Part I
Reason for Procedure

1.1 These Procedures are intended to detail how the University will manage Disclosures and Investigate allegations under Responsible Conduct of Research Policy.

Part II
Procedural Content

Definitions

2.1 All terms defined in the Policy have the same meaning in these Procedures.

(a) “Chair” means the Chair of the Investigation Committee.

(b) “Committee” means the Investigation Committee appointed by the Designated Officer as contemplated by subsections 2.21 to 2.24 of these Procedures.
(c) “Initial Review” means the Initial Review of a Disclosure contemplated by subsections 2.14 to 2.20 of these Procedures.

(d) “Person” means any person seeking advice about making a Disclosure, or making a Disclosure, including:

(i) any member of the University community, including Researchers;

(ii) representatives of Funding Agencies;

(iii) editor of a journal, magazine, conference proceedings, book or other publication; and

(iv) members of the general public.

(e) “Reprisal” means any of the following measures, taken against a person because they have sought advice about making a Disclosure, made a good-faith Disclosure, or cooperated in an Investigation:

(i) discipline;

(ii) academic penalties (in the case of students);

(iii) demotion;

(iv) termination of employment;

(v) termination of an academic appointment;

(vi) any other measure which significantly adversely affects his or her working conditions or educational experience; and

(vii) a threat to take any of the measures referred to above.

(f) “Report” means the report of the Investigation Committee, prepared and distributed in accordance with subsections 2.45 to 2.51 of these Procedures.

(g) For the purposes of these Procedures, an “academic appointment” is deemed to include nil-salaried and adjunct faculty members.

Designated Officer

2.2 The Designated Officer for the University will be the Vice-President (Research & International).

2.3 The Designated Officer may delegate some or all of his or her responsibility under these Procedures, either generally or with regard to a particular
Disclosure, to any Associate Vice-President in the office of the Vice-President (Research & International).

2.4 The Designated Officer will take reasonable steps to educate the University community on the Policy, the Code, and these Procedures.

2.5 The Designated Officer shall hold the official file regarding all Disclosures and Investigations, and manage the file in accordance with the University's policies on records management.

Designated Officer Unavailable

2.6 If the Designated Officer is unable or unwilling to fulfill his/her responsibilities under these Procedures, or the subject matter of a Disclosure is such that it would be inappropriate for the Designated Officer to manage the matter, for reason of conflict of interest or any other reason, the Designated Officer will ask the President to appoint an interim Designated Officer to manage the particular Disclosure, who may be:

(a) Any Associate Vice-President in the office of the Vice-President (Research & International); or

(b) Any other employee of the University, who is a member of the academic staff.

2.7 Any delegation under subsections 2.2 to 2.6 regarding a particular Disclosure shall be made with notice to the Person making the Disclosure.

Receipt of Disclosures

2.8 A Person may seek advice on making a Disclosure from the Designated Officer. A request for advice must be made in writing.

2.9 A Person may make a Disclosure to the Designated Officer, only in writing, containing the following information:

(a) the name of the Person;

(b) contact information for the Person;

(c) a description of the alleged Breach;

(d) the approximate date(s) of the alleged Breach; and

(e) the names of the individuals suspected of the Breach.

2.10 No further action is required by the Designated Officer or the University if a Disclosure does not strictly meet the above requirements, including where the
Disclosure is not in writing, is anonymous, or does not contain all the required information.

2.11 Notwithstanding subsection 2.10, a Designated Officer may act on a non-compliant Disclosure if he or she deems the issue to be sufficiently serious and credible. Where an anonymous Disclosure is accepted, the communications with the disclosing Person normally required by these Procedures will no longer apply.

2.12 Where a Disclosure is received by an individual at the University other than the Designated Officer, they will immediately forward the Disclosure to the Designated Officer.

2.13 The Designated Officer shall advise any relevant Funding Agency of the essential allegations in a Disclosure if, in his or her opinion, the Disclosure involves a significant financial, health and safety, or other risk. The information provided, or copy of the Disclosure, may be edited in accordance with the law and University policy, to protect the identity of those involved, personal and personal health information.

Initial Review of Disclosures

2.14 Except in extenuating circumstances, the Designated Officer will review all Disclosures (the “Initial Review”) within 15 working days of receipt.

2.15 A Disclosure will be accepted after Initial Review if, in the opinion of the Designated Officer, the Disclosure:

(a) was made in good faith, and is not frivolous or vexatious;

(b) deals with Breach to which the Policy applies; and

(c) has not already been (or is not in the process of being) investigated in another forum or pursuant to another policy or procedure which would deal comprehensively with the Breach alleged in the Disclosure.

2.16 The Person will be informed in writing as to the results of the Initial Review, including where a Disclosure is rejected, the reasons for such rejection. Where the Initial Review was not completed within 15 working days, the Person will also be informed as to the reason for the delay.

2.17 Where a Disclosure is rejected, any individual alleged to have caused or contributed to the Breach will be informed that a Disclosure was received, the essential nature of the allegations, and the reasons for rejection.

2.18 Where the Disclosure alleges a Breach by an individual holding an academic appointment at the University, the Provost (or designate) will be informed of the results of the Initial Review.
2.19 A Disclosure which is rejected will require no further action by the Designated Officer or the University.

2.20 Where a Funding Agency has been advised of a Disclosure, the Designated Officer shall also advise (no later than 60 calendar days following receipt of the Disclosure) as to whether or not an Investigation will proceed.

Investigation Committee

2.21 The Designated Officer will immediately cause an Investigation to be conducted into any Disclosure accepted after Initial Review (the “Investigation”).

2.22 The Designated Officer will appoint a minimum of three individuals to form an Investigation Committee (the “Committee”) to conduct the Investigation, and select a Chair for the Committee from among its members.

2.23 In appointing the Committee, the Designated Officer will consider the skills necessary to conduct the particular Investigation, and the potential for any conflict of interest. The Committee must have a membership of at least three, in which persons holding an academic appointment are a majority, and otherwise be composed as follows:

   (a) a minimum of one person (no maximum) holding an academic appointment at the University;

   (b) if required by a Funding Agency, a minimum of one person (no maximum) who does not have an employment relationship, contractual relationship, or academic appointment with the University;

   (c) where the Disclosure includes allegations of a Breach by an individual who does not hold an academic appointment (including a student, post-doctoral fellow, research assistant, or research associate) any number (no minimum or maximum) of students or employees from an appropriate category.

2.24 If a member of a Committee is unwilling or unable to fulfill his or her duties, the Committee may continue its work so long as it has at least three members, the majority hold an academic appointment, and it continues to comply with any applicable Funding Agency requirements. If necessary, the Designated Officer may add an replacement member to a Committee, and such addition will not impact the ability of the Committee to continue its work.

Investigation Process

2.25 The Committee may conduct the Investigation in any manner the Chair deems appropriate to the nature of the particular Disclosure, the seriousness of the issues involved, and any admissions made during the Investigation. This may include some or all of:
(a) interviewing witnesses in person;
(b) asking questions of witnesses in writing (including by email);
(c) reviewing documents (both paper and electronic);
(d) reviewing photographs, audio, and video recordings;
(e) examining physical evidence;
(f) arranging for testing of physical evidence; and/or
(g) accessing electronic systems.

2.26 The Chair may set reasonable timelines for individuals to respond to requests for assistance with the Investigation.

2.27 The Committee will conduct the Investigation in accordance with the principles of procedural fairness and natural justice. In particular, the Committee will consider that:

(a) the Person must be provided an opportunity to explain and provide evidence in support of the Disclosure;

(b) individuals who are alleged to have caused or contributed to a Breach must be informed of the essential nature of the alleged Breach, including having access to documentary and other evidence relevant to the alleged Breach deemed appropriate by the Committee, at a time deemed appropriate by the Committee;

(c) it should not rely on any evidence not disclosed to the individuals alleged to have caused or contributed to a Breach, if they are consequently unable to make full answer and defence;

(d) individuals who are alleged to have caused or contributed to a Breach must be provided an opportunity to respond to the allegations;

(e) while strict rules of evidence do not apply, appropriate weight must be given to evidence based on its credibility and reliability; and

(f) witnesses (including those making or the subject of a Disclosure) should be given a reasonable opportunity to consult with an advocate (which may include legal counsel, a union representative, or a Student Advocate, as may be appropriate).

2.28 An Investigation must normally be completed within 90 calendar days of the Disclosure being assigned to the Committee. The Chair may apply to the Designated Officer for an extension of time of up to 30 calendar days. A Chair
may make multiple applications for extensions, but extensions may be granted at a maximum of 30 calendar days at a time. If necessary, the Designated Officer will seek consent to extensions from the relevant Funding Agency. The Designated Officer shall inform the Person, and where appropriate those alleged to have caused or contributed to the Breach, in writing of any extensions granted.

2.29 If in the course of an Investigation:

(a) the Committee discovers that another Breach may have occurred or that others may have been involved in the Breach, the Chair may apply to the Designated Officer to expand the scope of the Investigation; or

(b) a subsequent Disclosure is made to the Designated Officer which would most efficiently be dealt with through the same Investigation, the Designated Officer may expand the scope of the Investigation.

2.30 Nothing in these Procedures is intended to prevent the Designated Officer or any other person from taking reasonable and immediate steps to:

(a) address a situation dangerous to the health and safety of persons, or likely to result in damage to property; or

(b) protect the administration of University funds, or money received from a Funding Agency.

In such a case, the Investigation will still be completed in accordance with these Procedures.

Confidentiality

2.31 All persons involved in the Investigation, whether as a witness or retrieving relevant information or documents, must keep confidential:

(a) the existence and nature of the Investigation; and

(b) any information or documentation obtained as a result of the Investigation; which information may only be disclosed to those who reasonably need to know. Where an individual is unsure of whether they may disclose particular information, they may seek advice from the Chair, the Designated Officer, Human Resources, the University's legal counsel, or the Access & Privacy Office.

2.32 Notwithstanding subsection 2.31, a person who is alleged to have caused or contributed to a Breach may:

(a) obtain confidential professional advice (including advice from a lawyer, union representative, or Student Advocate, as may be appropriate);
(b) disclose information to others only to the extent reasonably necessary to gather evidence and make full answer and defense to the allegations; and

(c) use information obtained independent of the Investigation in any other forum.

2.33 Notwithstanding subsection 2.31, the Designated Officer may distribute the Report(s) and information set out at subsections 2.45 to 2.51.

2.34 The Committee, in conducting its Investigation, will exercise discretion to ensure that individuals participating in the Investigation are only provided such information as is relevant to the Investigation and they may reasonably need to know to be effective witnesses, or in the case of an individual accused of causing or contributing to a Breach, respond to the allegation in accordance with the principles of procedural fairness and natural justice. Individuals participating in the Investigation (including those accused) may not necessarily be provided with all information, documentation, the names of the Person making the Disclosure or other witnesses, or the text of the Disclosure.

2.35 Members of the Committee may be required by the Designated Officer to execute a confidential non-disclosure agreement.

2.36 The Chair will advise all persons involved in an Investigation as to their obligations regarding confidentiality, and the protections available to them.

2.37 Nothing in this section is intended to prevent the Designated Officer or the Committee from using the services of a confidential administrative assistant or secretary, or from consulting with and obtaining advice, on a confidential basis, from experts relevant to the issue, including academics, auditors, accountants, human resource staff, lawyers, and privacy experts (whether internal or external to the University). Such supporting persons may be invited to attend at interviews, review documentary or physical evidence, or participate in Committee meetings, but will not have any decision making role on the Committee authority.

2.38 The Designated Officer will maintain separate files in regard to each Disclosure or each time advice is sought on a potential Disclosure. Paper files will be secured in a locked location to which only the Designated Officer and his or her confidential assistant have access. Electronic files will be stored in locations with reasonable security, and password access limited to the Designated Officer and his or her confidential assistant. The Committee will turn over their files to the Designated Officer, to be managed on the same basis, once the Investigation has concluded. All files will be maintained in accordance with the University’s policies regarding records management. Matters related to a Disclosure or Investigation will not form a part of an individual’s personnel or student file except where discipline has been imposed.
Protection of Identity

2.39 In order to protect privacy and guard against Reprisals, the University will take reasonable steps to protect the identity of the Person making the Disclosure, the individuals alleged to have caused or contributed to a Breach, and others involved in the Investigation. The identity of those involved in the Investigation will be shared or disclosed only where there is a need to know, or as otherwise permitted or contemplated by these Procedures.

2.40 The University (including the Committee, the Chair, and the Designated Officer) cannot guarantee complete anonymity to persons participating in an Investigation, and may be required to disclose identifying information:

(a) in order to comply with the principles of procedural fairness and natural justice, or a collective agreement, in conducting the Investigation;

(b) in order to decide upon and implement discipline, mitigation steps, or remedial measures;

(c) in order to implement due diligence to prevent similar or related Breaches in the future;

(d) in order to comply with requirements of Funding Agencies; or

(e) in order to comply with legal, regulatory, or contractual obligations.

Protection from Reprisal

2.41 A Person making a Disclosure, a witness, a Committee member, or any other person cooperating with an Investigation is entitled to be protected from Reprisal.

2.42 An individual or the Chair may complain about an alleged Reprisal to the Designated Officer. The Designated Officer will consider the allegation, and if in his or her opinion the allegation is substantiated, take reasonable steps to remedy the Reprisal. This may include advising any such individuals as the Designated Officer believes necessary to decide upon and implement discipline, mitigation steps or remedial measures pursuant to subsections 2.52 to 2.58.

2.43 It is not a Reprisal for the University to implement discipline or take other measures against an individual if:

(a) the individual has attempted to interfere with or failed to reasonably cooperate with an Investigation;

(b) the person made a Disclosure or allegations in bad faith;

(c) the individual has materially breached the Policy or its Procedures; or
(d) the individual is otherwise deserving of discipline.

2.44 Even where a Person indicates that he or she wishes to withdraw a Disclosure (including for fear of Reprisal or being identified) during an Investigation, the Designated Officer may determine that the issue is important enough that an Investigation must continue.

Reports on Investigations

2.45 At the conclusion of the Investigation, the Committee will issue a Report (the “Report”) to the Designated Officer.

2.46 The Report will contain, at a minimum, the following:

(a) a summary of the Disclosure and the alleged Breach;
(b) a summary of the process and key timelines in the Investigation;
(c) a summary of the key evidence obtained through the Investigation, including the response of the individual(s) alleged to have caused or contributed to a Breach;
(d) an indication of which key evidence was considered credible and reliable;
(e) a conclusion as to whether a Breach has or is likely to be committed, including identifying which individuals caused or contributed to the Breach;
(f) a summary of the reasons for the conclusion; and
(g) a summary of any remedial measures taken in regard to a Breach (to the date of the Report).

2.47 A Report must be supported by the majority of the members of a Committee. Should a Committee be unable to reach such consensus, the Chair will advise the Designated Officer, who will:

(a) constitute a new Committee to initiate a new Investigation; or
(b) abandon the Investigation.

in either case, notifying the same parties as who would normally receive the Report.

2.48 The Designated Officer may request the Chair of the Committee to prepare one or more redacted versions of the Report for the purposes of protecting confidentiality and protecting the identity of persons involved in the Investigation. All redactions will be made in a manner which complies with applicable privacy legislation and these Procedures. The Chair may consult with the Access &
Privacy Office or legal counsel in preparing such versions. The redacted versions must, in all respects, be identical to the original except for the redacted portions.

2.49 The Designated Officer will provide an appropriate version of the Report (either in original or redacted form), within 30 calendar days of the conclusion of the Investigation, to:

(a) all Researcher(s) or other persons who were accused of causing or contributing to a Breach; and

(b) where the Researcher(s) accused of causing or contributing to a Breach holds or held an academic appointment with the University, the Provost (or designate).

in each case the Report including, at a minimum, the information set out at subsections 2.46 (a), (b), (d), (e), (f), and the evidence provided by the recipient.

2.50 The Designated Officer will provide a summary or an appropriate version of the Report (either in original or redacted form), within 30 calendar days of the conclusion of the Investigation, to:

(a) the Person making the Disclosure;

(b) collaborators (including at other institutions) with the Researcher(s) who were accused of causing or contributing to a Breach;

(c) all such individuals (including external to the University) as the Designated Officer believes necessary to decide upon and implement discipline, mitigation steps, or remedial measures;

(d) all such individuals as the Designated Officer believes necessary to implement due diligence to prevent similar or related Breaches in the future;

(e) all such individuals as the Designated Officer believes necessary to protect or restore the reputation of those wrongly accused of causing or contributing to a Breach; and

(f) any other person required in order to comply with legal, regulatory, or contractual obligations.

in each case the summary or Report including, at a minimum, a summary of any evidence provided by the recipient, and enough information for the recipient to understand the essential nature of the Disclosure and whether or not a Breach was found to have occurred.
2.51 Within 30 calendar days of the conclusion of the Investigation, the Designated Officer will prepare and provide a summary of the Investigation and subsequent steps to any relevant Funding Agency, which summary must include:

(a) the specific allegation(s) subject to Investigation, including the names of any Researcher(s) alleged to have caused or contributed to a Breach;

(b) a summary of the Committee’s findings and reasons for the findings;

(c) the process and time lines followed, with reference to the Policy and these Procedures;

(d) the response of the Researcher(s) alleged to have caused or contributed to a Breach;

(e) any steps taken by the Researcher(s) to rectify the alleged Breach;

(f) the Committee’s decision as to whether a Breach occurred; and

(g) subsequent actions taken by the University.

but omitting information which is not relevant to the particular Funding Agency, and only including such personal information about individuals participating in the Investigation as is reasonably necessary.

 Discipline

2.52 Upon receipt of the results of an Investigation in which there was a finding of a Breach, a finding that a Reprisal has occurred, or a failure to cooperate with the Investigation, the Designated Officer will advise any such individuals as the Designated Officer believes necessary to decide upon and implement discipline, mitigation steps or remedial measures.

2.53 Where the Designated Officer or a Committee finds that a Disclosure was frivolous or vexatious, the Designated Officer will advise any such individuals as the Designated Officer believes necessary to decide upon and implement discipline, mitigations steps or remedial measures.

2.54 Discipline may, if found to be warranted, be implemented by an appropriate supervisor, manager, or other disciplinary authority after consulting with the Designated Officer.

2.55 Any discipline will be implemented pursuant to and in accordance with the relevant collective agreement, University policies or by-laws.

2.56 Before deciding on or implementing any discipline, mitigation steps or other remedial measures, the disciplinary authority and the Designated Officer must
seek advice and guidance from appropriate individuals in the circumstances, which may include:

(a) in all cases regarding an individual holding an academic appointment, the Provost,
(b) in all cases regarding an employee, the Associate Vice-President (Human Resources),
(c) in all cases regarding an undergraduate student, the Vice-Provost (Students),
(d) in all cases regarding a graduate student, the Vice-Provost (Graduate Education) and Dean, Faculty of Graduate Studies,
(e) individuals at various levels with relevant supervisory responsibility, such as the manager of an employee, a department head, or the Dean or Director of the relevant Faculty or unit,
(f) legal counsel, or
(g) any other individual appropriate in the circumstances.

2.57 Anonymous material may only be considered in a disciplinary decision where it would not violate the principles of procedural fairness and natural justice, and it would not conflict with a relevant collective agreement.

2.58 Nothing herein is intended to limit the ability of a Funding Agency to implement its own discipline or penalties as a result of a Breach.

**Researcher Reputation**

2.59 Where a Report concludes that Researcher(s) or other persons named in a Disclosure were not responsible for a Breach, the Designated Officer shall cause all reasonable steps to be taken to protect or restore the reputation of those wrongly accused.

2.60 The University may publish or cause to be published the name of Researcher(s) found to have caused or contributed to a Breach, only:

(a) if the findings of the Committee clearly indicate that a Breach occurred, and the Breach was intentional and not the result of an innocent error or oversight; and

(b) all internal opportunities for grievance or appeal have expired.
Informal Resolution

2.61 Notwithstanding anything else in these Procedures, the Designated Officer may, at any time, attempt to facilitate an informal resolution of a concern which could constitute a Breach, so long as:

(a) The Person(s) making the Disclosure or allegation(s) and the individual(s) alleged to have caused or contributed to a Breach agree to pursue informal resolution;

(b) The alleged Breach does not involve a significant financial, health and safety, or other risk; and

(c) There is no contractual, legal, or Funding Agency requirement to immediately pursue a more formal process or an Investigation.

2.62 The Designated Officer may extend or abridge any timelines, or pause any process or Investigation under these Procedures, in order to allow an opportunity for informal resolution.

2.63 Should the Person(s) making the Disclosure or allegation(s) and the individual(s) alleged to have caused or contributed to a Breach fail to reach agreement on how to resolve a concern within a time the Designated Officer deems to be reasonable, the Designated Officer shall cause the matter to move forward appropriately through the other processes set out in these Procedures.

Part III
Accountability

3.1 The Office of Legal Counsel is responsible for advising the President that a formal review of this Procedure is required.

3.2 The President, delegated to the Vice-President (Research & International) is responsible for the implementation, administration and review of this Procedure.

3.3 All Researchers are responsible for complying with this Procedure.

Part IV
Review

4.1 Governing Document reviews shall be conducted every ten (10) years. The next scheduled review date for this Procedure is July 17, 2023.

4.2 In the interim, this Procedure may be revised or repealed if:

(a) the Vice-President or President deems it necessary or desirable to do so;
(b) the Procedure is no longer legislatively or statutorily compliant;
(c) the Procedure is now in conflict with another Governing Document; and/or
(d) the Parent Policy is revised or repealed.

**Part V**

**Effect on Previous Statements**

5.1 This Procedure supersedes all of the following:

(a) all previous Board of Governors/Senate Governing Documents on the subject matter contained herein;
(b) all previous Administration Governing Documents on the subject matter contained herein; and
(c) all previous Faculty/School Council Procedures stemming from the Faculty/School Council Bylaw and academic and admission Regulations and any resolutions on the subject matter contained herein.

**Part VI**

**Cross References**

6.1 This Procedure should be cross referenced to the following relevant Governing Documents, legislation and/or forms:

(a) Responsible Conduct of Research Policy;
(b) Responsible Conduct of Research - Code of Research Ethics Policy;
(c) Collective Agreements (various);
(d) Student Discipline Bylaw; and
(e) Conflict of Interest Policy.