**UNIVERSITY OF ALBERTA**
**UNIVERSITY GOVERNANCE**

Monday, January 28, 2019
Council Chamber, 2-100 University Hall (UNH)
2:00 PM - 4:00 PM

## OPENING SESSION

1.  Approval of the Agenda                                                      David Turpin
    - Introduction of Consent Agenda

2.  Report from the President                                                   David Turpin
    - For the Public Good Performance Indicators

## CONSENT AGENDA

*[If a member has a question or feels that an item should be discussed
by GFC, they should notify the Secretary to GFC, in writing, two
business days or more before the meeting so that the relevant expert
can be invited to attend.]*

3.  Approval of the Minutes of November 26, 2018

4.  New Members of GFC

5.  Proposal from the Faculty of Arts to terminate the Bachelor of Arts and
    Bachelor of Arts (Honors) in Chinese Studies and Japanese Studies,
    the Bachelor of Arts in Chinese and Japanese, and the minors in
    Chinese and Japanese

    *Motion: To Approve Items in the Consent Agenda*

## ACTION ITEMS

6.  Revisions to the Animal Ethics Policy and Procedures                        Steven Dew
                                                                                Susan Babcock
    *Motion: To Recommend Board of Governors Approval*                          Randy Goebel

7.  Proposed Revisions to Standing Committee Terms of Reference - GFC           Frank Robinson
    University Awards and Scholarship Committee (UASC) including a
    name change to GFC Undergraduate Awards and Bursaries
    Committee (UABC)

    *Motion: To Approve*

## EARLY CONSULTATION

8.  Proposed Revisions to Standing Committee Terms of Reference - GFC           David Turpin
    Executive Committee

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Governors, GFC, and their standing committees. Members are instructed to destroy this material following the meeting.*

## DISCUSSION ITEMS

9.  Replenishment of GFC, Standing Committees, and other bodies
    - GFC Replenishment (no documents)
    - Nominating Committee - Membership Replenishment Procedures

    David Turpin
    Jonathan White

10. Board of Governors / GFC /Senate Summit debrief (no documents)

    David Turpin

11. Conflicts of Interest Amendment Act – Updated Draft Employee Code
    of Conduct

    Brad Hamdon
    Wayne Patterson

12. Universal Student Ratings of Instruction (USRI) for the Academic Year
    2017/18

    Sarah Forgie
    Jeff Rawlings

13. Equity, Diversity, and Inclusivity (EDI) Strategic Plan

    Wendy Rodgers
    Logan Mardhani-Bayne

14. Question Period

    David Turpin

## INFORMATION REPORTS

*[If a GFC member has a question about a report, or feels that the
report should be discussed by GFC, the GFC member should notify the
Secretary to GFC, in writing, two business days or more before GFC
meets so that the Committee Chair (or relevant expert) can be invited
to attend.]*

15. Report of the GFC Executive Committee

16. Report of the GFC Academic Planning Committee

17. Report of the GFC Academic Standards Committee

18. GFC Nominations and Elections
    - Report of the GFC Nominating Committee - December 13, 2018
    - Election results for positions on Search and Review Committees

19. Report of the Board of Governors

20. Information Items
    A. Helping Individuals at Risk (HIAR) and Office of Safe Disclosure and
    Human Rights (OSDHR) Annual Reports 2016-2017
    B. Amended Academic Schedule 2019-2020

21. Information Forwarded to GFC Members Between Meetings
    - Save the Date email for Summit
    - Invitation to Summit
    - Announcement of new Dean of Augustana Faculty

## CLOSING SESSION

22. Next Meeting: February 25, 2019

Presenter(s):

| | |
|---|---|
| David Turpin | President and Vice-Chancellor, Chair, General Faculties Council |
| Steven Dew | Provost and Vice-President (Academic) |
| Susan Babcock | Director, Research Ethics Office |
| Randy Goebel | Associate Vice-President (Research) and Associate Vice-President (Academic) |
| Frank Robinson | Chair, GFC Undergraduate Awards and Scholarship Committee |
| Jonathan White | Chair, GFC Nominating Committee |
| Brad Hamdon | General Counsel |
| Wayne Patterson | Vice-Provost & Associate Vice-President (Human Resources) |
| Sarah Forgie | Chair, GFC Committee on the Learning Environment |
| Jeff Rawlings | Director/Relationship Management, Information Services & Technology |
| Wendy Rodgers | Deputy Provost |
| Logan Mardhani-Bayne | Initiatives Manager, Audit & Analysis |

Documentation was before members unless otherwise noted.

Meeting REGRETS to:      Heather Richholt, 780-492-1937, richholt@ualberta.ca
Prepared by:      Meg Brolley, GFC Secretary
University Governance      www.governance.ualberta.ca

# PRESIDENT'S REPORT

## TO THE GENERAL FACULTIES COUNCIL

Welcome to the Winter 2019 semester at the University of Alberta. I hope that each of you had a restful break, and have returned to the university feeling refreshed.

As we turn our attention to the new year ahead of us, several major events and initiatives have come into focus. Externally, our province is preparing for an election before the end of May. Internally, we have begun moving through the university's annual budgeting process within our multi-year planning and accountability framework. At the same time we continue to pursue several university-wide strategic initiatives, such as transitioning between budget models, and rolling out a new Equity, Diversity and Inclusivity strategic plan.

I would like to draw your attention to a few recent highlights, each of which points to larger projects unfolding over the coming months:

- You may have noticed U of A ads in the national media over the past months—this modest reputation and awareness campaign will feed into the ongoing development of a new U of A brand platform

- Changes to the PLLC's program structure were approved earlier this month that support our larger objective to re-shape leadership education at the U of A

- The Effectiveness Satisfaction Survey distributed in the fall of 2018 marked the first phase of the UniForum benchmarking program, with the next components of the program rolling out this spring and summer

We have a busy and exciting term ahead of us, and I look forward to working with you on these many diverse initiatives.

# BUILD

## EDI Plan Roundtable Discussions

The University of Alberta is preparing to launch its new Equity, Diversity, and Inclusivity (EDI) Strategic Plan. Developed through extensive consultation, the plan lays out a common vision and framework to inspire, guide, and support both current and future EDI efforts across the university.

To provide further opportunities for discussion on the EDI Plan before its launch, we are holding a series of roundtable discussions focusing on the perspectives of each of the Designated Groups defined in the federal Employment Equity Act: women, Indigenous peoples, persons with disabilities, members of visible minorities, and LGBTQ2S+ persons. If you are interested in joining one of the remaining roundtables, please do so here.

## Truth Matters Campaign

This winter, University Relations launched a modest reputation and awareness campaign. You may have already seen the first two ads in this campaign, which ran in *The Globe and Mail* and *The National Post* in late November and early December. Both appeared in research- and innovation-focused supplements, and featured stories that draw attention to important discoveries by U of A researchers.

The campaign is allowing us to gather data about the effectiveness of this approach, and will feed into the ongoing development of a new U of A brand platform. I invite you to read the first stories featured in this campaign at ualberta.ca/truth-matters.

> **KEY TALKING POINT:**
> *The pursuit of truth grounds the work done at the University of Alberta. By asking why, and what, and how, our researchers push the boundaries of knowledge.*

## Indigenous Health Initiatives Program

The Indigenous Health Initiatives Program (IHIP) was founded in 1988 by the Faculty of Medicine & Dentistry to encourage a greater number of First Nations, Inuit and Métis students to enroll in their programs. While the faculty previously held an upper limit of five Indigenous students admitted to the MD program per year through the IHIP process, this November they moved to eliminate that quota. Starting in fall 2019, all Indigenous students who meet the eligibility requirements through IHIP will be offered a place in medical school.

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# EXPERIENCE

## Foundations of Leadership

Last year we laid out a set of recommendations for the future of the PLLC which included more flexible programming, increased accessibility, and expanded offerings. Flowing from those recommendations, and following extensive consultation, the PLLC team developed a plan to begin broadening the program. They are moving ahead with the following **three changes**:

1. Year-long courses are being condensed into typical semester-length courses to improve flexibility for students

2. The minimum credit requirement is being reduced to 24, allowing second-year students to participate and relaxing the program's structure

3. Enrollment in the Foundations of Leadership course is being opened up for any eligible student (including those not pursuing a PLLC certificate)

These program changes were approved by the Academic Standards Committee earlier this month, and will begin rolling out shortly.

**KEY TALKING POINT:**

*By providing our students with experiences that link them to their futures—whether at home or abroad—we will facilitate their success both within the curriculum, and beyond it.*

## New Policy Studies Program

Beginning in the fall of 2020, the Department of Political Science will offer a new Master of Arts in Policy Studies program. The program emphasizes experiential learning, incorporating both a paid practicum and support for post-graduation internships. The goal of this innovative program is to prepare students to become leading public policy researchers in a wide array of fields, from academia to the public, non-profit, and private sectors.

## 2019 Rhodes Scholar

In December of 2018, second-year medical student Julia Sawatzky was named a 2019 Rhodes Scholar. Sawatzky will head to Oxford University next fall to study tropical medicine and public health policy, before returning to complete her medical degree. She is the University of Alberta's 75th Rhodes Scholar.

# EXCEL

## New Lymphatic Disorders Chair

In October, the U of A celebrated a $7 million combined gift from the Dianne and Irving Kipnes Foundation and the University Hospital Foundation. The donation established the new Dianne and Irving Kipnes Chair in Lymphatic Disorders in the Faculty of Medicine & Dentistry—the first endowed chair of its kind in Canada.

This generous donation will help to position the U of A as an international leader in lymphatic disorder research.

## AI Hub & CIFAR AI Chairs

As winter set in across Edmonton, the U of A celebrated two new advances in the pursuit of AI excellence:

First, in November, Western Economic Diversification Canada announced $2.5 million in new funding to create the Artificial Intelligence Supercomputing Hub for Academic and Industry Collaboration at the U of A. We expect the AI Hub to open in spring 2019.

Only a few weeks later, three U of A researchers were named national artificial intelligence chairs as part of the Pan-Canadian AI Strategy. All three of the new CIFAR AI Chairs are early-career computing scientists, and all are fellows of the Alberta Machine Intelligence Institute.

## Academic Excellence

### *Canada Research Chairs*
When the Government of Canada announced the latest Canadian Research Chairs on November 13, seven U of A researchers stood among them. Our newest CRCs span six different faculties.

### *Killam Laureates*
In late November, the Killam Trustees once again travelled to the U of A's North Campus to help celebrate our 2018 Killam Laureates. In total, 26 students, postdoctoral fellows and academics from across the university were recognized with a Killam award for their outstanding work.

### *University Cup*
Since it was first awarded in 1996, the University Cup has become the highest honour conferred on a faculty member at the University of Alberta. This fall, two academics received the prestigious award: Dr. Chris Le of the Faculty of Medicine & Dentistry, and Dr. Anne Naeth of the Faculty of Agricultural, Life and Environmental Sciences.

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# ENGAGE

## 2019 Community Connections Awards

2019 marks the seventh annual celebration of the U of A's Community Connection Awards. The awards honour people who embody our university's promise to "uplift the whole people" by sharing their expertise, time, and energy for the benefit of the public good. I encourage you to reflect on the faculty members, students, staff and volunteers in your area who help to build community connections, and consider nominating them. Nominations close on February 5.

## Post-secondary Advocacy

Over the last year, the Council of Post-secondary Presidents of Alberta (COPPOA) has developed key messages about the role and importance of post-secondary education in building Alberta's future. COPPOA's three goals are:

1. **Increasing the Capacity to Educate Albertans** – Our goal should be to move towards the national average and accommodate the province's growth rate by providing spaces for an additional 90,000 students by 2025.

2. **Reducing Financial Barriers for the Most Vulnerable Learners** – Our goal should be to double the proportion of government student aid delivered in the form of grants or scholarships, with the emphasis on assisting those from lower-income families.

3. **Maximizing the Impact of Research, Innovation and Skills Development** – Our goal should be to support research and innovation in Alberta and leverage work-integrated learning opportunities at a level higher than any other province in the country to yield the economic and social dividends this province deserves.

> KEY TALKING POINT:
>
> *To ensure our province's long-term prosperity and well-being, we need to increase postsecondary participation, improve affordability and financial support for our students, and bolster support for research and innovation.*

## U of A's United Way Campaign

Our annual United Way campaign took place again in October. I want to thank all those members of GFC who contributed to the campaign through financial and in-kind donations, including our campaign co-chairs Marion Haggarty-France (University Secretary) and Lesley Cormack (Dean, Faculty of Arts). Please watch for further updates on the campaign in late February.

# SUSTAIN

## Budget Planning

Throughout the fall, senior leaders at the U of A have been preparing their multi-year budget and accountability plans. To help clarify how this budget planning process works for our broader campus community, we developed a new website—I invite you to explore the site to learn more. We have also set our budget planning parameters for 2019-20. I encourage you to read about the outcomes of our 2018–2019 planning, as well as our parameters for the next three years, here.

## Budget Model Town Hall

As you are aware, the U of A is moving from an incremental budget model to a new budget model that more effectively directs operating resources to the core activities of the university: teaching and research. We continue to engage university leadership and key stakeholders as we finalize the model and begin a transition period. Earlier this month, Provost Steve Dew and Vice-President (Finance & Administration) Gitta Kulczycki also hosted a budget model town hall to share information on the new model with our wider campus community.
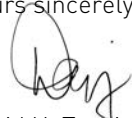
## UniForum

This fall we started into the multi-year benchmarking program, UniForum. I want to thank all GFC members who participated in the first Effectiveness Satisfaction Survey—your responses are greatly appreciated. Part two of the satisfaction survey will take place in spring, and this summer we will undertake the other component of the benchmarking program: collecting resource expenditure data. We expect preliminary results around October of 2019, when we will have a full picture of both satisfaction and expenditures across our services.

## Leadership Transitions

It was with deep sadness that we acknowledged the passing of Dr. Richard Fedorak, dean of the Faculty of Medicine & Dentistry, in November. I am grateful that Dennis Kunimoto has agreed to serve as interim dean through this difficult transition. Earlier this month we announced that Demetres P. Tryphonopoulos will join our community as dean of Augustana on July 1, 2019. Katy Campbell, dean of Extension, has also announced her resignation as dean, effective June 30, 2019.

Yours sincerely,

David H. Turpin, CM, LLD, FRSC
President and Vice-Chancellor

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November 19, 2018

To: General Faculties Council

Re: For the Public Good: Performance Measures Report

From the moment we launched *For the Public Good*, we knew that monitoring our progress would be critical to our success. Defining performance measures that were meaningful and relevant—measures that accurately reflected our goals and efforts—was among our first tasks. In October of 2017 we identified twelve core metrics, which we expanded with an additional ten indicators in the following months. A year later, I am pleased to provide this update on our performance measures and the work they represent.

While the measures in this report serve as important indicators of our progress, they do not tell the full story by themselves. I am extremely grateful to the U of A community for embracing our plan, working with it, and holding themselves accountable to it. Individuals, units, and faculties across our five campuses have taken incredible initiative: they have launched new projects, challenged themselves to meet higher standards, and led wherever they could achieve the greatest impact.

As I look back on our performance measures for 2017-18 I see not just changing numbers, but also the purposeful work of a thoughtful and committed community:

> To help us BUILD, we rolled out and supported our National Recruitment Strategy, developed an institutional EDI plan, and created new Indigenous leadership positions.

> To enable us to EXPERIENCE, we expanded our experiential learning offerings, convened the Council on Experiential Learning, and participated in the National Survey of Student Engagement.
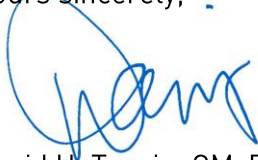
> To empower us to EXCEL, we attracted more than $500 million in research funding, secured a position in the pan-Canadian AI strategy, and established a working group to meet our professional development objectives.

> To ENGAGE our communities, we advocated alongside our peers for the Fundamental Science Review's critical recommendations, connected with our talented Indigenous alumni network, and cultivated our many local and global partnerships.

To SUSTAIN our people and work, we re-shaped our approach to sustainability scholarship, introduced a multi-year budget planning and accountability framework, and refined our new UAlberta budget model.

As you read through this report, I encourage you to consider the full breadth of activity this past year—to recognize your own efforts, and the efforts of those around you. Together with our performance measures, this work truly expresses the depth of our accomplishments.

Yours sincerely,

David H. Turpin, CM, PhD, LLD, FRSC
President and Vice-Chancellor

UNIVERSITY OF
ALBERTA

# FOR THE PUBLIC GOOD:
## Performance Measures

## November 2018

The University of Alberta respectfully acknowledges that we are located on Treaty 6 territory, traditional lands of First Nations and Métis people.

_On the Cover: "Indigenous Methodology and the Rock Grandfather," a temporary art installation by Indigenous artist Stewart Steinhauer, was displayed in the main quad of U of A's North Campus until June of 2018. Photo by Richard Siemens._

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# FOR THE PUBLIC GOOD:
## Performance Measures

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## *Introduction*

One of the first tasks following the launch of *For the Public Good* was developing equitable, meaningful, and relevant measures to monitor progress towards strategic goals. Twelve core performance measures were announced in October of 2017, with and additional ten measures published in a supplemental report in December.

This report provides annual updates on the University of Alberta's performance measures, documenting progress towards its strategic plan, *For the Public Good*, over time.

**BUILD** a diverse, inclusive community of exceptional students, faculty and staff from Alberta, Canada, and the world.

*"Through the development of strategic recruitment, retention, and renewal plans, the University of Alberta is working to build a community of exceptional students, educators, scholars, researchers, and staff."*

*– For the Public Good*

# PM1: Composition of the Student Body

## Table 1: Composition of the Student Body from Outside of Edmonton

| Proportion of Alberta Students from Outside of Edmonton | 2015-16 | 2016-17 | 2017-18 |
|---|---|---|---|
| *Undergraduate* | 31.5% | 31.3% | 31.2% |
| *Graduate* | 34.0% | 35.5% | 35.2% |
| ***Total*** | **31.8%** | **31.9%** | **31.7%** |

**Source:** Acorn Institutional Data Warehouse, U of A, Student Headcount and FLE
**Notes:** Proportion based on students registered on December 1 of the reported year. Alberta students from outside of Edmonton, have an original hometown census province of Alberta and an original hometown census division other than Edmonton. The undergraduate figures include students in career preparation programs. Excludes post-graduate medical residents, students who did not report a hometown, students who are only auditing courses, and withdrawn students.

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## Table 2: Composition of the Student Body from Outside of Alberta

| Proportion of Students from Outside Alberta | 2015-16 | 2016-17 | 2017-18 |
|---|---|---|---|
| *Undergraduate* | 27.1% | 26.7% | 26.9% |
| *Graduate* | 61.6% | 60.2% | 59.6% |
| ***Total*** | **33.9%** | **33.4%** | **33.5%** |

Source: Acorn Institutional Data Warehouse, U of A, Student Headcount and FLE
Notes: Proportion based on students registered on December 1 of the reported year.
Percent outside Alberta includes students with an original hometown province that is not Alberta.
The undergraduate figures include students in career preparation programs. Excludes post-graduate medical residents, students who did not report hometown, students who are only auditing courses, and withdrawn students.

## Table 3: Composition of the Student Body, Self-identified as Aboriginal

| Proportion of Students who have self-identified as Aboriginal | 2015-16 | 2016-17 | 2017-18 | TARGET 2024-25 |
|---|---|---|---|---|
| ***Total*** | **3.7%** | **4.0%** | **4.1%** | **6.0%** |

Source: Acorn Institutional Data Warehouse, U of A, Student Headcount and FLE
Notes: Reflects students registered on December 1 of the reported year. Includes undergraduate students with an original hometown province of Alberta who have self-identified as being of Aboriginal ancestry. Excludes post-graduate medical residents, students who are only auditing courses, and withdrawn students.

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# Proportion of International Students

## Figure 1: Proportion of International Students by Academic Career
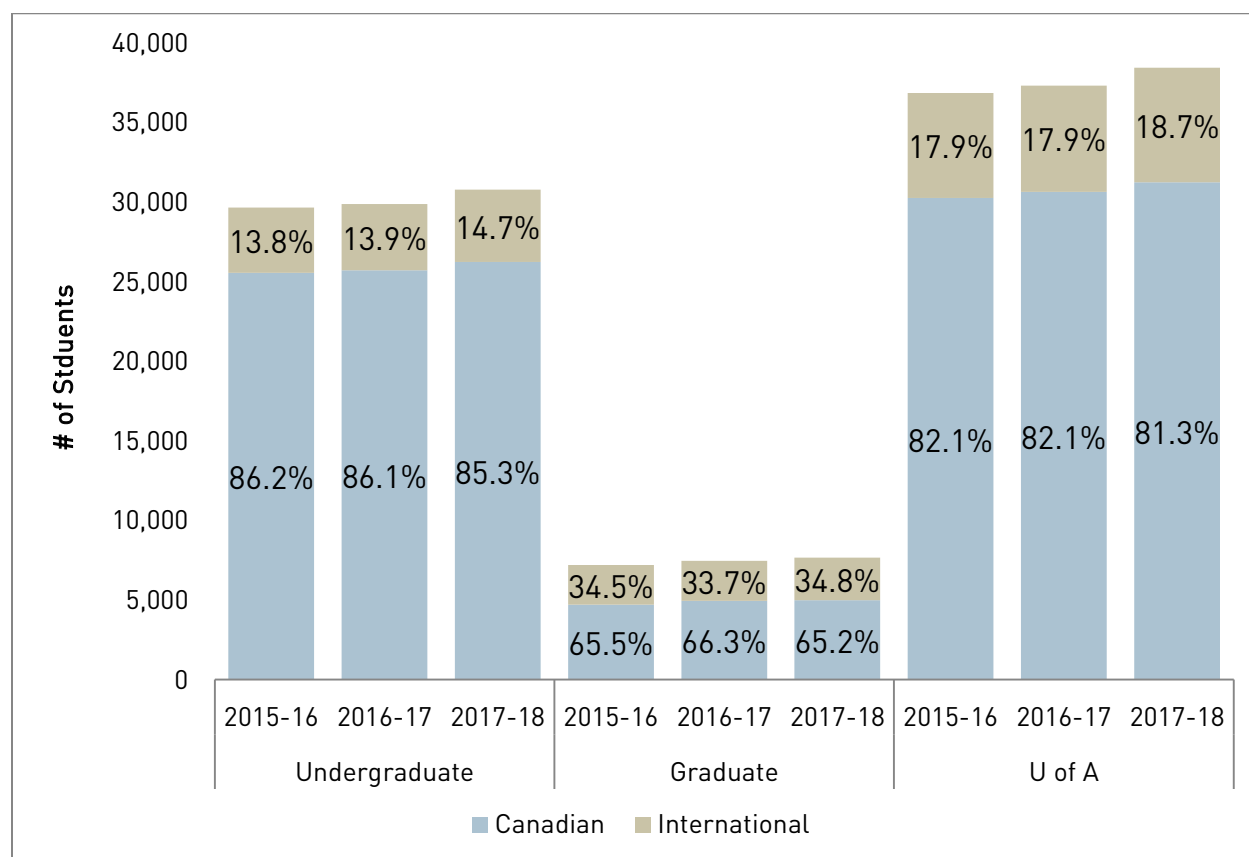


**Source:** Acorn Institutional Data Warehouse, U of A, Student Headcount and FLE
**Notes:** International Students reflect those students who are not Canadian Citizens or Permanent Residents. This information reflects the number of students who were registered on December 1 of each respective academic year. Excludes post-graduate medical education residents.

# Distribution of International Students

## Table 4: Distribution of International Students, Top 5 Countries

| Country of Citizenship | 2015-16 | 2016-17 | 2017-18 |
|---|---|---|---|
| China | 56.4% | 55.3% | 54.5% |
| India | 4.8% | 5.2% | 5.9% |
| Iran | 5.9% | 5.6% | 4.8% |
| Bangladesh | 1.9% | 2.1% | 2.5% |
| Nigeria | 2.2% | 2.4% | 2.5% |

Source: Acorn Institutional Data Warehouse, U of A
Notes: International students include those who were neither Canadian Citizens nor Permanent Residents when they were first admitted to the U of A. Country of Citizenship is as of students' admission date. The countries listed are the top five for 2017-18. This information reflects students who were registered on December 1 of each respective academic year.

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# Yield Rates, Undergraduate

## Figure 2: Yield Rates – Undergraduate Applicants and Offers
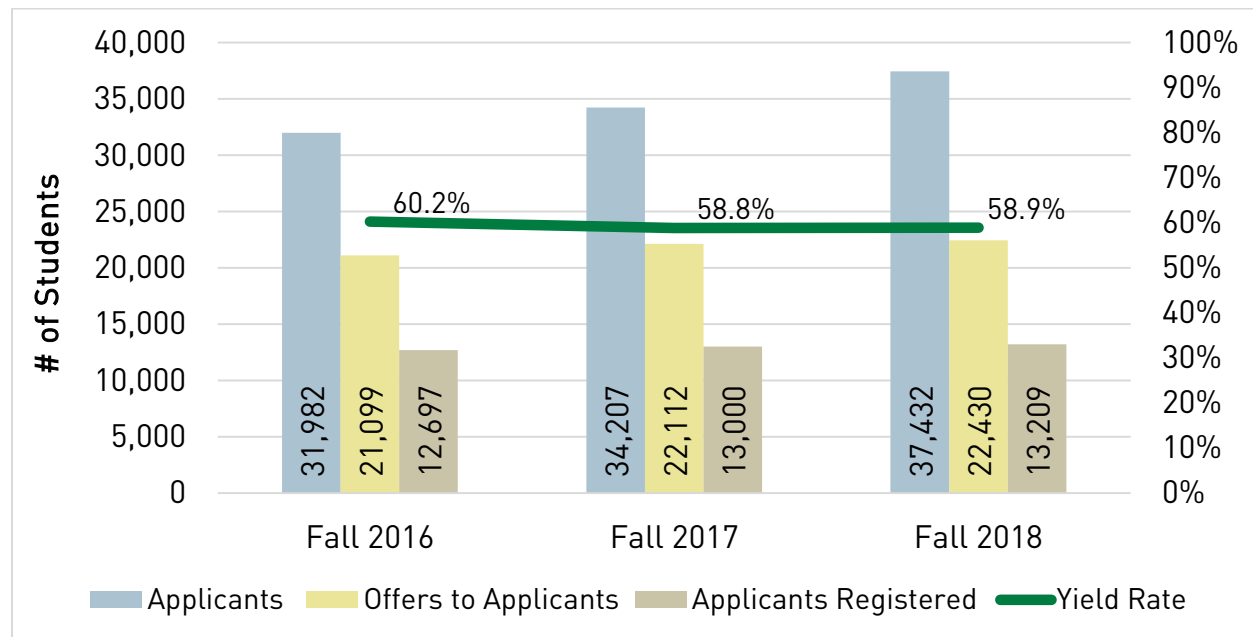


**Source:** Acorn Institutional Data Warehouse, U of A, Student Application Trend Summary

**Notes:** The data reflect distinct counts of individuals. Excludes post-graduate medical education residents. Yield rate is percentage of applicants registered to offers to applicants. Offers to applicants, includes the following: active; cancelled; declined; and revoked offers. This represents a change in methodology. Data are as of October 1 of each respective year. The official enrolment reporting for registered students comes December 1 of each respective year, at which time it would be expected to see a slight variance from the October numbers.

# PM2: Student Completion Rates

## Table 5: Student Completion Rates

| Report Year | Undergraduate | Masters | PhD |
|---|---|---|---|
| 2016-17 | 76.0% | 90.1% | 84.5% |
| 2015-16 | 76.9% | 89.8% | 82.1% |
| 2014-15 | 76.4% | 90.3% | 78.8% |

**Source:** Acorn Institutional Data Warehouse, U of A
**Notes:** Completion rates reflect the percentage of fulltime students completing a degree-granting program within a designated number of years from the time of their first registration. Undergraduate completion rates reflect students in the following: Direct Entry Programs, admitted from high school (6 years); Second Entry Programs (5 years); and Transfers from other post-secondary institutions (5 years). Graduate completion rates reflect students in the following: Masters completion rates (5 years); and PhD completion rates (9 years). Graduate completion rates have been adjusted to provide additional time for students who change programs and to allow for convocation records that don't exactly align with the program of registration; historical rates have been restated. Excludes withdrawn and part-time students.

# PM3: Proportion of the Professoriate by Rank

## Figure 3: Proportion of Professoriate by Rank
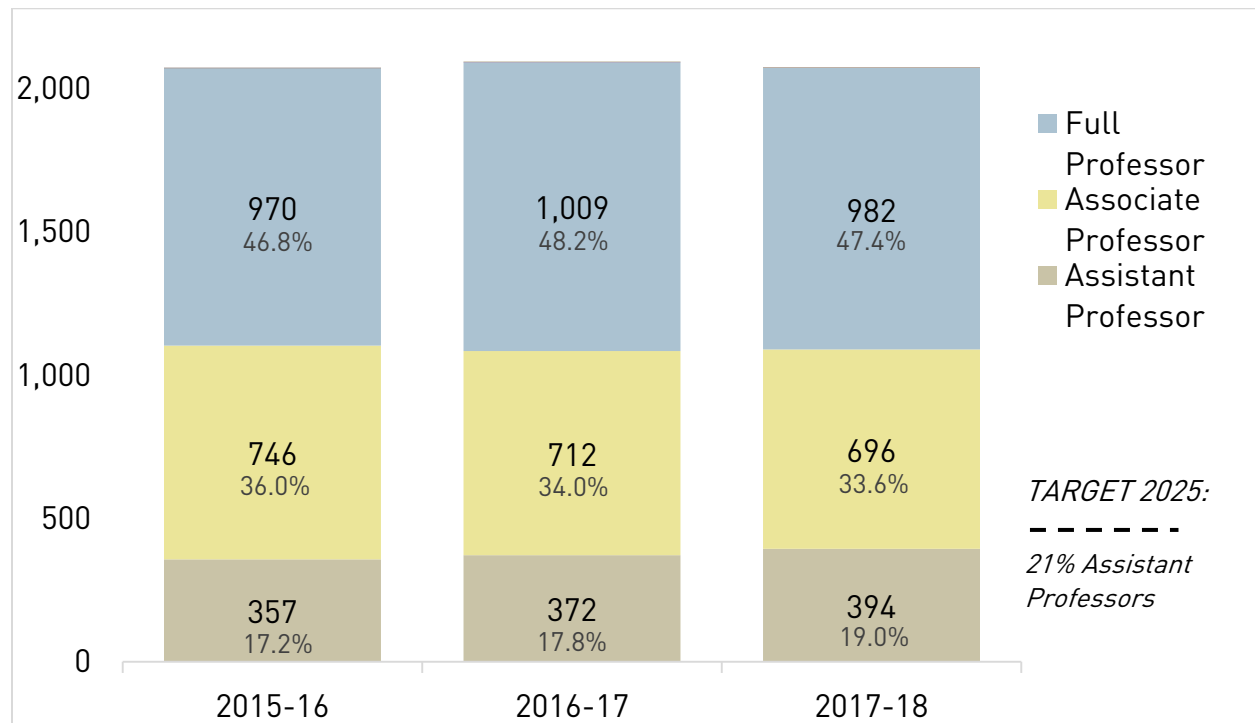


**Source:** Acorn Institutional Data Warehouse, U of A, HR Staff Headcount and FTE
**Notes:** Data are as of October 1 of each respective year. 2017-18 figures are preliminary. Faculty includes contingent faculty. These data represent teaching faculties only. Data have been adjusted from previous years due to changes following the HR upgrade process. The re-classification of employees over time causes changes in the data; for example, an increasing number of employees who were formerly counted under the Faculty category are now currently counted under Excluded Management.

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# Contract Academic Staff Utilization

## Figure 4: Contract Academic Staff: Teaching (CAST) Utilization, Headcount and FTE
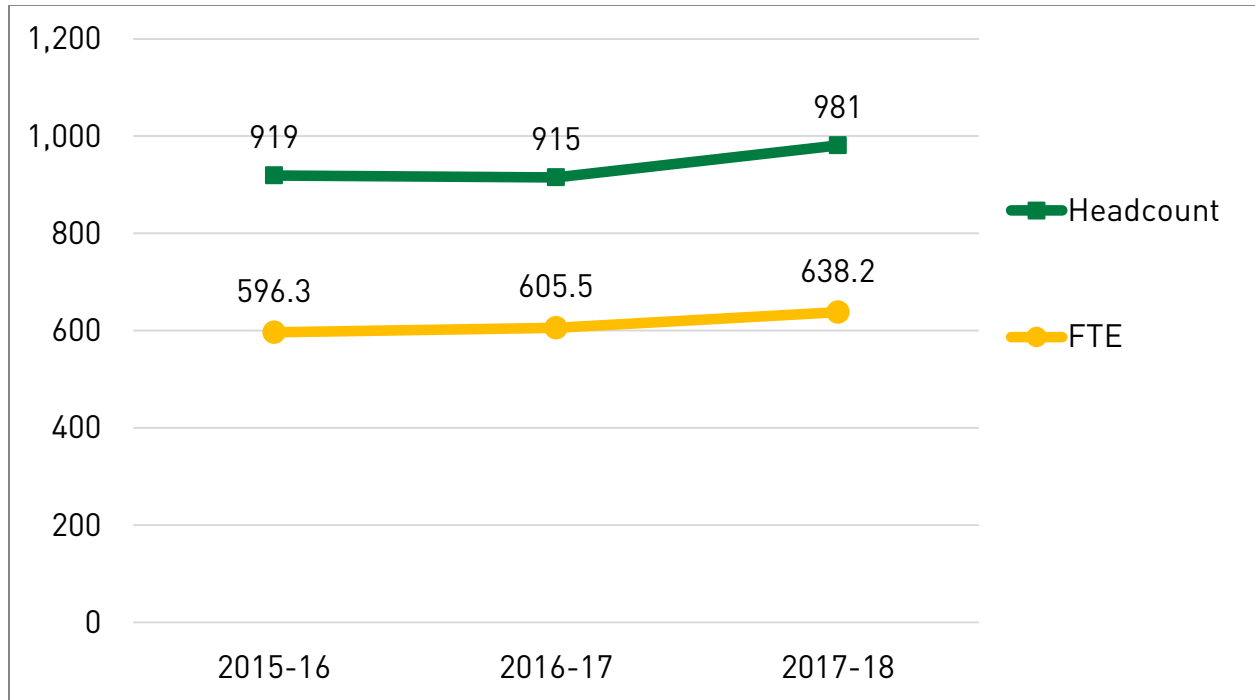


**Source:** Acorn Institutional Data Warehouse, U of A, HR Staff Headcount and FTE
**Notes:** Headcount and FTE (full-time equivalent). Data are as of October 1 of each respective year. 2017-18 figures are preliminary. These data represent teaching faculties only. Data have been adjusted from previous years due to changes following the HR upgrade process.

# PM4: Faculty Composition

The U of A continues to provide equal employment opportunities for Aboriginal people, persons with disabilities, and members of visible minorities.

The targets for both Members of Visible Minorities (20% of faculty members by 2025) and Aboriginal People (26 faculty members by 2025) have already been met, and new targets for all three groups will be developed.

**Figure 5: Faculty Composition Trend, Percentage of All Professoriate, 2015 to 2017**
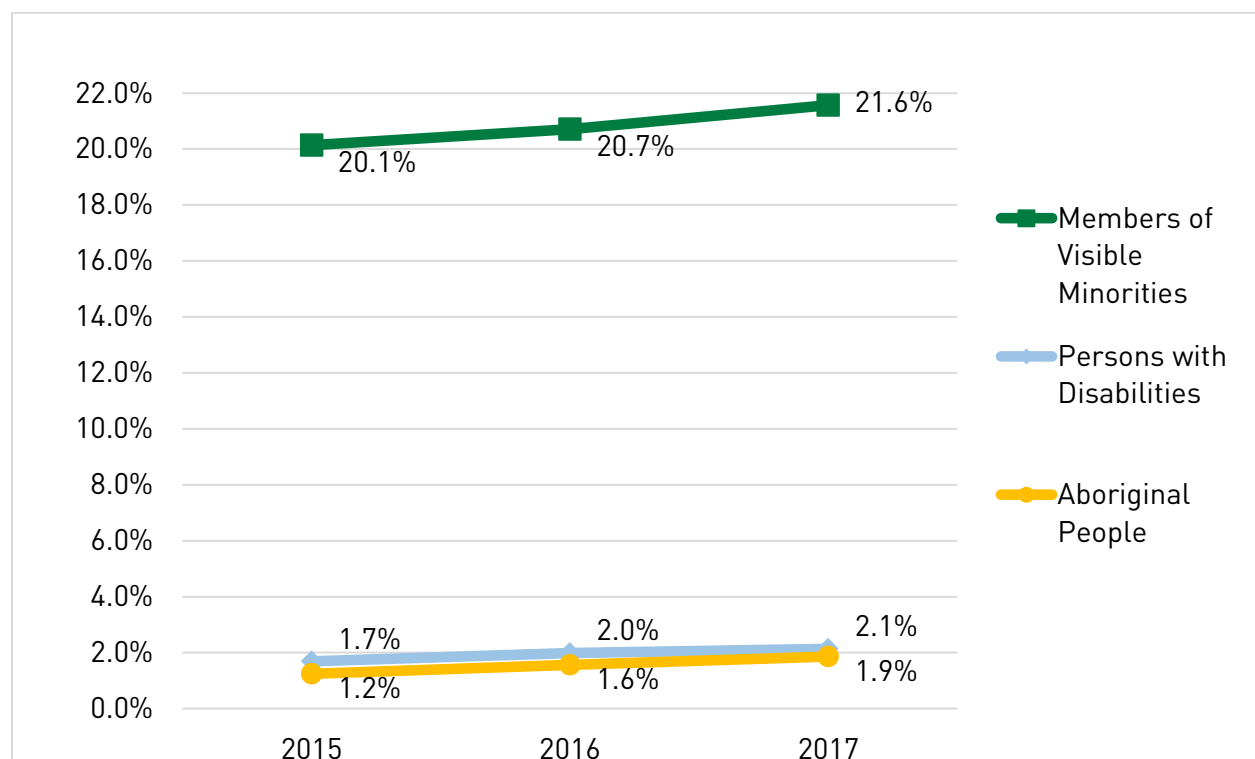


**Source:** U of A Equity Survey
**Notes:** Faculty includes full, associate and assistant professors, including those who have an administrative appointment. Proportions are based on survey respondents. Aboriginal peoples are persons who self-identify as North American Indian (Status, non-Status, and Treaty), Inuit, or Métis. Persons with disabilities are persons who have a long-term or recurring physical, mental, sensory, psychiatric or learning disability. Members of visible minorities are persons, other than Aboriginal Peoples, who are non-Caucasian in race or non-white in colour, regardless of their birthplace or citizenship. The visible minority category includes Chinese, South Asian, Black, Arab, West Asian, Filipino, Southeast Asian, Latin American, Japanese, Korean, Indigenous People from outside North America, and Persons of Mixed Origin.
Data are as of December 31, 2017.

# PM5: Proportion of Faculty and Staff who are Female

## Table 6: Proportion of Faculty and Staff who are Female

|  | 2015-16 | 2016-17 | 2017-18 | TARGET 2025 |
|---|---|---|---|---|
| Proportion of faculty who are female | 35.7% | 36.2% | 37.0% | 43.0% |
| Proportion of staff who are female | 63.1% | 63.3% | 62.8% | TBD |

**Source:** Acorn Institutional Data Warehouse, U of A, HR - Staff Headcount and FTE
**Notes:** Data are as of October 1 of each respective year. 2017-18 figures are preliminary. Faculty includes professors in teaching faculties. Staff includes the Administrative Professional Officers, Contract Academic Teaching Staff, Faculty Service Officers, Librarians, Research Academic Staff, and Support Staff (not casual). Data have been adjusted from previous years due to changes following the HR upgrade process. The re-classification of employees over time causes changes in the data; for example, an increasing number of employees who were formerly counted under the Faculty category are now currently counted under Excluded Management.

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# EXPERIENCE
**diverse and rewarding learning opportunities that inspire us, nurture our talents, expand our knowledge and skills, and enable our success**

*"Pushing beyond the conventional, students—no matter their background, age, or stage of education—experience learning as an integral part of all their activities at the University of Alberta, where they have access to and participate in a broad range of curricular experiential learning opportunities that are well integrated with program goals and enrich their academic experience."*

*– For the Public Good*

## PM6: Experiential Learning, Senior Students

Due to their positive associations with student learning and retention, certain undergraduate opportunities are designated as *high-impact*. High-Impact Practices (HIPs) share several traits: they demand considerable time and effort; facilitate learning outside of the classroom; require meaningful interactions with faculty and students; encourage collaboration with diverse others; and provide frequent and substantive feedback.

### Table 7: Experiential Learning, Senior Students, High-Impact Practices

| Participation in High-Impact Practices (HIP) | 2014 | 2017 |
|---|---|---|
| Proportion of students participating in one or more high-impact practices | 84.0% | 83.9% |
| U15 average | 79.3% | 81.4% |

**Source:** National Survey of Student Engagement (NSSE)
**Notes:** Figures include participation in a learning community, service-learning, research with faculty, participation in an internship or field experience, study abroad, and culminating senior experience. NSSE is conducted every three years.

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Co-op programs allow students to gain complementary employment experience that will assist them in making informed decisions regarding their future education, training, and careers.

## Table 8: Experiential Learning, Co-op Programs

| Participation in Co-op Programs | 2015-16 | 2016-17 | 2017-18 |
|---|---|---|---|
| Percent of students participating in a co-op program | 8.4% | 8.4% | 8.3% |

**Source:** Acorn Institutional Data Warehouse, U of A, Student Headcount and FLE
**Notes:** Participation rates reflect undergraduate students registered on December 1 of the reporting year. Excludes post-graduate medical education residents, students who are only auditing courses, and withdrawn students.

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# PM7: Student Satisfaction, Senior Students

Consistently measured and monitored student satisfaction ratings serve as a barometer for educational experience (e.g. university performance, service delivery, student life, etc.).

## Table 9: Student Satisfaction, Senior Students - Undergraduate Students

| Undergraduate | 2011 | 2014 | 2017 |
|---|---|---|---|
| How would you evaluate your entire educational experience at this institution?<br>*(Percent responding* Good *or* Excellent*)* | 78.5% | 79.2% | 82.1% |

**Source:** National Survey of Student Engagement (NSSE)

## Table 10: Student Satisfaction – Graduate Students

| Graduate | 2010 | 2013 | 2016 |
|---|---|---|---|
| How would you rate the quality of your overall experience at this university?<br>*(Percent responding* Good, Very Good *or* Excellent*)* | 87.9% | 87.3% | 87.1% |

**Source:** Canadian Graduate and Professional Student Survey (CGPSS)
**Notes:** 2013 and 2016 represent responses from students in both course-based and thesis-based graduate programs, while 2010 represents responses from students in thesis-based graduate programs only.

# PM8: Graduate Employment, Two Years Post-Graduation

Graduate employment is regarded as a key outcome indicator. This indicator is sensitive to economic factors beyond the university's control, however, and will rise or fall with Alberta's employment rate.

## Table 11: Graduate Employment, Two Years Post-Graduation

|  | 2012 | 2014 | 2016 |
|---|---|---|---|
| Percent of respondents employed | 97.0% | 96.7% | 93.9% |

**Source:** Alberta Graduate Outcomes Survey (GOS)
**Notes:** Includes degree recipients, two years post-graduation. The GOS survey instrument was slightly modified for each administration year, possibly contributing to deviations in the graduate employment rates. Results for 2018 were not yet available at the time of reporting.

**EXCEL** as individuals, and together, sustain a culture that fosters and champions distinction and distinctiveness in teaching, learning, research, and service.

*"The University of Alberta aims to sustain a learning and research culture that inspires, supports and champions high professional standards and outstanding achievements in basic and applied research and scholarship, creative activity, administration, and governance."*

*– For the Public Good*

## PM9: Sponsored Research Funding

Federal funding through the Canadian Institutes of Health Research, the Natural Sciences and Engineering Research Council, and the Social Sciences and Humanities Research Council (collectively termed Tri-Council funding) supports both basic and applied research.

In addition, the university attracts substantial research funding support from other international, regional, and private sector partners.

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## Figure 6: Sponsored Research Funding (in thousands of dollars)



| University | Year | Tri-Council | Non-Government Grants and Contracts | Foreign and Other Government | Donations, Investments and Other Income | Total |
|---|---|---|---|---|---|---|
| University of Toronto | 2016-17 | 280 | 479 | 338 | 51 | $1,148 |
| | 2015-16 | 273 | 400 | 294 | 40 | $1,008 |
| The University of British Columbia | 2016-17 | 189 | 200 | 183 | 6 | $577 |
| | 2015-16 | 181 | 188 | 157 | 7 | $532 |
| Université de Montréal | 2016-17 | 164 | 168 | 184 | 25 | $541 |
| | 2015-16 | 136 | 150 | 179 | 57 | $523 |
| McGill University | 2016-17 | 174 | 109 | 178 | 54 | $515 |
| | 2015-16 | 175 | 102 | 223 | 48 | $547 |
| University of Alberta | 2016-17 | 104 | 85 | 261 | 64 | $513 |
| | 2015-16 | 98 | 77 | 219 | 39 | $434 |
| University of Calgary | 2016-17 | 72 | 76 | 150 | 82 | $380 |
| | 2015-16 | 64 | 97 | 132 | 68 | $361 |
| McMaster University | 2016-17 | 82 | 199 | 81 | 19 | $380 |
| | 2015-16 | 92 | 165 | 81 | 17 | $355 |
| Université Laval | 2016-17 | 104 | 69 | 130 | 54 | $357 |
| | 2015-16 | 116 | 83 | 147 | 30 | $377 |
| University of Ottawa | 2016-17 | 79 | 99 | 95 | 53 | $325 |
| | 2015-16 | 79 | 101 | 96 | 51 | $326 |
| The University of Western Ontario | 2016-17 | 67 | 99 | 59 | 24 | $250 |
| | 2015-16 | 65 | 89 | 56 | 25 | $235 |
| Queen's University | 2016-17 | 55 | 77 | 73 | 3 | $207 |
| | 2015-16 | 52 | 37 | 59 | 4 | $152 |
| University of Waterloo | 2016-17 | 65 | 51 | 74 | 0 | $189 |
| | 2015-16 | 57 | 34 | 76 | 0 | $166 |
| University of Manitoba | 2016-17 | 43 | 83 | 50 | 12 | $187 |
| | 2015-16 | 40 | 81 | 67 | 2 | $191 |
| University of Saskatchewan | 2016-17 | 60 | 36 | 78 | 12 | $186 |
| | 2015-16 | 41 | 68 | 81 | 26 | $216 |
| Dalhousie University | 2016-17 | 54 | 42 | 46 | 8 | $150 |
| | 2015-16 | 49 | 36 | 45 | 7 | $136 |

Legend:
- Tri-Council
- Non-Government Grants and Contracts
- Foreign and Other Government
- Donations, Investments and Other Income

**Source:** Canadian Association of University Business Officers (CAUBO): Financial Information of Universities and Colleges, Report 3.1
**Notes:** Income from Tri-Council includes the following: Social Sciences and Humanities Research Council (SSHRC); Natural Sciences and Engineering Research Council (NSERC); and Canadian Institutes of Health Research (CIHR). Other Government income reflects income from all government departments and agencies; grants and contracts (less Tri-Council support), and includes foreign government income. Donations, Investment and Other income and Non-Government Grants and Contracts, are reported in each respective category on the CAUBO report. Université de Montréal includes HEC Montréal and École Polytechnique de Montréal. Data are the most recent available.

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# PM 10: Student Perceptions of Teaching, Senior Students

Effective teaching practices are an indicator of student engagement. Students learn first-hand how experts think about and solve problems by interacting with faculty members.

## Table 12: Student Perceptions of Teaching, Senior Students

|  | NSSE 2014 Mean score | NSSE 2017 Mean score |
|---|---|---|
| Effective teaching practices *(Students report receiving clear course goals and requirements; organized course sessions; use of examples/illustrations; providing feedback on work in progress; providing feedback on completed work)* | 36.6 | 35.8 |
| U15 average | 34.8 | 34.3 |

**Source:** National Survey of Student Engagement (NSSE)
**Notes:** Each indicator is scored on a 60-point scale. To produce an indicator score, the response set for each item is converted to a 60-point scale (i.e. Never = 0; Sometimes = 20; Often = 40; Very often = 60), and the rescaled items are averaged. Thus a score of zero means a student responded at the bottom of the scale for every item, while a score of 60 indicates a student responded at the top of the scale for every item.

## *Undergraduate First-Year Retention*

Over the course of a degree, the highest proportion of student withdrawals generally occur between the first and second years. As such, first-year retention is an important indicator of student success.

## Table 13: Undergraduate First Year Retention

| 2015-16 | 2016-17 | 2017-18 |
|---|---|---|
| 87.1% | 88.5% | 89.8% |

**Source:** Acorn Institutional Data Warehouse, U of A, Student Retention Rates
**Notes:** Based on a cohort of undergraduate students registered in year 1 of their program in the Fall Term of each respective year. The students in the cohort are identified as being retained if they were registered at the U of A, in any program or faculty, in the subsequent Fall Term.

# *Time to Completion*

## Figure 7: Time to Completion
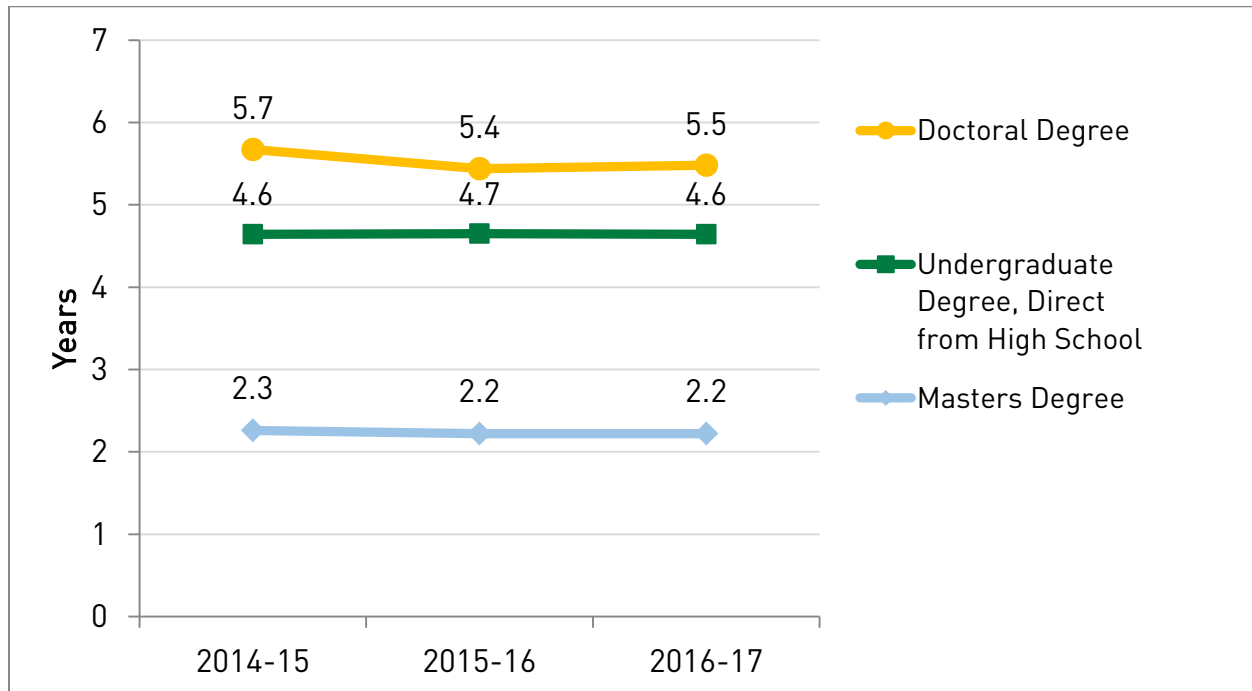


**Source:** Acorn Institutional Data Warehouse, U of A, Student Completion Dashboard
**Notes:** Time to completion is calculated in number of years for full-time students. The average is based on students who complete within the designated number of years, as per the Completion Rates measure.
The reporting year is the end of the time period in which student activity is tracked for on-time completion. Historical graduate time to completion times have been restated due to an adjustment regarding milestone completion date methodology.

# PM11: Major Research and Teaching Awards

The 3M National Teaching Fellowship awards excellence in educational leadership and teaching at the university and college level in Canada. 3M Fellowships demonstrate proficiency in delivering exceptional teaching and learning opportunities.

## Table 14: Major Teaching Awards - 3M National Teaching Fellows, Last Ten Years (2009-2018)

| Rank | University | 3M Fellows |
|------|-----------|------------|
| 1 | University of Alberta | 12 |
| 2 | University of Toronto | 8 |
| 3 | McMaster University | 6 |
| 3 | The University of British Columbia | 6 |
| 5 | University of Calgary | 4 |
| 6 | Queen's University | 3 |
| 6 | University of Saskatchewan | 3 |
| 6 | Western University | 3 |
| 9 | University of Waterloo | 2 |
| 10 | Dalhousie University | 1 |
| 10 | McGill University | 1 |
| 10 | University of Ottawa | 1 |

**Source:** 3M award counts from Society of Teaching and Learning in Higher Education
**Notes:** Data are the most recent available.

The Canada Research Chairs Program invests approximately $265 million per year to attract and retain some of the world's most accomplished and promising minds[1]. Chair holders aim to achieve research excellence in engineering and the natural sciences, health sciences, humanities, and social sciences.

## Table 15: Major Research Awards Canada Research Chairs (CRCs)

| Rank | U15 University | CRCs |
|------|----------------|------|
| 1 | University of Toronto | 231 |
| 2 | The University of British Columbia | 149 |
| 3 | McGill University | 131 |
| 4 | Université Montréal | 110 |
| **5** | **University of Alberta** | **77** |
| 6 | Université Laval | 68 |
| 7 | McMaster University | 66 |
| 8 | University of Waterloo | 59 |
| 9 | University of Ottawa | 53 |
| 10 | University of Calgary | 50 |
| 11 | Queen's University | 41 |
| 12 | The University of Western Ontario | 40 |
| 13 | Dalhousie University | 32 |
| 13 | University of Manitoba | 32 |
| 15 | University of Saskatchewan | 23 |

**Source:** Social Sciences and Humanities Research Council of Canada
**Notes:** Includes active CRCs as of December 31, 2017. Université de Montréal includes École Polytechnique de Montréal and HEC Montréal (a French-language management education and research university).

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[1] Source: http://www.chairs-chaires.gc.ca, accessed November 8, 2017.

## *University Rankings*

The U of A participates in both the QS and THE international university rankings. These rankings fluctuate, and large single-year swings are common.

### Table 16: Overall Ranking, THE and QS

| Year | THE | QS |
|------|-----|-----|
| 2018 | 132 | 109 |
| 2017 | 119 | 90 |
| 2016 | 107 | 94 |

**Source:** Times Higher Education (THE) World University Rankings. Quacquarelli Symonds (QS) World University Rankings.

**ENGAGE** communities across our campuses, city and region, province, nation and the world to create reciprocal, mutually beneficial learning experiences, research projects, partnerships, and collaborations.

*"We engage across disciplines, campuses, faculties, and units to create interdisciplinary learning experiences for our students that prepare them to face the complex nature of today's challenges and workplaces. We continue to build and deepen mutually beneficial and reciprocal partnerships with local, provincial, national, and international communities, agencies, industries, businesses, and organizations."*

*– For the Public Good*

## PM12: Student-Reported Citizenship Development, Senior Students

### Table 17: Student-reported Citizenship Development, Senior Students

|  | 2014 | 2017 |
|---|---|---|
| Experience at U of A has contributed to citizenship | 81.7% | 84.9% |
| U15 Average | 81.4% | 83.7% |

**Source:** National Survey of Student Engagement (NSSE)
**Notes:** Includes senior students who answered *Some*, *Quite a bit* or *Very much*, to the following question: "How much has your experience at this institution contributed to your knowledge, skills, and personal development in being an informed and active citizen?"

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## *Faculty of Extension Enrolments*

### Table 18: Extension Enrolments

| Academic Year | Courses Taught | Class Sections Taught | Enrolments | Student Headcount |
|---|---|---|---|---|
| 2017-18 | 247 | 631 | 9,462 | 4,957 |
| 2016-17 | 262 | 664 | 9,878 | 5,127 |
| 2015-16 | 283 | 784 | 11,773 | 5,719 |

**Source:** Campus Solutions, U of A
**Notes:** Academic Year begins with Spring Term and ends with Winter Term. Courses with historical transfer credit are excluded from this data. Select courses owned by Public Health and Medicine, are also excluded. Data are as of November 6, 2018.

## *Alumni Engagement*

Engaged alumni, volunteers, students and friends help to enrich the U of A community.

### Table 19: Alumni Engagement[2]

| Connections with Alumni and Students | Engagement Event Participants | Volunteers Engaged |
|---|---|---|
| 879,009 | 50,975 | 1,845 (9,456 hours) |

**Source:** Office of Advancement
**Notes:** Data are from Fiscal Year 2018.

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[2] Alumni Programming data are from the annual dashboard of metrics in Alumni Relations. It is information for Fiscal Year 2018. Connection with Alumni Students reflects all connections facilitated through special events, volunteerism, website hits and social media activity. Engagement Event Participants includes all registrants, (not students) in alumni events. Volunteers Engaged is the number of volunteers involved in the past year and an estimate of their volunteer hours contributed.

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# SUSTAIN our people, our work, and the environment by attracting and stewarding the resources we need to deliver excellence to the benefit of all Albertans.

*"We sustain our people by promoting health, wellness, and safety as a defining feature of the University of Alberta's learning and working experience—by delivering proactive, relevant, responsive and accessible services and initiatives and by maintaining and enhancing the university's essential teaching, learning, and research infrastructure."*

*– For the Public Good*

## Financial Measures

Financial endowments are an important measure of a university's wealth. They are highly-valued because of their enormous potential to provide return on investments.

### Table 20: Financial Measures (in thousands of dollars)

| Year | Endowment Net Assets ($ thousands) | Accumulated Surplus (Deficit) from Operations ($ thousands) | Primary Reserve Ratio (Days) | Viability Ratio |
|---|---|---|---|---|
| 2018 | 1,379,534 | 74,160 | 60 | 0.89 |
| 2017 | 1,304,254 | (16,066) | 46 | 0.94 |
| 2016 | 1,149,716 | (23,782) | 48 | 0.95 |

Source: Financial Services, Audited Financial Statements
Definitions: Primary Reserve Ratio—compares expendable net assets to total expenses and indicates the number of days an institution could function using only those resources that can be expended without restriction (i.e. expendable net assets over total expenses, expressed in days).
Viability Ratio—provides an indication of expendable net assets available to settle long-term obligations (i.e. expendable net assets over long-term debt).
Notes: Where financial statements have been restated, the amounts shown are based on the restated amounts. For the ratio calculations, total Employee Future Benefit liabilities have been added back to arrive at expendable net assets.

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General Faculties Council
Open Session Minutes

Monday, November 26, 2018
Council Chamber, 2-100 University Hall (UNH)
2:00 PM - 4:00 PM

**ATTENDEES:**
**Statutory Members:**
*Ex-Officio:*
David Turpin, Chair
Dale Askey
Deborah Burshtyn
Katy Campbell
Lesley Cormack
André Costopoulos
Greta Cummings
Steven Dew
Gitta Kulczycki
Dennis Kunimoto
Frank Marsiglio
Kerry Mummery
Norman Neumann
(delegate)
Melissa Padfield
Matthias Ruth
Andrew Sharman
Jacqui Tam
Jennifer Tupper
*Elected Faculty:*
W. Ted Allison
Jeff Birchall
Piet Defraeye
Ryan Dunch
Tarek El-Bialy
Dean Eurich
Mary Forhan
Bill Foster
Michael Frishkopf
Lesley Harrington
Pierre Lemelin
Leijun Li
Pirkko Markula
Rob McMahon
Lynn McMullen
Sean McMurtry
Al Meldrum
Sue-Ann Mok
Roger Moore
Shannon O'Byrne

Christina Rinaldi
Carolyn Sale
Richard Schulz
John Seubert
Carrie Smith
Kim Solez
Susan Sommerfeldt
Jorge Sousa
Lisa Stein
Eleni Stroulia
Bruce Sutherland
Amy Tse
Benjamin Tucker
Dilini Vethanayagam
Akiko Watanabe
Jonathan White
Lynne Wiltse
Ian Winship
*Students:*
Masoud Aliramezani
Sasha van der Klein
**Appointed Members:**
Joel Agarwal
Bishoi Aziz
Akanksha Bhatnagar
Katherine Binhammer
Amlan Bose
Andre Bourgeois
Tiffany Bruce
Meijun Chen
Melinda Chisholm
Natalie Diether
Shannon Erichsen
Shawn Flynn
Gautam Gaur
Kevin Kane
Maryam Kebbe
Hyejun Kim
Brandi Kobes
Janice Kung
Braulio Marfil-Garza
Mpoe Mogale
Carmel Montgomery

Ivy Porter
Sabitha Rajaruban
Shuaa Rizvi
Nathan Sunday
Andrei Tabirca
Amanda Wakaruk
Rachel Wang
Janet Williamson
Donna Wilson
Allan Yilun Wu
Ding Xu
Janet Yao

**REGRETS:**
Jason Acker
Ayman Adwan
Miray Aizouki
Saleema Allana
Erin Allin
Chris Andersen
Vahid Ayan
Matthew Barnett
Allen Berger
Robert Bilak
Stanford Blade
Abigail Bridarolli
Yiming Chen
David Chung
David Cooper
Julia Craig
Neal Davies
Victoria deJong
Joseph Doucet
Duncan Elliott
Nadir Erbilgin
Levi Flaman
Fraser Forbes
Adam Gaudry
Tahra Haddouche
Robert Haennel
Osman Hojanepesov
Ryan Holowaty
Mariam Hosseiny

Albert Hu
Basil Hubbard
John Hussein
Taher Jafferjee
Shanthi Johnson
Reed Larsen
Eva Lemaire
Cindy Liang
Mark Loewen
Susanne Luhmann
Frank Marsiglio
Laurie Mereu
Pierre-Yves Mocquais
Vivian Mushahwar
Syed Mustafa
Alice Nakamura
Anthony Nguyen
Paul Paton
Dustin Sandler
Georg Schmolzer
Marc Secanell
Kelly Spencer
Luke Statt
Brent Swallow
Erin Wright

**Staff:**
Meg Brolley, GFC
Secretary
Marion Haggarty-France,
University Secretary
Heather Richholt, Scribe

**Observers:**
Katherine Belcourt
Langston Brasen
Nathan Fung
Tibetha Kemble
Adam Lachaz
Zhihong Pan
Norma Rodenberg
Fred Tappendum
Anthony Thai

**OPENING SESSION**

1.      Approval of the Agenda

Materials before members are contained in the official meeting file.

Motion: Dew/Agarwal

| THAT General Faculties Council approve the Agenda. | |
|---|---|
| | **CARRIED** |

2.      Approval of the Minutes of October 22, 2018

Materials before members are contained in the official meeting file.

Motion: Stroulia/Dunch

| THAT General Faculties Council approve the Minutes of October 22, 2018. | |
|---|---|
| | **CARRIED** |

3.      Report from the President

The Chair noted with sadness the passing of Richard Fedorak, Dean of the Faculty of Medicine and Dentistry and spoke about Dean Fedorak's significant contributions to medicine, teaching and research, and to the university's Signature Area of Precision Health.

The Chair acknowledged that the Office of the Dean of Students was dealing with an increased number of significant mental health issues on campus. The Dean of Students, André Costopoulos, spoke about student metal health and suicide and noted the supports available for students on campus.

The Chair updated members on the university's response to the *Conflicts of Interest Amendment Act* and noted that final documents related to this would come back to GFC and the Board for approval in the new year.

The Chair mentioned *Bill 19: An Act to Improve the Affordability and Accessibility of Post-Secondary Education* and that it would affect tuition and fees starting in 2020/2021. He noted that more details about regulations would be forthcoming.

The Chair noted that with the changes to provincial labour relations legislation, it was important that GFC discuss how to make necessary decisions and ensure appropriate delegations were in place should a disruption occur and GFC could not meet. Discussions about this issue would take place in future meetings.

The Chair asked Eleni Stroulia, Chair of the Executive Transition Committee to provide GFC with an update on the implementation of the recommendations from the 2017 Report of the *ad hoc* Committee on Academic Governance. Dr Stroulia reported on the status of standing committee terms of reference and noted that a discussion on the Council on Student Affairs (COSA) was on the agenda for this meeting. She noted that the curation of delegations of authority may not be completed by the April deadline and that a revised timeline would be forthcoming.

The Chair gave an update on the proposal from the Faculty of Pharmacy and Pharmaceutical Sciences for an exemption to fall reading week. He noted that the original motion for approval of the Academic Schedule was flawed and that there were outstanding questions around student consultation. He informed members that the Academic Schedule would return to the GFC Executive Committee in December and that GFC would be updated accordingly.

**ACTION ITEMS**

4.  New Members of GFC

Materials before members are contained in the official meeting file.

*Purpose of the Proposal*: To appoint, re-appoint or receive new members of General Faculties Council.

Motion: Dew/Sharman

---

MOTION I: TO APPOINT/RE-APPOINT:

The following undergraduate student representatives at-large to serve on GFC for terms commencing November 26, 2018 and ending April 30, 2019:
- Melinda Chisholm – Business
- Ayman Adwan – Engineering
- Anthony Nguyen – Nursing
- Ivy Porter – Science

**CARRIED**

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## EARLY CONSULTATION

5.  Council on Student Affairs (COSA) - Terms of Reference

Materials before members are contained in the official meeting file.

*Presenter(s)*: Tammy Hopper, Vice-Provost (Programs) and Chair, COSA Working Group; Akanksha Bhatnagar, Students' Union Vice-President (Academic); Masoud Aliramezani, Graduate Students' Association Vice-President (Academic)

*Discussion*:
The Chair noted that this item had been deferred from the September GFC meeting.

Dr Hopper noted that the *ad hoc* Committee Report recommended that COSA be brought under the university governance umbrella and that a working group be formed to revise the COSA terms of reference. She pointed to the draft terms of reference and the questions for discussion included in the meeting materials and asked for input from members.

During the discussion, members expressed several comments and questions, including but not limited to: graduate student representation on the Aboriginal Student Council; the importance of the Indigenous student voice; the fact that COSA was originally established at a time when very few students sat on GFC; the number of students currently serving on GFC; the Principles for GFC Standing Committee Composition including non-voting representatives; the lack of delegated authority for COSA; how items and issues would be brought to COSA; the weight of influence that recommendations and advice from COSA would carry; the importance of outcomes; and coordination with the Dean of Students' Advisory Committee.

## ACTION ITEMS

6.  Proposed Changes to the Doctor of Medicine (MD) Program Admissions for Aboriginal Applicants, Faculty of Medicine and Dentistry

Materials before members are contained in the official meeting file.

*Presenter(s)*: Dennis Kunimoto, Interim Dean, Faculty of Medicine and Dentistry; Shirley Schipper, Vice-Dean, Education, Faculty of Medicine and Dentistry; Tammy Hopper, Vice-Provost (Programs) and Chair, GFC Academic Standards Committee

*Purpose of the Proposal*: The purpose of this proposal is to remove the limit of five students admitted to the MD program through the Indigenous admissions selection process and allow for all eligible applicants through this process to be recommended for admission to the MD Admissions Committee. In light of the underrepresentation of Indigenous peoples in health professions, and the University's commitment to a respectful, meaningful, and sustainable response to the Truth and Reconciliation Calls to Action, it is recommended that the changes take effect upon approval.

*Discussion*:
The Chair noted that both the GFC Academic Standards Committee (ASC) and the GFC Executive Committee (EXEC) recommend approval of this item. He noted that the EXEC was unanimously in support of this proposal.

Dr Hopper indicated that ASC strongly supported the proposal and chose not to exercise its delegated authority over Faculty specific admissions criteria it felt that the proposal was of broad relevance and strategic importance and should therefore be considered by full GFC. She also highlighted *For the Public Good's* objectives to respond to the Calls to Action of the Truth and Reconciliation Commission of Canada.

Dean Kunimoto explained that the Faculty needed to do more to increase the number of Indigenous health professionals and that this would start with admission and then follow through with supports for students in the program.

Dr Schipper noted that this proposal was part of a larger strategy across all of the Faculty's undergraduate programs and that the Faculty Council was in full support of this strategy.

Members asked about the total number of seats in the program, and whether or not there were 'return of service' requirements for those admitted through the Indigenous Admissions process.

Motion: Kunimoto/McMurtry

THAT General Faculties Council approve the proposed changes to the Doctor of Medicine (MD) Program Admissions for Aboriginal Applicants, as proposed by the Faculty of Medicine and Dentistry, as recommended by the GFC Academic Standards Committee and the GFC Executive Committee, and as set forth in Attachment 1, to take effect as soon as possible.

**CARRIED**

7. Proposed Revisions to Standing Committee Terms of Reference - GFC University Teaching Awards Committee (UTAC)

Materials before members are contained in the official meeting file.

*Presenter(s)*: Pierre Lemelin, Chair, GFC University Teaching Awards Committee

*Purpose of the Proposal*: The proposal is before the committee to approve the revised terms of reference for the GFC University Teaching Awards Committee.

*Discussion*:
Dr Lemelin outlined the changes in the proposed terms of reference and spoke to the updated adjudication guidelines provided for information. He noted that the committee had extensive discussion on composition, striving to ensure a balance between adhering to the Principles of Committee Composition and maintaining a broad representation from the university community. In response to comments made at the previous GFC meeting, the committee recommended that GFC seek Indigenous members to serve on all of its committees.

Motion: Lemelin/Dunch

THAT General Faculties Council approve the proposed changes to the GFC University Teaching Awards Committee Terms of Reference as recommended by the GFC University Teaching Awards Committee and the

| GFC Executive Committee as set forth in Attachment 1, to take effect May 1, 2019 | |
|---|---|
| | **CARRIED** |

## DISCUSSION ITEMS

8.    Digital Scholarship Centre

Materials before members are contained in the official meeting file.

*Presenter(s)*: Dale Askey, Vice-Provost (Learning Services) & Chief Librarian

*Discussion*:
Dr Askey provided an overview of the newly approved Digital Scholarship Centre and the union of space, technology, and people. He noted that the collaborative space had a projected soft launch opening of February 2019 with a formal opening in the fall.

Members discussed the pace of technological updates and the potential for the space to be adjusted with the needs of the community; the construction and staffing costs and needs of the new space; and the opportunities for study and collaboration.

9.    Update on Tri-Council Draft Data Management Policy

Materials before members are contained in the official meeting file.

*Presenter(s)*: Steven Dew, Provost and Vice-President (Academic); Matthias Ruth, Vice-President (Research)

*Discussion*:
Dr Ruth outlined the university's response to the Tri-Council Draft Data Management Policy. He noted a request for clarification on the responsibilities that would fall to students, staff, and the institution regarding data stewardship, quality control, monitoring and repurposing of data, and training and education.

Dr Dew noted that this policy would have enormous impacts at the individual and the institutional level.

The Chair asked members to imagine the amount of valuable data that exists but is currently impossible to access. He noted that the opportunities for our nation and our institution are immense but that it will take a lot of work for us to get there.

Members discussed the explosion of digitization of information in the humanities, and how to balance the power and responsibility of information.

10.    New Budget Model

Materials before members are contained in the official meeting file.

*Presenter(s)*: Steven Dew, Provost and Vice-President (Academic); Gitta Kulczycki, Vice-President (Finance & Administration)

*Discussion*:
Dr Dew gave a presentation on the new budget model and explained that the model is meant to provide clarity on the mechanisms and processes for the assignment of revenues and responsibility for costs across the university's Faculties and administrative units.

The presentation listed the benefits of the new model:
- Bring transparency to the allocation of resources and to decision-making.
- Help us to align spending with strategic academic priorities.
- Create a culture of long-term academic planning.

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- Enable all of us to make better decisions.

The Chair noted that implementation of this model would be a multi-year process and that there would be several opportunities for further discussion.

During the discussion members expressed several comments and questions, including but not limited to: the method for determining the percentages for teaching and research; where tuition income for service courses would be directed; where to direct specific feedback; the importance of consultation and transparency on this issue; the size of administrative costs and the UniForum benchmarking project; the fiduciary responsibility of the Board of Governors; consideration of clinical teaching and research; and the importance of efficient administration across the Faculties.

Dr Dew noted that further information and FAQs were available online at: https://www.ualberta.ca/strategic-plan/institutional-priorities/ualberta-budget-model

11.    Board/GFC/Senate Summit

There were no documents.

*Presenter(s)*: David Turpin, President and Vice-Chancellor

*Discussion*:
The Chair reminded members that the Board/GFC/Senate Summit was scheduled for January 25, 2019 and reported that the topic would be public perceptions of universities in an election year. He noted that Bruce Anderson would be speaking and that more information would be sent out in January.

12.    Question Period

Materials before members are contained in the official meeting file.

12.1 Question from GFC Elected Faculty Member Dilini Vethanayagam regarding the university's use of Gmail
*and*
12.1 Response from Brian Stewart, Deputy CIO, on behalf of IST

12.2 Question from GFC Elected Faculty Member Carolyn Sale regarding fair and equitable decision-making for the university's signature areas
*and*
12.2 Response from David Turpin, President and Vice-Chancellor

*Discussion*:
During the discussion a member commented on ensuring that decision-making regarding Signature Area proposals is fair and equitable and asked that the guidelines for decision-making be made public.

**INFORMATION REPORTS**

13.    Report of the GFC Executive Committee

Materials before members are contained in the official meeting file.

14.    Report of the GFC Academic Planning Committee

Materials before members are contained in the official meeting file.

15.    Report of the GFC Academic Standards Committee

Materials before members are contained in the official meeting file.

16.   GFC Nominations and Elections

Materials before members are contained in the official meeting file.

17.   Information Items

Materials before members are contained in the official meeting file.

    A. General Appeals Committee (GAC) Annual Report to General Faculties Council (July 1, 2016 - June 30, 2017)

    B. 2017/18 Annual Report of Student Conduct Responses, Dean of Students' Portfolio

    C. Annual Report of the Appeals and Compliance Officer (2017-2018)

    D. Annual Report on Undergraduate Financial Support

18.   Information Forwarded to GFC Members Between Meetings

There were no items.

**CLOSING SESSION**

19.   Adjournment

The Chair adjourned the meeting at 4:00 p.m.

<u>New Members of GFC</u>

**MOTION I: TO APPOINT/REAPPOINT**  *[This motion may be proposed only by statutory members of GFC – VPs, Deans, statutory students or elected faculty members]:*

The following academic staff member nominated by the Association of Academic Staff – University of Alberta (AASUA) to the Board of Governors and appointed to GFC for a term that is concurrent with their term on the Board (November 26, 2018 to November 25, 2021):

Donna Wilson                                    Faculty of Nursing

Item No. 5

### Governance Executive Summary
### Action Item

| Agenda Title | Proposal from the Faculty of Arts to terminate the Bachelor of Arts and Bachelor of Arts (Honors) in Chinese Studies and Japanese Studies, the Bachelor of Arts in Chinese and Japanese, and the minors in Chinese and Japanese |
|---|---|

**Motion**

| THAT General Faculties Council recommend that the Board of Governors approve the termination of the Bachelor of Arts and Bachelor of Arts (Honors) in Chinese Studies and Japanese Studies, the Bachelor of Arts in Chinese and Japanese, and the minors in Chinese and Japanese, as recommended by the GFC Executive Committee and the GFC Academic Planning Committee, as submitted by the Faculty of Arts, and as set forth in Attachment 1, to be effective July 2019. |
|---|

**Item**

| Action Requested | ☐ Approval   ☒ Recommendation |
|---|---|
| Proposed by | Lesley Cormack, Dean, Faculty of Arts |
| Presenter(s) | Rebecca Nagel, Associate Dean (Student Programs), Faculty of Arts |

**Details**

| Responsibility | Provost and Vice-President (Academic) |
|---|---|
| The Purpose of the Proposal is (*please be specific*) | The proposal is before the committee to terminate the program. Admission and transfer into the program has been suspended since 2015. |
| Executive Summary (*outline the specific item – and remember your audience*) | No impact on students is expected due to the termination of these programs. The two students currently enrolled are in their fourth year and expected to graduate in Spring 2019. Courses in these areas continue to be offered.<br><br>Admission and transfer to the separate programs in Chinese and Japanese were suspended effective Fall 2015 at the request of the Department of East Asian Studies. The Department introduced a unified East Asian Studies curriculum to replace the separate major/minors in Chinese, Japanese, and East Asian Studies. The Department made this decision in the interests of simplicity and flexibility, to broaden student choices in the composition of their major, and to facilitate the progress of students through the program.<br><br>Upon final approval, the Calendar and the Faculty website will be updated. |
| Supplementary Notes and context | After final approval at the university level, the proposal will be submitted to government for approval. |

**Engagement and Routing** (Include meeting dates)

| Consultation and Stakeholder Participation (parties who have seen the proposal and in what capacity)<br><br><For information on the | *Those who are actively **participating**:*<br>• none |
|---|---|
| | *Those who have been **consulted**:*<br>• Vice-Dean, Faculty of Arts<br>• Portfolio Initiatives Manager, Office of the Provost and Vice-President (Academic) |

| | |
|---|---|
| protocol see the [Governance Resources section Student Participation Protocol](#)> | *Those who have been **informed**:*<br>• Arts Faculty Council |
| Approval Route (Governance) (including meeting dates) | Arts Academic Affairs Committee (March 28, 2018)<br>Arts Executive Committee (November 8, 2018)<br>Arts Faculty Council (November 22, 2018)<br>GFC Academic Planning Committee (December 12, 2018)<br>GFC Executive Committee (January 14, 2019)<br>General Faculties Council (January 28, 2019)<br>Board Learning and Discovery Committee (February 15, 2019)<br>Board of Governors (March 15, 2019) |

**Strategic Alignment**

| | | |
|---|---|---|
| Alignment with *For the Public Good* | GOAL: SUSTAIN our people, our work, and the environment by attracting and stewarding the resources we need to deliver excellence to the benefit of all.<br><br>Objective 21: Encourage continuous improvement in administrative, governance, planning, and stewardship systems, procedures, and policies that enable students, faculty, staff, and the institution as a whole to achieve shared strategic goals. | |
| Alignment with Institutional Risk Indicator | Please note below the specific institutional risk(s) this proposal is addressing. | |
| | ☐ Enrolment Management<br>☐ Faculty and Staff<br>☒ Funding and Resource Management<br>☐ IT Services, Software and Hardware<br>☐ Leadership and Change<br>☐ Physical Infrastructure | ☐ Relationship with Stakeholders<br>☐ Reputation<br>☐ Research Enterprise<br>☐ Safety<br>☒ Student Success |
| Legislative Compliance and jurisdiction | Post-Secondary Learning Act<br>GFC Academic Planning Committee Terms of Reference<br>Board Learning and Discovery Committee Terms of Reference | |

Attachments (each to be numbered 1 - <>)

1. Proposal Template: Program Terminations East Asian Studies (page(s) 1 - 5)
2. Calendar Change East Asian Studies Terminations (page(s) 1 )

*Prepared by:* Rebecca Nagel, Associate Dean (Student Programs), Faculty of Arts, [rebecca.nagel@ualberta.ca](mailto:rebecca.nagel@ualberta.ca).

# Proposal Template: Program Termination

<mark>Use this template for proposals to terminate ministry-approved programs or specializations.</mark>

### SECTION 1:  PROPOSAL INFORMATION

**1.1** Fill in the table below:

| Institution | University of Alberta |
|---|---|
| **Program/specialization name** | Single Majors:<br><br>Chinese Studies/Chinese Language and Literature, Japanese Studies/Japanese Language and Literature<br><br>Combined Major:**<br><br>Chinese & Japanese<br><br>Single Minors:<br><br>Chinese, Japanese<br><br>**not to be confused with "double" majors |
| **Credential awarded** | Bachelor of Arts and Bachelor of Arts Honors (BA and BA Honors) |
| **Proposed effective date of termination** | July 2019 |

**1.2** Confirm whether:

**1.2.1**  ☒  This termination proposal was preceded by a ministry-approved suspension period.

☐  This termination proposal was <u>not</u> preceded by a ministry-approved suspension period.

**1.2.1a** If this proposal was preceded by a suspension, attach approval letter.

**1.2.1b** If this proposal was not preceded by a suspension, explain why ministry approval for a suspension was not sought prior to requesting a termination.

**1.2.1c** If not preceded by suspension, indicate when students were last admitted into the program/specialization.

**1.2.2** ☐ No active students remain in the program.

☒ Active program students remain in the program.

## SECTION 2: RATIONALE

**2.1** Identify reason(s) for termination with supporting evidence (e.g., low student demand, declining labour market demand, institutional capacity, provincial priorities, etc.).

In 2011-2014, the Department East Asian Studies conducted an extensive curriculum review of undergraduate programs and courses. The result was a proposal for a unified East Asian Studies curriculum (rather than a major/minor in separate areas of Chinese, Japanese and East Asian Studies). In order to streamline and simplify the Major offerings in East Asian Studies for simplicity and flexibility, the Department chose to terminate the set of degrees in place up to 2015-2016 and replace them with a single Major option as well as a Major with the Honors Option. The Majors at the time were Chinese, Japanese, and Combined Chinese and Japanese, as well as Honors. The new single Major is East Asian Studies, and it stands in place of the various previous Majors.

No course or course of study has been eliminated in the process of terminating these Majors. The new Major simply subsumes the courses that were previously available. However, the new major is simpler, because there is just one option, and most important it is much more flexible, because students may take a range of courses that heretofore may not have counted for one of the specific majors. The rigorous language requirement we have for the Major remains intact. The new major was developed collectively and through consensus and a wide range of stakeholders were consulted in devising it. The result is a flexible, credible major that is popular with undergraduates at the University of Alberta.

The change of enrolments trend in the major programs can be seen in the following table.

**Single Majors (BA & BA Honors)**

| YEAR | CHINESE LANG&LIT | JAPANESE LANG&LIT | EAST ASIAN STUDIES |
|------|------------------|-------------------|--------------------|
| 2014-2015 | 13 | 43 | 51 |
| 2015-2016 | 10 | 20 | 84 |
| 2016-2017 | 5 | 9 | 103 |
| 2017-2018 | 2 | 4 | 103 |
| 2018-2019 | 1 | 1 | 93 |

**Combined Majors (BA)**

| YEAR | COMBINED CHINESE&JAPANESE |
|------|------|
| 2014-2015 | 2 |
| 2015-2016 | 4 |
| 2016-2017 | 2 |
| 2017-2018 | 0 |

The two students still enrolled are both in Year 4 and expected to graduate in Spring 2019. There are no current students in the suspended minors. As of November 2018 there are 98 students in the East Asian Studies minor.

**2.2** Provide specific information about which internal governance body approved the termination, and provide date of approval. (Attach copy of minutes or motions.)

Faculty of Arts, Academic Affairs Committee (March 28, 2018)

Faculty of Arts, Executive Committee (November 8, 2018)

Faculty of Arts Council (November 22, 2018)

Academic Planning Committee (December 12, 2018)

### SECTION 3: ACCESS

**3.1** Identify student access considerations and risks for Campus Alberta (include information about related programs or other avenues available to students to prepare for careers/employment and/or further educational opportunities).

**3.2** If this program or specialization is unique in the province, describe the consultation(s) undertaken within Campus Alberta to investigate the feasibility of program/specialization transfer.

**3.3** Describe the consultation process that occurred with students at your institution regarding this programming change.

Student consultation was done during the preparation for the proposal of the suspensions (2013-14). Student consultation was conducted at various governance processes for the

suspensions. The governance process within the Faculty of Arts for approval of the suspensions included: East Asian Studies Department Council (3 undergraduate students); Academic Affairs Committee (8 undergraduate students); Arts Executive Committee (4 undergraduate students); Arts Faculty Council (27 undergraduate students). In addition, as the revised program was developed, the students sitting on the East Asian Studies Department Council consulted with their peers. This proposal for the terminations has gone through the same governance process with multiple committees with undergraduate student representation.

## SECTION 4: IMPACT

**4.1** Describe the consultation process that occurred with other stakeholders (e.g., advisory committees, regulatory bodies, employers, etc.) affected by this programming change.

**4.2** Describe plans for communicating the termination decision to stakeholders, particularly regulatory bodies (if applicable) and other Campus Alberta institutions.

Students in some other Faculties may take an Arts minor (Native Studies, Science, and St. Jean). The Faculties of Education and Business have approved related programming for which course requirements may need to be changed. The Faculty of Arts office contacted the Associate Deans in each of those Faculties to raise awareness of the changes to the programs so they could evaluate next steps appropriate to their own programs.

When communicating with internal and external audiences regarding the suspension of the programs, it was also communicated that it was planned to terminate the programs at the appropriate time. Any pertinent audiences are, therefore, already made aware that these programs will be terminated.

**4.3** Describe plans for reallocation of resources previously used for this program/specialization and identify budget and staffing impacts.

No relocation of resources is anticipated since courses will continue to be offered. Students have the option to declare an East Asian Studies major or minor.

## OTHER CONSIDERATIONS

Please indicate if there are additional factors you would like the ministry to consider when reviewing this proposal.

## RECOMMENDATION (FOR DEPARTMENT USE)

**Recommendation(s):**

**Rationale for Recommendation:**

**Reviewer(s):**

**Date Completed:**

# UNIVERSITY OF ALBERTA
## FACULTY OF ARTS

# CALENDAR CHANGE REQUEST FORM

**Department:** East Asian Studies

**2018 – 2019 form submission deadlines:** October 5th**,** January 4th, March 1st & April 1st

Highlight type of change request below:

1**. Course Change**     2**. Editorial Change**     3**. Admission Requirement**   4**. Program Regulation**

Note: changes that fall under type 1 or 2 received by October 5th will be considered to be published in the 2019-20 Calendar

| CURRENT https://calendar.ualberta.ca/preview_program.php?catoid=28&poid=26731&returnto=7133#BAHonors AndBAMajorMinorRequirements | PROPOSED |
| --- | --- |
| **East Asian Studies [Arts]** Effective September 2015, there will be no further admissions to BA Honors Chinese or Japanese programs. Students who entered one of these programs prior to September 2015 must complete all program requirements by April 30, 2019. The last BA Honors degree with Chinese or Japanese major will be granted at Spring Convocation 2019. **Honors in East Asian Studies** […] Major and Minor in East Asian Studies Major Requirements Effective September 2015, there will be no further admissions to Chinese or Japanese majors. Students who entered one of these programs prior to September 2015 must complete all program requirements by April 30, 2019. The last BA degree with Chinese or Japanese major will be granted at Spring Convocation 2019. A major in East Asian Studies requires….. […] Minor Requirements Effective September 2015, there will be no further admissions to Chinese or Japanese minors. Students who entered one of these programs prior to September 2015 must complete all program requirements by April 30, 2019. The last BA degree with Chinese or Japanese minor will be granted at Spring Convocation 2019. A minor in East Asian Studies requires…. | **East Asian Studies [Arts]** **Honors in East Asian Studies** […] Major and Minor in East Asian Studies Major Requirements A major in East Asian Studies requires….. […] Minor Requirements A minor in East Asian Studies requires…. |

**Rationale for change:**

Please see the Program Termination template for the history of the suspension and termination of these programs.

All names, signatures and dates are required:

| Department Contact | Department Chair or Designate | Date approved by Dept Council: |
| --- | --- | --- |
| Name: Christopher Lupke | Name: Rebecca Nagel | |
| Email: | Signature: *Rebecca Nagel* | **Date submitted:** November 9, 2018 |

Item No. 6

**Governance Executive Summary**
**Action Item**

| Agenda Title | Proposed Revisions to the Animal Ethics Policy and Procedures |
|---|---|

**Motion**

THAT General Faculties Council recommend that the Board of Governors approve the proposed revisions to the Animal Ethics Policy and Procedures, as recommended by the GFC Academic Planning Committee, to take effect upon final approval.

**Item**

| Action Requested | ☐ Approval ☒ Recommendation |
|---|---|
| Proposed by | Vice-President (Research) |
| Presenter(s) | Susan Babcock, Director, Research Ethics Office<br>Randy Goebel, Associate Vice-President (Research) and Associate Vice-President (Academic) |

**Details**

| Responsibility | Vice-President (Research) |
|---|---|
| The Purpose of the Proposal is (*please be specific*) | To recommend revisions to the Animal Ethics Policy and Procedures |
| Executive Summary (*outline the specific item – and remember your audience*) | In general, the proposed revisions do not change the scope or intent of the Animal Ethics Policy Suite.<br><br>The proposed revisions are intended primarily to address the Canadian Council on Animal Care (CCAC) 2017 assessment of the University Animal Care and Use Program. Specifically, the CCAC recommended that the University develop and implement a harmonized process for defining and handling incidents of non-compliance with animal use protocols and revise the *Animal Care and Use Committee Structure, Application and Review Procedure* to conform to CCAC requirements. The University is obligated to comply with CCAC recommendations as it must maintain CCAC certification as a condition of receiving CIHR and NSERC funds.<br><br>The other revisions were identified by members of the University Animal Care and Use Program in the course of their work with the Policy and Procedures since its approval in 2015.<br><br>The proposed revisions are strategically and financial significant because they improve our institutional compliance with CCAC requirements and ability to maintain CCAC certification without which research funding would be jeopardized. |
| Supplementary Notes and context | |

**Engagement and Routing** (Include meeting dates)

| Consultation and Stakeholder Participation (parties who have seen the proposal and in what capacity)<br><br><For information on the | *Those who are actively **participating**:*<br>• The University Animal Policy & Welfare Committee has reviewed and endorsed these changes. Its membership includes the Chairs of the four individual Animal Care and Use Committees, the Chair of the Cross Cancer Institute Animal Care Committee, the Associate Deans (Research) of ALES, FOMD and Science, the Directors of the animal services units, a representative from |
|---|---|

| | |
|---|---|
| protocol see the [Governance Resources section Student Participation Protocol](#)> | Environment, Health & Safety, two faculty members (who use animals in research), the Associate Vice-President (Research), and the following staff from the Research Ethics Office: the Animal Care and Use Consultant, the University Veterinarian and the Director. |
| | _Those who have been **consulted**:_ <br> • The Office of the Vice-President Research and the Research Ethics Office have consulted with the Canadian Council on Animal Care to determine if the proposed Animal Care and Use Non-Compliance Procedure meets its requirements. |
| | _Those who have been **informed**:_ <br> • |
| Approval Route (Governance) (including meeting dates) | GFC Academic Planning Committee - November 7, 2018 <br> GFC Executive Committee (for information) – December 10, 2018 <br> General Faculties Council - January 28, 2019 <br> Board Learning & Discovery Committee - February 15, 2019 <br> Board of Governors - March 15, 2019 |

**Strategic Alignment**

| | | |
|---|---|---|
| Alignment with _For the Public Good_ | EXCEL as individuals, and together, sustain a culture that fosters and champions distinction and distinctiveness in teaching, learning, research, and service. | |
| Alignment with Institutional Risk Indicator | Please note below the specific institutional risk(s) this proposal is addressing. | |
| | ☐ Enrolment Management <br> ☐ Faculty and Staff <br> ☒ Funding and Resource Management <br> ☐ IT Services, Software and Hardware <br> ☐ Leadership and Change <br> ☐ Physical Infrastructure | ☐ Relationship with Stakeholders <br> ☒ Reputation <br> ☒ Research Enterprise <br> ☐ Safety <br> ☐ Student Success |
| Legislative Compliance and jurisdiction | Post-Secondary Learning Act <br> GFC Academic Planning Committee Terms of Reference <br> Board Learning and Discovery Committee Terms of Reference <br> Canadian Council on Animal Care and Use policies and guidelines | |

Attachments

1. Proposed Revisions to the Animal Ethics Policy (pp 1 - 2)
2. Proposed Revisions to the Animal Care and Use Committee Structure, Application and Review Procedure (pp 1 - 7)
3. Proposed Revisions to the Standard Operating Procedures Definition, Creation and Approval Procedure (p1)
4. Proposed Revisions to the Animal Care and Use Post-Approval Monitoring Procedure (p1)
5. Proposed Revisions to the Animal Care and Use Appeal Procedure (p1)
6. Proposed Revisions to the Animal Care and Use Roles and Responsibilities Procedure (pp1-2)
7. Proposed NEW Animal Care and Use Non-compliance Procedure (pp1-6)
8. Proposed Revisions to the Special Requests for Alternate Animal Housing Procedure (pp1-3)
9. Proposed Revisions to the Institutional Animal User Training Program Procedure (pp 1-5)

_Prepared by:_ Susan Babcock, Director – Research Ethics Office, sbabcock@ualberta.ca

**Original Approval Date: June 2, 2005**

**Most Recent Approval Date:    October 16, 2015**

# Animal Ethics Policy

| | |
|---:|:---|
| **Office of Accountability:** | Vice-President (Research) |
| **Office of Administrative Responsibility:** | Research Ethics Office (REO) |
| **Approver:** | Board of Governors |
| **Scope:** | Compliance with this university policy extends to all academic, support and excluded staff, postdoctoral fellows, and academic colleagues as outlined and defined in the Recruitment Policy (Appendix A and Appendix B: Definitions and Categories); undergraduate and graduate students; emeriti; visitors to campus, including visiting scholars; third party contractors; and volunteers~~Academic Staff and Colleagues and Support Staff as outlined and defined in Recruitment Policy (Appendix A and Appendix B) in addition to third party contractors, visiting speakers, professors emeriti, undergraduate and graduate students, post-doctoral fellows, volunteers and to all persons~~ who use **animals** for research, teaching or testing. |

## Overview

The University of Alberta holds that scholarly integrity and trust are vital to the responsible conduct of research. It is committed to ensuring the ethical and humane use and responsible care of animals in research, teaching and testing. The University of Alberta regards the use of animals in research, teaching and testing as a privilege, not a right. Animals are used only for valid scientific studies with a reasonable expectation of obtaining knowledge for the potential benefit of people and/or animals. The University of Alberta is committed to ensuring the highest possible standards in the care, well-being, quality of life and use of its animals in accordance with applicable laws, the **Canadian Council on Animal Care (CCAC)** guidelines and policy statements, and the Tri-Agency *Agreement on the Administration of Agency Grants and Awards by Research Institutions*.

## Purpose

– To promote the highest standards of practice in research, teaching and testing involving animals.

– To establish the nature of these standards and address instances when these standards have not been met.

## POLICY

1.   GUIDING ETHICAL PRINCIPLES OF ANIMAL CARE AND USE

   a.   Animals used in research, teaching and testing by University of Alberta staff and trainees must be cared for and maintained in accordance with applicable laws, CCAC guidelines and policy statements, and the requirements of the Tri-Council *Agreement on the Administration of Agency Grants and Awards by Research Institutions*.

   b.   The Russell-Burch Three Rs Replacement, Reduction and Refinement principles will be upheld in the design and review of animal use protocols.

2.   ANIMAL CARE AND USE COMMITTEES

a. The Vice-President (Research) shall establish an institutional Animal Policy and Welfare Committee [University Animal Policy and Welfare Committee (UAPWC)] to concern itself with the ethical and responsible use and care of animals in research, teaching and testing.

b. UAPWC has the authority, on behalf of the Vice-President (Research) to:

    i. stop any procedure if it considers that unnecessary and/or unanticipated pain or distress is being experienced by the animal;

    ii. stop immediately any use of animals that is not described within an approved protocol or that deviates from the approved protocol;

    iii. direct that any animal be humanely euthanised if it is experiencing unnecessary and/or unanticipated pain or distress that cannot be alleviated; and

    iv. order the closure of facilities that do not meet CCAC standards and/or endanger the well-being of animals contained therein.

c. UAPWC shall establish such specialized Animal Care and Use Committees (ACUCs) as necessary to review and manage animal use applications. All **Principal Investigators (PIs)** using animals must apply to and be accountable to at least one of the specialized ACUCs.

d. UAPWC will serve as the appeal body concerning a negative decision of an ACUC. A PI who disputes an ACUC decision, following reconsideration by ACUC, may appeal that decision to UAPWC. Refer to the *Animal Care and Use Committee Appeal Procedure*.

    i. Because ethics review and the observance of research ethics at the University is premised on collegial relations between ACUCs and researchers, a request for appeal must be a last resort. An appeal may only be made on the grounds that there has been a miscarriage of justice, such as an error in process, procedural irregularity, lack of due process, and exceptions to the precepts of natural justice such as bias.

    ii. If an appeal is upheld, UAPWC will immediately review the animal use protocol in question. Decisions by UAPWC on appeals are final.

3. ETHICS REVIEW OF ANIMAL USE

a. The University's animal care and use program is premised on collegial relations among its members.

b. University of Alberta staff and trainees shall not use an animal for research, teaching, or testing without written approval from one of the University's ACUCs.

c. Each ACUC shall have a defined area of expertise and shall be capable of considering a range of research methods and animal models within that area. ACUCs are mandated to approve, reject, propose modifications to or terminate the approval of any proposed or ongoing animal use that is subject to review under this Policy. PIs should apply to ACUC best equipped to review the proposed animal use for which approval is requested.

d. ACUC has the authority to:

    i. stop any procedure if it considers that unnecessary and/or unanticipated pain or distress is being experienced by the animal;

    ii. stop immediately any use of animals that is not described in an approved protocol or that deviates from an approval protocol; and

    iii. direct that any animal be humanely euthanized if it is experiencing unnecessary and/or unanticipated pain or distress that cannot be alleviated.

e. If a PI is collaborating with researchers at other institutions to conduct animal research, the *Policy Statement for Animal-Based Projects Involving Two or More Institutions* will apply.

4. ACCOUNTABILITY

a. The University of Alberta aspires to the highest standards of animal care and use and is regularly assessed by CCAC in accordance with its standards of GAP – Good Animal Practice.

5. PROCUREMENT, USE, HOUSING AND MAINTENANCE OF ANIMALS

   a. Typically, animals must be ~~obtained~~ obtained through one of the University of Alberta **animal services units**, except animals used in the field.

   b. All approved animal use must receive veterinarian oversight from one of the animal services units.

   c. Whenever possible, animal procedures should be conducted in facilities managed by one of the animal services units.

   d. Animal procedures may be conducted in other locations, provided they are suitable and both the location and procedures, including the transfer of the animals, has been approved by ACUC and the University's Office of Environmental Health and Safety (EHS).

   e. Animals will normally be housed in facilities managed and maintained by one of the animal services units.

   f. In certain circumstances, a PI may apply for special permission to house animals in an alternate site. Refer to the *Special Requests for Alternate Animal Housing Procedure*.

6. ACCESS TO ANIMALS AND FACILITIES

   a. All animals maintained at the University of Alberta and the facilities in which they are used or housed are subject to post-approval monitoring and periodic inspection by the University Veterinarian, UAPWC, ACUCs, Directors and staff of the animal services units, EHS and REO staff. These people must have access at all times to all areas where animals are housed or used.

7. ANIMAL USER TRAINING

   To promote the highest standards of animal care and use, all University of Alberta staff and trainees engaged in the care and use of animals must, at a minimum, be trained in the principles and ethics of animal care and use. University of Alberta staff and trainees:

   a. associated with an animal use protocol must successfully complete Part 1 Institutional Animal User Training and provide REO with proof of completion.

   b. engaged in animal care and use must also complete relevant Part 2 Institutional Animal User Training appropriate to the species of animal and the procedure(s) to be performed. No person shall handle animals or perform any procedures with animals until they have completed appropriate Part 2 training.

8. EUTHANASIA

   a. Any veterinarian licensed by the Province of Alberta called upon to attend an animal used in an University ACUC approved protocol is delegated authority to stop any unapproved procedure or any procedure causing unnecessary and/or unanticipated pain or distress to the animal, and to humanely euthanize any animal believed to be in unnecessary and/or unanticipated pain or distress that cannot be alleviated. The veterinarian will consult with the PI and ACUC Chair, if possible, and will salvage research data, if possible. The veterinarian will send a written report to the PI, the ACUC Chair and the veterinarian who reviewed the protocol following any such event.

   b. University veterinarian staff may delegate authority to humanely euthanize animals to senior animal services unit staff.

   c. PIs are responsible for ~~ensuring approved protocol endpoints are met. Every effort must be made to identify and humanely euthanize morbid animals prior to reaching a moribund state (a state of dying).~~ working with the ACUC to establish appropriate humane endpoints and to ensure that approved humane endpoints are followed. Every effort must be made to expose animals to the minimum distress or pain necessary for the scientific objectives of the research, for as short a period as possible, and to monitor them carefully to identify and euthanize animals reaching their humane endpoints.

9. NON-COMPLIANCE

   a. Any ~~Animal~~animal use that has not been ~~reviewed and~~ approved by an ACUC and/or animal use that is not conducted in the manner in which it was described in an animal use protocol and approved by an ACUC will constitute non-compliance.

b. ~~Animal~~ Any animal ~~use that contravenes this Policy~~care that does not meet CCAC guidelines or is not described in an approved animal use protocol constitutes non-compliance.

c. Non-compliance ~~may represent research misconduct. See the~~ *Research and Scholarship Integrity Policy*will be addressed according to the *Animal Care and Use Non-compliance Procedure*.

## DEFINITIONS

| Any definitions listed in the following table apply to this document only with no implied or intended institution-wide use. **[▲Top]** | |
|---|---|
| **Animal** | Any living non-human vertebrate and any living invertebrate of the class of cephalopoda, including free-living and reproducing larval forms, used for research, teaching, or testing purposes by University of Alberta staff or trainees. |
| **Canadian Council on Animal Care (CCAC)** | The national organization responsible for setting and maintaining standards for the ethical use and care of animals used in science (research, teaching and testing) in Canada. |
| **Principal Investigator (PI)** | A member of the academic staff who is responsible for the design, conduct, supervision and oversight of the care and use of animals in research, teaching or testing as described in an approved animal use protocol. |
| **Animal Services Units** | Animal facilities established and operated by the University of Alberta as ongoing administrative units to provide veterinary and animal care staff, infrastructure, training, oversight and other resources to support the use of animals in research, teaching and testing by University staff and trainees. They currently are: Agricultural Food and Nutritional Sciences Animal Services (AFNSAS), Health Sciences Laboratory Animal Services (HSLAS) and Science Animal Support Services (SASS). |

## RELATED LINKS

| Should a link fail, please contact uappol@ualberta.ca. **[▲Top]** |
|---|

Agreement on the Administration of Agency Grants and Awards by Research Institutions (Government of Canada)

Animal-Based Projects Involving Two or More Institutions (CCAC)

Animal Protection Act (Government of Alberta)

Animal Protection Regulation (Government of Alberta)

Canadian Council on Animal Care Guidelines (CCAC)

Recruitment Policy (Appendix A) Definition and Categories of Academic Staff and Colleagues (UAPPOL)

Recruitment Policy (Appendix B) Definition and Categories of Support Staff (UAPPOL)

Research and Scholarship Integrity Policy (UAPPOL)

University Animal Policy and Welfare Committee (University of Alberta)

## PUBLISHED PROCEDURES OF THIS POLICY

Animal Care and Use Committee Appeal Procedure

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[Animal Care and Use Committee Structure, Application and Review Procedure](#)

[Animal Care and Use Post-Approval Monitoring Procedure](#)

[Animal Care and Use Roles and Responsibilities Procedure](#)

[Animal Care and Use Standard Operating Procedures: Definition, Creation, Approval and Management Procedure](#)

[Institutional Animal User Training Program Procedure](#)

[Special Requests for Alternate Animal Housing Procedure](#)

[Animal Care and Use Non-compliance Procedure](#)

**Approval Date: November 1, 2015**

**Parent Policy: Animal Ethics Policy**

# Animal Care and Use Committee Structure, Application and Review Procedure

| Office of Administrative Responsibility: | Research Ethics Office (REO) |
|---|---|
| **Approver:** | Vice-President (Research) |
| **Scope:** | Compliance with this university procedure extends to all academic, support and excluded staff, postdoctoral fellows, and academic colleagues as outlined and defined in the Recruitment Policy (Appendix A and Appendix B: Definitions and Categories); undergraduate and graduate students; emeriti; visitors to campus, including visiting scholars; third party contractors; and volunteers~~Academic Staff and Colleagues and Support Staff as outlined and defined in Recruitment Policy (Appendix A and Appendix B) in addition to third party contractors, visiting speakers, professors emeriti, undergraduate and graduate students, post-doctoral fellows, volunteers and to all persons~~ who use **animals** for research, teaching or testing. |

## Overview

Ethics approval must be obtained before any use of animals for research, teaching or testing is undertaken and maintained for the duration of the animal use.

## Purpose

– Define the structure of Animal Care and Use Committees (ACUCs) at the University of Alberta.

– Define the decision making and review requirements for ethics review of animal use.

– Describe the basic procedures for application for and ethics review of animal use.

## PROCEDURE

1. STRUCTURE OF ANIMAL CARE AND USE COMMITTEES AND GENERAL CONSIDERATIONS

    a. The University of Alberta, through the Vice-President (Research) and the University Animal Policy and Welfare Committee (UAPWC), shall establish such number of ACUCs as determined appropriate. ACUCs will be organized around models of animal use and their composition will conform with the requirements outlined in the **Canadian Council for Animal Care** (CCAC) *Policy Statement: Terms of Reference for Animal Care Committees.*

    b. It is the shared responsibility of the **Principal Investigator (PI),** the **animal services unit** providing housing and/or veterinarian oversight and ACUC to ensure the ethical conduct of animal care and use and to promote animal welfare consistent with CCAC requirements. Whether a PI personally works with animals or not, s/he is responsible for the animal care and use performed by his/her staff and trainees.

c.  ACUCs shall apply the principles adopted in the *Animal Ethics Policy* in review of an animal use application. ACUCs should be aware of, and be willing to consider and suggest, a range of approaches to promote the ethical conduct of animal use. No animal use application will require approval from more than one ACUC. ACUC may request additional veterinarian and facility input if necessary. Each ACUC will accept, and rely on, the reviews of the other ACUCs.

d.  ACUCs shall function impartially, provide a fair and constructive review with respect to an application and provide reasoned and appropriately documented opinions and decisions. ACUCs should make their decisions on the ethical acceptability of animal use in an efficient and timely manner, and shall communicate all decisions in writing, in print or by electronic means. The deliberations of ACUCs are confidential.

e.  Ethics review will be based on fully detailed animal use applications submitted for review through the ~~Research and Ethics Management Online (REMO)~~online research ethics system. The animal use applications will include the information defined in the *CCAC Guidelines on: Animal ~~Utilization~~ Use Protocol Review* and the *CCAC Policy Statement: Terms of Reference for Animal Care Committees.*

f.  REO will provide administrative support for ACUCs.

2.  DECISION MAKING AND REVIEW REQUIREMENTS

    a.  ACUC must ensure that each animal use application has been found to have scientific or pedagogical merit through independent peer review before approving the application.

        i.   In the case of research funded through a competitive peer review process, confirmation of funding or a score in the fundable range will typically be accepted as evidence of peer review. Such merit review will be acceptable for five years from the date of review or such other time as ACUC may decide.

        ii.  For teaching applications, evidence of *a priori* consultation with, or involvement of, the relevant animal services unit in the development and approval of the course content and methods must accompany evidence of pedagogical review by the academic unit. ACUC may request additional review.

        iii. ~~For animal use applications that~~ ~~have not received peer review~~are not linked to peer reviewed funding, a REO administrator will select reviewers from a bank maintained in the office and will consult with the PI's Department Chair and/or Associate/Vice Dean (Research) to select reviewers as required. On these animal use protocols, the PI will be asked to suggest the names of a minimum of two subject matter experts to ~~review animal use protocols~~add to the bank of reviewers. ~~REO will maintain a bank of reviewers and will consult with the PI's Department Chair and/or Associate/Vice Dean (Research) to select reviewers as required.~~

        ~~iv.~~iii. REO will coordinate an impartial peer review process, following which the anonymized reviewers' comments will be provided to the PI. If the reviews do not warrant any changes to the animal use application, ACUC will complete its review. If changes are recommended, the application will be returned to the PI for appropriate action and the PI's Department Chair and/or Associate/Vice Dean will be asked to verify that the PI has addressed any concerns before ACUC completes its review.

    b.  All new animal use protocols and fourth year renewals of ongoing protocols will be reviewed by full ACUC.

    c.  Annual review of ongoing protocols may be done by a subcommittee of ACUC consisting of the ACUC Chair or designate (a scientific member of ACUC), a veterinarian and one community member for up to three annual reviews. At any time a subcommittee member can stipulate that the protocol go to full ACUC review.

    d.  While the disposition of any individual review rests solely and exclusively with either ACUC, or in the event of an appeal, with UAPWC, ACUCs are accountable to UAPWC for ensuring their processes are consistent with University of Alberta policy and procedures. In the event of a disagreement about the interpretation or application of policy, procedures or guidelines, the ~~Chair of UAPWC~~Vice-President (Research) shall have final authority.

    e.  To change approved animal use, except where necessary to eliminate any unanticipated harmful effects to the animals, the PI must submit, and receive ACUC approval for, an amendment to his/her animal use application.

    f.  The ACUC Chair may, in exceptional circumstances, convene a subcommittee consisting of at least him/herself, a veterinarian and a community representative to review and approve interim animal use on the understanding that a fully detailed animal use application will be reviewed by full ACUC at its next meeting.

3. NEW AND ONGOING ANIMAL USE PROTOCOL REVIEW

a. All applications for animal ethics review at the University of Alberta will be managed through the ~~Research and Ethics Management Online (REMO)~~online research ethics system. A PI should choose the ACUC best qualified to review his/her application. The receiving ACUC may redirect an application that would be more suitably reviewed by another ACUC and shall notify the PI as necessary. An animal use application will be checked for operational implications by the animal services unit(s) that will provide veterinarian oversight for the proposed animal use. The animal use application will then be received by an ACUC ~~Coordinator~~Specialist and, following an administrative review and in consultation with the ACUC Chair, be assigned for review by ACUC.

b. Applications for animal ethics review will be distributed to all members of ACUC. They may be reviewed by the committee as a whole and/or by specific assigned reviewers, as well as the ACUC Chair or Associate Chair, the veterinarian and the community member(s), and are discussed by all members present at the ACUC meeting.

c. If the ACUC Chair, the veterinarian or one of the primary reviewers determines additional expertise is necessary for appropriate review, *ad hoc* reviewers will be asked to review the animal use application.

d. At the discretion of the ACUC Chair, the PI will be invited to attend the ACUC meeting at which his/her new or fourth year renewal application is being considered, in order to clarify details of the proposed animal use.

e. If ACUC determines that changes are required, those requirements will be communicated in writing to the PI by the ACUC ~~Coordinator~~Specialist. Once the PI has made changes, the ACUC Chair will issue the approval if s/he is satisfied the requirements have been met, or will refer the application to full ACUC or members of the ACUC if not satisfied. ACUC will make decisions by consensus wherever possible. See *Animal Care and Use Roles and Responsibilities Procedure* for additional details.

f. Ethics approval for animal use is issued for twelve (12) months at a time or for such shorter period of time specified in the approval.

   i. Where animal use requires ongoing ACUC approval, it is the responsibility of the PI to ensure that an annual report and application for renewal is made in sufficient time before the expiry date of the approval to permit review and incorporation of any changes required by ACUC before ~~and~~ approval. Annual reports are reviewed by specific assigned reviewers and are distributed to all ACUC members and discussed at full meetings of ACUC.

   ii. A complete renewal, including a fully updated animal use application, must be submitted after three consecutive renewals or when otherwise deemed necessary by ACUC.

   iii. If the PI does not provide an annual report by the approval expiry date, the protocol will normally be closed and no further animal work will be allowed. ACUC, the animal services unit and REO will work with the PI to find an appropriate resolution to any affected animal care and use.

   iv. To facilitate animal ordering and financial administration, the Research Services Office and the animal services unit(s) will be notified by REO when an application is approved and when approval is renewed or expires or the application is closed.

4. AMENDMENTS TO AN APPROVED ANIMAL USE PROTOCOL

From time to time, approved animal use protocols may need to be amended to incorporate new procedures or design, new animal numbers or strains, changes in personnel and other changes to the animal use. Amendments to an approved animal use protocol must be completed using ~~REMO~~online research ethics system and must be approved by the same ACUC that provided the original approval before amendments can be implemented. ~~Depending on~~Regardless of the scope of the amendment(s) and the implications for animal care and use, the PI ~~may~~must submit an amendment or ~~may be required~~the ACUC may require the PI to submit a new animal use protocol. Multiple changes and/or changes which are more likely to cause a change in animal welfare will be subject to a higher level of scrutiny.

a. Administrative amendments, including ~~reduction in number of animals used, change in strain of animal(s),~~ funding changes and personnel/contact information changes can be submitted at any time and will be received by the ACUC ~~Coordinator~~Specialist on behalf of ACUC. If the ACUC Specialist believes an amendment is not administrative, it may be referred to the University Veterinarian to determine if it requires ACUC Chair or subcommittee review. Administrative amendments are documented in the online research ethics system.

b. Minor ~~Amendments~~ amendments that have little or no impact on the approved animal use may be approved by the ACUC Chair. These include reduction in number of animals used, changes which reduce the invasiveness or stress on the animal, changes in animal procedures or drugs used (where the effects on the animal are equivalent), ~~moderate~~ small increases in animal numbers ~~(≤25% of the number previously approved)~~, addition of or changes animal ~~species/~~strains that are not known to have specific housing/care requirements and changes in anesthetic or analgesic made on the recommendation of a veterinarian to improve the welfare of an animal, particularly as documented in the Post Approval Monitoring Log. ~~changes in the use of hazardous agents, subject to Environmental Health and Safety review.~~ At any time, the ACUC Chair can send the amendment to full ACUC, or a subcommittee thereof, for review. ~~Minor changes in anesthetic or analgesic made on the recommendation of a veterinarian to improve the welfare of an animal can be made without review but must be reported as a refinement in the next annual report.~~ Minor amendments are reported and documented in the minutes of the following ACUC meeting.

c. ~~Amendments that have more than minor impact on animal use will be reviewed by a sub-committee of ACUC, including the Chair, the veterinarian and a community member and, at their discretion, approved or referred to full ACUC for review. These include changes in species, sex, breed, strain (with health implications), age and genetic manipulation that will alter the animal procedures, introduce earlier endpoints, or trigger specific housing/care requirements, increase in animal numbers by more than 25%, change in anesthetic agent or use of analgesic agents, changes in method of euthanasia, new procedure or manipulation, particularly ones judged to result in increased potential for pain and distress and change in duration, frequency or number of procedures performed. At any time, either the ACUC Chair or the ACUC veterinarian can send the amendment to full ACUC review.~~

~~Major changes to the approved animal use protocol will normally require submission of a new animal use application which must be reviewed by full ACUC. Examples of major changes include a change in the main objective of the study or direction of research, a change from non-survival to survival surgery, an increase in the category of invasiveness, addition of category D procedures to a category D protocol and withholding or reducing substantially the use of analgesics or other drugs or procedures which provide comfort or safety for an animal handler.~~

c. Major changes to the approved animal use protocol must be reviewed by the ACUC and may require submission of a new animal use protocol application. All major amendments of animal use protocols will be reviewed by at least a sub-committee of ACUC, including the Chair, the veterinarian and a community member. At the discretion of the subcommittee or any member thereof, the amendment may be referred for review and discussion at a meeting of the full ACUC.

  i. Changes which may be reviewed by a sub-committee include: changes in species, strain (with health implications), age and genetic manipulation that will alter the animal procedures, introduce different endpoints, or trigger specific housing/care requirements; large increase in animal numbers; change in housing or procedure location; change in anesthetic agent or use of analgesic agents; changes in method of euthanasia from a non-physical to a physical method or from an approved to a conditionally approved method; a new procedure or manipulation, particularly ones judged to result in increased potential for pain and distress and change in duration, frequency or number of procedures performed.

  ii. Major changes to an existing animal use protocol that require review of the protocol at a full meeting of the ACUC include any protocol in which multiple changes are made; the addition of category D procedures to a category D protocol; addition of new Category E procedures to any protocol; a considerable increase of the number of animals required vs. the number in the original protocol; a change of species; use of more invasive or more frequent procedures and use of entirely new procedures.

  iii. Major changes that will normally require submission of a new animal use protocol include a change in the main objective of the study or direction of research; a change from non-survival to survival surgery; an increase in the category of invasiveness; a major change in experimental procedures and withholding or reducing substantially the use of analgesics or other drugs or procedures which provide comfort or safety for an animal.

~~d.~~

## DEFINITIONS

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|---|---|
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| **Animal** | Any living non-human vertebrate and any living invertebrate of the class of cephalopoda, including free-living and reproducing larval forms, used for research, teaching or testing by University staff or trainees. |
| **Canadian Council on Animal Care (CCAC)** | The national organization responsible for setting and maintaining standards for the ethical use and care of animals used in science (research, teaching and testing) in Canada. |
| **Principal Investigator (PI)** | A member of the academic staff who is responsible for the design, conduct, supervision and oversight of the care and use of animals in research, teaching or testing as describe in an approved animal use protocol. |
| **Animal Services Units** | Animal facilities established and operated by the University of Alberta as ongoing administrative units to provide veterinary and animal care staff, infrastructure, training, oversight and other resources to support use of animals in research, teaching and testing by University staff and trainees. They currently are: Agricultural Food and Nutritional Sciences Animal Services (AFNSAS), Health Sciences Laboratory Animal Services (HSLAS) and Science Animal Support Services (SASS). |

## FORMS

No Forms for this Procedure.

## RELATED LINKS

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[Animal Protection Act](#) (Government of Alberta)

[Animal Protection Regulation](#) (Government of Alberta)

[Canadian Council on Animal Care Guidelines](#) (CCAC)

[Recruitment Policy (Appendix A) Definition and Categories of Academic Staff and Colleagues](#) (UAPPOL)

[Recruitment Policy (Appendix B) Definition and Categories of Support Staff](#) (UAPPOL)

[Research and Scholarship Integrity Policy](#) (UAPPOL)

[Online Research Ethics System](#)

[University Animal Policy and Welfare Committee](#) (University of Alberta)

**Approval Date: November 1, 2015**

**Parent Policy: Animal Ethics Policy**

# Animal Care and Use Standard Operating Procedures: Definition, Creation, Approval and Management Procedure

| | |
|---|---|
| **Office of Administrative Responsibility:** | Research Ethics Office (REO) |
| **Approver:** | Vice-President (Research) |
| **Scope:** | Compliance with this university procedure extends to all academic, support and excluded staff, postdoctoral fellows, and academic colleagues as outlined and defined in the Recruitment Policy (Appendix A and Appendix B: Definitions and Categories); undergraduate and graduate students; emeriti; visitors to campus, including visiting scholars; third party contractors; and volunteers ~~Academic Staff and Colleagues and Support Staff as outlined and defined in Recruitment Policy (Appendix A and Appendix B) in addition to third party contractors, visiting speakers, professors emeriti, undergraduate and graduate students, post-doctoral fellows, volunteers and to all persons~~ who use **animals** for research, teaching or testing. |

## Overview

The **Canadian Council on Animal Care (CCAC)** and the University of Alberta encourage the use of formal, written standard operating procedures (SOPs) for commonly used animal procedures wherever possible. In addition to promoting consistent and verifiable processes across the Animal Care and Use Program, SOPs offer **Principal Investigators (PIs)** an alternative to writing detailed procedures each time they prepare a protocol. Similarly, the use of SOPs reduces the review burden for the Animal Care and Use Committees (ACUCs) and simplifies the work of the **animal services units**.

Note: This Procedure addresses only SOPs involving live animals.

## Purpose

– Define different types of animal care and use SOPs.

– Define the processes by which SOPs are created, approved and managed.

## PROCEDURE

1.  STANDARD OPERATING PROCEDURE REQUIREMENTS

    SOPs are sets of fixed instructions or steps to be followed in carrying out a given operation or in a given situation. SOPs may be developed by various members of the animal care and use program for a range of activities, including record keeping, equipment maintenance, use of equipment, emergency management and animal care and use.

    a.  Any SOP involving live animals must be reviewed and approved by an ACUC before it can be used. Changes to SOPs must also be approved before they are implemented.

    b.  SOPs should follow a standard template and provide sufficient detail so that trained personnel new to the animal care and use program should be able to carry out the procedure.

c. Animal services units and ACUCs should, as much as possible, encourage PIs and their research personnel to follow common, consistent SOPs for animal care and use procedures.

2. INSTITUTIONAL SOPs

Institutional SOPs should be established for procedures involving animals that are common across research areas and/or animal services units and to promote best practices for the University's animal care and use program.

a. Institutional SOPs should, wherever possible, make use of existing approved unit level or PI SOPs. Institutional SOPs may incorporate material from SOPs in use at other CCAC accredited institutions.

b. Institutional SOPs will be reviewed and approved by the University Animal Policy and Welfare Committee (UAPWC), which includes Directors of the animal services units and Chairs of ACUCs, or by a sub-committee of UAPWC, created for that purpose. Institutional SOPs will be accepted by all University ACUCs and animal services units.

c. SOPs relevant to the services provided by two or more of the animal services units must be endorsed by all units before they are presented to UAPWC for approval as institutional SOPs.

d. Whether or not institutional SOPs are regularly reviewed by ACUCs in connection with specific animal use protocols, they should be reviewed by UAPWC at least every ~~four~~ three years.

e. Any member of the University animal care and use program may recommend development of an institutional SOP to UAPWC. However, UAPWC will give priority to development of SOPs for commonly used procedures.

f. The institutional animal user training program and ACUCs will reinforce the use of SOPs, in particular institutional SOPs or SOPs maintained by the animal services units.

g. Approved institutional SOPs will be maintained in the ~~Research and Ethics Management Online (REMO)~~online research ethics system by REO and will be accessible online to ~~REMO~~ animal module users.

3. ANIMAL SERVICES UNIT SOPs

Directors of the Animal Services Units must establish and maintain SOPs for services or activities performed by their staff or in their facilities.

a. Unit level operational SOPs address various functions of an animal services unit in addition to those that involve animal care and use, for instance equipment maintenance, cleaning and record keeping. Operational SOPs that do not involve animals do not require ACUC approval.

b. Unit level animal care and use SOPs involving live animals may or may not be associated with a specific animal use protocol. Unit level SOPs connected to animal use protocols maintained by the Director, for instance, training or breeding protocols should be reviewed in conjunction with the animal use protocol or when these SOPs are amended. Stand-alone SOPs, for rarely used procedures, should be reviewed by ACUC at least every ~~four~~ three years.

c. Animal services units should provide species and procedure or technique training consistent with approved institutional and unit level SOPs.

d. The Director must ensure current approved versions of his/her unit's SOPs are available to staff and researchers as needed.

4. INVESTIGATOR SOPs

PIs may create standard operating procedures for specialized activities that they or their research personnel perform regularly.

a. PI level SOPs for protocol-specific procedures involving live animals will typically be approved by an ACUC, in connection with the PI's animal use protocol, and reviewed in detail with full protocol renewal every four years or in the event of changes. The animal use protocol identifies the animal users and their training, as well as the context in which protocol-specific SOPs will be employed. The more invasive the SOP, the more important it is to verify that the personnel following the SOP have commensurate training.

b. The PI must ensure that current approved versions of his/her SOPs are available to all members of his/her research group on an as needed basis.

c. A PI may also include institutional or unit level SOPs in his/her animal use protocol and make minor modifications to the SOPs, provided those modifications are approved by ACUC.

## DEFINITIONS

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SOP Template

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Recruitment Policy (Appendix A) Definition and Categories of Academic Staff and Colleagues (UAPPOL)

Recruitment Policy (Appendix B) Definition and Categories of Support Staff (UAPPOL)

Research and Scholarship Integrity Policy (UAPPOL)

On-line Research Ethics System

**Approval Date: November 1, 2015**

**Parent Policy: Animal Ethics Policy**

# Animal Care and Use Post-Approval Monitoring Procedure

| | |
|---|---|
| **Office of Administrative Responsibility:** | Research Ethics Office (REO) |
| **Approver:** | Vice-President (Research) |
| **Scope:** | Compliance with this university procedure extends to all <u>academic, support and excluded staff, postdoctoral fellows, and academic colleagues as outlined and defined in the Recruitment Policy (Appendix A and Appendix B: Definitions and Categories); undergraduate and graduate students; emeriti; visitors to campus, including visiting scholars; third party contractors; and volunteers</u><s>Academic Staff and Colleagues and Support Staff as outlined and defined in Recruitment Policy (Appendix A and Appendix B) in addition to third party contractors, visiting speakers, professors emeriti, undergraduate and graduate students, post-doctoral fellows, volunteers and to all persons</s> who use **animals** for research, teaching or testing. |

## Overview

Post-approval monitoring enables **Principal Investigators** (**PIs),** animal care and use committees (ACUCs), **animal services units** and the University to assess animal care and use in practice and to close any gaps between those practices and approved animal use applications. Post-approval monitoring involves a wide range of activities, from PI self-assessments and regular animal health monitoring by the veterinarian and animal care staff to lab visits and formal observation of techniques. An effective post-approval monitoring program is based on collaborative and collegial processes relying on information from many sources, including animal use applications, animal health programs, ACUC site visits, veterinary rounds, incident reports, self-assessments, laboratory visits by staff engaged in the University Animal Policy and Welfare Program and other reports.

The **Canadian Council on Animal Care (CCAC)** requires that the University establish and define a post-approval monitoring program to audit approved animal use applications and to provide continuing education to ensure consistency of practices with approved animal use applications and University policy and procedures. Recognizing that University research is built on scholarly integrity and trust, the starting point for post-approval monitoring is that researchers typically adhere to the activities described in their animal use applications. Consequently, post-approval monitoring will most often involve information exchange about procedures that work well, continuing education about areas that are problematic and assessments of novel issues so that best practices inform all animal care and use.

## Purpose

– Describe the objectives of the post-approval monitoring program.

– Describe the components of the post-approval monitoring program and its relationship to the overall animal care and use program.

## **PROCEDURE**

1. POST-APPROVAL MONITORING OBJECTIVES

a.  PIs**,** ACUCs, the animal services units, and senior administration share responsibility for ensuring that animal care and use performed by University staff and trainees is consistent with ACUC decisions and institutional and CCAC standards.

b.  Neither University Animal Policy and Welfare Committee (UAPWC) nor ACUC representatives are present when animal use protocols are conducted so they must work with PIs and members of the veterinary and animal care staff to ensure compliance with ACUC decisions and with the conditions set out in the approved animal use application.

c.  The most important partner in post-approval monitoring is the PI**.** S/he agrees to undertake his/her animal care and use in practice as approved in principle by ACUC when s/he signs the final version of the animal use application, and s/he is responsible for the conduct of his/her staff and trainees.

d.  The veterinarians and animal care staff are also essential partners in post-approval monitoring as they deliver applied animal user training and provide day-to-day assistance and information with respect to animal care and use and will often be the first to learn of an animal welfare issue.

e.  All University staff and students working with animals must work together in a collegial manner and attempt to correct deficiencies collaboratively.

f.  Deficiencies may arise for a number of reasons, including knowledge gaps, protocol drift, poor record keeping, communication problems and human error. Deficiencies can be corrected through protocol updates or amendments, improved practice, better training and more rigorous attention to detail.

g.  In the rare event there are persistent and/or deliberate breaches of compliance that threaten the health, welfare and/or safety of ~~personnel or~~ animals or personnel, these issues must be reported to the Chair of ACUC that approved the protocol ~~and the Chair of UAPWC~~. Breaches of compliance or non-compliance with approved animal use protocols will be handled according ~~with University policy and procedures may constitute research misconduct and will be handled according to the *Research and Scholarship Integrity Policy*~~ to the *Animal Care and Use Non-Compliance Procedure*. Serious incidents or chronic cases of non-compliance will be reporting according to the *Research and Scholarship Integrity Policy.*

*2.*  POST-APPROVAL MONITORING ACTIVITIES

a.  Post-approval monitoring procedures should not be unduly cumbersome or intrusive.  They may be a natural extension of many animal care and use activities that are already in place and should leverage existing information and processes wherever possible. These include, for example, day-to-day observation of animal health and application of endpoints, assistance provided by ACUC personnel to animal users with their animal use applications, including processes for amending applications, site visits and discussions of animal use protocols by ACUC members and veterinary assistance and follow-up for new procedures and/or procedures more likely to result in animal pain and distress.

b.  The following are examples of how post-approval monitoring activities will be incorporated with existing practices:

 i.  Self-Assessment – Following approval of a new animal use application, including major amendments and fourth year renewals, REO will provide the PI with a self-assessment form which s/he may complete and append to the animal use application.

 ii.  Veterinarian reports – A simple form, created in consultation with the animal services units, will be filled out by veterinarians after visiting a lab or attending a procedure. Each report will be appended to the relevant animal use application.

 iii.  ACUC facility tours – ACUC's observations related to animal procedure and housing space made during its annual visits will be appended to individual animal use applications wherever possible.

 iv.  Animal care reports – These could take many forms, ranging from copies of records maintained by staff in the animal services units to incident reports and post-mortems and will be appended to the animal use applications.

 v.  Facility Reports – The animal services units can append information on routine or non-routine events, for example, power outages, disease outbreaks, treatment and resolution, and the like.

c.  The Post-Approval Monitoring Program will also involve lab visits, which may be random and unannounced or for cause. For instance, studies involving a higher category of invasiveness, complex or novel  75

procedures, alternate animal housing or identified by ACUC as requiring additional follow-up are more likely to receive for cause visits.

3. POST-APPROVAL MONITORING RESOURCES

   a. The ~~Post-Approval Monitoring Coordinator~~Animal Care and Use Consultant ~~will be housed~~ in REO ~~and~~ will support the ~~Post-Approval Monitoring Reviewers~~Post-Approval Monitoring Program, including the reviewers. The Post-Approval Monitoring Reviewers, between 3 and 6 knowledgeable and experienced animal users, will be recruited by the ~~Post-Approval Monitoring Coordinator~~Animal Care and Use Consultant in consultation with ACUC Chairs and Chair of UAPWC.

   b. The ~~Post-Approval Monitoring Coordinator~~Animal Care and Use Consultant will be an ex officio member of all ACUCs and will attend all ACUC meetings. In addition, the Post-Approval Monitoring Committee members will be ACUC members and will be encouraged to attend meetings, although they will not be required to review protocols.

   c. Post-approval monitoring activities and information will be captured at a protocol level in the ~~Research Ethics and Management Online (REMO)~~online research ethics system as much as possible.

   d. REO will provide administrative support for the Post-Approval Monitoring Program.

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## FORMS

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| No Forms for this Procedure. |

## RELATED LINKS

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Agreement on the Administration of Agency Grants and Awards by Research Institutions (Government of Canada)

Animal Protection Act (Government of Alberta)

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Recruitment Policy (Appendix A) Definition and Categories of Academic Staff and Colleagues (UAPPOL)

Recruitment Policy (Appendix B) Definition and Categories of Support Staff (UAPPOL)

Research and Scholarship Integrity Policy (UAPPOL)

Online Research Ethics System

**Original Approval Date: January 11, 2010**

**Most Recent Approval Date: November 1, 2015**

**Parent Policy: Animal Ethics Policy**

# Animal Care and Use Committee Appeal Procedure

| Office of Administrative Responsibility: | Research Ethics Office (REO) |
|---|---|
| Approver: | Vice-President (Research) |
| Scope: | Compliance with this university procedure extends to all ~~academic, support and excluded staff, postdoctoral fellows, and academic colleagues as outlined and defined in the Recruitment Policy (Appendix A and Appendix B: Definitions and Categories); undergraduate and graduate students; emeriti; visitors to campus, including visiting scholars; third party contractors; and volunteers~~ Academic Staff and Colleagues and Support Staff as outlined and defined in Recruitment Policy (Appendix A and Appendix B) in addition to third party contractors, visiting speakers, professors emeriti, undergraduate and graduate students, post-doctoral fellows, volunteers and to all persons who use **animals** for research, teaching or testing. |

## Overview

A **Principal Investigator** (PI) has the right to request, and the Animal Care and use Committee (ACUC) has an obligation to provide reconsideration of a negative decision by ACUC. If the PI and ACUC cannot achieve agreement through reconsideration, the PI may appeal the disputed decision of ACUC to the University Animal Policy and Welfare Committee (UAPWC) in accordance with this Procedure.

## Purpose

To specify the grounds for an appeal of a decision by an ACUC and to detail the procedures to be followed in the event of an appeal.

## PROCEDURE

1. If a PI, after exhausting all reasonable attempts to resolve disagreements cooperatively, disputes an ACUC decision, the PI (appellant) may appeal that decision to UAPWC.

2. Only UAPWC may hear an appeal of a decision of an ACUC of the University of Alberta. An appeal may only be made on the grounds that there has been a miscarriage of justice, such as an error in process, procedural irregularity, lack of due process, and exceptions to precepts of natural justice such as bias.

3. The decisions of UAPWC are final and binding.

4. UAPWC shall hear an appeal from the same appellant against the same decision only once.

5. A written appeal of an ACUC decision, outlining the grounds for the appeal and accompanied by supporting documentation, must be submitted by the PI to the ~~Administrative~~ Director of REO within thirty (30) working days of receipt of the written ACUC decision.

6. UAPWC members will be asked in advance of a hearing to declare any possible bias and, if bias is declared,will not be called upon to hear the appeal. No UAPWC member will hear an appeal if s/he participated in the ACUC decision being appealed. The appellant may request that any UAPWC member not be part of the appeal process on the grounds that the member's presence would bias and prevent a fair hearing. If the UAPWC Chair is for

any reason, unable to chair the appeal hearing, the ~~Administrative~~ Director of REO will identify another member of UAPWC to serve as chair for the appeal hearing. Quorum for an appeal hearing shall be a minimum of five members, including a veterinarian, a community member and at least two scientists who may also be ACUC Chairs.

7. The ~~Administrative~~ Director of REO will acknowledge receipt of the appeal in writing to the appellant, and will forward the appeal and current procedures for appeal to the Chair of UAPWC, and the Chair of ACUC concerned.

8. The Chair of ACUC (respondent) must provide a written response to the appeal within ten (10) working days. This written response will include the following information:

   a. All documents available at the ACUC meeting(s) related to the appeal;

   b. All minutes of the ACUC meeting(s) related to the appeal;

   c. A response to the PI's grounds for appeal; and

   d. Any comments on the alleged miscarriage of justice and on the relief requested.

9. For the purposes of an appeal hearing, the Chair of UAPWC may augment UAPWC's membership by adding faculty members who serve on University of Alberta ACUCs. These special members will be asked in advance of a hearing to declare any possible bias; if any such bias is present the member will not be called upon to hear the appeal. Both the appellant and the respondent will have the right to challenge these additional members.

10. REO will convene a meeting of UAPWC, with provisions for presentations by the appellant and the respondent, within thirty (30) working days of receipt of the appeal. The appellant will present the grounds for the appeal and speak to the issues. The respondent will present the reasons for the decision of ACUC and speak to the issues. Both sides may call witnesses and question the other parties. Both sides may have an advisor present during the hearing; however, the advisors may not be called as witnesses or participate in the presentations and questions.

11. UAPWC, having heard the oral presentations of both parties and having reviewed the written and supporting documentation, shall be the sole judge of the facts and shall, by majority vote, reach a decision before adjourning the appeal hearing. The Chair of UAPWC will, within ten (10) days of the appeal hearing, provide a written decision to REO. REO will transmit the decision to the appellant, the respondent and to such other parties as deemed appropriate.

12. If the appeal is upheld, UAPWC will immediately review the animal use application in question.

## DEFINITIONS

| Any definitions listed in the following table apply to this document only with no implied or intended institution-wide use. [▲Top] | |
|---|---|
| **Animal** | Any living non-human vertebrate and any living invertebrate of the class of cephalopoda, including free-living and reproducing larval forms, used for research, teaching, or testing by University staff or trainees. |
| **Principal Investigator (PI)** | A member of the academic staff who is responsible for the design, conduct, supervision and oversight of the care and use of animals in research, teaching or testing as describe in an approved animal use protocol. |

## FORMS

No forms for this Procedure. [▲Top]

## RELATED LINKS

Should a link fail, please contact uappol@ualberta.ca. [▲Top]

Animal Protection Act (Government of Alberta)

Animal Protection Regulation (Government of Alberta)

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Research and Scholarship Integrity Policy (UAPPOL)

Recruitment Policy (Appendix A) Definition and Categories of Academic Staff and Colleagues (UAPPOL)

Recruitment Policy (Appendix B) Definition and Categories of Support Staff (UAPPOL)

University Animal Policy and Welfare Committee (University of Alberta)

**Original Approval Date: June 2, 2005**

**Most Recent Approval Date: November 1, 2015**

**Parent Policy: Animal Ethics Policy**

# Animal Care and Use Roles and Responsibilities Procedure

| | |
|---|---|
| **Office of Administrative Responsibility:** | Research Ethics Office (REO) |
| **Approver:** | Vice-President (Research) |
| **Scope:** | Compliance with this university procedure extends to all academic, support and excluded staff, postdoctoral fellows, and academic colleagues as outlined and defined in the Recruitment Policy (Appendix A and Appendix B: Definitions and Categories); undergraduate and graduate students; emeriti; visitors to campus, including visiting scholars; third party contractors; and volunteers Academic Staff and Colleagues and Support Staff as outlined and defined in Recruitment Policy (Appendix A and Appendix B) in addition to third party contractors, visiting speakers, professors emeriti, undergraduate and graduate students, post-doctoral fellows, volunteers and to all persons who use **animals** for research, teaching or testing. |

## Purpose

– Describe the membership, roles and responsibilities of the University Animal Policy and Welfare Committee (UAPWC) and its sub-committees.

– Describe the membership, roles and responsibilities of the Animal Care and Use Committees (ACUCs).

– Describe the roles and responsibilities of the **animal services units**.

## PROCEDURE

1. UNIVERSITY ANIMAL POLICY AND WELFARE COMMITTEE (UAPWC)

    a. UAPWC is a standing committee of the Vice-President (Research) and is the institutional animal care and use committee for the University of Alberta. UAPWC oversees all animal care and use performed under the jurisdiction of the University to ensure humane and ethical treatment of animals in compliance with University and **Canadian Council on Animal Care (CCAC)** policies, guidelines, standards and procedures. As the institutional animal care and use committee, UAPWC:

        i. recommends to the Vice-President (Research) on policies, procedures and standards for animal care and use at the University;

        ii. oversees and monitors the work of ACUCs to which it has delegated responsibility for reviewing and managing animal use applications and ensures that ACUCs meet or exceed CCAC guidelines on animal care use;

        iii. ensures all animal users are aware of their responsibility to remain in compliance with University standards for animal care and use;

        iv. supports and promotes education and training opportunities for University staff and trainees on the ethics of animal care and use in research, teaching and testing;

        v. advises the Vice-President (Research) about significant events in animal care and use and provides an annual report to the Vice-President (Research) on the status of the University's animal care and use program;

        vi. directs and promotes the post-approval monitoring program for animal care and use;

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   vii.   recommends to the Vice-President (Research) on the construction, maintenance, or closure of University animal facilities;

   viii.   supports and promotes communication among and between the animal services units, **Principal Investigators (PIs)** and ACUCs to facilitate integrated and collaborative delivery of a comprehensive University-wide institutional animal care and use program;

   ix.   reviews regularly (at least every three years) the ~~terms of reference of ACUCs~~ *Animal Ethics Policy and Procedures*;

   x.   hears appeals by PIs of negative decisions by an ACUC (see *Animal Care and Use Committee Appeal Procedure*), and

   xi.   supports a coordinated crisis management program for the animal services units in conjunction with the University's Integrated Emergency Master Plan.

b.   The Vice-President (Research) will appoint the following members, typically for three-year terms: the UAPWC Chair, two graduate student representatives, a representative of faculty animal users, a faculty member who does not engage in animal care and use, and two community members.

The following are *ex officio* members of UAPWC: the Vice-President (Research) or designate, the University Veterinarian, the ~~Executive~~ Director of REO, the Associate/Vice Deans (Research) of the Faculty of Science, the Faculty of Agricultural, Life and Environmental Sciences and the Faculty of Medicine and Dentistry, the Chairs of ACUCs, the Directors of the animal services units, ~~the Biosafety Officer~~a representative of Environment Health and Safety, the ~~Post-Approval Monitoring Coordinator~~Animal Care and Use Consultant and the Chair of the Cross Cancer Institute Animal Care Committee.

c.   UAPWC will meet at least twice per year and as often as necessary to fulfil its responsibilities. Quorum will constitute 50% of the membership plus one, including at least one veterinarian, once ACUC Chair and one community member. REO will serve as the secretariat for UAPWC.

2.   COMMITTEE FOR ANIMAL RESOURCES  (CAR)

a.   CAR is a standing committee of UAPWC. CAR concerns itself with evaluation of and planning for University animal facility use and development. It is comprised of the University Veterinarian, the ~~Executive~~ Director of REO, the Directors of the animal services units, ~~the Biosafety Officer~~a representative from Environment Health & Safety, a representative from Facilities and Operations, the Associate/Vice Deans (Research) of the Faculties in which animal research is undertaken and the Chair of UAPWC.

b.   CAR's specific responsibilities include:

   i.   evaluating and making recommendations regarding upgrades to existing animal facilities, development of new facilities, and closure of facilities that do not meet CCAC guidelines;

   ii.   reviewing and approving all plans for new structures or renovations to existing facilities designed for animals, to ensure that CCAC guidelines for facilities are met or, when possible, exceeded;

   iii.   touring  all University of Alberta animal facilities, at least every three years, to evaluate operations, maintenance and repair requirements;

   iv.   setting priorities/recommendations for any Facility Alteration Request (FAR) submitted by UAPWC;

   v.   providing a consultation service to faculty recruitment processes when animal use is anticipated;

   vi.   developing an integrated communication plan to address the needs of the research community and animal users, in particular to assist Facilities and Operations to provide timely and effective support for animal services units and PIs, in particular those operating alternate animal housing sites in the event of emergency, including power or HVAC failure, fire, flood, intrusion or criminal activities;

   vii.   identifying research trends involving animal use to facilitate long-term planning for facilities and infrastructure requirements.

c.   CAR shall meet at least quarterly, at the call of the Chair and as often as necessary to fulfil its responsibilities. Quorum will constitute 50% of the membership plus one. REO will serve as the secretariat for CAR.

3.   ANIMAL CARE AND USE COMMITTEES (ACUCs)

Responsibility

a. Animal Care and Use Committees are established by and report to UAPWC. ACUCs are: ACUC – Biosciences, ACUC – Livestock, ACUC – Health Sciences 1 and ACUC – Health Sciences 2.

b. Each ACUC is mandated to approve, reject, propose modifications to or terminate the approval of any proposed or ongoing animal use that is subject to review under this Policy. ~~ACUCs provides quarterly reports to UAPWC on its activities.~~ The Chairs of the ACUCs bring forward to UWPAC issues arising from the reviews they oversee. Detailed information on the scope of each ACUC and its membership is ~~contained in the ACUCs' Terms of Reference~~ described below and in the *Animal Care and Use Committee Structure, Application and Review Procedure* and ~~UAPWC~~ in records maintained by REO.

c. ACUCs will review and assess animal use protocols, according to the *Animal Care and Use Committee Structure, Application and Review Procedure*, the *CCAC policy statement on: ethics of animal investigation* and CCAC guidelines on animal use protocol review as well as any other relevant CCAC guidelines and policy statements.

d. ACUCs will work with the staff of the animal services units to ensure compliance with its decisions and with the conditions set out in approved animal use protocols.

e. ACUCs will conduct annual on-site reviews of all the animal care facilities and areas in which animals are used associated with the animal use protocols it reviews. ACUCs will develop alternatives to on-site reviews for research conducted in the field.

f. ACUCs will receive and follow-up unanticipated adverse event reports as required.

g. ACUCs will implement strategies and recommendations arising from post-approval monitoring activities as required.

h. ACUCs will contribute to and participate in CCAC site visits and assessments and other such assessments as required.

Membership

A dynamic and collaborative peer review process is vital to the animal care and use program. Senior administrators at all levels of the institution should acknowledge, support and, wherever possible, recognize the work of current ACUC members and assist with identification and recruitment of new members. Facility veterinarians and staff who serve on ACUCs, like researchers who are also reviewers, must be able to provide support and advocacy for both scientific excellence and ethical and humane use of animals according to CCAC guidelines. ACUCs, the animal services units and the PIs share responsibility for the effectiveness of the university animal care and use program.

i. The ACUC Chair will typically be selected from among the current scientific/faculty membership of ACUC and will be appointed by the Vice-President (Research).

j. Normally, ACUC members will be appointed by REO for terms of no less than two years and no more than four years, renewable to a maximum of eight consecutive years of service. The voting membership will include:

   i. faculty/scientific members experienced in animal care and use and representative of the animal use commonly reviewed by ACUC;

   ii. a veterinarian experienced in experimental animal care and use;

   iii. the Director of the animal services unit, who may also be a veterinarian, most closely aligned with the majority of the animal use reviewed by the ACUC;

   iv. an institutional member whose normal activities, past or present, do not depend on or involve animal use for research, teaching or testing;

   v. at least one and preferably two or more person(s) representing community interests and concerns, who has (have) had no affiliation with the institution, who has (have) not been significantly involved in animal use for research, teaching or testing;

   vi. technical staff representation (either an animal facility or an animal research technician);

   vii. graduate student representation;

      viii.    the Chair of UAPWC or designate, and

      ix.    the ~~Post-Approval Monitoring Coordinator~~Animal Care and Use Consultant.

The ACUC Coordinator, although not a voting member of ACUC, will provide advice and recommendations to ACUC on animal use protocols, CCAC requirements and ACUC processes.

Meetings

k.    ACUCs will typically meet once a month in person or as required at the call of the Chair.

l.    Decisions will, to the extent possible, be made by consensus. If consensus cannot be achieved, decisions must be supported by a simple majority of eligible voting members.

m.    Quorum will constitute the Chair, one veterinarian, one community member and at least two additional scientific members, one of whom must be a faculty member.

n.    ACUC members shall disclose any potential conflict of interest and recuse themselves from meetings or discussions about animal use protocols on which they are named.

o.    ACUC meetings and decisions will be documented in meeting minutes, correspondence and the ~~Research and Ethics Management Online~~online research ethics system. ACUC records and discussions are confidential unless otherwise indicated.

p.    REO will serve as the secretariat for ACUCs and will compile the annual animal use data form for CCAC.

4.    ANIMAL SERVICES UNITS

In order for investigators and teachers to have animals that are healthy subjects for research, teaching or testing and for the University to meet its obligations to protect the health and welfare of the animals, there must be competent veterinary and animal care service providers whose numbers and expertise match the nature and scope of the institutional program.

a.    The animal services units provide animal care and services in support of approved animal use at the University of Alberta.

b.    The animal services units are responsible for ensuring that animal care is in compliance with CCAC guidelines.

c.    All University operated facilities or locations where animals are used or housed must be overseen by and accountable to one of the animal services units.

d.    The animal services units and their Directors and/or Directors of Animal Care report to the Deans of their respective Faculties for administrative matters and are accountable to the University Veterinarian as the designate of the Vice-President (Research) ~~or designate~~ for their compliance with CCAC guidelines.

## DEFINITIONS

Any definitions listed in the following table apply to this document only with no implied or intended institution-wide use.

| | |
|---|---|
| **Animal** | Any living non-human vertebrate and any living invertebrate of the class of cephalopoda, including free-living and reproducing larval forms, used for research, teaching, or testing purposes by University staff or trainees. |
| **Animal Services Units** | Animal facilities established and operated by the University of Alberta as ongoing administrative units to provide veterinary and animal care staff, infrastructure, training, oversight and other resources to support the use of animals in research, teaching and testing by University staff and trainees. They currently are: Agricultural Food and Nutritional Sciences Animal Services (AFNSAS), Health Sciences Laboratory Animal Services (HSLAS) and Science Animal Support Services (SASS). |
| **Canadian Council on Animal Care (CCAC)** | The national organization responsible for setting and maintaining standards for the ethical use and care of animals used in science (research, teaching and testing) in Canada. |
| **Principal Investigator (PI)** | A member of the academic staff who is responsible for the design, |

| | conduct, supervision and oversight of the care and use of animals in research, teaching or testing as describe in an approved animal use protocol. |
|---|---|

## FORMS

No forms for this Procedure. **[▲Top]**

## RELATED LINKS

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University Animal Policy and Welfare Committee (University of Alberta)

**Original Approval Date:** **(Effective Date:** **)**

**Parent Policy: Animal Ethics Policy**

# Animal Care and Use Non-compliance Procedure

| Office of Administrative Responsibility: | Research Ethics Office (REO) |
|---|---|
| Approver: | Vice-President (Research) |
| Scope: | Compliance with this university procedure extends to all academic, support and excluded staff, postdoctoral fellows, and academic colleagues as outlined and defined in the Recruitment Policy (Appendix A and Appendix B: Definitions and Categories); undergraduate and graduate students; emeriti; visitors to campus, including visiting scholars; third party contractors; and volunteers who use **animals** for research, teaching or testing. |

## Purpose

- Provide guidance on how to maintain compliance with approved animal use protocols

- Identify levels of non-compliance, remedial action and consequences

## PROCEDURE

1.  GUIDANCE PRINCIPLES FOR MAINTAINING COMPLIANCE

    a.  A **principal investigator** is responsible for ensuring that his/her animal use protocol (AUP) is complete and detailed so that his/her research team, the Animal Care and Use Committee (ACUC) and the **animal support services unit** all understand all the elements of the proposed animal care and use – what will be done, when and why, who will do the work and how.

    b.  All research team members must have animal use training appropriate for the procedures and techniques they will perform and they must have access to all relevant AUP materials and standard operating procedures (SOPs) (see *Institutional Animal User Training Program Procedure*).

    c.  SOPS must be kept up-to-date (see *Animal Care and Use Standard Operating Procedures Definition, Creation, Approval and Management Procedure).*

    d.  Animal use protocols and amendments must be submitted for ACUC approval well before the research is expected to start or before changes are implemented.

    e.  ACUC approvals are valid for one year. Protocol renewals must be resubmitted for review on an annual basis, and generally must be submitted at least two months before the expiry date for a regular renewal and at least three months in advance for 4th year full renewals, to allow time for ACUC review and revisions.

f. A PI must submit an amendment to ACUC if s/he wants to make changes to an existing animal use protocol. Multiple changes and/or changes which are more likely to cause a change in animal welfare are more likely to be referred to the full ACUC. Any changes to an approved protocol must be reviewed and approved by ACUC before being implemented.

g. The research team must perform only those procedures described in the approved animal use protocol. All members of the research team must have access to the approved animal use protocol and all related procedures. Procedures must only be performed as many times as approved for the experimental design described in the animal use protocol.

h. All procedures performed on an animal must be recorded on a document (e.g. cage card) that is accessible by the veterinarian and animal support services staff.

i. The PI is responsible for ensuring that post-procedure animals are monitored according to the schedule outlined in the approved protocol. The PI should consult with the veterinarian to determine if the monitoring schedule can be modified before submitting an amendment.

j. The PI is responsible for developing and following a reliable humane endpoint monitoring system as described in the approved animal use protocol and for ensuring that staff and trainees working with animals can recognize signs of animal distress and/or compromised health that necessitate intervention or euthanasia.

k. The PI is responsible for timely communication with the veterinarian regarding the health status of post-procedural animals. If an animal develops any complications following a procedure, the research team must promptly communicate those complications to the veterinary staff.

l. The PI must ensure that only research staff listed on the approved animal use protocol perform procedures on animals and s/he is responsible for updating the personnel listed on his/her animal use protocol.


2. PROTOCOL NON-COMPLIANCE

a. Research processes are dynamic and animal use in research poses particular challenges. Concerns may arise for a number of reasons, including knowledge gaps, protocol drift, inadequate record-keeping, equipment failures, communication problems and human error and may be identified by a PI, research team member, veterinary or animal care staff, ACUC members and others. Many of these concerns can be resolved quickly and effectively through collaborative work by the animal support services unit staff, veterinarians, and the research team and then reported to ACUC via the Post-Approval Monitoring log.

b. Protocol non-compliance occurs when the animal use protocol approved by ACUC is not followed. Examples of non-compliance that might be termed protocol drift include accounting errors that result in the use of more animals than approved in the AUP, performing unapproved procedures, using unapproved anesthetics, making unapproved changes to approved animal procedures, failure to provide analgesics as approved, administering unauthorized agents, or unauthorized or untrained persons participating in a research project. Failure to submit an annual renewal of an AUP or failure to make changes or to address concerns as required by ACUC may also constitute non-compliance.

c. The University Animal Policy and Welfare Committee (UAPWC) is the body responsible for determining and working to correct breaches of compliance with approved animal use protocols and SOPs. Because ethics review processes are premised on collegial relations, when faced with protocol non-compliance, the first response should be to find a way to bring the protocol into compliance. Consequently, UAPWC has delegated responsibility to ACUCs to make the initial assessment of non-compliance and to find ways to correct the issue.

d. If concerns about protocol non-compliance are verified, ACUC can require corrections and impose specific conditions for continued animal use, as needed, per University policy and **Canadian Council on Animal Care (CCAC)** requirements. A clearly minor and unintentional misinterpretation of an institutional requirement that has not created a welfare problem for an

animal is an example of where verified protocol non-compliance might lead to an explanation and correction of the situation and no other action will be required.

3. CHRONIC PROTOCOL NON-COMPLIANCE OR CONTRAVENTION OF ANIMAL CARE AND USE STANDARDS

   a. Chronic problems of recurring or continued non-compliance may be reported through Post-Approval Monitoring site visits, ACUC site visits or veterinary reports, and can be reported by anyone.

   b. The details of the chronic issue(s) will be discussed by ACUC at the next meeting. ACUC will notify the PI in writing of the reported non-compliance. An initial meeting of a subcommittee of ACUC with the PI will be arranged as soon as possible to resolve the problem. If there is a subsequent recurrence of problems either associated with one particular animal care protocol or with several animal care protocols involving the same PI, a letter will be sent to the PI outlining the concerns and ACUC will arrange to meet the investigator at the earliest possible time to conduct a fact finding meeting. In the event that a member of ACUC is the PI named in the incident, ACUC will meet with the investigator at the earliest possible time to conduct a fact finding meeting. However, any subsequent discussion of the issue and the course of action to be taken will be conducted confidentially by ACUC in the absence of that member.

   c. ACUC may recommend one or more courses of action in dealing with the resolution of chronic non-compliance issues (see Section 6 below). Measures must be taken by ACUC to ensure that humane treatment and animal welfare problems are effectively dealt with and will not reoccur.

4. SERIOUS NON-COMPLIANCE WITH AN APPROVED PROTOCOL

   a. Serious non-compliance includes any situation where

      i. animals suffer pain, or distress that is not consistent with the approved AUP, or

      ii. the health and welfare of the animals is seriously compromised by inadequate housing, maintenance or monitoring of the animals in question.

   b. In these cases, if the non-compliance endangers additional animals, or if the risk of repeated non-compliance is considered to be high, the initial course of action may include temporary suspension of the animal use protocol. This means that the investigator cannot conduct any new research work associated with the suspended protocol until the incident is reviewed by the full ACUC. The University Veterinarian in consultation with the Chair of the ACUC, will provide written notice to the PI and his/her delegates, the relevant Director and/or animal facility manager and ACUC as soon as possible (typically within 1 working day). The University Veterinarian will then communicate to the PI within 72 hours whether ACUC will extend the suspension beyond this initial period. ACUC has a duty to act as expeditiously as possible.

   c. The University Veterinarian, the Director of the appropriate animal services unit and the Chair and other members of the relevant ACUC will arrange to meet the investigator at the earliest possible time to conduct a fact finding meeting and to determine an initial course of action to deal with the situation, including its causes, consequences and how to manage any remaining animals on the animal use protocol. The initial course of action will be developed at the first meeting, and may be elaborated at subsequent meetings or as additional facts concerning the incident emerge. A quorum of ACUC will make the final determination concerning the seriousness of the incident and of subsequent courses of action.

5. UNAPPROVED ANIMAL USE

a.  Failure to obtain ACUC approval for animal use in research, teaching and testing constitutes non-compliance and is a serious contravention of the Animal Ethics Policy and CCAC requirements.

b.  This non-compliance may be detected by animal services facility staff or veterinarians, the Post-Approval Monitoring program, ACUC and/or Environment Health & Safety (EHS) site visits and can be reported by anyone.

c.  The University Veterinarian, the Director of the appropriate animal services unit and the Chair and other members of the relevant ACUC will arrange to meet the investigator at the earliest possible time to conduct a fact finding meeting and to determine an initial course of action to deal with the situation, including its causes and consequences, and how to manage the animals involved. The initial course of action will be developed at the first meeting, and may be elaborated at subsequent meetings or as additional facts concerning the incident emerge.

6.  ACTIONS AVAILABLE TO UAPWC AND THE ACUC TO ADDRESS NON-COMPLIANCE

a.  ACUC or UAPWC, in the event of an appeal of an ACUC decision, may follow one or more courses of action to address non-compliance and to ensure that humane treatment and animal welfare problems are effectively dealt with and will not reoccur. These may include, but are not limited to:

    i.    Implementing measures to correct the problem and prevent recurrence;

    ii.   Counseling, such as meeting with the PI and research team;

    iii.  Issuing warning letters;

    iv.   Mandating specific animal user training aimed at preventing future incidents;

    v.    Monitoring by the ACUC or its delegates (Animal Care and Use Consultant, Veterinarian) of research, testing, or training that involves animals;

    vi.   Revoking an Alternate Animal Housing permit;

    vii.  Revoking a PI's privileges to provide animal care or to conduct research, testing, or training procedures that involve animals, pending compliance with specific, ACUC-mandated conditions;

    viii. Temporary or permanent suspension of one or all of a PI's animal use protocols

    ix.   Notifying the Department Chair and the Vice/Associate Dean (Research) of its actions;

    x.    Notifying Research Services Office (RSO) that ACUC approval is not in place;

    xi.   Recommending that REO and/or the Vice/Associate Dean (Research) initiate a complaint under the *Research and Scholarship Integrity Policy*;

    xii.  Notifying funding or regulatory agencies, as required.

b.  Depending on the nature of the non-compliance incident(s), suspension of a protocol (temporary or permanent) means that the investigator is either prohibited from conducting any *further* research work under the suspended protocol or any *new* research work under the suspended protocol (one of these two options will be spelled out in the meeting with, or letter to, the PI).

    i.   In all cases where a protocol is suspended, a quorum of the ACUC will outline the steps that must be taken to have the protocol reinstated. Requirements for reactivation of a suspended protocol will vary depending on the nature of the incident(s).

    ii.  Reactivation can occur once the ACUC receives written communication indicating that the PI has implemented the recommendations the ACUC or otherwise met the conditions to the satisfaction of the ACUC. The ACUC may also require follow-up visits and reports on the

conduct of the reinstated research protocol by the veterinary staff, the PAM Coordinator, or a subcommittee of the ACUC. The PI may also be asked to verify ongoing compliance by providing further information in the form of follow up report(s) or through site visits.

   iii. In some cases, reactivation may not be advised. If a permanent suspension of animal use is imposed, a PI may only be permitted to transfer grants and activities to another lab or to engage the services of one of the animal services units, which may conduct his/her research without direct involvement by the PI or his/her personnel.

c. PIs are expected to cooperate fully and expeditiously in the review process. In the event of non-cooperation by the investigator with the ACUC Chair, the ACUC, the University Veterinarian and/or his/her delegates approved by the ACUC, the ACUC may withdraw approval for all protocols belonging to a PI until the cooperation is received.

d. If the problems are determined to be largely due to actions of animal support services staff not supervised by the PI, the ACUC will document the problem to the University Veterinarian and the Director of the relevant facility, and the Director will take appropriate action to correct, re-train or remove the staff member(s) responsible.

e. Verified details of the circumstances of serious incidents of noncompliance or chronic noncompliance will be retained on file in the online research ethics system and with the Research Ethics Office, and the Principal Investigator in question will receive a copy.

f. A formal letter containing the details of the ACUC recommendations will be sent to the PI with copies to the Chair, Head or Dean of the investigator's academic unit. If the ACUC permanently suspends an investigator's research protocols, copies will also be sent to the VP Academic/Provost, and this could lead to a formal complaint under the *Research and Scholarship Integrity Policy.*

7. Non-compliance that cannot be corrected by ACUC working with the concerned animal users and veterinary/animal care staff will be referred to the Office of the Provost and Vice-President (Academic) according to the *Research and Scholarship Integrity Policy.*

## DEFINITIONS

Definitions should be listed in the sequence they occur in the document (i.e. not alphabetical).

| Any definitions listed in the following table apply to this document only with no implied or intended institution-wide use. [▲Top] | |
|---|---|
| **Animal** | Any living non-human vertebrate and any living invertebrate of the class of cephalopoda, including free-living and reproducing larval forms, used for research, teaching or testing by University staff or trainees. |
| **Principal Investigator** | A member of the academic staff named in the animal use protocol responsible for the animal use or an external investigator conducting animal use under the auspices of the University. |
| **Animal Support Services Units** | Agricultural Food and Nutritional Sciences Animal Services (AFNSAS), Health Sciences Laboratory Animal Services (HSLAS) and Science Animal Support Services (SASS) |
| **Canadian Council on Animal Care (CCAC)** | The CCAC is the national organization responsible for setting and maintaining standards for the ethical use and care of animals used in science (research, teaching and testing) in Canada. |

## FORMS

| No forms for this Procedure. [▲Top] |
|---|

## RELATED LINKS

Should a link fail, please contact uappol@ualberta.ca. [▲Top]

[Agreement on the Administration of Agency Grants and Awards by Research Institutions](#) (Tri-Council)

[Animal-Based Projects Involving Two or More Institutions](#) (CCAC)

[Canadian Council on Animal Care Guidelines](#) (CCAC)

[On-line Research Ethics System](#)

[Research Ethics Office](#)

**Original Approval Date: June 2, 2005**

**Most Recent Approval Date:  November 1, 2015**

**Parent Policy: Animal Ethics Policy**

# ~~Special Requests for~~Animal Care and Use Alternate Animal Housing Procedure

| | |
|---|---|
| **Office of Administrative Responsibility:** | Research Ethics Office (REO) |
| **Approver:** | Vice-President (Research) |
| **Scope:** | Compliance with this university procedure extends to all academic, support and excluded staff, postdoctoral fellows, and academic colleagues as outlined and defined in the Recruitment Policy (Appendix A and Appendix B: Definitions and Categories); undergraduate and graduate students; emeriti; visitors to campus, including visiting scholars; third party contractors; and volunteers~~Academic Staff and Colleagues and Support Staff as outlined and defined in Recruitment Policy (Appendix A and Appendix B) in addition to third party contractors, visiting speakers, professors emeriti, undergraduate and graduate students, post-doctoral fellows, volunteers and to all persons~~ who use **animals** for research, teaching or testing. |

## Overview

Animal facilities are expensive and complex to plan, design, build and maintain. Existing and planned facilities must meet **Canadian Council on Animal Care (CCAC)** guidelines. In addition, animal care is best carried out or overseen by animal health professionals whose primary goal is animal health and welfare in the service of high quality science. In cases where a **Principal Investigator (PI)** has a compelling justification to hold animals for more than 24 hours in an area that is not managed by one of the **animal services units**, the design and use of the alternate animal housing and the care of the animals housed, therefore, must follow CCAC guidelines and will require active collaboration between the PI, the animal services unit and the relevant Animal Care and Use Committee (ACUC).

## Purpose

Identify the process for application, approval and supervision of alternate animal housing.

## PROCEDURE

Animals obtained by the University of Alberta should be housed in facilities operated by one of the animal services units whenever possible. A PI may apply to house animals in alternate animal housing, provided:

  a.   The PI has a compelling justification to establish and maintain alternate animal housing.

  b.   The alternate animal housing is appropriately constructed or renovated for animal care and use.

  c.   The Committee for Animal Resources (CAR), a subcommittee of the University Animal Policy and Welfare Committee (UAPWC), approves the alternate animal housing design and its proposed use.

  d.   The alternate animal housing is linked to an active, approved animal use application.

  e.   An ACUC approves the animal use in the alternate animal housing.

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f.  The PI and/or his/her research personnel have the training necessary to provide animal care on par with care provided by the animal services units.

g.  One of the animal services units provides appropriate veterinarian oversight and services for animal care and use in the alternate animal housing.

1.  APPROVAL OF THE ALTERNATE ANIMAL HOUSING

    The PI must apply to CAR for approval of construction of a new space to house animals or renovation of any existing space in order to house animals in that space.

    a.  As part of its deliberations, CAR will determine if the research needs can be met in existing facilities and will consult with the Chair of the relevant ACUC concerning approval of the animal use. Once CAR has approved the project and the construction or renovation is underway, the PI should provide updates to CAR and confirm when the work is complete.

    b.  CAR will then conduct a site visit, and pending completion of any deficiencies, provide written approval of the alternate animal housing.

2.  APPROVAL TO HOUSE ANIMALS IN ALTERNATE ANIMAL HOUSING

    a.  Once CAR has approved the alternate animal housing, the PI must apply to ACUC for approval to house animals in that location as part of the regular animal use application process. The application should include the PI's justification for the alternate animal housing and CAR's final approval of the housing, as well as an operations manual for animal care in that location and the contract services agreement with the relevant animal services unit.

    b.  Once ACUC has approved the request to house animals in the alternate animal housing, animals may be housed there. The alternate animal housing will then be subject to annual site assessments by ACUC, as well as any other conditions ACUC may impose.

    c.  Animals on other animal use protocols may not be housed in that alternate animal housing unless ACUC has approved a specific application for such an arrangement and the housing will accommodate the additional animals.

3.  OPERATION OF ALTERNATE ANIMAL HOUSING

    a.  Ongoing approval for alternate animal housing is contingent on ongoing requirement for the housing as well as continuing approval for the animal use protocol and maintenance of a contract services agreement with the animal services unit.

    b.  The PI must inform ACUC, the animal services unit and the University's Environmental Health and Safety Office when alternate animal housing is no longer required.

    c.  The PI must inform the animal services unit and the University Biosafety Officer within twenty-four (24) hours of learning that an animal is missing from alternate animal housing, or if evidence of insect or rodent pests is found in the alternate animal housing location.

## DEFINITIONS

| Any definitions listed in the following table apply to this document only with no implied or intended institution-wide use. [▲Top] | |
|---|---|
| **Animal** | Any living non-human vertebrate and any living invertebrate of the class of cephalopoda, including free-living and reproducing larval forms, used for research, teaching, or testing purposes by University of Alberta staff and trainees. |
| **Canadian Council on Animal** | The national organization responsible for setting and maintaining |

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| | |
|---|---|
| Care (CCAC) | standards for the ethical use and care of animals used in science (research, teaching and testing) in Canada. |
| Principal Investigator (PI) | A member of the academic staff who is responsible for the design, conduct, supervision and oversight of the care and use of animals in research, teaching or testing as described in an approved animal use protocol. |
| Animal Services Units | Animal facilities established and operated by the University of Alberta as ongoing administrative units to provide veterinary and animal care staff, infrastructure, training, oversight and other resources to support use of animals in research, teaching and testing by University staff and trainees. They currently are: Agricultural, Food and Nutritional Sciences Animal Services (AFNSAS), Health Sciences Laboratory Animal Services (HSLAS) and Science Animal Support Services (SASS). |

## FORMS

No Forms for this Procedure. [▲Top]

## RELATED LINKS

Should a link fail, please contact uappol@ualberta.ca. [▲Top]

Agreement on the Administration of Agency Grants and Awards by Research Institutions (Government of Canada)

Animal Protection Act (Government of Alberta)

Animal Protection Regulation (Government of Alberta)

Canadian Council on Animal Care Guidelines (CCAC)

Recruitment Policy (Appendix A) Definition and Categories of Academic Staff and Colleagues (UAPPOL)

Recruitment Policy (Appendix B) Definition and Categories of Support Staff (UAPPOL)

Research and Scholarship Integrity Policy (UAPPOL)

University Animal Policy and Welfare Committee (University of Alberta)

3

**Original Approval Date: June 2, 2005**

**Most Recent Approval Date: November 1, 2015**

**Parent Policy: Animal Ethics Policy**

# Institutional Animal User Training Program Procedure

| | |
|---|---|
| **Office of Administrative Responsibility:** | Research Ethics Office (REO) |
| **Approver:** | Vice-President (Research) |
| **Scope:** | Compliance with this university procedure extends to all academic, support and excluded staff, postdoctoral fellows, and academic colleagues as outlined and defined in the Recruitment Policy (Appendix A and Appendix B: Definitions and Categories); undergraduate and graduate students; emeriti; visitors to campus, including visiting scholars; third party contractors; and volunteers~~Academic Staff and Colleagues and Support Staff as outlined and defined in Recruitment Policy (Appendix A and Appendix B) in addition to third party contractors, visiting speakers, professors emeriti, undergraduate and graduate students, post-doctoral fellows, volunteers and to all~~ persons who use **animals** for research, teaching or testing. |

Overview

Consistent with its commitment to the highest possible standards in animal care and use in research, teaching and testing, the University has established and maintains an institutional animal user training program that meets or exceeds the requirements of the **Canadian Council on Animal Care (CCAC)** and is consistent with CCAC guidelines and standards.

Purpose

– Define the responsibilities of different members of the animal care and use program with respect to animal user training.

– Define the components of the animal user training program.

– Define the training required for animal users.

– Define how animal user training records will be validated and maintained.

## PROCEDURE

1. GENERAL REQUIREMENTS AND RESPONSIBILITIES

   All staff and trainees involved in the care and use of animals for research, teaching and testing must possess: an appreciation of the ethical issues surrounding the use of animals for scientific or pedagogical purposes in Canada and adequate knowledge and technical skills to humanely carry out approved procedures and to promote quality science based on the appropriate use of animals by skilled individuals.

   a. **Principal Investigators (PIs)** are responsible for ensuring that all personnel working with animals under their supervision are named on an approved animal use protocol and are adequately trained to appropriately and humanely carry out procedures on the animals in their care.

   b. Animal Care and Use Committees (ACUCs) are responsible for verifying that University personnel have the training necessary to carry out animal care and use procedures.

c. Directors of the **animal services units** are responsible for ensuring delivery of species and technique specific training consistent with CCAC standards, institutional training requirements and approved standard operating procedures and for ensuring staff and trainees are trained for the animal care and use they conduct.

d. The University Animal Policy and Welfare Committee (UAPWC) is responsible for oversight of the institutional animal user training program.

e. REO is responsible for maintaining secure, consolidated, online records of animal user training.

f. The Post-Approval Monitoring program will include assessments of animal users' competence and may include recommendations for additional training.

g. All members of the animal care and use program, including the staff of the animal services units, are responsible for ensuring that research personnel working with animals are humanely carrying out the approved procedures assigned to them.

2. ANIMAL USER TRAINING PROGRAM

The Institutional Animal User Program has two major components: theoretical and practical.

a. Ethics of Animal Use Training

All University staff and trainees involved in the use of animals for research, teaching and testing must complete Ethics of Animal Use training, commonly known as Part 1 training.

i. Part 1 training includes the following core topics: regulations and animal welfare, moral, legal and ethical issues and the concept of the Three Rs (Reduction, Refinement and Replacement).

ii. Part 1 training is based on material developed by CCAC and other CCAC accredited institutions, including the University of Alberta. UAPWC will review the Part 1 training, at minimum every three years. REO will, on behalf of UAPWC, manage and maintain the course content.

iii. Part 1 training is normally delivered online. REO manages access to the online course and maintains secure online records of all users who have successfully completed ethics of animal use training for reference by members of the animal care and use program.

b. Species, Technique and Other Training in Animal Use

All staff and trainees who handle or care for animals used in research, teaching or testing must be knowledgeable about the animals in their care and trained in the appropriate technical skills for the work they will perform.

i. Part 2 training is organized by species. The five core components of Part 2 species training are: basic biology, husbandry, handling and restraint, euthanasia, zoonoses and human safety.

ii. Directors of the animal services units are responsible for ensuring delivery and oversight of Part 2 training for animals regularly used in University research, teaching and testing, consistent with the animal work commonly supported by each unit.

iii. Directors of the animal services units are also responsible for ensuring delivery and oversight of techniques or procedures training relevant to the research, teaching and testing they support, either in conjunction with the Part 2 training or separately.

iv. Training provided by the animal services units will incorporate both approved unit level Standard Operating Procedures (SOPs) for animal care and use and approved institutional SOPs.

v. If two or more animal services units provide Part 2 training in the same species or the same procedures/techniques, the training should be consistent.

vi. Directors of the animal services units may delegate species and procedure/technique training duties to their staff commensurate with their qualifications. Competent trainers and supervisors are essential to maintaining high standards for animal care and use and trainer designations should be assigned appropriately.

vii. Directors of the animal services units will ensure that all training is supported by relevant, up-to-date resource materials and that the training content is documented.

viii.   Directors of the animal services units will maintain teaching/training animal use protocols so that ACUCs review the training programs offered by the animal services units, at minimum every four years.

ix.   Directors of the animal services units will ensure appropriate records of the training provided by their staff are maintained. Successful user training results will be transmitted to REO using forms developed by REO for that purpose. REO will maintain these training records in a secure online system for access by members of the animal care and use program in the course of their work.

x.   Directors of the animal services units should also ensure research personnel receive orientations to their facilities, equipment and processes, including unit-level operational SOPs.

3.   TRAINING REQUIREMENTS AND EXCEPTIONS

a.   All University staff and trainees who are involved in the use of animals or who work in facilities where animals are housed or used must complete Part 1 Animal User training provided by the University.

   i.   Although CCAC does not require community members serving on ACUCs to complete ethics of animal use training, they may take Part 1 training if they wish.

b.   University staff and trainees must complete appropriate species training plus frequently used technique or procedure training before they will be allowed to work with animals.

   i.   PIs who do not handle animals are encouraged to complete Part 2 training and relevant techniques and procedures training.

   ii.   PIs who do not complete Part 2 training must employ research personnel with the required training and authorize them to enforce appropriate standards and practices in animal care and use. Whether or not they work with or handle animals, PIs are responsible for the care and use of animals performed by their staff and trainees.

   iii.   Notwithstanding the foregoing, PIs who wish to house animals in their research areas must complete Part 2 species training and the animal services unit may require additional training for the research personnel providing animal care.

   iv.   Personnel who do not participate in hands on experimental procedures or work in areas in which animals are used or housed are not required to complete Part 2 training.

   v.   Directors of the animal services units may provide or authorize abbreviated species and procedures or techniques training for staff and trainees who will normally work under the supervision of trained animal users. This will be accepted as protocol specific training only and will not constitute Part 2 training.

c.   New University staff and trainees who have been trained in animal care and use at other institutions may present REO with evidence of comparable training.

   i.   The Chair of UAPWC may accept external Part 1 training in the ethics of animal use in lieu of the University administered training. REO will maintain records of the external training if it is accepted.

   ii.   Directors of the animal services units may accept external species and technique or procedure training in lieu of such training provided by the University. If the external training is accepted, Directors will provide to REO both details of the user's training and confirmation that the user's training meets the University's standards.

d.   If an animal services unit does not have the expertise to provide species or specialized procedure or technique training, the Director and the PI are responsible for identifying other sources of expertise and training.

   i.   Directors of the animal services units may designate alternate trainers who may be PIs, other University personnel or other individuals not associated with the University. Designation of alternate trainers should include details of their qualifications and expertise as well as how the alternate training will be provided.

   ii.   Directors of the animal services units will maintain records of alternate trainers and the animal user training they provide. Successful user training results will be transmitted by the animal services unit to REO following a standard template. REO will maintain these training records online for secure access by members of the animal care and use program in the course of their work.

4.   SUPPLEMENTAL TRAINING

    a.   By providing continuing education opportunities for animal users, the University can promote best practices and an institutional response to new procedures, the three Rs and societal views.

    b.   As an animal user's responsibilities and activities change, s/he will be required to complete additional species and/or technique or procedure training.

    c.   Post- Approval Monitoring personnel, veterinarians and animal care staff will meet with PIs and research staff to discuss and observe procedures and make recommendations, as necessary, about ways of addressing possible deficiencies.

    d.   In cases of sub-optimal or unsuitable animal handling procedures, ACUCs, Directors of the animal services units and the Post-Approval Monitoring Coordinator are all authorized to require additional training.

## DEFINITIONS

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| | |
|---|---|
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## FORMS

No Forms for this procedure. [▲Top]

## RELATED LINKS

Should a link fail, please contact uappol@ualberta.ca. [▲Top]


Agreement on the Administration of Agency Grants and Awards by Research Institutions (Government of Canada)

Animal Protection Act (Government of Alberta)

Animal Protection Regulation (Government of Alberta)

Canadian Council on Animal Care Guidelines (CCAC)

University Animal Policy and Welfare Committee (University of Alberta)

Recruitment Policy (Appendix A) Definition and Categories of Academic Staff and Colleagues (UAPPOL)

Recruitment Policy (Appendix B) Definition and Categories of Support Staff (UAPPOL)

Research and Scholarship Integrity Policy (UAPPOL)

**Governance Executive Summary**
**Action Item**

| Agenda Title | Proposed Revisions to Standing Committee Terms of Reference - GFC University Awards and Scholarship Committee (UASC) including a name change to GFC Undergraduate Awards and Bursaries Committee (UABC) |
|---|---|

### Motion

| THAT General Faculties Council approve the proposed changes to the GFC Undergraduate Awards and Scholarship Committee Terms of Reference including a name change to the GFC Undergraduate Awards and Bursaries Committee (UABC) as set forth in Attachment 1, and as recommended by the GFC Undergraduate Awards and Scholarship Committee and the GFC Executive Committee, to take effect July 1, 2019. |
|---|

### Item

| Action Requested | ☐ Approval ☒ Recommendation |
|---|---|
| Proposed by | Frank Robinson, Chair, GFC Undergraduate Awards and Scholarship Committee |
| Presenter(s) | Frank Robinson, Chair, GFC Undergraduate Awards and Scholarship Committee |

### Details

| Responsibility | General Faculties Council |
|---|---|
| The Purpose of the Proposal is (*please be specific*) | The proposal is before the committee to approve the revised terms of reference for the GFC UASC. |
| Executive Summary (*outline the specific item – and remember your audience*) | In April 2017, General Faculties Council endorsed the report of the ad hoc Committee on Academic Governance including Delegated Authority and approved the following principles documents to guide the implementation of the committee's recommendations, the revisions to standing committees and terms of reference, and to serve as a basis for future efforts to evaluate and improve academic governance at the University of Alberta. <br> · Principles for Delegation of Authority <br> · Principles of Standing Committee Composition <br> · Roles and Responsibilities of Members <br> · Meeting Procedural Rules for GFC and its standing committees <br><br> The report noted that UASC was operating within its mandate and recommended no major changes in the short term. However, the *ad hoc* Committee recognized that UASC could play a strategic role in the awards process to ensure alignment with institutional goals as well as play a more defined role in monitoring the awards process. As such, the report recommended that UASC propose revisions to the committee's terms of reference to provide a more strategic and comprehensive mandate and role, and report annually to GFC to provide insight on the awards process. <br><br> UASC had questions about some of the delegated authority that it holds and will continue to look into the history and purpose behind the delegations regarding the minimum value of a major award and the minimum value of an award administered by SFS. The Committee may |

| | bring forward recommendations to adjust their delegated authority from GFC once that review is completed.<br><br>The draft terms of reference propose the following changes:<br><br>1. Withdrawal of the delegation: "Approve the definition of a full normal course load for purposes of awards where more than one Faculty is involved." With some investigation of the history of the committee, it became clear that this delegation was made in response to an issue determining the definition of a full normal course load for a student in a cooperative degree program. Because the university has established criteria for students following a non-standard path (including cooperative degrees) that are published in the Awards for Undergraduate Students Procedure, the committee recommends withdrawing this delegation.<br><br>2. Change the committee name from the Undergraduate Awards and Scholarship Committee to the Undergraduate Awards and Bursaries Committee (UABC). This change would better reflect the mandate and role of the committee and remove the present redundancy; a scholarship is a type of award.<br><br>3. Change the Ex-officio member, the Dean of Students, to the Assistant Dean, Student Success, as this is the most appropriate person to be a resource for the committee.<br><br>4. Add one staff member from a Faculty who is responsible for the administration of undergraduate awards and bursaries in order to add the expertise and perspective on how awards are handled at the Faculty level.<br><br>5. Increase the number of undergraduate students from 2 to 4 with at least 2 being members of GFC. The committee felt that broad student representation was essential to the work of the committee and did not want to limit the student voice to only GFC members.<br><br>6. Add as a responsibility additional to delegated authority, 5.3, regarding receiving regular reports on available undergraduate financial supports.<br><br>7. Add an annual report to GFC on the manner in which UABC has exercised its delegated authority, and to highlight concerns regarding undergraduate financial supports. |
|---|---|
| Supplementary Notes and context | |

**Engagement and Routing** (Include meeting dates)

| Consultation and Stakeholder Participation | *Those who are actively **participating**:*<br>· *ad hoc* Committee on Academic Governance Including Delegated Authority<br>· GFC Executive Committee Transition Committee |
|---|---|

| (parties who have seen the proposal and in what capacity) <br><br> <For information on the protocol see the Governance Resources section Student Participation Protocol> | · UASC |
| --- | --- |
| | *Those who have been **consulted**:* <br> · Report of the *ad hoc* Committee on Academic Governance Including Delegated Authority (endorsed by GFC April 21, 2017) Appendix 6: List of Consultations <br> · UASC <br> · GFC Executive Committee Transition Committee |
| | *Those who have been **informed**:* <br> · UASC <br> · General Faculties Council <br> · Board of Governors has been provided with brief highlights of the work of the *ad hoc* Committee on Academic Governance Including Delegated Authority |
| Approval Route (Governance) (including meeting dates) | GFC Undergraduate Awards and Scholarship Committee – January 8, 2019 <br> GFC Executive Committee – January 14, 2019 <br> General Faculties Council – January 28, 2019 |

**Strategic Alignment**

| Alignment with *For the Public Good* | ***For the Public Good*** <br> Objective 21: Encourage continuous improvement in administrative, governance, planning, and stewardship systems, procedures, and policies that enable students, faculty, staff, and the institution as a whole to achieve shared strategic goals. | |
| --- | --- | --- |
| Alignment with Institutional Risk Indicator | Please note below the specific institutional risk(s) this proposal is addressing. | |
| | ☐ Enrolment Management <br> ☐ Faculty and Staff <br> ☐ Funding and Resource Management <br> ☐ IT Services, Software and Hardware <br> ☒ Leadership and Change <br> ☐ Physical Infrastructure | ☒ Relationship with Stakeholders <br> ☒ Reputation <br> ☐ Research Enterprise <br> ☐ Safety <br> ☒ Student Success |
| Legislative Compliance and jurisdiction | *Post-Secondary Learning Act* (PSLA) <br> GFC Executive Committee Terms of Reference <br> GFC Undergraduate Awards and Scholarship Committee Terms of Reference | |

Attachments (each to be numbered 1 - <>)

1. Attachment 1: Proposed GFC Undergraduate Awards and Bursaries Committee (UABC) Terms of Reference
2. Attachment 2: Current GFC Undergraduate Awards and Scholarship Committee (UASC) Terms of Reference

*Prepared by:* University Governance

**UNIVERSITY OF ALBERTA**
**UNIVERSITY GOVERNANCE**

## 1. Mandate and Role of the Committee

The Undergraduate Awards and Bursaries Committee (UABC) is a standing committee of General Faculties Council (GFC) charged with approving new awards and bursaries, and amendments to existing awards and bursaries for undergraduate students in accordance with the UAPPOL Awards and Bursaries for Students Policy and its Procedures. From time to time, the Chair will bring forward items where the Provost and Vice-President (Academic), in consultation with other units or officers of the University, is seeking the advice of the committee within its areas of responsiblitiy.

## 2. Areas of Responsibility

a. Approval of new undergraduate awards and bursaries and amendments to existing undergraduate awards and bursaries
b. New policy or revisions to existing policy governing awards and bursaries for undergraduate students

## 3. Composition

**Voting Members (11)**

### Elected by GFC (10)

- 5 academic staff members (A1.1, A1.5, A1.6, A1.7), at least 3 of whom are members of GFC (with no more than one representative from any Faculty) – one of whom will be elected by the committee to serve as Chair and one elected to serve as Vice-Chair
- 4 undergraduate students, at least 2 of whom are members of GFC
- 1 staff member (A1.0, A2.0 and/or S1.0, S2.0) from a Faculty who is responsible for the administration of undergraduate awards

### Cross Appointed (1)

- 1 academic staff member cross-appointed from the GFC Academic Standards Committee (ASC), elected by ASC

**Non-voting Members**
- Assistant Registrar, Student Financial Support
- Senior Representative, Office of Advancement
- Assistant Dean Student Success, Office of the Dean of Students
- GFC Secretary
- University Secretary

## 4. Delegated Authority from General Faculties Council

*Should be reviewed at least every three years and reported to GFC.*

4.1 Approve new awards and bursaries for students other than graduate students registered in the Faculty of Graduate Studies and Research (FGSR)

4.2 Approve proposed changes to any award or bursary previously approved by UABC

4.3 Approve the minimum value of a major award for undergraduate students, and to review that value regularly.

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*1 of 2*

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4.4 Approve the minimum value of an undergraduate award administered by the Student Financial Support Office, and to review that value regularly.

## 5. Responsiblities Additional to Delegated Authority

5.1 Recommend to GFC on any new policy and procedures governing awards and bursaries for undergraduate students.

5.2 Regularly review GFC policy and procedures on undergraduate awards and bursaries and recommend changes where required.

5.3 Receive regular reports for the purpose of identifying trends and gaps in the financial support available to students.

## 6. Sub-delegations from the GFC Undergraduate Awards and Bursaries Committee
*Should be reviewed at least every three years and reported to GFC.*

None.

## 7. Limitations to Authority
The following further refines or places limitations on authorities held by or delegated to UABC:

7.1 GFC has delegated the authority to approve awards and bursaries for graduate students registered in FGSR to FGSR.

7.2 Awards and bursaries to which both undergraduate students and graduate students registered in FGSR are eligible must be approved by both FGSR and UABC.

## 8. Reporting to GFC
The Committee shall regulary report to GFC with respect to the manner in which the Committee has exercised its delegated authority and to highlight any identified trends, gaps, and concerns in regards to undergraduate financial support available to students at the University of Alberta.

## 9. Definitions
Staff – as defined by the Recruitment Policy (Appendix A) Definition and Categories of Academic Staff, Administrators and Colleagues and Recruitment Policy (Appendix B) Definition and Categories of Support Staff in UAPPOL

Awards and Bursaries – as defined by the Awards and Bursaries for Students Policy in UAPPOL

## 10. Links
Awards and Bursaries for Students Policy
Awards for Undergraduate Students Procedure
Bursaries for Students Procedure
Creation of New Awards and Bursaries for Undergraduate Students Procedure
University Medal Requirements Procedure

Approved by General Faculties Council: [date]

*University Governance is the official copy holder for files of the Board of Governors, GFC, and their standing committees.*
*2 of 2*

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# GFC Undergraduate Awards and Scholarship Committee Terms of Reference

## 1. Authority

The Post-Secondary Learning Act gives General Faculties Council (GFC) responsibility, subject to the authority of the Board of Governors, over "academic affairs" (section 26(1)) and "to make rules and regulations respecting academic awards" (section 26(1)(m)). GFC delegates certain of these powers to its Undergraduate Awards and Scholarship Committee. GFC has thus established an Undergraduate Awards and Scholarship Committee (GFC UASC), as set out below.

The complete wording of the section(s) of the Post-Secondary Learning Act, as referred to above, and any other related sections, should be checked in any instance where formal jurisdiction or delegation needs to be determined.

## 2. Composition of the Committee

**Elected by GFC**
Five members from Categories A1.1 and A1.6 and their counterparts in A1.5 and A1.7 (EXEC 18 NOV 1996)
One academic staff cross-representative from the Academic Standards Committee (ASC)
Two undergraduate students

**Non-voting Resource Members**
Assistant Registrar, Student Awards (EXEC 11 JAN 2010)
Dean of Students or delegate (EXEC 10 SEPT 2001)
Senior Development Officer, Office of Development (EXEC 11 JAN 2010) (EXEC 04 OCT 2010)

## 3. Mandate of the Committee

GFC UASC has delegated authority from GFC to:

    1. approve new undergraduate awards;

    2. approve changes to any undergraduate student award already approved by GFC UASC;

    3. approve the minimum value of a major award for undergraduate students, and to review that value regularly;

    4. approve the minimum value of an undergraduate award administered by the Student Awards Office, and to review that value regularly; (EXEC 05 MAY 2008)

    5. approve the definition of a full normal course load for purposes of awards where more than one Faculty is involved;

    6. recommend to the GFC Executive Committee on any new policy or revisions to existing policy governing awards for undergraduate students;

    7. consider any proposal emanating from any member of the University community for changes to GFC undergraduate student awards policy, and where deemed appropriate by GFC UASC, recommend changes to the GFC Executive Committee.

## 4. Committee Procedures

The Student Awards Office is responsible for listing on the Awards website all approved awards that meet the minimum value. (EXEC 08 SEP 2003)

## 5. Additional Reporting Requirements

The GFC Executive Committee requested that the GFC UASC provide for information a copy of the undergraduate awards approved by GFC UASC (EXEC April 8, 2002, Minute 97).

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Approved October 4, 2010 (EXEC)

Item No. 8

**Governance Executive Summary**
**Advice, Discussion, Information Item**

| Agenda Title | Proposed Revisions to Standing Committee Terms of Reference – GFC Executive Committee |
|---|---|

**Item**

| Proposed by | GFC Executive Committee |
|---|---|
| Presenter | David Turpin, Chair, GFC Executive Committee |

**Details**

| Responsibility | General Faculties Council |
|---|---|
| The Purpose of the Proposal is (please be specific) | The proposal is before the committee to discuss proposed revisions to the terms of reference. |
| Executive Summary (*outline the specific item – and remember your audience*) | The Report of the *ad hoc* Committee on Academic Governance including Delegated Authority, endorsed by GFC on April 21, 2017, directed the Executive Committee to establish two groups related to the implementation of the recommendations. These groups were established and have been active over the last year: <br>· a transition committee to advise and guide the implementation of the recommendations <br>· a working group to revise COSA terms of reference in alignment with the guiding principles for GFC and its committees <br><br>The report also contained a number of recommendations for changes to the GFC Executive Committee terms of reference. These recommendations, in addition to the Principles of Committee Composition and Delegation of Authority, have been incorporated into the proposed terms of reference. The terms have also been updated to remove items which are no longer relevant or are contained elsewhere. <br><br>Added to the terms of reference: <br>- Clarification on when the Executive Committee can act on behalf of GFC and how this is decided (item 4.1) <br>- Oversight of governance rules and procedures including regular review of delegations of authority, ongoing evaluations and reforms to academic governance (item 4.6) <br>- Discussion of focus and goals of annual Summit with the Board of Governors (Item 5.1) <br>- *Committee composition* - one Dean, elected by GFC, is added to the composition in place of one elected academic staff <br>- *Committee composition* - removal of the restriction of one academic staff per faculty except for Arts and Science that could have 2 academic staff if they were from different departments. Any Faculty is now allowed 2 academic staff on the committee; this aligns with the Principles of Committee Composition <br><br>Other proposed changes <br>- Removal of cross representative from Executive to Academic Planning Committee <br><br>Removed from terms of reference |

| | |
|---|---|
| | - Academic Awards – update as GFC delegated approval of awards to the GFC Undergraduate Awards and Scholarship Committee (UASC), May 27, 2002<br>- Access to student records – this is covered by UAPPOL<br>- Access to information held by GFC Standing Committees – this is covered under Freedom of Information and Protection of Privacy Act<br><br>Items that remain in the terms of reference pending further work:<br>- A number of delegations related to programs (course designators, re-numbering of courses at the same level, course challenges, service courses)<br>- Approval of consolidated examinations |
| Supplementary Notes and context | |

**Engagement and Routing** (Include proposed plan)

| | |
|---|---|
| Consultation and Stakeholder Participation | *Those who are actively **participating**:*<br>· GFC Executive Committee<br>· GFC Executive Committee Transition Committee<br><br>*Those who have been **consulted**:*<br>· Report of the ad hoc Committee on Academic Governance Including Delegated Authority (endorsed by GFC April 21, 2017) Appendix 6: List of Consultations<br>· General Faculties Council, January 28, 2019 |

**Strategic Alignment**

| | | |
|---|---|---|
| Alignment with *For the Public Good* | **For the Public Good**<br>Objective 21: Encourage continuous improvement in administrative, governance, planning, and stewardship systems, procedures, and policies that enable students, faculty, staff, and the institution as a whole to achieve shared strategic goals. | |
| Alignment with Institutional Risk Indicator | Please note below the specific institutional risk(s) this proposal is addressing. | |
| | ☐ Enrolment Management<br>☐ Faculty and Staff<br>☐ Funding and Resource Management<br>☐ IT Services, Software and Hardware<br>☒ Leadership and Change<br>☐ Physical Infrastructure | ☒ Relationship with Stakeholders<br>☒ Reputation<br>☐ Research Enterprise<br>☐ Safety<br>☐ Student Success |
| Legislative Compliance and jurisdiction | *Post-Secondary Learning Act* (PSLA)<br>GFC Executive Committee Terms of Reference | |

Attachments (each to be numbered 1 - <>)

1. Proposed GFC Executive Committee Terms of Reference
2. Current GFC Executive Committee Terms of Reference

*Prepared by:* University Governance

1. **Mandate and Role of the Committee**
   The Executive Committee is the executive body of General Faculties Council (GFC). It is charged with preparing the GFC agenda and carrying out the functions delegated to it by GFC. The Committee acts on behalf of GFC in areas as defined in the terms of reference. The Chair may bring forward items to the committee for advice.

2. **Areas of Responsibility**
   a. Act on behalf of General Faculties Council as defined in section 4.1
   b. Preparation of agendas for GFC
   c. Faculty Councils – membership, quorum, control function, sub-delegations
   d. Student Judiciary matters
   e. Academic procedural matters
   f. Governance rules and procedures oversight

3. **Composition**
   **Voting Members (14)**
   *Ex-officio (5)*
   - President, Chair
   - Provost and Vice-President (Academic)
   - Vice-Provost and University Registrar
   - Vice-President (Academic), Graduate Students' Association
   - Vice-President (Academic), Students' Union

   *Elected from and by GFC (9)*
   - 7 academic staff (A1.1, 1.5, 1.6, 1.7), one of whom will be elected by the committee to serve as Vice-Chair
   - 1 Dean
   - 1 undergraduate student

   **Non-Voting Members**
   - University Secretary
   - GFC Secretary

4. **Delegated Authority from General Faculties Council**
   *Should be reviewed at least every three years and reported to GFC.*

   4.1 <u>Act on behalf of General Faculties Council</u> on matters that must be decided before the next regularly scheduled GFC meeting and where it is not feasible to call a special meeting of GFC. The committee will first determine if the matter cannot wait and, if so determined, will proceed to consider it and act on behalf of GFC and report on the decision at the next GFC meeting.

   4.2 <u>Prepare the agenda</u> for all regular and special meetings of General Faculties Council. The committee will receive items from:
   a. GFC Standing Committees
   b. GFC members
   c. University Administration
   The committee may choose to provide comments to GFC on any agenda items.

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*1 of 3*

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4.3 Faculty Councils
   a. Approve composition and quorum provisions of Faculty Councils
   b. Exercise supervision of control functions regarding Faculty Councils (section 29 and 30 of PSLA), with recommendations to GFC when appropriate

4.4 Student Judiciary Matters
   a. Consider changes to Code of Student Behaviour, Code of Applicant Behaviour, Practicum Intervention Policy for approval or placement on GFC agenda
   b. Receive and discuss annual reports on student conduct, including residence discipline statistics, and appeals and place on the GFC agenda for information
   c. Authority to take whatever special measures are necessary to ensure timely and fully-constituted hearing by the University Appeal Board (UAB), Academic Appeals Committee (AAC) and Practice Review Board (PRB)

4.5 Academic Procedures
   a. Approve the Academic Schedule
   b. Provide for the preparation and publication of the University Calendar
   c. Approve changes to wording on Parchments
   d. Approve proposals for consolidated exams
   e. Approve new course designators and re-numbering of courses at the same level
   f. Make final decisions on course challenges that cannot be resolved through other means

4.6 Governance Procedural Oversight
   a. Ensure delegations from GFC are reviewed at least every 3 years
   b. Make recommendations to GFC regarding terms of reference, composition, and procedures for GFC and its standing committees

## 5. Responsibilities Additional to Delegated Authority

5.1 Joint Summit of the Board and GFC – the chair will consult annually with the committee on the focus and goals of the annual joint meeting

## 6. Sub-delegations from GFC Executive Committee
*Should be reviewed at least every three years and reported to GFC.*

Sub-delegations - the following items have been delegated by this committee as noted:
6.1 Academic Schedule
   a. Technical matters relating to the publication of the University Calendar have been sub-delegated to the Registrar
   b. Special arrangements to depart from the official Final Examination Schedule have been sub-delegated to Faculty Councils,  subject to challenge by GFC

## 7. Limitations to Authority
The following further refines or places limitations on authorities held by or delegated to EXEC:
7.1 Decisions made on behalf of GFC  under section 4.1 must be reported at the next GFC meeting.
7.2 In ordering the GFC agenda, the committee will be mindful of student membership terms when considering matters of particular concern to students.

## 8. Reporting to GFC
The committee should regularly report to GFC with respect to its activities and decisions.

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**9.   Definitions**
Academic staff – as defined by the Recruitment Policy (Appendix A) Definition and Categories of Academic Staff, Administrators and Colleagues


**10. Related Links**
Academic Schedule Policy and Procedure
Consolidated Final Examinations Procedure
Parchment Procedure
GFC Policy Manual Section 37: Course and minor program changes
University Calendar, Regulations



Approved by General Faculties Council: [date]

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# GFC Executive Committee Terms of Reference

## 1. Authority
The *Post-Secondary Learning Act* (*PSLA*) gives General Faculties Council (GFC) responsibility, subject to the authority of the Board of Governors, over "academic affairs" (section 26(1)). GFC has established an Executive Committee. The items referred to in subsections (d) (e) (g) and (j) of Section 26(l) of the *Act* are delegated to the Executive Committee. (GFC 08 SEP 1966)

The complete wording of the section(s) of the *PSLA*, as referred to above, should be checked in any instance where formal jurisdiction needs to be determined.

## 2. Composition of the Committee
**Ex Officio**
-Chair - The President
- Provost and Vice-President (Academic)
- Vice-Provost and University Registrar
- Graduate Students' Association Vice-President (Academic)
- Students' Union Vice-President (Academic)
**Elected** (to be elected from and by GFC)
- 8 members from Categories A1.1 and A1.6 and their counterparts in A1.5 and A1.7*, providing that there shall be no more than one representative from any Faculty except that both the Faculty of Arts and the Faculty of Science may have two representatives providing they come from different Departments.
- 1 undergraduate student

* See UAPPOL Recruitment Policy (Appendix A) Definition and Categories of Academic Staff.

## 3. Mandate of the Committee

To act as the executive body of General Faculties Council and, in general, carry out the functions delegated to it by General Faculties Council. (GFC 08 SEP 1966) (GFC 12 FEB 1996)

> 1. **Urgent Matters**
> The power to deal with any matters that cannot be deferred is delegated to the Executive Committee which shall determine which matters are to be considered urgent. (GFC 09 AUG 1966)
>
> 2. **Routine Matters**
> Matters which are routine in carrying out the policies approved by General Faculties Council are delegated to the Executive Committee. (GFC 08 SEP 1966)
>
> 3. **Academic Awards**
> Responsibility, as it concerns all students other than graduate students registered in the Faculty of Graduate Studies and Research, for making rules and regulations respecting academic awards shall be delegated by General Faculties Council to the Executive Committee. (GFC 02 DEC 1966)
>
> 4. **Academic Schedule**
> > a. Delegation
> > *Post-Secondary Learning Act (PSLA)* Section 26(l)(j) follows:
> > 26(1) Subject to the authority of the board, a general faculties council is responsible for the academic affairs of the university and, without restricting the generality of the foregoing, has the authority to…

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(j) determine the date for the beginning and end of lectures in the university and also the beginning and end of each university term….

b. Academic Schedule Changes
The GFC Executive Committee has delegated authority from General Faculties Council to approve the Academic Schedule. Any changes to the Academic Schedule proposed after the Schedule has been approved must be submitted to the Executive Committee. That committee will determine which changes are sufficiently substantial and require, therefore, GFC approval and which ones are routine in nature and could be dealt with by the Executive Committee. (GFC 20 SEP 1982)

5. **Agendas of General Faculties Council**

GFC has delegated to the Executive Committee the authority to decide which items are placed on a GFC Agenda, and the order in which those agenda items appear on each GFC agenda.

When ordering items, the GFC Executive Committee will be mindful of any matters that are of particular concern to students during March and April so that the student leaders who bring those items forward are able to address these items at GFC before their terms end. (EXEC 06 NOV 2006)

When recommendations are forwarded to General Faculties Council from APC, the role of the Executive shall be to decide the order in which items should be considered by GFC. The Executive Committee is responsible for providing general advice to the Chair about proposals being forwarded from APC to GFC.

With respect to recommendations from other bodies and other GFC committees, however, the role of the Executive Committee shall be to examine and debate the substance of reports or recommendations and to decide if an item is ready to be forwarded to the full governing body. The Executive Committee may decide to refer a proposal back to the originating body, to refer the proposal to another body or individual for study or review, or to take other action in order to ready a proposal for consideration by General Faculties Council. When the GFC Executive Committee forwards a proposal to GFC, it shall make a recommendation that GFC endorse; endorse with suggested amendments; not endorse; or forward the proposal with no comment. (GFC 30 JUN 1992)

6. **Calendar**

Section 26(1) of the *PSLA* empowers GFC to

(g) provide for the preparation and publication of the university calendar.

(Technical matters relating to the printing and publication of the Calendar are delegated to the Registrar (GFC May 31, 1976).

7. **Examinations**

Section 26(1) of the *PSLA* empowers GFC to

(d) determine the timetables for examinations, and for lectures and other instruction in each Faculty.

(e) consider and make decisions on the reports of faculty councils as to the appointment of examiners and the conduct and results of examinations in the faculties.

a. Subject to challenge by General Faculties Council, the Executive Committee has accorded to Faculty Councils the authority to deal with special arrangements regarding final examinations. (EXEC 15 FEB 1967)
b. The Executive Committee approves requests from Faculties which wish to schedule common examinations (See Section 52.8 of the GFC Policy Manual). (GFC 27 OCT 1980)

## 8. Faculty Councils

a.      Appointments to Faculty Councils

The Executive Committee of General Faculties Council shall be authorized to make appointments to Faculty Councils on their recommendations. (GFC 25 NOV 1968)

With respect to appointments of external members to Faculty Councils, approval of the positions by the Executive Committee, on behalf of GFC, shall suffice. (GFC 28 JUN 1976)

b.      Control Functions re: Faculty Councils

The responsibility of exercising supervision of the control functions referred to in Sections 29 and 30 of the *PSLA* shall be delegated to the Executive Committee which shall make recommendations to General Faculties Council when appropriate. (GFC 02 DEC 1966)

> *Post-Secondary Learning Act* Section 29(1)
>
> A faculty council may
> (a) determine the programs of study for which the faculty is established,
> (b) appoint the examiners for examinations in the faculty, conduct the examinations and determine the results of them,
> (c) provide for the admission of students to the faculty,
> (d) determine the conditions under which a student must withdraw from or may continue the student's program of studies in the faculty, and
> (e)authorize the granting of degrees,
> subject to any conditions or restrictions that are imposed by the general faculties council.

c.      Quorum

Subject to the approval of the GFC Executive Committee, each Faculty shall establish its own Faculty Council quorum provision(s), on the understanding that nothing in those provisions shall take away from those persons eligible to attend their right to do so.  In the summer (ie, the months of May through August), the members of the Faculty Council who are available shall have power to deal with matters that arise. (EXEC 09 SEP 2002)

## 9. Student Records:  Requests for Access for Research Purposes

The Policy on Student Records: Contents, Access, Use and Protection of the GFC Policy Manual was approved by the Board of Governors on January 26, 2007 for inclusion in the University of Alberta Policies and Procedures On-Line (UAPPOL).

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## 10. **Access to Information Held by GFC Standing Committees**

Where a GFC Standing Committee does not accede to a request for access to specified material in its hands, there shall be a right of appeal to the Executive Committee of GFC. A formal request may also be made for specified material through the University of Alberta's Information and Privacy Office. (EXEC 30 AUG 1999)

A committee may, if it chooses, seek the advice of the Executive Committee on requests for release of information or refer requests for decision to the Executive Committee. (GFC 31 MAR 1981)

## 11. **Student Residence Codes**

New student residence codes shall be submitted to the GFC Campus Law Review Committee which will make a recommendation to the GFC Executive Committee. The GFC Executive has the delegated authority from General Faculties Council to approve new residence codes.

Any changes to existing student residence codes shall be submitted to the GFC Campus Law Review Committee. Any major changes to existing student residence codes shall be forwarded with the recommendation of the CLRC to the GFC Executive for final approval.

Any student residence with a code or similar set of regulations is required to report annually on the operation of that code to General Faculties Council through its Campus Law Review Committee and its Executive Committee. (GFC 22 SEP 1997)

## 12**. Membership on the GFC University Appeal Board (UAB), GFC Academic Appeals Committee (AAC) and GFC Practice Review Board (PRB)**

GFC delegates to the Executive Committee the authority to take whatever special measures are necessary to ensure timely and fully-constituted hearings by the University Appeal Board (UAB), Academic Appeals Committee (AAC) and Practice Review Board (PRB).  These measures may include, but are not limited to, the extension of terms of office and the appointment of additional members for a temporary period. (EXEC 10 MAY 1999)  (GFC 21 JUNE 1999)

## 13. **Course Challenges and Service Courses**

a. In cases where a challenge cannot be resolved … the Secretary to General Faculties Council shall … have the challenge placed before the Executive Committee of GFC for final resolution. In those cases where the Executive Committee is of the opinion that a policy issue is involved, it will place the issue before General Faculties Council.

The Executive Committee shall decide whether a course challenge is frivolous and an appeal from such a decision shall lie to General Faculties Council.

b. If agreement is reached between a servicing and a serviced Faculty on a proposed withdrawal of a service course, then approval need not be sought from General Faculties Council nor from the Executive Committee.

If agreement cannot be reached between the servicing and serviced Faculty on a proposed withdrawal of a service course, the matter should be referred to the GFC Executive Committee.

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If the Executive Committee is unable to resolve the problem, the matter should be referred to General Faculties Council.

14. **Course Numbering and Naming System**

a. Recommendations to renumber courses at the same level shall be proposed by the appropriate Faculty Council, circulated according to the procedures described in Section 37.1, and, in the absence of unresolved challenges, submitted to GFC Executive for ratification. Course renumbering to a different number level will normally be accomplished by deleting the current course and introducing a new course at the new level. (GFC 17 JUN 1996)

b. New course subject names and their abbreviations shall be proposed by the Faculty Council, circulated according to the procedure described in Section 37.1, and, in the absence of unresolved challenges, submitted to GFC Executive for ratification. (GFC 17 JUN 1996)

Also see Section 37.

For appeals against decisions on program challenges, see Courses, Section 37.1.E.

15. **Terms of Office for GFC Members**

The GFC Executive is authorized to specify, after consultation with the Faculty concerned, the term of office of each elected member whose term has not been specified. (GFC 08 SEP 1966)

16. **Institutional Marking and Grading Policies and/or Procedures**

To consider advice or recommendation from the GFC ASC on institutional marking and grading policies and/or procedures. (GFC 31 MAY 2005)

17. **Institutional Term Work Policies and/or Procedures**

To consider advice or recommendation from the GFC ASC on institutional term work policies and/or procedures. (GFC 31 MAY 2005)


## 4. Committee Procedures

**Attendance**

It is expected that members will attend all meetings of the Executive Committee. If a member knows in advance that an absence of two or more consecutive meetings is unavoidable, the Chair should be consulted. (GFC 09 FEB 1981)

**Voting**

a. When Acting as an Executive Committee
When dealing with matters specifically delegated to it by General Faculties Council, the Executive Committee shall conform to the Voting procedures set out in the *General Terms of Reference – Standing Committees of General Faculties Council (GFC).*

b. When Acting for General Faculties Council

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When dealing with other matters on behalf of General Faculties Council, the Executive Committee shall be authorized to take action providing the number of votes in favor of such action is greater than 50% of the total number of members.  (On the basis of the present membership of fourteen (1992), eight votes in favor of a proposal would be sufficient.)  The Chair will have the right to cast a vote or abstain as the Chair sees fit. (EXEC 20 SEP 1971)

## 5. Additional Reporting Requirements

Executive Committee minutes shall be filed with GFC for information. (EXEC 06 NOV 2006)

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Approved November 26, 2007 (GFC)

**UNIVERSITY OF ALBERTA**
**UNIVERSITY GOVERNANCE**

*"In putting forward its recommendations, the GFC Nominating Committee (NC) will ensure the best possible match between prospective members and the committees to which they are nominated, and ensure the broadest possible base of representation and diversity." (NC Terms of Reference)*

This document serves as an information resource about the procedures utilized by the NC to fill membership vacancies on GFC Standing Committees, university-level Appeal Bodies, and other committees to which GFC elects.

This document:

- aligns to the "*Principles for General Faculties Council Standing Committee Composition*" (approved by GFC/April 2017) and the *GFC NC Terms* (approved by GFC/April 2018).
- ensures that accountability, transparency, accessibility, and diversity are upheld by the NC throughout the membership replenishment processes
- summarizes the operating framework that supports the NC in successfully achieving its mandate
- outlines the timelines which steer the annual membership replenishment process held each spring

OPERATING FRAMEWORK

Both annually and on an in year basis, the GFC NC works vigorously to ensure the replenishment of elected students and staff to GFC Standing Committees, university-level Appeal Bodies, and other committees to which GFC elects, as specified within each of the committees/bodies approved Terms of Reference and Committee Composition. The NC will work to inform and engage GFC and the broader community in its replenishment strategies to encourage individuals to serve in academic and judiciary governance positions.

Student members of GFC Standing Committees serve a one year term, running May 1 to April 30, while staff members serve three year terms, running July 1 to June 30. Student Panelists may receive terms of appointment of up to 2 years, with overlapping membership terms particularly in spring and summer, while academic staff panel members usually serve for three year terms.

PROCEDURES RELATING TO APPLICATION FOR GFC STANDING COMMITTEE MEMBERSHIP (Form Submission)

Each spring, advertisements to fill anticipated membership vacancies across academic and judiciary governance in the coming academic year are widely broadcasted by the NC. Interested students and staff are called upon to complete and submit a GFC Committee application form. Upon commencement of the school year, additional applications are encouraged as needed to fill vacancies which may arise.

An application form is completed and submitted online and requires contact details of the applicant, a brief Summary of Interest (of approx 150 words), and a brief Biography Sketch (of approx 150 words). The application form allows an interested applicant to self-nominate or to be nominated by a colleague. Each student and staff committee application form is initially received (electronically) by the GFC Nominating Committee Coordinator (NCC) who verifies the eligibility of the applicant against the vacancy selection criteria in accordance to the committee's terms of reference and prepares the package of nominees for NC review.

SPECIAL PROCEDURES RELATING TO APPLICATION FOR JUDICIARY PANEL MEMBERSHIP (Form Submission)

University-level appeal procedures are conducted with the utmost sensitivity and confidentiality, respecting the privacy of all parties involved. Student and staff elected to judiciary panel positions fulfill a unique and significant membership role for the institution. To be considered for membership as a Faculty, Undergraduate Student, or Graduate Student Judiciary Panel an individual must complete and submit a Judiciary Panel Application form. The online form requires three (3) personal references provided by student applicants. Reference checks are conducted in strict confidence by the University Appeals and Compliance Officer (ACO).

For the benefit of educating and ensuring a solid understanding of judiciary panel membership, the ACO will initiate an introductory meeting with each judiciary panel applicant. Given the specialized nature of membership (ie. compliance, training requirements, hearing schedule availability, and term of office duration), this informal discussion offers the applicant an ideal opportunity to become informed about the role, and to receive insights regarding panel membership expectations. Interested individuals may contact the ACO in advance of application with questions or for more details prior to application submission.

In consultation with the ACO, an individual will determine if they wish to continue through the judiciary membership application path, or to decline. Alternatively, the individual may consider applying to serve in academic governance, on a GFC Standing Committee or another committee to which GFC elects and submit an application form accordingly.

NOMINATING COMMITTEE MEETING PROCEDURES

NC members must act fairly and objectively in selecting candidates for membership positions. NC members must disclose to the committee any relationship they may have with a nominee before consideration by the committee of that person's nomination. If a committee member determines that his or her relationship with a nominee is such that the committee member cannot act fairly and objectively in considering that person's nomination, or if the committee determines that the nature of the relationship is such that there is a reasonable perception that the committee member cannot act fairly and objectively, that committee member shall recuse himself or herself from the discussion of that nomination and the vote on that nomination.

An NC serving member may submit their name for consideration (by the NC) to fill a membership seat, as per vacancy selection criteria. In this instance, the NC member (as a Nominee) will not participate in any of the Committee's deliberations associated with filling the vacancy. The Committee Chair will ask the NC member to withdraw from the meeting until deliberation on the vacancy concerned is concluded.

NC meetings are held in-camera to enable a confidential and vigorous review of all nominations submitted to fill membership vacancies. The NC Chair will open an in-camera meeting session by ensuring quorum is achieved, presenting the order of discussion, addressing the confidential materials presented, and calling for any conflict declarations by the NC members in attendance.

To help inform membership recommendations, the NC will:

- Review the approved committee compositions of all committees and bodies to which GFC elects
- Review the attributes and relevant qualifications of each applicant (as submitted by the application form)
- Discuss each vacancy selection criteria in accordance to committee membership composition
- The Chair will call for a motion to put forward a name for recommendation. Once a motion is seconded, further discussion will take place, followed by a simple majority vote by show of hand.
- The NC may agree not to fill a vacancy at hand should there be no eligible applicants, and determine an alternate strategy to replenish the seat.
- The NC has the delegated authority to put forward term lengths of less than three years to provide an overlap of experience in committees of GFC.

CONFIRMATION OF NC RECOMMENDATIONS WITH APPLICANTS

Upon reaching a decision for membership recommendation, a candidate (successful or unsuccessful) will be contacted by the NCC regarding the outcomes. A successful candidate will be asked to confirm their continued membership interest by accepting the NC's recommendation for nomination. Upon consent, the candidate's name will go forward to GFC for appointment approval.

COMMUNICATION OF NC RECOMMENDATIONS TO GFC

As mandated, the NC will put forward the name of a candidate recommended to fill a membership position to GFC (by means of a "GFC Nominating Committee Report to GFC" ) for acceptance by GFC, as final approver of all appointments to its Standing Committees, university-level Appeal Bodies and other committee to which GFC elects. An NC report may include a single candidate or several, depending upon the recommendations available.

Upon receipt and consideration of an NC Report (sent electronically), a GFC member may submit an additional nomination. A GFC member cannot self-nominate and must be nominated by a fellow GFC member. Additional nominations must be received by the NCC before the specified deadline and supported by a completed and submitted application form. The eligibility of additional applicants will be verified by the NCC against the vacancy selection criteria. If additional and eligible nominations come forward, an election by GFC may be held to determine a final candidate.

At the conclusion of the nomination period, with no additional names received, a "GFC Nominating Committee Report to GFC" is considered as approved. All recommended candidates put forward by the NC are declared as elected.

PROCEDURES RELATING TO ANNUAL MEMBERSHIP REPLENISHMENT

Each spring, in preparation for the annual membership replenishment process, the NCC compiles a list of vacancies that are anticipated in the upcoming academic year based upon student terms ending April 30 and staff terms ending June 30.

Broad advertising by the NC of anticipated vacancies call upon students and staff to fill new terms of office commencing May 1 (students) and July 1 (staff). Campus-wide broadcasting and engagement efforts are collectively shared by NC, GFC, Faculties, SU, GSA, AASUA and NASA through verbal and electronic means, utilizing numerous networking channels to reach across constituencies.

An Annual Membership Replenishment Schedule is prepared and published by the NCC to inform the university of key NC meeting dates in the current academic year, and membership application deadlines established to fill anticipated vacancies in the next academic year.

The judiciary and academic governance application deadlines are staggered in order to adequately fill positions on university-level Appeal Bodies and GFC Standing Committees. An individual interested in becoming involved in governance, may wish to be considered for a judiciary panel position or a GFC Standing Committee position. In this instance, the individual may complete and submit an applicable application to each area of interest.

Upon reaching the application deadlines, eligible student and staff applications are compiled as part of the confidential meeting package for consideration by the GFC NC at the annual replenishment meetings.

PROCEDURES RELATING TO THE FILLING OF IN YEAR VACANCIES THROUGHOUT THE YEAR

Some committee seats may remain unfilled as a result of no applications coming forward. Unexpected vacancies may also arise as a result of a serving member resigning from their elected seat *(eg, approved leaves: maternity, medical, admin, sabbatical; and departures: retirement, graduation, academic program/job change).*

Current vacancies are published online to ensure the GFC and broader campus community becomes informed. Online communication tools including: GFC Agendas, NC website and various linkages to other campus websites make reference to the GFC Committee "Current Vacancies". Efforts to encourage applications throughout the year are promoted through verbal announcements (ie. GFC meetings, Deans and Chairs Council meetings, GFC Committee Orientations ) and by written notification (eg, social networking, direct email requests by fellow students and colleagues.)

In response to a vacancy advertisement, an interested individual must complete and submit a GFC Committee Application form. Upon receipt of the application, the NCC will ensure the applicant meets the vacancy selection criteria prior to forwarding on to NC members for consideration.

The time sensitivity to fill an ad-hoc vacancy will be assessed by the NC Chair and NCC on a case-by-case basis. In urgent cases, voting by NC members will be managed electronically in lieu of an in-person meeting. If the matter is not considered urgent, consideration of the nominee will be deferred to an upcoming meeting of the NC. Ultimately, an application recommended by the NC for membership will be put forward to GFC for final approval. If no additional names come forward by GFC upon conclusion of the nomination period, the recommended candidate is declared as elected, with a membership term effective immediately upon approval.

RELATED UNIVERSITY OF ALBERTA LINKS:

*To learn more about what we do at University Governance*

*How to Get Involved in Academic and Judiciary Governance*

*Learn more about the GFC Nominating Committee*

*Visit the University Governance Home Page at:  www.governance.ualberta.ca*

Item No. 11

**Governance Executive Summary**
**Advice, Discussion, Information Item**

| Agenda Title | Conflicts of Interest Amendment Act – Updated Draft Employee Code of Conduct |
|---|---|

**Item**

| Proposed by | Vice-President (Finance & Administration) and Office of General Counsel |
|---|---|
| Presenter | Brad Hamdon, General Counsel<br>Wayne Patterson, Vice-Provost & Associate Vice-President (Human Resources) |

**Details**

| Responsibility | Vice-President (Finance & Administration) and Office of General Counsel |
|---|---|
| The Purpose of the Proposal is (please be specific) | To provide General Faculties Council with an update and overview of the draft Code of Conduct: Employees' Obligations Respecting Conflicts of Interest, a new code created to comply with the university's obligations in respect to the Conflicts of Interest Amendment Act. |
| Executive Summary (*outline the specific item – and remember your audience*) | As previously reported, the *Conflicts of Interest Amendment Act* came into force in December of 2017.  It imposes an obligation on public agencies, including the University of Alberta, to have Codes of Conduct governing their employees and boards of governors.  Those Codes of Conduct must be approved by the Ethics Commissioner by April 30, 2019 to be effective June 30, 3019.<br><br>Both the Employee and the Board of Governors' Codes of Conduct must address the following:<br><br>– A requirement to act impartially in carrying out their duties;<br>– Restrictions on acting in self-interest or furthering private interests;<br>– Disclosure of real and apparent conflicts of interest;<br>– Restrictions on the acceptance of gifts, including monetary limits and maximum values; and<br>– Limitations on concurrent employment or appointments with a process for approval.<br><br>The University has existing policies and procedures and (for employees) collective agreement language in place to comply with the majority of the Act's requirements. Accordingly, the draft Codes of Conduct are mostly a re-statement of existing language that has been approved through the normal governance approval processes or through collective bargaining.<br><br>The Ethics Commissioner has indicated that she will not accept a Code(s) of Conduct with hyperlink references to other policy document. As a result, we have adopted a "copy and paste" approach, copying what we believe are the most relevant sections from existing University policies, procedures and collective agreements to address the requirements of the legislation.<br><br>Two areas where gaps have been identified are with respect to the acceptance of gifts and concurrent employment. |

| | |
|---|---|
| | Following extensive internal consultation over the past year, it was determined that the more effective approach was to separate the Employee Code from the Board Code given the very different roles played by employees and board members. A draft of the Employee Code was presented to GFC Executive on April 9, 2018 and then to GFC on April 30. The draft was provided to the Office of the Ethics Commissioner for review on April 30.<br><br>The Ethics Commissioner has provided feedback to the University on our initial draft Codes and on a subsequent draft provided in the summer of 2018. The University provided a third revised draft to the Ethics Commissioner in October of 2018 but received no direct feedback on that draft.<br><br>In November and December, the five universities in Alberta worked with the Ethics Commissioner to develop "guiding principles" related to the areas where agreement could not be reached: Gifts and the Requirement for Reporting and Approval of Concurrent Employment and Appointment. The guiding principles have been utilized in preparing the latest draft Codes.<br><br>The attached final draft of the Code was submitted to the Ethics Commissioner on January 16, 2019 and we believe it will be approved by the Ethics Commissioner on shortly. We are waiting for final confirmation of that approval. An annotated version of the Employee Code has been provided to GFC to illustrate the original source of the content of the Code (i.e. existing policy or procedure, collective agreements) along with any new language drafted in accordance with the guiding principles approved by the Ethics Commissioner. The annotated version demonstrates that the vast majority of the language is taken from existing policy language.<br><br>The attached is presented at this time for discussion only<br><br>Final documents will come forward to GFC on February 25, 2019, for recommendation to the Board of Governors. |
| Supplementary Notes and context | |

**Engagement and Routing** (Include proposed plan)

| | |
|---|---|
| Consultation and Stakeholder Participation | Informed: GFC Exec, PEC-O, PEC-S, Deans Council<br>Consulted: PEC-O, Deans Council, General Counsel, external counsel<br>Actively Participating:<br>• Brad Hamdon, General Counsel<br>• Wayne Patterson, Vice-Provost and Associate Vice-President (Human Resources)<br>• Joyce Hiller, Director, HR Operations, Human Resource Services<br>• Giovana Bianchi, Senior Administrative Officer, Office of the Vice-President (Finance & Administration)<br>• John Law, Special Advisor, Faculty and Staff Relations<br>• Marj Cayford, Senior Human Resource Partner, Human Resource Services |

Item No. 11

| | • Marion Haggarty-France – University Secretary |
|---|---|

**Strategic Alignment**

| Alignment with *For the Public Good* | Excel: To excel and achieve our full potential as an institution and as individuals, the University of Alberta will sustain a learning and research culture that inspires, supports, and champions high professional standards and outstanding achievements in basic and applied research and scholarship, creative activity, administration, and governance. | |
|---|---|---|
| Alignment with Institutional Risk Indicator | Please note below the specific institutional risk(s) this proposal is addressing. | |
| | ☐ Enrolment Management<br>☐ Faculty and Staff<br>☐ Funding and Resource Management<br>☐ IT Services, Software and Hardware<br>☐ Leadership and Change<br>☐ Physical Infrastructure | ☐ Relationship with Stakeholders<br>☒ Reputation<br>☐ Research Enterprise<br>☐ Safety<br>☐ Student Success |
| Legislative Compliance and jurisdiction | Conflicts of Interest Act<br>Bill 27: Conflicts of Interest Amendment Act | |

Attachments (each to be numbered 1 - <>)

1. Code of Conduct: Employees' Obligations Respecting Conflicts of Interest – Annotated Version (29 pages)

*Prepared by:* Brad Hamdon, General Counsel

# Code of Conduct:

## Employees' Obligations Respecting Conflicts of Interest

## 5th Submission (Annotated)

January 16, 2019

# Table of Contents

# A. Preamble

The highest Standards of Ethical Conduct are essential to the success of any great institution. Academic freedom, open inquiry and the pursuit of truth, which form the foundation of an institution of higher learning, depend on a shared commitment to the highest Standards of Ethical Conduct.

> **Comment [A1]:** Source: Ethical Conduct and Safe Disclosure

The substantive language in this Code has been copied from existing University policies, procedures and collective agreements.

# B. Application of this Code

This *Code of Conduct: Employees' Obligations Respecting Conflicts of Interest* (the "Code") applies in respect of all Representatives of the University, including the President of the University when acting as an Employee or meeting their obligations as a senior official or designated senior official under the *Conflicts of Interest Act*, but does not include:

- Members of the Board of Governors or the President of the University when acting as a Board Member, who are governed by the separate *Code of Conduct: Board of Governors;*

- Non-employees, including professors emeriti, visiting academics, volunteers, contractors, or others acting on behalf of the University. The obligations and standards of conduct owed by these persons are contained in the individual policies and procedures provided by the University.

Together, the *Code of Conduct: Employees' Obligations Respecting Conflicts of Interest* and the *Code of Conduct: Board Members' Obligations Respecting Conflicts of Interest* work together to exemplify the University's ethical standards, provide individuals with principles to guide their behaviour, and emphasize the importance the University places on the avoidance of real or apparent conflicts of interest. Any questions about the interpretation or operation of this Code may be addressed to the Vice-Provost and Associate Vice-President (Human Resources).

This Code is intended to operate alongside existing collective agreements but does not purport to change any rights or obligations negotiated between the University and any union.

# C. Global Definitions

The following definitions apply to all sections of this Code, excepting where a definition is specifically provided as otherwise in a section of this Code, within a collective agreement, or in the Handbook of Terms and Conditions of Employment For Management and Professional Staff (Excluded):

**Allowed Conflict:** Conflict that can be managed in a way that is compliant with legislation, considers, protects and serves the interests, integrity and reputation of the University, and will withstand the test of reasonable and independent scrutiny.

> **Comment [A2]:** Source: Conflict of Interest and Conflict of Commitment Reporting and Assessment Procedures

**Board of Governors:** The Governors of the University of Alberta as defined in the *Post Secondary Learning Act* P-19.5 2003.

**Conflict(s)**: Conflict of interest, conflict of commitment, or institutional conflict.

**Conflict of Commitment**: A situation whereby the external or personal activities, undertakings or relationships of a person are so demanding or organized in such a manner or are otherwise such that they may interfere with the person's obligations to the University or to others or institutions that are separate from the University but to whom the person owes an obligation because of their relationship to the University.

**Conflict of Interest:** A situation in which there is or may be perceived to be a divergence between the private financial benefit or financial interest or personal benefit of a person, **family member**, or an **outside party**, and that person's obligations to the University, such that an impartial observer might reasonably question whether related actions to be taken or decisions made by the person would be influenced by consideration of the person's own interests.

**Conflict Review Officer**: According to those relationships detailed in the disclosure report, the next appropriate senior reporting officer.

**Disclosure Report:** A report that discloses conflict-type specific considerations relevant to deciding whether a person wishing to proceed with an activity that would or may give rise to conflict should be allowed to undertake that activity.

**Family Member**: Includes a person's spouse or adult interdependent partner or another individual to whom the person is related by blood, marriage or adoption.

**Financial Benefit:** The receipt or expectation of anything of monetary value, including pay or salary or other payments for services (e.g. consulting fees or honoraria), equity (shares, options or the like) security or other ownership interests, and intellectual property rights (e.g. patents, copyrights, royalties or carried interests or options related to such rights)

**Financial Interest:**
(A) Ownership in the form of shares in a privately held company or

(B) Ownership in a publicly traded company in the form of shares with a market value of greater than $50,000.00 or representing more than 10% of the company's outstanding shares or

(C) Where the person is a member of a board of either a privately held or publicly traded company.

**Good Faith** (or "**Good Faith Disclosure**"): A submission of information, that is based on reasonable belief and is not malicious, frivolous or vexatious, to the appropriate University authority.

**Institutional Conflict:** A situation in which the University, or an institution, has an existing relationship with a party with which the University or the institution proposes to enter into an activity such that an impartial observer might reasonably question whether the existing relationship might prejudice decisions of the University or an institution with respect to the activity.

**Office of Administrative Responsibility:** The area within University administration, that is ultimately responsible for administering a particular policy and/or procedure.

**Outside Party**: Includes any corporation, partnership, sole proprietorship or other legal entity organized for the furtherance of a non-University interest (for profit or otherwise) and clients or patients to whom the person or the University provides individual professional services

**Personal Benefit:** The receipt or expectation of any personal (workplace or otherwise) benefit of a non-monetary value.

**President of the University** (or "**President**"): The individual appointed by the Board of Governors to the position of President pursuant to Section 81 of the *Post-Secondary Learning Act,* SA 2003 c P-19.5.

- For greater certainty, the President is the "chief executive officer" of the University for the purposes of the *Conflicts of Interest Act*, as that term is defined at Section 23.92(1)(b) of that Act.

- For greater certainty, the President is both a "senior official" and a "designated senior official" for the purposes of the *Conflicts of Interest Act,* as those terms are respectively defined at Sections 23.92(1)(k) and 23.92(1)(d) of that Act, by designation under Order in Council 085/2018 of the Lieutenant Governor in Council.

**Reporting Individual:** A person required to report in accordance with this Code.

**Reporting Officer:** For any person, the holder of the office to whom the person reports or who has supervisory responsibility over the reporting individual. Specifically, for example:
- for a Vice-President, the President.
- for a Deputy Provost or a Vice-Provost, the Provost and Vice-President (Academic).
- for an Assistant or Associate Vice-President, the appropriate Vice President
- for a Dean of a Faculty and the Chief Librarian, the Provost and Vice-President (Academic).
- for an Associate Dean or Vice-Dean, the Dean.
- for a Chair of a Department, the Dean.
- for the Director of an administrative unit or equivalent, the Vice-President responsible for that unit.
- for support staff, the holder of the office to whom the support staff reports or who has supervisory responsibility over the support staff; however, the reporting officer for a support staff will not be another support staff.
- for academic staff of a Faculty with departments, the Chair.
- for academic staff of a Faculty without departments, the Dean.
- for a post-doctoral fellow, the supervisor of the post-doctoral fellow.
- for a graduate student, the student's supervisor or supervisory committee.
- for a staff member of a centre or institute, the person within the University responsible for that centre or institute

**Comment [A10]:** Source: Conflict of Interest and Conflict of Commitment Reporting and Assessment Procedure

**Representative of the University of Alberta (or "Representative"):** Executive officers, faculty, staff, post-doctoral fellows, ~~professors emeriti, visiting academics,~~ and student employees volunteers~~, contractors when specified in the terms of the contract, members of the Board of Governors, Senate, Alumni council and others, when acting on behalf of the University~~.

**Reprisal:** Punitive actions taken against a person for making a good faith disclosure, including, but not limited to:
- Disciplinary action
- Termination
- Adversely affecting employment conditions
- A threat to do any of the above

**Comment [A11]:** Source: Ethical Conduct and Safe Disclosure Policy

**Respondent:** A party against whom an allegation has been made.

**Comment [A12]:** Source: Ethical Conduct and Safe Disclosure Procedure

**Safe Disclosure:** Individuals are not subject to reprisal for reporting allegations made in good faith.

**Comment [A13]:** Source: Ethical Conduct and Safe Disclosure Policy

**Standards of Ethical Conduct**: Actions and behaviours which uphold the principles of integrity, respect and accountability, supported by an awareness of and compliance with the Code, relevant policies and procedures, collective agreements, applicable legislation and professional standards.

# D. Ethical Conduct and Impartiality

## *Overview*

The highest Standards of Ethical Conduct are essential to the success of any great institution. Academic freedom, open inquiry and the pursuit of truth, which form the foundation of an institution of higher learning, depend on a shared commitment to the highest Standards of Ethical Conduct.

Whether involved in research, teaching or the governance and administration of the organization, all Representatives of the University of Alberta have an obligation to conduct themselves in a manner that is consistent with the University's stated values regarding ethical conduct.

As part of this obligation, and to protect the University and individuals from harm, Representatives of the University are encouraged to report conduct that does not meet the University's ethical standards.

## *Purpose*

- Describe the expectations concerning ethical conduct for Representatives of the University
- Confirm the rights of individuals in reporting conduct that does not meet the University's standards
- Confirm the University's obligation to protect person(s) making a **good faith disclosure** from **reprisal**
- Confirm the University's obligation to protect the rights of the person(s) against whom allegations are made
- To outline the procedures individuals should take when reporting conduct that does not meet the University's ethical standards

**Comment [A14]:** Source: Ethical Conduct and Safe Disclosure Policy

**Comment [A15]:** Source: Ethical Conduct and Safe Disclosure Procedure

## *Policy*

### 1. Standards of Ethical Conduct

All Representatives of the University of Alberta are prohibited from acting in self-interest or furthering their private interests by virtue of their position or through carrying out their duties and shall maintain the highest Standards of Ethical Conduct.

### 2. Impartiality

Representatives are required to conduct themselves impartially in fulfilling their University duties. This means Representatives must discharge their duties in a non-partisan manner so as to ensure that public confidence and trust remain in the Representative and the University as a whole. Impartiality requires compliance with Section D-1 and the other provisions of this Code but is not intended to limit the academic freedom of the Representative.

### 3. Reporting

Representatives of the University are encouraged to report conduct that does not meet the University's ethical standards. Such reports must meet the definition of good faith disclosure and be submitted to the appropriate authority.

The University will maintain an environment of **safe disclosure** when such a report is made, in which:

a. The persons and offices that receive and/or investigate such reports shall protect the identity of the person making the report to the extent possible under government legislation, University policies, and collective agreements in effect at the time of the alleged misconduct.

b. The University will not tolerate any reprisal, directly or indirectly, against anyone who, in good faith, makes a report.

c. All individuals against whom allegations are made will maintain the rights, privileges and protections afforded to them through the *Freedom of Information and Protection of Privacy (FOIPP) Act* and other applicable government legislation, University policies, and collective agreements in effect at the time of the alleged misconduct.

> **Comment [A16]:** Source: Ethical Conduct and Safe Disclosure Policy

## *Procedure*

### 4. Disclosure of Misconduct

University process indicates that allegations or concerns of conduct that does not meet the University's ethical standards are primarily addressed utilizing the procedures associated with relevant University policies and procedures, collective agreements, government legislation and relevant professional standards.

Complainants should generally contact their manager or supervisor to disclose matters of alleged misconduct. Alternately, complainants may also contact the **Office of Administrative Responsibility** associated with the relevant policy and/or procedure (e.g. Research Integrity complaints should follow the Research and Scholarship Integrity Enforcement Procedure).

In instances where it is unknown where to disclose the matter, or the complainant has reasonable apprehension about coming forward, reports can be made to the Office of Safe Disclosure and Human Rights (OSDHR).

Initial disclosures to the OSDHR may be made verbally or in writing. OSDHR may request that disclosures be made in writing dependent on the nature of the concern and the requirements of the underlying policies. Be advised that disclosures made to OSDHR do not necessarily constitute institutional knowledge as this office's main goal is to provide advisory and referral services to the appropriate mechanism (e.g. referral to Internal Audit Services regarding financial concerns or outlining process expectation for concerns regarding discrimination or harassment is outlined in agreements and in the Discrimination, Harassment and Duty to Accommodate Policy).

Typically, in order for matters to be formally addressed, they will need to be reported to a **Representative of the University of Alberta** outside the OSDHR.

Specific requirements for disclosing are outlined in the policy or procedure that governs the matter in question. In general, disclosures should comprise of:

● The date and time of the incident(s);

● Identification of individuals responsible for the misconduct;

● Details of the alleged misconduct; and

● Name and contact information of the individual making the disclosure. Anonymous reporting may be permitted if it is permitted in the underlying processes (e.g. anonymous reporting is considered for fraud and irregularity but not for harassment).

5. **Good Faith Disclosures and Reprisal**

Any person making a good faith disclosure shall not be subject to reprisal.
Any person who believes they are subject to reprisal should contact the OSDHR.

6. **Duty of Respondents**

Those persons against whom allegations are made (**respondents**) must be treated in a fair and reasonable manner. Specifically, should formal complaints be made, respondents are entitled to:

- Be informed as to who has made the allegation against them, except for matters where the relevant policy and procedure specifically allow for anonymous or confidential complaints or the safety of the complainant may be in question;

- Only respond to allegations that have been made in a timely manner (as outlined in relevant policy if applicable);

- Be privy to enough details pertaining to the allegation to respond accurately; and/or

- Have the matter resolved in an expedient manner.

Respondents who feel that this duty is not being met, should contact the OSDHR.

> **Comment [A17]:** Source: Ethical Conduct and Safe Disclosure Procedure

# E.  Avoidance of Conflicts of Interest

### *Overview*

The University is committed to academic freedom and excellence in teaching and research. In pursuit of this mission, the University and members of the University community frequently engage in activities or situations where actual or perceived **conflicts** will exist, or which raises the potential of actual or perceived conflicts. Rather than disallow all conflicts, the University assesses conflict considerations and, when appropriate, permits certain managed conflict.

However, conflict is permitted only if it can be managed in a way that:

a. Is compliant with legislation;

b. Considers, protects and serves the interests, integrity and reputation of the University; and,

c. Withstands the test of reasonable and independent scrutiny.

To maintain public trust and confidence, the University manages conflict in a fair, open, consistent, and practical manner. All members of the University share in the responsibility to appropriately address conflict.

Assessing conflict requires the collection of personal information as defined in the *Freedom of Information and Protection of Privacy Act*. The University will conduct this and other conflict-related activities with the utmost discretion and in compliance with legislation.

> **Comment [A18]:** Source: Conflict Policy

### *Definitions*

For the purposes of this Section 'E' only, the following definitions apply:

**Academic Staff:** An employee of the Board of Governors who, as a member of a category of employees or individually, has been designated as an academic staff member by the Board of Governors.

> **Comment [A19]:** Source: Conflict Policy

**Conflict Review Committee:** A committee established in accordance with this section.

**Employee:** All University of Alberta employees, including but not limited to faculty, staff, post-doctoral fellows, and student employees.

**Event:** Social, cultural, or sporting activities, charity or special functions, presentations, awards ceremonies, fundraisers, conferences and meetings hosted by a third party. It includes lunches, dinner, drinks, or other meals taken together.

**Friend of the University:** A person considering becoming a donor of the University.

**Gift:** A gift, bonus, reward or favour of any kind given to an individual. It does not include awards received.

**Institution:** The University or any corporation, partnership, or other legal entity owned, controlled or subject to the direction of the University.

**Other Staff:** Those individuals employed by the University on a part or full-time basis, who are not academic staff or support staff, and whether or not they are part of a bargaining unit.

**Person:** Includes academic staff, support staff, other staff, ~~students,~~ postdoctoral fellows~~, members of the Board of Governors~~ and a person's corporation ~~and any other individual who has a contractual or fiduciary relationship with the University as an institution~~.

**Person's Corporation:** Any professional corporation or corporation beneficially owned or controlled by a person.

**Students:** Includes undergraduate and graduate students.

**Support Staff:** An employee of the University who is a member of, and pays dues to, the Non-Academic Staff Association (NASA).

## *Policy*

The University will be vigilant and pro-active concerning conflict.

A person engaging in an activity or a situation that involves either existing (actual or perceived) or potential (actual or perceived) conflict shall report the conflict so that it may be assessed and, where appropriate, managed in accordance with the associated procedures. A person shall not engage in, or continue, the activity or situation until the University has assessed whether the conflict is permitted and, if so, how the conflict will be managed.

The University determines whether or not a situation or activity involves conflict. Therefore, all existing or potential conflict must be reported.

## *Purpose*

- To reduce the incidence of conflict or potential conflict (**conflict of interest** or **conflict of commitment** or **institutional conflict**) and appropriately manage any permitted conduct.

- To clarify reporting requirements for existing or potential conflict, whether it is actual or perceived, and to outline the process for assessing conflict in order to make informed and sound decisions pertaining to matters of conflict of commitment or conflict of interest.

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## *Procedure - Disclosure and Assessment of Conflicts of Interest*

1. **Reporting by a Person**

   a. A person engaging in an activity or situation that involves either existing or potential conflict shall report the conflict so that it may be assessed and, where appropriate, managed.

   b. A person shall not engage in, or continue, the activity or situation until the University has assessed whether the conflict is permitted and, if so, how the conflict will be managed.

   c. In accordance with this procedure, a person will self-assess and report activities or situations that may involve actual or perceived conflict and will complete a **disclosure report** and submit it to a **reporting officer**.

   d. The following persons are required to complete a disclosure report on an annual basis, according to a 12-month in the-future **reporting period**:

      • **academic staff** under the Faculty Agreement or Librarian Agreement or Faculty Service Officer Agreement or Administrative and Professional Officer Agreement;

      • **support staff** who make financial or hiring decisions or who may have a research-related conflict;

      • **other staff** who make financial or hiring decisions;

      • other staff employed in a department, office or unit which has as its primary function the creation of legal relationships with individuals or entities that are not part of the University;

      • other staff who have the authority to enter into contracts or commitments on behalf of the University;

      • other staff who, as part of normal duties, have regular formal contact with individuals or entities that are not subject to the conflict policy;

      • a person who may have a research-related conflict.

   e. Notwithstanding the requirements outlined in 1.b. of this procedure, the University has the discretion to require additional persons to complete a disclosure report on an annual basis, according to a 12-month in-the-future reporting period, or on a case-by-case basis.

   f. Any time there is a change in material facts that were disclosed in a disclosure report, a **reporting individual** must submit a revised disclosure report immediately.

   g. A reporting officer will:

      • solicit and monitor the submission of disclosure reports from those persons who they anticipate receiving a disclosure report;

      • send second notice date-specified requests for a disclosure report to persons from whom they would anticipate receiving a disclosure report; and

      • refer to a **conflict review officer** in instances where an expected disclosure report has not been submitted.

   h. The failure of a reporting officer to solicit a disclosure report does not release a person from their obligation to disclose existing or potential conflict.

2. **Assessment by a Reporting Officer**

   a. A reporting officer will receive disclosure reports from reporting individuals and will assess the information that has been provided in the disclosure report in accordance with this procedure.

b. If the reporting officer has a financial benefit or **financial interest** or **personal benefit** in the considerations being assessed, the reporting officer will refer the disclosure report to the next appropriate senior reporting officer who will assume the role of reporting officer or assign an alternate.

c. Where an existing or potential activity or situation is assessed for an actual or perceived conflict and where it is determined that there is:

- no conflict, the reporting officer will contact the reporting individual to indicate that they are free to proceed with the activity or engage in the situation.

- a conflict and the activity or situation does not sufficiently serve the interests of the University or is not appropriately manageable or not able to withstand the test of reasonable and independent scrutiny, the conflict will not be allowed and the reporting officer will contact the reporting individual to indicate that they are not free to proceed with, or continue to engage in, the activity or situation.

- a conflict and the activity or situation can be managed as an **allowed conflict**, a suitable method of monitoring and managing the allowed conflict will be determined and implemented before the reporting individual is free to proceed with, or continue to engage in, the activity or situation.

3. **Management of Allowed Conflict**

When an activity or situation can be managed as an allowed conflict, the reporting officer will:

a. Work with the reporting individual to settle on the terms and conditions under which an activity or situation associated with an allowed conflict will be conducted and managed;

b. Ensure documentation of any outcome in a memorandum of agreement in the specified form;

c. Ensure the term, conditions, and management of an activity associated with an allowed conflict is consistent with the *Freedom of Information and Protection of Privacy Act* and other legislation and University policy relevant to that activity;

d. Administer or delegate the on-going monitoring and management of allowed conflict;

e. Document all related matters and maintain records;

f. Refer unresolved matters to a conflict review officer appropriately; and

g. Keep senior officers of the University appropriately apprised.

In all instances of conflict involving research, the disclosure form should be submitted to the individual's reporting officer who will then consult with the Dean, Vice-President (Research) and Office of Faculty and Staff Relations as appropriate.

4. **Referral Process**

a. In the case of conflict of commitment, it is expected that the reporting individual and the reporting officer will come to an agreement; however, in the event that this is not possible, the position of the reporting officer is final and will stand as the University's position on the matter.

b. In the case of conflict of interest, the reporting individual and reporting officer need to first agree on whether the conflict considerations warrant an allowed conflict or not and, where applicable, on the method by which an allowed conflict is to be monitored and managed. If agreement cannot be reached, the matter is to be referred by the reporting officer to a conflict review officer or **conflict review committee**.

c. The conflict review officer or conflict review committee will work with the reporting individual and reporting officer in an effort to reach an agreeable outcome and will ensure documentation of any

outcome in a memorandum of agreement in the specified form. If an agreeable outcome cannot be reached, the conflict review officer or conflict review committee will render a decision which shall be final and binding.

5. **Conflict Review Committee Membership**

    a. For conflict involving research activity:

        i. Chair, appointed by the Vice-President (Research);

        ii. One representative of the Research Services Office;

        iii. One academic staff member, appointed by the Vice-President (Research); and

        iv. Two members-at-large, appointed by the Provost and Vice-President (Academic).

    Within the overall membership, it is recommended that there be one member with legal expertise and one with previous conflict resolution experience.

    b. For conflict involving non-research activity:

        i. Chair, appointed by the Provost and Vice-President (Academic);

        ii. One staff member appointed by the Vice-Provost and Associate Vice-President (Human Resources); and

        iii. Two members-at-large, appointed by the Vice-Provost and Associate Vice-President (Human Resources).

    Within the overall membership, it is recommended that there be one member with legal expertise and one with previous conflict resolution experience.

*Comment [A23]: Source: Conflict of Interest and Conflict of Commitment Reporting and Assessment Procedure*

## *Procedure - Receipt and Acceptance of Gifts and Event Invitations*

For the purpose of this Procedure, Gifts and Events do not include:

- normal and nominal Gifts and Event invitations between friends, where unrelated to the Representative's duties or position with the University;

- Gifts accepted by a Representative on behalf of the University; or

- attendance at social Events if the social Event is sponsored by a charitable foundation, a not-for profit organization, the Governor General of Canada, a provincial Lieutenant Governor, any Canada federal, provincial, municipal or regional government or any member of any such government, or a consul or ambassador of a foreign country.

The exception for social Events sponsored by a not-for-profit organization does not apply to not-for-profit organizations constituted to serve management, union, or professional interests, or those having a majority of members that are profit-seeking enterprises or are representatives of profit-seeking enterprises.

Any Representative who is uncertain if acceptance of a Gift or an Event Invitation is appropriate should contact their Dean, Vice-President, the Provost or the President. The President should contact the Chair of the Board of Governors.

If there is uncertainty as to the value of a Gift or an Event, the Vice-President (Finance & Administration) shall have the authority to determine its value.

1. Acceptance of Gifts

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a. Representatives must not accept any Gift directly or indirectly connected with the performance of their University duties or by virtue of their position if the acceptance of the Gift creates a conflict of interest or the perception of a conflict of interest. Gifts which are not expected to create a conflict of interest are those received as:

    i. a token received as part of reasonable protocol;

    ii. a social obligation;

    iii. a cultural practice;

    iv. a normal exchange of hospitality between two persons doing business together; or

    v. incident for participating in a public Event.

b. Gifts cannot be in the form of cash or cash equivalents.

c. Representatives must exercise reasonable discretion in determining whether the acceptance of any Gift is appropriate. A Representative must never solicit a Gift in connection with their position or duties.

d. The maximum cash value of any one Gift that a Representative may accept is $250.00, not exceeding $500.00 per calendar year received from a single source.

e. If a Gift is also offered to a spouse, adult interdependent partner or minor child in their capacity as a spouse, adult interdependent partner or minor child of a University Representative, the same considerations apply as if the Gift was given to the Representative directly.

f. A Representative may seek an exemption, in writing, from any maximum valuation set out in this Procedure from their Dean, Vice-President, the Provost or the President. The President may seek an exemption in writing from the Chair of the Board of Governors. An exemption may be sought any time before or within a reasonable time after accepting a Gift. The party determining whether or not to grant an exemption will act reasonably in the circumstances and will consider the best interests of the University in making a determination. An exemption will not be allowed where there is an actual or perceived conflict of interest or where acceptance of the Gift would be contrary to the principles of this Code. Any exemption granted will be made in writing.

g. Should any Gift be accepted of which the cash value exceeds any maximum valuation, and there is no exemption approved in writing, the Gift should be returned to the party who offered it as soon as practical. If returning the Gift is not possible, or would be socially or culturally unacceptable, the Gift must be surrendered to the Vice-President (Finance and Administration) and become the property of the University of Alberta.

2. Acceptance of Invitations and Attending Events

    a. Representatives must not accept any invitation to an Event, or attend any Event, if the acceptance or attendance creates a conflict of interest or the perception of a conflict of interest. Events which are not expected to create a conflict of interest include those Events:

        i. where a significant cross-section of Representatives have been invited;

        ii. where the Representative pays for their own food, beverages, and all other expenses; or

        iii. attended as an incident of the social obligations that normally accompany the Representative's position at the University.

    b. Representatives must exercise reasonable discretion in determining whether the acceptance of any invitation to or attendance at any Event is appropriate.

c. The maximum cash value of attending an Event that a Representative has been invited to, inclusive of any food and beverage, is:

    i. for the President, Vice Presidents, Associate Vice-Presidents, Deans, Vice-Provosts, Deputy Provosts, or General Counsel:

        a. $1,000.00 per Event, not exceeding $2,000.00 per calendar year received from a single source, if the Event invitation is from a donor or Friend of the University; or

        b. $500.00 per Event, not exceeding $500.00 per calendar year received from a single source, if the Event invitation is from any person other than a donor or Friend of the University.

    ii. for any other Representative:

        a. $500.00 per Event, not exceeding $500.00 per calendar year received from a single source.

d. Notwithstanding the above, if a Representative accepts an invitation to speak or participate in an active role at a conference, seminar, workshop, panel, or other similar engagement, and the Representative is attending in their role as a University employee or participation relates to their related academic activities, then the total cash value of attending the engagement, inclusive of all transportation, hospitality, accommodation, registration, food and beverage, and related incidentals must be reasonable in the circumstances and shall not exceed a maximum cash value of $8,000 per engagement or $16,000 per calendar year for engagements from a single source. The cash value of these engagements will be calculated and considered separately from other Event invitations.

e. If the invitation to attend an Event is also extended to a spouse, adult interdependent partner or minor child, the total cash value of all tickets received are to be taken into account.

f. If a Representative is invited to an Event at which the total cash value of attendance, inclusive of any food and beverage, exceeds any maximum cash value, the Representative may seek an exemption in writing from their Dean, Vice-President, the Provost or the President. The President may seek an exemption in writing from the Chair of the Board of Governors. The party determining whether or not to grant an exemption will act reasonably in the circumstances and will consider the best interests of the University in making a determination. An exemption will not be allowed where there is an actual or perceived conflict of interest or where acceptance of the invitation or attendance at the Event would be contrary to the principles of this Code. Any exemption granted will be made in writing.

g. Should a Representative attend an Event at which the total cash value of attending exceeds any maximum valuation set out in this Code, and there is no exemption approved in writing, the cash value of attending the Event, inclusive of any food and beverage, which exceeds the maximum valuation under this Code will be reimbursed by the Representative to the person/entity who originally covered the cost.

# F. Managing Conflicts of Interest: Concurrent Activities and Supplementary Professional Activities

### Requirement to Report Concurrent Activity

A Representative involved in a concurrent appointment, business, undertaking, employment, or self-employment (collectively "concurrent activity") other than their position with the University may be in a potential conflict. Representatives are therefore required to report all concurrent activity, subject to the

pre-approvals below, so that the activity may be assessed for a conflict and where appropriate, managed. Reports must be made in accordance with Section 'E'. Where a current Representative is considering engaging in a new concurrent activity, the Representative must seek prior approval of the University before doing so.

Some Representatives' concurrent activity may be the kind of activity defined as "Supplementary Professional Activities" (or "SPA") in their collective agreement. In the case of an appointment, business, undertaking, employment or self-employment meeting the definition of SPA within a collective agreement, the Representative's obligations in respect of that activity will be wholly as set out in their collective agreement and will not need to be additionally reported under Section 'E'. Collective agreements with SPA obligations are discussed further below.

Where a Representative subject to a collective agreement engages in concurrent activity that does not meet the definition of "SPA" under their collective agreement, or where the concurrent activity is not otherwise contemplated within their collective agreement, the Representative must report the concurrent activity unless the activity is pre-approved as below.

The requirement to report includes where a Representative receives income through a research grant where the research work:

  i. is not administered by the University through the Research Services Office; and

  ii. the research work does not meet the definition of Supplementary Professional Activity in the Representative's collective agreement.

### *Pre-Approved Concurrent Activity*

The University deems some concurrent activity to be pre-approved. In those situations, the Representative is not required to report the activity unless it otherwise creates an actual or perceived conflict of interest.

Pre-approval is deemed for:

  a. Representatives engaging in concurrent activity for which the Representative will not receive nor be entitled to receive remuneration.

  b. Students of the University who are also employees of the University, where the concurrent activity is in the retail, hospitality, or service industry.

  c. Academic staff who do not hold a full-time position at the University, where:

    i. their position at the University is unpaid;

    ii. the academic staff member teaches no more than two courses per semester at the University;

    iii. the concurrent activity is with another post-secondary institution; or

    iv. the concurrent activity requires the academic staff member to be a member of a specified professional association which has a code of conduct and can discipline members for a breach of their code. The "specified professional associations" must be approved by the President or President's delegate. The associations currently approved are listed at Appendix A.

    d.   Academic staff, whether full-time or part-time at the University, where the University knows at the time of their hiring or appointment that:

        i.   the academic staff member is being concurrently or jointly hired or appointed to the concurrent activity at another organization; or

        ii.   the academic staff member is already engaged in the concurrent activity at another organization.

    e.   Non-student employees of the University who are members of the Non-Academic Staff Association or who are support staff excluded from the Non-Academic Staff Association, whose concurrent activity requires 20 hours or less per week, the required hours of which are not scheduled during the Representative's normal working hours at the University.

In limited circumstances, the manner in which concurrent activity may need to be reported and approved is addressed by external documentation. These situations are where:

    a.   the Representative's concurrent activity meets the definition of Supplementary Professional Activity within their collective agreement, as the obligations relating to the reporting and approval of the activity will be wholly governed by their collective agreement; or

    b.   the Representative is the President, as the President's obligations relating to the reporting and approval of concurrent activity are governed by the *Conflicts of Interest Act* and the requirement at Section I-2 of this Code.

### *Collective Agreements with SPA Obligations*

The University's collective agreements provide direction for certain Representatives with respect to professional development through activity which is supplementary to their primary obligations to the University (known as 'SPA'). The types of Representatives with SPA obligations, and the nature of those obligations, are excerpted directly from the relevant collective agreements below.

The University endeavours to include the most recent excerpts from its collective agreements regarding SPA in this Code. However, because collective agreements frequently evolve through bargaining, the excerpts provided may at times be out of date. In the case of a discrepancy between an included excerpt and a collective agreement, the collective agreement will govern. Representatives governed by a collective agreement have a responsibility to know its contents and how it affects them in their role with the University.

> Collective agreements are posted on the Human Resource Services
> website: https://www.ualberta.ca/faculty-and-staff/my-employment/collective-agreements-and-handbooks

### *1. Faculty - Supplementary Professional Activities (SPA)*

**Collective agreement**: Board of Governors of the University of Alberta and The Association of the Academic Staff of the University of Alberta – July 2017

**Full collective agreement URL:** https://cloudfront.ualberta.ca/-/media/hrs/my-employment/agreements/faculty-agreement.pdf

**Relevant Excerpts**
**Article 8: Supplementary Professional Activities (SPA)**

**Scope and context of SPA**

> **Comment [A24]:** Source: Collective Agreement

8.01    A staff member is a full-time employee and has a primary obligation to fulfil University responsibilities. The staff member shall remain current with recent developments in the discipline through personal professional development.

8.02    One means of accomplishing professional development may be through professional activity which is supplementary to the primary obligations to the University.

8.03    Such SPA shall represent an integral part of the responsibility to relate theory to practice, thereby enabling teaching and research to remain professionally relevant. Routine, repetitive and trivial SPA are discouraged.

**Authorization of SPA**

8.04    Subject to the provisions of this Article, a staff member may engage in SPA. SPA shall not prevent, hinder or unduly interfere with the staff member's primary responsibilities.

**Required SPA**

[...]

8.06    Where a Faculty Council has deemed SPA to be essential to the work of the Department, the Faculty Council shall recommend to the Board that such SPA be considered as part of the primary University responsibilities. The Board may approve such recommendations on such conditions as it deems appropriate, having regard to 8.11.

**Definition of SPA**

8.07    Without restricting the generality of the term SPA, this category shall include any of the following:

   a)   employment in any capacity by another employer including the carrying out of teaching duties, e.g. summer session at another university;
   b)   consulting;
   c)   personal services contracts;
   d)   private practice of the staff member's profession, e.g. medicine, dentistry, law, etc.

8.08    SPA may be categorized as major or minor in scope. Each Faculty Council shall decide what constitutes major SPA but all proposals to teach at another institution shall be considered major SPA.

**Approval of SPA**

8.09    A staff member shall obtain written approval of the Department Chair prior to undertaking major SPA. Prior to approving SPA, the Department Chair shall ensure that primary University responsibilities will be performed satisfactorily.

8.10    If there is a dispute with respect to a staff members SPA, the staff member shall have recourse to the Dean and the Provost, in that order. The decision of the Provost shall be final and binding.

**Conditions**

8.11    The authority and approval of SPA is subject to the following conditions:

   a)   The staff member shall not compete unfairly with professionals outside the University.
   b)   The SPA shall not infringe upon the University's conflict of interest guidelines.
   c)   The SPA shall conform with regulations governing the use of University facilities and staff.
   d)   The staff member shall indemnify and hold harmless the University from and against any loss, injury or damage which the University may or could suffer arising in any way out of or in relation to such activities. The staff member gives this covenant and makes this agreement

notwithstanding that the University has participated in such activities by the provision of facilities, space, equipment, or administrative assistance, unless the said loss, injury or damage arises directly from a malfunction of the said facilities or equipment which is not caused by the user thereof; and notwithstanding that the University has participated in such SPA by the provision of students or postdoctoral fellows or the like; and withstanding that any formal contract with respect to those SPA has not been negotiated by or approved by the University.

e) When engaged in SPA a staff member shall not use the name of the University in any way, except as the mailing address, nor shall the staff member hold himself or herself to be an agent of the University when engaged in SPA.

[...]

**Faculty regulations**

8.20    Each Faculty Council shall develop regulations with respect to SPA. The regulations and any amendments thereto shall be filed with the Provost and the Association. The regulations shall include:

a) The definition of what constitutes major SPA.
b)  The format for the annual statement of SPA; the determination of the time period covered by the report; the date by which the report is to be submitted; and whether the annual statement about SPA shall be included in the annual report.
c) Any modifications to the requirement that SPA be taken into account in the evaluation of a staff member's performance.
d) Whether the time of year, week or day when SPA is performed is important to its approval and reporting.
e) Whether the annual statement shall include information about remuneration received from SPA.
f) Regulations governing the use of University facilities and staff for SPA including arrangements to reimburse the University for such use.
g)  What evidence shall be required to ensure the staff member has adequate personal liability insurance to indemnify the University against any claims.
h) Such additional terms and conditions the Faculty Council may consider necessary; such terms and conditions shall be in addition to and not in contradiction to this Article.

Relevant Definitions (Article 1)

**Staff Member:** A person who has been appointed under this agreement to a faculty position on the academic staff of the University in which the person has been or may be granted tenure; this term includes both full time and part time staff who hold such positions.

**Faculty Council:** The council created by that name in accordance with section 28 of the Post Secondary Learning Act; for the purposes of this Agreement voting on decisions required by this Agreement shall be restricted to the staff members in the Faculty.

**Department:** The academic unit of a Faculty, established as such by the Board.

**Dean:** The chief executive officer of a Faculty.

**Department Chair:** The chief executive officer of a Department. Responsibilities assigned herein to a Department Chair shall be the responsibility of the Dean in Faculties in which there are no departments.

**Board:** The Governors of the University of Alberta.

## *2. Faculty Service Officer Supplementary Professional Activities (SPA)*

**Collective agreement**: Board of Governors of the University of Alberta and The Association of the Academic Staff of the University of Alberta – Faculty Service Officer Agreement – July 2017

**Full collective agreement URL:** https://cloudfront.ualberta.ca/-/media/hrs/my-employment/agreements/faculty-service-officer-agreement.pdf

Relevant Excerpts
**Article 8: Supplementary Professional Activities (SPA)**

8.01    A staff member is a full-time employee and has a primary obligation to fulfil University responsibilities. The staff member shall remain current with recent developments in the discipline through personal professional development.

8.02    Under certain circumstances it is appropriate for staff members to assume responsibilities at the University in addition to their regular duties and for which they may receive additional remuneration. These shall be duties which are performed outside regular office hours or while on vacation, e.g. lecturing in evening session, lecturing in Extension non-credit courses, etc. Requests to assume additional responsibilities shall be submitted, in writing, to the **Dean**.

8.03    A staff member who proposes to engage in activities outside the University which are related to his or her duties at the University or which are of a consulting nature, whether during regular University office hours or not, shall so inform his or her immediate supervisor. If the proposed activities are during regular office hours, the permission of the immediate supervisor, in writing, must be obtained prior to the staff member undertaking the activities. If University facilities are proposed to be used in the conduct of the outside activities, the permission of the immediate supervisor, in writing, must be obtained prior to the staff member utilizing such facilities. If the staff member expects to make extensive use of such facilities, the staff member may be required to reimburse the University for such use.

8.04    Care must be taken by the staff member that the outside activities are not in conflict of interest with the University duties.
[...]

9.17    During leave, the staff member shall not undertake alternative employment without the advance written approval of the Provost.

Relevant Definitions (Article 1)

**Faculty Service Officer:** Group of academic staff who assist and collaborate with faculty members in teaching and research process. Such staff members will normally have a post-graduate degree in the particular discipline to which they are attached. The tasks they are assigned may include an administrative component but this will not be a major component of the assignment. A position in this category shall be established under the same procedures as those used for faculty positions and staff members shall be counted with faculty in the staff count.

**Staff Member:** A person who has been appointed to a faculty service officer position on the academic staff of the University in which the person has been or may be granted a continuing appointment; this term includes both full time and part time staff who hold such positions.

**Dean:** The chief executive officer of a Faculty.

### 3. Library - Supplementary Professional Activities (SPA)

**Collective agreement:** Board of Governors of the University of Alberta and The Association of the Academic Staff of the University of Alberta – Librarian Agreement – July 2017

**Full collective agreement URL:** https://cloudfront.ualberta.ca/-/media/hrs/my-employment/agreements/librarian-agreement.pdf

Relevant Excerpts

**Article 8: Supplementary Professional Activities**

**Scope, context and authorization of supplementary professional activity**

8.01    A staff member has a primary obligation to fulfil University responsibilities. A staff member who proposes to engage in activities outside the University which are related to his or her duties at the University or which are of a consulting nature, shall so inform the Chief Librarian. If the proposed activities are during regular office hours, the permission of the Supervisor and Chief Librarian, in writing, must be obtained prior to the staff member undertaking the activities. If University facilities are proposed to be used in the conduct of the outside activities, the permission of the Chief Librarian, in writing, must be obtained prior to the staff member utilizing such facilities. If the staff member expects to make extensive use of such facilities, the staff member may be required to reimburse the University for such use.

8.02    Under certain circumstances it is appropriate for staff members to assume responsibilities at the University in addition to their regular duties and for which they may receive additional remuneration. Requests to assume such additional responsibilities must be approved by the Supervisor and the Chief Librarian, in writing.

8.03    Such professional activity shall represent an integral part of the responsibility to relate theory to professional practice, thereby enabling professional practice to remain relevant.

8.04    Care must be taken by the staff member that the supplementary activities are not a conflict of interest with the University duties and do not prevent, hinder or unduly interfere with the staff member's primary responsibilities.

8.05    If there is a dispute with respect to a staff member's supplementary professional activity, the staff member shall have recourse to the Chief Librarian and the Provost, in that order. The decision of the Provost shall be final and binding.

**Definition of supplementary professional activity**

8.06    Without restricting the generality of the term supplementary professional activities, this category shall include any of the following:
   a)   employment in any capacity by another employer; including the carrying out of teaching duties;
   b)   consulting;
   c)   personal services contracts.

**Conditions**

8.07    The authority and approval of supplementary professional activity is subject to the following conditions:

a)   The staff member shall not compete unfairly with professionals outside the University.

b)   The supplementary professional activity shall not infringe upon the University's conflict of interest guidelines. (GFC Policy Manual Section 120.3)

c)   The supplementary professional activity shall conform with regulations governing the use of University facilities and staff. (Research Policies and Services Manual)

d)   The staff member shall indemnify and hold harmless the University from and against any loss, injury or damage which the University may or could suffer arising in any way out of or in relation to such activities. The staff member gives this covenant and makes this agreement notwithstanding that the University has participated in such activities by the provision of facilities, space, equipment, or administrative assistance, unless the said loss, injury or damage arises directly from a malfunction of the said facilities or equipment which is not caused by the user thereof; and notwithstanding that the University has participated in such supplementary professional activity by the provision of students or postdoctoral fellows or the like; and notwithstanding that any formal contract with respect to those supplementary professional activity has not been negotiated by or approved by the University.

e)   When engaged in supplementary professional activity, a staff member shall not use the name of the University in any way, except as the mailing address, nor shall the staff member hold himself or herself to be an agent of the University when engaged in supplementary professional activity.

Relevant Definitions (Article 1)

**Staff Member:** A person who has a degree from an accredited graduate program in library and/or information studies, or an equivalent program, who has been appointed to a librarian position on the academic staff of the University of Alberta, in which the person has been or may be granted tenure; this term includes both full time and part time staff who hold such positions.

**Chief Librarian:** The chief executive officer of the University Libraries.

**Supervisor:** The Administrative Librarian to whom the staff member reports and is accountable, or the Chief Librarian, or another staff member who is delegated that responsibility on behalf of the Administrative Librarian. At least annually, the Chief Librarian shall provide to the Association a complete list of staff members and the Supervisor to whom each reports. When a staff member reports to more than one person, the Supervisor shall consult with the other person in making evaluations.

**Provost**: The Provost and Vice President (Academic) of the University.

> **Comment [A26]:** Source: Collective Agreement

## 4.   *Academic Teaching Staff – Supplementary Professional Activities (SPA)*

**Collective agreement:** Board of Governors of the University of Alberta and The Association of the Academic Staff of the University of Alberta – Academic Teaching Staff Agreement – July 2017

**Full collective agreement URL:**  https://cloudfront.ualberta.ca/-/media/hrs/my-employment/agreements/academic-teaching-staff-agreement.pdf

Relevant Excerpts
**Article 8: Supplementary Professional Activities (SPA)**

8.1    This Article shall apply to full-time staff members with Career Status and Term 12 Status appointments.

**Scope and Context of SPA**

8.2    A staff member who is a full-time employee has a primary obligation to fulfill University responsibilities. The staff member shall remain current with recent developments in the discipline through personal professional development.

8.3    One means of accomplishing professional development may be through professional activity which is supplementary to the primary obligations to the University.

8.4    Subject to the provisions of this Article, a staff member may engage in SPA. SPA shall not prevent, hinder or unduly interfere with the staff member's primary responsibilities.

**Definition of SPA**

8.5    Without restricting the generality of the term SPA, this category shall include any of the following:
   a)  employment in any capacity by another employer including the carrying out of teaching duties, e.g., summer session at another university;
   b)  consulting;
   c)  personal services contract; or
   d)  private practice of the staff member's profession, e.g., dentistry, law, medicine, nursing, etc.

**Approval of SPA**

8.6    A staff member shall obtain written approval of the Department Chair prior to undertaking major SPA. Prior to approving SPA, the Department Chair shall ensure that primary University responsibilities will be performed satisfactorily.

8.7    If there is a dispute with respect to a staff member's SPA, the staff member shall have recourse to the Dean and the Provost, in that order. The decision of the Provost shall be final and binding.

8.8    The conditions governing SPA are set out in Appendix D.

[...]

**APPENDIX D: Conditions for Supplementary Professional Activities (SPA)**

1.    The authority and approval of SPA is subject to the following conditions:
   a)  The staff member shall not compete unfairly with professionals outside the University.
   b)  The SPA shall not infringe upon the University's conflict policy and related procedures and protocols, as amended from time to time.
   c)  The SPA shall conform with the University's related policies, procedures and protocols related to the use of University facilities and staff, as amended from time to time.
   d)  The staff member shall indemnify and hold harmless the University from and against any loss, injury or damage which the University may or could suffer arising in any way out of or in relation to such activities. The staff member gives this covenant and makes this agreement notwithstanding that the University has participated in such activities by the provision of facilities, space, equipment, or administrative assistance, unless the said loss, injury or damage arises directly from a malfunction of the said facilities or equipment which is not caused by the user thereof; and notwithstanding that the University has participated in such SPA by the provision of students or postdoctoral fellows or the like; and notwithstanding that any formal contract with respect to those SPA has not been negotiated by or approved by the University.
   e)  When engaged in SPA a staff member shall not use the name of the University in any way, except as the mailing address, nor shall the staff member hold himself or herself to be an agent of the University when engaged in SPA.

[...]

4.    SPA shall represent an integral part of the responsibility to relate theory to practice, thereby enabling teaching and/or teaching-related responsibilities to remain professionally relevant. Routine, repetitive and trivial SPA is discouraged.

**Required SPA**

[...]

6.    Where a Faculty Council has deemed SPA to be essential to the work of the Department, the Faculty Council shall recommend to the Board that such SPA be considered as part of the primary University responsibilities. The Board may approve such recommendations on such conditions as it deems appropriate, having regard to 1.a.

**Major SPA**

7.    SPA may be categorized as major or minor in scope. Each Faculty Council shall decide what constitutes major SPA but all proposals to teach at another institution shall be considered major SPA.

[...]

**Faculty Regulations**

13.   Each Faculty Council shall develop regulations with respect to SPA. The regulations and any amendments thereto shall be filed with the Provost and the Association. The regulations shall include:

a) The definition of what constitutes major SPA.

b) The format for the annual statement of SPA; the determination of the time period covered by the report; the date by which the report is to be submitted and whether the annual statement about SPA shall be included in the annual report.

c) Any modifications to the requirement that SPA be taken into account in the evaluation of a staff member's performance.

d) Whether the time of year, week or day when SPA is performed is important to its approval and reporting.

e) Whether the annual statement shall include information about remuneration received from SPA.

f) Regulations governing the use of University facilities and staff for SPA including arrangements to reimburse the University for such use.

g) What evidence shall be required to ensure the staff member has adequate personal liability insurance to indemnify the University against any claims.

h) Such additional terms and conditions the Faculty Council may consider necessary; such terms and conditions shall be in addition to and not in contradiction to this Appendix

Relevant Definitions (Article 1)

**Staff Member:**  A person who has been appointed under this Agreement to a position with teaching and/or teaching-related responsibilities (in accordance with Article 7) on the academic staff of the University (where teaching shall involve University credit courses) and where the funding source permits payment of such responsibilities

**Department Chair:** The administrative head of a Department reporting to the Dean. Responsibilities assigned in this Agreement to a Department Chair shall be the responsibility of the Dean in Faculties in which there are no Departments.

**Dean:** A University employee who "has general supervision over and direction of the academic work and instructional staff of the Faculty and of the officers and employees employed in connection with that work, and has the other powers, duties and functions that are assigned to the dean by the president" pursuant to Section 21(2) of the Post-Secondary Learning Act (Alberta).

**Provost:** The Provost and Vice President (Academic) of the University. The Provost is the Chief Operating Officer and Senior Vice President.

**Faculty Council:** The council created by that name pursuant to Section 28(2) of the Post-Secondary Learning Act (Alberta); for the purposes of this Agreement voting on decisions required by this Agreement shall be restricted to the academic staff members in the Faculty.

**Comment [A27]:** Source: Collective Agreement

## 5. Temporary Administrative and Professional Staff (TAPS) – Supplementary Professional Activities (SPA)

**Collective agreement:** Board of Governors of the University of Alberta and The Association of the Academic Staff of the University of Alberta – Temporary Administrative and Professional Staff Agreement – July 2017

**Full collective agreement URL:** https://cloudfront.ualberta.ca/-/media/hrs/my-employment/agreements/temporary-administrative-and-professional-staff-agreement.pdf

Relevant Excerpts

**Article 9: Supplementary Professional Activities (SPA)**

**All Staff Members**

9.01        This Article shall apply to all full-time staff members.

**Scope and Context of SPA**

9.02        A staff member who is a full-time employee has a primary obligation to fulfil University responsibilities. The staff member shall remain current with recent developments in the discipline through personal professional development.

9.03        One means of accomplishing professional development may be through professional activity which is supplementary to the primary obligations to the University.

9.04        Subject to the provisions of this Article, a staff member may engage in SPA. SPA shall not prevent, hinder or unduly interfere with the staff member's primary responsibilities.

**Definition of SPA**

9.05        Without restricting the generality of the term SPA, this category shall include any of the following:
   a)   employment in any capacity by another employer including the carrying out of teaching duties, e.g., summer session at another university;
   b)   consulting;
   c)   personal services contract;
   d)   private practice of the staff member's profession, e.g., medicine, nursing, law, etc.

**Approval of SPA**

9.06        A staff member shall obtain written approval of the Supervisor prior to undertaking major SPA. Prior to approving SPA, the Supervisor shall ensure that primary University responsibilities will be performed satisfactorily.

9.07    If there is a dispute with respect to a staff member's SPA, the staff member shall have recourse to the Dean and the Vice-President, in that order. The decision of the Vice-President shall be final and binding.

9.08    The conditions governing SPA are set out in Appendix D.

[...]

**Appendix D: Conditions for Supplementary Professional Activities (SPA)**

1.    **SPA at the University**

    1.1    Under certain circumstances, a staff member may accept responsibilities at the University in addition to regular responsibilities for which the staff member may receive remuneration additional to regular salary.

    1.2    The Supervisor and the Vice-President shall approve requests for approval of such SPA prior to the assumption of the responsibilities.

    1.3    SPA shall be performed outside regular office hours unless otherwise approved by the Vice-President.

2.    SPA Outside the University

    2.1    A staff member who proposed to engage SPA for another employer or as a consultant or self employed professional shall inform the Supervisor in writing of such intention.

    2.2    The written permission of the Supervisor is required if
        a)   the activities will take place during regular University office hours; or
        b)   the activities involve University staff, students or the use of University facilities.

Relevant Definitions (Article 1)

**Staff Member:** A person who has been appointed to a position on the academic staff of the University for a fixed term. This term includes all the categories enumerated in Article 6.03.

**Supervisor:** The person to whom a staff member reports

> **Comment [A28]:** Source: Collective Agreement

## *6.    Administrative and Professional Officers – Supplementary Professional Activity*

**Collective agreement**: Board of Governors of the University of Alberta and The Association of the Academic Staff of the University of Alberta – Administrative and Professional Officer Agreement – July 2017

**Full collective agreement URL:** https://cloudfront.ualberta.ca/-/media/hrs/my-employment/agreements/administrative-and-professional-officer-agreement.pdf

Relevant Excerpts
**Supplementary Professional Activity Outside the University**

8.09    A staff member who proposes to engage in supplementary professional activity for another employer or as a consultant or self-employed professional shall inform the Supervisor in writing of such intention.

8.10    The written permission of the Supervisor is required if:
        a)   the activities will take place during regular University office hours; or

b) the activities involve University staff, students or the use of University facilities.

8.11 If the staff member expects to involve students, staff or the use of University facilities, the staff member may be required by the Vice-President to enter into a contract with the University.

8.12 A staff member shall not engage in supplementary professional activities which involve a conflict of interest or conflict of commitment with responsibilities to the University.

Relevant Definitions (Article 1)

**Staff Member and APO:** "Staff member" and "APO" means an Administrative Professional Officer (APO) who has been designated as continuing academic staff by the University of Alberta. An APO is a manager or other professional who provides leadership, strategic advice and direction in the organization; and is accountable for planning, negotiating, problem solving, risk assessment and prevention, and/or operational oversight of resources. An APO shall normally require an academic degree; professional designation or equivalent related experience.

**Vice-President:** A senior administrator with a number of reporting units within the University. Where the term "Vice-President" is used in the Agreement, unless otherwise stated, it means the specific Vice-President to whom the other administrative officials named are accountable unless otherwise specified.

**Comment [A29]:** Source: Collective Agreement

# G. Interaction Between the Code and Collective Agreements

The University's various collective agreements may contain provisions relating to matters this Code purports to apply to. Nothing in this Code is intended to affect the operation of any collective agreement. In the case of a discrepancy or inconsistency between this Code and a collective agreement, the terms of the collective agreement will govern.

Representatives of the University governed by a collective agreement have a responsibility to know its content and how it affects them in their role with the University.

# H. Breaches of the Code

Any breach of any section of this Code by a Representative, including a breach of the conflict of interest provisions or the concurrent employment provisions, is a violation of the University's ethical standards. Individuals reporting an actual or alleged breach of any part of this Code should therefore disclose these complaints in the manner specified by Section 'D'.

Upon receiving an allegation that a Representative has breached the Code, if the complaint is credible, the authority receiving the complaint will notify the Respondent, and will either investigate the matter or will refer the matter to another appropriate authority to investigate. The investigating authority will make factual findings and as part of the investigation will give the Respondent a reasonable opportunity to respond. The investigating authority will then prepare a written report including a determination as to whether or not the Code has been breached. If the Code is determined to have been breached, the Respondent may seek to have the findings reviewed within a reasonable time. Any review process will occur in writing. A breach of the Code is a disciplinable event that may result in corrective action being taken against the Representative.

*Complaints, Responses, Investigations and Discipline for Representatives Subject to a Collective Agreement*

Notwithstanding the above, where an allegation is to be made against a Representative who is subject to a collective agreement, the disclosure of that complaint, and any response, investigation, and discipline relating to the complaint, will be as provided for in the Representative's collective agreement to the extent it differs or is inconsistent with this Code. If the Representative's collective agreement is silent, the procedures in this Code shall govern.

Because collective agreements frequently evolve through bargaining, and because collective agreement provisions relating to complaints, responses, investigations and discipline may be thorough and numerous, this Code does not attempt to provide excerpts of all responsive collective agreement language. Instead, Representatives are directed to their respective collective agreement:

| Type of Representative | Name and link to relevant collective agreement (or policy) | Relevant Articles |
|---|---|---|
| Faculty | Faculty Agreement – July 2017 | 7, 9, 12-17, 27-29 |
| Faculty Service Officers | Faculty Service Officer Agreement – July 2017 | 7, 9, 12-17, 27-29 |
| Librarians | Librarian Agreement - July 2017 | 7, 9, 12-17, 27-29 |
| Academic Teaching Staff | Academic Teaching Staff Agreement - July 2017 | 7, 9-15, 27 |
| Temporary Administrative and Professional Staff | Temporary Administrative and Professional Staff (TAPS) Agreement – July 2017 | 8, 12-15, 24-26 |
| Administrative and Professional Officers | Administrative and Professional Officer (APO) Agreement – July 2017 | 8, 12-16, 27-29 |
| Trust/Research Academic Staff | Trust Research Academic Staff (TRAS) Agreement - July 2017 | 7, 12-16, 27-29 |
| Non-Academic Staff (NASA) | Non-Academic Students Association (NASA) Agreement - June 2016 to March 2019 | 15, 18, 21 |
| Graduate Students | GSA and Board of Governors Collective Agreement - Sept 2016 to Aug 2018 | 12, 23 |
| Post-Doctoral Fellows | Postdoctoral Fellows Discipline Procedure (note: Collective agreement currently being negotiated. Until then, discipline procedure is per policy). | As per Procedure |
| Management and Professional Staff (MAPS) | Code of Conduct: Employees' Obligations Respecting Conflict of Interest | As per Code |
| Any other Representative not covered by a collective agreement | Code of Conduct: Employees' Obligations Respecting Conflict of Interest | As per Code |

*Note: The list of relevant articles is provided as a courtesy and may not be exhaustive.*

# I.   Obligations Specific to the President

1.   In addition to the obligations owed elsewhere in this Code, the President:

a. Must not take part in a decision in the course of carrying out their office or powers knowing that the decision might further their own private interest, the private interest of their own minor or adult child, or the private interest of any person directly associated with them, pursuant to Section 23.925(1) of the Conflicts of Interest Act;

b. Must not use their office or powers to influence or to seek to influence a decision to be made by or on behalf of the Crown or a public agency to further their own private interest, the private interest of their minor child, or the private interest of any person directly associated with them, or to improperly further any other person's private interest, pursuant to Section 23.925(2) of the Conflicts of Interest Act;

c. Must not use or communicate information not available to the general public that was gained by them in the course of carrying out their office or powers to further or seek to further a private interest of their own, or any other person's private interest, pursuant to Section 23.925(3) of the *Conflicts of Interest Act*; and

d. Must not fail to appropriately and adequately disclose a real or apparent conflict of interest in the manner specified in this Code, pursuant to Section 23.925(4) of the *Conflicts of Interest Act*.

2. The President may not be involved in a concurrent appointment, business, undertaking, employment, or self-employment, other than their role as President of the University, without the written approval of the Ethics Commissioner pursuant to Section 23.926 of the *Conflicts of Interest Act*. The President must first report the concurrent activity in accordance with Section 'E' and obtain a determination from the University that the activity is not a conflict, or is an allowed conflict, before applying to the Ethics Commissioner for approval. The President may not engage in the concurrent activity until written approval from the Ethics Commissioner is obtained.

> *TRANSITIONAL:* If the President is continuing under the same contract, agreement, or appointment with the University that was in effect as of December 15, 2017, the obligations specific to the President regarding concurrent activities as described in paragraph 2 above do not apply to the President until the earlier of:
>
> i. December 15, 2019, or
>
> ii. The date on which the President renews or extends their agreement, enters into a new agreement, or is re-appointed to continue as the President.
>
> If the President renews, extends, enters a new agreement or is re-appointed as the President on any date after December 15, 2017, the obligations regarding concurrent activities as described in paragraph 2 above apply as of that date, subject to any other time periods required by the *Conflicts of Interest Act*.
>
> The President may consult Section 23.971 of the *Conflicts of Interest Act* for greater detail on the transitional provisions.

3. The President is a designated senior official pursuant to Order in Council 085/2018 and the *Conflicts of Interest Act*. The President has a responsibility to know their obligations under that Act. The President's obligations as a designated senior official include, but are not limited to, the following:

**Restrictions on Holdings (s. 23.93)**

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The President, within 60 days of the obligations as a designated senior official taking effect, must not own or have a beneficial interest in any publicly-traded securities, subject to the following exceptions:

- The securities are held in a blind trust which meets the criteria of the *Conflicts of Interest Act* and has been approved by the Ethics Commissioner;

- The securities are held in an investment arrangement which meets the criteria of the *Conflicts of Interest Act* and has been approved by the Ethics Commissioner;

- Prior to the expiry of the 60-day period, the President applied to the Ethics Commissioner for approval to retain the ownership or beneficial interest in the securities and the Ethics Commissioner granted approval or the Ethics Commissioner granted conditional approval and the President has taken all steps directed by the Ethics Commissioner with respect to the disposition of the securities; or

- After the expiry of the 60-day period, the President acquires the ownership or beneficial interest in the securities with the prior approval of the Ethics Commissioner.

If the President acquires the ownership or beneficial interest in publicly-traded securities by gift or inheritance after the obligations as a designated senior official take effect, the President has 60 days upon receiving the securities to dispose of them or meet one of the above exceptions.

**Disclosure and Filing Requirements (ss. 23.931-23.932)**

The President, within 60 days of the obligations as a designated senior official taking effect, must:

- File a disclosure statement with the Ethics Commissioner in the form and manner specified; and

- File a return (relating to persons directly associated with the President) with the Ethics Commissioner in the form and manner specified.

The President must also observe the following ongoing obligations:

- In each subsequent year from the filing of the first disclosure statement, file a disclosure statement with the Ethics Commissioner at the time specified by the Ethics Commissioner;

- Within 30 days after any material change to the information contained in a current disclosure statement, file with the Ethics Commissioner an amending disclosure statement, setting out the changes;

- Within 30 days after any material change to the information contained in a current return, file another return with the Ethics Commissioner; and

- Within 30 days of ceasing to be a designated senior official, file a return with the Ethics Commissioner.

Failing to file or knowingly filing false or misleading information is subject to reporting and administrative penalties under section 23.934 of the *Conflicts of Interest Act*.

**Post-Employment Restrictions (s. 23.927-23.939)**

The President, upon ceasing to be a designated senior official, must observe a number of post-employment restrictions. These restrictions include:

- For a period of 12 months from the last day they held the position of President, the President shall not:

    o lobby any public office holder, as those terms are defined in the *Lobbyists Act*; and

    o act on a commercial basis or make representations on their own behalf or on behalf of any other person in connection with any ongoing matter in which the President, while acting as President, directly acted for or advised a department or public agency involved in the matter.

- For a period of 12 months from the last day the President had a direct and significant official dealing with a department or public agency, the President shall not:

    o make representations with respect to a contract with or benefit from that department or public agency; or

    o solicit or accept on their own behalf a contract or benefit from that department or public agency.

- For a period of 12 months from the last day the President had a direct and significant official dealing with an individual, organization, board of directors or equivalent body of an organization, the President shall not:

    o accept employment with that individual or organization or an appointment to the board of directors or equivalent body.

Notwithstanding the above:

- Nothing restricts the (former) President from being appointed to the board of directors or a governing body of another public agency; and

- Nothing restricts the (former) President from accepting employment with a department of the public service or a public agency in accordance with Part 1 of the *Public Service Act.*

The (former) President may apply to the Ethics Commissioner for a reduction or waiver of any time period for the post-employment restrictions, pursuant to section 23.938 of the *Conflicts of Interest Act.*

Contravention of the post-employment restrictions is an offence under section 23.939 of the *Conflicts of Interest Act* and may be subject to a fine up to $50,000.

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*TRANSITIONAL :* If the President is continuing under the same contract, agreement, or appointment with the University that was in effect as of April 4, 2018, the obligations specific to the President as a designated senior official as described in paragraph 3 above do not apply to the President until the earlier of:

    i.   April 4, 2020, or

    ii.   The date on which the President renews or extends their agreement, enters into a new agreement, or is re-appointed to continue as the President.

If the President renews, extends, enters a new agreement or is re-appointed as the President on any date after April 4, 2018, the obligations as a designated senior official described in paragraph 3 above apply as of that date, subject to any other time periods required by the *Conflicts of Interest Act*.

The President may consult Section 23.971 of the *Conflicts of Interest Act* for greater detail on the transitional provisions.

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# J.  Notice Period & Amendments

1. This Code will be submitted to the Ethics Commissioner for review pursuant to Section 23.922 of the *Conflicts of Interest Act*.

2. Providing approval has been received from the Ethics Commissioner in accordance with the *Conflicts of Interest Act*, this Code will be made public on the University of Alberta website on or before April 30, 2019.

3. The period from the date the Code is made public, until June 30, 2019 will be the public notice period.

4. This Code will be implemented on July 1, 2019.

5. The University reserves the right to amend this Code at any time, including but not limited to:

   a. on the advice or demand of the Office of the Ethics Commissioner of Alberta; or

   b. where required to ensure compliance with any changes to the *Conflicts of Interest Act,* the *Post-Secondary Learning Act*, or any other applicable legislation or order-in council; or

   c. where changes are made to University of Alberta policies and procedures through the appropriate internal approval processes and/or to collective agreements through normal negotiation processes.

6. Any amendment or replacement of this Code will be submitted to the Ethics Commissioner for approval in a manner pursuant to Section 23.923(2) of the *Conflicts of Interest Act* and any other applicable legislation.

# Appendix A: Specified Professional Associations Approved by the President

The University deems some concurrent activity to be pre-approved. In those situations, the Representative is not required to report the activity unless it otherwise creates an actual or perceived conflict of interest.

Where the Representative is an academic staff member who does not hold a full-time position at the University, and the concurrent activity requires the Representative to be a member of a specified professional association which has a code of conduct and can discipline members for a breach of that code, the concurrent activity is deemed pre-approved if the membership required is with one of the following professional associations which have been approved by the President (or the President's delegate):

- Alberta Association of Architects
- Alberta Association of Landscape Architects
- Alberta College of Pharmacy
- Alberta College of Social Workers (ACSW)
- Alberta Institute of Agrologists
- Alberta Medical Association
- Alberta Professional Planners Institute (APPI)
- Alberta Society of Professional Biologists (ASPB)
- Alberta Teacher's Association
- Alberta Urban Municipal Association (AUMA)
- Alberta Veterinary Medical Association
- American Geophysical Union
- American Industrial Hygiene Association (AIHA)
- American Psychological Association
- Apprenticeship and Industry Training (AIT)
- Association for Applied Psychophysiology and Biofeedback
- Association for Applied Sport Psychology
- Association of Change Management Professionals (ACMP)
- Association of Professional Engineers and Geoscientists of Alberta (APEGA)
- Association of Science & Engineering Technology Professional of Alberta (ASET)
- Association of the Chemical Profession of Alberta
- Board of Canadian Registered Safety Professional (BCRSP)
- Canadian Association of Information Technology Professionals
- Canadian Association of Physicists
- Canadian Athletic Therapists Association
- Canadian Bar Association (CBA)
- Canadian Registration Board of Occupational Hygienists (CRBOH)

- Canadian Institute of Actuaries

- Canadian Institute of Management (CIM)

- Canadian Institute of Planners (CIP)

- Canadian Institute of Quantity Surveyors (CIQS)

- Canadian Medical Protective Agency (CMPA)

- Canadian Physiotherapy Association

- Canadian Professionals in Human Resources Alberta

- Canadian Psychological Association

- Canadian Society of Safety Engineering (CSSE)

- Chartered Financial Analysts Institute

- Chartered Professional Accountants (CPA) Alberta

- College and Association of Registered Nurses of Alberta (CARNA)

- College of Alberta Psychologists

- College of Alberta School Superintendents

- College of Dietitians of Alberta

- College of Physicians and Surgeons of Alberta (CPSA)

- EcoCanada

- Global Association of Risk Professionals (GARP)

- Human Resources Institute of Alberta (HRIA)

- International Institute of Business Analysis (IIBA)

- International Society for Neurofeedback and Research

- Law Society of any province or territory in Canada

- Local Government Administrators Association (LGAA)

- Professional Risk Managers' International Association

- Project Management Institute (PMI)

- Project Management Professional (PMP)

- Royal College of Physician and Surgeons of Canada (RCPSC)

- Society of Actuaries

- Society of Local Government Managers (SLGM)

- Statistical Society of Canada

- Supply Chain Management Association (SCMA)

The University endeavours to include the most recent list of approved professional associations in this Appendix. However, the President (or the President's delegate) may add or remove professional associations from this list from time to time. In the case of a discrepancy between this Appendix A and the current list of approved professional associations, the current list will govern.

Item No. 12

**Governance Executive Summary**
**Advice, Discussion, Information Item**

| Agenda Title | Universal Student Ratings of Instruction (USRI) for the Academic Year 2017/18 |
|---|---|

## Item

| Proposed by | Brian Stewart, Acting Vice-Provost and Associate Vice-President of Information Technology |
|---|---|
| Presenter | Jeff Rawlings, Director/Relationship Management, Information Services & Technology<br>Sarah Forgie, Chair, GFC Committee on the Learning Environment |

## Details

| Responsibility | Provost & Vice-President (Academic) |
|---|---|
| The Purpose of the Proposal is (please be specific) | To report on the operation of USRIs in the 2017/18 academic year. |
| Executive Summary (*outline the specific item – and remember your audience*) | In September 2014, General Faculties Council approved modifications to GFC Policy Section 111.3 Teaching and Learning and Teaching Evaluation/University Student Ratings of Instruction which moved these evaluations to an electronic format. This change was instituted in Winter 2015.<br><br>GFC last received a written report in January 2016. At that time, the GFC Committee on the Learning Environment (CLE) had noted that the data reported was limited to a short time frame and that further data would be required to assess the long term impact to response rates.<br><br>CLE has received regular verbal reports on the operation of the eUSRIs.<br><br>In addition, CLE continues to work on revisions to the GFC Policy Section 111 on Teaching and Learning and Teaching Evaluation including USRIs. |
| Supplementary Notes and context | At the CLE meeting, members discussed: response rates and the length of time allotted for students to respond; how the university could improve ease of access to USRI results and if this would encourage greater student participation; that both the Faculties and IST send communications encouraging participation by students; the trend toward greater use of mobile devices and the positive response to mobile access; strategies for increasing participation such as providing class time for this purpose; and the ability to edit responses up to the submission deadline. |

## Engagement and Routing (Include proposed plan)

| Consultation and Stakeholder Participation | GFC Committee on the Learning Environment – December 5, 2018<br>GFC Executive Committee – January 14, 2019<br>General Faculties Council (for information) – January 28, 2019 |
|---|---|

## Strategic Alignment

| Alignment with *For the Public Good* | Objective 14: Inspire, model, and support excellence in teaching and learning. |
|---|---|

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Item No. 12

| Alignment with Institutional Risk Indicator | Please note below the specific institutional risk(s) this proposal is addressing. | |
|---|---|---|
| | ☐ Enrolment Management<br>☒ Faculty and Staff<br>☐ Funding and Resource Management<br>☐ IT Services, Software and Hardware<br>☐ Leadership and Change<br>☐ Physical Infrastructure | ☐ Relationship with Stakeholders<br>☒ Reputation<br>☐ Research Enterprise<br>☐ Safety<br>☒ Student Success |
| Legislative Compliance and jurisdiction | Post-Secondary Learning Act<br>GFC Committee on the Learning Environment Terms of Reference<br>GFC Executive Committee Terms of Reference | |

Attachments (each to be numbered 1 - <>)

1. Universal Students Ratings of Instruction (USRI) Academic Year 2017/18

# Universal Students Ratings of Instruction (USRI)
## Academic Year 2017/18
## November 2018

**USRI Operation**

The USRI On-line operation includes questionnaires for undergraduate and graduate courses, laboratory courses, seminars, clinical supervision courses, and reading or directed study courses. Questionnaires are generated for a single instructor and team teaching courses. In addition to the ten required Universal Student Ratings of Instruction questions, instructors, departments, and faculties are encouraged to supplement questionnaires by adding specific questions required by the course.

The USRIs are available from the withdrawal deadline until the last day of classes. Enrollment is updated daily during the administration window to exclude student withdrawals as soon as they are processed by the registrar's office.

There are various kinds of reports generated. For questions selected by an instructor, only the instructor will receive the results. For questions initiated or mandated by a department or Faculty, the results will be reported to the instructor as well as the Chair, Director, or Dean. Report reference data may consist of all classes, classes within a Faculty, or classes within a department. In addition, data can be narrowed down further by class size or course level.
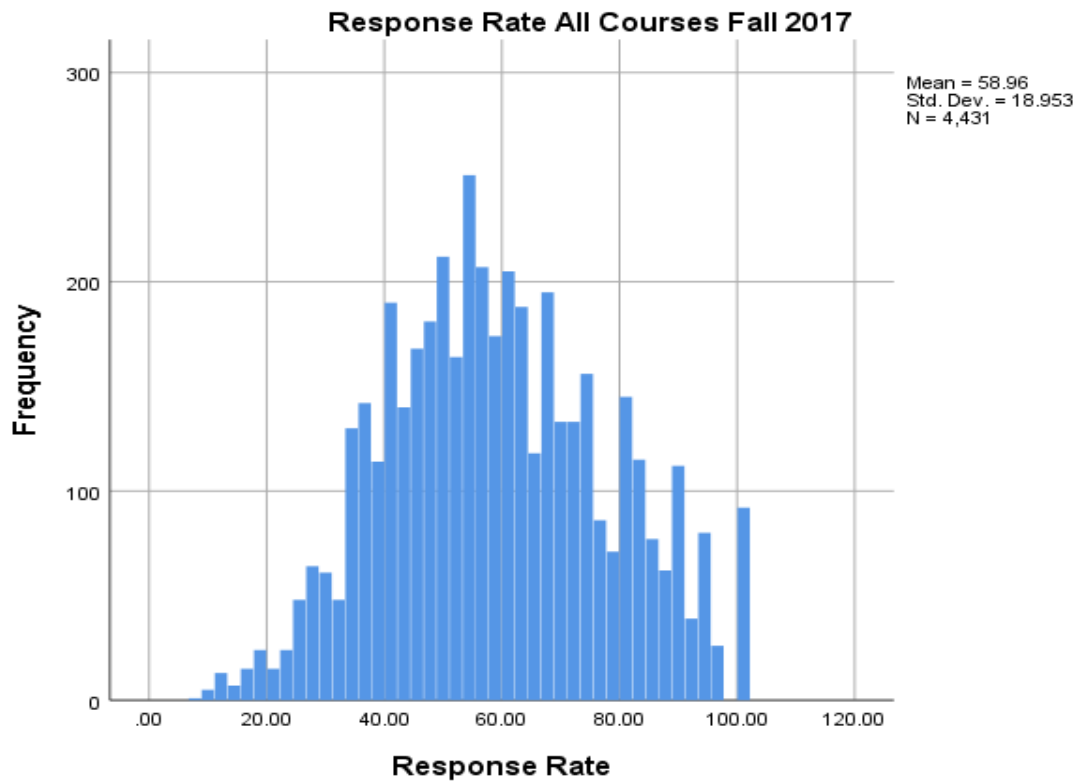
**About This Report**

All the following tables show the percentile distribution of **response rates and median scores. The 50th percentile indicates an average** value, and the 5th and 95th percentiles are given to show the typical range of values. Values appreciably below the 5th percentile could be considered anomalies needing individual investigation or explanation.

**FALL 2017**

For the Fall 2017 term, the administration of USRI questionnaires included 4,431 instructor-sections for a total of 184,747 individual questionnaires delivered to students. Instructors, departments, and faculties created 554 customized questionnaires.

## Overall Response Rate Fall 2017

| N | | | | | Percentiles | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Number of Classes | Missing | Mean | Minimum | Maximum | 5 | 25 | 50 | 75 | 95 |
| 4431 | 0 | 59.0 | 8.3 | 100.0 | 29.2 | 45.2 | 57.7 | 72.4 | 92.3 |



Response Rate All Courses Fall 2017

Mean = 58.96
Std. Dev. = 18.953
N = 4,431

Response Rate by Section Type

**Fall 2017**

| Section | N | | | | | Percentiles | | | |
|---|---|---|---|---|---|---|---|---|---|
| Type | Valid | Mean | Min | Max | 5 | 25 | 50 | 75 | 95 |
| CLN | 32 | 47.0 | 17.6 | 93.8 | 22.4 | 37.6 | 44.8 | 47.6 | 93.5 |
| LAB | 1260 | 56.0 | 10.0 | 100.0 | 25.6 | 40.0 | 53.7 | 70.0 | 94.1 |
| LBL | 118 | 53.7 | 20.0 | 100.0 | 28.5 | 38.8 | 54.5 | 66.7 | 83.3 |
| LCL | 61 | 54.9 | 21.4 | 97.0 | 27.6 | 44.1 | 53.6 | 62.8 | 85.7 |
| LEC | 2617 | 61.2 | 8.3 | 100.0 | 35.0 | 49.5 | 59.5 | 73.7 | 90.9 |
| SEM | 343 | 56.6 | 9.4 | 100.0 | 20.0 | 38.1 | 56.7 | 75.0 | 99.1 |

* CLN=clinic, LAB=laboratory, LBL=lab/lecture where lab predominates, LCL=lecture/lab where lecture predominates, LEC=Lecture, SEM=seminar

The 50th percentile for lectures (LEC) sits at **59.5%** indicating the average. We can see a considerable difference when comparing this value with other types of courses.

Different operational issues have been detected for specific course types:
- Clinical (CLN): The timing of the clinical sometimes leaves students with no time or access to complete the USRI.
- Laboratory (LAB/LBL/LCL): Inconsistent instructor/TA listings. In many cases TAs and/or students are not registered in the correct class section in Campus Solutions.
- Seminar (SEM): Not every student from the LEC sections will attend every SEM section. Some seminars are set up to provide extra help for students.
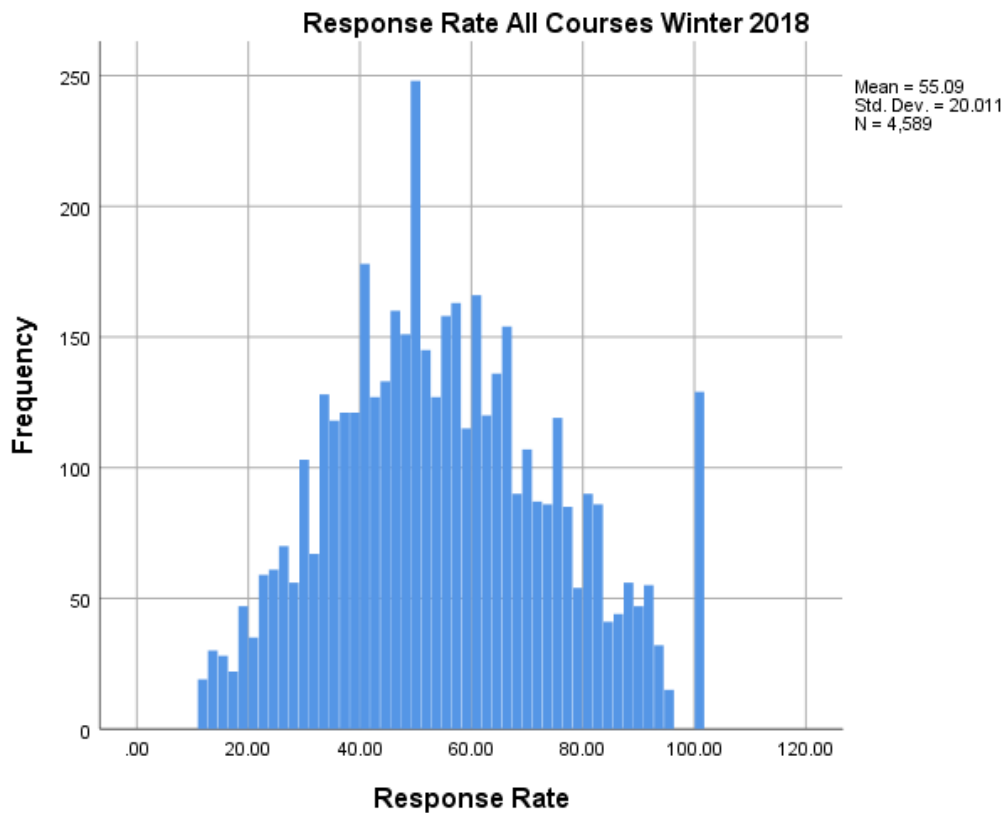
As per operational requirements and lack of accurate enrollment information for non-LEC sections, any further analysis will consider only lecture data.

**WINTER 2018**

For the Winter 2018 term, the administration of USRI questionnaires included 4,608 instructor-sections for a total of 180,122 individual questionnaires delivered to students. Instructors, departments, and faculties created 608 customized questionnaires.

## Overall Response Rate Winter 2018

| Number of Classes | N Missing | Mean | Minimum | Maximum | 5 | 25 | Percentiles 50 | 75 | 95 |
|---|---|---|---|---|---|---|---|---|---|
| 4589 | 0 | 55.1 | 11.1 | 100.0 | 23.1 | 40.0 | 53.7 | 68.8 | 90.9 |



Response Rate All Courses Winter 2018

Mean = 55.09
Std. Dev. = 20.011
N = 4,589

The overall response rate dropped from 57.7% during fall 2017 to 53.7% for Winter 2018. The difference can be attributed to the change in system authentication, which required some students to clear their web browser's cache in order to login. Having to put in extra effort discouraged some students from completing the entire process.

Response Rate by Section Type

**Winter 2018**

| Section | N | | | | Percentiles | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Type | Valid | Mean | Min | Max | 5 | 25 | 50 | 75 | 95 |
| CLN | 51 | 49.2 | 12.5 | 91.7 | 14.2 | 36.6 | 41.5 | 69.0 | 77.1 |
| LAB | 1275 | 49.2 | 11.8 | 100.0 | 18.8 | 33.3 | 46.7 | 63.2 | 88.9 |
| LBL | 123 | 57.2 | 12.5 | 100.0 | 15.6 | 45.5 | 56.3 | 73.3 | 91.7 |
| LCL | 70 | 58.5 | 15.0 | 100.0 | 24.5 | 47.2 | 60.3 | 71.6 | 88.1 |
| LEC | 2611 | 57.7 | 11.1 | 100.0 | 28.5 | 45.0 | 56.7 | 70.4 | 90.9 |
| SEM | 459 | 55.9 | 11.8 | 100.0 | 22.2 | 38.9 | 53.8 | 72.0 | 100.0 |

* CLN=clinic, LAB=laboratory, LBL=lab/lecture where lab predominates, LCL=lecture/lab where lecture predominates, LEC=Lecture, SEM=seminar

The 50th percentile for lectures (LEC) sits at **56.7%** indicating the average. We can see a considerable difference when comparing this value with other types of courses.

Different operational issues have been detected for specific course types:
- Clinical (CLN): The timing of the clinical sometimes leaves students with no time or access to complete the USRI
- Laboratory (LAB/LBL/LCL): Inconsistent instructor/TA listings. In many cases TAs are not registered in Campus Solutions
- Seminar (SEM): Not every student from the LEC sections will attend every SEM section. Some seminars are set up to provide extra help for students.

**Response Rate Comparison**
When comparing the response rate to other public institutions (as listed on public university websites), we outperform our peer institutions:
- **University of Alberta 57.7% (Fall 2017)**
- University of Victoria 43% (Fall 2017)
- McGill University 46% (Fall 2017)
- University of Toronto 43% (Academic year 2017/18)
- University of British Columbia 52% (2013)

**Delivery Periods**
The duration, in days, from start to finish of a course evaluation
- **University of Alberta – 7 days**
- University of Victoria – 14 days
- McGill University – 23-42 days
- University of Toronto – unknown
- University of British Columbia – 14 days

**Response Rate Trends**
- 49% of the responses are submitted between 10:00 am and 1:00 pm
- Over 25% of the responses are submitted using a mobile device.
- Students have a higher chance to abandon the questionnaire if there are too many questions, or if bugs or glitches appear.

**Recommendations**

- Provide time in class to do the USRIs: Based on the examination of 53 institutions, the most effective way to increase response rates is to use in-class time, and allow students to use their mobile devices.
- Extend the USRI window of administration to two weeks.
- Increase Faculty Involvement with the USRI Process. Communicate the response rate to faculty, chairs, and deans while the USRI questionnaires are still opened. At that time, instructors can be reminded to communicate with their students the importance of their feedback.

Item No. 13

**Governance Executive Summary**
**Advice, Discussion, Information Item**

| Agenda Title | Equity, Diversity, and Inclusivity (EDI) Strategic Plan |
|---|---|

**Item**

| Proposed by | Wendy Rodgers, Deputy Provost |
|---|---|
| Presenter | Wendy Rodgers, Deputy Provost |

**Details**

| Responsibility | Provost & Vice-President (Academic) / Vice-President (Finance & Administration) |
|---|---|
| The Purpose of the Proposal is (please be specific) | The Equity, Diversity, and Inclusivity (EDI) Strategic Plan is intended to lay out the University's vision and priorities with respect to EDI. The Plan is being socialized across the university, and as part of that process is presented to APC for information and discussion. |
| Executive Summary (*outline the specific item – and remember your audience*) | The plan includes a Mission and Vision as well as goals, outcomes and deliverables, and accountabilities over a four-year span. The goals are organized under the following themes: <br> · Vision and Leadership <br> · Research, Teaching, Public Service <br> · Workforce (Staff) <br> · Students and Student Life <br> · Climate <br><br> Each theme includes benchmarks for excellence - these are aspirational statements that reflect best practices among leading institutions in supporting EDI. <br><br> The plan's goals are staged over four years, reflecting work that is already underway and recognizing that other work will take time to develop thoughtfully. Many of the goals are interdependent, and activities undertaken in the first two years of the plan are needed to inform and set the stage for some of the goals slated for years three and four. <br><br> The Plan will be formally launched in February 2019. <br><br> During the socialization discussions, members of the university community are asked to consider how they can support the EDI Strategic Plan and how the Plan aligns with their units' own initiatives. |
| Supplementary Notes and context | |

**Engagement and Routing** (Include proposed plan)

| Consultation and Stakeholder Participation | The plan has been developed collaboratively with input from the university's EDI Scoping Group, co-chaired by the Deputy Provost and by the Associate Vice-President (Disclosure, Assurance, and Institutional Research). The EDI Scoping Group has approximately 50 members from a diverse range of groups, including: the four associations, faculty, staff, |
|---|---|

| | students, community advocates, and scholars in EDI. The group has open membership; anyone is welcome to join.<br><br>Additional consultation occurred with all Vice-President portfolios and with the President's Executive Committee – Strategic, and Scoping Group members have been encouraged to consult within their own units or constituencies.<br><br>The plan is being socialized across the university community through the fall and winter. The socialization process includes:<br>· Presentation and discussion with Deans' Council, Vice Provosts' Council, University Research Planning Committee<br>· Presentation to governance bodies:<br>   o Academic Planning Committee – Nov. 7, 2018<br>   o General Faculties Council – Jan. 28, 2018<br>   o Board Human Resources and Compensation Committee – Nov. 27, 2018<br>   o Board Learning and Discovery Committee – Nov. 30, 2018<br>   o Board of Governors – Dec. 14, 2018 |
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**Strategic Alignment**

| Alignment with *For the Public Good* | Objectives 1, 3, and 4. | |
|---|---|---|
| Alignment with Institutional Risk Indicator | Please note below the specific institutional risk(s) this proposal is addressing. | |
| | ☐ Enrolment Management<br>☒ Faculty and Staff<br>☐ Funding and Resource Management<br>☐ IT Services, Software and Hardware<br>☒ Leadership and Change<br>☐ Physical Infrastructure | ☒ Relationship with Stakeholders<br>☒ Reputation<br>☐ Research Enterprise<br>☐ Safety<br>☒ Student Success |
| Legislative Compliance and jurisdiction | Discrimination, Harassment, and Duty to Accommodate Policy<br>Alberta Human Rights Act | |

Attachments (each to be numbered 1 - <>)

1. EDI Strategic Plan (socialization process draft)

*Prepared by:* Logan Mardhani-Bayne, Strategic Development Manager, lmardhan@ualberta.ca

UNIVERSITY OF ALBERTA

STRATEGIC PLAN FOR
# EQUITY, DIVERSITY, AND INCLUSIVITY

DRAFT

*The University of Alberta respectfully acknowledges that we are located on Treaty 6 territory, a traditional gathering place for diverse Indigenous peoples including the Cree, Blackfoot, Métis, Nakota Sioux, Iroquois, Dené, Ojibway/ Saulteaux/Anishinaabe, Papaschase, Inuit, and many others whose histories, languages, and cultures continue to influence our vibrant community.*

## Preamble

This equity, diversity, and inclusivity (EDI) strategic plan builds on the University of Alberta's strategic plan For the Public Good, which holds that "we begin with people—people with ideas, talent, and purpose. Then we act." At our university we value, respect, and are committed to achieving a more diverse, equitable, accessible, and inclusive environment for all who work, learn, and live within our community. Consistent with For the Public Good, we recognize that "when we lead, we tackle the most important local, national, and global challenges." Fundamental to our vigorous pursuit of the public good is our commitment to advancing EDI and respectful relations across and among our people, disciplines, faculties, campuses, and beyond.

## Vision

The University of Alberta is committed to cultivating an institutional culture that values, supports, and promotes equity, human rights, respect, and accountability among faculty, staff, and students. In our inclusive community, we encourage and support individual and collaborative efforts to identify and address inequities, and we welcome and enable contributions of all voices as we engage with diverse ideas, knowledges, and perspectives in the pursuit of inclusive excellence for the public good.

## Mission

The University of Alberta will work to achieve an accessible, equitable, and inclusive community of students, faculty, and staff, that supports our learning environment shaped by curiosity, rigorous inquiry, respect, and a culture of human rights. We are committed to achieving equitable access and opportunities in admissions, employment, retention, and advancement; and a working, learning, and living environment free from discrimination, bullying, and harassment. It is only through such a commitment that the University of Alberta can reach its larger vision of being a space to actively foster intellectual curiosity, rigorous inquiry, and ingenuity.

We envision, and will cultivate, a community that recognizes equity and diversity as fundamental to achieving inclusive excellence in learning, teaching, research, service, and community engagement.

We acknowledge that this commitment requires identifying and addressing informal obstacles, barriers, and biases that limit equitable access and opportunities, as well as intentionally pursuing and implementing system-wide equity initiatives to embed diversity in all university structures, programs, policies, and practices as well as in our visual and text identities.

Determined to influence those formal and informal structures and mechanisms that limit access and opportunities, we will use principles of fairness and evidence-based policies to support decision-making, collect and analyze diversity data, and establish equity goals, targets, and benchmarks. Recognizing that achieving EDI goals requires responsible and accountable leadership at all levels of the university, we will regularly use, evaluate, and report on progress toward achieving an equitable and inclusive university.

# Principles

Principles are more fundamental than institutional policies and objectives. They will inform policies, procedures, and objectives; and they help us determine the University of Alberta's strategic goals, objectives, and actions. The university's EDI Strategic Plan is guided by the following principles:

- Diversity
- Equity
- Inclusion
- Human Rights
- Equality (substantive vs. formal)
- Intersectionality
- Accessibility
- Respect for reconciliation with Indigenous peoples

## Diversity

Diversity refers to difference or variety. In an EDI context, diversity refers to demographic or identity-diversity; including that based on the protected grounds. In universities, diversity encompasses social or identity-diversity, as well as difference or variety in education, perspectives, opinions, heuristics, disciplines, faculties, skills, and learning opportunities. The University of Alberta supports and encourages diversity through the identification and removal of barriers and biases, and the creation of workplaces and learning environments that are free of harassment and discrimination.

## Equity

Equity is about fairness: in access to education and employment and in opportunity to succeed in these domains. Employment equity principles, policies, and practices enable equitable access, representation, opportunities, and meaningful participation of socially diverse people—from the federally designated and other equity-seeking groups such as women, members of visible minority groups, Indigenous peoples, persons with disabilities, and LGBTQ2S people.

We recognize that policies, practices, informal processes, and language created by and for particular groups of people, with a default norm in mind, produce structural barriers that limit access and inclusion for other individuals and groups. Taking equity as a guiding principle means that the university will respect and value the differences of its members by actively identifying and removing barriers, including structural barriers, to ensure that historically excluded groups have the same opportunity to fully flourish at the University of Alberta.

## Inclusion

Inclusion means that we value and cultivate full and meaningful engagement of historically and structurally excluded individuals and groups in all aspects of life at the University of Alberta. Inclusion refers to enabling all individuals on campus to fully enjoy the opportunities the university has to offer, and to have all equity-seeking groups meaningfully represented in all aspects of university life and decision-making roles campus wide.

## Human Rights

Every person, by virtue of being human, is entitled to certain fundamental rights regardless of race, colour, ancestry, place of origin, religious beliefs, gender, gender identity and gender expression, physical disability, mental disability, marital status, family status, sexual orientation, age, political beliefs, and any other protected ground as amended over time. Each person is entitled to a life of dignity, equality, and respect, free from discrimination, harassment, and bullying. The university's commitment to human rights is reflected in its policies, practices, and the supports it makes available to the members of its community.

## Equality (Substantive vs. Formal)

The University of Alberta embraces a substantive approach to equality – this means that achieving equality is not only a matter of treating likes alike (formal equality), but also requires us to consider and address the range of conditions that create experiences of disadvantage for some individuals and groups. We consider the full context and impacts of our practices and processes, recognizing that these may be experienced differently by different individuals and groups.

## Intersectionality

An intersectional approach to equity, diversity, and inclusion begins from the understanding that the different vectors of social diversity, (race, class, gender, sexuality, disability, nationality, religion, language, etc.) do not exist separately or in isolation from each other. Instead, the various vectors of social diversity are interwoven and affect each other. Intersectionality focuses on how multiple, interwoven vectors shape social belonging, cultural representations, social and political institutions, as well as the material conditions of our lives in ways that are not reducible to any singular vector or social category. Initially developed by women of colour seeking to understand how their existence and experiences of marginalization could not be reduced to gender or racial categorization alone, we today understand that everyone's life is shaped by intersecting social categories. Intersecting social categories play a role in exclusion and shape social, political, and material marginalization and dominance. Experiences and systems of persistent social inequality cannot be understood without an intersectional framework.

## Accessibility

Accessibility refers to the degree to which physical, pedagogical, and administrative structures of the University of Alberta are (re)designed to enable the full, meaningful, and equitable engagement of all of the university's community members. Accessibility includes, but is much broader than, ramped access to buildings; it includes, for example, designing for physical, financial, sensory, social, and language-level access. Whereas accommodation refers to making specific changes to support the full participation of an individual who has encountered barriers, an accessible campus is one that seeks to pro-actively reduce as many barriers as possible to full and meaningful participation of the full campus community, while creating efficient and transparent processes for individuals to gain the accommodations they require and are entitled to by law.

## Respect for Reconciliation with Indigenous Peoples

Reconciliation refers to a process of building and sustaining respectful, ethical relationships between Indigenous peoples and the rest of Canada based on mutual understanding and respect. Universities across Canada have responded to the Truth and Reconciliation Commission's 94 Calls to Action in ways relevant to their institutional context. The University of Alberta has responded with an emphasis on capacity building and foundational change in support of Indigenous initiatives, programming, and personnel with a vision for making the U of A a welcoming place for Indigenous students, faculty, and staff.

# Strategic Plan Themes

The following plan identifies themes and benchmarks of excellence, goals, outcomes, and directions to help us achieve our vision. The plan is organized around five core themes:

**Vision and Leadership:** The university's leadership, communications, and statements about itself reflect a high-level, consistent, and reliably strong commitment to EDI.

**Research, Teaching, and Public Service:** Research, Teaching, and Public (academic) Service are understood to be implicated in the development of EDI. They are also the major functions of the university and areas of work for academic staff. Faculty are encouraged to do, and are recognized for, work that thoughtfully and rigorously incorporates or contributes to equity, diversity, and/or inclusivity.

**Workforce (all faculty and staff):** The university's commitment to EDI is reflected in recruitment, retention, and advancement of faculty and staff; faculty and staff are prepared to work in a diverse environment and to have the knowledge and skills to contribute to equity and inclusivity.

**Students and Student Life; and (Research) Trainees:** The university strives to provide equitable access to disciplines of study and scholarly opportunities; to study and disseminate knowledge about EDI; and to provide an environment attentive to, and that addresses barriers to inclusion, access, and success (especially of historically excluded groups).

**Climate:** The university strives to create an equitable and inclusive environment and culture for all members of its community.

# Accountability

Overall accountability for this plan resides with the President and the Provost and Vice-President (Academic). On an annual basis, the university will evaluate its progress, report to the community, and update the plan as necessary.

The plan itself contains specific commitments to develop and report on targets and benchmarks, and defines senior executive-level accountabilities for each specific goal.

# The Plan

The following plan identifies themes and benchmarks of excellence, goals, and outcomes and directions to help us achieve our vision. This is a four-year plan, with specific goals and deliverables identified for each year. Benchmarks are used to assess progress toward goals and outcomes.

The goals listed below are staged over four years, reflecting work that is already underway and recognizing that other work will take time to develop thoughtfully - indeed, many of the goals are interdependent, and activities undertaken in the first two years of the plan are needed to inform and set the stage for some of the goals slated for years three and four.

| Vision and Leadership: The university's leadership, communications, and statements about itself reflect a high-level, consistent, and reliably strong commitment to EDI. | | | | |
|---|---|---|---|---|
| **Benchmarks for Excellence** | **Year one** | **Year two** | **Year three** | **Year four** |
| Institutional commitment and targets are established Institutional values and goals around EDI are clearly articulated<br><br>Specific numerical targets are established and reported across our EDI goals Accountabilities for achieving goals are clear, with specific consequences for failure to meet targets | **Goals**:<br><br>Statements of commitment are developed and made by senior leadership<br><br>Senior leaders understand their roles as ambassadors for EDI<br><br>Demographic survey for faculty and staff is developed and launched | **Goals**:<br><br>Establishment of working group on metrics and benchmarking for EDI | **Goals**:<br><br>Establishment of baseline EDI data and benchmarks – demographic and cultural - for the institution (in consideration of comparators) | **Goals**: |
| | **Outcomes & deliverables:**<br><br>Institutional and Senior Leadership statements exist in prominent venues. | **Outcomes & deliverables:**<br><br>Set of measurable target benchmarks established | **Outcomes & deliverables:**<br><br>Assessment completed and U of A performance against target benchmarks available | **Outcomes & deliverables:** |

| | High level target outcomes established (qualitative and quantitative) | Template for prioritizing targets and financial commitments associated to their achievement is developed | | |
|---|---|---|---|---|
| | *Accountability:* *President, Vice-Presidents, Deans.* | *Accountability:* *Vice-President (Finance & Administration)* | *Accountability:* *Provost & Vice-President (Academic); Vice-President (Finance & Administration)* | *Accountability:* |
| **Benchmarks for Excellence** | **Year one** | **Year two** | **Year three** | **Year four** |
| U of A community affirmation of EDI Strategic Plan | **Goals**: Socialization sessions held to affirm accountabilities  Rollout discussions for broader affirmation and ideas for local implementation  Communications and education plan to support initial stages of Plan implementation | **Goals**: Members of the university community receive information (commensurate with their position) and education on the nature and importance of the EDI strategic plan | **Goals**: Members of the university articulate their own plans for implementing EDI strategies. Incorporation of financial commitments required to achieve EDI goals into annual unit planning processes | **Goals**: |
| | **Outcomes & deliverables:** Formal adoption of the EDI strategic plan | **Outcomes & deliverables:** Strategic plan is reviewed annually with consideration of community feedback | **Outcomes & deliverables:** Local plans for EDI strategies are developed and articulated. | **Outcomes & deliverables:** Evaluations include attention to EDI strategy implementation. |
| | *Accountability:* *Provost & Vice-President (Academic)* | *Accountability:* *Vice-Presidents* | *Accountability:* *Vice-Presidents* | *Accountability:* *Vice-Presidents* |
| **Benchmarks for Excellence** | **Year one** | **Year two** | **Year three** | **Year four** |
| Senior Leadership engages in ongoing professional development in Equity, Diversity, and Inclusivity. | **Goals**: Anti-bias training held for senior leadership (Deans, VPs) | **Goals**: Annual review and goal-setting established for senior leaders | **Goals**: Continuation of annual review of EDI progress | **Goals**: |

| | Year one | Year two | Year three | Year four |
|---|---|---|---|---|
| University leadership annually reviews and reports on its EDI education and professional development activities. | Inclusive excellence training held for Vice-Provosts' Council | Inclusion of explicit and specific reporting and evaluation of senior administrators on achievement of EDI goals | | Continuation of annual reviews of EDI progress and goal-setting |
| | **Outcomes & deliverables:**<br><br>Two training sessions for senior administrators completed<br><br>Templates for explicit and specific EDI goal setting and associated evaluation through annual reviews of senior administrators | **Outcomes & deliverables:**<br><br>Annual session established<br><br>Reporting on short-term review and goals (last year, this year, next year pattern)<br><br>Build matrix of EDI goals and associated progress for the senior administration portfolios | **Outcomes & deliverables:**<br><br>Continuation of annual reporting<br><br>Reporting strategy and process on progress from senior administration portfolios | **Outcomes & deliverables:**<br><br>Evaluation and reporting on implementation and achievement of unit plans and targets |
| | *Accountability:*<br>*Vice-Presidents, Deans* | *Accountability:*<br>*Vice-Presidents, Deans* | *Accountability:*<br>*Vice-Presidents, Deans, other administrators (Chairs, Vice Provosts)* | *Accountability:*<br>*Vice-Presidents* |
| **Benchmarks for Excellence** | **Year one** | **Year two** | **Year three** | **Year four** |
| Our EDI values are reflected in our external marketing and communications. | **Goals**:<br><br>Development of EDI gateway/website | **Goals**:<br><br>Development of EDI lens(es) which inform brand platform development and review university websites, communications, and marketing vehicles, including Advancement materials, for evidence of diversity and inclusiveness | **Goals**:<br><br>University online communications meet enhanced standards for accessibility going forward | **Goals**: |

| | Outcomes & deliverables: | Outcomes & deliverables: | Outcomes & deliverables: | Outcomes & deliverables: |
|---|---|---|---|---|
| | Report on methods and results of review and subsequent actions taken or planned | Tools and guidelines are in place for university communication and marketing materials. | EDI considerations are reflected in brand platform development. | |
| | *Accountability:* *Vice-President (University Relations); Vice-President (Advancement); Vice-President (Academic)* | *Accountability:* *Vice-President (University Relations); Vice-President (Advancement)* | *Accountability:* *Vice-President (University Relations)* | *Accountability:* |

**Research, Teaching, Public Service: Research, Teaching, and Public (academic) Service are understood to be implicated in the development of EDI. Faculty are encouraged to do, and are recognized for, work that thoughtfully and rigorously incorporates or contributes to equity, diversity, and/or inclusivity.**

| Benchmarks for Excellence | Year one | Year two | Year three | Year four |
|---|---|---|---|---|
| The university supports a culture of EDI across its research, teaching, and training activities (including post-doctoral fellows)<br><br>The university leverages external requirements for EDI targets to mobilize and model change, and achieve outcomes more quickly. | **Goals**:<br><br>Develop targets, plans, incentives for incorporating EDI principles and practices into conducting, evaluating, and disseminating research. | **Goals**:<br><br>Implement targets for EDI amongst trainees | **Goals**:<br><br>Based on assessment of university culture and climate, develop strategies to promote EDI in research training | **Goals**:<br><br>Develop a mechanism/community for sharing best practices in EDI in research activities |
| | **Outcomes & deliverables:** | **Outcomes & deliverables:** | **Outcomes & deliverables:**<br><br>Strategies and action plan in place | **Outcomes & deliverables:** |
| | *Accountability:*<br>*Provost and Vice-President (Academic); Vice-President (Research)* | *Accountability:*<br>*Provost and Vice-President (Academic); Vice-President (Research)* | *Accountability:*<br>*Vice-President (Research)* | *Accountability:*<br>*Vice-President (Research)* |
| **Benchmarks for Excellence** | **Year one** | **Year two** | **Year three** | **Year four** |
| The university meets or exceeds diversity and equity targets for Canada Research Chairs (CRCs) and Canada Excellence Research Chairs (CERCs). | **Goals**:<br><br>Continue implementation of CRC and CERC equity plans and targets | **Goals**: | **Goals**: | **Goals**: |

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| | **Outcomes & deliverables:**<br><br>Annual reports on CRC allocations and processes and progress against targets | **Outcomes & deliverables:** | **Outcomes & deliverables:** | **Outcomes & deliverables:** |
| | *Accountability:*<br>*Provost and Vice-President (Academic); Vice-President (Research)* | *Accountability:* | *Accountability:* | *Accountability:* |
| **Benchmarks for Excellence** | **Year one** | **Year two** | **Year three** | **Year four** |
| Centre for Teaching and Learning (CTL) maintains ongoing focus on, and resources for, EDI, with an emphasis on removing barriers to accessible participation in scholarship and the adoption of principles of universal design for learning. | **Goals:** | **Goals:**<br><br>Teaching: CTL educational developer position established to support EDI in curricula and pedagogy<br><br>Learning: Programming developed for instructors to create inclusive and accessible learning environments. | **Goals:**<br><br>CTL support for developing EDI in curricula is launched<br><br>CTL EDI programming is launched | **Goals:**<br><br>Development of accessible and inclusive learning policies |
| | **Outcomes & deliverables:** | **Outcomes & deliverables:**<br><br>Position created in CTL<br><br>Learning opportunities for instructors created and launched | **Outcomes & deliverables:**<br><br>CTL EDI programming delivered, evaluated, and reported on | **Outcomes & deliverables:**<br><br>CTL ongoing education and training, with evaluation and reporting |
| | *Accountability:* | *Accountability:*<br>*Provost and Vice-President (Academic)* | *Accountability:*<br>*Provost and Vice-President (Academic)* | *Accountability:*<br>*Provost and Vice-President (Academic)* |

| Benchmarks for Excellence | Year one | Year two | Year three | Year four |
|---|---|---|---|---|
| Diversity in scholarship:<br><br>Innovation that addresses EDI is encouraged in all scholarly activity and curriculum development<br><br>Pedagogical innovation that addresses EDI is encouraged<br><br>Both curricula and pedagogies are regularly reviewed and revised to reflect emerging EDI goals and objectives. | **Goals**:<br><br>Development of guidelines (and position papers) on best practices for supporting EDI in teaching, research, and service. | **Goals**:<br><br>Development of proposed methodology for conducting an inventory of curricula and pedagogies that support EDI values; this to include reviewing topics, methods research practices, (e.g. composition of research teams). | **Goals**:<br><br>Conduct of and reporting on an inventory.<br><br>Release of initial recommendations emerging out of inventory project. | **Goals**: |
| Development of programming in EDI Studies (such as courses or certificates or major/minor) | **Outcomes & deliverables:**<br><br>Guidelines available. | **Outcomes & deliverables:**<br><br>Report on methods for conducting such an inventories and subsequent reporting | **Outcomes & deliverables:**<br><br>Progress report on programming development and planning | **Outcomes & deliverables:** |
| Diversity is reflected in research teams, methods, and participant samples | *Accountability:*<br>*Provost and Vice-President (Academic); Vice-President (Research)* | *Accountability:*<br>*Provost and Vice-President (Academic); Vice-President (Research); Vice-President Finance and Administration* | *Accountability:*<br>*Provost and Vice-President (Academic); Vice-President Research; Vice-President Finance and Administration* | *Accountability:* |
| **Benchmarks for Excellence** | **Year one** | **Year two** | **Year three** | **Year four** |
| Faculty pathways:<br><br>Pathways into Science, Technology, Engineering, and Math (STEM) are supported and enhanced<br><br>Pathways into and through the professoriate are supported and enhanced | **Goals**:<br><br>Identification of existing pathway programs, potential gaps, and potential new programs, including training environments<br><br>Review of literature on pathway programs | **Goals**:<br><br>Report on inventory of existing pathway resources and gaps<br><br>Development of report and recommendations based on review of the literature | **Goals**:<br><br>Expansion of existing program(s) and/or design additional programs to address gaps | **Goals**: |

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| | **Outcomes & deliverables:**<br><br>Methods and procedures developed to survey existing programs and resources<br><br>Completed literature review | **Outcomes & deliverables:**<br><br>Recommendations identified based on survey and review, including study of options to resource planned changes | **Outcomes & deliverables:**<br><br>Proposal of new and or expanded processes to support EDI in faculty and trainee recruitment, retention, and advancement | **Outcomes & deliverables:** |
| | *Accountability:*<br>*Provost and Vice-President (Academic); Vice-President (Research)* | *Accountability:*<br>*Provost and Vice-President (Academic) ; Vice-President (Research)* | *Accountability:*<br>*Provost and Vice-President (Academic) ; Vice-President (Research), Deans* | *Accountability:* |
| **Benchmarks for Excellence** | **Year one** | **Year two** | **Year three** | **Year four** |
| There are sufficient resources and supports for underrepresented students, faculty, staff, and postdoctoral fellows at U of A to have equitable access to teaching, research, and leadership opportunities. | **Goals**:<br><br>Initiation of research to identify best practices in mentorship programs | **Goals**:<br><br>Implementation of pilot mentorship programs | **Goals**:<br><br>Evaluation, refinement, and expansion of opportunities | **Goals**:<br><br>Service: Initiation of process of encouraging faculties/units to explicitly engage in community partnerships that are mutually beneficial in development of EDI |
| | **Outcomes & deliverables:**<br><br>Report and recommendations based on best practices review | **Outcomes & deliverables:**<br><br>Selection of programs or target faculties/units for pilots | **Outcomes & deliverables:**<br><br>Sustainable implementation of effective programming. | **Outcomes & deliverables:**<br><br>Process recommendations in place to facilitate community-university engagement |
| | *Accountability:*<br>*Provost and Vice-President (Academic)* | *Accountability:*<br>*Provost and Vice-President (Academic); Vice-President (Finance & Administration)* | *Accountability:*<br>*Provost and Vice-President (Academic); Vice-President (Finance & Administration)* | *Accountability:*<br>*Provost and Vice-President (Academic)* |

| Workforce (Faculty and Staff): The university's commitment to EDI is reflected in recruitment, retention, and advancement of faculty and staff; faculty and staff are prepared to work in a diverse environment and have the knowledge and skills to contribute to equity and inclusivity. | | | | |
|---|---|---|---|---|
| **Benchmarks for Excellence** | **Year one** | **Year two** | **Year three** | **Year four** |
| EDI values are consistently reflected in recruitment practices, including the development and implementation of processes for establishing meaningful and sustainable relationships with under-represented communities.<br><br>Attitudes, behaviours, skills, and knowledges relating to EDI are recognized and rewarded in performance reviews and in advancement practices.<br><br>Creation of access for persons with disability to supports, services, and information, and effectively communicating these. | **Goals**:<br><br>Review of all relevant policies and procedures for recruitment, retention, and selection of all faculty and staff to explicitly incorporate structures and steps to support EDI focus | **Goals**:<br><br>Development of training/education sessions.<br><br>Convening of working group to develop materials for EDI (and related) training (To be overseen by the Mandatory Training Working Group) | **Goals**:<br><br>EDI and related training is implemented for all supervisory staff. Knowledge and proficiency are regularly evaluated.<br><br>Increase participation of under-represented groups across the university | **Goals**:<br><br>Incorporation of an EDI lens into policy development and review |
| | **Outcomes & deliverables:**<br><br>Revised recruitment and selection policies and procedures initiated, with governance approvals process underway | **Outcomes & deliverables:** | **Outcomes & deliverables:**<br><br>Collection of data on demographics of supervisory staff and their respective supervisees; implement plans and associated evaluation to change the culture of under representation where it exists<br><br>Instrument created, data collected, report created, next steps planned for resultant recommendations and for future data collection cycles | **Outcomes & deliverables:** |
| | *Accountability:*<br>*Provost & Vice-President (Academic); Vice-President (Finance & Administration)* | *Accountability:*<br>*Provost & Vice-President (Academic); Vice-President* | *Accountability:*<br>*Provost & Vice-President (Academic); Vice-President* | *Accountability:* |

| | | (Finance & Administration); Vice-President (Research) | (Finance & Administration); Vice-President (Research) | |
|---|---|---|---|---|
| **Benchmarks for Excellence** | **Year one** | **Year two** | **Year three** | **Year four** |
| EDI-related support for all faculty and staff are robust and accessible, including both service and advocacy supports. | **Goals**:<br><br>Create an inventory of existing supports for faculty and staff<br><br>Review award practices to be inclusive and recognize diversity (e.g., Vargo, UCup, DUP, Kaplan (Research Awards)) | **Goals**:<br><br>Evaluation: Review of Faculty Standards (for evaluation) for evidence of facilitators and barriers to EDI, as well as multi-disciplinarity<br><br>Review annual evaluation processes for staff to ensure support and recognition of EDI | **Goals**:<br><br>Evaluate existing support for staff, faculty, students, and postdoctoral fellows who experience discrimination and harassment on the basis of the protected grounds (e.g., training for academic supervisors) | **Goals**: |
| | **Outcomes & deliverables:**<br><br>Report completed on methods and results of review of Faculty Standards, and award practices including recommendations for faculty and staff<br><br>Recommendations developed to address EDI in Faculty Standards and award practices | **Outcomes & deliverables:**<br><br>Educational and training needs to improve supports identified<br><br>Review of existing services completed | **Outcomes & deliverables:**<br><br>Implementation of recommendations from reviews is in progress | **Outcomes & deliverables:** |
| | *Accountability:*<br>*Provost and Vice-President (Academic); Vice-President (Research); Vice-President (Finance & Administration)* | *Accountability:*<br>*Provost and Vice-President (Academic); Vice-President (Research); Vice-President (Finance & Administration)* | *Accountability:*<br>*Provost and Vice-President (Academic); Vice-President (Research)* | *Accountability:* |

| Students and Student Life; and (Research) Trainees (including Post-Doctoral Fellows): The university strives to provide equitable access to a range of disciplines of study and other scholarly opportunities, and provides an environment that is attentive to, and addresses, barriers to inclusion, access, and success (especially of historically excluded groups). | | | | |
|---|---|---|---|---|
| **Benchmarks for Excellence** | **Year one** | **Year two** | **Year three** | **Year four** |
| Outreach programs to recruit academically competitive students from under-represented groups.<br><br>Creating access to supports, services, and information for persons with disabilities.<br><br>The university will provide resources, including supports, to address workplace climate related to protected grounds. | **Goals:**<br><br>Begin inventory of offices concerned with student life and services | **Goals**:<br><br>Convening of Student/Trainee Life working group<br><br>Identification of strengths and gaps in supports and services for undergraduate and graduate students, and postdoctoral fellows and research trainees. | **Goals**:<br><br>Accommodation processes and procedures reviewed.<br><br>Assessment of equitable access to programs and disciplines of study. | **Goals**:<br><br>Reviews of application processes for professional programs for barriers and facilitators of EDI.<br><br>Implementation of recommendations for accommodation and equitable access. |
| | **Outcomes & Deliverables**<br><br>List of known offices and services. | **Outcomes & deliverables:**<br><br>Priority areas are identified by population group and issue. | **Outcomes & deliverables:**<br><br>Recommendations and resources are identified and implementation plans developed. | **Outcomes & deliverables:**<br><br>Reviews completed and recommendations identified. |
| | | *Accountability:*<br>*Provost & Vice-President (Academic); Vice-President (Research)* | *Accountability:*<br>*Provost & Vice-President (Academic); Vice-President (Finance & Administration); Vice-President (Facilities & Operations)* | *Accountability:*<br>*Provost & Vice-President (Academic)* |

| Benchmarks for Excellence | Year one | Year two | Year three | Year four |
|---|---|---|---|---|
| The university ensures adequate and ongoing EDI-related resources for students | **Goals**: | **Goals**: | **Goals**:<br><br>Work initiated with Dean of Students and Vice Provosts' Council to determine placement of student-focused equity supports | **Goals**: |
| | **Outcomes & deliverables:** | **Outcomes & deliverables:** | **Outcomes & deliverables:**<br><br>Recommendation for placement of student-focused equity supports is developed | **Outcomes & deliverables:** |
| | *Accountability:* | *Accountability:* | *Accountability:*<br>*Provost & Vice-President (Academic); Vice-President (Research)* | *Accountability:* |

**Climate: The university strives to create an equitable and inclusive environment and culture for all members of the University of Alberta community.**

| Benchmarks for Excellence | Year one | Year two | Year three | Year four |
|---|---|---|---|---|
| The university regularly identifies and remediates areas requiring improvement for inclusivity and celebrates areas working well.<br><br>Surveys of institutional culture and climate reflect knowledge about, and commitment to, EDI<br><br>Surveys of institutional culture and climate reflect that members of historically excluded and marginalized groups identify the U of A as an equitable place to learn and work. | **Goals**:<br><br>Review of availability of institutional culture assessment processes | **Goals**:<br><br>Development of a study of university culture, including EDI | **Goals**:<br><br>Implementation of regular assessment of culture<br><br>Review of structure of funding programs (e.g. accommodation and benefits). | **Goals**:<br><br>Develop plans for implementation of education/training |
| | **Outcomes & deliverables:** | **Outcomes & deliverables:**<br><br>Culture assessment project is launched | **Outcomes & deliverables:**<br><br>Report on outcomes of culture survey | **Outcomes & deliverables:**<br><br>Report back to the university community on culture survey with priority areas identified |
| | *Accountability:*<br>*Vice-Presidents* | *Accountability:*<br>*Provost & Vice-President (Academic); Vice-President (Finance & Administration)* | *Accountability:*<br>*Provost & Vice-President (Academic); Vice-President (Finance & Administration)* | *Accountability:*<br>*Provost & Vice-President (Academic); Vice-President (Finance & Administration)* |
| **Benchmarks for Excellence** | **Year one** | **Year two** | **Year three** | **Year four** |
| The University of Alberta meets or exceeds accessibility standards articulated in the Alberta Building Code and strives to achieve principles of universal design. | **Goals**:<br><br>Develop Terms of Reference and establish a working group to develop a set of guiding principles, design guidelines and category priorities for planning, design, and budgeting purposes. | **Goals**:<br><br>Develop a three-year planning, and implementation road map to align with the University's Infrastructure Strategy as supported by GOA allocated capital and Infrastructure | **Goals**:<br><br>Implement Year 1 projects. | **Goals**:<br><br>Evaluate completed projects and adopt lessons learned to Year 2 projects. |

| | Year one | Year two | Year three | Year four |
|---|---|---|---|---|
| The university has a robust process for recognizing accessibility barriers and reducing them wherever possible. | | Maintenance Program (IMP) funding. | | |
| | **Outcomes & deliverables:**<br><br>Working Group established and guiding principles created. | **Outcomes & deliverables**:<br><br>Road map for project planning and implementation developed. | **Outcomes & deliverables:**<br><br>Implement funded projects. | **Outcomes & deliverables:**<br><br>Evaluation of lessons learned from implemented projects integrated into Year 2 and beyond design and project execution. |
| | *Accountability:*<br>*Vice-President (Facilities & Operations)* | *Accountability:*<br>*Vice-President (Facilities & Operations)* | *Accountability:*<br>*Vice-President (Facilities & Operations)* | *Accountability:*<br>*Vice-President (Facilities & Operations)* |
| **Benchmarks for Excellence** | **Year one** | **Year two** | **Year three** | **Year four** |
| The university has an efficient and transparent process for supporting university community members who have encountered barriers. | **Goals:** | **Goals:**<br><br>Review accountability and support processes and identify opportunities for improvement, (so individuals do not have to advocate for themselves) | **Goals:**<br><br>Develop accountability and support processes based on opportunities identified | **Goals:** |
| | **Outcomes & deliverables:** | **Outcomes & deliverables:**<br><br>Engagement process developed and in place<br><br>Resource implications considered | **Outcomes & deliverables:**<br><br>Final report and recommendations available<br><br>Early implementation of obvious interventions | **Outcomes & deliverables:** |
| | *Accountability:*<br>*Provost & Vice-President (Academic); Vice-President (Finance & Administration)* | *Accountability:*<br>*Provost & Vice-President (Academic); Vice-President (Finance & Administration)* | *Accountability:*<br>*Provost & Vice-President (Academic); Vice-President (Finance & Administration)* | *Accountability:*<br>*Provost & Vice-President (Academic); Vice-President (Finance & Administration)* |

## EDI STRATEGIC PLAN SCOPING COMMITTEE

Akanksha Bhatnagar: Vice-President Academic, Students' Union

Alex Clark: Associate Vice-President, Research

Anastasia Lim: Executive Director, University Relations

André Costopoulos: Dean of Students

Andrea Patrick: Portfolio Initiatives Manager, Office of the Provost and Vice-President (Academic)

Andrea Smith: Senior Administrative Officer, Office of the Vice-President (University Relations)

Ania Ulrich: Professor, Faculty of Engineering

Benjamin Louie: University Architect

Bryan Hogeveen: Interim Vice-Dean, Faculty of Graduate Studies and Research

Catherine Anley: Employment Equity Advisor, Human Resource Services, Office of Equity, Diversity & Inclusion

Catherine Swindlehurst: Chief of Staff, Office of the President

Cherene Griffiths: Executive Director, Government Relations

Chris Andersen: Dean, Faculty of Native Studies and Interim Co-Lead, Indigenous Initiatives

D'Arcy Vermette: Associate Professor, Faculty of Native Studies

Danielle Peers: Assistant Professor, Faculty of Kinesiology, Sport and Recreation

Deborah Williams: Associate Vice-President, Disclosure, Assurance and Institutional Research

Deirdra Cutarm: Students Union: Aboriginal Relations and Reconciliation Committee

Doug Weir: Executive Director, Student Programs and Services, U of A International

Elizabeth Johannson: President, NASA

Erin Prefontaine: Communications Associate, Indigenous Initiatives and Equity, Diversity, & Inclusion

Evelyn Hamdon: Advisor and Acting Director, Office of Safe Disclosure & Human Rights

Georgie Columbus: Research Coordinator, Faculty of Kinesiology, Sport, and Recreation

Geraldine McCune: Director, Human Resource Services - Organizational Development, Equity & Health

Harvey Krahn: Professor, Faculty of Arts

EDI STRATEGIC PLAN SCOPING COMMITTEE

Helly (Rachel) Goez: Assistant Dean, Diversity, Department of Pediatrics, Faculty of Medicine and Dentistry

Janice Williamson: Professor, Faculty of Arts

Kate Peters: Portfolio Initiatives Manager (currently on leave)

Katharine Moore: Senior Administrative Officer, Office of the Vice-President (Research)

Kathleen Brough: Senior Administrative Officer, Office of the Provost and Vice-President (Academic)

Kisha Supernant: Associate Professor, Faculty of Arts

Laura Beard: Associate Vice-President, Research

Lisa Collins: Vice-Provost and University Registrar

Lise Gotell: Landrex Distinguished Professor, Faculty of Arts

Logan Mardhani-Bayne: Strategic Development Manager, Office of the Provost and Vice-President (Academic)

Lori Cinq-Mars: Identity Management Lead, Office of the Registrar

Malinda Smith:   Professor, Faculty of Arts

Michelle Strong:  Director, Faculty and Staff Relations

Paulin Mulatris: Co-directeur du Groupe de recherche en inter/transculturalité et immigration

Tibetha Kemble: Director of the University of Alberta's Indigenous Health Initiatives Program,
Faculty of Medicine and Dentistry

Wade King: Director, Office of Safe Disclosure and Human Rights
(On secondment to the City of Edmonton until Dec 31, 2018)

Wayne Patterson: Vice-Provost and Associate Vice-President (Human Resources)

Wendy Rogers: Deputy Provost

Zhihong Pan, Vice-President External, Graduate Student Advisory Council

Item No. 15

General Faculties Council Standing Committee Report

**GFC Executive Committee**

1. Since last reporting to GFC, the Executive Committee met on December 10, 2018 and January 14, 2019.

2. Items Approved With Delegated Authority

   **December 10, 2018:**
   - Approved – Proposed parchment for students receiving a Master of Education or Doctoral degree under the shared credentials agreement with Seoul National University (SNU), South Korea
   - Rescinded –October 15, 2018 motion approving the Academic Schedule for 2019-2020
   - Approved – Revised 2019-2020 Academic Schedule

   **January 14, 2019:**
   - Recommended to GFC – Proposed Revisions to Standing Committee Terms of Reference - GFC University Awards and Scholarship Committee (UASC) including a name change to GFC Undergraduate Awards and Bursaries Committee (UABC)
   - Recommended to GFC – Proposed Revisions to the Animal Ethics Policy and Procedures
   - Recommended to GFC – Proposed terminations of BA and BA (Honors) in Chinese Studies and Japanese Studies, BA in Chinese and Japanese, minors in Chinese and Japanese
   - Approved – Proposed Terms of Reference for the ad hoc Committee on Program Approval Process
   - Approved – Amendment to Academic Schedule 2019-2020: Proposal from the Faculty of Pharmacy and Pharmaceutical Sciences for a Fall Term Reading Week Exemption for PharmD Students

3. Items Discussed

   **December 10, 2018:**
   - University of Alberta Museums Annual Report for the Period: July 1, 2017 - June 30, 2018
   - Selected – Liran Levin to serve on the Teaching and Learning Enhancement Fund (TLEF) Advisory Committee

   **January 14, 2019:**
   - Universal Student Ratings of Instruction (USRI) for the Academic Year 2017/18
   - Equity, Diversity, and Inclusivity (EDI) Strategic Plan
   - Conflicts of Interest Amendment Act – Updated Draft Employee Code of Conduct
   - Helping Individuals at Risk (HIAR) and Office of Safe Disclosure and Human Rights (OSDHR) Annual Reports 2017-2018
   - Proposed Revisions to Standing Committee Terms of Reference - GFC Executive Committee
   - Proposed Terms of Reference for the Council on Student Affairs (COSA)

   Terms of reference and records of meetings for this committee can be found at:
   *https://www.ualberta.ca/governance/member-zone/gfc-standing-committees#GFC_EXEC*


   Submitted by:
   David Turpin, Chair
   GFC Executive Committee

Item No. 16

General Faculties Council Standing Committee Report

**GFC Academic Planning Committee**

1. Since last reporting to GFC, the Academic Planning Committee met on December 12, 2018 and January 16, 2019.

2. Items Approved with Delegated Authority from GFC

   **December 12, 2018:**
   - Recommended to GFC – Termination of the Bachelor of Arts and Bachelor of Arts (Honors) in Chinese Studies and Japanese Studies, the Bachelor of Arts in Chinese and Japanese, and the minors in Chinese and Japanese
   - Approved – Bachelor of Fine Arts in Drama (Theatre Design) - Substantive Program Changes and Name Change to Bachelor of Fine Arts in Drama (Production)
   - Approved – Increase to Minimum IELTS Band Scores for Graduate Admissions
   - Approved – Program Changes to the MSc, MEng and PhD degree programs in Electrical and Computer Engineering
   - Approved – A New Combined Master of Business Administration/Master of Science in Physical Therapy Program
   - Approved – Substantive revisions to the Master of Library and Information Studies (MLIS) course-based program in the School of Library and Information Studies (SLIS)
   - Approved – Renaming Existing Post-Baccalaureate Certificates (PBCs) to Graduate Certificates: PBC in Pain Management; PBC in Stroke Rehabilitation; PBC in Francophone Practice for Speech Language Pathologists; PBC in Sexual Health; PBC in Bridging to Canadian Physical Therapy Practice; PBC in Indigenous Sport and Recreation; PBC in Sport and Recreation Management; PBC in Teaching and Learning in Higher Education

3. Items Discussed

   **December 12, 2018:**
   - New Budget Model

   **January 16, 2019:**
   - Quality Assurance (QA) Suite of Activities: 2017-2018 Excerpted QA Reports from the Faculty of Arts, Faculty of Science, Faculty of Medicine and Dentistry, and the Faculty of Engineering
   - Quality Assurance Evaluation Report
   - Annual Undergraduate Enrolment Report
   - Enrolment Target Management
   - New Budget Model
   - Budget Update

Terms of reference and records of meetings for this committee can be found at:
*https://www.ualberta.ca/governance/member-zone/gfc-standing-committees#GFC_APC*

Submitted by:
Steven Dew, Chair
GFC Academic Planning Committee

General Faculties Council Standing Committee Report

**GFC Academic Standards Committee**

1. Since last reporting to GFC, the Academic Standards Committee met on December 13, 2018 and January 17, 2019.

2. Items Approved with Delegated Authority from GFC

   **December 13, 2018:**
   - Transfer Credit Approvals and Denials for December 2018
   - Changes to Entrance Requirements for the Graduate Certificate in Indigenous Sport and Recreation, Faculty of Kinesiology, Sport, and Recreation
   - Changes to Entrance Requirements for the Bachelor of Science, After Degree Program
   - Changes to Academic Standing Regulations, Faculty of Arts
   - Changes to Transition Year Program (TYP) Requirements, Faculty of Arts
   - Changes to Transition Year Program (TYP) Requirements, Faculty of Engineering
   - Proposal from the Faculty of Extension for Non-Credit Certificates Within Environmental Studies: Soil Science Certificate; Water Resource Management Certificate; Environmental Remediation Certificate; Land Reclamation Certificate
   - Changes to Existing Admission Requirements for Undergraduate Programs in the Faculty of Nursing
   - Changes to Existing Readmission and Academic Standing Regulations for Undergraduate Programs in the Faculty of Nursing
   - Changes to Existing Entrance Requirements for the MA and PhD Degree Programs in English
   - Changes to Existing Entrance Requirements and Academic Standing Regulations for the MA and PhD Degree Programs in Modern Languages and Cultural Studies
   - Changes to Existing Entrance Requirements, Application Deadlines and Residence Requirements for the MA and PhD degree programs in Religious Studies
   - Changes to Existing Entrance Requirements for the MA Degree Program in East Asian Studies
   - Changes to Existing Entrance Requirements, Application Deadlines and Academic Standing Regulations for the MSc, MEng, and PhD Degree Programs in Electrical and Computer Engineering
   - Waiver of English Language Proficiency Requirement for the Master of Business Administration (MBA) Program Delivered in Mandarin in Shanghai, China

   **January 17, 2019:**
   - Transfer Credit Approvals for January 2019
   - Changes to Entrance Requirements for the Bachelor of Science Honors in Psychology
   - Changes to Entrance Requirements for the Bachelor of Arts Honors in Psychology
   - Changes to Entrance Requirements for Undergraduate Programs in the Faculté Saint-Jean
   - Changes to the Eligibility Requirements for the Embedded Certificate in Interdisciplinary Leadership Studies, Peter Lougheed Leadership College
   - Changes to University Calendar Regarding Language Proficiency Requirements

3. Items Discussed

   **December 13, 2018:**
   - External Programs for Review and Programs in Progress on Campus

**January 17, 2019:**
- Undergraduate Admissions System Implementation (UASI) Project
- Proposed Revisions to Standing Committee Terms of Reference - GFC Academic Standards Committee and Program Approval Pathways

Terms of reference and records of meetings for this committee can be found at:
*https://www.ualberta.ca/governance/member-zone/gfc-standing-committees#GFC_ASC*

Submitted by:
Tammy Hopper
Chair, GFC Academic Standards Committee

**UNIVERSITY OF ALBERTA**
UNIVERSITY GOVERNANCE

*(NC TofR): The GFC Nominating Committee (NC) is a standing committee of GFC responsible for recommending individuals to serve on GFC standing committees and other bodies requiring representation from GFC or the University community. In putting forward its recommendations, the Committee will ensure the best possible match between prospective members and the committees to which they are nominated, and ensure the broadest possible base of representation and diversity.*

For more information regarding GFC/GFC Standing Committees please visit the University Governance "Member Zone". For judiciary governance information, please view: University-level Appeal Bodies.

**Current Report of the GFC Nominating Committee (NC)**

As mandated, the NC will put forward the name of a candidate recommended to fill a membership position to GFC *(by means of a "GFC Nominating Committee Report to GFC")* for acceptance by GFC, as final approver of all appointments to its Committees/university-level Appeal Bodies.

Upon receipt and consideration of an NC Report (sent electronically), a GFC member has the opportunity to submit an additional nomination prior to 12:00 pm on Tuesday, December 18, 2018. (To learn more)

Upon conclusion of the nomination period, with no additional names received, a "*GFC NC Report to GFC*" is considered as approved. Recommended candidates put forward by the NC are declared as elected.

Contact:  Ann Hodgson, Coordinator (GFC Nominating Committee) by email to: ann.hodgson@ualberta.ca or by tel: (780-492-1938).

*NC Recommendations to Judiciary Governance Panels:*

**GFC ACADEMIC APPEALS COMMITTEE (AAC)** *[§1.4.3 of GFC AAC Policy]*

**NC recommendation:** To extend the current term of one (1) graduate student on the AAC Panel of Students-Graduate, allowing for overlap of students' terms and ensuring continuity over the progressive months.

| Nominee | Faculty/Unit | Extended Term Beginning | Term Ending |
|---|---|---|---|
| Leigh Spanner | Faculty of Arts | January 1, 2019 | June 30, 2019 |

**UNIVERSITY APPEAL BOARD (UAB)** *[§30.6.3 of Code of Student Behaviour]*

**NC recommendation:** To extend the current term of one (1) graduate student on the UAB Panel of Students-Graduate, allowing for overlap of students' terms and ensuring continuity over the progressive months.

| Nominee | Faculty/Unit | Extended Term Beginning | Term Ending |
|---|---|---|---|
| Dane Patton | Faculty of Business | January 1, 2019 | April 30, 2019 |

[END]

# UNIVERSITY OF ALBERTA
## UNIVERSITY GOVERNANCE

## SEARCH AND REVIEW COMMITTEES

Presidential/Vice-Presidential/Decanal Search and Review Committees are regularly established at the University of Alberta. General Faculties Council (GFC) is called upon to arrange for the election of staff representatives from at-large to fill positions on approved search/review committee compositions in accordance to the policies and procedure within the Recruitment Policy (in UAPPOL).

It is regular practice by GFC to broadly distribute nomination calls to the relevant constituencies (academic staff, non-academic staff, public members) in order to raise awareness and encourage nominations and/or expressions of interest from eligible nominees. When an election is required to declare a final nominee(s), GFC serves as the delegated electorate as specified within the relevant selection/review procedures.

## RECENT POSITION/S FILLED

**2018-19 Dean Selection Committee - Dean, Faculty of Science**

December 19, 2018 - the following individual has been declared elected (by GFC) to serve as the one (1) academic staff representative (Category A1.0) from outside the Faculty concerned, *as indicated within Section 18 (g.) of the "Faculty Deans Selection Procedure" in UAPPOL (Appendix A: Dean Selection Committee for Individual Faculties).*

· **Professor Kimberly Noels - Faculty of Arts**

**View Related Links for Updates and Details:**

Office of the Provost - Deans Selections and Reviews

GFC Nominations and Elections

**UNIVERSITY OF ALBERTA**
UNIVERSITY GOVERNANCE

**BOARD OF GOVERNORS**
REPORT TO GENERAL FACULTIES COUNCIL

**ITEM: 19**
FOR THE GFC MEETING OF JANUARY 28, 2019

I am pleased to report on the following highlights of the Board of Governors' Open Session meeting held on December 14, 2018:

## REPORT OF THE PRESIDENT

In lieu of his regular report, the President provided the annual *For the Public Good Performance Measures* report, which allows the university to monitor progress on the five strategic goals of its strategic plan: build; experience; excel; engage; and sustain. In addition to the performance measures report, Dr Turpin provided verbal remarks on: the response of the university community to the unfortunate passing of Dean Richard Fedorak and the continuation of Dr Dennis Kunimoto as Interim Dean of the Faculty of Medicine and Dentistry during the upcoming search for a new dean; an update on the university's work toward developing an Equity, Diversity, and Inclusivity Strategic Plan; the latest QS (Quacquarelli Symonds) World Rankings, which lists the University of Alberta as number one in Canada in terms of graduate employability; the recent opening of the Aga Khan Garden, Edmonton; an update on the UniForum initiative; the 2018 University Cup winners Chris Le, Medicine and Dentistry (Laboratory Medicine and Pathology) and Anne Naeth, Agricultural, Life and Environmental Sciences (Renewable Resources); the university's national record-breaking 165 Academic All-Canadian winners; the President's recent travels to Ottawa to further advocate for investment in science; and the upcoming Board of Governors/General Faculties Council/Senate Summit on January 25.

## DISCUSSION ITEMS

The Board discussed:
- the university's planned new budget model to be implemented in Fall 2019, receiving an update on how the proposed model allocates funds based on activity levels, as well as a sense of where the university is in the process and work still to be done.
- ongoing efforts to implement recommendations of the 2018 Board Working Group, including: a summary of proposed future changes to the Board's delegation of authority to its committees and to administration; upcoming work to revise committee Terms of Reference by Spring 2019; an update from Board Safety Health and Environment Committee (BSHEC) Chair, Zahra Somani, on the committee's efforts to transition its mandates and responsibilities to other Board committees, namely Board Audit and Risk Committee (for the environment, safety and security items) and the Board Learning and Discovery Committee (for the student health and wellness items).

## BOARD OF GOVERNORS' MOTION SUMMARY

On the recommendation of the Board Finance and Property Committee, the Board of Governors approved the 2019-2020 Parking Citation Rates, effective May 1, 2019.

On the recommendation of the Board Investment Committee, the Board of Governors approved the revised University Funds Investment Policy.

On the recommendation of Board Chair Michael Phair, the Board of Governors approved adjustments to current Board Committee memberships to reflect recent Board membership changes.

On the recommendation of the Board Ad Hoc Group on Committee Mandates and Membership (BAGMM), the Board of Governors approved:
- the proposed Principles for Board of Governors Standing Committee Composition, to guide decisions regarding the composition of Board standing committees;
- the proposed Board Standing Committee Composition Frameworks, effective upon future approval of revised committee Terms of Reference (with the exception of the Board Governance Committee for which changes can be effective immediately), to align with the *Principles for Board of Governors Standing Committee Composition*, and the recent addition of a Board Governance Committee;
- and the proposed Board Standing Committee Mandate Statements, effective upon future approval of revised committee Terms of Reference (with the exception of the Board Governance Committee for which

changes can be effective immediately), to reflect the Board-approved future restructuring of its committees, as well as the Board's desire to focus not only on oversight, but also provide strategic foresight and insight.

## INFORMATION REPORTS

- Report of the Audit Committee
  - Update on Risk-Based Internal Audit Plan
  - Management's Quarterly Compliance Certificate
  - Management's Quarterly Information and Privacy Office Compliance Certificate
  - Material distributed between meetings: Summary of the Office of the Auditor General's November 2018 Report
  - Update on Implementation of Board Working Group Recommendations
    - Board Ad Hoc Group on Committee Mandates and Membership (BAGMM) Update: Committee Mandate Review
    - Review of Process for Board Oversight of Enterprise-wide Risk Management
  - Information Technology Report
  - Quarterly Financial Review
  - Current Accounting and Financial Reporting Issues
  - Institutional Risk Summary Update
    - Focus: Emerging Risk - Legalization of Cannabis
  - Institutional Risk Indicator Summary and Emerging Risks
  - University Auditor's Annual Report on Compliance with IIA Standards

- Report of the Finance and Property Committee
  - Project Management Office - Quarterly Status Report
  - 2017-18 Mandatory Non-Instructional Fees (MNIFs) Annual Report
  - Faculty, Staff, Student and Visitor Parking Rates for 2019-2020
  - Appointment of Dr Katherine Binhammer as Committee Vice-Chair
  - Update from Board Ad Hoc Group on Committee Mandates and Membership (BAGMM)
  - Learning Moment: District Energy System
  - Quarterly Financial Review

- Report of the Human Resources and Compensation Committee
  - Indicators of Health and Disability Annual Report
  - University of Alberta Pension and Supplemental Retirement Plans Update
  - Presentation by and Discussion with President of the Graduate Students' Association (GSA)
  - Presentation by and Discussion with President of the Post-doctoral Fellows Association (PDFA)
  - Update from Board Ad Hoc Group on Committee Mandates and Membership (BAGMM): Committee Mandate Review
  - Equity, Diversity, and Inclusivity (EDI) Strategic Plan
  - *For the Public Good* Performance Indicator Report

- Report of the Investment Committee
  - Portfolio Compliance – September 30, 2018
  - Cost Effectiveness of Investment Program – Annual Review
  - University Funds Investment Policy
  - Towers Watson Report – Update
  - Portfolio Performance – September 30, 2018
  - Unitized Endowment Pool (UEP) Strategy Progress Report
  - Non-endowed Investment Pool (NEIP) Strategy Progress Report
  - Update from Board Ad Hoc Group on Committee Mandates and Membership (BAGMM): Committee Mandate Review

- Report of the Learning and Discovery Committee
  - Executive Summary: Annual Report on Undergraduate Student Financial Support
  - Strategic Discussion Item: Equity, Diversity, and Inclusivity (EDI) Strategic Plan
  - 2017/18 Annual Report of Student Conduct Responses, Dean of Students' Portfolio
  - Annual Report of the Appeals and Compliance Officer
  - Report from the Provost and Vice-President (Academic)
  - Report from the Vice-President (Research)
  - Update from Board Ad Hoc Group on Committee Mandates and Membership (BAGMM): Committee Mandate Review

- Report of the Reputation and Public Affairs Committee *(formerly the University Relations Committee)*
  - Approval of 2018-19 Committee Workplan
  - Portfolio Highlights
  - Senate Update
  - Update from Board Ad Hoc Group on Committee Mandates and Membership (BAGMM): Committee Mandate Review

- Report of the Safety, Health and Environment Committee
  - Dashboard Review
  - Strategic Initiative: BSHEC Transformation Including Mandates and Recommendations for the Board Learning Research, and Student Experience Committee and the Board Audit and Risk Committee
  - Strategic Initiative: Integrate Alberta Occupational Health and Safety Act Changes into the Environment, Health and Safety (EHS) Management System
  - Approval of 2018-19 Committee Workplan
  - Memo from the Associate Vice-President (Risk Management Services) and the Associate Vice-President (Operations and Maintenance)
  - Memo from the Vice-Provost and Dean of Students
  - Health and Safety Indicator Report (Third Quarter)
  - Workplace Impairment Policy Development Update
  - Safety Moment – Is Elimination Really the Holy Grail?

The Board also received reports from the Chancellor, Alumni Association, Students' Union (including 2017-18 Financial Statements), Graduate Students' Association, Association of Academic Staff of the University of Alberta, Non-Academic Staff Association, General Faculties Council, and the Board Chair.

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Prepared for: Katherine Binhammer
GFC Representative on the Board of Governors

By: Erin Plume
Assistant Board Secretary

*Please note: official minutes from the open session of the December 14, 2018 Board of Governors' meeting will be posted on the University Governance website once approved by the Board at its March 15, 2019 meeting: www.governance.ualberta.ca/BoardofGovernors/Board/BoardMinutes.aspx.*

Item No. 20A

**Governance Executive Summary**
**Advice, Discussion, Information Item**

| Agenda Title | Helping Individuals at Risk (HIAR) and Office of Safe Disclosure and Human Rights (OSDHR) Annual Reports 2017-18 |
|---|---|

**Item**

| Proposed by | Gitta Kulczycki, Vice-President (Finance and Administration) |
|---|---|
| Presenter | Deborah Williams, Associate Vice-President (Disclosure, Assurance and Institutional Research) |

**Details**

| Responsibility | Provost and Vice-President (Academic) and Vice-President (Finance and Administration) |
|---|---|
| The Purpose of the Proposal is (please be specific) | The purpose of this report is to provide an overview and information about the activities of each office and to comment on trends and issues. |
| Executive Summary (*outline the specific item – and remember your audience*) | In 2008, the University introduced the Office of Safe Disclosure and Human Rights as an intake service for issues arising under the Ethical Conduct and Safe Disclosure Policy.<br><br>In 2010, the University created the Helping Individuals at Risk intake function to provide campus community with a centralized service for reporting at risk behaviour.<br><br>Program activity is reported to GFC Annually. |
| Supplementary Notes and context | |

**Engagement and Routing** (Include proposed plan)

| Consultation and Stakeholder Participation | n/a |
|---|---|

**Strategic Alignment**

| Alignment with *For the Public Good* | · Values – Above all, **we value intellectual integrity, freedom of inquiry and expression, and the equality and dignity of all persons** as the foundation of ethical conduct in research, teaching, learning, and service.<br>We value **diversity, inclusivity, and equity** across and among our people, campuses and disciplines.<br>· Goal: Build a diverse, inclusive community of exceptional students, faculty and staff from Alberta, Canada, and the world.<br>   o Objective 1 – Build a diverse, inclusive community of exceptional undergraduate and graduate students from Edmonton, Alberta, Canada and the world.<br>   o Objective 3 – Support ongoing recruitment and retention of a highly skilled, diverse community of non-academic and administrative staff by enriching the University of Alberta's working environment. |
|---|---|

| | |
|---|---|
| | o  Objective 5 – Build and strengthen trust, connection, and a sense of belonging among all members of the university community through a focus on shared values. |
| Alignment with Institutional Risk Indicator | Please note below the specific institutional risk(s) this proposal is addressing.<br><br>☐ Enrolment Management ☐ Relationship with Stakeholders<br>☒ Faculty and Staff ☒ Reputation<br>☐ Funding and Resource Management ☐ Research Enterprise<br>☐ IT Services, Software and Hardware ☒ Safety<br>☐ Leadership and Change ☒ Student Success<br>☐ Physical Infrastructure |
| Legislative Compliance and jurisdiction | Post-Secondary Learning Act (PSLA)<br>GFC Policy<br>GFC Executive Committee Terms of Reference<br>GFC Terms of Reference<br>Board Safety, Health and Environment Committee Terms of Reference |

Attachments

1. Office of Safe Disclosure and Human Rights (OSDHR) Annual Report 2017-18
2. Helping Individuals at Risk (HIAR) Annual Report 2017-18

*Prepared by:* Evelyn Hamdon, Acting Director (Safe Disclosure and Human Rights) and Kris Fowler, Director (Helping Individuals at Risk)

# Office of Safe Disclosure and Human Rights (OSDHR)
## Annual Report 2017-18

## Program Goals

The Office of Safe Disclosure & Human Rights (OSDHR) has two functions: the provision of the University of Alberta's confidential disclosure services and the promotion and stewardship of human rights.  In these regards, the office provides intake, advisory, and educational services to students, staff, and faculty at all University of Alberta campuses.

This report spans the period of July 1, 2017 - June 30th, 2018.

## Disclosure Activity

OSDHR operates on a confidential intake and referral model.  Where required, individuals or groups that make disclosures to the office are referred to the most appropriate university service provider(s) in order for the matter to be addressed. Disclosures can be made in person, online, over the telephone or via email. Disclosures made via email or our online reporting tool have the option of being made anonymously. Where possible (that is when we are provided with contact information) anonymous disclosures are responded to with an invitation to speak directly to an advisor.

During the reporting period, the OSDHR provided intake and referral services relating to 228 disclosures. The majority of disclosures related to harassment and discrimination, but allegations on a wide variety of matters including safety, fraud and the application of collective agreements were disclosed.  Similar proportions of disclosures were received from students (33%) and non-academic staff (32%).  Twenty-four per cent of disclosures were from academic staff[1].

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[1] This number reflects the initial contact or disclosure, and does not account for follow up contact which includes email, in person, and telephone contact.

Each disclosure can include multiple issues; disclosures were made relating to a range of issues with various forms of harassment being the most commonly cited issue (180), followed by discrimination (78).

**Table 1. Disclosure types**

| Nature of disclosed allegation | 2017/18 | 2016/17 | 2015/16 |
|---|---|---|---|
| Academic Appeal | 5 | 5 | 3 |
| Academic Integrity | - | - | - |
| Breach of Collective Agreement | 6 | 7 | 6 |
| Breach of Contract | 1 | 1 | 4 |
| Breach of Ethical Conduct & Safe Disclosure Policy | 3 | 15 | 8 |
| Conflict of Interest | - | 3 | 4 |
| Discrimination | 78 | 65 | 14 |
| Duty to Accommodate | 21 | 10 | 6 |
| Harassment | *180* | *164* | *62* |
| Bullying | 42 | 106 | 38 |
| General | 81 | 10 | 14 |
| Gender | - | - | 1 |
| Race | 22 | 9 | 3 |
| Sexual | 35 | 39 | 6 |
| Sexual Identity | - | - | - |
| Privacy Concerns | - | - | - |
| Reasonable Accommodation | - | - | - |
| Safety | 3 | 6 | 3 |
| Theft/Fraud | 1 | 3 | 2 |
| Other | 40 | 10 | 6 |
| **TOTAL** | **338** | **289** | **118** |

## Referrals

Matters reported to the Office are typically referred to existing campus resources for resolution. The OSDHR maintains working relationships with colleagues across campus to ensure delivery of effective and appropriate referral services.  While there are over 21 potential resources we draw upon, the majority of our referrals are to the Non-Academic Staff Association (NASA), Office of Student Ombuds, the appropriate Chair/Dean, Academic Association of Staff University of Alberta (AASUA), Employee and Family Assistance Program (EFAP), and Graduate Students' Association (GSA). Other services referred to less frequently include Faculty Relations, Protective Services, Helping Individuals at Risk, Immediate Supervisor, Internal Audit Services, and Student Accessibility Services.

## Human Rights

The Discrimination, Harassment, and Duty to Accommodate policy provides direction on our human rights commitments. The policy states "The University is enriched by diversity, and it welcomes and seeks to include many voices, including those that have been under-represented or excluded." The OSDHR undertakes a variety of activities that enhance awareness and understanding of the principles of human rights, including the provision of training, consulting, and coaching to faculty, staff, students, and postdoctoral fellows. During the reporting period, the OSDHR provided 33 presentations, workshops, and other educational and information

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sessions. In addition, we regularly consult with Deans, Chairs, and others senior administrators on issues that relate to the Discrimination, Harassment, and Duty to Accommodate Policy.

The office also supports various processes and committees by providing advice on human rights policies and best-practices. Additionally, the OSDHR collaborates with various campus service providers on projects that promote a positive human rights environment and the university, such as Equity Diversity and Inclusion Week and, the Visiting Lectureship in Human Rights and the Equity, Diversity, and Inclusion Scoping and Working groups.

When possible, the OSDHR collaborates with community organizations to lend expertise or build awareness of the University's commitment to human rights. We currently participate in the Diversity & Inclusion Working Group, an ad hoc group of offices working on diversity, inclusion, and Human Rights issues in post-secondary contexts.

## Areas of Focus for 2017-18

### Student Engagement
The OSDHR continued to expand its engagement with students during the reporting period. A Human Rights Internship program was piloted in co-operation with University of Alberta International.  Three international students were selected to participate in an 8-month long program. Program activities included seminars with OSDHR staff on the topic of Human Rights in Post-Secondary Contexts, opportunities to provide information to their peers, and opportunities to volunteer at Human Rights events hosted by OSDHR. The program was reviewed at the end of the year and recommendations were made to refine the next iteration of the program. It will be re-implemented in 2019.

Beginning in the spring of 2018, the OSDHR was invited to participate in a series of initiatives to enhance graduate student experiences. The specific nature of the work is currently evolving and will be reported on more fully next year.

The OSDHR provides funding to student groups whose work contributes to equity, diversity, inclusion (EDI) and/or human rights at the University of Alberta. We continue to meet with our colleagues in the Students' Union to ensure that the funded groups have the information they need to contribute to EDI at the U of A.

During the academic year 2017-2018 the OSDHR EDI fund supported the following student initiatives:

- MedX Edmonton - MedX Edmonton Conference on May 12 2018, $1000 Educational Funding. They were awarded funding to help subsidize attendance fees for members of underrepresented populations in the medical field.
- Indigenous Law Students' Association - Speaker Series on March 9 2018. $1000 Educational Funding. They were awarded funding for the speaker series which featured speaker events which would open doors and conversations to Reconciliation on campus.
- U of A Women in Science and Engineering (WISE) - Black Tie Affair on February 16 2018, $500 Social Funding.

### Implementation of *For the Public Good*
OSDHR has and will continue to initiate and support activities that promote "For the Public Good," particularly those related to equity (Objectives 2 and 3). During this reporting period, the

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OSDHR made significant contributions to the work of the Deputy Provost's initiative the development of the Equity, Diversity, and Inclusion Strategic Plan and the implementation of it. OSDHR contributions included participation on the Scoping and Working Groups, conducting a literature review to guide the drafting of the EDI strategic plan, drafting a preliminary strategic plan for discussion by Scoping Group membership, and working with the Deputy Provost on the implementation strategy. OSDHR also took a lead in the research and planning for the provision of an EDI workshop for senior administration.

### Address Implications of New Occupational Health and Safety Act (Alberta)

The new Occupational Health and Safety Act (Alberta) came into effect in June of 2018. The act is amended to include psychosocial hazards to existing physical hazards. The implications of this change for the University of Alberta are being considered and responded to within various contexts. As a key stakeholder on these issues, the OSDHR, was invited by Environmental Health and Safety, to participate in conversations to address and prepare for these changes.

## Upcoming Strategic Areas of Focus

### Website Review

The OSDHR website is currently being reviewed and through the 2018-19 year, updates to the content and layout will be undertaken.  Ultimately, the website will become a better resource for those seeking information about the office, and for general information about Human Rights and the disclosure process.  It will also serve to support educational outreach activities through the provision of information about presentations and workshops offered by OSDHR.

### Implement new Intake and workflow system

A new system is in development that will track and monitor both disclosures and consultations. The new system will allow for more robust reporting and will enable the collection of data in a way that facilitates research to ensure ongoing best practices and responsiveness to emerging issues.  The major benefit of the new system will be in expanded reporting on activities and enhanced opportunities for qualitative research that will spotlight opportunities and topics for education outreach.  The new tracking system is in the final stages of development and is anticipated to be ready for regular use by mid-2019.

### Equity, Diversity, and Inclusion

The OSDHR will continue to provide support for the implementation of the strategic plan via participation in the EDI Scoping Group and other subcommittees as required. Furthermore, OSDHR anticipates providing support (consultative and educational) to academic and non-academic units, as well as to student groups on how to enact and promote principles and practices associated with EDI.

### Student Engagement

The OSDHR continues to engage with students. The following summarizes some of the key student-related activities currently planned for 2018-19:

- Work with the Students' Union to support a greater understanding of Human Rights and Equity as it may pertain to student group activities.
- Provide training for student groups on the Discrimination, Harassment, and Duty to Accommodate Policy

- In-service for Physics undergraduate students to support their intention to provide an accessible and inclusive conference experience at the Canadian Undergraduate Physics Conference (CUPC), information sessions to Engineering students
- Participation in Student Orientation Activities (presentations and/or tabling activities)
  - International Student Orientation
  - GSA Fall Orientation
  - Transition Year Program Orientation
  - Other requests as they arise
- Ongoing (elective) workshops for FoMD students in the Community Engagement Program
- Development and implementation of a mandatory course (related to EDI) for students in FoMD (Community Engagement)
- Provide advice and support to FGSR activities relating policy review in conjunction with new OHS Act.
- Continue to provide funding to student groups whose work contributes to equity, diversity, inclusion and/or human rights at the University of Alberta.
- In winter 2019 we will redesign of the Student Intern Program, with the intention of selecting participants for the summer of 2019.

## Education and Outreach

Education and outreach activities will continue to have serve students, faculty, and staff, and post-doctoral fellows by responding to requests for workshops and presentations on

- Discrimination, Harassment, and Duty to Accommodate Policy
- Disclosure
- Equity, Diversity, and Inclusion issues and practices
- Human Rights and Protected Grounds

We will also continue to consult with colleagues who have specific questions or who face particular issues in any of the aforementioned areas. Further, the new reporting system will allow us to track consultations for reporting and planning purposes.

Beginning 2019 the OSDHR will develop and implement the delivery of core workshops available to the University community on a number of our most popular topics. These core subject areas have been determined in consultation with students, faculty, and staff and based on more frequently sought-after information and advice. Our intent is to offer these workshops on a rotating basis throughout the year.

## OHS Act and EHS

OSDHR will continue to work with Environmental Health and Safety to explore the implications of the new act, through our participation in the Psychosocial Hazard Working Group. These implications will also shape future educational offerings.

## Policy and Procedure Review

Given the new EDI strategic plan, the new OHS Act, and in the name of good practice we are conducting a review of policies and procedures that guide the OSDHR practices and protocols to ensure that we continue to serve the University community appropriately.

# HELPING INDIVIDUALS AT RISK (HIAR) ANNUAL REPORT 2017-18

Helping Individuals At Risk (HIAR)

The HIAR program provides a centralized location for reports of at risk behavior in order to facilitate a "connecting of the dots" of what could otherwise be viewed as isolated and less urgent incidents. One impetus behind the creation of this program was the key finding from the shootings at Virginia Tech that failure to share information on what were considered isolated incidents resulted in an underestimation of risk. The HIAR program helps connect Individuals at Risk of harm to self or others to resources before a situation escalates, and ensures a coordinated response across campus.

## REPORTS OF INDIVIDUALS AT RISK

The HIAR program received 838 reports, an increase of 186 or 25%, from the previous year. As seen in the chart below, this represents a continued increase in the growth of the program of at least 20% per annum. Reports were about 429 individuals at risk, only 14 more, or a 3% increase, from the previous year, which would indicate that HIAR received an increase in multiple reports about an individual at risk than previous years.
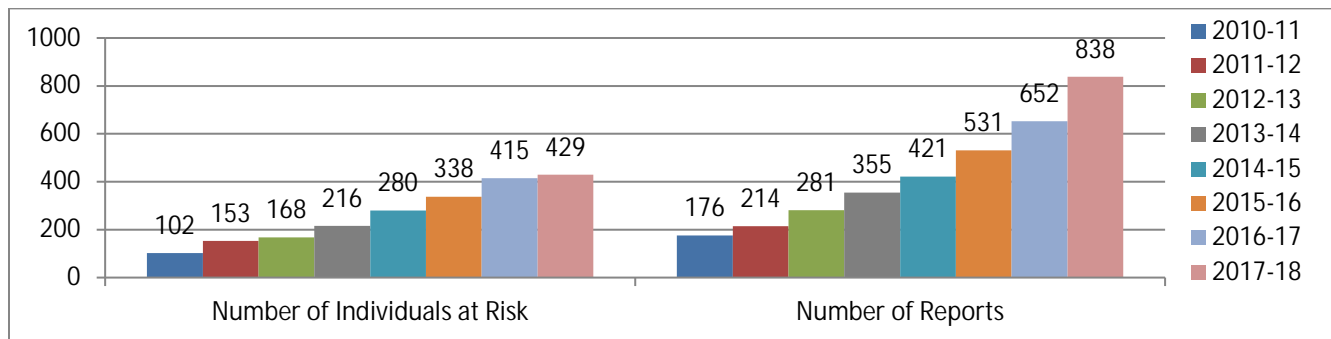


Figure 1: Growth of the HIAR Program

The majority of reports to the program (661 reports, 79%) continued to be regarding undergraduate students. 73 (9%) were regarding graduate students, 46 reports (5%) were about faculty or staff, 25 reports (3%) were about those in open studies, 14 reports (2%) were about former students, 9 reports (1%) were regarding visiting students, 2 reports were about Post-Doctoral Fellows and the remainder (8 reports, 1%) were other (i.e. applicants, special students, or former employees). There were 265 reports about international students, which comprised 31% of all reports to HIAR, an increase from the previous year (24%) in the percentage of reports that were about international students.
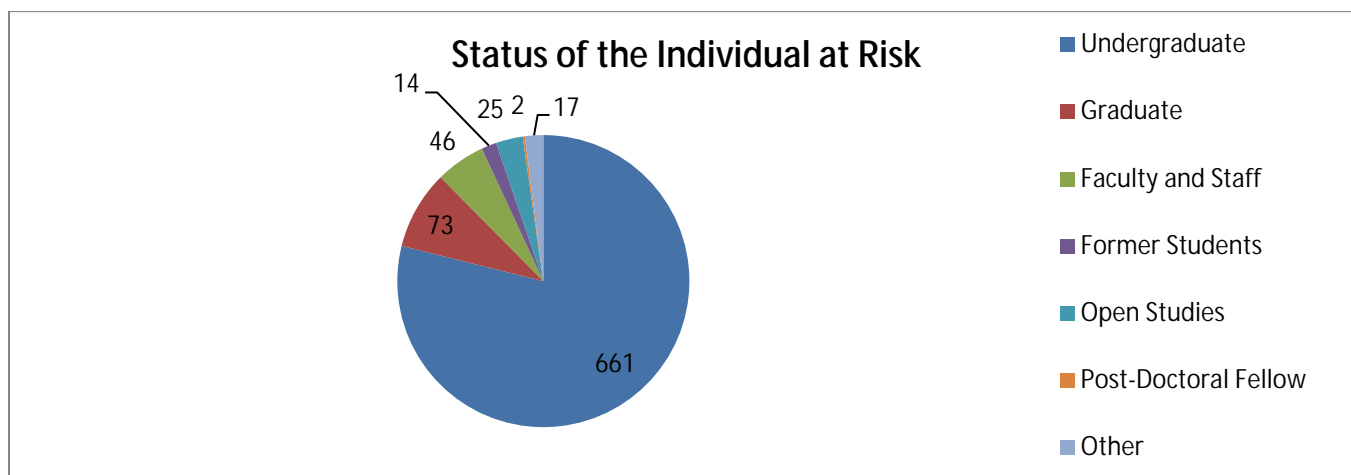
Reports about Individuals at Risk were almost equally divided between males (417 reports, 49%) and females (393 reports, 47%), while 9 reports (1%) were about transgender or non-binary individuals.

Most reports were about a concern that the individual at risk was at risk of harm to self (379 reports, 45%), which is consistent with the previous year when there was a spike in the number of reports about harm to self. Three hundred and eight reports (37%) were regarding a behavioural concern where the individual at risk was exhibiting worrisome behaviour that did not yet meet the assessment of harm. Seventy-seven reports (9%) were regarding those deemed to be at risk of harm to others, 21 reports (3%) were about those at risk of both harm to self and harm to others, 34 reports (4%) were at risk from others, 9 reports (1%) were regarding bullying or harassment, and 10 reports (1%) were regarding academic concerns.



**Type of At Risk Behaviour**

Legend:
- Harm to Self
- Behavioural Concern
- Harm to Others
- Harm to Both
- Risk from others
- Bullying/Harassment
- Academic concern
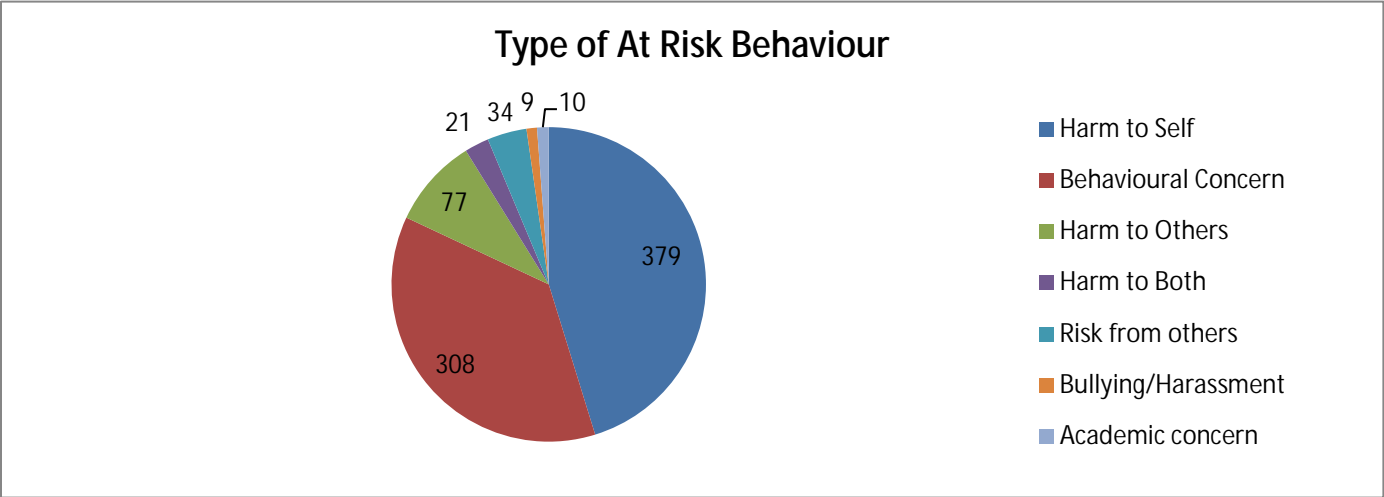
## REPORTERS OF AT RISK BEHAVIOUR

The greatest number of reports came from University of Alberta Protective Services (146 reports or 17%), staff members (138 reports or 16%) and Residence Services (126 reports or 15%). A significant number of reports were also received from instructors (107 reports or 13%), the Office of the Dean of Students/University Student Services (107 reports or 13%) and Senior Administrators (100 reports or 12%).



**Reporters of At Risk Behaviour**

Legend:
- Protective Services
- Residence Services
- Instructors
- Staff
- Senior Administrators
- Dean of Students Portfolio
- Student Advisors
- Students
- Family Members or Friend
- Human Resources
- Students Union
- Other
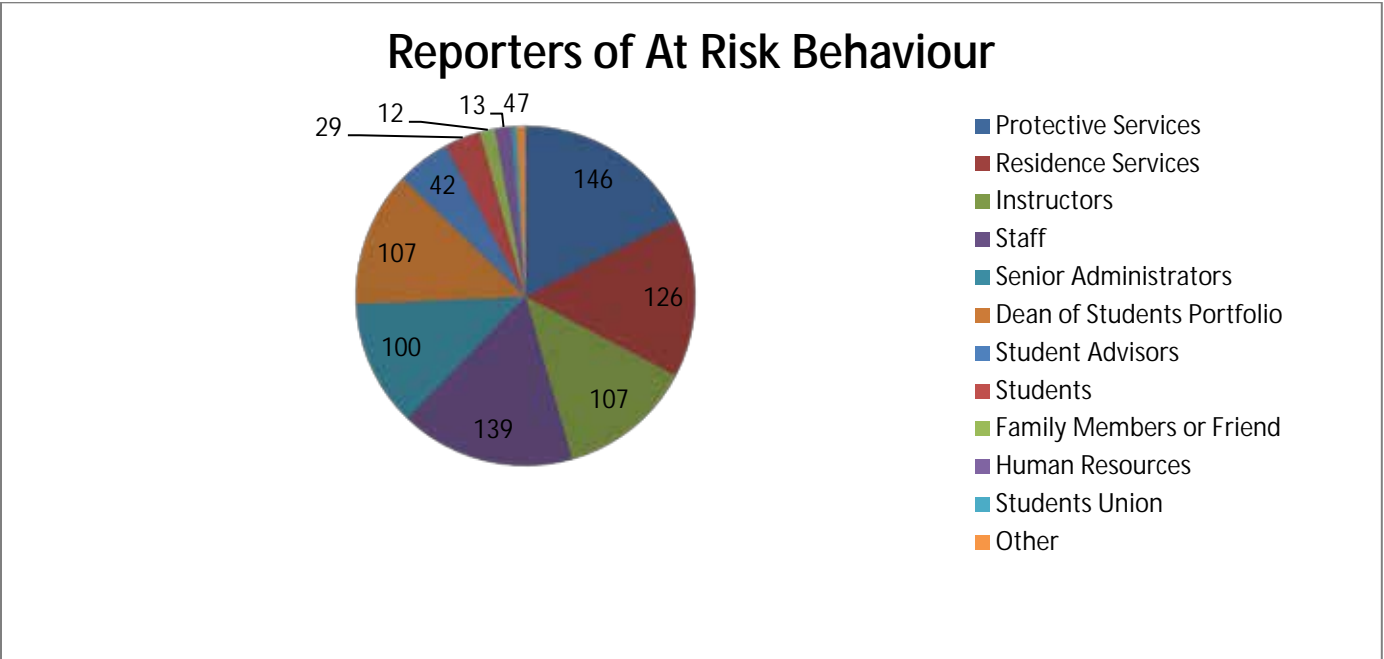
In regards to reports received from faculties, the largest number of reports were received from the Faculty of Arts (105 reports or 13%), Faculty of Engineering (49 reports or 6%) and Faculty of Science (44 reports or 5%). For the first time in the history of the HIAR program, HIAR received at least one report from every faculty on campus including Augustana, Campus St. Jean and St. Joseph's College.

The busiest months for receiving reports of at risk behaviour continue to be those at the end of the fall and winter terms; March 2018 (103 reports or 12%), November 2017 (97 reports or 12%) and December 2017 (96 reports or 11%).

## Number of Reports per Month
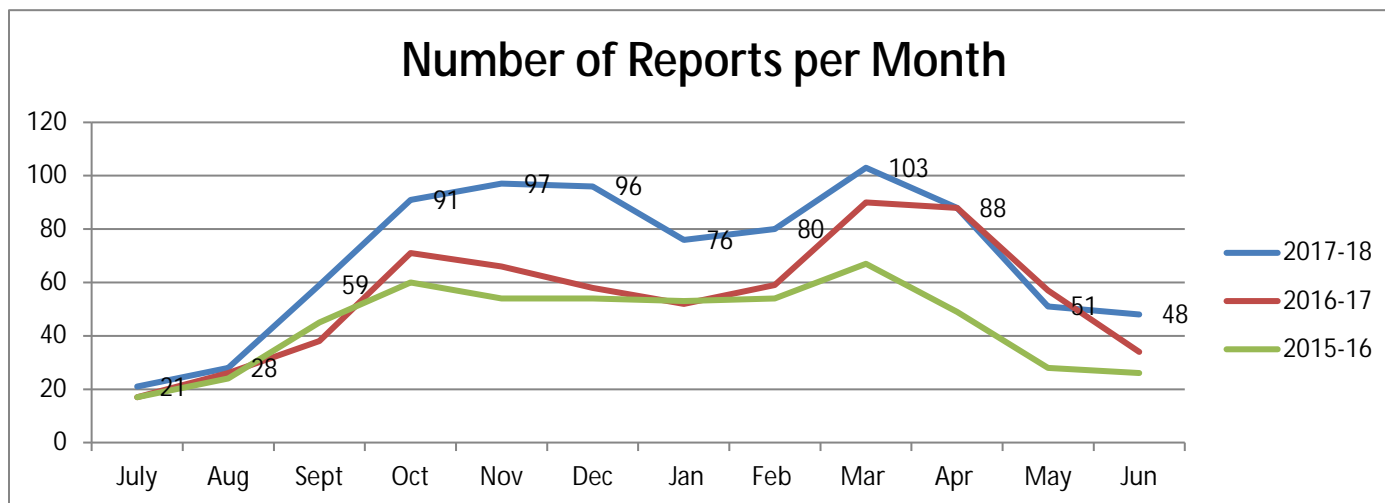


## SERVICES PROVIDED

More than one service is often provided to an Individual at Risk and/or the reporter, depending on the situation and the level of risk. Receiving a report for information purposes is the only report that requires no action by HIAR staff, which means that HIAR staff provided at least one service in all other reports (85%) received.

| Service Provided | Number of Reports | | % of Reports | |
|---|---|---|---|---|
| | *2016-17* | *2017-18* | *2016-17* | *2017-18* |
| Information Purposes Only | 105 | 125 | 16% | 15% |
| Coaching/Advice for Reporter | 164 | 302 | 25% | 36% |
| Contact Individual at Risk | 131 | 175 | 20% | 21% |
| Discuss Safety Measures | 33 | 30 | 5% | 4% |
| Follow up (TOTAL) | 301 | 564 | 46% | 67% |
| Follow up General | N/A | 240 | N/A | 29% |
| Follow up Academics | N/A | 137 | N/A | 16% |
| Follow up Residence | N/A | 100 | N/A | 12% |
| Follow up Student Services | N/A | 87 | N/A | 10% |
| Formal Assessment of Risk | 24 | 38 | 4% | 5% |
| Information shared with health care provider | N/A | 21 | N/A | 3% |
| Monitor Situation | 43 | 131 | 7% | 16% |
| Referral for Individual at Risk | 256 | 350 | 39% | 42% |
| Referred to HIAR Case Team | 178 | 220 | 27% | 26% |
| Refer to or Attend Protocol Team | 34 | 86 | 5% | 10% |
| Reporter/Victim Provided Referral | 46 | 69 | 7% | 8% |
| Welfare check/contact police | N/A | 16 | N/A | 2% |

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Several new categories (highlighted in purple) were added in an effort to better track the type of work that HIAR staff engage in after a report is made to the program. These included specifying the type of follow up that occurs, requesting police or Protective Services to conduct a welfare check, and sharing information with a health care provider.

The most common services delivered were follow up (67%), providing referrals for the individual at risk (42%) and providing coaching and advice to reporters to the HIAR program (36%). There was a significant increase (14%) in the percentage of reports in which HIAR staff provided follow up action (21%), coaching and advice (11%) and attending Protocol Team meetings (doubled from 5-10%). Similar to the previous year, this increase in services provided was likely due to an increase in the complexity of the reports received to the program.

It is important to note that in only 16 cases (2%) did HIAR need to contact police or Protective Services to request that a welfare check be conducted with an individual at risk to ensure their safety. As the program is intended to provide early intervention, and not imminent or urgent cases, this suggests that HIAR is receiving appropriate reports to the program.

## PROGRAM ACTIVITIES

- Assisted in the development a crisis response protocol for the Director, of Public Awareness (Advanced Learning and Community Partnerships, Advanced Education), Government of Alberta

- Facilitated 16 presentations about the program to various groups across campus including:
    o Lister Hall Students Association (LHSA)
    o Engineering graduate students
    o Community Helpers program attendees
    o Agriculture, Life and Environmental Sciences student advisors
    o the Landing volunteers
    o Residence Life team
    o Student Advisors' Conference
    o Graduate Student Safety session
    o Accessibility Resources and Student Success Centre staff

- Participated in several committees on and off campus:
    o ACCESS Open Minds Steering committee
    o ACCESS Open Minds Networking meeting
    o Restorative Initiatives in Sexual Violence working group
    o Suicide Prevention Implementation Policy Review subcommittee
    o Canadian Association of Threat Assessment Professionals Post-Secondary Institution Special Interest Group

## UPCOMING PRIORITIES

- Sustainability of the program as staff resources for the intake function of the program remains an issue as reports continue to increase at least 20% each year.

- Presentations to faculty and department councils to maintain awareness of the program.

- Development of file retention guidelines based on best practice and recommendations from the Records Management Office.

Item No. 20B

**Governance Executive Summary**
**Action Item**

| Agenda Title | Amendment to Academic Schedule 2019-2010: Proposal from the Faculty of Pharmacy and Pharmaceutical Sciences for a Fall Term Reading Week Exemption for PharmD Students |
|---|---|

**Motion:**

| THAT the GFC Executive Committee approve, under delegated authority from General Faculties Council, the amended Academic Schedule for 2019-2020, as set forth in Attachment 2, and, in doing so, empower the Registrar to make any editorial changes as needed as long as the changes do not have the force of policy, to be effective immediately. |
|---|

**Item**

| Action Requested | ☒ Approval ☐ Recommendation |
|---|---|
| Proposed by | Melissa Padfield, Interim Vice-Provost and University Registrar |
| Presenter(s) | Melissa Padfield, Interim Vice-Provost and University Registrar<br>Ken Cor, Assistant Dean, Assessment, Faculty of Pharmacy and Pharmaceutical Sciences<br>Ravina Sanghera-Grewal, Assistant Dean of Program Operations and Student Services, Faculty of Pharmacy and Pharmaceutical Sciences |

**Details**

| Responsibility | Provost and Vice-President (Academic) |
|---|---|
| The Purpose of the Proposal is (*please be specific*) | To approve a proposal to amend the Academic Schedule 2019-2020 to include a Fall Term Reading Week exemption for PharmD students in the Faculty of Pharmacy and Pharmaceutical Sciences and add two additional days off for PharmD students. |
| Executive Summary (*outline the specific item – and remember your audience*) | The Academic Schedule proposal provides term and deadline dates for the following academic year and is brought forward on an annual basis to the GFC Executive Committee by the Vice-Provost and University Registrar.  The Academic Schedule contains various updates to align the Academic Schedule with the calendar year, and are based on the rules outlined in the Academic Schedule Policy and Procedure in UAPPOL.<br><br>For this meeting, a proposal to amend the Academic Schedule 2019-2020 is being presented on behalf of the Faculty of Pharmacy and Pharmaceutical Sciences to include a Fall Term Reading Week exemption for all PharmD students. The Faculty will incorporate tailored additional days off into the schedule on a yearly basis to support student well-being while minimizing the impact on the ability to deliver hours needed to maintain a high quality, accredited program.<br><br>This plan was discussed at the November 19, 2018 and the December 10, 2018 meetings of the GFC Executive Committee following discussion surrounding student consultation in the development of the Fall Term Reading Week exemption proposal originally submitted by the Faculty of Pharmacy and Pharmaceutical Sciences in November. |
| Supplementary Notes and context | |

**Engagement and Routing** (Include meeting dates)

| Consultation and Stakeholder Participation (parties who have seen the proposal and in what capacity) <For information on the protocol see the Governance Resources section Student Participation Protocol> | *Those who are actively **participating***: <br> · Office of the Registrar <br> · Faculty of Pharmacy and Pharmaceutical Sciences <br> · GFC Executive Committee |
|---|---|
| | *Those who have been **consulted***: <br> · Office of the Registrar <br> · Office of the Provost and Vice-President (Academic) <br> · Students' Union <br> · Graduate Students' Association <br> · Alberta Pharmacy Students' Association (APSA) <br> · GFC Executive Committee (October 15, 2018; November 19, 2018; December 10, 2018) |
| | *Those who have been **informed***: |
| Approval Route (Governance) (including meeting dates) | GFC Executive Committee:  January 14, 2019 |

**Strategic Alignment**

| Alignment with *For the Public Good* | Excel: Excel as individuals, and together, sustain a culture that fosters and champions distinction and distinctiveness in teaching, learning, research, and service. <br><br> Sustain: Sustain our people, our work, and the environment by attracting and stewarding the resources we need to deliver excellence to the benefit of all Albertans. |
|---|---|
| Alignment with Institutional Risk Indicator | Please note below the specific institutional risk(s) this proposal is addressing. <br><br> ☐ Enrolment Management ☒ Relationship with Stakeholders <br> ☐ Faculty and Staff ☒ Reputation <br> ☐ Funding and Resource Management ☐ Research Enterprise <br> ☐ IT Services, Software and Hardware ☐ Safety <br> ☐ Leadership and Change ☒ Student Success <br> ☐ Physical Infrastructure |
| Legislative Compliance and jurisdiction | Post-Secondary Learning Act (PSLA) <br> GFC Executive Committee Terms of Reference |

Attachments:

1. Attachment 1 (pages 1-4): Proposal for a Fall Term Reading Week Exemption for PharmD Students in the Faculty of Pharmacy and Pharmaceutical Sciences for the 2019-2020 Academic Year
2. Attachment 2 (pages 1-7): Academic Schedule 2019-2020 (revised for GFC Executive January 14, 2019)
3. Attachment 3 (pages: ) Letter from the Alberta Pharmacy Students' Association (APSA)

*Prepared by:* Andrea Patrick, Portfolio Initiatives Manager, Office of the Provost and Vice-President (Academic), apatrick@ualberta.ca

**UNIVERSITY OF ALBERTA**
FACULTY OF PHARMACY AND
PHARMACEUTICAL SCIENCES

**Purpose:** This proposal is brought forward to request that, starting in the 2019-20 academic year, Faculty of Pharmacy and Pharmaceutical Science students enrolled in the undergraduate, entry to practice Doctor of Pharmacy (PharmD) will be exempt from the University of Alberta Fall Term Reading week. Students enrolled in the Bachelor of Science in Pharmacy program will not be exempt from the Fall Term Reading week. The Faculty will incorporate tailored additional days off into the schedule on a yearly basis to support student well-being while minimizing the impact on our ability to deliver hours needed to maintain a high quality program. The additional days off apply to all students in the entry to practice PharmD program-which will include incoming students in Fall 2019 and the students currently moving in to year two in 2019-20.

**Background:** The entry to practice PharmD program is a new undergraduate program that enrolled its first cohort of students in the 2018-19 academic year. As plans for implementation of the first year of the program progressed in the summer leading up to the first class being admitted in September 2018, it became apparent that the academic schedule did not allow for enough hours to teach the intended Fall term of the program as approved by the University Board of Governors and the Provincial Government, and as recently provisionally accredited in April 2018 by the Canadian Council for Accreditation of Pharmacy Programs (CCAPP). As a stop-gap measure, the Faculty implemented a series of strategies to teach as much of the required content including doubling some lectures, compressing content into existing sessions, and converting some content into material to be read and learned by self-directed means. While this effort resulted in the ability to recoup some of the lost time, some material was not suited to be taught in an online format, and the patchwork approach and inconsistent scheduling (limited availability of lecture halls) was deemed unsustainable for future years of the program.

The Faculty began to explore options for recouping the required hours in the summer of 2018 including starting the Fall term early, extending the Fall term late, requiring instructors to include additional online lectures, and (based on a review of how some other faculties handle the need for additional time) removal of the Fall Term Reading week. The pros and cons of each option were laid out in a presentation that can be accessed HERE.

As students returned to the program in September of 2018, informal, in-camera consultation with the Alberta Pharmacy Students Association (APSA) was initiated with their executive council. A plan to remove the Fall Term Reading week was described to students at this APSA council meeting where it was identified that there was a need for further consultations and a second meeting between the APSA president and two assistant deans from the program was scheduled for mid-September. It was determined that the position of students was that removal of the Fall Term Reading week was not their preferred option to deal with the lost hours and that they would like other options to be considered. At a Faculty Council meeting in September, a rationale for moving ahead with removal of the Fall Term Reading week was provided. Faculty Council discussed and ultimately approved the removal of the Fall Term Reading week as the most efficient and effective way to address the need to get hours back into the program.

A proposal was brought to GFC in August and discussed in September of 2018. This proposal misrepresented the position of students stating that they were "overwhelmingly supportive" or

removal of the Fall Term Reading week. The proposal also incorrectly requested that all undergraduate students be exempt from the Fall Term Reading week, when it was only undergraduate students enrolled in the entry to practice PharmD program who are being required to be exempt. Based on these errors, approval of the proposal was withdrawn at a GFC meeting in November and it was requested that an updated proposal be submitted in December that included descriptions of additional consultations.

**Additional Consultation:** Since the GFC meeting in November, additional consultation with students have been held to:
- clarify and acknowledge the errors in the original proposal,
- present a more in-depth explanation of the Faculty's rationale for requesting removal of the Fall Term Reading week,
- offer opportunities for students to provide additional feedback about the situation facing the Faculty, and
- describe options for when the Faculty can offer additional days off to mitigate concerns about student well-being while at the same time maintain a high quality program that has the necessary hours scheduled

A **town hall was held on November 23, 2018** and slides outlining the history of the problem as well as options considered was presented to students. A total of 100 students RSVP'd for the session. For each option that the Faculty considered, students were given an opportunity to add to a pros and cons list. Summary notes from the meeting taken by the APSA student rep were submitted to describing student views on what was presented. Students indicated feeling that the session did not offer enough time to voice all of their concerns and they wanted to know more about options for additional days off that the faculty was considering.

Based on the comments from the first town hall, a **second town hall was held on December 4**, **2018** that was run by APSA president Jes Buhler. In this session, three Faculty developed scheduling options that added additional days off to offset removal of the Fall break in year 2 of the 2019-20 academic schedule, were presented to students. Three assistant deans from the Faculty were in attendance to field questions. A smaller number of students attended this session than the first. One student raised concerns about shorter breaks limiting their ability to travel home, given that they attend the program from a distant location. Others indicated a preference for multiple extended long weekends. Some students questioned why the Faculty didn't just convert more lectures to an online format while others indicated a preference for in-person lectures. Based on the existence of differing opinions, it was determined that a survey about student preference created in collaboration between APSA and the Faculty should be run to determine a) the proportion of students for or against removal of the Fall break, and b) which scheduling option students preferred to add additional days if removal of the Fall break went ahead.

A total of 105/131 (80%) of the PharmD students completed the collaboratively developed survey on December 19th. Results showed that **42% of students preferred removal of the Fall break (30.5%) or did not have a preference (11.45%)** while **58% preferred that the Faculty find other ways to solve the problem of lost hours.** Of the three options presented for scheduling additional days off, **the most preferred option was adding days to create two 4-day long weekends with 54 or 51% 1st place votes**, the second most preferred option was adding days to create a 5 day long weekend in November with 41 or 39% of 1st place votes, and the least preferred option was adding days to create a 5 day long weekend in October with

10 or 9.5% of first place votes. Of the 41 who indicated a 5 day long weekend in November as their first choice, 32 or 78% indicated two 4 day long weekends as their second choice. These results indicate that adding two 4 day long weekends is the most acceptable choice to add additional days, if the Fall break is removed (survey data can be accessed here).

**Conclusion/Proposal:** The Faculty of Pharmacy and Pharmaceutical Sciences would like to proceed with the Fall break exemption for undergraduate, entry to practice PharmD students starting in the 2019-20 academic year despite only having 30.5% of students in support of its removal or 11.4% that did not have a preference.

The Faculty is committed to provide two wellness days during the Fall term. Exemption from the Fall break with tailored additional days off provides flexibility to balance the need to offer a high quality program with the need to support student well-being. In discussion with our Assistant Deans, Dr. Jill Hall (Professional Programs) and Dr. Ken Cor (Assessment and Curriculum Chair) and looking at the type of courses offered in the PharmD program, decided to go with a hybrid model of giving two days off and rescheduling classes missed on these two days as opposed to rescheduling 4 days of missed classes during the Fall Term Reading week. Days off will be strategically scheduled based on they on the feasibility of rescheduling lost lecture time which may be limited by the logistics of rescheduling a seminar or lab and limitations of an instructor's ability to convert in class material to an online format. In addition, FoPPS Administration is committed to consulting APSA on when best to schedule these days off on an annual basis.This model with the additional days off is designed to meet the students halfway while accommodating the increased hours requirement mandated by your accreditation. Even with these days off, we do gain additional teaching hours and minimize the need for rescheduling large lecture classes. We acknowledge that this model is not ideal, however, we are trying to work towards some compromise with the students.

The Faculty will incorporate tailored additional days off into the schedule on a yearly basis to support student well-being while minimizing the impact on our ability to deliver hours needed to maintain a high quality program. The additional days off apply to all students in the entry to practice PharmD program-which will include incoming students in Fall 2019 and the students currently moving in to year two in 2019-20.

While we acknowledge students concerns regarding how the loss of a Fall Term Reading week will affect general well-being, the Faculty is committed to ensuring this impact is minimized by scheduling additional days off at times that provide support. In addition, the FoPPS Assessment Committee will continue to evaluate this program change and its impact on the student experience in the program.

Based on student preferences (2nd year cohort consulted regarding Year 2 of PharmD Program) and course scheduling, the specific days off that will be provided for 2nd year students in 2019-2020 will be a four day-long weekend over the Thanksgiving (October 12th-15th 2019) and Remembrance Day (November 9th-12th) holidays. For the 1st year students, a four day long weekend will be implemented over the Thanksgiving (October 11th-14th 2019) and Remembrance Day (November 9th-12th) holidays.

In addition to the above summary and linked documents, APSA has provided a letter summarizing their perception of the consultative process and their position regarding the present proposal.

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Dr. Ravina Sanghera BSc. Pharm, PharmD
Assistant Dean, Program Operations & Student Services

Dr. Ken Cor PhD
Assistant Dean, Assessment & Accreditation

Dr. Neal Davies BSc. Pharm, PhD
Professor and Dean

### *2019-2020 Academic Schedule* <span style="color:red">(amended for GFC Executive January 14, 2018 see</span> <span style="color:red">highlighted sections)</span>

Deadline dates in the schedule are marked with a ▪ symbol.

| July 2019 | |
|---|---|
| 1 | One hundred and thirteenth University year begins. |
| 1 | Canada Day; University buildings closed. |
| 4 | Students in Phase II of the BSc in Medical Laboratory Science program begin year of practical training. |
| 8 | Summer Term classes begin. |
| 8-11 | Auditor registrations for Summer Term courses will be accepted only on these days. |
| 11 | ▪ Last day for students enrolled in the University of Alberta Health Insurance Program (UAHIP) to opt out of this insurance coverage by providing proof of enrolment in the Alberta Health Care Insurance Plan to the International Services Centre. |
| 11 | ▪ Summer Term Registration Deadline. Last day to add or drop six-week courses and courses offered in the first three weeks of Summer Term (Bear Tracks web registration available until midnight). Students wishing to add or drop three-week courses offered during the last three weeks of the term should seek assistance at department offices. |
| 11 | ▪ Payment Deadline: Last day for payment of Summer Term fees. Students who have not paid their fees in full, or made satisfactory alternate arrangements, will be assessed late payment penalty charges. |
| 12 | Summer program ends for students in years one, two and three of the DDS program. |
| 15 | ▪ Summer Term Refund Deadline for three-week courses: Students withdrawing from courses taught in the first three weeks of Summer Term will be assessed full fees after this date. |
| 22 | ▪ Summer Term Refund Deadline for six-week courses: Students withdrawing from courses taught for six weeks will be assessed full fees after this date. |
| 22 | ▪ Last day for withdrawal from courses taught in the first three weeks of Summer Term. |
| 26 | Last day of classes taught in the first three weeks of Summer Term. |
| 29 | Classes begin for courses taught in the last three weeks of Summer Term. |
| 31 | ▪ Deadline to write a special deferred examination for students who have missed a deferred examination for cause. Please refer to University Calendar; University Regulations and Information for Students; Academic Regulations; Attendance; Absence from Final Exams section. |
| August 2019 | |
| 1 | ▪ Second half Summer Term Registration Deadline for three-week courses: Last day to add or drop courses offered in the last three weeks of Summer Term. Students can contact department for assistance. |
| 5 | Heritage Day; University buildings closed. |
| 6 | ▪ Summer Term Refund Deadline for three-week courses: Students withdrawing from courses taught in the last three weeks of Summer Term will be assessed full fees after this date. |
| 6 | ▪ Last day for withdrawal from six-week courses in Summer Term. |
| 8 | ▪ Last day for withdrawal from courses taught in the last three-weeks of Summer Term. |
| 12 | Orientation and classes begin for years three and four of the MD program. |
| 14 | Summer Term classes end. |

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|---|---|
| 14-23 | U of A International Undergraduate Academic Success program. |
| 15-16 | Final examinations for Summer Term classes, exceptions may apply. |
| 19 | Registration opens for Open Studies students in courses designated for delayed registration. |
| 21-23 | Orientation for International MBA students. |
| 26 | Orientation and classes begin for all: Dentistry program, Dental Hygiene program, years one and two of the MD program, year two of the Radiation Therapy program, and phase I Medical Laboratory Science students. |
| 27-29 | Orientation for International Students. |
| 27 - September 1 | Orientation for MBA students. |
| 29 | Augustana Faculty Fall Term 3-week classes begin. |
| 29-30 | Orientation for first year Pharmacy students. |
| 30 | Augustana Faculty Fall Term 3-week classes registration deadline; students withdrawing after this date through September 5 will be assessed 50% fees. |
| **September 2019** | |
| 1 | ▪ Last day for undergraduate students to apply through Bear Tracks for permission to graduate at Fall Convocation. |
| 2 | Orientation for new undergraduate students. |
| 2 | Labour Day; University buildings closed. |
| 3 | Fall Term and Fall/Winter two-term classes begin.  Exceptions may apply; students must consult with their Faculty office. |
| 3 | Orientation for students in the Faculty of Law. |
| 4 | Fall Term classes begin for students in the Faculty of Law. |
| 5 | ▪ Augustana Faculty Fall Term 3-week classes Refund Deadline; students withdrawing after this date will be assessed full fees. |
| 12 | ▪ Augustana Faculty last day to withdraw from Fall Term 3-week classes. |
| 16 | ▪ Fall Term Registration Deadline. Last day to add or drop Fall Term and Fall/Winter two-term courses (Bear Tracks web registration system available until midnight): Students withdrawing after this date through October 3 will be assessed 50% fees for withdrawn courses. Exceptions may apply; students must consult with their Faculty office. |
| 17 | ▪ Last day of Fall Term 3-week classes for Augustana Faculty students. |
| 17-23 | Registration by undergraduate and graduate students to change to audit or change from 'credit' to 'audit' in Fall Term and Fall/Winter Term courses will be accepted only during this period. |
| 20-22 | Alumni weekend. |
| 23 | SU Health and Dental Plan Change of Coverage Deadline. Students wishing to opt-out of this service or change their coverage must do so through www.ihaveaplan.ca. |
| 23 | Augustana Faculty Fall Term 11-week and Fall/Winter two-term 11-week classes begin. |
| 26 | ▪ Fall Term Refund Deadline for six-week courses: Students withdrawing from courses offered in the first six weeks of Fall Term will be assessed full fees after this date. |
| 27 | ▪ Last day for students enrolled in the University of Alberta Health Insurance Program (UAHIP) to opt out of this insurance coverage by providing proof of enrolment in the Alberta Health Care Insurance Plan to the International Services Centre. |

| 30 | ▪ Last day for graduate students in thesis-based programs to submit theses to and be approved by the Faculty of Graduate Studies to ensure graduation at Fall Convocation. |
|---|---|
| 30 | ▪ Last day for Departments to submit Report of Completion of course-based masters, postgraduate diploma, or graduate certificate programs to the Faculty of Graduate Studies and Research to ensure graduation at Fall Convocation. |
| 30 | ▪ Last day for graduate students to apply through Bear Tracks to ensure graduation at Fall Convocation. |
| 30 | ▪ Payment Deadline: Last day for payment of Fall Term fees. Students who have not paid their fees in full, or made satisfactory alternate arrangements, will be assessed late penalty charges. To avoid instalment charges, all Fall/Winter fees must be paid by the Fall Term Fee Deadline. |
| **October 2019** | |
| 2 | ▪ Augustana Faculty Fall Term 11-week classes drop deadline; students withdrawing after this date through October 18 will be assessed 50% fees. Students must contact a Faculty advisor for assistance. |
| 3 | ▪ Fall Term Refund Deadline: Students withdrawing after this date will be assessed full fees. Exceptions may apply; students must consult with their Faculty office. |
| 8 | ▪ Last day for withdrawal from six-week courses offered in the first half of the Fall Term. |
| 11 | ▪ Last day of classes for six-week courses offered in the first half of Fall Term. |
| 11 | No classes for first year PharmD students. |
| 14 | Thanksgiving Day; University buildings closed. |
| 15 | No classes for second year PharmD students. |
| 18 | ▪ Augustana Faculty Fall Term 11-week classes refund deadline; students withdrawing after this date will be assessed full fees. |
| 21 | Classes begin for six-week courses offered in the second half of the Fall Term. |
| **November 2019** | |
| 1 | ▪ Last day to drop six-week courses offered in the second half of the Fall Term. Students can contact department for assistance. |
| 11 | Remembrance Day; University buildings closed. |
| 12 | No classes for first and second year PharmD students. |
| 12-15 | Fall Term Reading week. Classes withdrawn for a full week, except for students in Faculty of Law; Faculty of Medicine and Dentistry (excluding the BSc Dental Hygiene program); Faculty of Rehabilitation Medicine; students in the PharmD program; and students in Cooperative Education, Experiential Learning Placement, Clinical Placement and Work Placement terms. |
| 19-20 | Fall Convocation, Part I, Parts II and III |
| 22 | ▪ Fall Term Refund Deadline for six-week courses: After this date students withdrawing from courses offered in the last six weeks of Fall Term will be assessed full fees. |
| 29 | ▪ Last day for withdrawal from six-week courses offered in the second half of Fall Term. |
| 29 | ▪ Last day for withdrawal from Fall Term courses. Exceptions may apply; students must consult with their Faculty office. |
| **December 2019** | |
| 3 | Last day of Fall Term classes for students in the Faculty of Law. |
| 4 | ▪ Augustana Faculty last day to withdraw from Fall Term 11-week classes. |
| 6 | Last day of Fall Term classes.  Exceptions may apply; students must consult with their Faculty |

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| | office. |
| 9-21 | Fall Term examinations (including consolidated examinations). Exceptions may apply; students must consult with their Faculty office. Examinations other than consolidated examinations are held within the period December 11-20 (inclusive). University-organized extracurricular activities will normally not be allowed during this period. |
| 11 | Last day of Fall Term 11-week classes for Augustana Faculty students and years three and four BSc Dental Hygiene students. |
| 11-19 | Final exam period for students in the Faculty of Law. |
| 13 | Last day of Fall Term classes for students in the DDS program and students in years one and two of the MD program. |
| 13-20 | Final exam period for years three and four of the BSc Dental Hygiene program. |
| 16-20 | Final exam period for years three and four Dentistry students. |
| 16-21 | Augustana Faculty final examinations in Fall Term courses and mid-year examinations in two-term courses. Extracurricular activities sponsored by Augustana Faculty will normally not be allowed during this period. |
| 20 | Last day of Fall Term classes for students in years three and four of the MD program. |
| 25-31 | Christmas holiday period; University buildings closed. |
| **January 2020** | |
| 1 | New Year's Day; University buildings closed. |
| 2 | Winter Term classes begin for Dentistry programs and the BSc Dental Hygiene program. |
| 3 | Orientation for new International students. |
| 6 | Winter Term classes begin for the MD program. |
| 6 | Augustana Faculty Winter Term 3-week classes begin. |
| 6 | Winter Term classes begin. Exceptions may apply; students must consult with their Faculty office. |
| 7 | Augustana Faculty Winter Term 3-week classes' registration deadline; students withdrawing after this date through January 10 will be assessed 50% fees. |
| 10 | ▪ Augustana Faculty Winter Term 3-week classes refund deadline; students withdrawing after this date will be assessed full fees. |
| 16 | ▪ Augustana Faculty last day to withdraw from Winter Term 3-week classes. |
| 17 | ▪ Last day to withdraw from Fall/Winter two-term courses. |
| 17 | ▪ Winter Term Registration Deadline. Last day to add or drop Winter Term courses (Bear Tracks web registration system available until midnight): Students withdrawing after this date through February 5 will be assessed 50% fees for withdrawn courses. Exceptions may apply; students can consult with their Faculty office. |
| 20-24 | Registration by undergraduate and graduate students to change to audit or change from 'credit' to 'audit' in Fall Term and Fall/Winter Term courses will be accepted only during this period. |
| 22 | Last day of Winter Term 3-week classes for Augustana Faculty students. |
| 24 | Winter Term Refund Deadline for six-week courses: After this date students withdrawing from courses offered in the first six weeks of Winter Term will be assessed full fees. |
| 27 | Augustana Faculty Winter Term 11-week classes begin. |
| 31 | ▪ Last day for students enrolled in the University of Alberta Health Insurance Program (UAHIP) to opt out of this insurance coverage by providing proof of enrolment in the Alberta Health Care Insurance Plan to the International Service Centre. |

| 31 | • Payment Deadline: Last day for payment of Winter Term fees. Students who have not paid their fees in full, or made satisfactory alternate arrangements, will be assessed late payment penalty charges. |
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| **February 2020** | |
| 1 | • Last day for undergraduate students to apply through Bear Tracks for permission to graduate at Spring Convocation. |
| 1 | • Last day for application for reappraisal of final examinations for Fall Term courses. |
| 1 | • Study abroad application deadline for certain University of Alberta International administered Exchange and Summer programs. |
| 5 | • Augustana Faculty Winter Term 11-week classes drop deadline; students withdrawing after this date through February 21 will be assessed 50% fees. Students must contact a faculty advisor for assistance. |
| 5 | • Last day to withdraw from Fall/Winter two-term 11-week classes for Augustana Faculty. |
| 5 | • Winter Term Refund Deadline: Students withdrawing from courses after this date will be assessed full fees. Exceptions may apply; students must consult with their Faculty office. |
| 7 | • Last day for withdrawal from six-week courses offered in the first half of Winter Term. |
| 14 | Registration system opens for Spring/Summer 2020. |
| 14 | Last day of classes for six-week courses offered in the first half of Winter Term. |
| 17 | Statutory Provincial holiday; University buildings closed. |
| 18-21 | Winter Term Reading Week. Classes withdrawn for a full week, except for students in Augustana Faculty, Nursing undergraduate focused practicum courses, Experiential Learning placement, years three and four of the MD program, year four Pharmacy, and students in the clinical component of the Radiation Therapy program. Exceptions may apply; students must consult with their Faculty office. |
| 21 | • Augustana Faculty Winter Term 11-week classes refund deadline; students withdrawing after this date will be assessed full fees. |
| **March 2020** | |
| 2 | Classes begin for six-week courses offered in the second half of Winter Term. |
| 2-6 | Winter Term break for Augustana Faculty students. |
| 4 | 12:00 to 1:00 pm Students' Union Election Forum in the Myer Horowitz Theatre (SUB). Classes withdrawn for this time period. |
| 9 | Study abroad application deadline for certain University of Alberta International administered Summer programs. |
| 13 | Last day to drop from six-week courses offered in the second half of Winter Term. Students can contact Department for assistance. |
| 20 | Winter Term Refund Deadline for six-week courses: After this date students withdrawing from courses offered in the last six weeks of Winter Term will be assessed full fees. |
| **April 2020** | |
| 1 | Last day for students in thesis-based programs to submit theses to and be approved by the Faculty of Graduate Studies and Research to ensure graduation at Spring Convocation. |
| 1 | Last day for departments to submit Report of Completion of course-based master's, postgraduate diploma or graduate certificate programs to the Faculty of Graduate Studies and Research to ensure graduation at Spring Convocation. |
| 1 | Last day for graduate students to apply through Bear Tracks to ensure graduation at Spring Convocation. |

| 1 | Comprehensive examination period begins for students in the fourth year of the MD program. |
|---|---|
| 1 | ▪ Last day for withdrawal from six-week courses offered in the second half of Winter Term. |
| 1 | ▪ Last day for withdrawal from Winter Term courses. Exceptions may apply; students must consult with their Faculty office. |
| 8 | Last day of Winter Term classes. Exceptions may apply; students must consult with their Faculty office. |
| 9 | Last day of classes for year two of the BSc Dental Hygiene program. |
| 10 | Good Friday; University buildings closed. |
| 13 | Easter Monday; University buildings closed. |
| 14-25 | Winter Term examinations (including consolidated examinations). Exceptions may apply; students must consult with their Faculty office. Examinations other than consolidated examinations are held within the period April 15-24 (inclusive). University-organized extracurricular activities will normally not be allowed during this period. |
| 15 | ▪ Augustana Faculty last day to withdraw from Winter Term 11-week classes. |
| 15 | Last day of lectures/labs/clinics for years three and four of the BSc Dental Hygiene program. |
| 16-24 | Final exam period for students in the Faculty of Law. |
| 17 | Last day of classes and clinics for years three and four of the DDS program. |
| 17-25 | Winter Term examinations for years three and four of the BSc Dental Hygiene program. |
| 20 | Last day of Winter Term 11-week classes for Augustana Faculty students. |
| 20-24 | Fall/Winter Term final examination period for year three and four Dentistry. |
| 24-30 | Augustana Faculty final examinations period. Extracurricular activities sponsored by the Augustana Faculty will normally not be allowed during this period. |
| **May 2020** | |
| 1 | Last day of classes and examinations for students in year one of the MD program and students in years one and two of the DDS program. |
| 3 | Orientation for Master of Arts in Communications and Technology (MACT) students. |
| 4 | Spring Term classes begin. |
| 4 | MACT Spring Institute begins (three weeks). |
| 4-7 | Auditor registrations for Spring Term courses will be accepted only on these days. |
| 7 | ▪ Payment Deadline: Last day for payment of Spring Term fees. Students who have not paid their fees in full, or made satisfactory alternate arrangements, will be assessed late payment penalty charges. |
| 7 | ▪ Last day for students enrolled in the University of Alberta Health Insurance Program (UAHIP) to opt out of this insurance coverage by providing proof of enrolment in the Alberta Health Care Insurance Plan to the International Centre. |
| 7 | ▪ Spring Term Registration Deadline. Last day to add or drop six-week courses and courses offered in the first three weeks of the term: (Bear Tracks web registration available until midnight.) Students wishing to add or drop three-week courses offered during the last three weeks of the term should seek assistance at department offices. |
| 9 | Charter Day. |
| 11 | ▪ Spring Term Refund Deadline for three-week courses: Students withdrawing from courses taught in the first three weeks of Spring Term will be assessed full fees after this date. |
| 11 | Summer program begins for students in years one, two and three of the DDS program. |
| 18 | Victoria Day; University buildings closed. |
| 19 | ▪ Spring Term Refund Deadline for six-week courses: Students withdrawing after this date will be assessed full fees. |

| 19 | ▪ Last day for withdrawal from courses taught in the first three weeks of Spring Term. |
|---|---|
| 22 | Last day of classes and examinations for students in the second year of the MD program. |
| 22 | Last day of classes in the MACT Spring Institute. |
| 22 | Last day for classes taught in the first three weeks of Spring Term. |
| 25 | Classes begin for courses taught in the last three weeks of Spring Term. |
| 28 | ▪ Spring Term Registration Deadline for three-week courses: Last day to add or drop courses taught in the last three weeks of Spring Term. Students can contact Department for assistance. |
| 29 | ▪ Last day of program for fourth year students in the MD program. |
| **June 2020** | |
| 1 | ▪ Spring Term Refund Deadline for three-week courses: Students withdrawing from courses taught in the last three weeks of Spring Term will be assessed full fees after this date. |
| 3 | ▪ Last day for withdrawal from six-week courses in Spring Term. |
| 5 | ▪ Last day for withdrawal from courses taught in the last three weeks of Spring Term. |
| 7 | Augustana Faculty convocation. |
| 9-12 | Spring Convocation, Parts I to VI. |
| 10 | Last day of Spring Term classes, exceptions may apply. |
| 11-12 | Final examinations for Spring Term classes, exceptions may apply. |
| 15-18 | Spring Convocation, Parts VII to XI. |
| 30 | One hundred and thirteenth University year ends. |

**December 21, 2018**

Dear GFC Executive Committee,

Prior to the proposal brought for discussion to GFC in September 2018, the Class of 2022, who is currently the only Entry to Practice PharmD cohort in the faculty, had yet to be consulted or informed about the situation regarding the removal of Fall Break. Although the original proposal mistakenly read that all pharmacy streams would be affected, it was clarified that only the Entry to Practice PharmD stream was to have this change applied. Due to the misrepresentation in the first proposal and the lack of consultation to the only cohort who would be affected by this change, both APSA and the Class of 2022 felt as though there was a need for communication and transparency going forward.

Since the withdrawal of approval for the original proposal in November 2018, multiple consultations have taken place involving the Faculty and the Class of 2022. A town hall was held on November 23, 2018 in which the majority of the class was in attendance. The Faculty (Dr. Ravina Sanghera, Dr. Ken Cor and Dr. Jill Hall) led the town hall and presented a slide set of various options to address the issue of additional lecture hours needed. For each of these options, there was a pro's and con's list listed. After speaking with the Class of 2022 APSA Class Representative, Monica Choy, it was clear that the students felt that the town hall, although informative, did not properly allow the students to voice their concerns. Particularly, many of them felt as though their additional comments to the pro's and con's list were not being considered. Many students felt as though the "pro" list of "Keeping Fall Break" was not indicative that it would also support student mental health or allow for out of town students enough time to go home to see their families and support networks however, the "cons" list was inclusive in breaking down specific cons for each option.

Realizing that there was a need for additional student consultation and allowing the students to feel as though their voice had not only been heard, but taken into account as well, APSA organized a second town hall on December 4, 2018. APSA invited the three faculty members who had been in attendance at the previous town hall to allow them to listen and acknowledge student comments, as well as to answer any scheduling questions that APSA felt was beyond our knowledge. There were fewer students at the second town hall, which most students in attendance accounted to the timeline of the town hall in conjunction with the students' upcoming final exam schedule. During this town hall, a closer look was taken at the proposed scheduling options that the Faculty had proposed during the first town hall, and conversations were had regarding each option, and outlining to both students and faculty the feasibility of each option as well as a more in-depth conversation regarding the pro's and con's. After this consultation, both APSA and the Faculty agreed that it would be beneficial to find out the preferred choice of the Class of 2022 regarding where their additional days off would fall if Fall Break was to be removed. Additionally, it was important to determine if after the consultations had taken place, if the Class of 2022 was in support of the removal of Fall Break.

A survey was developed by Dr. Sanghera, Dr. Cor, Dr. Hall, Sean Hanson (APSA Past President) and myself and was sent by APSA to the Class of 2022 on Tuesday, December 18th at 5:00 pm and was closed on Wednesday, December 19th at 6:00 pm. A summary of the survey results were compiled by APSA and can be found following this letter. 105/131 students completed the survey (80% response rate). **The survey findings show that 58.1% of the students do not support the removal of Fall Break and would prefer other scheduling alternatives discussed.**

Due to this, **APSA does not show support for the revised proposal**, which still recommends the removal of Fall Break in place of other scheduling options. Although APSA does acknowledge that these alternative scheduling options may be difficult to implement, we believe that it is possible and APSA agrees to offer our help wherever possible to ensure these changes are implemented as smoothly as possible.

Additionally, APSA would like to see a written commitment by the Faculty, ensuring that regardless of the decision made regarding the removal of Fall Break, the Faculty will continue to consult the students regarding this scheduling matter. Although a verbal commitment has been made by Dr. Sanghera, Dr. Cor and Dr. Hall ensuring that this will happen, I believe it would go a long way with the students and continuing the relationship built between them and the Faculty to see this commitment in writing.

Thank you in advance for your time looking into this matter.
Sincerely,


**Jes Buhler, President**
*Alberta Pharmacy Students' Association (APSA)*
University of Alberta Faculty of Pharmacy and Pharmaceutical Sciences

778-875-0974 | jebuhler@ualberta.ca

## Summary of Survey Findings

This survey was created by APSA and FoPPS representatives Dr. Cor, Dr. Sanghera and Dr. Hall. It was distributed by APSA and was open for responses from Tuesday, December 18, 2018 at 5:00 pm until Wednesday, December 19, 2018 at 6:00 pm. A total of 105 students responded to the survey (approximately 80% response rate). The students were asked to declare that they were in the Class of 2022 of the PharmD program and then two following questions which are summarized below. The survey was distributed with a PDF document outlining various scheduling options which can be found at the end of this document.

## Question 1:

### Please indicate your preference:
105 responses
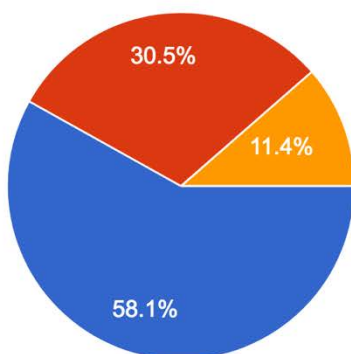


- ● Keep Fall break and find alternate ways to recoup lost hours (e.g. doubling up lectures, starting early, online lectures)
- ● Remove Fall break with additional days off scheduled at times that limit the impact on the schedule (as outlined in the pdf sent with the email invite)
- ● I have no preference

## Question 2:

If the Fall break is removed, please rank your preference for the following scheduling options
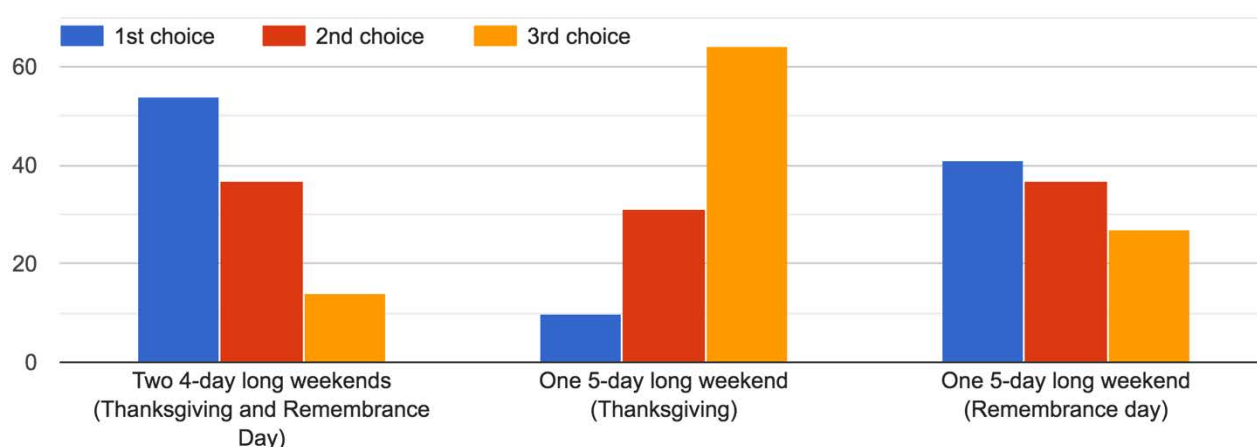


The individual numbers for the responses to Question 2 can be found below:

Two 4-day long weekends (Thanksgiving and Remembrance Day)
1st choice: 54
2nd choice: 37
3rd choice: 14

One 5-day long weekend (Thanksgiving)
1st choice: 10
2nd choice: 31
3rd choice: 64

One 5-day long weekend (Remembrance Day)
1st choice: 41
2nd choice: 37
3rd choice: 27

The following images were attached in a PDF document and sent within the same email containing the link to complete the survey:

Option 1: Two 4-day long weekends

Midterms will fall BETWEEN the two 4 day breaks



Option 2: Five day Thanksgiving weekend

Midterms will fall AFTER the 5 day break

Option 3: Five day Remembrance day break

Midterms will fall BEFORE the 5 day break

# Save the Date - January 25, 2018 - Board/GFC/Senate Summit

1 message

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**Heather Richholt** <richholt@ualberta.ca>                    20 November 2018 at 14:37

Dear GFC Members:

On behalf of President Turpin, please reserve the following time in your calendars for a **Joint Summit of the Board of Governors, General Faculties Council and Senate** on

**Friday January 25, 2019**
**12:00 - 5:00 p.m.**

Maple Leaf Room
Lister Conference Centre

This is an important opportunity for these three bodies to come together and discuss an issue that is relevant to everyone in the university. A working group has been established with representatives from each body to plan this event.

Invitations with a request to RSVP will be sent in early December and an agenda will be made available closer to the date of the summit.

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**Heather Richholt**
**Assistant Secretary to General Faculties Council**
University of Alberta | University Governance
3-04 South Academic Building (SAB) | Edmonton, AB | Canada | T6G 2G7
Tel: 780.492.1937 | heather.richholt@ualberta.ca
**University Governance** | www.governance.ualberta.ca

**Item No. 21**
For the GFC Meeting of January 28, 2019
**Meg Brolley <brolley@ualberta.ca>**

# Invitation/Response Requested: University of Alberta Board/GFC/Senate Joint Summit - Friday, January 25, 2019
1 message

**Heather Richholt** <richholt@ualberta.ca>                                                         8 January 2019 at 12:07

Dear Members of GFC

On behalf of Chancellor Stollery, Board Chair Michael Phair, and President Turpin please see the attached invitation for the joint summit of the Board of Governors, General Faculties Council, and the Senate. Please provide your responses by noon on Tuesday, January 15 using this link.

| | |
|---|---|
| 12:00 pm | Lunch |
| 1:00 pm | Opening Remarks |
| 2:30 pm | Presentations: |
| | Steve Patten, Prof, Political Science & Associate Dean, Research, Faculty of Arts – U of A |
| | and Bruce Anderson, Abacus Data |
| | Reception to follow (cash bar available) |
| 4:30 pm | Conclusion |

Please let me know if you have any questions.

Best regards,
Heather Richholt

_____

**Heather Richholt**
**Assistant Secretary to General Faculties Council**
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📄 **Joint Summit Invite-01-25-19 (1).pdf**
218K

**Board of Governors, General Faculties Council, and Senate Summit**

*The Case for Post-Secondary Institutions: Public Perceptions of Universities in an Election Year*

Friday, January 25, 2019

12:00 pm – 4:30 pm

Maple Leaf Room

Lister Conference Centre

87 Avenue and 116 Street (a 5-minute walk from the **Health Sciences LRT Station**)

PARKING is available in **Lot M** (in front of Lister Centre)

**Click HERE to RSVP by Tuesday, January 15 at NOON**236

**Item No. 21**

*For the GFC Meeting of January 28, 2019*
**Heather Richholt <richholt@ualberta.ca>**

**UNIVERSITY OF ALBERTA**

# Announcement of new Dean of Augustana Faculty
1 message

**Meg Brolley** <meg.brolley@ualberta.ca>        9 January 2019 at 11:49

**To Members of General Faculties Council:**

On behalf of Provost and Vice-President (Academic) Steven Dew, please see the links below for the announcement of Dr. Demetres P. Tryphonopoulos as the new Dean of Augustana Faculty and Executive Officer of Augustana Campus effective July 1, 2019.

https://blog.ualberta.ca/announcement-new-dean-of-augustana-cc476ed6631d

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**Meg Brolley**
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