



BOARD OF GOVERNORS

NOTICE OF MEETING

March 5, 2020

Please be advised that the next meeting of the Board of Governors of Concordia University will take place **at 4 p.m., on Wednesday, March 11, 2020**, in Room GM 410 (Board of Governors Meeting Room), located on the 4th floor of the Guy-de Maisonneuve Building, 1550 de Maisonneuve Blvd. West, on the SGW Campus. Refreshments and light fare will be provided.

Kindly confirm your attendance to Evelyne Loo as soon as possible at evelyne.loo@concordia.ca or at 514-848-2424, ext. 4814.

Members of the University community who wish to view the meeting are invited to go to the observers' room EV 002.301, Located on Floor S2 of the Engineering, Computer Science, and Visual Arts Integrated Complex.

A handwritten signature in blue ink that reads "D. Tessier".

Danielle Tessier
Secretary of the Board of Governors

**AGENDA OF THE OPEN SESSION
OF THE MEETING OF THE BOARD OF GOVERNORS**

Wednesday, March 11, 2020, at 4 p.m.
Room GM 410 (Board of Governors Meeting Room)
SGW Campus

Time	Item	Presenter/s	Action
4:00	1. Call to order	N. Hébert	
	1.1 Adoption of the Agenda	N. Hébert	Approval
	CONSENT AGENDA	N. Hébert	
	2. Adoption of the December 11, 2019 Minutes		Approval
	3. Requests for the use of the Concordia name (<i>Document BG-2020-1-D1</i>)		Approval
	4. Designation of “Responsable de l’application des règles contractuelles” (RARC) (<i>Document BG-2020-1- D2</i>)		Approval
	5. Audit Committee report (<i>Document BG-2020-1-D3</i>)		Information
	6. Finance Committee report (<i>Document BG-2020-1-D4</i>)		Information
	REGULAR AGENDA		
4:05	7. Business arising from the Minutes not included on the Agenda		

4:10	8.	President's report (<i>Document BG-2020-1-D5</i>)	G. Carr	Information
4:15	9.	Report on compliance with environmental legislation and health and safety (EH&S) regulations (<i>Document BG-2020-1-D6</i>)	R. Côté	Information
4:20	10.	Governance and Ethics Committee recommendations:	N. Hébert/ M. Sullivan	Approval
	10.1	Revisions to the <i>Policy on Conflict of Interest</i> (BD-4) (<i>Document BG-2020-1-D7</i>)		
	10.2	Revisions to the <i>Code of Ethics and Professional Conduct applicable to Members of the Board of Governors and Members of Committees Established by the Board</i> (BD-10) (<i>Document BG-2020-1-D8</i>)		
	10.3	Adoption of the <i>Policy on University Policies</i> (SG-6) (<i>Document BG-2020-1-D9</i>)		
	10.4	Adoption of the <i>Policy on the Conferral of the Emeriti Title by the Board of Governors</i> (SG-7) (<i>Document BG-2020-1-D10</i>)		
4:50	11.	Audit Committee recommendation: Adoption of the <i>Policy on Employee Disclosure of Wrongdoings</i> (BD-16) (<i>Document BG-2020-1-D11</i>)	G. Paulez/ M. Sullivan	Approval
5:00	12.	Other business		
5:05	13.	Adjournment	N. Hébert	

**MINUTES OF THE OPEN SESSION MEETING
OF THE BOARD OF GOVERNORS**

Held on Wednesday, December 11, 2019, at 4 p.m.
in Room GM 410 (Board of Governors Meeting Room)
on the SGW Campus

PRESENT

Governors: Norman Hébert jr., *Chair*, Helen Antoniou, *Vice-Chair*, Françoise Bertrand, Jeff Bicher, Patrice Blais, Antoinette Bozac, William Bukowski, Graham Carr, *President and Vice-Chancellor*, Jarrett Carty (*via telephone*), Gina P. Cody, Daniel Cross (*via telephone*), Adriana Embiricos, Chris Kalafatidis, Claudine Mangen (*via telephone*), Frédérica Martin, *Vice-Chair*, Michael Novak, Georges Paulez, Philippe Pourreaux, Suzanne Sauvage, Ted Stathopoulos

Alternate Governor: Nicholas Bailey

Non-voting observer: Jonathan Wener, *Chancellor*

Also attending: Philippe Beauregard, William Cheaib, Denis Cossette, Roger Côté, Howard Davidson, Marc Gauthier, Christophe Guy, Nadia Hardy, Frederica Jacobs, Lisa Ostiguy

ABSENT

Governors: Ken Brooks, Rana Ghorayeb, Karan Pande

1. **Call to Order**

Mr. Hébert called the meeting to order at 4:02 p.m. Referring to the letter from Ellie Hummel, he urged Governors to give generously to the Student Emergency and Food Fund.

1.1 **Adoption of the Agenda**

Upon motion duly moved and seconded, it was unanimously RESOLVED:

R-2019-8-1 *That the Agenda be approved, including the items on the Consent Agenda.*

CONSENT

2. Adoption of October 24, 2019 Minutes

R-2019-8-2 *That the Minutes of the meeting of the Open Session of October 24, 2019 be approved.*

3. Collection of an undergraduate student fee levy (Document BG-2019-8-D1)

R-2019-8-3 *That the Board of Governors authorize the University to collect a fee levy of \$0.38 per credit (an increase of \$0.08 per credit from \$0.30 per credit) from all undergraduate students, adjusted annually to the Consumer Price Index of Canada, to support the CSU Clubs, to be implemented with registration for the Winter 2020 (2019/4) term, in accordance with the University's tuition, refund and withdrawal policy.*

4. Requests for the use of the Concordia name (Document BG-2019-8-D2)

R-2019-8-4 *That, subject to the conditions set out in the Policy on the Use of Concordia University's Name, Logo and Related Insignia, and the Governance of its Visual Character and Digital Presence (SG-4), the Board of Governors approve the following requests to use the Concordia name:*

- *Concordia Environmental Change Organization*
- *Concordia University Turkish Student Association*
- *Tunisian Association of Concordia Students*

5. Professional liability waiver for an in-house architect (Document BG-2019-8-D3)

R-2019-8-5 *Considérant qu'Alexis Noël, architecte-stagiaire, est au service exclusif de l'Université Concordia;*

Considérant qu'Alexis Noël, architecte-stagiaire, ne pose des actes professionnels que pour des édifices destinés à l'usage exclusif de l'Université Concordia et non destinés à la revente;

IL EST RÉSOLU de déclarer aux fins du Règlement sur la souscription obligatoire au Fonds d'assurance de la responsabilité professionnelle de l'Ordre des architectes du Québec (chapitre A-21, r. 13) que l'Université Concordia se porte garant et s'engage à prendre le fait et cause et répondre financièrement des conséquences de toute erreur ou omission d'Alexis Noël dans l'exercice de ses fonctions.

6. Audit Committee report (Document BG-2019-8-D4)

7. Human Resources Committee report (Document BG-2019-8-D5)

These reports were submitted for information purposes.

8. Finance Committee recommendation regarding banking resolution with Desjardins (Document BG-2019-8-D6)

R-2019-8-6 *WHEREAS Fédération des caisses Desjardins (hereinafter called "Desjardins") is a banker of Concordia University; and*

WHEREAS Desjardins has asked that the Board of Governors pass a resolution confirming this fact and detailing those individuals possessing signing authority on behalf of Concordia University to generally commit the University with respect to the operation of bank accounts, borrowing requirements and the purchase of various bank products and services and to enter into agreements and contracts with Desjardins pertaining thereto and to sign and execute on behalf of the University all documentation that Desjardins may require from time to time in connection thereto;

BE IT RESOLVED:

1. THAT Desjardins be appointed a banker of the University;
2. THAT for all accounts, any two of the President and Vice-Chancellor, the Chief Financial Officer, any Vice-President, the Secretary-General, the Controller, the Treasurer and Investment Officer, the Senior Director, Financial Planning and Budgets and the Director, Capital and Financing be authorized on behalf of the University:
 - a) to sign, both directly or caused to be signed by facsimile reproduction, issue, endorse, make, draw, and/or accept any cheques, promissory notes, bills of exchange or other negotiable instruments including drafts, any orders for the payment of money, contracts for letters of credit, term deposits, treasury bills, bankers' acceptances or forward exchange and generally all instruments or documents in any way in connection with its accounts and transactions with Desjardins, whether or not an overdraft is thereby created, and instruments and documents so signed shall be binding upon the University;
 - b) to receive from Desjardins, and where applicable grant receipt for, all statements of accounts (pass books) cancelled cheques and other debit vouchers, unpaid and unacceptable bills of exchange and other negotiable instruments;
 - c) to negotiate, deposit with or transfer to Desjardins (but for the credit of the University's account only) all or any cheques, promissory notes, bills of exchange or other negotiable instruments, and orders for the payment of money including drafts, letters of credit, treasury bills and bankers' acceptances and for the said purpose to draw, sign, endorse (by rubber stamp or otherwise) all or any of the foregoing, and such signatures or stamping shall be binding upon the University;
3. THAT, following the approval by the Board of Governors of the annual credit facilities agreement, the Chief Financial Officer and the President and Vice-Chancellor be authorized on behalf of the University:
 - a) to apply to Desjardins for loans to the University;
 - b) to arrange with Desjardins the amount, terms and conditions of such loans, lending agreements, financial assistance and accommodation, and the security or securities to be given to Desjardins in respect thereof;

c) *to give or furnish to Desjardins all securities and promises or notices of intention to give security that Desjardins may require to secure the repayment of such loans and interest thereon, and to execute all assignments, conveyances, hypothecations, notices and other documents necessary to give or furnish to Desjardins the security or securities requested as aforesaid, and to attach the seal of the University to any such assignment, conveyance, hypothecation, notice or other document;*

4. *THAT any two of the individuals named in paragraph 2 of the present resolution be authorized to sign all instruments or documents desirable or necessary in connection with the matters outlined in paragraph 2;*

5. *THAT the two individuals named in paragraph 3 of the present resolution be authorized to sign all instruments or documents desirable or necessary in connection with the matters outlined in paragraph 3; and*

6. *THAT a certified copy of this resolution be delivered to Desjardins for its guidance and information and that this resolution be valid until a resolution abrogating the same shall have been passed and a certified copy thereof delivered to Desjardins.*

9. Employee Benefits Committee recommendation regarding modification to section 14.7 of Pension Plan Text (Document BG-2019-8-D7)

R-2019-8-7 *That, on recommendation of the Employee Benefits Committee, the Board of Governors approve the amendments to Section 14.7 of the Pension Plan text.*

REGULAR

10. Business arising from the Minutes not included on the Agenda

There was no business arising from the Minutes not included on the Agenda.

11. President's report (Document BG-2019-8-D8)

Dr. Carr highlighted a few items included in his written report and apprised Board members of some complementary information summarized as follows:

- The Saputo Family Foundation donated \$10 million to Concordia for the creation of the SHIFT Centre for Social Transformation.
- Over 1,000 students graduated at the November 18 convocation ceremonies.
- He thanked Philippe Beauregard, Nadia Bhuiyan, Denis Cossette and Suzanne Kaye for their work in making this year's Centraide campaign the most successful ever, which will have raised about \$190,000 once matching gifts will have been received.
- Concordia graduate Manon Tremblay has been appointed Senior Director, Indigenous Directions. Donna Kahérakwas Goodleaf, who served as interim Senior Director, has been appointed to the new role of Director, Decolonizing Curriculum and Pedagogy.

- December 6 marked the 30th anniversary of the École Polytechnique massacre. Several commemorative events were held.
- Concordia has entered into a partnership with the Court of Quebec, made possible by Morton Minc, Concordia's first Jurist-in-Residence.
- Bloomberg Businessweek has ranked the JMSB MBA fourth in Canada and best in Quebec and also placed it first in Canada for entrepreneurship.
- He acknowledged the success of Concordia's athletic teams, and in particular the Women's Hockey Team, whose collective GPA is the highest of all the University's athletic teams.
- He spoke of collaborations with universities in the European Union and his trip to India.
- Governor Suzanne Sauvage will be participating in the Concordia University Library Speaker Series on January 8.

12. Report on compliance with environmental legislation and health and safety (EH&S) regulations (Document BG-2019-8-D9)

Mr. Côté conveyed the highlights of the report, which covers the reporting period for the third quarter of 2019.

13. Governance and Ethics Committee recommendation regarding amendments to the By-Laws (Document BG-2019-8-D10)

The Committee Chair, Ms. Bertrand, conveyed the context in which the amendments were being proposed and summarized the essence of the main substantive change.

Me Blais, who served on the Senate ad hoc committee which made the recommendations regarding the revised eligibility requirements for students, made the point that the requirement for students serving on the Board should allow for an independent student and that the requirement for the Board should mirror exactly that of Senate, as it has been in the past. Mr. Kalafatidis echoed Mr. Blais' view. That said, they both indicated that they would support the motion.

Upon motion duly moved and seconded, it was unanimously RESOLVED:

R-2019-8-8 *That, on recommendation of the Governance and Ethics Committee, the Board of Governors approve the amendments to the By-Laws.*

14. Presentation on Concordia University Foundation sustainable investments

Mr. Cossette apprised the Board that on November 8, Concordia announced three important goals that it has committed to achieving by 2025:

- 1) Reducing to zero its investment in the coal, oil and gas sectors;
- 2) Planning to double the portion of the Concordia Foundation's portfolio devoted to impact investment from the current 5% to 10%. In dollar figures, the goal is to direct \$20 million toward impact investment by the year 2025.

- 3) Achieving 100% sustainable investment. In other words, Concordia will only invest in those funds or companies who are clearly part of the solution in terms of fighting climate change. We will also be exploring every avenue available to us to achieve this goal, including the potential purchase of carbon credits. With this announcement, Concordia became the first university in Quebec, and the first in Canada, to set a 100% target for sustainable investment that includes a premium on impact investment.

Mr. Cossette introduced Howard Davidson, an alumnus and Governor Emeritus of the University, and President and Trustee of the Webster Foundation, one of Canada's leading private grants organizations and one that has been pivotal in helping Concordia achieve its goals.

Mr. Davidson indicated that the Concordia University Foundation acts as the University's primary investment arm. It is an independent corporation, whose primary purpose is to be the University's best possible fund management partner, and whose mission is to use its resources exclusively to encourage the advancement and development of Concordia's teaching, research and charitable programs and initiatives. Concordia transfers certain donations and other funds to the Foundation for investment management.

As of April 30, 2019, the total value of its assets is \$243 million, comprised of an Endowment Fund which supports research and scholarship, a Long-Term Debt Fund used to repay the University's debt, and support for various University initiatives, including group benefits. To allow such annual distributions, we have to generate returns that are at least 6.25% or higher on an annual basis. This is a challenge to meet in a changing world.

Mr. Davidson conveyed the journey towards achieving sustainable investments which began more than six years ago following discussions with student leaders, including adopting a sustainable investment policy which integrates environmental, social and corporate governance (ESG) factors and becoming a signatory of the United Nations Principles for Responsible Investment (PRI). All this work has led to our exposure to the coal, oil and gas sectors being very low, which is at \$14 million or 5.7% of the Foundation's total asset value of \$243 million. He explained that one of the ways in which the Foundation fulfils this commitment is through implementing its Impact Investment Policy, whose value is about \$4.3 million and provided an example of how the Foundation is engaging in impact investing.

Mr. Cossette outlined the other steps that Concordia has taken in becoming a leader in sustainable investment. In February 2019, Concordia became Canada's first university to issue a sustainable bond, the proceeds of which will be used to cover Concordia's \$25.3 million share of the \$62 million invested into the new Science Hub, the new state-of-the-art scientific facility with the most cutting-edge and appropriate environments to support Concordia's research community. He added that in March 2019 Concordia was ranked Quebec's most energy-efficient campus for the 21st consecutive year, and that Concordia's leadership in the area of responsible investment is acknowledged, it being called upon to present at many investments conferences and forums.

Dr. Carr thanked Mr. Davidson as well as Messrs. Cossette and Gauthier and their team for their leadership, noting that this sets a benchmark for the behavior of a next-generation university.

14. Other business

There was no other business to bring before the Open Session.

15. Adjournment

The meeting adjourned at 4:55 p.m.



Danielle Tessier
Secretary of the Board of Governors



**BOARD OF GOVERNORS
OPEN SESSION
Meeting of March 11, 2020**

AGENDA ITEM: Requests for the use of the Concordia name

ACTION REQUIRED: For approval

SUMMARY: Associations or groups wishing to use the Concordia name must obtain the permission of the Board of Governors, as set out in the *Policy on the Use of Concordia University's Name, Logo and Related Insignia, and the Governance of its Visual Character and Digital Presence* ([SG-4](#)).

BACKGROUND: The following requests were reviewed by the Dean of Students and the Office of the Secretary-General which are recommending Board approval:

- **Arab Student Association at Concordia University**, whose objective is to educate all students about the diverse Arab culture through various events that underscore the values of integration, cooperation and embracing the beauty of diversity.
- **BRASA Concordia**, whose goals are to promote aspects of the Brazilian culture, help Brazilian students to settle down in the University environment and establish an official communication link between the CSU and Brazilian students.
- **Concordia Blockchain Club**, whose mission is to educate students about Blockchain technology and its various uses and implementations and to teach students how to develop and deploy the technology.
- **Concordia Tennis Team**, whose mission is to act as the main body for competitive tennis at Concordia and ensure its presence in the men's and women's Québec Tennis University League.
- **iGEM Concordia**, whose mandate is to promote and participate in the iGEM competition, a prestigious worldwide synthetic biology competition where teams of students from diverse fields work with mentors to build genetically engineered systems.
- **Independent Jewish Voices Concordia**, whose goal is to create an alternative Jewish space on campus not centered around the support for Israel. This space is intended to be based around values of community building and solidarity.

- **PennyDrops at Concordia**, whose objective is to send university-level mentors out into surrounding high schools to deliver their workshop-based curriculum and also to host financial literacy workshops at the University for Concordia students to attend.
- **Vietnamese Concordia Association**, whose goals are to represent the interests of Vietnamese students at Concordia University, to create knowledge-sharing events, to promote cultural awareness and goodwill and friendship between the Vietnamese students and the community at large.

DRAFT MOTION: That, subject to the conditions set out in the *Policy on the Use of Concordia University's Name, Logo and Related Insignia, and the Governance of its Visual Character and Digital Presence (SG-4)*, the Board of Governors approve the following requests to use the Concordia name:

- **Arab Student Association at Concordia University**
- **BRASA Concordia**
- **Concordia Blockchain Club**
- **Concordia Tennis Team**
- **iGEM Concordia**
- **Independent Jewish Voices Concordia**
- **PennyDrops at Concordia**
- **Vietnamese Concordia Association**

PREPARED BY:

Name: Danielle Tessier
Date: February 11, 2020



**BOARD OF GOVERNORS
OPEN SESSION
Meeting of March 11, 2020**

AGENDA ITEM: Designation of “Responsable de l’application des règles contractuelles” (RARC)

ACTION REQUIRED: For approval

SUMMARY: The Board is being asked to designate a “Responsable de l’application des règles contractuelles” as required by the *Act respecting contracting by public bodies* (LCOP).

BACKGROUND: In accordance with section 21.0.1 of LCOP, the Board must designate a person responsible to ensure the compliance of the rules relative to contracting by public bodies. The responsibilities of the RARC include overseeing the application of the measures, processes and controls relative to contracting by public bodies and acting as the University’s principal interlocutor with the Treasury Board on such matters.

A similar designation was approved by the Board in October 2015 designating the Chief Financial Officer as “Responsable de l’observation des règles contractuelles – RORC”. Following amendments to LCOP, this position is now designated as “Responsable de l’application des règles contractuelles – RARC”.

DRAFT MOTION: That the Board of Governors designate the Chief Financial Officer as “Responsable de l’application des règles contractuelles” (RARC) for Concordia University in accordance with the *Act respecting contracting by public bodies*.

PREPARED BY:

Name: Danielle Tessier
Date: January 21, 2020



**AUDIT COMMITTEE
REPORT TO THE BOARD OF GOVERNORS
Georges Paulez, Chair
March 11, 2020**

The main items discussed at the February 6, 2020 meeting of the Audit Committee are summarized as follows.

The highlights of the external audit plan for the year ended April 30, 2020 were presented by the external auditors to the Committee.

The Committee recommended Board approval of the *Policy on Employee Disclosure of Wrongdoings* (BD-16).

The Internal Auditor updated the Committee on the state of completion of the mandates included in the 2018/2019 and 2019/2020 internal audit plans.

The Committee also benefited from a presentation on the role of the Autorité des marchés publics in overseeing the application of the laws and regulations regarding public contracting in Quebec and their impact on the University's procurement processes.

In keeping with the Committee's mandate which includes monitoring areas of significant risk to the University, including, but not limited to, legal claims, pending and threatened, Me Jacobs presented a report on litigation and pending litigation. This report outlines the legal claims involving the University which could pose a material financial or reputational risk to the University.

The Committee was updated on the UNITY project and reviewed the Systems Under Development Assurance (SUDA) dashboard status report on Phase 1, which focuses on governance and project management. This report updated the findings presented at the November 25, 2019 meeting.

The project continues to be closely monitored by the external and internal professionals, and there is continued strong engagement between the various teams (Project Steering Committee, Project Management, Project Delivery) and the Integrator. The Committee remains confident that the Steering Committee as well as the operational committees are providing the necessary levels of oversight for the project. The next detailed review is scheduled for the May Audit Committee meeting.



**FINANCE COMMITTEE
REPORT TO THE BOARD OF GOVERNORS
Michael Novak, Chair
March 11, 2020**

The main items discussed at the February 17, 2020 of the Finance Committee are summarized as follows:

- On recommendation of the Real Estate Planning Committee, the Committee reviewed and recommended a major project proposal, which will be considered for Board approval during its Closed Session meeting of March 11, 2020.
- The Committee reviewed the third quarter UNITY project financial report, covering the months of November and December 2019 and January 2020. The budget continues to be closely monitored and is on track. The next financial update is scheduled to be presented at the May Finance Committee meeting.
- The Chief Financial Officer updated the Committee on the 2019/2020 budget and discussed the key considerations which will inform the budget assumptions leading to the preparation of the 2020/2021 budget. The 2020/2021 budget will be presented to the Finance Committee and the Board in May

At its meeting held on February 24, 2020, the Finance Committee reviewed and recommended a long-term borrowing proposal, which will be considered for Board approval during the Closed Session meeting of March 11, 2020.



REPORT TO THE BOARD OF GOVERNORS

GRAHAM CARR
PRESIDENT AND VICE-CHANCELLOR

MARCH 2020



INTRODUCTION

Our community mourned the death of a great champion of Concordia, Chancellor Emeritus **L. Jacques Ménard**, BComm 67, who passed away on February 4th. Jacques supported Concordia for decades, offering visionary leadership. He joined our Board of Governors in 1994 and played a crucial role in the university's Campaign for a New Millennium. He was appointed deputy chancellor in 2009 and served as our chancellor from 2010 to 2014. Jacques was president of BMO Financial Group until recently, and was a supporter of institutions that promote education, well-being and cultural enrichment. He was a member of the Order of Canada, a Grand Officer of the National Order of Quebec and a Commander of the Order of Montreal. Concordia recognized his achievements with an Award of Distinction from the John Molson School of Business in 1993, the Loyola Medal in 1999 and an honorary doctorate in 2006.

Concordia announced two exciting next-generation initiatives. Our **District 3 Innovation Center (D3)** launched **Global X**, securing 30 foreign partners in 20 different markets to support more than 100 startups as they expand globally. The initiative offers startups personalized services and programs, as well as the chance to engage with the global Concordia alumni community of successful entrepreneurs, investors and venture capitalists. As part of Global X, D3 established New York City (NYC) District, which serves as a gateway to the U.S. market. To make this a reality, D3 has partnered with **Ellis Accelerator**, which supports international startups by providing mentorship, funding, housing, community links and training. The initiative is spearheaded by **Gisleine Silveira**, former head of international partnerships for D3, who is now on the ground in New York to help D3 startups navigate and access talent, set up business and connect with potential investors and clients.

The **Centre for Innovation in Construction and Infrastructure Engineering and Management (CICIEM)** at the Gina Cody School of Engineering and Computer Science will use our critical mass of civil infrastructure expertise to promote innovative research for knowledge-based solutions. It will improve quality, productivity, safety and competitiveness of the Canadian construction industry through: automation and robotics in construction; sensing technologies and internet of things; big data analytics and data science applications; industrialization of construction; reliability analysis, condition assessment and rating of infrastructure. The CICIEM is working with an advisory board comprised of executives from Hydro-Québec, Canam Group, Hatch and SNC-Lavalin. The centre's inaugural director is **Osama Moselhi**, professor in the Department of Building, Civil and Environmental Engineering.

TEACHING, RESEARCH, INNOVATION

Two Concordians received top honours at Canada's Outstanding CEO of the Year award gala on February 12th in Toronto. **Lino Saputo Jr.**, BA 89, was named 2019 Outstanding CEO of the Year — an award that recognizes executives in Canadian business who exemplify integrity, insist upon

excellence, earn the trust of others and have built a globally competitive organization. Concordia MBA candidate **Amanda Rushton** won a Futures Fund Scholarship for Outstanding Leadership. The award includes a \$7,500 grant and recognizes students who demonstrate exceptional leadership in their academic and extra-curricular initiatives.

Concordia's **Concrete Toboggan Team** enjoyed its best showing yet at the **Great Northern Concrete Toboggan Race**. Concordia placed second overall out of 21 teams at the largest and longest annual engineering competition in Canada, which took place this year in Toronto from January 29th to February 2nd. The 30-student group also placed first in Best Team Spirit.

From January 25th to 26th, the fifth edition of the **Concordia Hackathon** welcomed 800 participants. Competitors, from high schools and CEGEPs in Montreal, and universities from across Quebec and Ontario, spent 24 hours drawing on their computer programming and software development skills in the hopes of impressing judges and sponsors. Groups worked together on projects that included robotic tools, websites, mobile and web applications, video games and virtual-reality applications. **Andy Ta**, a recent graduate from Concordia's Gina Cody School of Engineering and Computer Science, and his team's project BookLens (reading enhancement technology) was the grand prize winner.

More than 4,500 visitors took part in Concordia's **Open House** on Saturday, February 15th. Admissions officers and academic advisors were on hand to consult one-on-one with future students. Most attendees live within driving distance, including a significant number of guests from Ontario and the United States. Charter buses offering a free ride from Ottawa/Gatineau and Quebec City were both full. An increasing number of Open House guests are making the trip to Montreal from much further afield, including countries like Ecuador and Turkey. Throughout the day, recruiters messaged with more than 100 prospective students from around the world on social media. Future Concordians who couldn't attend Open House also got the chance to get their questions answered during live Facebook and Instagram videos, with the Facebook stream reaching some 1,800 viewers. Additionally, recruiters interacted with prospective students as part of an "Ask Me Anything" feature on Reddit.

The **Black Perspectives Initiative** (BPI) launched at the Faculty of Arts and Science. This new hub offers funding, mentorship, programming and research dissemination, with the purpose of connecting activities related to Black perspectives, initiatives and scholarship on campus and within the broader Montreal community. The BPI began as a pilot project through Critical Feminist Activism and Research at the Simone de Beauvoir Institute. The initiative's founding director is **Annick Maugile Flavien**, BSc 13, GrDip 15, MA 18.

On February 18th, the Gina Cody School of Engineering and Computer Science hosted a workshop for faculty members entitled "**Strategies on Decolonizing the Engineering/Computer Science Curriculum.**" Presenters included faculty member **Kasim Ali Tirmizey**, who is one of the professors leading the effort to decolonize the curriculum at the Gina Cody School and **Donna Kahérakwas**

Goodleaf, director of decolonizing curriculum and pedagogy for Concordia's Centre for Teaching and Learning. Their workshop focused on Kasim's course Impact of Technology on Society (ENGR 392) and talked about how they re-conceptualized his course by deconstructing the syllabus and realigning it by meaningfully integrating Indigenous perspectives and worldviews.

The 39th annual **John Molson MBA International Case Competition** was held from January 6th to 10th. It is the longest running and largest competition of its kind. Thirty-six teams of four MBA students each presented their solutions to business cases in front of some 300 judges representing the business community. The first-place winner this year was the University of Cape Town.

The **John Molson Undergraduate Case Competition** ran from February 23rd to 29th. Twenty-eight of the best business schools from around the world gathered in Montreal to exercise their skills and help solve problems for local businesses. This year, the competition featured five different cases and required participants to come up with a unique solution for each one.

The **Engineering and Commerce Case Competition** was held from February 18th to February 22nd. Bringing together teams from 16 internationally recognized academic institutions, consisting of engineering and commerce students, the competition aims to foster inter-disciplinary communication and collaboration before students start their professional careers. Each delegation competes in three cases that combine the technical field of engineering with the interactive field of commerce.

Concordia's Winterfest 2020 took place from January 24th to February 14th. The annual pedagogical panel discussion series is open to all Concordia faculty. This year's theme, Leadership and Learning: Ready, Steady, Teach for Tomorrow, delved into innovation in academia. Participants heard from faculty who have reflected on opportunities, strategies and methods of innovating and who have put them into practice. They also heard from those who've contributed to furthering the development of teaching and pedagogy in their departments and faculties.

Concordia hosted the **Canadian Roots Exchange National Gathering** from February 22nd to 24th. Founded in 2008, the exchange promotes dialogue between Indigenous and non-Indigenous youth across the country through workshops, conferences and exchanges. The organization's stated goal is to achieve reconciliation, bridge the inequality gap and bring Indigenous teachings back into the everyday culture of Canadians. The documentary *nîpawistamâsowin: We Will Stand*, concerning the Colten Boushie case and its aftermath, was screened on February 22nd as part of the event. Concordia's Office of Community Engagement was integral to bringing the exchange to Montreal for the first time.

The **Concordia Presidents Speaker Series on Digital Futures** started on December 2nd, 2019 and ended on March 9th. The second edition of this speaker series brought together experts from the gaming, academic and public sectors who shared their insights on our evolving digital reality. This

year's speakers included **Olivier Palmieri**, Director of L'Atelier XR, Ubisoft Montréal; **Rajiv Jhangiani**, Associate Vice-Provost, Open Education Kwantlen Polytechnic University; **Éric Caire**, Quebec Minister for Government Digital Transformation and **Teresa Scassa**, Canada Research Chair in Information Law and Policy, University of Ottawa.

Concordia University Television (CUTV) celebrated its **50th anniversary** with a gala on January 9th. About 75 guests, including alumni and current members, joined to partake in an evening that included viewings of film from the CUTV archives.

Until April 3rd, 4th SPACE is hosting **Take-off/Touch-Down**, which invites the university community, external collaborators and the public to explore the contemporary realities, challenges, and advancements of aerospace, aviation, and space.

On February 21st, the **PERFORM Centre** joined forces with the **McConnell Brain Imaging Center** to host a joint **BIC-PERFORM Scientific Retreat**. Some 24 researchers from both institutions participated in the day-long event of talks and workshops. The BIC and PERFORM also launched four joint calls for research proposals to initiate interdisciplinary research collaborations that will generate preliminary data to advance preventive health research.

On December 6th, the **Machines Agencies group** at **Milieux** hosted a one-day special invitational workshop to develop a vision for a commons-based approach to the future of AI. This workshop was supported by SSHRC, the Center for the Study of Democratic Citizenship and Milieux.

GradProSkills set a record in fall 2019, marking its largest term with 189 workshops taken by 3,592 graduate students and postdoctoral fellows. The top five workshops were: Get Started Coding with Python; Effective Researching Strategies; Fund Writing Strategies; Professional Emails; and Grammar for Graduate Students. The growth in registrations can be attributed to greater outreach to the Concordia community, which includes presenting at departmental orientations for new students, visits to departmental meetings to speak with faculty, and participation in Concordia-wide events, among other communication strategies.

SERVICES SECTOR

Cyber awareness training was launched for faculty and staff in February. The 20-minute session is accessible through the MyConcordia Portal. The course is intended to help people assess their knowledge level and fill in the blanks on issues like data breaches, hacks and ransomware attacks.

As a preventive measure, a **committee was created** with regards to **Coronavirus (COVID-19)**. It meets regularly to ensure protocols and processes are in place should the university need to react to a potential case within the community.

Substantial completion of the **Applied Science Hub** is anticipated for the end of March 2020. All data, cabling and AV installations have begun with furniture deliveries planned for the end of March 2020. Coordination and installation of lab equipment has also begun. Organization of the move is underway with users expected to come in between April and June 2020. The building is on track to obtain LEED gold certification.

Construction of **The Learning Square** was completed as planned in December 2019. Classes began to be held in the space in January 2020.

Following a presentation to the Board, a plan to **renovate the 4th and 6th floors of the Hall Building** was revised. Rather than executing partial work on both floors at the same time, the entire 6th floor will be renovated followed a year later by the renovation of the entire 4th floor.

UNIVERSITY ADVANCEMENT

The **J.W. McConnell Family Foundation** made a gift of **\$600,000** towards the McConnell Foundation Fund for the Institute for Investigative Journalism.

The **Doggone Foundation** made a new gift of **\$300,000** towards the Doggone Foundation Fine Arts Internship Program for the Elspeth McConnell Fine Arts Award. This is a three-year renewal of the awards, which provide funding for fine arts students to undertake internships in non-profit organizations, artist-run centres and theatre companies, among others.

Electronic Arts Inc. made a gift-in-kind of equipment towards Concordia's Department of Music. The Avid S6 Board, a mixing board for sound engineers, is valued at **\$144,000**.

Honorary chair of the Campaign for Concordia, **André R. Desmarais**, BComm 78, LLD 07, made a gift of **\$100,000** towards the André R. Desmarais Undesignated Fund.

Gaston Lamontagne made a gift of **\$100,000** towards the Campaign for Concordia.

A new pledge from **Manulife Investment Management Limited** of **\$100,000** will support the Concordia Canadian Equity Student Fund at the John Molson School of Business (JMSB).

Two donors, who wish to remain anonymous, each made a gift of **\$75,000** towards Concordia's Greatest Needs.

De Grandpré Chait S.E.N.C.R.L. made a pledge of **\$75,000** towards the De Grandpré Chait Speaker Series in Real Estate at JMSB.

The **Naim S. Mahlab Foundation** made a gift of **\$70,000** in support of the Naim Mahlab Fellowships Endowment in the Faculty of Arts and Science.

The **Ajram Family Foundation** will help advance the Adopt-A-Student Scholarships Fund with a gift of **\$32,468**.

A new pledge from **Modern Niagara Group Inc.** of **\$52,000** at Concordia's Gina Cody School of Engineering and Computer Science (GCS) will support the Modern Niagara Scholarship in Engineering.

Concordia created a **Memorial Scholarship Fund for Iranian Students** to commemorate those who died in the crash of Flight 752 over Tehran, Iran, on January 8th. Two of the university's recent graduates — **Siavash Ghafouri-Azar**, MAsc 19, and **Sara Mamani**, MAsc 18 — had just wed in Iran and were on their way home to Canada. **Gina Cody**, MEng 81, PhD 89, gave **\$50,000** to support the Memorial Scholarship Fund for Iranian Students — and a further **\$25,000** has already been raised to create a \$75,000 baseline for this initiative.

Peter Kruyt, BComm 78, made a gift of **\$50,000** towards the Peter Kruyt Undesignated Fund.

The **Knowledge First Foundation** made a gift of **\$45,000** in support of the Knowledge First Foundation Excellence Scholarship for students at GCS.

Mark W. Jacobson, BA 71, made a new pledge of **\$32,000** in support of Concordia's John Molson School of Business.

Anna Giampà, MBA 03, GrDip 09, made a gift of **\$30,000** towards the Anna Giampà and Matteo Fiorilli Endowment at JMSB.

A pledge from **Forstrong Global Asset Management Inc.** of **\$30,000** will support JMSB students through the Forstrong Global Asset Management Endowment.

Audrey Peppin made a gift of **\$25,165** towards the A. Frank Knowles Endowment at JMSB.

A donor, who wishes to remain anonymous, renewed a **\$25,000** pledge in support of a graduate scholarship in psychology.

A new pledge from **Ross R. Bayus**, BA 79, of **\$25,000** will support graduate students in the Faculty of Arts and Science.

Marcel Eléfant, BComm 60, made a gift of **\$25,000** to support the Friends of Concordia Men's Basketball.

Richard Joly, EMBA 98, made a gift of **\$25,000** towards the Richard Joly MBA Scholarship for Indigenous Students at JMSB.

Jones Lang Lasalle Real Estate made a pledge of **\$25,000** in support of next-gen initiatives at JMSB.

Alumni and donor engagement:

About 70 people attended the second edition of the **George Lengvari Cup** on February 15th at the university's John Dore Court. The annual basketball rivalry between the Concordia Stingers and McGill University honours George Lengvari, a Concordia alumnus who played basketball for both institutions, and a longtime benefactor of both basketball programs. The game was followed by a reception and cocktail dînatore in the Loyola Chapel. A new award of **\$25,000** toward men's basketball was announced on the occasion.

On November 28, **Samantha Nutt**, founder of War Child Canada and War Child USA, became the 22nd recipient of the Loyola Medal — one Concordia's most important honours. Introduced in 1963 by the Loyola Alumni Association to salute notable Canadians, Loyola Medal recipients have since shared a decisive quality: a commitment to the advancement of humankind.

Alumni Career Services hosted webinars for alumni looking to improve or polish their skillsets. Recent webinars were hosted by **Dawn Williams**, BComm 05, president and sales recruiter at Sirius Personnel; **Murielle Swift**, BSc 01, human resources advisor at the Public Service Commission of Canada; **Priscilla Jabouin**, MA 08, career coach and counselor; and **Martin Rouleau**, BComm 94, real estate broker at Engel & Völkers.

Concordia Alumni hosted its first Montreal Lunar New Year networking reception for the Asian Alumni Network on January 27th.

Publications:

University Advancement published the winter edition of *Concordia University Magazine*, with feature stories on the new SHIFT Centre for Social Transformation, research into solutions for climate change, and cybersecurity.



**BOARD OF GOVERNORS
OPEN SESSION
Meeting of March 11, 2020**

AGENDA ITEM: Report on compliance with environmental legislation and health and safety (EH&S) regulations

ACTION REQUIRED: For information

SUMMARY: This report is provided to members of the Board of Governors on a quarterly basis to apprise them of matters concerning EH&S at Concordia and to allow them to ask questions.

PREPARED BY:

Name: Danielle Tessier
Date: March 2, 2020



Report on Due Diligence for Concordia University Board of Governors

Reporting Period
2019 Q4
(October, November, December)
&
2019 Full Year

Pietro Gasparini, C.I.H.
Director, Environmental Health & Safety
February 25, 2019

Environmental Health & Safety (**EHS**) supports the academic, research and operational activities of the University and promotes a safe, healthy and sustainable campus environment. EHS manages and coordinates programs and services that minimize health, safety, environmental and regulatory risks. It also monitors compliance with federal and provincial health and safety legislation and internal university policies. We identify and evaluate risks, develop control strategies and implement appropriate internal procedures.

Section A presents the university's Leading Safety Key Performance Indicators (KPIs) which measure safety performance and help reflect the safety culture within the University. **Section B** presents the traditional Lagging Safety KPIs which are retrospective and which now include four incident/injury rates.

2019 Summary

In 2019, the majority of the university's key performance indicators for safety were trending in a positive direction.

The following is a short summary of the 2019 Leading Safety Key Performance Indicators:

- 304 safety and security training sessions
- 2868 participants of safety and security training
- 104 preventative internal Inspections & assessments
- 131% increase in internal non-compliance citations (compared to 2018)
- 11% increase in the number of EHS Research Safety Compliance Reviews (compared to 2018)

The Leading Safety KPIs listed above are indicative of the efforts by EHS with regards to prevention activities. Dedicating resources to prevention is essential to ensure that the University is meeting its obligations to identify and control risks in the workplace.

The following is a short summary of the 2019 Traditional (Lagging) Safety Key Performance Indicators, compared to 2018:

- 27% decrease in total injuries
- 22% decrease in work-related injuries
- No change in the number of accepted worker's compensation claims
- 14% decrease in Lost-Time Day

Most impressive in the Traditional Safety KPIs is the fact that the improvements occurred while the university community has been growing steadily over the course of the last 5 years. In 2019-20 there were 9989 employees (all categories) and 50,654 students (all categories) – an increase of 9% and 15% respectively when compared to the 2015-16 academic year¹.

2019 saw a 66% decrease in external regulatory inspections. Although the number of external regulator inspections decreased significantly, the 2018 initiative by the CNESST to verify the university's compliance with machine safety and guarding regulations continued to consume a significant amount of the EHS staff's time in 2019. EHS staff provided support to supervisors mandated to correct the non-compliance citations resulting from the inspections and ensured that all corrections were executed in

¹ Data provided by Office of Institutional Planning & Analysis

the timeframe specified by the inspector. A single external regulatory inspection can have a significant impact on the unit. When they occur, EHS resources are immediately shifted to ensure that the university is diligent in meeting its regulatory obligations.

Environmental Health & Safety

The Environmental Health & Safety Office is part of the university's commitment to safety. Given its role, this report highlights a large portion of the work done by EHS, however it does not capture all the unit's activities.

Over recent years, there has been a significant increase in the level of activity of EHS. Aside from new safety programs, many existing programs underwent comprehensive reviews and EHS assumed responsibility for several new areas of activity. Changes in provincial and federal legislation also require continuous updating of safety programs. All the while, we continue to invest time and resources in safety promotion and prevention activities.

The following are the recently established safety programs and new areas of activity:

- 3D Printers (2016)
- Animals on Campus/Emotional Support Animals/Pet Therapy (2016)
- Confined Space Entry Program (2017)
- Control of Hazardous Energy (2017)
- Controlled Goods Program (2014)
- Drones - Unmanned aerial vehicles (2017)
- Establishment of the Safety Champions Awards (2015)
- Hearing Conservation Program (2014)
- New and Expectant Mother Risk Assessment (2017)
- Occupational Health Program (2016)
- Respiratory Protection Program (2015)
- Safety poster campaigns (2015 and 2017)
- Smoke-Free Environment Policy (2015)
- Worker's Compensations Claims Management (2019)
- Working at Heights (2018)

The growth of new activity occurred in parallel with an increase in demand of existing safety programs due to the increase in research activity over the last 5 years, as well as the expansion of the university's real estate holdings. One indicator of the increased research activity is in the number of individuals who take safety training and the volume of hazardous waste collected and disposed. Safety training uptake has increased steady annually, more than doubling from 1124 individuals trained in 2014 to 2314 in 2019. In 2018, EHS disposed of nearly 50 tons of hazardous wastes coming from the laboratories, a significant increase from the 30 tons in 2014. Research involving biological materials has also been increasing, as indicated by the number of internal biohazardous permits, from 19 in 2014 to 37 in 2019. Lasers are also much more prominent on our campuses than before, with an estimated 120 Class 3 and 4 lasers in 2019 versus 80 in 2014 (Laser Safety Program, including Internal Permit System is currently in development). The new Department of Chemicals and Materials Engineering has also already resulted in an increase in demand for our services and the upcoming opening of the Applied Science Hub will do the same.

2020 Outlook

As the Applied Science Hub prepares to welcome its new occupants and as the University’s research portfolio continues to grow, we are anticipating a continued increase in demand for services. In addition, we will continue to expand and update existing safety programs. Electrical safety, asbestos management, construction and renovation project review, laser safety, temporary reassignment/return to work, and contractor management are areas that will require increased attention. We also anticipate an increase in workload related to construction, renovation and property management projects.

In the fall of 2019, EHS assumed responsibility of worker’s compensation claims management and hired an Occupational Health and Worker’s Compensation Coordinator. Developing the university’s return to work program will be a focus in 2020, with a potential for a reduction in the number of lost time days in 2020 and beyond.



Pietro Gasparrini, C.I.H.
Director, Environmental Health & Safety

Section A: Leading Safety Key Performance Indicators

1. Safety & Security Training

This key performance indicator includes training provided by Environmental Health and Safety and Security, given both contribute positively to the university’s safety performance and culture.

In 2019, the Safety Training key performance indicator was amended to include training provided by the Security Department, which includes topics such as Emergency Management and First Aid. EHS and Security work together on many programs and share a common objective – ensuring that Concordians are properly trained, be it to work safely with radioactive materials or to know how to react in the event of an emergency. The revised KPI now allows us to showcase the prevention work of both departments.

For the period of October 1 to December 31, 2019, **65** safety and security training sessions took place with **648** participants. In the Q3 2019 report, a portion of 2018 security training data was unintentionally omitted; the data presented below includes all 2018 security training allowing for a fair comparison between 2018 and 2019.

	2018 Q4 <i>Oct., Nov., Dec.</i>	2018 <i>Full Year</i>	2019 Q4 <i>Oct., Nov., Dec.</i>	2019 <i>Full Year</i>
Total Safety Training Sessions	52	264	65	304
Total Participants	499	2676	648	2686

Comparing the fourth quarters of 2018 and 2019, there was a 20% increase in the number of training sessions and a 30% increase in the number individuals trained. Overall, the total number of participants

trained in 2019 was on par with 2018, however there was an increase in the number of training sessions provided.

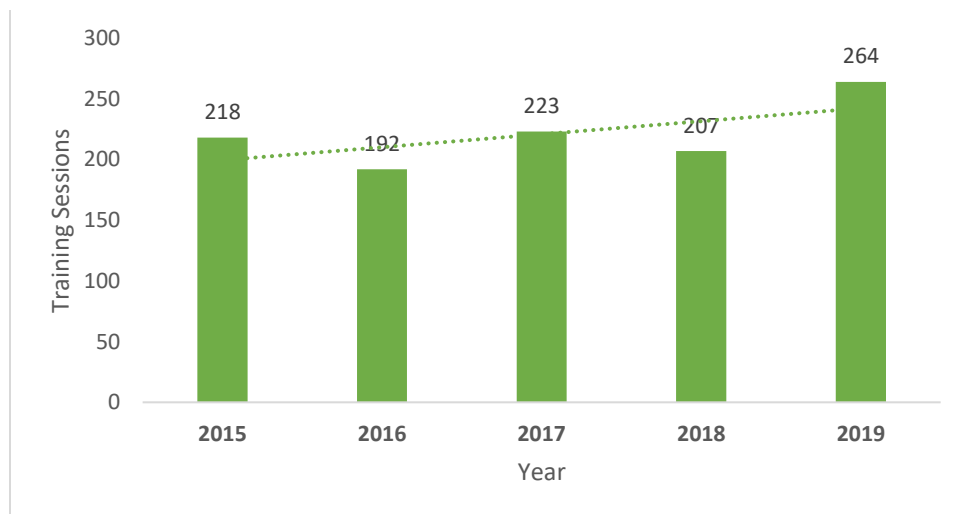
Currently only Environmental Health & Safety provides on-line training and it continues to account for a significant portion of the training provided. In 2019, 21% of safety training (18% of all training) was delivered on-line, which is comparable to 2018, when 19% of safety training (16% of all training) was delivered on-line.

Given that only the 2018 and 2019 security training data has integrated in the EHS Safety & Compliance Training database, 5-year trend data is unavailable. However, 2 year data is available and is included in the table below.

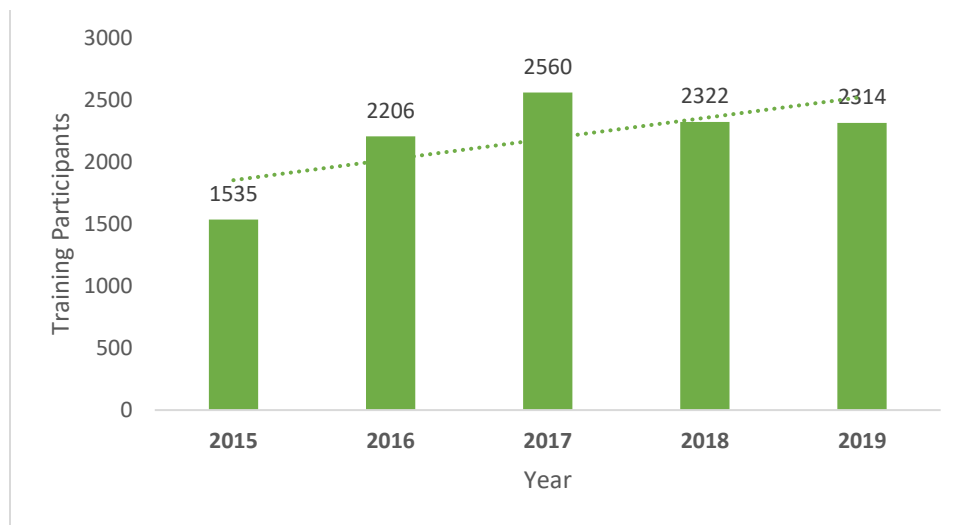
	2018 <i>Full Year</i>	2019 <i>Full year</i>
EHS Sessions	207	264
Security Sessions*	57	40
Total Training Sessions	264	304
EHS Participants	2322	2314
Security Participants	354	372
Total Participants	2676	2686

Graph 1 and 2 presents 5-year data for safety training only. Over the last 5 years, the trend in the number of safety training sessions is increasing, as is the trend in the number of individuals trained.

Graph 1: Total Number of Safety Training Sessions per Year



Graph 2: Total Number of Individuals Trained per Year



2. Injury & Near-Miss Investigations

Depending on the circumstances surrounding a reported injury or near-miss, EHS staff will conduct a formal investigation in partnership with supervisors. Investigations are conducted in order to: determine the root causes of injuries and near-misses, prevent similar occurrences in the future, determine compliance with applicable safety regulations, and collect information for workers' compensation claims (if applicable). In some instances, injury and near-miss investigations result in the identification of corrective actions that can prevent injury and near-miss reoccurrence (see Section 5).

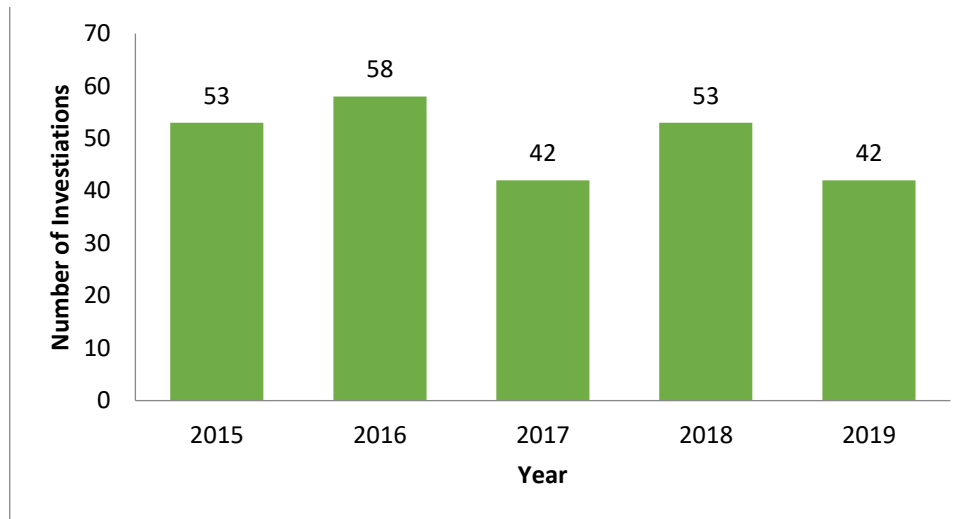
For the period of October 1 to December 31, 2019, EHS conducted **2** injury investigations and **3** near-miss investigations, bringing the 2019 totals to **29** injury investigations and **13** near-miss investigations.

	2018 Q4 <i>Oct., Nov., Dec.</i>	2018 <i>Full Year</i>	2019 Q4 <i>Oct., Nov., Dec.</i>	2019 <i>Year To Date</i>
Injury Investigations	11	42	2	29
Near-Miss Investigations	2	11	3	13
TOTAL Investigations	13	53	5	42

Compared to 2018, in 2019 there was a 31% decrease in the number of injury investigations but an 18% increase in the number of near-miss investigations (see Section 11). This decrease is not a surprise since there was a 22% decrease in the number of work-related injuries (see Section 8) and 27% decrease in the total number of injuries (see Section 7) in the same year.

The 5-year average number of Injury & Near-Miss Investigations per year is 50. The number of investigations is dependant on the number of injuries and near-misses.

Graph 3: Total Number of Injury & Near-Miss Investigations per Year



3. Preventative Internal Inspections & Assessments

Preventative internal inspections and assessments (total number) refer to workplace inspections and risk assessments conducted by, or in collaboration with, EHS staff on university premises.

Workplace inspections involve a walkthrough of a workplace (e.g. research laboratory, studio, workshop, mechanical room) to determine the degree of compliance with both government regulations and internal policies and procedures. Inspections result in internal non-compliance citations (Section 4) and require corrective actions (Section 5).

Workplace risk assessments are a more thorough evaluation of the workplace with the objective to identify all hazards and to determine if the hazards can be eliminated. If elimination of the hazard is not possible, the risk assessment determines if the hazard is adequately controlled.

Workplace inspections are conducted on a more routine basis (annually or bi-annually), whereas risk assessments, which take more time, are conducted once and repeated when there is a major change in the level or area of activity in the workplace.

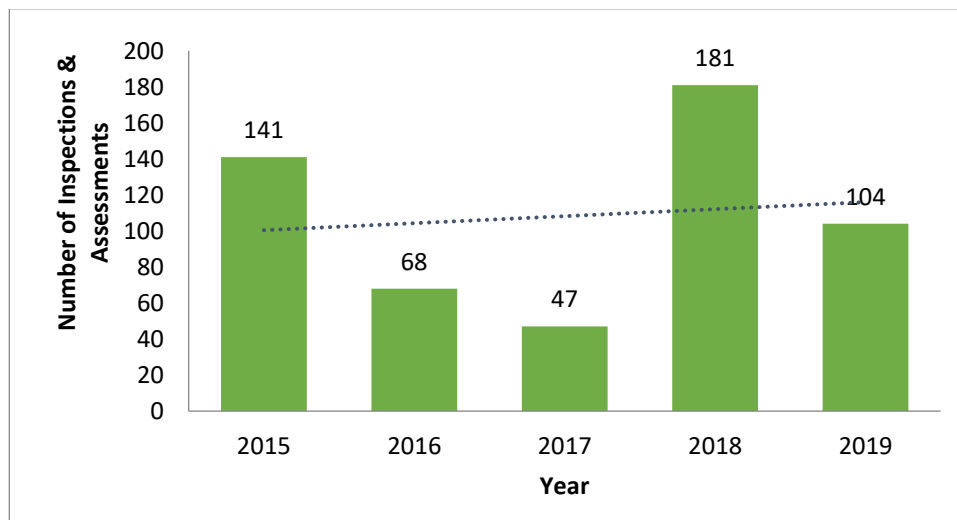
Workplace inspections and risk assessments are complimentary and together form an integral part of the University's comprehensive health and safety program. Both serve as a mechanism to determine compliance with government regulations and internal policies and procedures.

For the period of October 1 to December 31, 2019, EHS conducted **37** preventative internal inspections and assessments.

Year	Preventative Internal Inspections & Assessments
2018 Q4 <i>Oct., Nov., Dec.</i>	98
2018 <i>Full Year</i>	181
2019 Q4 <i>Oct., Nov., Dec.</i>	37
2019 <i>Full Year</i>	104

Although the total number of preventative internal inspections and assessments in 2019 was less than 2018, it is not cause for concern. Preventative internal inspections & assessments allow the University to identify hazards and non-compliance issues and then put in place controls to mitigate those hazards or take actions to correct the non-compliance. In so doing, the University is continuously becoming safer. In the last 2 years, EHS undertook two large workplace risk assessment projects: roof safety and elevator mechanical room machine safety. The 5-year trend in the number of preventative internal inspections and assessments per year is increasing, with the 5-year average number of preventative internal inspections and assessments per year having increased to 108. The number of preventative internal inspections and assessments will fluctuate annually and is dependent on the availability of Environmental Health & Safety staff. The challenge has been ensuring that the corrective actions identified during both inspections and assessments are addressed in a timely manner (See Section 5 Corrective Action Completion Rate).

Graph 4: Total Number of Preventative Internal Inspections & Assessments per Year



4. Internal Non-Compliance Citations

EHS is mandated to monitor compliance with both government regulations and internal safety policies and procedures. Compliance monitoring allows us to ensure the safety and well-being of the

university community and to mitigate external non-compliance citations.

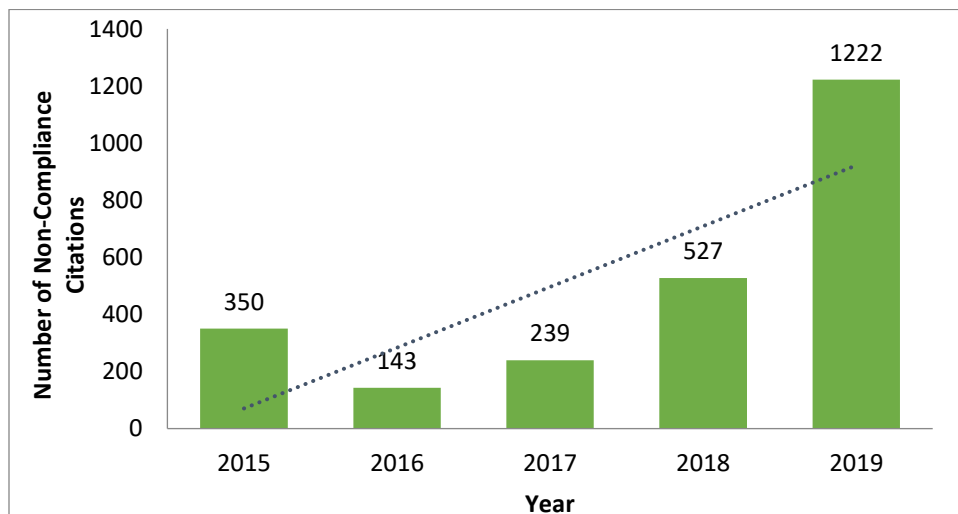
The majority of internal non-compliance citations result from preventative internal inspections and assessments, as well as injury and near-miss investigations. Identification of non-compliance issues and their subsequent correction improves the overall safety performance of the University prior to the intervention of regulatory bodies. Often, a single internal workplace inspection or injury investigation can generate several non-compliance citations.

For the period of October 1 to December 31, 2019, **357** internal non-compliance citations were assigned, bringing the 2019 total to **1222**, a 131% increase compared to 2018.

Year	Internal Non-Compliance Citations
2018 Q4 <i>Oct., Nov., Dec.</i>	163
2018 <i>Full Year</i>	527
2019 Q4 <i>Oct., Nov., Dec.</i>	357
2019 <i>Year To Date</i>	1222

As stated in Section 3: Preventative Internal Inspections and Assessments, in the last 2 years EHS undertook two large workplace risk assessment projects: roof safety and elevator mechanical room machine safety. These two projects alone account for 796 internal non-compliance citations. This was expected given EHS was conducting risk assessments in areas of the University that have not been subject to comprehensive risk assessments in the past. The 5-year annual average number of Internal Non-Compliance Citations is 496. As illustrated in Graph 5, although the total number of Internal Non-Compliance Citations fluctuates annually, the 5-year trend is increasing.

Graph 5: Total Number of Internal Non-Compliance Citations per Year



5. Corrective Action Completion Rate

Corrective Actions are assigned as the result of an intervention by EHS, including injury investigations and internal inspections. When non-compliance issues are identified, corrective actions are generally required. Corrective Actions are assigned to the supervisor responsible for the area where the citation occurred or for the individuals involved.

All safety and regulatory non-compliance citations (internal and external) must be resolved in a timely manner. External non-compliance citations from regulatory or government bodies received during external inspections (Section 12) are accompanied by obligatory corrective actions and imposed deadlines. Internal Non-Compliance Citations (Section 4) are also accompanied by obligatory corrective actions and targeted deadlines. This metric tracks the percentage of assigned corrective actions that are completed. EHS tracks this metric by calendar year until all actions are completed.

2014

As of December 31, 2019, **99%** (137) of Corrective Actions assigned in **2014** (138) were completed with the remaining corrective action in progress.

Year	Corrective Action Completion Rate
2014	99%

2015

As of December 31, 2019, **99.6%** (448) of Corrective Actions assigned in **2015** (450) were completed, 0.4% (2) are currently in progress.

Year	Corrective Action Completion Rate
2015	99.6%

2016

As of December 31, 2019, **98%** (213) of Corrective Actions assigned in **2016** (217) were completed, 1.5% (3) are currently in progress and 1 (0.5%) has not yet begun.

Year	Corrective Action Completion Rate
2016	98%

2017

As of December 31, 2019, **97%** (356) of Corrective Actions assigned in **2017** (369) were completed, 2%

(8) are currently in progress and 1% (5) have not yet begun. Over the course of 2019, the Corrective Action Completion Rate for 2017 went from 92% to 97%.

Year	Corrective Action Completion Rate
2017	97%

2018

As of December 31, 2019, **68%** (510) of Corrective Actions assigned in **2018** (755) were completed, 7% (56) are currently in progress and 25% (189) have yet to begin. Over the course of 2019, the Corrective Action Completion Rate for 2018 went from 55% to 68%.

Year	Corrective Action Completion Rate
2018	68%

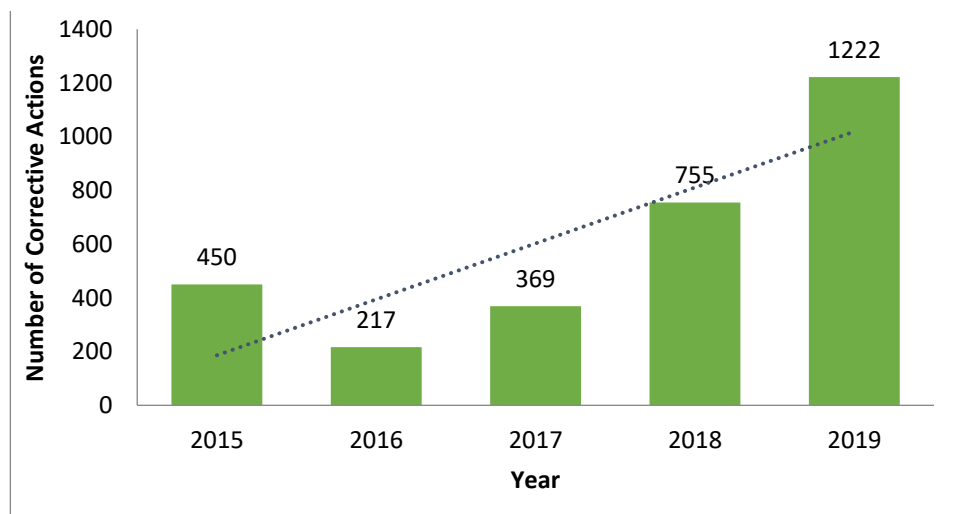
2019

As of December 31, 2019, **35%** (426) of Corrective Actions assigned in **2019** (1222) were completed, 3% (37) are currently in progress and 72% (759) have yet to begin.

Year	Corrective Action Completion Rate
2019	35%

In 2019, there were a total of **1222** corrective actions assigned, the largest amount in a year since tracking began in 2014.

Graph 6: Total Number of Corrective Action per Year



The increase in Corrective Actions is directly related to the increase in the number of Preventative Internal Inspections and Assessments. One of the triggers for EHS targeting areas such as mechanical rooms and roof is changes in safety regulations. The high number of internal non-compliance citations and subsequently, the high number of corrective actions that resulted from our initiative was due in large part to the age of some university buildings. Now that these corrective actions have been identified, the challenge remains to ensure that they are addressed in a timely manner. In many instances, specifically with building roofs, permanent solutions will only be implemented when the roofs are redone. In the meantime, EHS will work with all stakeholders to put in place safe work procedures that will ensure the safety of any employee required to access these areas.

6. EHS Research Compliance Reviews

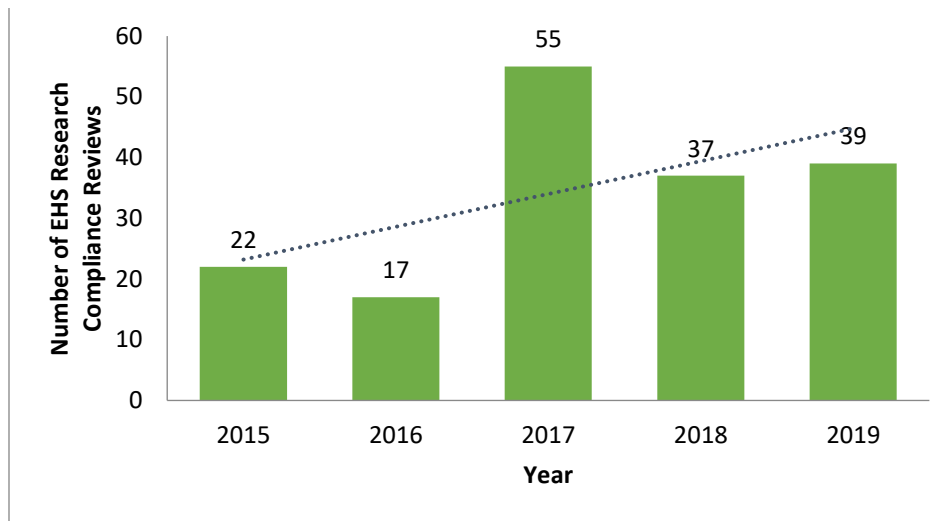
In collaboration with the Office of Research, EHS reviews research and teaching activities that involve hazardous materials, in order to ensure compliance with applicable government regulations and internal policies and procedures.

For the period of January 1 to December 31, 2019, there were 41 EHS Research Compliance Reviews, of which 4 were from Q4 (October 1 to December 31, 2019). The number of compliance reviews in 2019 was 5% higher than in 2018.

Year	EHS Research Compliance Reviews
2018 Q4 <i>Oct., Nov., Dec.</i>	5
2018 <i>Full Year</i>	37
2019 Q4 <i>Oct., Nov., Dec.</i>	4
2019 <i>Full Year</i>	39

The 5-year average number of EHS Research Compliance Reviews per year is 34 and the overall 5-year trend is increasing.

Graph 7: Total Number of EHS Research Compliance Reviews per Year



Section 2: Traditional (Lagging) Safety Key Performance Indicators

7. Total Injuries

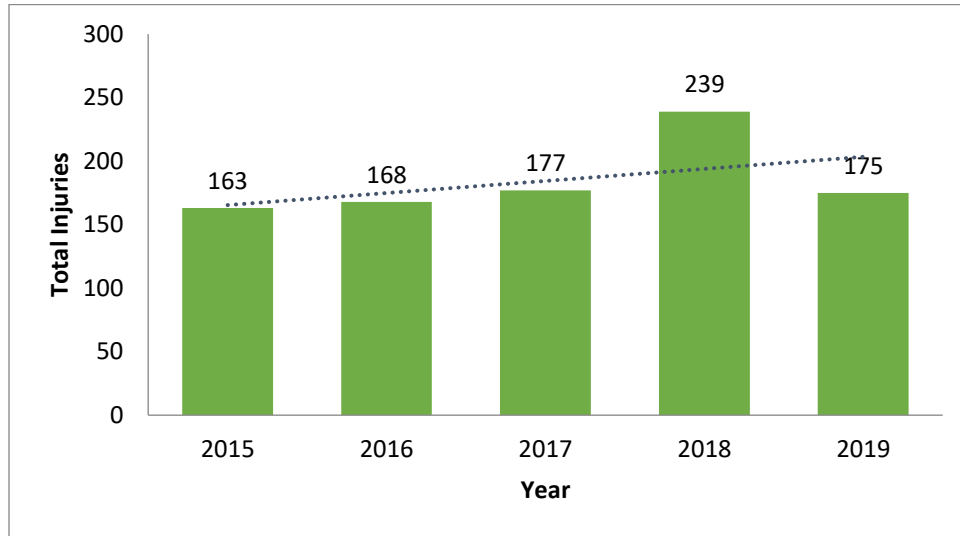
An injury refers to the occurrence of a sudden and unforeseen event arising out of, or in the course of, a university-sanctioned activity attributable to any factor that caused an injury or an occupational disease (an exposure to conditions or substances that resulted in a disease). Injuries are grouped as work-related (involving staff and faculty), student or visitor/contractor.

For the period of October 1 to December 31, 2019, **33 injuries** were reported, bringing the 2019 total to **175**. A 27% decrease in total injuries was seen in 2019 when compared to 2018.

Year	Total Injuries
2018 Q4 <i>Oct., Nov., Dec.</i>	61
2018 <i>Full Year</i>	239
2019 Q4 <i>Oct., Nov., Dec.</i>	33
2019 <i>Full Year</i>	175

The 5-year average number of total injuries per year is 184 and the 5-year trend is increasing. Although the total number of injuries is an indicator of safety on campus, it does not take into account the size of the university community or its activities. As the university doubles its research and the size of the community increases, an increasing trend in injuries would be understandable. The use of injury rates, like the Recordable Injury Rate (Section 8) and Severity Rate (Section 10) are indicators that are more useful given that they are presented as rates per 100 employees.

Graph 8: Total Injuries per Year



Sports Injuries Included in Total Injuries

Sports Injuries are a sub-set of Total Injuries. Currently the Sports Injuries that are reported to the University via the Injury/Near-Miss Report Form are those injuries (trauma) or illnesses (repetitive stress) suffered by a Member (staff/student) or Non-Member (visitor) of the university community. These injuries occur during the course of a voluntary activity (personal time), either participating in team or individual sport activities or personal physical conditioning, on Concordia property. Whenever external medical attention is required to treat the injury, the Security Department calls for an ambulance. As a result, the majority of the injuries within this category are reported to EHS by the Security Department.

Year	Sports Injuries
Q4 2018 <i>Oct., Nov., Dec.</i>	16
2018 <i>Full Year</i>	61
Q4 2019 <i>Oct., Nov., Dec.</i>	6
2019 <i>Year To Date</i>	32

8. Work-Related Injuries

Work-Related Injuries are a subset of Total Injuries whereby the injured person is a worker (staff or faculty). An injury or illness is considered work-related when an employee is involved and if an event, or exposure in the work environment, either caused or contributed to the resulting condition or

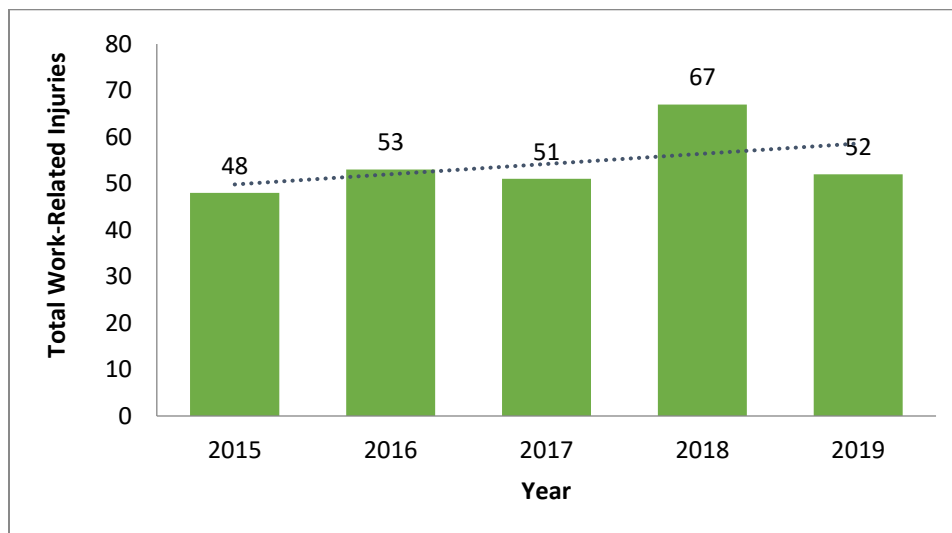
significantly aggravated a pre-existing injury or illness. EHS staff investigate work-related injuries and an investigation report with corrective actions is submitted to the employee’s supervisor or others within the university responsible for preventing injury reoccurrence.

For the period of October 1 to December 31, 2019, **11** of the 33 reported injuries (Section 7) were work-related, bringing the 2019 total to **52**.

Year	Work-Related Injuries
2018 Q4 <i>Oct, Nov, Dec</i>	16
2018 <i>Full Year</i>	67
2019 Q4 <i>Oct, Nov, Dec</i>	11
2019 <i>Full Year</i>	52

In 2019, the total number of work-related injuries (52) decreased by 22% compared to 2018. This is welcoming news given that 2018 saw a higher than average number of injuries. The 2019 total number of work-related injuries is below the 5-year average of 54 work-related injuries per year.

Graph 9: Work-Related Injuries per Year



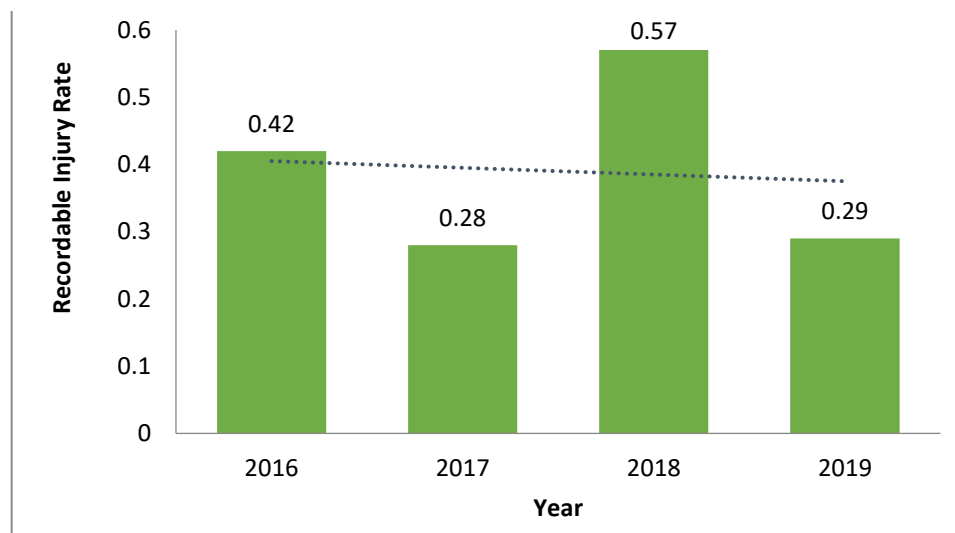
Recordable Injury Rate (RIR)

The Recordable Injury Rate (RIR), also commonly referred to as the recordable incident rate, is calculated by multiplying the number of Work-Related Injuries by 200 000 labour hours, and then dividing that number by the number of labour hours during that period. Furthermore, 200 000 labour hours equates to 100 employees, who work 40 hours per week, and who work 50 weeks per year. The calculated rate is per 100 employees.

Year	Recordable Incident Rate
2018 <i>Full Year</i>	0.57
2019 <i>Full Year</i>	0.29

The University's 2019 Recordable Injuries Rate was 0.29 work-related injuries per 100 full-time employees, compared to 0.57 in 2018. The lower RIR in 2019 is a direct result of the decrease in number of work-related injuries. 2019 was the fourth year that this data was collected and the 4-year trend is slightly decreasing.

Graph 10: Recordable Injury Rate per Year



9. Worker Compensation Claims

Employees who sustain a work-related injury may be eligible for compensation from the *Commission des normes, de l'équité, de la santé et de la sécurité du travail* (CNESST).

For the period of October 1 to December 31, 2019, there were **no** accepted worker's compensation claims. A claim from a work-related injury that occurred in Q2 2019 was accepted by the CNESST on November 15, 2019. As a result, the total number of accepted claims in 2019 is **11**, the same as in 2018.

Year	Accepted Compensation Claims
2018 Q4 <i>Oct, Nov, Dec</i>	2
2018 <i>Full Year</i>	11
2019 Q4 <i>Oct, Nov, Dec</i>	0
2019 <i>Full Year</i>	11

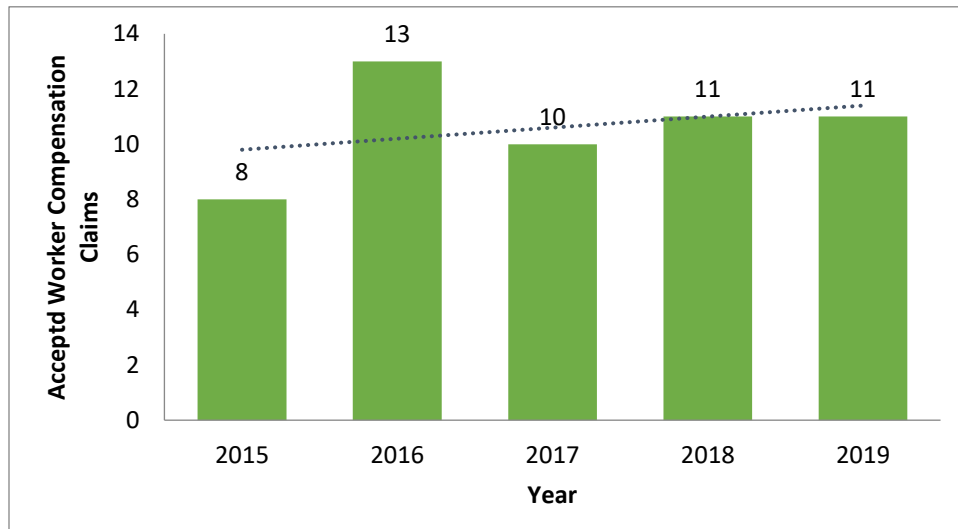
The following table provides details on all accepted worker compensation claims for 2019. For each claim, the total number of lost-time days in 2019 is indicated, if applicable.

Table: 2019 Accepted Worker Compensation Claims

Date	Description	Department	Diagnosis	Lost-Time Days YTD
21-Jan-19	The employee pulled an electrical wire and sustained a periorbital/nasal abrasion.	Facilities Operations	Left Periorbital/Nasal Abrasion	0
22-Jan-19	The employee missed a step and sustained a left ankle injury	Health, Kinesiology, and Applied Physiology	Left Ankle Sprain	0
12-Feb-19	The employee fell off the ladder and sustained a right knee sprain.	Facilities Operations	Right Knee Sprain	123
14-Feb-19	The employee slipped on ice and sustained a back sprain.	IITS	Back Sprain	0
23-Apr-19	The employee was moving a printer and sustained a lumbar sprain.	Facilities Operations	Back Sprain	12
29-Apr-19	The employee tripped and sustained a right ankle and left knee strain.	Exams' Office	Right Ankle and Left Knee Strain	5
13-May-19	The employee was moving a heavy object and sustained a lumbar sprain.	Studio Arts	Lumbar Sprain	0
6-Jun-19	The employee fell between the doors in the entrance and sustained a cervical strain.	Human Resources	Cervical Strain	10
14-Aug-19	The employee tripped and fell on a damaged metal strip and sustained a facial bone fracture.	Journalism	Right Maxillary Sinus Fracture	19
16-Aug-19	The employee tripped on a speed bump and sustained a contusion to the right knee and abrasions.	CUFA	Contusion/Abrasion Right Knee	5
13-Sep-19	The door fell off and the employee sustained a lower back injury.	Communication Studies	Lumbar Strain	0

The 5-year average number of accepted worker's compensation claims per year is 11. Although there was a 22% decrease in the number of Work-Related Injuries 2019 compared to 2018, there was no change in the number of Accepted Worker Compensation Claims in 2019.

Graph 11: Accepted Worker Compensation Claims per Year



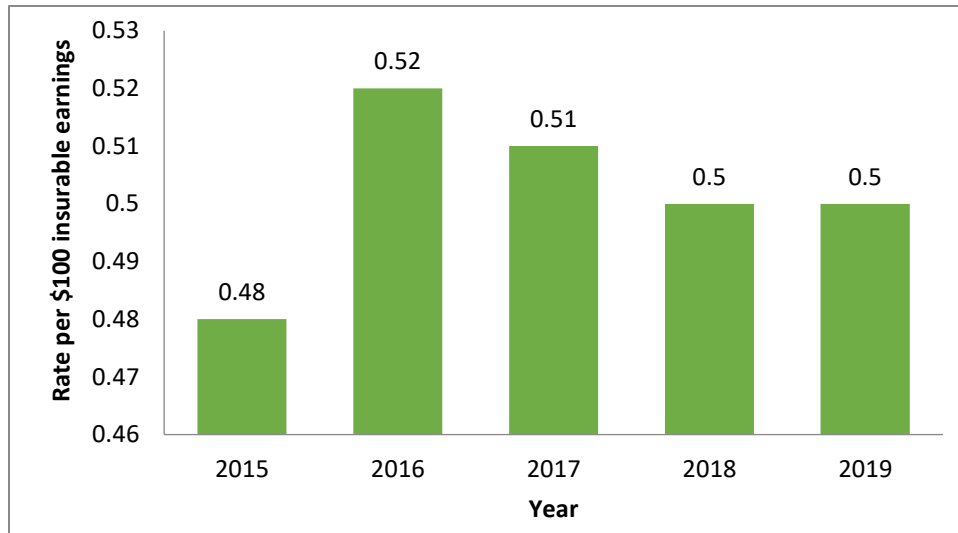
Every year, the Commission des normes, de l'équité, de la santé et de la sécurité du travail (CNESST) assigns the University a personalized insurance rate that is based in part on the University's past worker's compensation claims.

The University's personalized rate increased in 2016; however, it has resumed a downward trend decreasing in both 2017 and 2018. The 2019 rate remained the same as in 2018, \$0.50 per \$100 of insurable payroll. All efforts to reduce workplace injuries and to reduce the total number of lost-time days, including temporarily reassignment, help contribute to lowering the cost of the university's insurance costs.

In 2018, the base contribution paid to the CNESST was \$1,276,442, calculated on the insurable payroll for 2018 (earnings up to \$74,000). In 2019, although the rate remained the same, the base contribution paid to CNESST was slightly higher at \$1,377,496, based on insurable payroll (earnings up to \$76,000). These amounts, calculated using the University's personalized insurance rate, only represents an approximation of the true cost of insurance. The true cost is only finalized four years following the year of the claim. This allows the CNESST to adjust the cost of insurance based on the severity of the compensation claims from any given year.

Quebec universities are part of the sector "Enseignement collégial ou universitaire, bibliothèque, laboratoire ou centre de recherche". In 2019, the CNESST assigned those institutions who are not using a personalized insurance rate a general sector rate of \$0.58 per \$100 of payroll, up from \$0.57 in 2017. Although our sector rate is increasing, the University's personalized rate is decreasing.

Graph 12: Concordia’s Personalized Insurance Rate per Year



10. Lost-Time Days

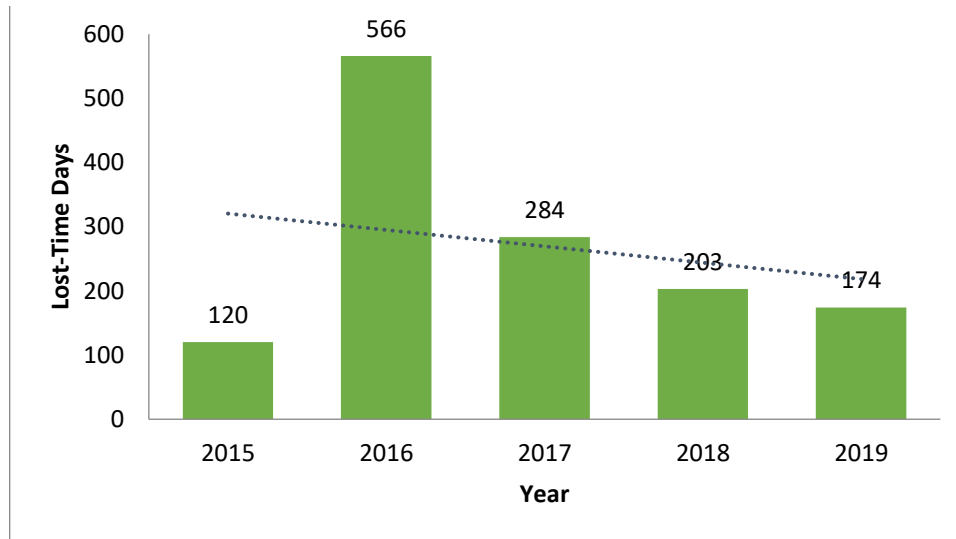
A Lost-Time Work-Related Injury is defined as a work-related injury or illness that results in days away from work, other than the day of injury or the day the illness began. Lost-Time Days refers to the total number of calendar days employees are away from work due to a work-related injury or illness.

For the period of January 1 to December 31, 2019, there were 6 Lost-Time Work-Related Injuries which resulted in **174 Lost-Time Days**. See Accepted Worker Compensation Claims table in Section 9 for details.

Year	Lost-Time Days
2018 Q4 <i>Oct., Nov., Dec.</i>	15
2018 <i>Full Year</i>	203
2019 Q4 <i>Oct., Nov., Dec.</i>	0
2019 <i>Full Year</i>	174

The 14% decrease in Lost-Time Days in 2019 when compared to 2018 was influenced by the 22% decrease in the total number of Work-Related Injuries in 2019.

Graph 13: Total Lost-Time Days per Year



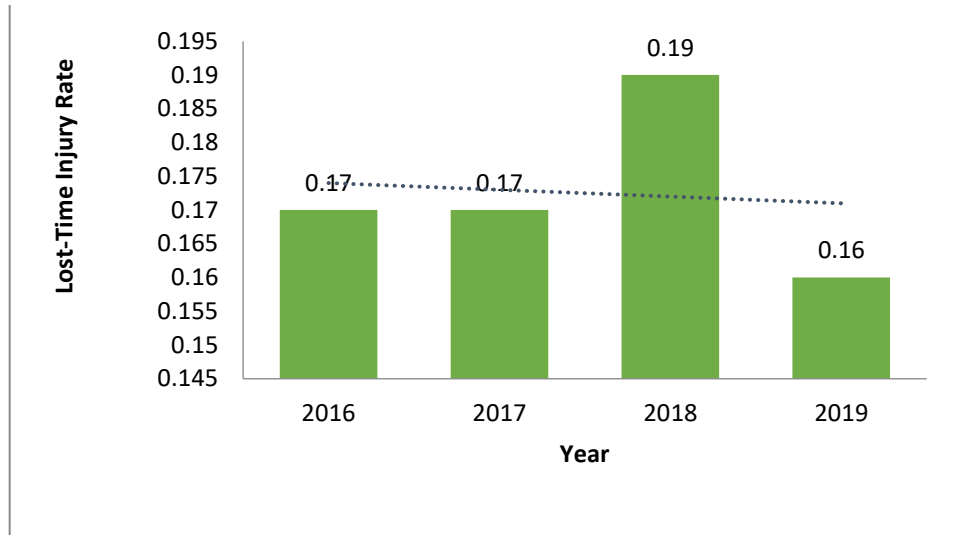
Lost-Time Injury Rate (LTIR)

The Lost-Time Injury Rate measures the occurrence of work-related injuries that resulted in an employee’s inability to work the next workday. It represents the number of lost-time injuries per 100 full-time employees in the stated period. The LTIR is calculated by multiplying the number of Lost-Time Work-Related Injuries by 200 000 labour hours and then dividing that number by the number of labour hours during that period. Therefore, 200 000 labour hours equates to 100 employees who work 40 hours during that period. Therefore, 200 000 labour hours equates to 100 employees who work 40 hours per week, and who work 50 weeks per year. The calculated rate is per 100 employees.

Year	Lost-Time Injury Rate
2018 <i>Full Year</i>	0.19
2019 <i>Full Year</i>	0.16

The University’s 2019 Lost-Time Injury Rate is 0.16 lost-time injuries per 100 full-time employees. 2019 was the fourth year that this data was collected and this year’s LTIR is slightly lower than 2018.

Graph 14: Lost-Time Injury Rate per Year



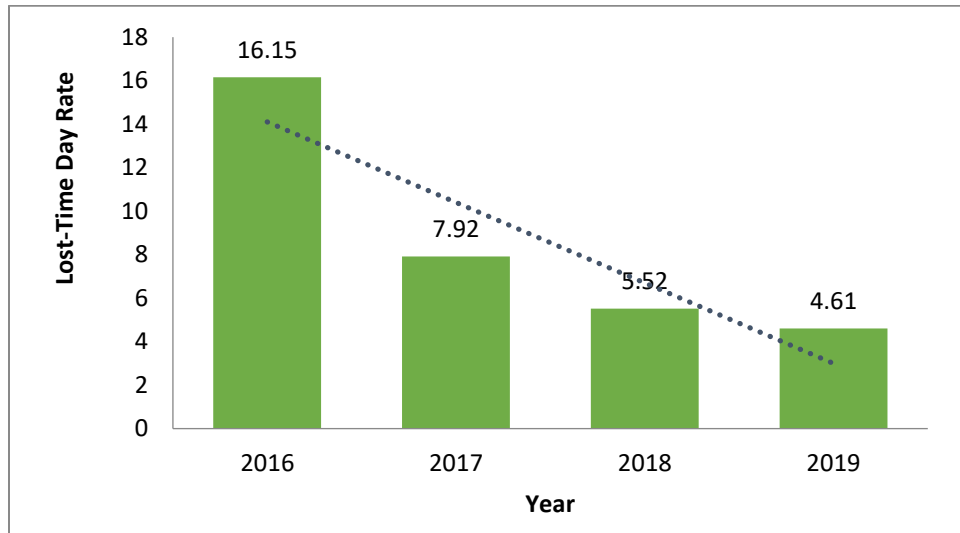
Lost-Time Day Rate (LTDR)

The Lost-Time Day Rate is a rate that measures the length of time an employee is away from work due to a work-related injury. It represents the number of lost-time days per 100 full-time employees in the stated period. The LTDR is calculated by multiplying the number of Lost-Time Days by 200 000 labour hours and then dividing that number by the number of labour hours during that period. Therefore, 200 000 labour hours equates to 100 employees, who work 40 hours per week and who work 50 weeks per year. The calculated rate is per 100 employees.

Year	Lost-Time Day Rate
2018 <i>Full Year</i>	5.52
2019 <i>Full Year</i>	4.61

The University’s 2019 LTDR was 4.61 lost-days per 100 full-time employees. 2019 was the fourth year that this data was collected. The LTDR in 2016 serves as the baseline for Concordia. In 2019, the LTDR continues to improve, with a 17% decrease from 2018 to 2019. The 4-year average LTDR is 8.55 lost-days per 100 full-time employees.

Graph 15: Lost-Time Day Rate per Year



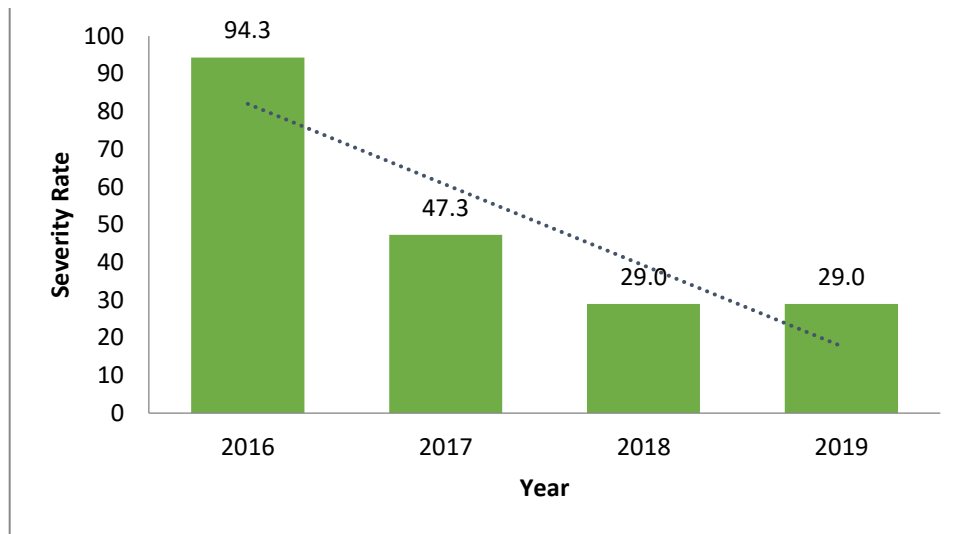
Severity Rate

The Severity Rate provides an average of the number of Lost-Time Days per Lost-Time Work-Related Injury. The Severity Rate is calculated by dividing the total number of lost-time days by the total number of work-related injuries with lost-time. The Severity Rate is a cumulative rate calculated at the end of each quarter.

Year	Severity Rate <i>average lost-time days per lost-time injury</i>
2018 <i>Full Year</i>	29.0
2019 <i>Full Year</i>	29.0

The University’s 2019 Severity Rate was 29.0; this is the average number of lost-time days per lost-time injury. 2019 was the fourth year that this data was calculated and 2016 serves as the baseline Severity Rate for Concordia. Compared to 2018, the 2019 Severity Rate has not changed.

Graph 16: Severity Rate per Year



11. Near Misses

A Near Miss is the occurrence of an event on university property, arising out of, or in the course of, a university-sanctioned activity attributable to any factor that could have caused either an injury or material damage. For example, events such as tripping on a stair or slipping in a water puddle, where no injury occurred, would be categorized as a near miss. As per the University’s Policy on Injury Reporting and Investigation (VPS-42), reporting of Near Misses is required. Traditionally, Near Misses go unreported, because no injury has occurred. Steps have been taken to encourage Near Miss reporting, including discussing the importance of Near Miss reporting at safety committee meetings, during safety training and new Principal Investigator orientation sessions.

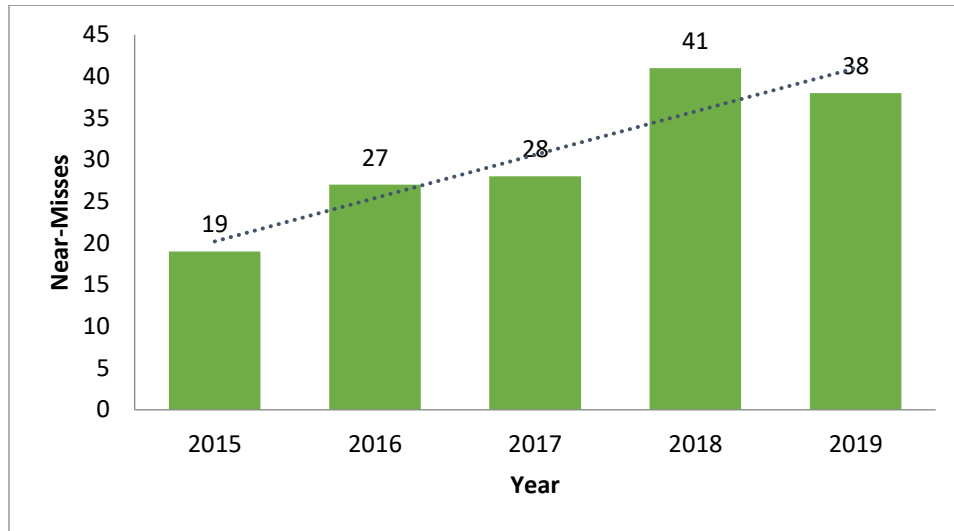
For the period of January 1 to December 31, 2019, a total of **38** Near Misses were reported, of which 13 were from Q4. Compared to 2018, there was a 7% decrease in reported Near Misses in 2019.

Year	Near Misses
2018 Q4 <i>Oct., Nov., Dec.</i>	12
2018 <i>Full Year</i>	41
2019 Q4 <i>Oct., Nov., Dec.</i>	13
2019 <i>Full Year</i>	38

Near Misses are also traditionally underreported since employees do not often see the relevance of reporting a Near Miss. Near miss reporting is correlated to the safety culture of the institution. With every activity undertaken by EHS, from safety training to risk assessments, the visibility of safety

increases, which in turn influences our safety culture. The 5-year trend for reported Near Misses is increasing, which is a positive indicator of the University’s continuously improving safety culture.

Graph 17: Total number of Near Misses per year



12. External Inspections

External inspections refer to inspections or audits of the University premises or safety programs conducted by government agencies or third parties (e.g., insurance provider). Third-party audits include those performed at the request of Environmental Health & Safety. These inspections and audits ensure that the University’s activities and facilities comply with all applicable legislation and regulations.

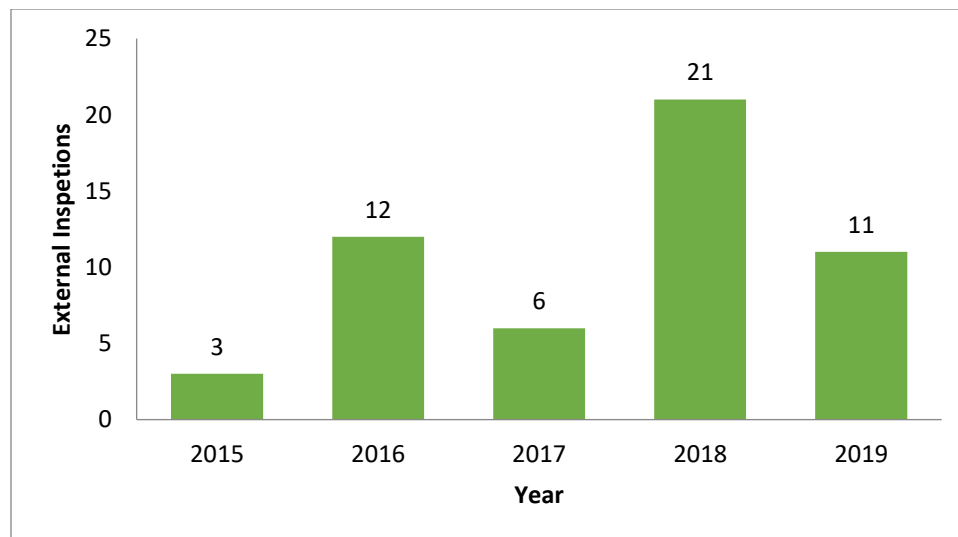
For the period of October 1 to December 31, 2019, there were **4 external inspections**. The 2019 total number of external inspections was 11, a 66% drop compared to 2018. The Q4 inspections included two CNESST inspections and two requests from the governmental agencies for information on asbestos-containing materials located in university buildings. The requests were categorized as desktop inspections due to the nature of the requests.

Year	External Inspections
2018 Q4 <i>Oct., Nov., Dec.</i>	4
2018 <i>Full Year</i>	32
2019 Q4 <i>Oct., Nov., Dec.</i>	4
2019 <i>Full Year</i>	11

Summary of 2019 Regulatory Inspections

- 7 CNESST follow-up inspections related to the CNESST’s machine safety initiative that began in 2018;
- 1 unannounced CNESST safety inspection (not related to machine safety);
- 1 Transport Canada inspection to verify the university’s compliance with Transport of Dangerous Goods Regulations;
- 1 request from the *Bureau d’Audiences Publiques sur l’Environnement* to provide information on asbestos-containing materials located in university buildings; and
- 1 request from the *Ministère de l’Éducation et de l’Enseignement Supérieur* to provide information on asbestos-containing materials located in university buildings.

Graph 18: Total Number of External Inspections per year



CNESST Inspections

A total of 97 non-compliance citations were received from the 2018 initiative by the CNESST to verify the university’s compliance with CNESST related to machine safety and machine guarding regulations. As of December 31, 2019, 95 of those non-compliance citations (98%) are corrected. The two remaining non-compliance issues involve specialized machines (hydraulic presses) used in the Gina Cody School of Engineering and Computer Science. These machines were locked out by EHS since the citation was given and are not in use. On November 1, 2019, the CNESST inspector returned to campus for a follow-up inspection and they are working with EHS staff and department representatives to find appropriate solutions. Due to the complexity of the machinery, finding suitable machine guarding solutions has been challenging.

Rapport sur l’application de la politique environnement sans fumée

Although not a regulatory inspection, EHS submitted, on October 23, 2019, the University’s *Rapport sur l’application de la politique environnement sans fumée*. In 2015, Québec adopted the *Loi concernant la lutte contre le tabagisme*. As per the legislation, on November 11, 2019, the *Ministère de la Santé et des*

Services Sociaux (MSSS) required the university to provide a report on the actions and initiatives taken from 2017 to 2019 to comply with the law, as well as to promote and encourage smoking cessation. EHS prepared in collaboration with Legal services a report i.e. *Rapport sur l'application de la politique environnement sans fumée*, sent to the MSSS on December 12, 2019. See complete report in Appendix A.

13. Regulatory Citations

The University may receive regulatory citations for non-compliance with federal, provincial or municipal laws, regulations or by-laws. Regulatory citations can be the outcome of government inspections or interventions (e.g., CNESST, Public Health Agency of Canada, Canadian Nuclear Safety Commission) or violations of regulations and by-laws (e.g., false fire alarm citation from the *Service de sécurité incendie de Montréal*). This metric tracks the total number of regulatory citations received by the University.

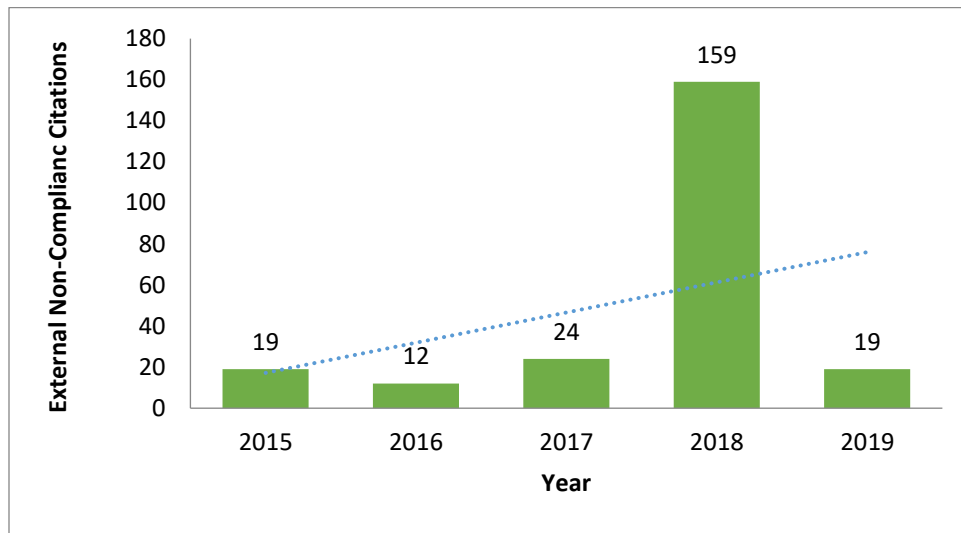
For the period of October 1 to December 31, 2019, there were **4 regulatory citations** received by the University. Four citations were from the *Service de sécurité incendie de Montréal* associated with false fire alarms. The 2019 total was 19 regulatory citations, of which 68% (13) were from the *Service de sécurité incendie de Montréal*.

At the time of preparation of this report, the university did not received the CNESST report following the November 1, 2019 inspection of the FB building.

Year	Regulatory Citations
2018 Q4 <i>Oct., Nov., Dec.</i>	30
2018 <i>Full Year</i>	159
2019 Q4 <i>Oct., Nov., Dec.</i>	4
2019 <i>Full Year</i>	19

The 5-year trend in regulatory citation is increasing, however it is heavily influenced by the 2018 CNESST initiative to improve compliance with machine safety and guarding regulations.

Graph 19: Regulatory Citations per Year



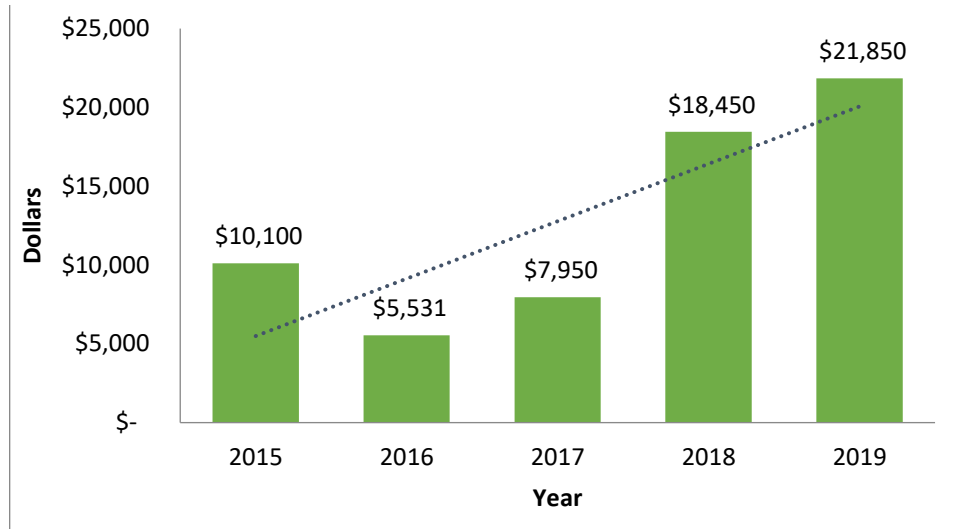
14. Regulatory Fines

Regulatory Citations (Section 13) may have associated monetary fines or penalties that are issued to the University.

For the period of October 1 to December 31, 2019, Concordia receive **4 regulatory fines** from the *Service de sécurité incendie de Montréal* associated with a false fire alarm – the value of those fines was **\$2950**. The total value of regulatory fines paid in 2019 is \$21,850, an 18% increase from 2018.

Year	Fines Received
2018 Q4 <i>Oct, Nov, Dec</i>	\$1,000
2018 <i>Full Year</i>	\$18,450
2019 Q4 <i>Oct, Nov, Dec</i>	\$2,950
2019 <i>Full Year</i>	\$21,850

Graph 19: Regulatory Fine Received per Year



15. Hazardous Materials Spill Responses

The University’s Hazardous Materials Spill Response Team responds to hazardous material spills that occur on university premises. Service providers are called upon to assist when a major spill occurs and additional resources are required.

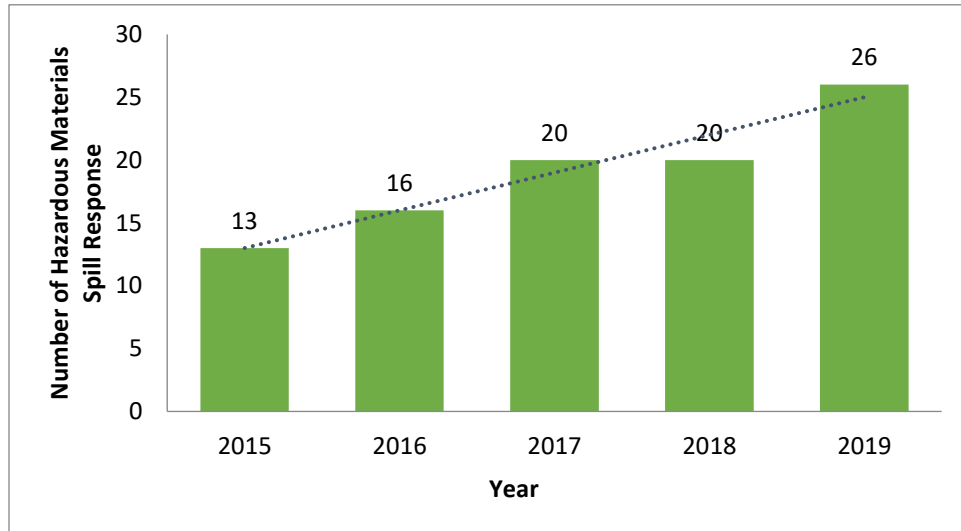
For the period of October 1 to December 31, 2019, there were **5 hazardous materials spill responses** by the Hazardous Materials Spill Response Team. In 2019, there were a total of **26 hazardous materials spill responses**.

Year	Hazardous Material Spill Responses
2018 Q4 <i>Oct, Nov, Dec</i>	4
2018 <i>Full Year</i>	20
2019 Q4 <i>Oct, Nov, Dec</i>	5
2019 <i>Full Year</i>	26

Over the last 5 years, annually there has been an increase in the number of hazardous material spill responses by the University’s Hazardous Materials Spill Response Team. The number of responses to chemical spills in 2019 was comparable to 2018, however there was an increase in the number of responses to suspected asbestos-containing materials. Following updating of warning signage in two university buildings with asbestos-containing materials, there has been an increase in reports by employees of the presence of asbestos-containing material. The University’s Hazardous Materials Spill

Response Team responds to all reports and treats suspected materials as potentially containing asbestos; a spill response protocol is activated to ensure that all suspected asbestos-containing materials are removed and disposed of safely.

Graph 20: Total Hazardous Materials Spill Responses per Year



Appendix A

2019 Rapport sur l'application de la politique environnement sans fumée

Appendix B

VPS-1 Policy on Tobacco, Cannabis and Vaping

RAPPORT SUR L'APPLICATION DE LA POLITIQUE ENVIRONNEMENT SANS FUMÉE

Rapport du Vice-recteur aux services de l'établissement d'enseignement universitaire au ministre de la Santé et des Services sociaux (L-6.2, Chapitre II, art. 5.1)

Nom de l'établissement: Université Concordia

Nom de la personne ayant rempli ce formulaire: Frederic Guilhem, Directeur intérimaire, Environnement, Santé et sécurité

Nom de la personne ayant approuvé ce formulaire: Roger Côté, Vice-recteur aux services

Date d'adoption de la politique : 1^{er} septembre 2015, révisée le 19 décembre 2017.

1. MODALITÉS D'APPLICATION ET DE SUIVI

1.1. Quelles activités ont été mises en place pour contribuer à la réussite de l'implantation de la politique:

- ✓ Une personne responsable de la démarche a été désignée; *la responsabilité de l'application de la politique est confiée au Vice-recteur aux services.*
- ✓ Un état de situation a été dressé et différents acteurs du milieu ont été consultés;
- ✓ Les procédures et les sanctions prévues pour maximiser le respect de la politique ont été spécifiées;
- ✓ Un mécanisme est prévu pour s'assurer de répondre aux questions et aux plaintes éventuelles en lien avec la politique;
- ✓ Les étudiants, les enseignants et le personnel ont été sensibilisés sur la politique; *via* courrier électronique, bulletin d'information et publication sur le site internet de l'université

1.2. Votre politique a-t-elle été révisée? Si oui, pouvez-vous indiquer la date à laquelle elle a été adoptée par le conseil d'administration et décrire brièvement quelles sont les principales modifications apportées:

La politique a été initialement adoptée par l'université le 1^{er} septembre 2015. La politique a été révisée le 19 décembre 2017. Vous trouverez en pièce jointe une copie de la politique révisée. Cette révision apportait des modifications concernant principalement la cigarette électronique et les autres dispositifs de vapotage. Elle précise les restrictions applicables en matière d'utilisation des cigarettes et cigarettes électroniques.

Par ailleurs, une nouvelle révision de la politique est en cours et son adoption est prévue d'ici la fin de l'année 2019 ou au début de l'année 2020. Les principales modifications de la révision sont :

- Interdiction de posséder, cultiver, consommer ou vendre du cannabis ou des produits contenant du cannabis.
- Interdiction de fumer sur l'ensemble des terrains appartenant à l'établissement, à l'exception de zones désignées pour fumeurs et vapoteurs.

L'aménagement des zones désignées est prévu au printemps 2020, après la période de neige. La nouvelle politique sera publiée et diffusée au même moment.

1.3. De façon générale, comment considérez-vous les effets de la politique au sein de votre établissement?

Les restrictions d'usage du tabac, du cannabis et des autres dispositifs de vapotage contribuent à donner à la communauté de l'Université Concordia un environnement plus sain. Par ailleurs, la politique ayant précisé clairement les limites d'utilisation de la cigarette, les membres de la communauté qui souhaitent fumer ou vapoter savent maintenant clairement quelles sont les exigences à respecter.

2. ORIENTATIONS RELATIVES À UN ENVIRONNEMENT SANS FUMÉE

2.1. Veuillez indiquer quels sont les produits encadrés par la politique :

- ✓ Tabac;
- ✓ Cigarette électronique;
- ✓ Cannabis; (dans la révision à venir 2019-2020)

2.2. Veuillez définir les types d'interdictions de fumer applicables à votre établissement :

- ✓ Interdiction de fumer dans les résidences;
- ✓ Interdiction de fumer sur l'ensemble des terrains appartenant à l'établissement, à l'exception de zones désignées pour fumeurs; *à venir dans la nouvelle révision de la politique 2019-2020.*
- ✓ Interdiction de fumer dans les lieux visés par la Loi (à 9 mètres de toute porte, prise d'air ou fenêtre, les terrains sportifs et de jeux, y compris les aires réservées aux spectateurs);
- ✓ Autre (préciser svp) : l'utilisation de cigarettes ou de dispositifs électroniques est interdite
 - dans l'ensemble des bâtiments appartenant à l'université ou occupés par l'Université
 - dans l'ensemble des véhicules appartenant à l'Université ou loués au nom de l'Université

2.3. En référence aux activités de restriction d'usage du tabac au sein de l'établissement, veuillez indiquer si les interdictions de fumer sont bien respectées (Ex. : Interdiction de fumer sur l'ensemble des terrains, avec ou sans zone désignée pour fumeurs, interdiction de fumer dans les résidences, etc.):

- ✓ Les interdictions de fumer sont généralement bien respectées;
- Les interdictions de fumer sont bien respectées avec quelques difficultés d'application;
- Les interdictions de fumer ne sont généralement pas bien respectées;

3. ORIENTATIONS VISANT À FAVORISER L'ABANDON DU TABAGISME CHEZ LEZ USAGERS ET LE PERSONNEL

3.1. Veuillez indiquer quelles mesures ont été mises en place pour favoriser l'abandon du tabagisme chez les ÉTUDIANTS (les propositions suivantes sont indiquées à titre d'exemple seulement, il ne s'agit pas nécessairement des meilleures pratiques, ni d'une liste exhaustive):

- ✓ Diffusion d'un répertoire de ressources d'aide à l'abandon du tabagisme;
- ✓ Remise d'outils autodidactiques; *sur demande*
- ✓ Autre (préciser svp) : les étudiants peuvent consulter le Service de santé qui peut leur fournir des informations et conseils pour les aider à arrêter de fumer. Si un soutien s'avérait nécessaire, les étudiants ont la possibilité d'appeler pour recevoir de l'aide.

Le Service de santé a publié un bulletin d'information qui propose des informations pour aider à arrêter de fumer. Il y a également une page entière d'information en ligne disponible :

concordia.ca/students/health/topics/smoking-cessation.html

Il y a également d'autres ressources comme des livres, des guides en ligne pour arrêter de fumer, etc.

3.2. Veuillez indiquer quelles mesures ont été mises en place pour favoriser l'abandon du tabagisme chez les ENSEIGNANTS ET LE PERSONNEL (les propositions suivantes sont indiquées à titre d'exemple seulement, il ne s'agit pas nécessairement des meilleures pratiques, ni d'une liste exhaustive):

- ✓ Diffusion d'un répertoire de ressources d'aide à l'abandon du tabagisme;
- ✓ Remise d'outils autodidactiques; *sur demande*
- ✓ Autre (préciser svp) : les professionnels enseignants et les employés peuvent consulter le Service de santé qui peut leur fournir des informations et conseils pour les aider à arrêter de fumer. Un service d'aide aux employés – professionnel et indépendant de l'Université – est également disponible.

Le Service de santé a publié un bulletin d'information qui propose des informations pour aider à arrêter de fumer. Il y a également une page entière d'information en ligne disponible :

concordia.ca/students/health/topics/smoking-cessation.html

Il y a également d'autres ressources comme des livres, des guides en ligne pour arrêter de fumer, etc.

4. ORIENTATIONS RELATIVES À LA PROMOTION DU NON-TABAGISME

4.1. Veuillez indiquer quelles ont été les mesures mises en place pour faire la promotion du non-tabagisme:

En matière de promotion médiatique, l'université a publié un article dans le bulletin de communication *NOW*. Ce bulletin est adressé à l'ensemble des employés et aux étudiants. Un autre article sera publié lors de l'adoption de la nouvelle politique de l'université.

POLICY ON TOBACCO, CANNABIS AND VAPING

Effective Date: December 10, 2019

Originating Office: Office of the
Vice-President, Services

Supersedes /Amends: December 19, 2017

Policy Number: VPS-1

SCOPE

This Policy applies to all University employees, students and visitors within all buildings, vehicles and outdoor premises owned or leased by the University.

PURPOSE

The purpose of this Policy is to set out the rules regarding tobacco, cannabis and Vaping (as defined below) on campus. This Policy conforms to the [Tobacco Control Act, CQLR, chapter L-6.2](#) and the [Cannabis Regulation Act, CQLR, chapter C-5.3](#) and all other federal, provincial or municipal legislation relating to Smoking and Vaping (as such expressions are defined below), exposure to second-hand smoke, or cannabis possession or consumption as applicable to the University setting.

DEFINITION

For the purposes of this Policy, the following definitions shall apply:

“Smoking” means inhaling and exhaling the smoke of tobacco, cannabis or any other substance, and burning or carrying a lighted cigarette, cigar, pipe or other similar apparatus.

“Vaping” means inhaling and exhaling an aerosol produced by a vaping device, such as an electronic cigarette, containing nicotine, cannabis and/or any other liquids or substances.

POLICY

Cannabis Use

1. Pursuant to the provincial law, the Smoking and Vaping of cannabis is prohibited on campus, including all student residences and Designated Smoking and Vaping Areas (“DSVAs”) as described below.

POLICY ON TOBACCO, CANNABIS AND VAPING

Page 2 of 3

2. The growing, distribution, serving, cooking, preparation and production of cannabis is prohibited everywhere on campus.

Tobacco Smoking and Vaping

3. The University provides outdoor [DSVAs](#) for Smoking and Vaping of non-cannabis products in specific locations.
4. DVSAs include waste receptacles. Smokers are required to use the appropriate waste receptacles and to keep these spaces clean.
5. Tobacco Smoking or Vaping is prohibited inside all buildings, in all vehicles and on all outdoor premises owned or leased by the University, except in DSVAs.

Selling and Advertising

6. No tobacco, cannabis or vaping products shall be sold on campus.
7. Advertising of tobacco, cannabis or vaping products on campus or during University-sponsored events off campus is prohibited.

Smoking Cessation Resources

8. In its continuing efforts to promote good health and a smoke-free lifestyle, the University offers, via Health Services, a variety of services to members of the community who wish to stop Smoking, such as one-on-one Smoking cessation counseling. A description of those services is available [here](#). Resources are also available at Health Services for members of the community dealing with a problematic use of cannabis. More information is available [here](#).

Policy Compliance

9. Deans, Directors, Departmental Chairs and all supervisors, including faculty members, shall be responsible for ensuring that those reporting to them are informed of this Policy.

POLICY ON TOBACCO, CANNABIS AND VAPING

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10. Any member of the community who fails to comply with this Policy may face disciplinary measures under the Code of Rights and Responsibilities, or the relevant collective or employment agreement, which can include a verbal or written warning and/or an obligatory viewing of an online educational video.
11. The Security Department is responsible for addressing any contravention to this Policy.

Policy Responsibility and Review

12. The overall responsibility for the implementation and recommended amendments to this Policy shall rest with the Vice-President, Services.
13. The Vice-President, Services shall report to the Board of Governors of the University every 2 years regarding the application of this Policy. The University will forward such report to the *Ministère de la Santé et des Services sociaux* within 60 days of filing it with the Board of Governors in accordance with applicable legislation.



**BOARD OF GOVERNORS
OPEN SESSION
Meeting of March 11, 2020**

AGENDA ITEM: Governance and Ethics Committee recommendation: Revisions to the *Policy on Conflict of Interest* (BD-4)

ACTION REQUIRED: For approval

SUMMARY: Further to review at its meeting held on January 23, 2020, the Governance and Ethics Committee is recommending Board approval of the revised code of ethics applicable to University employees.

BACKGROUND: The Governance and Ethics Committee is mandated to make recommendations to the Board regarding a code of ethics applicable to the employees of the University.

During the Winter and Spring of 2019, a committee was established to review the *Code of Ethics and Safe Disclosure Policy Applicable to Employees of Concordia University* (BD-4). This committee met 4 times from March to May 2019. Its membership was as follows:

- Melodie Sullivan, Senior Legal Counsel, University Secretariat (*Chair*)
- Enza De Cubellis, Director, University Secretariat (*Coordinator*)
- Alexandra Pasian, Professor, Department of English (*appointed by CUFA*)
- Amy Fish, Ombudsperson
- Camille Thompson, undergraduate student (*appointed by the CSU*)
- Gail Fayerman, Senior Lecturer, Accountancy (*appointed by CUPFA*)
- Heather Adams-Robinette, Director, Office of the Vice-President, Research and Graduate Studies
- Kathleen Lizé, Director, Internal Audit
- Nadia Hardy, Interim Provost and Vice-Provost, Faculty Development and Inclusion
- Shelina Housseny, Officer, Policies and Governance, University Secretariat

The impetus for the review was notably to harmonize BD-4 with the *Procedure to Facilitate Employee Disclosures of Wrongdoings* and the Consensual Romantic or Sexual Relationships guidelines as well as to adopt gender-neutral language.

The main substantive changes which are being proposed include:

- detaching the “whistleblowing” or “wrongdoing” disclosure procedures from the current Code of Ethics, thereby making BD-4 a pure conflict of interest policy, which will co-exist with a new stand-alone whistleblowing policy;
- updating definitions and providing further examples for greater clarity;

- providing a more detailed description of the mechanism to disclose and manage conflicts of interest;
- adding the obligation of certain employees to complete conflict of interest disclosure forms on a periodic basis (Annex A will set out the groups which will be asked to complete the forms as well as the frequency of this obligation). While not currently an obligation under BD-4, following a third-party review, all individuals occupying a Vice-Presidential level position have been completing such a form since 2012; and
- changing the title from *Code of Ethics and Safe Disclosure Policy applicable to Employees of Concordia University* to *Policy on Conflict of Interest*.

Clean and marked versions of BD-4 are attached.

It should be noted that the work of the committee and the changes made to BD-4 created the need to modify all related policies where the definition of conflict of interest appears, including:

- ❖ *Code of Ethics and Professional Conduct Applicable to Members of the Board of Governors (BD-10)*
- ❖ *Policy on Conflict of Interest in Research (VPRGS-5) (under Senate's purview)*
- ❖ *Policy for the Responsible Conduct of Research (VPRGS-12) (under Senate's purview)*

as well as the creation of *Policy on Employee Disclosures of Wrongdoings (BD-16)*.

DRAFT MOTION: That, on recommendation of the Governance and Ethics Committee, the Board of Governors approve the revisions to the *Policy on Conflict of Interest (BD-4)*.

PREPARED BY:

Name: Danielle Tessier
Date: January 27, 2020



POLICY ON CONFLICT OF INTEREST

Effective Date: [insert new date]

Originating Office: Board of Governors

Supersedes/Amends: June 21, 2016

Policy Number: BD-4

SCOPE

This Policy and its related [Consensual Romantic or Sexual Relationships Guidelines](#) (the "Guidelines") shall apply to all Employees (as defined below) of Concordia University (the "University"). In addition to this Policy, Employees are also guided by a number of other codes and policies which set forth standards of good conduct, including, but not limited to, the *Policy on Conflict of Interest in Research* ([VPRGS-5](#)), the *Policy for the Responsible Conduct of Research* ([VPRGS-12](#)) as well as existing [collective or employment agreements](#) and professional codes of ethics for specific professions.

Any report of a Conflict of Interest (as defined below) under this Policy must be made in good faith and shall not be made solely to complain about one's condition of employment or to question the merits of the policies, programs and/or objectives of the University.

Nothing in this Policy shall replace or supersede any complaint, grievance or appeal procedure set out in any [collective or employment agreement](#) to which the University is a party.

PURPOSE

Conflicts of Interest can arise naturally from an Employee's personal relationships and/or engagement inside and outside the University, and the mere existence of a Conflict of Interest does not necessarily imply wrongdoing on anyone's part. That being said, Conflicts of Interest and situations that give rise to perceptions of a Conflict of Interest must be recognized, disclosed and assessed.

The purpose of this Policy and its related Guidelines is to establish the rules of conduct respecting Conflicts of Interest applicable to Employees of the University.

POLICY ON CONFLICT OF INTEREST

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DEFINITIONS

For the purposes of this Policy, the following definitions shall apply:

“Conflict of Interest” means a situation in which an Employee, or their Related Party(ies), has a personal interest that conflicts or could conflict with the Employee’s obligations to the University. The existence of a Conflict of Interest involves two elements:

- a) the Employee’s or a Related Party’s personal interest(s); and
- b) the Employee’s obligations to the University.

Personal interests may include business, commercial or financial interests, as well as relationships, private and career interests. An Employee’s obligation to the University is to act in the University’s best interests, which includes acting in support of the University’s integrity and mission and avoiding circumstances that may undermine confidence and trust of the public, as well as the confidence and trust necessary between the University and its Employees.

Conflicts of Interest may be actual or potential. An actual Conflict of Interest is a situation where the personal interest actually conflicts with the Employee’s obligations to the University. A potential Conflict of Interest is a situation where the personal interest has not yet conflicted with the Employee’s obligations to the University but might be expected to.

A perceived Conflict of Interest is a situation where an actual or potential Conflict of Interest may or may not exist, but where there may be, nonetheless, from the perspective of a reasonably well informed and impartial person, a perception of a Conflict of Interest. This is sometimes referred to as an “apparent” Conflict of Interest.

“Employee” means any full-time, part-time or temporary employee of the University, including staff, faculty, postdoctoral fellows, researchers, members of the administration, stagiaires and interns; any individual engaged by the University on a consulting basis or in virtue of any other contractual agreement; and appointees (including volunteers) of the University.

“Immediate Relative” means a spouse, child, parent, sibling or person with whom an Employee has a personal/close relationship that is of primary importance in their life.

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“Recipient” means any one of: the Secretary-General, the President or the Chair of the Governance and Ethics Committee to whom the Conflict of Interest is being disclosed.

“Related Party” means an Employee’s Immediate Relative (as defined above), or other person living in the same household, or any other person with whom the Employee shares a financial interest, either directly or indirectly, or any entity in which the Employee has an ownership interest.

“Student” means any person registered in a course or program on a full or part-time basis, for credit or not, and includes undergraduate and graduate students, independent students as well as visiting students, exchange students and interns.

POLICY

Standard of Conduct

1. An Employee shall conduct themselves in an ethical and professional manner. They shall honour the principles of collegiality and fairness, and comply with their duties and obligations with objectivity, care, integrity, loyalty, prudence and diligence to facilitate and foster the accomplishment of the University’s mission.

Situations of Conflicts of Interest

2. An Employee shall comply with their duties and obligations, and act in such a manner as to avoid any Conflict of Interest. The best interests of the University shall always prevail when an Employee is in a situation of Conflict of Interest or when the personal interest of a Related Party places an Employee in a situation of Conflict of Interest. The following, without limitation, are examples of Conflicts of Interest.
 - a) when an Employee or a Related Party, whether directly or indirectly, has a personal interest in a contract or a proposed contract to be entered into by the University or a University-related body, or obtains, or is likely to obtain, a personal advantage or benefit as a result of a decision made by the University or a University-related body;

POLICY ON CONFLICT OF INTEREST

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- b) when an Employee accepts gifts, gratuities or favours from a person, body, enterprise or association engaged in or wishing to engage in transactions with the University, except in the case of minor or customary gifts, gratuities or favours of a trivial or nominal value that do not place and do not have the appearance of placing the recipient under any obligation and/or do not give the impression that there is a purpose or attempt to influence any decision;
- c) when an Employee uses their position to help a person or body, enterprise or association in dealings with the University in a situation which gives rise to real or perceived preferential treatment from the perspective of a reasonably well informed and impartial person;
- d) when an Employee is engaged in or begins a romantic or sexual relationship with a Student when they are or may reasonably be expected to become responsible for teaching, advising, allocating resources or supervising the Student or, more generally, is or may reasonably be expected to be in a position to exercise authority over the Student;
- e) when an Employee uses information obtained in the performance of their duties and responsibilities as an Employee which is not generally communicated to the public for their own advantage or benefit, or for the advantage or benefit of a Related Party;
- f) when an Employee uses or allows to be used, directly or indirectly, the University's goods or services for activities other than those approved by the University for their own advantage or benefit, or for the advantage or benefit of a Related Party.

Supervision of Immediate Relatives

- 3. An Employee shall not hire nor supervise an Immediate Relative unless:
 - a) specific provisions of a collective agreement apply; or
 - b) it is specifically authorized, under exceptional circumstances, by the Associate Vice-President, Human Resources following consultation with the relevant

POLICY ON CONFLICT OF INTEREST

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stakeholders. The authorization shall be in writing and shall be placed in the Employees' personnel file.

4. For any exception mentioned in section 3, an acknowledgement of the Conflict of Interest shall be completed by the Immediate Relative and the current Employee and shall be placed in the Employees' personnel file. It shall state their commitment to act with the highest degree of integrity, objectivity and professionalism, and shall outline the mechanism or measures that will be utilized to mitigate the Conflict of Interest, with particular reference to recommendations for evaluation, renewal, promotion, the handling of grievances and complaints, and termination.
5. Notwithstanding the above, employment situations that contravene section 3, but that were in existence prior to June 23, 2011 (the initial effective date of this Policy) are excluded from the application of section 3.

Disclosure and Management of Conflicts of Interest

6. All employees referred to in Appendix A must complete and submit a Conflict of Interest Disclosure Form within 30 days of joining the University and periodically, as set out in Appendix A, and/or whenever there is a significant change in appointment or circumstances.
7. Unless sections 10 and 11 apply, an Employee shall immediately disclose to their immediate supervisor any Conflict of Interest they have or believe they may have. When in doubt about a particular situation, they shall discuss it with their immediate supervisor prior to engaging in the activity in question. The Employee and the immediate supervisor may also seek guidance from the General Counsel, who shall serve as a resource to help them identify a Conflict of Interest and shall provide, if requested, information regarding the application of this Policy.
8. Unless sections 10 and 11 apply, the immediate supervisor, in consultation with the Employee, shall decide on the course of action to avoid or monitor the Conflict of Interest, and the Employee shall agree in writing. A copy of the course of action agreed upon shall be placed in the Employee's personnel file and shall be forwarded to the Secretary-General and the relevant Vice-President.

POLICY ON CONFLICT OF INTEREST

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9. In the event that the Employee does not agree with the course of action set out by the immediate supervisor, the Employee may contact the Secretary-General for resolution. In such cases, the Secretary-General shall consult with the relevant Vice-President and any individual (including the relevant union or association representatives, if appropriate) that they deem appropriate.
10. An Employee wishing to disclose a Conflict of Interest pursuant to the Guidelines shall do so by contacting the relevant Dean, the University Librarian, the Executive Director of the Center for Continuing Education or the relevant Vice-President.
11. In the case of a disclosure pursuant to the Guidelines, the course of action to be taken shall be identified by the relevant authority as set out in section 10.

Mechanism for Reporting Conflicts of Interest

12. Unless section 13 applies, any Employee who becomes aware of any Conflict of Interest or other behaviour in contravention of this Policy by any other Employee may report the matter to their immediate supervisor or unit head, as applicable, either in writing with the mention "*Strictly confidential – To be opened by addressee only*" or verbally.
13. Any report of Conflict of Interest made in good faith under this Policy against:
 - a) an immediate supervisor or unit head shall be made to the Secretary-General or to the President;
 - b) a Dean shall be made directly to the Secretary-General, who shall refer the matter to the relevant Vice-President;
 - c) a Vice-President shall be made directly to the President; or
 - d) the President shall be made directly to the Chair of the Governance and Ethics Committee.

The Employee may report the matter either in writing with the mention "*Strictly confidential – To be opened by addressee only*" or by leaving a voice mail message with their

POLICY ON CONFLICT OF INTEREST

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name and contact information in the appropriate private voice mail, as set out in the Conflict of Interest Disclosure Phone Line Information Page.

14. The Recipient may, at their discretion, request a detailed written description of the conduct, dates, places, persons involved/witnesses, other individuals who have knowledge of the Conflict of Interest, relevant documentation, etc. so that a reasonable inquiry into the report of the Conflict of Interest can be conducted.
15. An inquiry into the report of the Conflict of Interest shall be conducted by the Secretary-General, the President, the Chair of the Governance and Ethics Committee or a person or entity designated by one of them.
16. The inquiry shall be conducted with due regard to the sensitivity of the information, and the Recipient shall use reasonable efforts to protect the privacy of the Employee who has made the report and the confidentiality of the inquiry, to the extent consistent with a fair inquiry and subject to disclosure requirements in the context of legal or administrative proceedings.
17. In the event that any information or report is provided anonymously or without foundation, the University may, at its discretion, not act upon it.
18. If the information or report pertains to a matter that is pending or being adjudicated in an internal or external process, the Recipient may suspend the inquiry until the final resolution or end of such internal or external processes.
19. Information about how the report of Conflict of Interest is managed is confidential and shall not be disclosed to anyone unless required by law or University policies or unless, in the opinion of the Secretary-General, it is appropriate to share it with those who have a legitimate need for the information.
20. Provided they acted in good faith, an Employee who reports a Conflict of Interest under this Policy shall not be subject to retaliation or discrimination or any threat thereof. This protection shall also extend to anyone providing information in connection with the report.

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Non-compliance

21. The failure of an Employee to comply with the provisions of this Policy may constitute a disciplinary offence under the relevant provision, contract, or [collective or employment agreement](#).

Policy Responsibility and Review

22. The overall responsibility for the implementation and recommended amendments to this Policy shall rest with the Secretary-General.

Approved by the Board of Governors on June 23, 2011 and amended on June 21, 2016 and [insert date].

POLICY ON CONFLICT OF INTEREST

APPENDIX A

List of employees who must complete and submit a
Conflict of Interest Disclosure Form

Employees	Periodicity
President	Annually
Vice-Presidents, Secretary-General and Chief Officers appointed by the Board of Governors	Annually



~~CODE OF ETHICS AND SAFE DISCLOSURE POLICY APPLICABLE TO
EMPLOYEES OF CONCORDIA UNIVERSITY
POLICY ON CONFLICT OF INTEREST~~

Effective Date: ~~June 21, 2016~~ [insert new date]
Board of Governors

Originating Office:

Supersedes/Amends: ~~June 23, 2011~~ June 21, 2016

Policy Number: -BD-4

SCOPE

~~This Code applies to all employees of Concordia University ("the University") but does not stand on its own. This Policy and its related *Consensual Romantic or Sexual Relationships Guidelines* (the "Guidelines") shall apply to all Employees (as defined below) of Concordia University (the "University").~~ In addition to this Policy, Employees are also guided by a number of other codes and policies which set forth standards of good conduct, including, but not limited to, the *Policy for the Ethical Review of Research Involving Humans (VPRGS-3)*, *Policy on Conflicts of Interest in Research (VPRGS-5)* ~~and the Code of Rights and Responsibilities (BD-3) as well~~, the *Policy for the Responsible Conduct of Research (VPRGS-12)* as well as existing [collective or employment agreements](#) and professional codes of ethics for specific professions.

~~Any report of a Conflict of Interest (as defined below) under this Policy must be made in good faith and shall not be made solely to complain about one's condition of employment or to question the merits of the policies, programs and/or objectives of the University.~~

~~Nothing in this Policy shall replace or supersede any complaint, grievance or appeal procedure set out in any collective or employment agreement to which the University is a party.~~

PURPOSE

~~Conflicts of Interest can arise naturally from an Employee's personal relationships and/or engagement inside and outside the University, and the mere existence of a Conflict of Interest does not necessarily imply wrongdoing on anyone's part. That being said, Conflicts of Interest and situations that give rise to perceptions of a Conflict of Interest must be recognized, disclosed and assessed.~~

The purpose of this ~~Code~~ Policy and its related Guidelines is to establish the rules of conduct respecting ~~conflicts~~ Conflicts of ~~interest~~ Interest applicable to ~~the employees of the University as~~

~~CODE OF ETHICS AND SAFE DISCLOSURE POLICY APPLICABLE TO
EMPLOYEES OF CONCORDIA UNIVERSITY
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~~well as to provide a protected disclosure mechanism by which Directors, Officers and employees acting in good faith can disclose wrongdoing within~~Employees of the University.

DEFINITIONS

For the purposes of this ~~Code~~Policy, the following definitions shall apply:

~~“conflict~~Conflict of ~~interest~~Interest” means a situation ~~wherein which~~ an employee~~Employee, or their Related Party(ies),~~ has a personal interest, ~~whether direct or indirect,~~ that conflicts or could conflict with the Employee’s obligations to the University. The existence of which he/she is aware~~a Conflict of Interest involves two elements:~~

- a) the Employee’s or a Related Party’s personal interest(s); and
- b) the Employee’s obligations to the University.

Personal interests may include business, commercial or financial interests, as well as relationships, private and career interests. An Employee’s obligation to the University is to act in the University’s best interests, which is sufficient to put into question the independence, impartiality and objectivity that he/she includes acting in support of the University’s integrity and mission and avoiding circumstances that may undermine confidence and trust of the public, as well as the confidence and trust necessary between the University and its Employees.

Conflicts of Interest may be actual or potential. An actual Conflict of Interest is a situation where the personal interest actually conflicts with the Employee’s obligations to the University. A potential Conflict of Interest is obliged to exercise in the performance of his/her duties and responsibilities as a situation where the personal interest has not yet conflicted with the Employee’s obligations to the University but might be expected to.

~~CODE OF ETHICS AND SAFE DISCLOSURE POLICY APPLICABLE TO
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~~A perceived Conflict of Interest is a situation where an employee actual or potential Conflict of Interest may or may not exist, but where there may be, nonetheless, from the perspective of a reasonably well informed and impartial person, a perception of a Conflict of Interest. This is sometimes referred to as an “apparent” Conflict of Interest.~~

~~“employee” means any full-time, part-time or temporary employee of the University, including staff, faculty, staff and administrators as well as postdoctoral fellows, researchers, members of the administration, stagiaires and interns; any individual engaged by the University on a consulting basis or in virtue of any other contractual agreement; and appointees (including volunteers) of the University.~~

~~“immediate relative” means a spouse, child, parent, sibling or partner (as defined below).~~

~~“partner” means a person with whom an employee has cohabitated for at least one year or with whom he/she has a personal/close relationship that is of primary importance in his/her life.~~

~~“perceived conflict of interest” means a situation where an employee, while not in a conflict of interest, appears to have, in the opinion of a reasonably informed and well advised person, a personal interest that is sufficient to put into question the independence, impartiality and objectivity which he/she is obliged to exercise in the performance of his/her duties and responsibilities as an employee.~~

~~“personal interest” means any one of: the Secretary-General, the President or the Chair of the Governance and Ethics Committee to whom the Conflict of Interest is being disclosed.~~

~~“Related Party” means the personal, private or financial interest of an employee or a related party.~~

~~“related party” means an employee’s immediate relative (as defined above) or any other person living in the same household, or any other person with~~

~~CODE OF ETHICS AND SAFE DISCLOSURE POLICY APPLICABLE TO
EMPLOYEES OF CONCORDIA UNIVERSITY
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whom the ~~employee~~Employee shares a financial interest, either directly or indirectly, or any entity in which the Employee has an ownership interest.

CODE

Standards “Student” means any person registered in a course or program on a full or part-time basis, for credit or not, and includes undergraduate and graduate students, independent students as well as visiting students, exchange students and interns.

POLICY

Standard of Conduct

1. An ~~employee~~Employee shall conduct ~~himself/herself~~themselves in an ethical and professional manner ~~and shall make decisions in the best interests of the University.~~ He/she. They shall honour the principles of collegiality and fairness, and ~~perform his/her~~comply with their duties and ~~responsibilities~~obligations with objectivity, care, integrity, loyalty, prudence and diligence to facilitate and foster the accomplishment of the University’s mission.

Situations of Conflicts of Interest ~~or Perceived Conflicts of Interest~~

2. An ~~employee~~Employee shall ~~perform his/her~~comply with their duties and ~~responsibilities~~obligations, and act in such a manner as to avoid any ~~conflict of interest or perceived conflict of interest.~~ Conflict of Interest. The best interests of the University shall always prevail ~~where~~when an ~~employee~~Employee is in a situation of ~~conflict of interest or perceived conflict of interest, or where~~ Conflict of Interest or when the personal interest of a ~~related party~~Related Party places an ~~employee~~Employee in a situation of ~~conflict of interest or perceived conflict of interest.~~ Conflict of Interest. The following, without limitation, are examples of ~~conflicts of interest or perceived conflicts of interest:~~ Conflicts of Interest.

- a) ~~i)~~ when an ~~employee~~Employee or a ~~related party~~Related Party, whether directly or indirectly, has a personal interest in a contract or a proposed contract to be entered

~~CODE OF ETHICS AND SAFE DISCLOSURE POLICY APPLICABLE TO
EMPLOYEES OF CONCORDIA UNIVERSITY
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into by the University or a University-related body, or obtains, or is likely to obtain, a personal advantage or benefit as a result of a decision made by the University or a University-related body;

- b) when an ~~employee~~Employee accepts gifts, gratuities or favours from a person, body, enterprise or association engaged in or wishing to engage in transactions with the University, except in the case of minor or customary gifts, gratuities or favours of a trivial or nominal value that do not place and do not have the appearance of placing the recipient under any obligation and/or do not give the impression that there is a purpose or attempt to influence any decision;
- c) ~~iii)~~ — when an ~~employee~~Employee uses ~~his/her~~their position to help a person or body, enterprise or association in dealings with the University in a situation which gives rise to real or perceived preferential treatment from the perspective of a reasonably well informed and impartial person;
- d) when an ~~employee~~Employee is engaged in or begins a romantic or sexual relationship with a Student when they are or may reasonably be expected to become responsible for teaching, advising, allocating resources or supervising the Student or, more generally, is or may reasonably be expected to be in a position to exercise authority over the Student;
- ~~e)~~e) when an Employee uses information obtained in the performance of ~~his/her~~their duties and responsibilities as an ~~employee~~Employee which is not generally communicated to the public for ~~his/her~~their own advantage or benefit, or for the advantage or benefit of a ~~related party~~Related Party;
- ~~e)f)~~e)f) when an ~~employee~~Employee uses or allows to be used, directly or indirectly, the University's goods or services for activities other than those approved by the University for ~~his/her~~their own advantage or benefit, or for the advantage or benefit of a ~~related party~~Related Party.

Supervision of ~~immediate relatives~~Immediate Relatives

~~CODE OF ETHICS AND SAFE DISCLOSURE POLICY APPLICABLE TO
EMPLOYEES OF CONCORDIA UNIVERSITY
POLICY ON CONFLICT OF INTEREST~~

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3. An ~~immediate relative~~Employee shall not ~~be hired to work in the same department hire~~ nor ~~report to the same supervisor as a current employees~~supervise an Immediate Relative unless:
- a) specific provisions of a collective agreement apply. ~~In such cases, the acknowledgement provided for below shall be completed and placed in the employee's personnel file;~~ or
 - ~~the immediate relative is a student and the employment is for a period of less than six (6) months; or~~
 - b) it is specifically authorized, in writing under exceptional circumstances, by the Associate Vice-President, Human Resources following consultation with the relevant officials, stakeholders. The authorization shall be in writing and shall be placed in the Employees' personnel file.
4. For any exception mentioned in section 3, an acknowledgement of the Conflict of Interest shall be completed by the Immediate Relative and the current Employee and shall be placed in the employee's~~Employees'~~ personnel file, and shall include an acknowledgement by the immediate relative and the current employee of the potential conflict of interest and. It shall state their commitment to act with the highest degree of integrity, objectivity and professionalism. As well, the authorization, and shall outline the mechanism or measures that will be utilized to mitigate the potential conflict~~Conflict~~ of interest~~Interest~~, with particular reference to recommendations for evaluation, renewal, promotion, the handling of grievances and complaints, and termination.
5. Notwithstanding the above, employment situations that contravene ~~this article~~section 3, but that were in existence prior to June 23, 2011 (the initial effective date of this Policy₇) are excluded from the application of ~~this article~~section 3.

Disclosure and Management of Conflicts of Interest

6. All ~~or Perceived Conflict~~employees referred to in Appendix A must complete and submit a Conflict of Interest Disclosure Form within 30 days of joining the University and

~~CODE OF ETHICS AND SAFE DISCLOSURE POLICY APPLICABLE TO
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~~periodically, as set out in Appendix A, and/or whenever there is a significant change in appointment or circumstances.~~

- ~~7. An employee~~Unless sections 10 and 11 apply, an Employee shall immediately disclose to ~~his/her~~their immediate supervisor any ~~conflict of interest or perceived conflict~~Conflict of interest. ~~Interest they have or believe they may have.~~ When in doubt about a particular situation, ~~he/she~~they shall discuss it with ~~his/her~~their immediate supervisor prior to engaging in the activity in question.
- ~~7. The employee~~Employee and ~~the~~ immediate supervisor ~~shall agree in writing on a may also seek guidance from the General Counsel, who shall serve as a resource to help them identify a Conflict of Interest and shall provide, if requested, information regarding the application of this Policy.~~
8. ~~Unless sections 10 and 11 apply, the immediate supervisor, in consultation with the Employee, shall decide on the course of action to avoid or monitor or avoid the conflict, a the Conflict of Interest, and the Employee shall agree in writing. A copy of which~~the course of action agreed upon shall be placed in the ~~employee's~~Employee's personnel file and ~~which~~ shall be forwarded to the Secretary-General and the relevant Vice-President.
9. In the event that ~~an agreement cannot be reached,~~the ~~case shall be referred to~~Employee does not agree with the course of action set out by the immediate supervisor, the ~~Employee may contact~~ the Secretary-General for resolution. In such cases, the Secretary-General shall consult with the relevant Vice-President and any individual (including the relevant union or association ~~representatives~~, if appropriate) that ~~he/she deems~~they deem appropriate.
- ~~10. An employee may also seek guidance from the General Counsel, who shall serve as a resource to help him/her identify a conflict of interest or perceived conflict of interest. Moreover, the General Counsel shall provide information to an employee, upon his/her request, on any question regarding the application of the rules set out in this Code.~~
- ~~10. An Employee wishing to disclose a Conflict of Interest pursuant to the Guidelines shall do so by contacting the relevant Dean, the University Librarian, the Executive Director of the Center for Continuing Education or the relevant Vice-President.~~

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11. In the case of a disclosure pursuant to the Guidelines, the course of action to be taken shall be identified by the relevant authority as set out in section 10.

Mechanism for ~~Safe Disclosures~~Reporting Conflicts of ~~Wrongdoing~~Interest

12. ~~Any Director, Officer or employee of the University~~ Unless section 13 applies, any ~~Employee~~ who becomes aware of any ~~apparent conflict~~Conflict of ~~interest~~Interest or other ~~behavior~~behaviour in contravention of this ~~Code~~Policy by any ~~University employee~~other ~~Employee~~ may report the matter to ~~the President~~their immediate supervisor or unit head, as applicable, either in writing with the mention "Strictly confidential – To be opened by addressee only" or verbally.

13. Any report of Conflict of Interest made in good faith under this Policy against:

- a) an immediate supervisor or unit head shall be made to the Secretary-General or to the President;
- b) a Dean shall be made directly to the Secretary-General, who shall refer the matter to the relevant Vice-President;
- c) a Vice-President shall be made directly to the President; or
- d) the President shall be made directly to the Chair of the ~~Audit~~Governance and ~~Ethics~~ Committee.

The ~~of~~Employee may report the ~~Board of Governors,~~matter either in writing with the mention "Strictly confidential – To be opened by addressee only" or by leaving a voice mail message with ~~his/her~~their name and contact information in the appropriate private voice mail ~~of the President, the Secretary General or the Chair of the Audit Committee at the relevant number for that person,~~ as set ~~forth~~out in the Code of Ethics Disclosure Phone Line Information Page.Conflict of Interest Disclosure Phone Line Information Page.

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~~Any complaint against a Dean, a Chief Officer, a Vice President or the President shall be made directly to the Chair of the Audit Committee.~~

~~11.14. The complaint should be as~~ Recipient may, at their discretion, request a detailed as possible and include a written description of the conduct, dates, places, persons involved/witnesses, other individuals who have knowledge of the ~~behaviour~~ Conflict of Interest, relevant documentation, etc. so that a reasonable ~~investigation inquiry into the report of the Conflict of Interest~~ can be conducted.

~~12. If the complainant is not satisfied with the response of the President or the Secretary-General or for any reason whatsoever is not comfortable in approaching either individual, he/she may contact the Chair of the Audit Committee directly.~~

~~13.15. An investigation inquiry into the report of the Conflict of Interest shall be conducted by the President, the Secretary-General, the President, the Chair of the Audit Governance and Ethics Committee or a designated person or entity as the case may be designated by one of them.~~

~~16. The investigation inquiry shall be conducted with due regard to the sensitivity of the complaint information, and the investigator Recipient shall use reasonable efforts to protect the privacy of the complainant Employee who has made the report and the confidentiality of the investigation inquiry, to the extent consistent with a fair investigation. The investigation shall be completed within a reasonable amount of time, taking into account the circumstances, the content of the complaint, and the best interests of inquiry and subject to disclosure requirements in the context of legal or administrative proceedings.~~

~~14.17. In the event that any information or report is provided anonymously or without foundation, the University may, at its discretion, not act upon it.~~

~~18. If the information or report pertains to a matter that is pending or being adjudicated in an internal or external process, the Recipient may suspend the inquiry until the final resolution or end of such internal or external processes.~~

~~15.19. Information about the investigation shall be treated on a how the report of Conflict of Interest is managed is confidential basis and shared strictly and shall not be disclosed to~~

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~~anyone unless required by law or University policies or unless, in the opinion of the Secretary-General, it is appropriate to share it~~ with those who have a legitimate need for the information.

- ~~20. Provided that he/she/they acted in good faith, the identity of the individual an Employee who made the complaint reports a Conflict of Interest under this Policy shall not be disclosed unless he/she consents subject to retaliation or unless required by law discrimination or any threat thereof. This protection shall also extend to anyone providing information in connection with the report.~~

Non-compliance

- ~~16.21. the application~~ The failure of an Employee to comply with the provisions of this Policy may constitute a disciplinary offence under the relevant provision, contract, or collective or employment agreement.

- ~~17. The University will not threaten to or retaliate or discriminate, and will not permit any threat of or retaliation or discrimination against any individual making a complaint, in good faith, under this Code. This protection is also extended to anyone providing information in connection with an investigation. The procedure set out in the relevant University policy or collective or employee agreement shall be followed in cases of alleged reprisals.~~

- ~~18. All complaints, after they have been investigated, shall be reported to the Audit Committee at one of its regular meetings. The Committee shall review the conclusions of the investigator's report and, in the case of an investigation mandated by the Audit Committee directly, it shall recommend such corrective, disciplinary or other measures or actions as it deems appropriate.~~

Non-compliance

~~CODE OF ETHICS AND SAFE DISCLOSURE POLICY APPLICABLE TO
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~~The failure of an employee to comply with the provisions of this Code may constitute a disciplinary offence under the provision, contract or collective or employee agreement to which the employee is subject~~Policy Responsibility and Review

22. The overall responsibility for the implementation and recommended amendments to this Policy shall rest with the Secretary-General.

Approved by the Board of Governors on June 23, 2011 and amended on June 21, 2016 and [insert date].

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APPENDIX A

List of employees who must complete and submit the
Annual Conflict of Interest Disclosure Form

<u>Employees</u>	<u>Periodicity</u>
<u>President</u>	<u>Annually</u>
<u>Vice-Presidents, Secretary-General and Chief Officers appointed by the Board of Governors</u>	<u>Annually</u>

TBC

19. ~~Nothing in this Code shall replace or supersede any complaint, grievance or appeal procedure set out in any collective or employee agreement to which the University is a party.~~

Oversight

~~The Secretary General shall oversee and enforce the application of this Code.~~



**BOARD OF GOVERNORS
OPEN SESSION
Meeting of March 11, 2020**

AGENDA ITEM: Governance and Ethics Committee recommendation: Revisions to the *Code of Ethics and Professional Conduct applicable to Members of the Board of Governors and Members of Committees Established by the Board* (BD-10)

ACTION REQUIRED: For approval

SUMMARY: Further to review at its meeting held on January 23, 2020, the Governance and Ethics Committee is recommending Board approval of the revised code of ethics applicable to Board members.

BACKGROUND: The Governance and Ethics Committee is mandated to make recommendations to the Board regarding a code of ethics applicable to its members.

A review has been conducted of the codes of ethics applicable to various constituencies or sectors of the University to ensure that they are up to date with current legislation and practices and that they are consistent throughout their common elements, including their respective definitions of conflict of interest.

The majority of changes are of a housekeeping nature. The main substantive changes relate to updating definitions and providing further examples for greater clarity, in order to be in alignment with the revised *Policy on Conflict of Interest* (BD-4).

Clean and marked versions are attached.

DRAFT MOTION: That, on recommendation of the Governance and Ethics Committee, the Board of Governors approve the revisions to the *Code of Ethics and Professional Conduct applicable to Members of the Board of Governors and Members of Committees Established by the Board* (BD-10).

PREPARED BY:

Name: Danielle Tessier
Date: January 27, 2020

**CODE OF ETHICS AND PROFESSIONAL CONDUCT APPLICABLE TO
MEMBERS OF THE BOARD OF GOVERNORS AND MEMBERS
OF COMMITTEES ESTABLISHED BY THE BOARD**

Effective Date: [insert date]

Originating Office: Board of Governors

Supersedes/Amends: January 30, 2013

Policy Number: BD-10

SCOPE

This Code applies to all Members (as defined below).

PURPOSE

The purpose of this Code is to establish the rules of ethics and professional conduct applicable to the Members.

DEFINITIONS

For the purposes of this Code, the following definitions shall apply:

“Conflict of Interest” means a situation in which a Member, or their Related Party(ies), has a personal interest that conflicts or could conflict with the Member’s obligations to the University. The existence of a Conflict of Interest involves two elements:

- a) the Member’s or a Related Party’s personal interest(s); and
- b) the Member’s obligations to the University.

Personal interests may include business, commercial or financial interests, as well as relationships, private and career interests. A Member’s obligation to the University is to act in the University’s best interests, which includes acting in support of the University’s integrity and mission and avoiding circumstances that may undermine confidence and trust of the public, as well as the confidence and trust necessary between the University and the Members.

Conflicts of Interest may be actual or potential. An actual Conflict of Interest is a situation where the personal interest actually conflicts with the Member’s obligations to the University. A potential Conflict of Interest is a situation where the personal interest has not yet conflicted with the Member’s obligations to the University but might be expected to.

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A perceived Conflict of Interest is a situation where an actual or potential Conflict of Interest may or may not exist, but where there may be, nonetheless, from the perspective of a reasonably well informed and impartial person, a perception of a Conflict of Interest. This is sometimes referred to as an “apparent” Conflict of Interest.

“Internal Member” means any Member who represents one of the following constituencies of the University: full-time faculty, part-time faculty, permanent administrative and support staff, undergraduate students or graduate students.

“Member” means a member of the Board of Governors (the “Board”) of the University, of the Corporation or of a standing committee established by the Board, whether or not a member of such a standing committee is a member of the Board.

“Related Party” means a Member’s immediate relative (a spouse, child, parent, sibling or person with whom a Member has a personal/close relationship that is of primary importance in their life), or other person living in the same household, or any other person with whom the Member shares a financial interest, either directly or indirectly, or any entity in which the Member has an ownership interest.

CODE

Standard of Conduct

1. A Member shall conduct themselves in an ethical and professional manner. They shall honour the principles of collegiality and fairness, and comply with their duties and obligations with objectivity, care, integrity, loyalty, prudence and diligence to facilitate and foster the accomplishment of the University’s mission.

Situations of Conflicts of Interest

2. A Member shall comply with their duties and obligations, and act in such a manner as to avoid any Conflict of Interest. The interests of the University shall always prevail when a Member is in a situation of Conflict of Interest or when the personal interest of a Related Party places a Member in a situation of Conflict of Interest. The following, without limitation, are examples of Conflicts of Interest:

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- a) when a Member or a Related Party, whether directly or indirectly, has a personal interest in the outcome of deliberations of the Board, has a personal interest in a contract or a proposed contract to be entered into by the University or a University-related body, or obtains, or is likely to obtain, a personal advantage or benefit as a result of a decision made by the University or a University-related body;
- b) when a Member is a member of the board of directors or of the senior management personnel of a body, enterprise or association, whether public or private, whose interests may be in competition with those of the University;
- c) when a Member accepts gifts, gratuities or favours from a person, body, enterprise or association engaged in or wishing to engage in transactions with the University, except in the case of minor or customary gifts, gratuities or favours of a trivial or nominal value that do not place and do not have the appearance of placing the recipient under any obligation and/or do not give the impression that there is a purpose or attempt to influence any decision;
- d) when a Member uses their position to help a person or body, enterprise or association in dealings with the University in a situation which gives rise to real or perceived preferential treatment from the perspective of a reasonably well informed and impartial person;
- e) when a Member uses their position as a Member to seek, obtain or influence employment at the University for any persons (including the Member or any other person);
- f) when a Member uses information obtained in the performance of their duties and responsibilities as a Member which is not generally communicated to the public for their own advantage or benefit, or for the advantage or benefit of a Related Party;
- g) when a Member uses or allows to be used, directly or indirectly, the University's goods or services for activities other than those approved by the University for their own advantage or benefit, or for the advantage or benefit of a Related Party;

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- h) when a Member is a party to a legal proceeding, grievance or other legal demand or claim against the University.

Disclosure of Conflicts of Interest

3. Following the initial appointment of a Member, the Secretary-General shall provide such Member with a copy of this Code and request the completion of a [Conflict of Interest Disclosure Statement](#). The Secretary-General shall also request annual completion of the Disclosure Statement by all Members no later than September 30 of each year.
4. The Secretary-General shall ensure that copies of the completed Disclosure Statements are transmitted to the Chair of the Governance and Ethics Committee of the Board (the "Governance and Ethics Committee"). The information provided in the Disclosure Statements shall be kept confidential unless disclosure is required by law or by a legal authority having jurisdiction.
5. The filing of the initial and annual Disclosure Statements shall not discharge a Member from their obligation under this Code to disclose Conflicts of Interest on an on-going basis as and when they arise.

Management of Conflicts of Interest

6. A Member shall have primary responsibility for the identification and management of their Conflicts of Interest. A Member may seek guidance from the Secretary-General who shall serve as a resource to help them identify a Conflict of Interest. Moreover, the Secretary-General shall advise a Member, upon their request, on any question regarding the application of the rules set out in this Code.
7. When a situation of Conflict of Interest not disclosed in the Disclosure Statement arises, a Member shall:
 - a) disclose same in writing, as soon as reasonably possible, to the Secretary-General who shall ensure that a copy is transmitted to the Chair of the Governance and Ethics Committee. In the case of a disclosure by the Chair of the Governance and

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Ethics Committee, a copy of the disclosure shall be transmitted to the Chair of the Board;

- b) abstain from participating in any discussion or decision involving that person, body, enterprise or association; and
 - c) withdraw from any meeting for the duration of the discussion or vote to decide such matter.
8. Any Member shall resign their position as a Member if their role as a member of a body, enterprise or association, whether public or private, doing business with the University serves as a source of continuing Conflict of Interest in a such a way as to impede their role as a Member.
9. Any Internal Member shall withdraw from any meeting for the duration of a discussion or vote to decide any matter concerning negotiations relating to a collective agreement or a collective labour contract which governs the University's personnel. However, this shall not prevent that Internal Member from expressing an opinion on general measures relating to conditions of employment within the University which would also apply to them.

Respect of Confidentiality

10. A Member, while in office as well as after having left office, shall be bound to respect the confidentiality of information or documents obtained in their capacity as a Member, as well as the confidentiality of all deliberations and decisions that took place in closed session meetings of the Board and meetings of committees established by the Board, unless the information or documents have entered the public domain or were released by virtue of applicable legislation or by order of a legal authority having jurisdiction.

Use of Information

11. A Member, while in office as well as after having left office, shall not make use of any information obtained in their capacity as a Member in order to derive a personal benefit or advantage therefrom or for a Related Party, except for information that has entered the

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public domain or that is required to be released in virtue of applicable legislation or by order of a legal authority having jurisdiction.

12. A Member, while in office as well as after having left office, who holds information with respect to a procedure, a negotiation or other operation to which the University is a party shall not give advice nor act in the name or on behalf of someone else concerning such procedure, negotiation or other operation, unless the information has entered the public domain or was released in virtue of applicable legislation or by order of a legal authority having jurisdiction.

Procedure in Case of Non-Compliance

13. If there are reasonable grounds to believe that an infringement to this Code has occurred, any Member or the Secretary-General may request the Governance and Ethics Committee to examine or inquire into any allegations to that effect. In such a case:
- a) the Member requesting that the situation be brought to the attention of the Governance and Ethics Committee shall notify the Secretary-General in writing;
 - b) upon receiving such notification, the Secretary-General shall prepare a dossier and forward it to the Chair of the Governance and Ethics Committee and to all the parties concerned;
 - c) the Governance and Ethics Committee shall allow all the parties concerned to be heard and to state their case, in accordance with the rules of natural justice, which comprise two elements:
 - i. *Audi alteram partem* - the duty to give persons affected by a decision a reasonable opportunity to be heard;
 - ii. *Nemo iudex in causa sua debet esse* - the duty to reach a decision untainted by bias.

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- d) after hearing the parties, the Governance and Ethics Committee shall prepare written, reasoned and signed recommendations, which shall be forwarded to the Board; and
- e) the Board shall deliberate on, and dispose of, in a closed session meeting the said recommendations of the Governance and Ethics Committee. Any proposed action or sanction to be taken pursuant to the said recommendations shall be voted upon by secret ballot.

Sanctions

- 14. Should a Member fail to comply with the duties and obligations stipulated in this Code, the Board, on the recommendation of the Governance and Ethics Committee, shall have the power to do one or more of the following:
 - a) issue a warning, a reprimand or a finding of misconduct;
 - b) suspend the Member for a period of time; or
 - c) remove the Member from the Board or the committee established by the Board in accordance with the provisions set out in the University By-Laws.

Policy Responsibility and Review

- 15. The overall responsibility for implementing and recommending amendments to this Code shall rest with the Governance and Ethics Committee, and the Secretary-General shall be responsible for the administration of this Code.

Approved by the Board on February 18, 1998 and amended on February 4, 2010, January 30, 2013 and [insert date].



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OF COMMITTEES ESTABLISHED BY THE BOARD

Effective Date: ~~January 30, 2013~~ [insert date]
Board of Governors

Originating Office:

Supersedes/Amends: ~~February 4, 2010~~ January 30, 2013

Policy Number: -BD-10

SCOPE

This Code applies to all Members (as defined below).

PURPOSE

The purpose of this Code is to establish the rules of ethics and professional conduct applicable to the ~~members of the Board of Governors (the "Board") of Concordia University (the "University") and of the Corporation (the "Corporation") as well as to members of standing committees established by the Board~~ Members.

SCOPE

~~This Code applies to all members of the Board and of the Corporation and to all members of standing committees established by the Board.~~

DEFINITIONS

For the purposes of this Code, the following definitions shall apply:

~~"conflict of interest"~~ Conflict of Interest means a situation ~~wherein which~~ wherein a Member, ~~or their Related Party(ies),~~ or their Related Party(ies), has a personal interest, ~~whether direct or indirect, which he/she is aware of and which is sufficient to put into question the independence, impartiality and objectivity that he/she is obliged to exercise in the performance of his/her~~ conflicts or could conflict with the

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Member's obligations to the University. The existence of a Conflict of Interest involves two elements:

- a) the Member's or a Related Party's personal interest(s); and
- b) the Member's obligations to the University.

Personal interests may include business, commercial or financial interests, as a Member well as relationships, private and career interests. A Member's obligation to the University is to act in the University's best interests, which includes acting in support of the University's integrity and mission and avoiding circumstances that may undermine confidence and trust of the public, as well as the confidence and trust necessary between the University and the Members.

Conflicts of Interest may be actual or potential. An actual Conflict of Interest is a situation where the personal interest actually conflicts with the Member's obligations to the University. A potential Conflict of Interest is a situation where the personal interest has not yet conflicted with the Member's obligations to the University but might be expected to. A perceived Conflict of Interest is a situation where an actual or potential Conflict of Interest may or may not exist, but where there may be, nonetheless, from the perspective of a reasonably well informed and impartial person, a perception of a Conflict of Interest. This is sometimes referred to as an "apparent" Conflict of Interest.

"Internal Member" means any Member who represents one of the following constituencies of the University: -full-time faculty, part-time faculty, permanent administrative and support staff, undergraduate students or graduate students.

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“Member” means a member of the Board ~~or of Governors (the “Board”)~~ of the University, of the Corporation or of a standing committee established by the Board, whether or not a member of such a standing committee is a member of the Board.

~~“perceived conflict of interest” means a situation where a Member, while not in a conflict of interest, appears to have, in the opinion of a reasonably informed and well advised person, a personal interest that is sufficient to put into question the independence, impartiality and objectivity which he/she is obliged to exercise in the performance of his/her obligations as a Member.~~

~~“personal interest” means the personal, private or financial interest of a Member or a related party.~~

~~“related party”~~ “Related Party” means a Member’s immediate ~~family member (relative (a spouse, child, parent or sibling), or a~~ or person with whom a Member has a personal/close relationship that is of primary importance in their life), or other person living in the same household, or any other person with whom the Member shares a financial interest, either directly or indirectly, or any entity in which the Member has an ownership interest.

CODE

General Duties and Obligations of Members

1. ~~Standard of Conduct~~

1. A Member ~~has a duty to observe the highest standards of personal~~ shall conduct themselves in an ethical and professional ~~conduct manner. They shall honour the principles of collegiality and fairness,~~ and to make decisions in the best interests of the

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~~University. He/she shall fulfill his/her~~comply with their duties and obligations with ~~impartiality, independence~~objectivity, care, integrity, loyalty, prudence and diligence to facilitate and foster the accomplishment of the University's mission. ~~A Member shall act responsibly and in good faith, with transparency, objectivity, care and integrity. In his/her handling of all issues, he/she is expected to honour the principles of collegiality and fairness.~~

Situations of Conflicts of Interest or Perceived Conflicts of Interest

2. ~~2.~~—————A Member shall ~~perform his/her~~comply with their duties and obligations, and act in such a manner as to avoid any ~~conflict of interest or perceived conflict of interest.~~Conflict of Interest. The interests of the University shall always prevail ~~wherewhen~~ a Member is in a situation of ~~conflict of interest or perceived conflict of interest, or where~~Conflict of Interest or when the personal interest of a ~~related party~~Related Party places a Member in a situation of ~~conflict of interest or perceived conflict of interest.~~Conflict of Interest. The following, without limitation, are examples of ~~conflicts of interest or perceived conflicts of interest~~Conflicts of Interest:
- a) ~~i)~~—————when a Member or a ~~related party~~Related Party, whether directly or indirectly, has a personal interest in the outcome of deliberations of the Board, has a personal interest in a contract or a proposed contract to be entered into by the University or a University-related body, or obtains, or is likely to obtain, a personal advantage or benefit as a result of a decision made by the University or a University-related body;
 - b) ~~ii)~~—————when a Member is a member of the ~~Board~~board of ~~Directors~~directors or of the senior management personnel of a body, enterprise or association, whether

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public or private, whose interests may be in competition with those of the University;

- c) when a Member accepts gifts, gratuities or favours from a person, body, enterprise or association engaged in or wishing to engage in transactions with the University, except in the case of minor or customary gifts, gratuities or favours of a purely trivial or nominal value that do not place and do not have the appearance of placing the recipient under any obligation and/or do not give the impression that there is a purpose or attempt to influence any decision;
- d) ~~iv)~~ — when a Member uses his/her/their position to help a person or body, enterprise or association in dealings with the University in a situation which gives rise to real or perceived preferential treatment from the perspective of a reasonably well informed and impartial person;
- e) when a Member uses their position as a Member to seek, obtain or influence employment at the University for any persons (including the Member or any other person);
- ~~e)~~ f) when a Member uses information obtained in the performance of his/her obligations/their duties and responsibilities as a Member which is not generally communicated to the public for his/her/their own advantage or benefit, or for the advantage or benefit of a related party/Related Party;
- ~~f)~~ g) when a Member uses or allows to be used, directly or indirectly, the University's goods or services for activities other than those approved by the University for his/her/their own advantage or benefit, or for the advantage or benefit of a related party/Related Party;

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g)h) when a Member is a party to a legal proceeding, grievance or other legal demand or claim against the University.

~~Conflict~~Disclosure of Conflicts of Interest~~-Disclosure Statement~~

3. ~~3.~~ Following the initial appointment of a Member, the Secretary-General shall provide such Member with a copy of this Code and request the completion of a ~~Conflict of Interest Disclosure Statement.~~Conflict of Interest Disclosure Statement. The Secretary-General shall also request annual completion of the Disclosure Statement by all Members no later than September 30 of each year.
4. ~~4.~~ The Secretary-General shall ensure that copies of the completed Disclosure Statements are transmitted to the Chair of the Governance and Ethics Committee~~- of the Board (the "Governance and Ethics Committee").~~ The information provided in the Disclosure Statements shall be kept confidential unless disclosure is required by law or by a legal authority having jurisdiction.
5. ~~5.~~ The filing of the initial and annual Disclosure ~~Statement does~~Statements shall not discharge a Member from ~~his/her~~their obligation under this Code to disclose ~~conflicts~~Conflicts of ~~interest~~Interest on an on-going basis as and when they arise.

Management of Conflicts of Interest~~-or Perceived Conflicts of Interest~~

6. ~~6.~~ A Member ~~is expected to~~shall have primary responsibility for the identification and management of ~~his/her conflicts of interest or perceived conflicts of interest.~~their Conflicts of Interest. A Member may seek guidance from the Secretary-General who shall serve as a resource to help ~~him/her~~them identify a ~~conflict of interest or~~

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~~perceived conflict of interest.~~ Conflict of Interest. Moreover, the Secretary-General shall advise a Member, upon ~~his/her~~their request, on any question regarding the application of the rules set out in this Code.

7. ~~7. ———— Where~~When a situation of ~~conflict of interest or perceived conflict of interest~~Conflict of Interest not disclosed in the Disclosure Statement arises, a Member shall:
- a) disclose same in writing, as soon as reasonably possible, to the Secretary-General who shall ensure that a copy is transmitted to the Chair of the ~~Ethics and Governance~~ and Ethics Committee. -In the case of a disclosure by the Chair of the Governance and Ethics Committee, a copy of the disclosure shall be transmitted to the Chair of the Board;~~and~~
 - b) abstain from participating in any discussion or decision involving that person, body, enterprise or association; and
 - c) withdraw from any meeting for the duration of the discussion or vote to decide such matter.
8. ~~8. ————~~ Any Member shall resign ~~her/his~~their position as a Member if ~~her/his~~their role as a member of a body, enterprise or association, whether public or private, doing business with the University serves as a source of continuing ~~conflict~~Conflict of ~~interest~~Interest in a such a way as to impede ~~her/his~~their role as a Member.
9. ~~9. ————~~ Any Internal Member shall withdraw from any meeting for the duration of a discussion or vote to decide any matter concerning negotiations relating to a

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collective agreement or a collective labour contract which governs the University's personnel. ~~However, this does shall~~ not prevent that Internal Member from expressing an opinion on general measures relating to conditions of employment within the University which would also apply to ~~him/her~~them.

Respect of Confidentiality

10. ~~10.~~ ————A Member, while in office as well as after having left office, shall be bound to respect the confidentiality of information or documents obtained in ~~his/her~~their capacity as a Member, as well as the confidentiality of all deliberations and decisions that took place in closed session ~~-~~meetings of the Board and meetings of committees established by the Board, unless the information or documents have entered the public domain or were released by virtue of applicable legislation or by order of a legal authority having jurisdiction.

Use of Information

11. ~~11.~~ ————A Member, while in office as well as after having left office, shall not make use of any information obtained in ~~his/her~~their capacity as a Member in order to derive a personal benefit or advantage therefrom or for a ~~related party~~Related Party, except for information that has entered the public domain or that is required to be released in virtue of applicable legislation or by order of a legal authority having jurisdiction.
12. ~~12.~~ ————A Member, while in office as well as after having left office, who holds information with respect to a procedure, a negotiation or other operation to which the University is a party shall not give advice nor act in the name or on behalf of someone else concerning such procedure, negotiation or other operation, unless the information has

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entered the public domain or was released in virtue of applicable legislation or by order of a legal authority having jurisdiction.

Enforcement Mechanism

~~13. The Governance and Ethics Committee shall oversee and review the application of this Code, and the Secretary General shall be responsible for the administration of this Code.~~

Procedure in Case of Non-Compliance

13. If there are reasonable grounds to believe that an infringement to this Code has occurred, any Member or the Secretary-General may request the Governance and Ethics Committee to examine or inquire into any allegations to that effect. In such a case:
- a) the Member requesting that the situation be brought to the attention of the Governance and Ethics Committee shall notify the Secretary-General in writing;
 - b) upon receiving such notification, the Secretary-General shall prepare a dossier and forward it to the Chair of the Governance and Ethics Committee and to all the parties concerned;
 - c) the Governance and Ethics Committee shall allow all the parties concerned to be heard and to state their case, in accordance with the rules of natural justice; which comprise two elements:
 - i. Audi alteram partem - the duty to give persons affected by a decision a reasonable opportunity to be heard;

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ii. *Nemo iudex in causa sua debet esse* - the duty to reach a decision untainted by bias.

- d) after hearing the parties, the Governance and Ethics Committee shall prepare written, reasoned and signed recommendations, which shall be forwarded to the Board; and
- e) ~~v)~~ — the Board shall deliberate on, and dispose of, in a closed session meeting the said recommendations of the Governance and Ethics Committee. -Any proposed action or sanction to be taken pursuant to the said recommendations shall be voted upon by secret ballot.

Sanctions

- 14. ~~15.~~ — Should a Member fail to comply with the duties and obligations stipulated in this Code, the Board, on the recommendation of the Governance and Ethics Committee, shall have the power to do one or more of the following:
 - a) issue a warning, a reprimand or a finding of ~~blame; or~~ misconduct;
 - b) suspend the Member for a period of time; or
 - c) remove the Member from the Board or- the committee established by the Board in accordance with the provisions set out in the University By-Laws.

Policy Responsibility and Review



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15. The overall responsibility for implementing and recommending amendments to this Code shall rest with the Governance and Ethics Committee, and the Secretary-General shall be responsible for the administration of this Code.

Approved by the Board on February 18, 1998 and amended on February 4, 2010, January 30, 2013 and [insert date].



**BOARD OF GOVERNORS
OPEN SESSION
Meeting of March 11, 2020**

AGENDA ITEM: Governance and Ethics Committee recommendation: Adoption of the *Policy on University Policies* (SG-6)

ACTION REQUIRED: For approval

SUMMARY: Further to review at its meeting held on January 23, 2020, the Governance and Ethics Committee is recommending Board approval of a new policy guiding the review, development and approval of University policies.

BACKGROUND: The Governance and Ethics Committee is mandated to recommend governance rules and related policies for the conduct of the University's affairs.

This new Policy has been drafted based upon current practices and guidelines at the University as well as best governance practices following a review of similar policies at other Canadian universities.

It establishes a coordinated and consistent process for the review, development and approval of all official University policies and provides for definitions of what constitutes a University policy, standardizes and provides for policy templates and protocols and clarifies roles and responsibilities in policy development.

DRAFT MOTION: That, on recommendation of the Governance and Ethics Committee, the Board of Governors approve the *Policy on University Policies* (SG-6).

PREPARED BY:

Name: Danielle Tessier
Date: January 27, 2020

POLICY ON UNIVERSITY POLICIES

Effective Date: [insert date]

Approval Authority: Board of Governors

Supersedes /Amends: N/A

Policy Number: SG-6

PREAMBLE

The University is committed to maintaining and developing official University Policies (as defined below) that contribute to the achievement of its goals and priorities and that provide good governance, transparency, clarity and consistency in decision-making. Official University Policies reflect the institution's position, principles and standards on key issues.

SCOPE

This Policy applies to all Policy Owners (as defined below) and to all official University Policies. Policies limited in scope to specific academic or administrative units are not subject to this Policy.

PURPOSE

The purpose of this Policy is to support good governance by establishing a coordinated and consistent approach for revising, developing and approving University Policies.

DEFINITIONS

For the purposes of this Policy, the following definitions shall apply:

“Approval Authority” means the Board of Governors (the “Board”), Senate, the President or the relevant Vice-President (as defined below), as applicable.

“Editorial Revision” means housekeeping amendments to a University Policy, including:

- editing and formatting;
- adding gender-neutral and gender-inclusive language;
- correcting typographical or grammatical errors;
- modifying, adding or removing hyperlinks;

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- modifying, adding or removing references to internal positions, units and resources;
- modifying, adding or removing references to external institutions; and
- any other modification which, in the opinion of the Secretary-General, in consultation with the Chair of the Governance and Ethics Committee, is of a non-substantive nature.

“Mandated Committee” means a committee, other than a standing committee of the Board or Senate, which is struck or approved by the Board, Senate or the Secretary-General specifically to revise or develop a University Policy.

“Policy Owner” means the member of the senior administration or their delegate with responsibility for the subject matter contemplated in the University Policy. The Policy Owner is the primary subject matter expert and is responsible for revising, developing, implementing and the administration of the University Policy within their purview.

“Substantive Revision” means any amendment to a University Policy other than an Editorial Revision.

“University Policy” or “University Policies” means an official document which establishes principles and standards governing the administration and operation of the University as well as the conduct of University faculty, staff, students, visitors, providers and any other member of the University community, in accordance with legislative, regulatory and organizational requirements of the University. University Policies are under the jurisdiction of the Board, Senate, the President or the relevant Vice-President.

“Vice-President” means a Vice-President, the Secretary-General or a Chief Officer appointed by the Board.

POLICY

Revision and Development

1. The timing of the revision or development of University Policies shall be dynamic as circumstances such as new legislation, contractual obligations, political considerations and/or University initiatives drive the revision and development cycles. Revisions can be made following the review of a University Policy in accordance with section 26.

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2. Policy Owners shall inform the University Secretariat of their intention to revise an existing University Policy or to develop a new University Policy at the outset of any such initiative.
3. University Policies shall be presented in a standard format. Revised or new University Policies shall follow the official policy template which shall be provided and amended from time to time by the University Secretariat.
4. Policy Owners may develop procedures, handbooks, guidelines or other University Policy-related documents to help with the implementation of University Policies within their purview. The development, revision and approval process of these related documents shall be tailored to each University Policy.
5. Editorial Revisions shall be initiated by the Policy Owners or by the University Secretariat. If they are initiated by the University Secretariat, the University Secretariat shall report the Editorial Revisions to the Policy Owners. Editorial Revisions shall be documented by the University Secretariat.
6. Substantive Revisions shall normally be initiated by the Policy Owners. When appropriate, the University Secretariat shall advise Policy Owners that Substantive Revisions are required.
7. The Policy Owners shall conduct the required internal and/or external consultation depending upon the scope, the nature and the subject matter of the University Policy as well as the circumstances giving rise to its revision or development. The consultation process may vary depending upon the stakeholders, University By-Laws as well as external legal constraints.
8. The revision or development of University Policies which have an overarching scope or an application across the University shall involve many stakeholders and shall normally call for the creation of Mandated Committees.
9. When appropriate, the Policy Owners shall develop and maintain mechanisms to update the University community regarding University Policies under revision or development and provide a means for gathering feedback.

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10. Prior to being formally approved, University Policies shall be reviewed by the University Secretariat, including Legal Services, to ensure compliance with respect to its structure and format as well as for clarity and consistency with legislation and other University Policies.

Approval Process

11. University Policies shall formally be approved by an Approval Authority.
12. University Policies that fall under the mandate of the Board in accordance with the University's Charter or By-Laws, or which are considered of sufficient importance because they deal with high risk factors or highly sensitive matters, shall be approved by the Board. A standing committee of the Board shall normally review such University Policies before they are presented for Board approval.
13. University Policies that fall under the mandate of Senate in accordance with the University's By-Laws shall be approved by Senate. A standing committee of Senate shall normally review such University Policies before they are presented for Senate approval.
14. When Mandated Committees are established to revise or develop University Policies, such University Policies shall not normally require review by a standing committee of the Board or of Senate before they are presented for Board or Senate approval.
15. All other University Policies, which do not fall under section 12 or 13, that are of a general administrative or operational nature which fall under the general delegation of the day-to-day administration of the University shall be approved by the President or the relevant Vice-President, following review and recommendation from the President's executive team, when applicable.
16. Editorial Revisions of University Policies do not require any formal approval, but remain subject to the requirements set forth in sections 2 and 5.
17. Substantive Revisions of University Policies shall be formally approved by the appropriate Approval Authority.
18. Revision to existing University Policies and new University Policies shall become effective upon approval of the Approval Authority.

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Abrogation

19. Policy Owners shall inform the University Secretariat of their intention to abrogate a University Policy at the outset of any such initiative. When the Approval Authority which initially approved a University Policy abrogates such University Policy, unless otherwise specified, the abrogation shall take effect immediately.

Dissemination

20. Once the original version of a University Policy is approved and translated, in a timely manner, the University Secretary shall post it on the [University website](#).
21. When required, the posting shall be timed with a communication rollout created by University Communication Services to help disseminate revised or new University Policies. The scope of the rollout shall depend upon the nature and importance of the University Policy. Additional and/or targeted dissemination may occur when a revised or new University Policy must be brought to the specific attention of faculty, staff and/or students.
22. Policy Owners shall oversee the communication, implementation, training, administration and interpretation of the University Policies within their purview.
23. Members of the University community shall be responsible for familiarizing themselves and complying with University Policies.

Maintenance and Administration

24. University Policies shall be centrally maintained by the University Secretariat.
25. Notwithstanding what is provided for in section 1, Policy Owners shall review the University Policies within their purview every 5 years or in accordance with the timeline indicated in the respective University Policies. If no amendments are required, the *status quo* shall be maintained. If amendments are required, the revision shall be conducted in accordance with this Policy.
26. Guidelines, procedures, handbooks, other policies and other policy-related documents that are set outside the scope of this Policy may not contradict University Policies. In the

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event of any conflict or contradiction between the provisions of such guidelines, procedures, handbooks, policies or other policy-related documents and the provisions of any University Policy, the provisions of the University Policy shall prevail.

27. In the event of any conflict or contradiction between the provisions of an existing collective agreement and the provisions of any University Policy, the provisions of the collective agreement shall prevail.
28. In the event of any conflict or contradiction between the provisions of the English version and the French version of any University Policy, the provisions of the originally approved University Policy shall prevail.
29. This Policy does not have a retroactive application. All revisions to existing University Policies and all new University Policies approved following the approval of this Policy shall be revised or developed in accordance with this Policy.

Policy Responsibility and Review

30. The overall responsibility for the implementation and recommended amendments to this Policy shall rest with the Secretary-General.

Approved by the Board of Governors on [insert date].



**BOARD OF GOVERNORS
Open Session
Meeting of March 11, 2020**

AGENDA ITEM: Governance and Ethics Committee recommendation: Adoption of the *Policy on the Conferral of the Emeriti Title by the Board of Governors (SG-7)*

ACTION REQUIRED: For approval

SUMMARY: As a follow-up from the December 11, 2019 Board meeting, at its meeting held on January 23, 2020, the Governance and Ethics Committee reviewed the process and criteria to award the Emeriti title and is presenting a recommendation for Board approval.

BACKGROUND: The By-Laws set out that the Board of Governors approves the conferral of the titles of Governor, Chancellor and President Emeritus, on recommendation of the Governance and Ethics Committee of the Board.

The criteria were approved by the Board in March 1989 as follows:

Governor Emeritus

The Board adopted a mechanism for recognizing retiring members of the Board of Governors who have given outstanding service to the University. Such recognition would not be forthcoming to all retiring members of the Board; it would be limited instead to those who in the judgment of their peers, have provided active and distinguished service to the University in their capacity as members of the Board. The criteria adopted by the Board for awarding the title of Governor Emeritus are as follows:

- 1. Have served on the Board of Governors for the equivalent of two full terms or six years;*
- 2. Have taken an active interest in the affairs of the University and in the activities of the Board of Governors; and*
- 3. During the individual's tenure of office as a Governor of the University, have made a significant contribution to the life and development of the University.*

Chancellor Emeritus and President Emeritus

The title of Chancellor Emeritus or President Emeritus is bestowed by the Board based on the individual's outstanding contributions and longstanding service to the University.

Research conducted into practices of other Quebec and Canadian universities indicates the following:

- All universities which confer the Emeritus title do so in recognition of outstanding, exemplary or exceptional service. In other words, this title is awarded to few.
- Only one university (Queen's) requires that the conferral be approved a minimum of one year following retirement. Because this is not common practice, and based upon the overall sentiment voiced by Governors in response to the concern raised at the

December Board meeting, members of the Governance and Ethics Committee agreed that this element not been included in the Policy.

It is also proposed to have the process and criteria enshrined into a proper policy in replacement of the March 1989 Board resolution.

DRAFT MOTION: That, on recommendation of the Governance and Ethics Committee, the Board of Governors approve the *Policy on the conferral of the Emeriti title by the Board of Governors (SG-7)*.

PREPARED BY:

Name: Danielle Tessier
Date: January 27, 2020

**POLICY ON THE CONFERRAL OF THE EMERITI TITLE BY
THE BOARD OF GOVERNORS**

Effective Date: month X, XXXX

Originating Office: Board of Governors

Supersedes /Amends: N/A

Policy Number: SG-7

PREAMBLE

The designation of Emeriti indicates that an eligible individual is retired or has left the institution and retains the title as an honor. It recognizes exemplary service to Concordia University (the “University”) as President and Vice-Chancellor (“President”), Chancellor or member of the Board of Governors (“Governor”).

SCOPE

This Policy applies to all individuals having occupied the position of President, Chancellor and Governor. The conferral of the title of Professor Emeriti and Distinguished Professor Emeriti are not subject to this Policy.

PURPOSE

The purpose of this Policy is to set out the mechanism and criteria for conferring the Emeriti title.

POLICY

1. Conferral by the Board of Governors (the “Board”) of the Emeriti title shall not be forthcoming to all retiring Presidents, Chancellors or Governors. It shall be limited to those who, in the judgment of the Board, have provided active and distinguished service to the University.
2. The Board may confer the Emeriti title to honor former Presidents, Chancellors and Governors in recognition of their outstanding service to the University.
3. Recommendations for conferral of the Emeriti title shall be submitted to the Board by the Governance and Ethics Committee of the Board, as set out in the University By-Laws.

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4. The Board may confer the Emeriti title to honor former Presidents and Chancellors who have completed at least one full term of office in recognition of their exceptional service to the University during their term of office.
5. The Board may confer the Emeriti title to honor former Governors who have served no less than 6 years on the Board in recognition of their exceptional service during their service as Governor.
6. Exceptional service shall have been demonstrated by active participation and engagement in the affairs of the University and in the activities of the Board, and by significant contribution to the life and development of the University.
7. The Emeriti title shall be purely honorific and shall not carry with it any entitlement to authority, rights, resources or privileges, other than the privilege to participate as a member of the platform party at all convocation and installation ceremonies.
8. The term for an appointment under this Policy shall be for the life of the individual, unless otherwise specified in the resolution of the Board conferring the title.
9. A list of all individuals holding this title shall be maintained by the University Secretariat.
10. The overall responsibility for implementing and recommending amendments to this Policy shall rest with the Secretary-General.

Approved by the Board of Governors on _____.



**BOARD OF GOVERNORS
OPEN SESSION
Meeting of March 11, 2020**

AGENDA ITEM: Audit Committee recommendation: Adoption of the *Policy on Employee Disclosure of Wrongdoings* (BD-16)

ACTION REQUIRED: For approval

SUMMARY: Following review at its meeting held on February 6, 2020, the Audit Committee is recommending that the Board adopt a stand-alone policy on employee whistleblowing.

BACKGROUND: The mechanism for employees to report wrongdoings was originally included in the *Code of Ethics and Safe Disclosure Policy applicable to Employees of Concordia University* (BD-4), adopted by the Board in 2011. Pursuant to the adoption of *An Act to facilitate the disclosure of wrongdoings relating to public bodies* in 2016, the University established a *Procedure to Facilitate Employee Disclosure of Wrongdoings*, posted as a related document to BD-4.

Further to a review of BD-4, the mechanism for reporting wrongdoings has been removed from BD-4, and that mechanism together with the aforementioned Procedure have essentially been rewritten as a new policy, with a few housekeeping updates, thereby providing for greater transparency and clarity.

The draft Policy is attached together with a marked version which compares the new Policy to the previous Procedure.

DRAFT MOTION: That, on recommendation of the Audit Committee, the Board of Governors adopt the *Policy on Employee Disclosure of Wrongdoings* (BD-16).

PREPARED BY:

Name: Danielle Tessier
Date: February 8, 2020

POLICY ON EMPLOYEE DISCLOSURE OF WRONGDOINGS

Effective Date: [insert new date]

Originating Office: Office of the
Secretary-General

Supersedes /Amends: N/A

Policy Number: BD-16

SCOPE

This Policy applies to all Employees (as defined below) of the University.

PURPOSE

The present Policy creates the framework for Employees acting in good faith to disclose Wrongdoings (as defined below) within the University pursuant to [*An Act to facilitate the disclosure of wrongdoings relating to public bodies, CQLR. chapter D-11.1*](#) (the “Act”).

DEFINITIONS

For the purposes of this Policy, the following definitions shall apply:

“Collaborator” means any person who participates in providing information during any stage of a disclosure under this Policy.

“Designated Official” (“D.O.”) means the person who acts as the central point of contact with regard to all matters related to this Policy and is responsible for receiving and treating the disclosure of Wrongdoings by Employees at the University in accordance with this Policy.

“Employee” means:

- a) an employee (includes, but is not limited to, any full-time, part-time or temporary employee of the University, including staff, faculty, postdoctoral fellows, researchers, members of the administration, stagiaires and interns) who discloses an actual or suspected Wrongdoing pursuant to this Policy; and
- b) a Governor, Director and/or Officer of the University who discloses an actual or suspected Wrongdoing pursuant to this Policy.

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“Wrongdoing” means:

- a) a violation of any federal or provincial law or regulation;
- b) a serious breach of standards of ethics and professional conduct;
- c) a misuse of funds or property of the University, including the funds or property it manages or holds for others;
- d) gross mismanagement within the University including an abuse of authority;
- e) any act or omission that seriously compromises or may seriously compromise a person’s health or safety or the environment; or
- f) directing or counselling a person to commit a Wrongdoing described in any of paragraphs a) to e).

Wrongdoings do not fall under this Policy if they are disclosed for personal gain or purposes other than the public interest (e.g., when the subject-matter pertains solely to a condition of employment of the person making the disclosure). Similarly, the present Policy will not apply to a disclosure where the purpose is to question the merits of the policies, programs and/or objectives of the University.

POLICY

Disclosing an actual or suspected Wrongdoing

1. Any Employee who has reasonable grounds to believe that a Wrongdoing has been committed or is about to be committed can make a disclosure to either the D.O. or the Public Protector as follows:
 - a) To the D.O.
 - i. By completing the form in Appendix A and sending via secure email link or returning it to the D.O. in a sealed envelope with the mention “*Strictly confidential – to be opened by addressee only*”; or

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- ii. By making a disclosure by telephone to the D.O. and speaking with the D.O. directly and/or leaving a confidential voice message with information pertaining to the Wrongdoing.

The name and the coordinates of the D.O. are available in Appendix B.

- b) To the Public Protector

Direction des enquêtes sur les divulgations en matière d'intégrité publique
Protecteur du citoyen
800, place D'Youville, 18e étage
Québec (Québec) G1R 3P4
Phone : 1 844 580-7993 (toll-free within Québec)
Fax : 1 844 375-5758 (toll-free within Québec)
Secured forms available at: <https://divulgation.protecteurducitoyen.qc.ca>

Determining the admissibility and treatment of the disclosure

2. Upon receipt and review of a disclosure, the D.O. shall determine the admissibility and treatment of the disclosure and may:
 - a) Forward the disclosure to the Public Protector if the D.O. judges that the Public Protector is better suited to deal with the disclosure, in which case, and where possible, the D.O. will notify the Employee accordingly;
 - b) Conduct an investigation; or
 - c) Put an end to the examination of the disclosure if:
 - i. the alleged Wrongdoing is the subject of court proceedings or relates to a decision by a court;
 - ii. the subject-matter of the disclosure does not fall within the D.O.'s mandate;
 - iii. the disclosure is made for personal purposes and not in the public interest;

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- iv. the subject-matter of the disclosure questions the merits of the policies, programs and/or objectives of the University;
 - v. the disclosure is frivolous; or
 - vi. in the opinion of the D.O., too much time has elapsed since the events or facts disclosed. Normally, disclosure should occur within 1 year from the date of the alleged Wrongdoing.
3. If the D.O. deems that the disclosure can be received and treated in accordance with another law, regulation or University policy or procedure, the D.O. shall inform the Employee of such option(s).
 4. When putting an end to the processing of a disclosure at this stage, the D.O. shall send a notice, with reasons, to the Employee.
 5. At any time during the process, the D.O. may forward the necessary information to prosecute an offence under a law to a body responsible for the prevention, detection or repression of crimes or statutory offences, including a police force or a professional order. If the disclosure reveals information that should be reported to the Anti-Corruption Commissioner, then the D.O. shall provide the information pursuant to the [Anti-Corruption Act, CQLR, chapter L-6.1](#).
 6. The D.O. shall, throughout the investigation process and beyond, take all necessary measures to preserve the confidentiality of the Employee's identity and/or any Collaborator's identity as well as all information disclosed.
 7. If a disclosure is made anonymously, the D.O. may transfer the disclosure to the Public Protector, unless it is deemed inadmissible in accordance with section 2 a).

Delays

8. The D.O. shall process the disclosure in accordance with the following delays:
 - a) Written acknowledgement of receipt of the disclosure to the Employee sent normally within 5 working days from the receipt by the D.O. of the disclosure;

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- b) Render a decision on the admissibility of a disclosure normally, within 15 working days from the date of the disclosure;
- c) Conduct and conclude the investigation, normally within 6 months of the date of the disclosure;
- d) Investigations which, in the opinion of the D.O., are unusually complex may require extensions of the delays indicated above.

Investigation

- 9. If the disclosure is admissible and has not been transferred to the Public Protector, the D.O. shall investigate and collect relevant documentation pertaining to the allegations of Wrongdoing.
- 10. When appropriate in the course of investigating the disclosure, the D.O. may direct the disclosure to be treated by the appropriate University unit and/or in accordance with the relevant policy or agreement.
- 11. The D.O. shall take all the necessary measures to protect the confidentiality and the identity of the person who is the object of the disclosure while the investigation is in progress.
- 12. The D.O. shall share with the person who is the object of the disclosure any information necessary to allow that person to understand the nature of, and respond to, the allegations made. However, such sharing of information shall not reveal the identity of the Employee or any person who is a Collaborator.
- 13. The person who is the object of the disclosure may be accompanied by a member of the University community during any meeting or any interview with the D.O.
- 14. Over the course of the investigation, the Employee or Collaborator may freely share with the D.O. any information alleging that a Wrongdoing has been, or is about to be committed including:

POLICY ON EMPLOYEE DISCLOSURE OF WRONGDOINGS

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- a) any information that could normally be subject to restrictions regarding the communication of information under an [*Act respecting the protection of personal information in the private sector, CQLR, chapter P-39.1*](#) and under an [*Act respecting Access to documents held by public bodies and the Protection of personal information, CQLR, chapter A-2.1*](#), except at section 33;
 - b) any information that could normally be subject to any other restriction under a law or any obligation of confidentiality or of loyalty that may bind a person, in particular with respect to his employer or, where applicable, his client. This includes the lifting of professional privilege, with the exception of the privilege related to lawyers and notaries.
15. The D.O. shall inform the President of the steps taken following the receipt of a disclosure, without revealing the names of the individuals concerned, unless, in the D.O.'s opinion, such disclosure would be inappropriate in the circumstances.

Decision of the D.O.

16. Following the investigation, the D.O. shall determine next steps based upon the findings.
- a) If a Wrongdoing has occurred, the D.O.:
 - i. shall inform the President and, as necessary, the appropriate unit so that corrective measures may be taken.
 - ii. shall inform the Employee that the investigation is completed and, if deemed appropriate, may inform the Employee of follow-up given to the disclosure.
 - iii. may transfer the relevant information to the appropriate external bodies such as the police force or the Anti-Corruption Commissioner;
 - b) If no Wrongdoing has occurred, the D.O. shall:
 - i. terminate the processing of the disclosure and will send a notice, with reasons, to the Employee.

POLICY ON EMPLOYEE DISCLOSURE OF WRONGDOINGS

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Protection from reprisals

17. All Employees and Collaborators who have, in good faith, made a disclosure or cooperated in an investigation conducted on the basis of a disclosure shall be protected from reprisals.
18. The following acts are presumed to be reprisals: dismissal, suspension or displacement, as well as any disciplinary action which affects employment or working conditions. Such action or threat of reprisal in connection with the disclosure of a Wrongdoing or collaboration in an investigation conducted as a result of such disclosure, constitutes a prohibited practice within the meaning of section 122 of the [Act respecting labour standards, CQLR, chapter N-1.1](#).
19. An Employee who believes that they have been the victim of a reprisal must file a complaint with the *Commission des normes, de l'équité, de la santé et de la sécurité du travail* (CNESST) within 45 days of the reprisal of which they complain or must contact their union.

Final Provisions

20. Nothing in this Policy precludes an Employee from availing themselves of any other University policy including, but without limitation, the *Policy on Conflict of Interest* ([BD-4](#)).
21. This Policy applies to the implementation of the applicable provisions of the Act at the University and must be interpreted accordingly. In the event of any conflict between this Policy and the Act, the latter shall prevail.

Policy Responsibility and Review

22. The overall responsibility for implementing and recommending amendments to this Policy shall rest with the Secretary-General.

Approved by the Board of Governors on [insert date].

In accordance with the *Policy on Employee Disclosure of Wrongdoings (BD-16)*

Complete the form, providing all the required information. Once completed, email it to internal.audit@concordia.ca or send it to the Designated Official (D.O.) in a sealed envelope marked "Strictly confidential - to be opened by addressee only" by mail or in person:

Designated Official – Disclosure of Wrongdoings
Director, Internal Audit
1455 De Maisonneuve Blvd. W., Room GM-1030
Montreal, QC, H3G 1M8

IDENTIFICATION

First name

Last name

Are you a Concordia Employee?

Yes

No

If not, you may contact the Public Protector directly.

Note that Employee as defined in the Policy means, but is not limited to, any full-time, part-time or temporary employee of the University, including staff, faculty, postdoctoral fellows, researchers, members of the administration, stagiaires and interns as well as any Governor, Director or Officer of the University.

CONTACT INFORMATION FOR CONFIDENTIAL COMMUNICATION

Indicate and provide the most confidential method of contacting you from among the following:

Telephone

Permission to leave a message? Yes No

Email

Mailing address

PERSON(S) SUBJECT OF THE DISCLOSURE

First name

Last name

Title

Contact details

Concordia Employee
(as defined above)

First name

Last name

Title

Contact details

Concordia Employee
(as defined above)

First name

Last name

Title

Contact details

Concordia Employee
(as defined above)

DESCRIPTION OF THE FACTS

Describe the facts or events which you believe constitute a possible or actual Wrongdoing:

Indicate the type of Wrongdoing (from among options 1 to 6 listed below) that may or have occurred.

1 2 3 4 5 6

1. A violation of any federal or provincial law or regulation;
2. A serious breach of the standards of ethics and professional conduct;
3. A misuse of funds or property of the University, including the funds or property it manages or holds for others;
4. Gross mismanagement within the University including an abuse of authority;
5. Any act or omission that seriously compromises or may seriously compromise a person's health or safety or the environment; or
6. Directing or counselling a person to commit a wrongdoing described in any of paragraphs 1 to 5.

Describe potential consequences, if applicable, on the health and safety of persons of the Concordia community, or the environment:

If the act has not yet been committed, describe how it can be prevented?

DATE AND LOCATION OF OCURRENCE OF WRONGDOING

Date	From	To
Repeated Wrongdoing. Give details:		
Place		

OTHER PERSONS INVOLVED OR WITNESSES

First name	Last name	Title
Contact details		<input type="checkbox"/> Concordia Employee
Role (e.g., witness, participant, etc.)		
First name	Last name	Title
Contact details		<input type="checkbox"/> Concordia Employee
Role (e.g., witness, participant, etc.)		

OTHER INFORMATION

Evidence or documents in your possession, if any (attach and/or describe):		
Steps taken prior to disclosing (e.g., consulting a manager, union representative or other)		
If you have a concern about possible reprisals following this disclosure, please describe:		
Any other information that could be useful in dealing with the disclosure:		
First name	Last name	Title
Contact details		<input type="checkbox"/> Concordia Employee
Role (e.g., witness, participant, etc.)		

APPENDIX B

Name and coordinates of the Designated Official

Name:

Kathleen Lizé

Coordinates:

Designated Official –Disclosure of Wrongdoings
Director, Internal Audit
1455 De Maisonneuve Blvd. W., Room GM-1030
Montréal, QC, H3G 1M8
Telephone: (514) 848-2424 ext. 4810
Email address : Internal.Audit@concordia.ca

POLICY ON EMPLOYEE DISCLOSURE OF WRONGDOINGS
PROCEDURE TO FACILITATE EMPLOYEE DISCLOSURES OF WRONGDOINGS

Last updated: July 2017

Effective Date: [insert new date] Originating Office: Office of the Secretary-General

Supersedes /Amends: N/A Policy Number: BD-16

INTRODUCTION

SCOPE

The ~~present Procedure To Facilitate Employee Disclosures of Wrongdoings~~ (“~~Procedure~~”) is intended to facilitate Employee disclosures of wrongdoings, as defined below, under *An Act to facilitate the disclosure of wrongdoings relating to public bodies (SQ 2016, c 34)* (the “~~Act~~”). Pursuant to the ~~Act~~, the University hereby establishes a procedure in order to facilitate the process for individuals to come forth with any disclosure of wrongdoing that is in the public interest.

1. SCOPE AND DEFINITIONS

This ~~Procedure~~Policy applies to all Employees (as defined below) of the University.

PURPOSE

The ~~present directors, officers and employees and provides procedures for the reporting of wrongdoing~~, Policy creates the framework for Employees acting in good faith to disclose Wrongdoings (as defined below) within the University pursuant to *An Act to facilitate the disclosure of wrongdoings relating to public bodies, CQLR. chapter D-11.1* (the “~~Act~~”).

DEFINITIONS

For the purposes of this ~~Procedure~~, “~~Employee~~” refers to: Policy, the following definitions shall apply:

“Collaborator” means any person who participates in providing information during any stage of a disclosure under this Policy.

“Designated Official” (“D.O.”) means the person who acts as the central point of contact with regard to all matters related to this Policy and is responsible for receiving and treating the disclosure of Wrongdoings by Employees at the University in accordance with this Policy.

POLICY ON EMPLOYEE DISCLOSURE OF WRONGDOINGS

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“Employee” means:

- a) an ~~Employee~~employee (includes, but is not limited to ~~all~~, any full-time, part-time or temporary employee of the University, including staff, faculty, postdoctoral fellows, researchers, members of the administration ~~and~~, stagiaires and interns) who discloses an actual or suspected ~~wrongdoing~~Wrongdoing pursuant to this ~~Procedure~~.Policy; and
- b) a Governor, Director and/or Officer of the University who discloses an actual or suspected Wrongdoing pursuant to this Policy.

“Wrongdoing” refers to~~means:~~

- a) a violation of any federal or provincial law or regulation;
- b) a serious breach of standards of ethics and professional conduct;
- ~~b)c)~~ a misuse of funds or property of the University, including the funds or property it manages or holds for others;
- d) gross mismanagement within the University including an abuse of authority;
- ~~e)e)~~ any act or omission that seriously compromises or may seriously compromise a person’s health or safety or the environment; or
- ~~d)f)~~ directing or counselling a person to commit a ~~wrongdoing~~Wrongdoing described in any of paragraphs ~~1a)~~ to ~~5.e)~~.

Wrongdoings do not fall under this ~~Procedure~~Policy if they are disclosed for personal gain or purposes other than the public interest (e.g., when the subject-matter pertains solely to a condition of employment of the person making the disclosure). Similarly, the present ~~Procedure~~Policy will not apply to a disclosure where the purpose is to question the merits of the policies, programs and/or objectives of the University.

POLICY ON EMPLOYEE DISCLOSURE OF WRONGDOINGS

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~~“Collaborator” is defined as:~~

- ~~• any person who participates in providing information during any stage of a disclosure under this Procedure.~~

~~2. ROLES AND RESPONSIBILITIES~~

~~A Designated Official (the “D.O.”) acts as the central point of contact with regard to all matters related to this Procedure and is responsible for receiving and treating the disclosure of wrongdoings by Employees at the University in accordance with this Procedure.~~

~~3. PROCEDURE~~

POLICY

Disclosing an actual or suspected ~~wrongdoing~~ Wrongdoing

- Any Employee who has reasonable grounds to believe that a ~~wrongdoing~~ Wrongdoing has been committed or is about to be committed can make a disclosure to either the D.O. or the Public Protector as follows:

- To the D.O.:

~~D.O.’s name and coordinates:~~

~~Ms.~~

~~Kathleen Lizé, Director, Internal Audit, S-GM 1050 – Designated Official –
Disclosures of wrongdoing, 1455 de Maisonneuve West, GM1030, Montréal Québec,
H3G 1M8 (email: Internal.Audit@Concordia.ca)~~

- By completing the form ~~at Annex 1~~ in Appendix A and sending via secure email link or returning it to the D.O. in a sealed envelope with the mention “*Strictly confidential – to be opened by addressee only*”; -or
- By making a disclosure by telephone to the D.O. and speaking with the D.O. directly and/or leaving a confidential voice message with information pertaining to the ~~wrongdoing~~ Wrongdoing.

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[The name and the coordinates of the D.O. are available in Appendix B.](#)

- b) To the ~~public protector:~~ Public Protector

Direction des enquêtes sur les divulgations en matière d'intégrité publique
Protecteur du citoyen
800, place D'Youville, 18e étage
Québec (Québec) G1R 3P4
Phone : 1 844 580-7993 (toll-free within Québec)
Fax : 1 844 375-5758 (toll-free within Québec)
Secured forms available at:
~~www:~~ <https://divulgation.protecteurducitoyen.qc.ca>

4.2

Determining the admissibility and treatment of the disclosure

2. Upon receipt and review of a disclosure, the D.O. ~~will~~ shall determine the admissibility and treatment of the disclosure and may:

- a) Forward the disclosure to the Public Protector if the D.O. judges that the Public Protector is better suited to deal with the disclosure, in which case, and where possible, the D.O. will notify the Employee accordingly; ~~or~~
- b) Conduct an investigation; or
- c) Put an end to the examination of the disclosure if:
 - i. the alleged ~~wrongdoing~~ Wrongdoing is the subject of court proceedings or relates to a decision by a court; ~~z~~
 - ii. the subject-matter of the disclosure does not fall within the D.O.'s mandate; ~~z~~
 - iii. the disclosure is made for personal purposes and not in the public interest; ~~z~~
 - iv. the subject-matter of the disclosure questions the merits of the policies programs and/or ~~program~~ objectives of the University; ~~z~~

POLICY ON EMPLOYEE DISCLOSURE OF WRONGDOINGS

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v. the disclosure is frivolous; or

vi. in the opinion of the D.O., too much time has elapsed since the events or facts disclosed. Normally, disclosure should occur within ~~one~~1 year from the date of the alleged ~~wrongdoing~~Wrongdoing.

3. If the D.O. deems that the disclosure can be received and treated in accordance with another law, regulation or University policy or procedure, the D.O. shall inform the Employee of such option(s).

4. When putting an end to the processing of a disclosure at this stage, the D.O. ~~will~~shall send a notice, with reasons, to the Employee.

~~4.5.~~ At any time during the process, the D.O. may forward the necessary information to prosecute an offence under a law to a body responsible for the prevention, detection or repression of crimes or statutory offences, including a police force or a professional order. If the disclosure reveals information that should be reported to the Anti-Corruption Commissioner, then the D.O. ~~will~~shall provide the information pursuant to the ~~Anti-Corruption Act (CQLR c L-6.1)~~Anti-Corruption Act, CQLR, chapter L-6.1.

~~5.6.~~ The D.O. ~~must~~shall, throughout the investigation process and beyond, take all necessary measures to preserve the confidentiality of the Employee's identity and/or any Collaborator's identity as well as all information disclosed.

~~6.7.~~ If a disclosure is made anonymously, the D.O. may transfer the disclosure to the Public Protector, unless it is deemed inadmissible in accordance with section ~~4.2, as set out above~~2 a).

~~4.3~~ —

Delays

7.8. The D.O. ~~will~~shall process the disclosure in accordance with the following delays:

a) Written acknowledgement of receipt of the disclosure to the Employee sent normally within ~~five (5)~~ working days from the receipt by the D.O. of the disclosure;

POLICY ON EMPLOYEE DISCLOSURE OF WRONGDOINGS

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~~a)~~b) Render a decision on the admissibility of a disclosure normally, within ~~fifteen~~ ~~(15)~~ working days from the date of the disclosure;

c) Conduct and conclude the investigation, normally within ~~six (6)~~ months of the date of the disclosure;

~~b)~~d) Investigations which, in the opinion of the D.O., are unusually complex may require extensions of the delays indicated above.

~~4.4~~ —

Investigation

~~9.~~ 9. If the disclosure is admissible and has not been transferred to the Public Protector, the D.O. ~~will~~shall investigate and collect relevant documentation pertaining to the allegations of ~~wrongdoing~~Wrongdoing.

~~8.~~10. When appropriate in the course of investigating the disclosure, the D.O. may direct the disclosure to be treated by the appropriate University unit and/or in accordance with the relevant policy or agreement.

~~9.~~11. The D.O. ~~will~~shall take all the necessary measures to protect the confidentiality and the identity of the person who is the object of the disclosure while the investigation is in progress.

~~10.~~12. The D.O. ~~will~~shall share with the person who is the object of the disclosure any information necessary to allow that person to understand the nature of, and respond to, the allegations made. However, such sharing of information shall not reveal the identity of the Employee or any person who is a Collaborator.

~~11.~~13. The person who is the object of the disclosure may be accompanied by a member of the University community during any meeting or any interview with the D.O.

~~12.~~14. Over the course of the investigation, the Employee or Collaborator may freely share with the D.O. any information alleging that a ~~wrongdoing~~Wrongdoing has been, or is about to be committed including:

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a) any information that could normally be subject to restrictions regarding the communication of information under an ~~Act respecting the protection of personal information in the private sector (RLRQ, chapter P-39.1) and under an Act respecting Access to documents held by public bodies and the Protection of personal information (RLRQ, chapter A-2.1), except at article 33;~~ Act respecting the protection of personal information in the private sector, CQLR, chapter P-39.1 and under an Act respecting Access to documents held by public bodies and the Protection of personal information, CQLR, chapter A-2.1, except at section 33;

a)b) any information that could normally be subject to any other restriction under a law or any obligation of confidentiality or of loyalty that may bind a person, in particular with respect to his employer or, where applicable, his client. This includes the lifting of professional privilege, with the exception of the privilege related to lawyers and notaries.

~~13.15.~~ The D.O. ~~will~~ shall inform the President of the steps taken following the receipt of a disclosure, without revealing the names of the individuals concerned, unless, in the D.O.'s opinion, such disclosure would be inappropriate in the circumstances.

~~4.5~~ —

Decision of the D.O.

~~14.16.~~ Following the investigation, the D.O. shall determine next steps based upon the findings.

a) If a ~~wrongdoing~~ Wrongdoing has occurred, the D.O.:

~~Will~~

i. shall inform the President and, as necessary, the appropriate unit so that corrective measures may be taken.

~~Will~~

ii. shall inform the Employee that the investigation is completed and, if deemed appropriate, may inform the Employee of follow-up given to the disclosure.

~~May~~

iii. may transfer the relevant information to the appropriate external bodies such as the police force or the Anti-Corruption Commissioner;

b) If no ~~wrongdoing~~ Wrongdoing has occurred, the D.O. shall:

~~Terminate~~

POLICY ON EMPLOYEE DISCLOSURE OF WRONGDOINGS

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- i. terminate the processing of the disclosure and will send a notice, with reasons, to the Employee.

~~4.6~~

Protection from reprisals

~~17.~~ 17. All Employees and Collaborators who have, in good faith, made a disclosure or cooperated in an investigation conducted on the basis of a disclosure ~~are~~ shall be protected from reprisals.

~~15.~~ 18. The following acts are presumed to be reprisals: dismissal, suspension or displacement, as well as any disciplinary action which affects employment or working conditions. Such action or threat of reprisal in connection with the disclosure of a ~~wrongdoing~~ Wrongdoing or collaboration in an investigation conducted as a result of such disclosure, constitutes a prohibited practice within the meaning of ~~article 122 of the Act respecting labour standards,~~ section 122 of the Act respecting labour standards, CQLR, chapter N-1.1.

~~16.~~ 19. An Employee who believes that ~~he or she has~~ they have been the victim of a reprisal must file a complaint with the *Commission des normes, de l'équité, de la santé et de la sécurité du travail* (CNESST) within 45 days of the reprisal of which ~~he/she complains~~ they complain or must contact ~~his or her~~ their union.

Final Provisions

~~17.~~ 20. Nothing in this ~~procedure~~ Policy precludes an Employee from availing ~~him or herself~~ themselves of any other University policy including, but without limitation, the ~~Code~~ Policy on Conflict of Ethics and Safe Disclosure Policy Applicable to Employees of Concordia University (BD-4). ~~Interest (BD-4).~~

~~18.~~ 21. This ~~Procedure~~ Policy applies to the implementation of the applicable provisions of the Act at the University and must be interpreted accordingly. In the event of any conflict between this ~~Procedure~~ Policy and the Act, the latter shall prevail.

~~4.~~ CHANGES

Amendments

Policy Responsibility and Review

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~~19.22.~~ The overall responsibility for implementing and recommending amendments to this ~~Procedure may be made by~~ Policy shall rest with the Secretary-General.

Approved by the Board of Governors on [insert date].

In accordance with the *Policy on Employee Disclosure of Wrongdoings (BD-16)*

Complete the form, providing all the required information. Once completed, email it to internal.audit@concordia.ca or send it to the Designated Official (D.O.) in a sealed envelope marked "Strictly confidential - to be opened by addressee only" by mail or in person:

Designated Official – Disclosure of Wrongdoings
Director, Internal Audit
1455 De Maisonneuve Blvd. W., Room GM-1030
Montreal, QC, H3G 1M8

IDENTIFICATION

First name

Last name

Are you a Concordia Employee?

Yes

No

If not, you may contact the Public Protector directly.

Note that Employee as defined in the Policy means, but is not limited to, any full-time, part-time or temporary employee of the University, including staff, faculty, postdoctoral fellows, researchers, members of the administration, stagiaires and interns as well as any Governor, Director or Officer of the University.

CONTACT INFORMATION FOR CONFIDENTIAL COMMUNICATION

Indicate and provide the most confidential method of contacting you from among the following:

Telephone

Permission to leave a message? Yes No

Email

Mailing address

PERSON(S) SUBJECT OF THE DISCLOSURE

First name

Last name

Title

Contact details

Concordia Employee
(as defined above)

First name

Last name

Title

Contact details

Concordia Employee
(as defined above)

First name

Last name

Title

Contact details

Concordia Employee
(as defined above)

DESCRIPTION OF THE FACTS

Describe the facts or events which you believe constitute a possible or actual Wrongdoing:

Indicate the type of Wrongdoing (from among options 1 to 6 listed below) that may or have occurred.

1 2 3 4 5 6

1. A violation of any federal or provincial law or regulation;
2. A serious breach of the standards of ethics and professional conduct;
3. A misuse of funds or property of the University, including the funds or property it manages or holds for others;
4. Gross mismanagement within the University including an abuse of authority;
5. Any act or omission that seriously compromises or may seriously compromise a person's health or safety or the environment; or
6. Directing or counselling a person to commit a wrongdoing described in any of paragraphs 1 to 5.

Describe potential consequences, if applicable, on the health and safety of persons of the Concordia community, or the environment:

If the act has not yet been committed, describe how it can be prevented?

DATE AND LOCATION OF OCURRENCE OF WRONGDOING

Date	From	To
Repeated Wrongdoing. Give details:		
Place		

OTHER PERSONS INVOLVED OR WITNESSES

First name	Last name	Title
Contact details		<input type="checkbox"/> Concordia Employee
Role (e.g., witness, participant, etc.)		
First name	Last name	Title
Contact details		<input type="checkbox"/> Concordia Employee
Role (e.g., witness, participant, etc.)		

OTHER INFORMATION

Evidence or documents in your possession, if any (attach and/or describe):		
Steps taken prior to disclosing (e.g., consulting a manager, union representative or other)		
If you have a concern about possible reprisals following this disclosure, please describe:		
Any other information that could be useful in dealing with the disclosure:		
First name	Last name	Title
Contact details		<input type="checkbox"/> Concordia Employee
Role (e.g., witness, participant, etc.)		

APPENDIX B

Name and coordinates of the Designated Official

Name:

Kathleen Lizé

Coordinates:

Designated Official –Disclosure of Wrongdoings

Director, Internal Audit

1455 De Maisonneuve Blvd. W., Room GM-1030

Montréal, QC, H3G 1M8

Telephone: (514) 848-2424 ext. 4810

Email address : Internal.Audit@concordia.ca

~~ANNEX 1 — FORM — Procedure To Facilitate Employee Disclosures of Wrongdoings~~

Report of wrongdoing

in accordance with the Procedure to facilitate employee disclosures of wrongdoings

Fill out and print the form, (or send by secured link) providing all the required information. Once completed send it to the *D.O.*, by mail or in person (secured link) a sealed enveloped marked "Confidential" addressed to *Designated Official — Disclosures of Wrongdoings*, Director, Internal Audit, 1455 De Maisonneuve blvd W GM 1030, Mtl, Que, H3G 1M8.

IDENTIFICATION

First name	Last name
Are you a Concordia employee or a Director or Officer?	
<input type="checkbox"/> Yes — <input type="checkbox"/> No — If not, you may contact the Public Protector directly	
<small>Note that Employee as defined in the Procedure includes but is not limited to: faculty, administrative and support staff, postdoctoral fellows, members of the administration, interns, stagiaires, and researchers as well as directors or officers.</small>	

CONTACT INFORMATION FOR CONFIDENTIAL COMMUNICATION

Indicate and provide the most confidential method of contacting you from among the following.

Telephone	Permission to leave a message? <input type="checkbox"/> Yes <input type="checkbox"/> No
Email	
Mailing address	

PERSON(S) SUBJECT OF THE DISCLOSURE

First name	Last name	Title
Contact details		<input type="checkbox"/> Concordia employee (as defined above)
First name	Last name	Title
Contact details		<input type="checkbox"/> Concordia employee (as defined above)
First name	Last name	Title
Contact details		<input type="checkbox"/> Concordia employee (as defined above)

DESCRIPTION OF THE FACTS

Describe the facts or events which you believe constitute a possible or actual wrongdoing:

Indicate the type of wrongdoing (from among options 1 to 6 listed below¹) that may or have occurred?

DESCRIPTION OF THE FACTS (continued)

Potential consequences, if applicable, on the health and safety of persons of the Concordia community, or the environment:

If the act has not yet been committed, describe how it can be prevented?

DATE AND LOCATION OF OCURENCE OF WRONGDOING

Date:

- 1. _____ ¹a violation of any federal or provincial law or regulation;
- 2. _____ a serious breach of the standards of ethics and professional conduct;
- 3. _____ a misuse of funds or property of the University, including the funds or property it manages or holds for others;
- 4. _____ gross mismanagement within the University including an abuse of authority;
- 5. _____ any act or omission that seriously compromises or may seriously compromise a person's health or safety or the environment; or
- 6. _____ directing or counselling a person to commit a wrongdoing described in any of paragraphs 1 to 5.

<input type="checkbox"/> From:	_____	to:	_____
<input type="checkbox"/> Repeated wrongdoing. Give details:			
Place			

OTHER PERSONS INVOLVED OR WITNESSES

First name	Last name	Title
Contact details		<input type="checkbox"/> Concordia employee
Role (e.g., witness, participant, etc.)		
First name	Last name	Title
Contact details		<input type="checkbox"/> Concordia employee
Role (e.g., witness, participant, etc.)		
First name	Last name	Title
Contact details		<input type="checkbox"/> Concordia employee
Role (e.g., witness, participant, etc.)		

OTHER INFORMATION

Evidence or documents in your possession, if any (attach and/or describe):

Steps taken prior to disclosing (e.g., consulting a manager, union representative or other) :

If you have a concern about possible reprisals following this disclosure, please describe:

Any other information that could be useful in dealing with the disclosure:
