



The following Motions and Documents were considered by the GFC General Faculties Council at its Monday, January 28, 2019 meeting:

Agenda Title: **New Members of GFC**

CARRIED MOTION:

MOTION I: TO APPOINT/RE-APPOINT:

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

Final Item 4.

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**

CARRIED 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.

Final Item 5.

Agenda Title: **Revisions to the Animal Ethics Policy and Procedures**

CARRIED 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.

Final Item 6.

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)**

CARRIED 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.

Final Item 7.

FINAL 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
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Motion

<p>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.</p>

Item

Action Requested	<input type="checkbox"/> Approval <input checked="" type="checkbox"/> 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 (<i>please be specific</i>)	The proposal is before the committee to terminate the program. Admission and transfer into the program has been suspended since 2015.
Executive Summary (<i>outline the specific item – and remember your audience</i>)	<p>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.</p> <p>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.</p> <p>Upon final approval, the Calendar and the Faculty website will be updated.</p>
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) <For information on the	<u>Those who are actively participating:</u> <ul style="list-style-type: none"> • none
	<u>Those who have been consulted:</u> <ul style="list-style-type: none"> • Vice-Dean, Faculty of Arts • Portfolio Initiatives Manager, Office of the Provost and Vice-President (Academic)

Item No. 5

protocol see the Governance Resources section Student Participation Protocol >	<u>Those who have been informed:</u> <ul style="list-style-type: none"> Arts Faculty Council
Approval Route (Governance) (including meeting dates)	Arts Academic Affairs Committee (March 28, 2018) Arts Executive Committee (November 8, 2018) Arts Faculty Council (November 22, 2018) GFC Academic Planning Committee (December 12, 2018) GFC Executive Committee (January 14, 2019) General Faculties Council (January 28, 2019) Board Learning and Discovery Committee (February 15, 2019) Board of Governors (March 15, 2019)

Strategic Alignment

Alignment with <i>For the Public Good</i>	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. 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.	
	<input type="checkbox"/> Enrolment Management <input type="checkbox"/> Faculty and Staff <input checked="" type="checkbox"/> Funding and Resource Management <input type="checkbox"/> IT Services, Software and Hardware <input type="checkbox"/> Leadership and Change <input type="checkbox"/> Physical Infrastructure	<input type="checkbox"/> Relationship with Stakeholders <input type="checkbox"/> Reputation <input type="checkbox"/> Research Enterprise <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Student Success
Legislative Compliance and jurisdiction	Post-Secondary Learning Act GFC Academic Planning Committee Terms of Reference 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.

Proposal Template: Program Termination

Use this template for proposals to terminate ministry-approved programs or specializations.

SECTION 1: PROPOSAL INFORMATION

1.1 Fill in the table below:

Institution	University of Alberta
Program/specialization name	<p>Single Majors:</p> <p>Chinese Studies/Chinese Language and Literature, Japanese Studies/Japanese Language and Literature</p> <p>Combined Major:**</p> <p>Chinese & Japanese</p> <p>Single Minors:</p> <p>Chinese, Japanese</p> <p>**not to be confused with “double” majors</p>
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 not 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:

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	PROPOSED
https://calendar.ualberta.ca/preview_program.php?catoid=28&poid=26731&returnto=7133#BAHonorsAndBAMajorMinorRequirements	
<div>East Asian Studies [Arts]</div> <div>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.</div> <div>Honors in East Asian Studies</div> <div>[...]</div> <div>Major and Minor in East Asian Studies</div> <div>Major Requirements</div> <div>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.</div> <div>A major in East Asian Studies requires.....</div> <div>[...]</div> <div>Minor Requirements</div> <div>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.</div> <div>A minor in East Asian Studies requires....</div>	<div>East Asian Studies [Arts]</div> <div>Honors in East Asian Studies</div> <div>[...]</div> <div>Major and Minor in East Asian Studies</div> <div>Major Requirements</div> <div>A major in East Asian Studies requires.....</div> <div>[...]</div> <div>Minor Requirements</div> <div>A minor in East Asian Studies requires....</div>

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 Name: Christopher Lupke	Department Chair or Designate Name: Rebecca Nagel	Date approved by Dept Council:
Email:	Signature: 	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	<input type="checkbox"/> Approval <input checked="" type="checkbox"/> Recommendation
Proposed by	Vice-President (Research)
Presenter(s)	Susan Babcock, Director, Research Ethics Office Randy Goebel, Associate Vice-President (Research) and Associate Vice-President (Academic)

Details

Responsibility	Vice-President (Research)
The Purpose of the Proposal is (<i>please be specific</i>)	To recommend revisions to the Animal Ethics Policy and Procedures
Executive Summary (<i>outline the specific item – and remember your audience</i>)	<p>In general, the proposed revisions do not change the scope or intent of the Animal Ethics Policy Suite.</p> <p>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 <i>Animal Care and Use Committee Structure, Application and Review Procedure</i> 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.</p> <p>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.</p> <p>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.</p>
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	<u>Those who are actively participating:</u> <ul style="list-style-type: none"> 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
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Item No. 6

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.
	<u>Those who have been consulted:</u> <ul style="list-style-type: none"> 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.
	<u>Those who have been informed:</u> <ul style="list-style-type: none">
Approval Route (Governance) (including meeting dates)	GFC Academic Planning Committee - November 7, 2018 GFC Executive Committee (for information) – December 10, 2018 General Faculties Council - January 28, 2019 Board Learning & Discovery Committee - February 15, 2019 Board of Governors - March 15, 2019

Strategic Alignment

Alignment with <i>For the Public Good</i>	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.	
	<input type="checkbox"/> Enrolment Management <input type="checkbox"/> Faculty and Staff <input checked="" type="checkbox"/> Funding and Resource Management <input type="checkbox"/> IT Services, Software and Hardware <input type="checkbox"/> Leadership and Change <input type="checkbox"/> Physical Infrastructure	<input type="checkbox"/> Relationship with Stakeholders <input checked="" type="checkbox"/> Reputation <input checked="" type="checkbox"/> Research Enterprise <input type="checkbox"/> Safety <input type="checkbox"/> Student Success
Legislative Compliance and jurisdiction	Post-Secondary Learning Act GFC Academic Planning Committee Terms of Reference Board Learning and Discovery Committee Terms of Reference 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)



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 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 Animalanimal 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](#)

[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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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).

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[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.

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[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 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

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

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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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.

FORMS

No Forms for this Procedure.

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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

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RELATED LINKS

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

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

[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;

- 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.
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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)

[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)

[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 **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.
- 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*).
- SOPS must be kept up-to-date (see *Animal Care and Use Standard Operating Procedures Definition, Creation, Approval and Management Procedure*).
- Animal use protocols and amendments must be submitted for ACUC approval well before the research is expected to start or before changes are implemented.
- 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

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[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:

- The PI has a compelling justification to establish and maintain alternate animal housing.
- The alternate animal housing is appropriately constructed or renovated for animal care and use.
- 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.
- The alternate animal housing is linked to an active, approved animal use application.
- An ACUC approves the animal use in the alternate animal housing.

- 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

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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 purposes by University of Alberta staff and trainees.
Canadian Council on Animal	The national organization responsible for setting and maintaining

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).

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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)

[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)

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.

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[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)

FINAL Item No. 7
**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)
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Motion

<p>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.</p>

Item

Action Requested	<input type="checkbox"/> Approval <input checked="" type="checkbox"/> 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 (<i>please be specific</i>)	The proposal is before the committee to approve the revised terms of reference for the GFC UASC.
Executive Summary (<i>outline the specific item – and remember your audience</i>)	<p>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.</p> <ul style="list-style-type: none"> • Principles for Delegation of Authority • Principles of Standing Committee Composition • Roles and Responsibilities of Members • Meeting Procedural Rules for GFC and its standing committees <p>The report noted that UASC was operating within its mandate and recommended no major changes in the short term. However, the <i>ad hoc</i> 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.</p> <p>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</p>

Item No. 7

	<p>GFC once that review is completed.</p> <p>The draft terms of reference propose the following changes:</p> <ol style="list-style-type: none"> 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. 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. 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. 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. 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. 6. Add as a responsibility additional to delegated authority, 5.3, regarding receiving regular reports on available undergraduate financial supports. 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)

<p>Consultation and Stakeholder Participation (parties who have seen the proposal and in what capacity)</p>	<p><u>Those who are actively participating:</u></p> <ul style="list-style-type: none"> • <i>ad hoc</i> Committee on Academic Governance Including Delegated Authority • GFC Executive Committee Transition Committee • UASC
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Item No. 7

<For information on the protocol see the Governance Resources section Student Participation Protocol >	<p><u>Those who have been consulted:</u></p> <ul style="list-style-type: none"> • Report of the <i>ad hoc</i> Committee on Academic Governance Including Delegated Authority (endorsed by GFC April 21, 2017) Appendix 6: List of Consultations • UASC • GFC Executive Committee Transition Committee <p><u>Those who have been informed:</u></p> <ul style="list-style-type: none"> • UASC • General Faculties Council • Board of Governors has been provided with brief highlights of the work of the <i>ad hoc</i> Committee on Academic Governance Including Delegated Authority
Approval Route (Governance) (including meeting dates)	GFC Undergraduate Awards and Scholarship Committee – January 8, 2019 GFC Executive Committee – January 14, 2019 General Faculties Council – January 28, 2019

Strategic Alignment

Alignment with <i>For the Public Good</i>	<p><i>For the Public Good</i></p> <p>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.</p>		
Alignment with Institutional Risk Indicator	<p>Please note below the specific institutional risk(s) this proposal is addressing.</p> <table border="1"> <tr> <td data-bbox="561 1115 1068 1325"> <input type="checkbox"/> Enrolment Management <input type="checkbox"/> Faculty and Staff <input type="checkbox"/> Funding and Resource Management <input type="checkbox"/> IT Services, Software and Hardware <input checked="" type="checkbox"/> Leadership and Change <input type="checkbox"/> Physical Infrastructure </td><td data-bbox="1068 1115 1513 1325"> <input checked="" type="checkbox"/> Relationship with Stakeholders <input checked="" type="checkbox"/> Reputation <input type="checkbox"/> Research Enterprise <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Student Success </td></tr> </table>	<input type="checkbox"/> Enrolment Management <input type="checkbox"/> Faculty and Staff <input type="checkbox"/> Funding and Resource Management <input type="checkbox"/> IT Services, Software and Hardware <input checked="" type="checkbox"/> Leadership and Change <input type="checkbox"/> Physical Infrastructure	<input checked="" type="checkbox"/> Relationship with Stakeholders <input checked="" type="checkbox"/> Reputation <input type="checkbox"/> Research Enterprise <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Student Success
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Legislative Compliance and jurisdiction	<p><i>Post-Secondary Learning Act (PSLA)</i> GFC Executive Committee Terms of Reference GFC Undergraduate Awards and Scholarship Committee Terms of Reference</p>		

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



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 responsibility.

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.

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

5. Responsibilities 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 regularly 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]

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)