review of previous minutes and bringing forward any actions completed and provide updates
2.	Transmitting Notice and Agenda	VP, HR & Services (or delegate)	March & September	Agenda and any accompanying materials reviewed prior to P & B committee meeting
3.	P&B Committee Meeting	VP, HR & Services and members of same, including CFO	March & September	Done
4.	Distributing Minutes	Secretary	March & September	Done
5.	Completing Action Items from P&B Committee Meeting	VP, HR & Services (or delegate)	March February	Recommendation for due diligence (investment analysis by Mercer) re: Guaranteed Investment Deposit Account as a potential new investment option to SASC Recommendation to SASC to remove Money Market fund and replace with GDIA
6.	Maintaining minutes of meetings	Secretary	March & September	Done-Distributed and filed

Green-completed

Yellow-in progress

Red-outstanding

PENSION & BENEFIT (P&B) STAFF

P&B Staff is responsible for managing the day-to-day operations of the Plan and Fund. Many of the responsibilities in the P&B Staff Checklist may be carried out by third party service providers and in that case P&B Staff's role is primarily one of co-ordination, monitoring and supervision.

P&B Staff is responsible on an ongoing basis for enrolling Plan members, maintaining historical records of individual members, sending each member an annual statement, calculating and processing retirement, termination, marital breakdown and death payments, and responding to questions from members and former members, ensuring contributions are remitted to the custodian, reviewing monthly pension payments from the fund, making recommendations to the VP, HR & Services¹ with respect to service providers, recommending service standards/benchmarks to VP HR & Services, monitoring accuracy and timeliness of major services/investment options against established performance standards, explaining and providing written explanations to members about the Plan provision and members' rights and obligations with respect to the Plan, promoting awareness of the Plan and its provisions among the members and beneficiaries, providing member education programs, assisting the VP, HR & Services and GC in the negotiation of contracts with third party service providers, ensuring that expenses relating to the operation of the Plan are paid within the budget established by the VP HR & Services and CFO, and ensuring that the Plan is administered in accordance with applicable legislation and all filed documents, including interpreting the Plan document as necessary. P&B Staff also ensures that the Accountability Tool is completed on an annual basis and provided to the VP, HR & Services and for maintaining appropriate records.

The attached checklists are intended to assist P&B Staff in carrying out the foregoing responsibilities to form the basis of P&B Staff's report to the VP, HR & Services. They consist of an administrative checklist, a regulatory compliance checklist, a key document checklist, and a service provider checklist and accompanying evaluation forms.

P & B STAFF ADMINISTRATIVE CHECKLIST*

January 1, 2020 to December 31, 2020

No.	Item	Prepared By	Completion Date	Action Required/ Taken/Comments
1.	Certified copies of all documents that create and support Plan amendments made during the year	P & B Staff	2020 None	

1. New AVP, HR joins the University on December 18, 2017. Prior to this date from April 1, 2011 to Dec 17, 2017 the University's Provost and Vice-President Academics served as the head of HR.

No.	Item	Prepared By	Completion Date	Action Required/ Taken/Comments
2.	Information with respect to the remittance of employer contributions to the custodian or reallocation of assets within the Fund.	Payroll and verified by HR P & B Staff	<p>Full time -2020 January to December- Monthly</p> <p>Less than Full time or Limited Term-2020 January to December Bi-Weekly</p>	<p>Each pay cycle monthly or bi-weekly, as the case may be, payroll deductions are processed by payroll and verified by P & B Staff</p> <p>Cumulative amounts are monitored to ensure CRA limits do not exceed the maximum permitted under the Income Tax Act 2020 maximum \$27,830</p>
3.	Reports and returns filed with the Financial Services Regulatory Authority of Ontario* (“FSRA”)* previously know as FSCO and Canada Revenue Agency (“CRA”).		<p>November</p> <p>August</p> <p>November</p>	<p>Annual Information Return – filed with FSRA</p> <p>Form 7- Contribution Summary Form reported & filed to Sun Life (SLF)</p> <p>Audited Financial Statements filed with FSRA</p>
4.	Summaries of Pension Adjustments (“PAs”).	Payroll	January 2021	2020 Pension Adjustments year-end checked no issues as confirmed by payroll & SLF
5.	Summaries of Pension Adjustment Reversals (“PARs”)	N/A	N/A	Applicable to defined benefits plan only. N/A for the University’s defined contribution plan.
6.	Annual Information Return	Pension & Benefits Staff	November	Done
7.	Form 7, Summary of Contributions/Revised Summary of Contributions	Pension & Benefits Staff	September	Done
8.	Financial Statements (including auditor’s report)	KPMG and Ontario Tech University	November	Done

No.	Item	Prepared By	Completion Date	Action Required/ Taken/Comments
9.	Copy of SIPP as either confirmed or amended by AVP, HR	Mercer Investment Consulting Firm	April	Confirmed & amended to remove Money Market and replace with GDIA fund
10.	Reports on monitoring of investment options	Mercer Sun Life	April October Quarterly & Year End annual reporting	Q4-2020 DCPD Annual Investment Monitoring & Plan Governance Review @ December 31, 2019 Semi-annual Investment Monitoring Review @ June 30, 2020 Includes report on the transition of Money Market Assets to GDIA
11.	Information with respect to the monitoring of Plan expenses	Fees paid by members	Reported quarterly on Member pension statements each quarter	Pension Plan statements available online quarterly and mailed to member's home address in January (yearend statement). Former members with assets on deposit also receive same.
12.	Information with respect to the monitoring of fees charges to members	Sun Life	Reported on Member statements each quarterly	

No.	Item	Prepared By	Completion Date	Action Required/ Taken/Comments
13.	Information with respect to the enrolment of new members	Ontario Tech University & Sun Life	<p>1st day of hire for full time continuing employees (FTE) or;</p> <p>Less than full time or limited term employees (LTEs) when criteria attained</p> <p>Meeting with each eligible pension plan member for enrolment and information session</p>	<p>All FTEs eligible to join on the date of hire (mandatory)</p> <p>Eligibility (voluntary) for less than full time or LTEs employees 24 months of consecutive employment with the University having attained either:</p> <p>a) 700 hours in each of the 2 years or;</p> <p>b) 35% YMPE in each of the previous 2 years*</p> <p>Prior to or on date of hire for FTEs. For LTEs upon meeting eligibility criteria.</p>
14.	Information with respect to the termination and death benefit payments made from the Fund.	Ontario Tech University and Sun Life	<p>Terminations as occurring</p> <p>2020 deaths -none</p>	Termination reports received monthly & Plan member statement issued annually and targeted communications to reiterate termination options available.
15.	Information with respect to marriage breakdowns	Sun Life	None	
16.	Information with respect to numbers of member and active members	Sun Life	Monthly & at Plan Year (June 30)	Reports available at Sun Life Plan Sponsor website to access current statistics. Plan Year End reports provided directly by SLF for AIR, Form 7, Audit & Financial Statements.

No.	Item	Prepared By	Completion Date	Action Required/ Taken/Comments
17.	Information with respect to the annual statements provided to members, including sample statements.	Ontario Tech University & Sun Life	Ongoing	SLF –quarterly pension statements online at SLF member website. Annual mailing to home address. DCPP Library-How to read my statement.
18.	Information with respect to the written explanations provided to the members about the Plan provisions and the members’ rights and obligations with respect to the Plan.	Ontario Tech University and Sun Life	<p>Currently under review for revisions to DCPP Member booklet</p> <p>May</p> <p>Ongoing</p> <p>Ongoing -Less than full time or limited term employees’ pension personal sign up virtual meeting date of eligibility</p>	<p>DCPP Member Booklet & Retirement Income Options</p> <p>Pension & Benefits at a Glance ; Non-Union Faculty; Staff –Non-Union; FA; OPSEU & Executive</p> <p>My Money Investment Guide, Sun Life on line retirement and financial literacy tools (risk assessment) and University pension plan website</p> <p>Full time continuing Pension and Benefits Personal Sign Up virtual zoom meetings (prior to date of hire</p> <p>Less than full time or limited term employees’ pension personal sign up virtual meeting date of eligibility</p> <p>Optional membership in the University’s pension plan as per Ontario pension legislation.</p>

No.	Item	Prepared By	Completion Date	Action Required/ Taken/Comments
19.	Information with respect to the educational or other information provided to Plan members about the Plan and financial planning for retirement. <i>(continued on next page)</i>	Ontario Tech University and Sun Life	<p>January</p> <p>April</p> <p>June</p> <p>August</p>	<p>2020 Financial Wellness Seminars - monthly</p> <p>Communication to all Plan Members with resources in response to volatile markets - COVID-19</p> <p>Pension investment option change campaign-removal of Money Market (MM) fund replaced with new Guaranteed Daily Interest Account (GDIA) & Fund Sheet</p> <p>2020 Spring Pension Fund Change – Webinar Replacement of MM fund with GDIA fund</p> <p>One on one sessions with Sun Life representative</p> <p>Post webinar recording of webinar sent to all eligible employees and available to Pension website</p> <p>Targeted communication to members with GIC & GDIA amounts nearing \$100k, for enrolment in SLF Trust to afford protection against</p>

No.	Item	Prepared By	Completion Date	Action Required/ Taken/Comments
			<p>November</p> <p>November</p> <p>Ongoing</p>	<p>unlikely event of SLF default.</p> <p>2020 Fall-Webinar – Virtual Presentations Investing the Essentials One on one sessions with Sun Life representative Post webinar recording of webinar sent to all eligible employees and posted to Pension website</p> <p>Sun Life Max Review e-mail Financial Wellness campaign to all members to review pension portfolios (Financial Literacy Month)</p> <p>Quarterly investment Performance reports, economic outlooks video & print Retirement and Financial website references</p>
20.	Information with respect to any regulatory or other administrative issues that arose during the year.		None	
21.	Information with respect to member complaints	Sun Life	None	

No.	Item	Prepared By	Completion Date	Action Required/ Taken/Comments
22.	Reports on retention of new service providers/copy of completed third party evaluations		December	Request For Proposal (RFP) for Pension Investment Consultant- Mercer Canada awarded contract
23.	Copies of any legal opinions obtained during the year.	N/A	N/A	None
24.	Copy of completed regulatory compliance checklist	Ontario Tech University	December	
25.	Report on the results of the reviews of and/or amendments to any Key Plan Documents	Ontario Tech University & Mercer	Ongoing January	As required no pension plan text amendments SIPP

*YMPE (Year's Maximum Pensionable Earnings)/35% of YMPE

- 2018 YMPE \$55,900/\$19,565
- 2019 YMPE \$57,400/\$20,090

Green-completed

Yellow-in progress

Red-outstanding

P&B STAFF REGULATORY COMPLIANCE CHECKLIST
January 1, 2020 to December 31, 2020

P & B STAFF: REGULATORY COMPLIANCE CHECKLIST

This checklist is intended as a guide to the regulatory responsibilities of Ontario Tech University as the administrator of the University of Ontario Institute of Technology Pension Plan (the “Plan”), an Ontario registered pension plan.

For the purpose of this checklist the following abbreviations are used:

Pension Benefits Act (Ontario)	PBA
Regulations under the Pension Benefits Act (Ontario)	PBA Reg.
Federal Investment Regulations (i.e. sections 6, 7, 7.1 and 7.2 and Schedule III to the PBSA Regulation, 1985 (Canada)	FIR
Income Tax Act (Canada)	ITA
Regulations to the Income Tax Act	ITA Reg.
Financial Services Regulatory Authority (previously FSCO)	FSRA
Canada Revenue Agency	CRA

**Effective June 8, 2019, the Financial Services Regulatory Authority of Ontario (FSRA) assumed regulatory duties of the Financial Services Commission of Ontario (FSCO) and the Deposit Insurance Corporation of Ontario (DICO).*

P&B STAFF REGULATORY COMPLIANCE CHECKLIST
January 1, 2020 to December 31, 2020

	Legislation	Time Limit (if any)	Person Responsible	Comments
(a) Filing of Plan Documents				
<input type="checkbox"/> File certified copy of plan amendments with Superintendent along with Form 1.1.	PBA s.12(1), (2)	Within 60 days after the date on which the plan is amended.	P & B Staf	2020 None
<input type="checkbox"/> File with Superintendent certified copies of each document that changes the documents that create and support the plan or pension fund (e.g. trust documents). File with CRA as appropriate.	PBA s.12(3) ITA Reg. 8512(2)	Within 60 days after the date on which the plan is amended.	AON Hewitt July 24, 2003 September 13, 2004	Done UOIT (Ontario Tech University) DCPP FSRA – Plan registration CRA – Plan registration
<input type="checkbox"/> File explanation of amendment transmitted to members with Superintendent.	PBA s.26(3) Reg. 3(4)	Within 6 months after registration of the amendment. (If amendment is adverse (i.e. reduces benefits or rights on a go forward basis), Superintendent may require explanation to be provided prior to registration.)	P & B Staff	None
<input type="checkbox"/> If Superintendent dispenses with notice of the amendment required under s. 26(3) of the PBA, then must provide notice of amendment with next annual statement to members.	PBA s.26(4), 27 Reg. 39(2)		P & B Staff	None
<input type="checkbox"/> File copy of notice of adverse amendment provided to members (if such notice was required) with Superintendent and certify details as to classes of persons who received notice, date when last such notice given and that notice was provided as required.	PBA s. 26(1) Reg. 3(3)	Within 30 days after the date on which the last of the notices was transferred. See under section (c) below regarding required disclosure of adverse amendments to members.	P & B Staff	None
<input type="checkbox"/> File certified copy of amendments	ITA 147.1(4) ITA Reg.	Within 60 days after the date, the amendment is	P & B Staff	None

P&B STAFF REGULATORY COMPLIANCE CHECKLIST
January 1, 2020 to December 31, 2020

with CRA along with form T920.	8512(2, (3)	made.		
	Legislation	Time Limit (if any)	Person Responsible	Comments
(b) Reporting Requirements				
<input type="checkbox"/> File an annual information return.	PBA s.20(1) Reg. 18(1), (6), (7) Reg. 37 ITA Reg. 8409(1), (2)	9 months after the plan's fiscal year end. November	P & B Staff	Done -filed with FSRA
<input type="checkbox"/> File financial statements (including auditors' report where plan assets exceed \$3 million)	Reg. 76	By June 30 of the year following the plan's fiscal year end. November	Finance and P & B Staff	Financial Statements filed with FSRA
<input type="checkbox"/> Review SIP&P and amend/confirm annually.	Reg. 79 FIR, s.7.2(1)	April	SASC , P & B Staff in consultation with Mercer Investments	Amended to remove Money Market and replace with Guaranteed Daily Investment Account fund with FSRA.
(c) Disclosure to Members				
<input type="checkbox"/> Explain plan provisions to employees who will become eligible to join the plan.	PBA s. 25(2)(b) Reg. 38	At least 60 days before employees become eligible. Date of Hire or date employee meets with part-time pension eligibility criteria	Payroll and P& B Staff	Full time continuing Pension and Benefits Sign Up meeting (prior to date of hire) Less than full time or limited term employees' pension sign up once eligibility criteria met and if member elects to join

P&B STAFF REGULATORY COMPLIANCE CHECKLIST
January 1, 2020 to December 31, 2020

	Legislation	Time Limit (if any)	Person Responsible	Comments
<input type="checkbox"/> Explain Plan provisions to persons who become eligible for plan membership upon becoming employed.	PBA s. 25(2)(c) Reg. 38	<p>Within 60 days after employees, commence employment.</p> <p>Every eligible employee meets with P & B Staff for sign up</p> <p>Pension and Benefits Sign up meetings prior to date of hire for full time continuing employees.</p> <p>For less than full time employees - on or near the date in which the employee has met the required criteria to join the pension plan</p>	P & B Staff	<p>Eligibility for less than full time or Limited Term –Optional membership</p> <p>Employees 24 months of consecutive employment with the University having attained either:</p> <p>a) 700 hours in each of the 2 years or;</p> <p>b) 35% YMPE in each of the previous 2 years*</p>
<input type="checkbox"/> Provide notice and explanation of non-adverse amendments to affected members.	PBA s. 26(3) Reg. 39(1)	Within 60 days after provincial registration.	2019 N/A	None
<input type="checkbox"/> Provide notice and explanation of adverse amendments to affected members if Superintendent requires.	PBA s.26(1), (2) Reg. 3(3), (4)	At least 45 days prior to registration of the amendment.	2019 N/A	None
<input type="checkbox"/> Provide annual statement of benefits as prescribed.	PBA s.27 Reg. 40(1), (2)	6 months after the plan's fiscal year end.	Sun Life	<p>Quarterly Pension Statements on line at mysunlife.ca</p> <p>Pension Statements mailed annually to home address in January following year end</p>

P&B STAFF REGULATORY COMPLIANCE CHECKLIST
January 1, 2020 to December 31, 2020

	Legislation	Time Limit (if any)	Person Responsible	Comments
<input type="checkbox"/> Make documents that create and support the pension plan and other prescribed information available for inspection by members and others as entitled.	PBA s. 29, 30 Reg. 45	Within 30 days after receipt of written request.	P & B Staff	None
<input type="checkbox"/> Provide termination statement containing prescribed information for termination of employment in situations other than retirement or death.	PBA s. 28 Reg. 41(1), (2), 42	Within 30 days after termination of employment or, where notice of termination is not provided to the administrator prior to the event, within 30 days after receipt of such notice.	Sun Life	Termination statements are issued in 2 weeks from date of departure from the University
<input type="checkbox"/> Where a plan member who is not entitled to a pension or deferred pension terminates employment in situations other than retirement or death, the administrator must pay any refund to which the member is entitled.	Reg. 42(3), (4) 42. revoked: O. Reg. 178/12, s. 40	Within 60 days after termination or, where a member has an option for receiving a refund, within 60 days after receipt of a direction from the member.	Sun Life	Payments made within 30 days upon receipt of member's election to transfer assets out of the Ontario Tech DCP.

P&B STAFF REGULATORY COMPLIANCE CHECKLIST
January 1, 2020 to December 31, 2020

	Legislation	Time Limit (if any)	Person Responsible	Comments
<input type="checkbox"/> Provide retirement statement and options for payment of pension.	PBA s.28 Reg. 44	<p>At least 60 days prior to the member's normal retirement date or the date at which the member has indicated he or she intends to retire.</p> <p>If the administrator does not receive adequate notice of the intended retirement to comply with the 60 day time requirement, the administrator shall provide the required information within 30 days following receipt by the administrator of a completed application for commencement of the pension.</p>	<p>Sun Life</p> <p>N/A</p>	<p>Sun Life transfers the value of the member's pension account in accordance with the member's election within 30 days of the receipt of the member's direction to transfer to a retirement income option.</p> <p>Commencement of pension not directly paid from UOIT DCPP N/A</p> <p>Member direction required to SLF to transfer assets out of the Plan</p>
<input type="checkbox"/> Provide statement of benefits payable upon death to spouse, beneficiary or estate.	PBA s.28 Reg. 43(1)	Within 30 days after receipt of notice of death of member or former member.	Sun Life	None
<input type="checkbox"/> Comply with surviving spouse's election regarding pre-retirement benefits.	Reg. 43(3)	Within 60 days after receiving direction from spouse or same-sex partner.	Sun Life	None

P&B STAFF REGULATORY COMPLIANCE CHECKLIST
January 1, 2020 to December 31, 2020

	Legislation	Time Limit (if any)	Person Responsible	Comments
<input type="checkbox"/> In cases of marital breakdown, calculate the value of the pension, as requested by the member and/or spouse using Superintendent of Financial Services approved forms throughout the process.	PBA s. 67.1 – 67.6 Ont. Reg. 287/11 (Family Matters)	Within 60 days of receiving a completed application	Sun Life	None
(d) Miscellaneous				
<input type="checkbox"/> If benefit transfer request made within 60 days of termination of employment, pay in accordance with request. Must ensure that transfers to retirement savings arrangements or deferred life annuities will be administered as pensions or deferred pensions.	PBA s.42(1), (5), (6), (7) Reg. 20	Within 60 days after request.	Sun Life	Processed upon receipt of completed termination option statement received from members by Sun Life.
<input type="checkbox"/> Ensure all contributions are paid when due.	PBA s.56(1) Reg. 4(4) Reg. 5(1)	Employer contributions in respect of normal costs: within 30 days after the month for which contributions are payable.	Payroll, P & B Staff	Contributions are invested by pay date. Contributions received before 2p.m. invested same day after 2p.m. next day
<input type="checkbox"/> Report to Superintendent if contributions are not made when they become due.	PBA s.56(2) Reg. 6.1	Within 60 days after the day on which the contribution was due.	Sun Life	None reported
<input type="checkbox"/> Provide pension fund trustee with a summary of contributions required to be made.	PBA s.56.1(1) Reg. 6.2(1)	Within 90 days after the pension plan is established for the first fiscal year and within 60 days after the beginning of each subsequent fiscal year.	N/A	Applicable when a contribution is <u>not</u> remitted No delays to report
<input type="checkbox"/> Provide pension fund trustee with a revised summary of contributions required to be made.	Reg. 6.2(2)	Within 60 days after becoming aware of a change in contributions.	N/A	Applicable when contribution is <u>not</u> remitted No delays

P&B STAFF REGULATORY COMPLIANCE CHECKLIST
January 1, 2020 to December 31, 2020

	Legislation	Time Limit (if any)	Person Responsible	Comments
<input type="checkbox"/> Pension Adjustments must be reported to CRA in the appropriate manner.	ITA Reg. 8401	On or before the last day of February of the year following the end of the calendar year.	Payroll	Reported by payroll on the T4 prior to Federal tax deadline of each year
<input type="checkbox"/> Pension Adjustment Reversals must be reported to CRA.	ITA Reg. 8402.01	When the Termination occurs in the 1 st , 2 nd , 3 rd quarter of the calendar year, within 60 days after the last day of the quarter in which the termination occurs. When the termination occurs in the 4 th quarter, before February 1 of the following calendar year.	N/A	This applies to DB plans only and not the University's defined contribution pension plan. No action required
<input type="checkbox"/> Where there is a change in the name or address of person who is administrator or persons who constitute the body that is the administrator, inform the Minister of National Revenue in writing within 60 days after the change.	ITA 147.1(7)(c)		2020 N/A	No change

Green-completed
Yellow-in progress
Red-outstanding

P&B STAFF: KEY PLAN DOCUMENT CHECKLIST*

This checklist is designed to ensure that a complete record of the key documents used in the administration of the Plan and the administration and investment of the Fund is maintained in an accessible manner and that reviews of the key documents are carried out at regular intervals to ensure they are updated to reflect current information and practices.

P&B STAFF: KEY PLAN DOCUMENT CHECKLIST

January 1, 2020 to December 31, 2020

No.	Document	Last Review Date	Next Scheduled Review Date, if any	Review Completed By	Action Required/ Taken/Comments
1.	Plan text		None	SASC & P & B Staff	
2.	Custodial Agreement (under Group Annuity Contract)	November 2017	2022	N/A	RFP conducted Sun Life appointed Effective April 1, 2018
3.	Record-keeping Agreement (Sun Life Service Fee Agreement)	November 2017	2022	VP HR & Services	RFP conducted Sun Life appointed Effective April 1, 2018
4.	Insurance Policy Sun Life Group Annuity Contract	November 2017	2022	VP HR & Services	RFP conducted Sun Life appointed Effective April 1, 2018
5.	Statement of Investment Policies and Procedures	September	As required	SASC P & B Staff	
6.	Investment Consulting Agreement	December 2020	2025	VP HR Services	Mercer Canada appointed effective January 1, 2021
7.	Governance Documentation (including Board resolution approving UOIT Pension Plan Governance Structure and Functions Chart and Accountability Tool)	January 2017	TBD	SASC	SASC annual certification, review and approval of Governance Documentation

*Key documents is retained in Human Resources by P & B Staff

Green-completed
 Yellow-in progress
 Red-outstanding

No.	Document	Last Review Date	Next Scheduled Review Date, if any	Review Completed By	Action Required/Taken/Comments
8.	Employee Booklet	Expected completion date for revisions April 2021	N/A	VP HR & Services and P & B Staff	Draft version revised for CRA limits and definitions & addition of definition of continuous service
9.	Service Provider Benchmarks	November 2017	Pension & Benefits Provider 2022 Pension Investment Consultant 2024	SASC	

DRAFT

P&B STAFF: THIRD PARTY SERVICE REVIEW

This checklist is designed to ensure that agents and advisors retained by the Plan are meeting the performance standards expected by the Plan administrator. This is a particularly critical component of the governance system in the case of agents of the Plan administrator. For PBA purposes, an agent is a service provider that is performing a function that the administrator would otherwise have to perform itself (e.g., a record keeper or investment manager) and therefore it is particularly important to ensure the agent is meeting the PBA fiduciary standard of care (as the Plan administrator will be liable if it does not). Advisors fall into a different category since they only give advice to the administrator who makes the ultimate decision on the matter as part of its functions. Nonetheless it is important for the ongoing operations of the Plan that advisors are evaluated to ensure that they are providing their services to the expected standards. Finally, the external auditor falls into its own category in that it is performing specific functions under the PBA. Nonetheless, again, it is important for the Plan administrator to be satisfied that the external is providing its services to the expected standards and to report any issues to the Audit Committee.

A review of the services provided by employees of the Plan administrator should also be undertaken. This review generally occurs as part of the normal course HR processes. Board and management committees should perform self-evaluations at specified intervals (this should be addressed in a governance policy) or from to time may wish to commission third party evaluations of their governance of the Plan.

P&B STAFF: THIRD PARTY SERVICE REVIEW January 1, 2020 to December 31, 2020

No.	Item	Reviewed by	Completion Date	Action Required/ Taken/Comments
1.	Performance Review of Trustee/ Custodian	Mercer	November 2017 Effective April 1, 2018	Market Review Sun Life Next review 2023
2.	Performance Review of Investment Manager, i.e., provider of investment platform for the Plan	P & B advisory committee V.P. HR & Services	September 2017 Effective April 1, 2018	Market Review Sun Life Next review 2023
3.	Performance Review of Record-Keeper	P & B advisory committee V.P HR & services	September 2017 Effective April 1, 2018	Market Review Sun Life Next review 2023
4.	Performance Review of Investment Consultant	CFO, V.P. HR & Services, P & B Staff	December 2020 Effective January 1, 2021	Effective January 2021 Contract awarded to Mercer –next review 2025
5.	Performance Review of External Legal Counsel	N/A	N/A	None required
6.	Performance Review of External Auditor	N/A	N/A	None required

Green-completed

Yellow-in progress

Red-outstanding