

 <b>BRANDON UNIVERSITY</b>	<b>Accessible Pre-Employment Practice</b>	<b>Approved and Administered by:</b> Human Resources
<b>Administrative Practice</b>	<b>First Implemented: 2021</b>	<b>Updated:</b>

Brandon University (“the University”) is committed to complying with the Accessibility Standard for Employment under The Accessibility for Manitobans Act. Our policies, practices and measures reflect principles of dignity, independence, integration and equal opportunity for people with disabilities. We aim to remove barriers in our workplace. If a barrier cannot be removed, we seek to provide reasonable accommodations to affected employees.

The following Practice statements, organizational practices and measures are intended to meet the requirements of Manitoba’s Accessibility Standard for Employment.

## 1.0 Scope

This Practice applies to all applicants to and employees, managers and administrators of the University. This Practice addresses pre-employment accessibility requirements.

## 2.0 Practice

### 2.1 Remove barriers to recruitment and selection.

#### Practice Statement:

During recruitment, by making the active offer, we inform potential applicants that reasonable accommodations are available during the selection process, and we respond to requests for accommodations.

#### Practices and Measures:

We include a statement on all job postings that reasonable accommodations are available to applicants with disabilities, and we seek their advice on how best to accommodate their needs. When making interview arrangements in writing or verbally, we inform applicants that reasonable accommodations are available during the assessment and selection processes.

*This document is available in an alternate format upon request.*

When an applicant has made a request for an accommodation during the selection process, we:

- Consult with the applicant to determine the appropriate accommodation.
- Put the appropriate accommodation in place during the assessment or selection process.

## **2.2      Mention workplace accommodations when offering employment.**

### **Practice Statement:**

When hiring, it is important to let candidates know that Brandon University supports removing barriers to employment. We inform selected applicants of our measures, policies and practices for accommodating employees with disabilities.

### **Practices and Measures:**

We include information about workplace accommodations in our new employee orientation materials.

## **3.0   Definitions**

**3.1   The Accessibility for Manitobans Act:** Under this legislation, the Government of Manitoba has mandated that public sector organizations, such as universities, help remove barriers by providing a more encouraging and welcoming environment for all students, faculty and staff.

**3.2   Manitoba Human Rights Code:** Provincial legislation that prohibits unreasonable discrimination in areas such as employment, housing, accommodation, the provision of services or contracts, and signs and notices.

**3.3   Accessibility:** Accessibility means giving people of all abilities opportunities to participate fully in everyday life. Accessibility refers to the ability to access and benefit from a system, service, product or environment. In achieving accessibility, the following principles must be considered:

**3.3.1 Access:** Persons should have barrier-free access to places, events and other functions that are generally available in the community;

**3.3.2 Equality:** Persons should have barrier-free access to those things that will give them equality of opportunity and outcome;

**3.3.3 Universal design:** Access should be provided in a manner that does not establish or perpetuate differences based on a person's disability;

**3.3.4 Systemic responsibility:** The responsibility to prevent and remove barriers rests with the person or organization that is responsible for establishing or perpetuating the barrier.

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- 3.4 Barriers:** Obstacles that limit access and prevent people with disabilities from fully participating in society. Most barriers are not intentional. Barriers usually arise because the needs of people with disabilities are not considered from the beginning. Barriers include, but are not limited to; attitudinal barriers, information or communications barriers, technological barriers, systemic barriers, or physical and architectural barriers.
- 3.5 Disability:** as defined in The Accessibility for Manitobans Act (AMA), disabilities may include, but are not limited to, blindness or visual impairment, deafness or hearing impairment, intellectual or developmental disabilities, mental health issues and chronic illness. Disabilities may be temporary or permanent.
- 3.6 Reasonable accommodation:** According to *The Manitoba Human Rights Code*, an accommodation is “reasonable” when there is an adequate process has taken place and the effort and measures taken are sufficient.
- 3.7 Accommodation:** includes but not limited to, a modification of job duties, technical aids or devices, workstation modifications, employment practice modifications, building and accessibility modifications, communication services, and alternate support services.
- 3.8 Duty to accommodate:** The duty to reasonably accommodate is often described in human rights law as “accommodation short of undue hardship”.
- 3.9 Undue hardship:** Undue hardship is defined as more than minimal hardship and must be based on actual evidence, not assumptions or prejudices. While financial implications tend to be a contributing factor in determining undue hardship, The Manitoba Human Rights Commission considers the nature, size and scope of an organization when determining if undue hardship is valid.
- 3.10 Active offer:** proactively advising applicants and candidates that the University endeavours to be accessible to all. The active offer promotes inclusivity and allows individuals to request an accommodation if needed.

#### **4.0 Accountability**

The Associate Vice-President, People and Talent (Human Resources) is responsible for the communication, administration and interpretation of this Practice.

#### **5.0 Review**

Formal review of this Practice will be conducted every three (3) years with the next scheduled review date January 2024. In the interim, this Practice may be revised or rescinded if the Associate Vice-President, People and Talent (Human Resources) deems necessary or if there are changes within legislation that require such.

This document is available in an alternate format upon request.

## **6.0 Related Policies**

**6.1** [Accessibility Policy](#)

**6.2** [Workplace Accommodation Policy](#)

## **7.0 Reference**

### **7.1 Sources**

**7.1.1** [Accessibility for Manitobans Act – Accessible Employment for the Public Sector](#)

### **7.2 Related documents:**

**7.2.1** [“A Guide to Faculty Recruiting”](#)

**7.2.2** [“Non-Academic Recruitment Guidelines”](#)

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Inquiries can be directed to Human Resources at [hr@brandonu.ca](mailto:hr@brandonu.ca)

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 <b>BRANDON UNIVERSITY</b>	<b>Accessible Employment Practices</b>	<b>Approved and Administered by:</b> Human Resources
<b>Administrative Practice</b>	<b>First Implemented: 2021</b>	<b>Updated:</b>

Brandon University (“the University”) is committed to complying with the Accessibility Standard for Employment under The Accessibility for Manitobans Act. Our policies, practices and measures reflect principles of dignity, independence, integration and equal opportunity for people with disabilities.

We aim to remove barriers in our workplace. If a barrier cannot be removed, we seek to provide reasonable accommodations to affected employees.

The following Practice statements, organizational practices and measures are intended to meet the requirements of Manitoba’s Accessibility Standard for Employment.

## 1.0 Scope

This Practice applies to all employees, managers and administration of the University. This Practice addresses employment accessibility requirements through the lifecycle of our employees.

## 2.0 Practice – Employment Accessibility Requirements

### 2.1 Inform employees about accommodation policies and practices.

#### Practice Statement:

To ensure all employees understand their right to an accommodation, the University is committed to timely communication and training related to accommodation measures, policies and practices.

#### Practices and Measures:

Information is made available to all employees through:

- Internal communications (email, interoffice mail)
- notices posted in staff breakrooms or in high traffic areas
- discussions with management and senior administration
- staff meetings

*This document is available in an alternate format upon request.*

## **2.2 Communicate in a way that meets employees' needs.**

### **Practice Statements:**

The University aims to meet the communication needs of our employees by providing workplace information and communications in ways that are easy to access for everyone. If requested by an employee with a temporary or permanent disability, we:

- Consult with the employee to identify the accessible formats or communication supports needed when providing information to the employee.
- Ensure that identified accessible formats or communication supports are used consistently when providing information to the employee.

### **Practices and Measures:**

To meet an employee's communication needs, the employee may identify what accessible format or communication support is most appropriate for them. We provide information to employees in multiple ways to meet diverse needs, such as posting information on notice boards and circulating information by email in accessible formats.

## **2.3 Provide individualized accommodation plans.**

### **Practice Statement:**

Brandon University's Workplace Accommodation Policy and Procedures support reasonable accommodations by developing and documenting individualized accommodation plans for employees with disabilities who require them.

### **Practices and Measures:**

The individualized accommodation plan includes:

- accessible formats and communication supports, if requested
- workplace emergency response information, if required
- details of how and when any other accommodations will be provided
- when the plan will be reviewed

Our employees will participate and cooperate in the accommodation process by:

- providing related information and taking part in assessments, if requested by the University
- complying with the individualized accommodation plan
- offering ongoing feedback related to modifications, including whether the accommodation continues to be required

Supervisors will review the accommodation plan regularly and as necessary based on the individual employee's situation as well as in combination with regular performance development and feedback meetings.

Supervisors will also review an employee's individualized accommodation plan, and update if required, when:

- the employee's workspace is modified or relocated
- the employee's responsibilities have changed
- other workplace changes have occurred that affect the accommodation

### **3.0 Request for an individualized accommodation plan**

Brandon University is committed to ensuring all employees have the opportunity to perform their work in a meaningful way and supports employees by providing reasonable accommodations in the workplace. Employees make either a verbal or written request to their manager, supervisor or Human Resources for an individualized accommodation plan. Our Workplace Accommodation Procedures document outlines this practice.

#### **3.1 Assessment of employee and accommodation required**

An employee's accommodation request is assessed and accommodation options are evaluated on an individual basis.

Employees may be required to provide documentation from a health practitioner to support the need for the accommodation.

The University may request, and cover costs for, an evaluation by an independent regulated health professional or other practitioner in the area of workplace accommodations for employees with disabilities.

#### **3.2 Assistance for the employee in developing the accommodation plan**

An employee may request assistance with developing the plan, including assistance from a representative of the union, if applicable, or another person who is knowledgeable about workplace accommodations for employees with disabilities.

#### **3.3 Accessible formats**

The University meets the communication needs of our employees by providing them with a copy of their plan, or an explanation for denying the request to introduce a plan, in a format and method appropriate to meets the needs of the employee.

### **3.4 Reasons for denying a request**

An employee's request for an individualized accommodation plan may be denied in the following circumstances:

- The employee is able to carry out most of the job without an accommodation.
- The independent health professional does not support the employee's self-assessed requirement for a workplace accommodation.
- Our research and evidence shows that the accommodation request would cause undue hardship (e.g., by creating safety risks to other employees or a significant measurable financial burden).

### **3.5 Maintaining privacy**

Brandon University is committed to maintaining employee privacy regarding accommodation plans and personal health information by following the practices outlined in **8.0 Maintain privacy** below.

## **4.0 Manage performance.**

We ensure our performance management process takes into account:

- that an employee may be temporarily or permanently disabled by one or more barriers in the workplace
- an employee's individualized accommodation plan
- that the accommodations provided for an employee may not fully address a workplace barrier

### **Practices and Measures:**

- Supervisors or managers meet with new employees within the first 90 days, at or near the six (6) month point in employment, and at least once annually to discuss progress, set goals and identify any challenges.

Existing or newly required workplace accommodations are discussed, including individualized accommodation plans and any assistance required during emergencies.

- Supervisors or managers speak with employees when they do not follow University Practice or meet expectations, and offer a verbal and written



warning of consequences, as outlined within the respective collective agreements.

- Supervisors or managers discuss existing workplace accommodations and propose modifications or new workplace accommodations if there is reason to suggest that this could help improve the performance of an employee with a disability.
- Prior to imposing disciplinary measures, supervisors or managers will consider whether there is a connection between concerns about job performance and workplace barriers.

## **5.0 Provide career development, training, internal advancement and reassignment.**

### **Practice Statements:**

The University supports career development, training, and opportunities for internal advancement or reassignment, and is committed to ensuring the process for recruiting and selecting candidates takes into account:

- that an employee may be temporarily or permanently disabled by one or more barriers in the workplace
- an employee's individualized accommodation plan
- that the workplace accommodation provided for an employee with a disability may not fully address the workplace barrier
- that our practices and measures aim to ensure that workplace accommodations do not negatively affect access to career development.

### **Practices and Measures:**

- We recruit and select candidates based on objective criteria, including current training, job experience, skills and knowledge.
- If a candidate has an individualized accommodation plan, we ensure it is adequate to address any barriers presented by the new opportunity, or we modify the plan accordingly.
- Our training opportunities for career development are accessible to all employees. If a barrier is identified, we attempt to remove or reduce it.

## **6.0 Put return to work processes in place.**

### **Practice Statements:**

Brandon University's return to work process reflects our commitment to providing a safe and healthy working environment for employees who are, or have been, absent from work due to a disability or health condition, and require reasonable accommodations to return to work.

We include a description of the process we will follow in determining the accommodations necessary to facilitate the return to work of employees who have been absent due to a disability or health condition.

Our return to work process ensures reasonable accommodations for employees who are at work or absent due to a disability or health condition. We will make efforts to modify employees' duties and work schedule based on their functional abilities.

Our aim is to increase duties safely to help employees reach their full potential.

### **Practices and Measures:**

- Human Resources and the supervisor (or designate) maintain communication with absent employees and either the Long Term Disability (LTD) benefit provider or the Workers Compensation Board of Manitoba (WCB) (where involved) throughout their recovery to help them maintain a connection with their workplace and to reinforce their value.
- The supervisor will offer meaningful and productive modified or alternate duties that are safe and within the employee's functional abilities.
- The supervisor will be flexible and will tailor the return to work plan to the employee's needs. A return to work plan is not restricted to having the employee return to their specific unit. Dependent upon the nature of the limitations, a returning employee may be assigned to another area on campus where tasks align with their restrictions during the gradual return to work. The supervisor would work with supervisors from other units as needed.
- Co-workers are expected to support employees who have been absent due to a disability, and participate in the return to work process.
- We educate staff on why returning to work is good for Brandon University and outline the expectations for supporting an employee in a modified role.
- We follow WCB's return to work process.

## **7.0 Provide workplace emergency response information.**

### **Practice Statements:**

Through our Health & Safety office, employees are notified of the steps to be taken during emergencies. This is to ensure the safety of employees who are temporarily or permanently disabled. Workplace emergency response planning is specific to each employee's needs and the physical nature of the employee's workspace.

Once we learn an employee requires assistance during a workplace emergency, we offer the employee individual workplace emergency response information as soon as possible.

We review the workplace emergency response information provided to an employee each time:

- the employee is moved to a different workspace
- the employee's workspace is modified
- we review our general emergency response plans and make changes that would affect the employee's response to an emergency in the workplace.

If an employee indicates through their workplace emergency response planning worksheet that they require the assistance of another person during an emergency, we obtain consent from the employee who will assist, and confirm with that person how to assist.

### **Practices and Measures:**

- Annually, email reminders are sent to all employees to inquire whether they need assistance during an emergency and to remind them of the office or building's emergency plan. This provides employees with the opportunity to update their existing plan, rescind a plan if no longer required, or provide a plan based on need.
- We regularly discuss general accessibility and identify barriers during Workplace Safety and Health meetings.
- In a situation where an employee cannot descend the stairs to exit the building during an evacuation, using their emergency response plan, we contact the person noted within the plan to remain with this employee.
- The designated person who acts as fire marshal will communicate with these employees during the emergency as stipulated in their emergency plan worksheet.

## **8.0 Maintain privacy.**

### **Practice Statements:**

We protect the privacy and confidentiality of employee's personal information and personal health information. We only collect, use, and disclose information as required for the purposes of the Accessibility Standard for Employment, unless otherwise agreed to by the employee.

We also follow the requirements of other privacy legislation, including the [Personal Information Protection and Electronic Documents Act \(PIPEDA\)](#), [The Freedom of Information and Protection of Privacy Act \(Manitoba\) \(FIPPA\)](#) and [The Personal Health Information Act \(PHIA\)](#).

### **Practices and Measures:**

We follow proper protocol when storing confidential employee information.

We protect our employees' personal information and personal health information at all times by retaining medical documentation in separate secure file storage and limiting access to Human Resources. Supervisors or managers may request information related to supporting an accommodation without having access to specific medical information.

## **9.0 Provide training.**

### **Practice Statements:**

Brandon University provides training on how to accommodate employees with a disability to staff responsible for:

- recruiting, selecting or training employees
- supervising, managing or coordinating the work of employees
- promoting, redeploying or terminating employees
- developing and implementing employment policies and practices.

Training content includes:

- how to make employment opportunities accessible to people with disabilities
- how to interact and communicate with applicants or employees who face barriers, use assistive devices, or are assisted by a support person or service animal

- an overview of The Accessibility for Manitobans Act, The Human Rights Code (Manitoba), and the Accessible Employment Standard
- Brandon University's accessible employment practices and measures, including updates or changes.

**Practices and Measures:**

- We train new employees and managers as soon as reasonably possible, within three (3) months after hiring.
- We provide refresher training regularly, including informing faculty and staff about updates to policies, practices and measures. Training is offered throughout the year and as needed or requested, including following updates.
- Supervisors and Human Resources maintain records of who has participated in training and when.

**10.0 Keep written record of accessibility and training policies.**

**Practice Statements:**

We keep a written record of our accessibility and training policies. Our written documents include a summary of the content of our training material and a list of dates when training is offered.

We let the public know that our policies are available upon request and we provide these in an alternate format that is accessible for the user.

**Practices and Measures:**

We will let the public know that our accessibility and training policies are available in the following ways:

- posted on the University website
- posted on bulletin boards in high traffic areas
- through employees and senior administration

We provide our policies within a reasonable timeframe and in a format that meets the needs of individuals with a disability, at no additional cost.

## 11.0 Definitions

- 11.1 The Accessibility for Manitobans Act:** Under this legislation, the Government of Manitoba has mandated that public sector organizations, such as universities, help remove barriers by providing a more encouraging and welcoming environment for all students, faculty and staff.
- 11.2 Manitoba Human Rights Code:** Provincial legislation that prohibits unreasonable discrimination in areas such as employment, housing, accommodation, the provision of services or contracts, and signs and notices.
- 11.3 Accessibility:** Accessibility means giving people of all abilities opportunities to participate fully in everyday life. Accessibility refers to the ability to access and benefit from a system, service, product or environment. In achieving accessibility, the following principles must be considered:
- 11.3.1 Access:** Persons should have barrier-free access to places, events and other functions that are generally available in the community;
  - 11.3.2 Equality:** Persons should have barrier-free access to those things that will give them equality of opportunity and outcome;
  - 11.3.3 Universal design:** Access should be provided in a manner that does not establish or perpetuate differences based on a person's disability;
  - 11.3.4 Systemic responsibility:** The responsibility to prevent and remove barriers rests with the person or organization that is responsible for establishing or perpetuating the barrier.
- 11.4 Barriers:** Obstacles that limit access and prevent people with disabilities from fully participating in society. Most barriers are not intentional. Barriers usually arise because the needs of people with disabilities are not considered from the beginning. Barriers include, but are not limited to; attitudinal barriers, information or communications barriers, technological barriers, systemic barriers, or physical and architectural barriers.
- 11.5 Disability:** as defined in The Accessibility for Manitobans Act (AMA), disabilities may include, but are not limited to, blindness or visual impairment, deafness or hearing impairment, intellectual or developmental disabilities, mental health issues and chronic illness. Disabilities may be temporary or permanent.
- 11.6 Reasonable accommodation:** According to *The Manitoba Human Rights Code*, an accommodation is "reasonable" when there is an adequate process has taken place and the effort and measures taken are sufficient.

**11.7 Accommodation:** includes but not limited to, a modification of job duties, technical aids or devices, workstation modifications, employment practice modifications, building and accessibility modifications, communication services, and alternate support services.

**11.8 Duty to accommodate:** The duty to reasonably accommodate is often described in human rights law as “accommodation short of undue hardship”.

**11.9 Undue hardship:** Undue hardship is defined as more than minimal hardship and must be based on actual evidence, not assumptions or prejudices. While financial implications tend to be a contributing factor in determining undue hardship, The Manitoba Human Rights Commission considers the nature, size and scope of an organization when determining if undue hardship is valid.

**11.10 Active offer:** proactively advising the candidate that the University endeavours to be accessible to all. The active offer promotes inclusivity and allows individuals to request an accommodation if needed.

**11.11 Performance management process:** any process used by an employer to manage the work of individual employees or to plan, monitor and review an employee's work objectives and overall contribution to the University.

**11.12 Return to work process:** a proactive way to help employees with disabilities and health conditions to stay at work or return to work as soon as it is safe to do so. This typically involves modifying and graduating employee duties and hours at work, according to their functional abilities. Also includes steps taken to assist an employee's gradual re-entry to their role at the University after either a short-term disability or a longer-term disability. The collaborative process involves the employee, their union (when appropriate), their supervisor and Human Resources.

## **12.0 Accountability**

The Associate Vice-President, People and Talent (Human Resources) is responsible for the communication, administration and interpretation of this Practice.

## **13.0 Review**

Formal review of this Practice will be conducted every three (3) years with the next scheduled review date January 2024. In the interim, this Practice may be revised or rescinded if the Associate Vice-President, People and Talent (Human Resources) deems necessary or if there are changes within legislation that require such.

## **14.0 Related Policies and Documents**

- 14.1 [Accessibility Policy](#)
- 14.2 [Workplace Accommodation Policy](#)
- 14.3 [Workplace Accommodation Procedures](#)
  - 14.3.1 [Accommodation Approval form](#)
  - 14.3.2 [Accommodation Denial form](#)
- 14.4 Accessible Pre-Employment Practice

## **15.0 Reference**

### **15.1 Sources**

- 15.1.1 [Accessibility for Manitobans Act – Accessible Employment for the Public Sector](#)
- 15.1.2 [Human Rights Code \(Manitoba\)](#)

### **15.2 Related documents:**

- 15.2.1 [Employee Emergency Response Worksheet](#)
- 15.2.2 [“A Guide to Faculty Recruiting”](#)
- 15.2.3 [“Non-Academic Recruitment Guidelines”](#)
- 15.2.4 [Personal Information Protection and Electronic Documents Act](#)
- 15.2.5 [The Freedom of Information and Protection of Privacy Act \(Manitoba\)](#)
- 15.2.6 [Personal Health Information Act \(Manitoba\)](#)

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 <b>BRANDON UNIVERSITY</b>	<b>Accessibility Policy</b>	<b>First Approved:</b> November 26, 2016
		<b>Updated:</b>
<b>Board of Governors Policy</b>	<b>Approved by</b> <i>Board of Governors</i> <b>Administered by</b> <i>President &amp; Vice-Chancellor</i> <i>through:</i> <i>Vice-President (Administration &amp; Finance), and</i> <i>Vice-President (Academic &amp; Provost)</i>	<b>Reviewed:</b>

This policy shall govern Brandon University as it supports and promotes accessibility for all members of the University community, including those with disabilities.

## 1.0 Scope

This policy applies to:

- All students (full-time, part-time), all employees (full-time, part-time, casual, contract) volunteers, and visitors to the campus.
- All other persons who provide goods, services or facilities on behalf of the University.

## 2.0 Policy

### 2.1 Purpose of Policy

The purpose of this policy is to:

- 2.1.1** Establish Brandon University's commitment to fostering a diverse, inclusive and accessible learning and working environment.
- 2.1.2** Ensure that Brandon University proactively meets its legal obligations based on the grounds protected by Manitoba provincial human rights law, *The Manitoba Human Rights Code*, and *The Accessibility for Manitobans Act* for all members of the University community, including those with disabilities.
- 2.1.3** Define the approach Brandon University will use to prevent, identify, and remove accessibility barriers.
- 2.1.4** Provide a clear outline of the obligations and responsibilities Brandon University is committed to fulfilling as well as to provide guidance for the implementation of this policy.

### 2.2 Statement of Intent

Brandon University recognizes the diversity of its students and employees and is committed to providing a learning and working environment in which all members of the University community are treated in a fair and equitable manner while respecting the inherent dignity of all people. It is the responsibility of each member of the Brandon University community, including faculty, staff, and students to play a part in creating an equitable and inclusive environment – in the identification and minimizing of barriers, and in the accommodation processes.

Brandon University is committed to identifying and removing accessibility-related barriers to create an inclusive and accessible environment. *The Accessibility for Manitobans Act (AMA)* mandates that public sector organizations, such as universities, help remove barriers by providing a more encouraging and welcoming environment for all students, faculty, staff and visitors. By promoting inclusion and diversity, Brandon University will also achieve higher levels of accessibility.

## **2.3 Accessibility Plan**

**2.3.1** The role of the Accessibility Plan is twofold:

- i. To examine Brandon University's working and learning environments to identify any circumstances where barriers exist; and,
- ii. To recommend the ways to eliminate or provide accommodations for navigating these barriers for students and/or employees within the limits of undue hardship.

**2.3.2 Framework for the Accessibility Plan:** The Accessibility Plan will examine the accessibility of products, processes, procedures, services, systems, structures and environments in the following areas:

- i. academic services for all students;
- ii. non-academic student support services for all students;
- iii. physical facilities used by or for use by students and/or employees, including individuals with disabilities;
- iv. Human Resources including recruitment of and service support for employees, including those with disabilities;
- v. equipment and adaptive technology for students and employees, including individuals with disabilities;
- vi. publications, communications and information resources for students and employees; and
- vii. awareness issues for students and employees on academic and workplace accommodation.

**2.3.3. Content of Accessibility Plan:** The Accessibility Plan will include:

- i. a report on the measures the University has taken to identify, prevent and remove barriers that disable people;
- ii. the measures the University intends to take in the period covered by the plan to identify, remove and prevent barriers that disable people;
- iii. the measures in place to ensure that the University assesses the following to determine their effect on the accessibility for persons disabled by barriers:
  - a. any proposed policies, programs, practices and services of the University,
  - b. any proposed enactments or by-laws that will be administered by the University; and
  - c. All other information prescribed for the purpose of the accessibility plan.

## **3.0 Definitions**

**3.1 *The Accessibility for Manitobans Act:*** Under this legislation, the Government of Manitoba has mandated that public sector organizations, such as universities, help remove barriers by providing a more encouraging and welcoming environment for all students, faculty and staff.

- 3.2 Manitoba Human Rights Code:** provincial legislation which prohibits unreasonable discrimination in areas such as employment, housing, accommodation, the provision of services or contracts, and signs and notices.
- 3.3 Accessibility:** Accessibility means giving people of all abilities opportunities to participate fully in everyday life. Accessibility refers to the ability to access and benefit from a system, service, product or environment.

In achieving accessibility, regard must be had for the following principles:

- 3.3.1 Access:** Persons should have barrier-free access to places, events and other functions that are generally available in the community;
  - 3.3.2 Equality:** Persons should have barrier-free access to those things that will give them equality of opportunity and outcome;
  - 3.3.3 Universal design:** Access should be provided in a manner that does not establish or perpetuate differences based on a person's disability;
  - 3.3.4 Systemic responsibility:** The responsibility to prevent and remove barriers rests with the person or organization that is responsible for establishing or perpetuating the barrier.
- 3.4 Barriers:** are obstacles that limit access and prevent people with disabilities from fully participating in society. Most barriers are not intentional. Barriers usually arise because the needs of people with disabilities are not considered from the beginning. Barriers include, but are not limited to; attitudinal barriers, information or communications barriers, technological barriers, systemic barriers, or physical and architectural barriers.
- 3.5 Disability:** as defined in *The Accessibility for Manitobans Act (AMA)*, disabilities may include, but are not limited to, blindness or visual impairment, deafness or hearing impairment, intellectual or developmental disabilities, mental health issues and chronic illness.
- 3.6 Undue hardship:** Undue hardship is defined as more than minimal hardship and must be based on actual evidence, not assumptions or prejudices. While financial implications tend to be a contributing factor in determining undue hardship, *The Manitoba Human Rights Commission* considers the nature, size and scope of an organization when determining if undue hardship is valid.

#### 4.0 Accountability

The Vice-President (Administration & Finance) and the Vice-President (Academic & Provost) are responsible for the communication, administration and interpretation of this policy. Both are responsible for advising the President and Vice-Chancellor that a formal review of this policy and secondary documents is required.

All members of the University community are responsible for complying with this policy.

#### 5.0 Secondary Documents

The Chief Human Resources Officer and Associate Vice President (Student Services & Enrollment Management) and University Registrar, or designate may approve procedures which are secondary to and comply with this policy.

## **6.0 Review**

- 6.1 Formal review of the policy will be conducted every three (3) years. The next scheduled review date for this policy is January 2020.
- 6.2 In the interim, this policy may be revised or rescinded if the Board of Governors deems necessary or if there are changes within legislation which require such.
- 6.3 If this policy is revised or rescinded, all secondary documents will be reviewed as soon as reasonably possible to ensure that they:
  - 6.3.1 Comply with the revised policy; or
  - 6.3.2 Are in turn rescinded.

## **7.0 Previous Policies**

- 7.1 This policy supersedes all previous Board/Senate policies on the subject matter herein;  
and
- 7.2 All previous administration policies on the subject matter contained herein.

## **8.0 Cross Reference**

### **8.1 Sources**

- 8.1.1 Manitoba Human Rights Commission  
<http://www.manitobahumanrights.ca/index.html>
- 8.1.2 Manitoba Human Rights Code  
<http://web2.gov.mb.ca/laws/statutes/ccsm/h175e.php>
- 8.1.3 The Accessibility for Manitobans Act  
[http://www.accessibilitymb.ca/pdf/accessibility\\_for\\_manitobans\\_act.pdf](http://www.accessibilitymb.ca/pdf/accessibility_for_manitobans_act.pdf)
- 8.1.4 Disability Issues Office <http://www.gov.mb.ca/dio/>
- 8.1.5 York University
- 8.1.6 University of Manitoba

### **8.2 Documents**

- 8.2.1 *How to Create Your Accessibility Plan*

 <b>BRANDON UNIVERSITY</b>	<b>Workplace Accommodation Policy</b>	<b>First Approved:</b> November 26, 2016
		<b>Updated:</b>
<b>Board of Governors Policy</b>	<b>Approved by</b> <i>Board of Governors</i> <b>Administered by</b> <i>President &amp; Vice-Chancellor</i> <i>through:</i> <i>Vice-President (Administration &amp; Finance),</i> <i>Vice-President (Academic &amp; Provost) and</i> <i>Chief Human Resources Officer</i>	<b>Reviewed:</b>

This policy shall govern Brandon University as it supports and promotes the employment of persons with disabilities by providing accommodation in employment for those with disabilities.

## 1.0 Scope

This policy applies to:

- All Brandon University employees, including faculty, staff, student assistants and research assistants, and
- Job applicants to the University who may require employment accommodation through the recruitment, selection and hiring processes.

## 2.0 Policy

### 2.1 Purpose of Policy

The purpose of this policy is to establish Brandon University's commitment to providing workplace accommodations for its employees as required, based on the grounds protected by Manitoba's provincial human rights law, *The Manitoba Human Rights Code*.

This policy will provide a clear outline of the obligations and responsibilities Brandon University is committed to fulfilling as well as to provide guidance for the implementation of this policy.

### 2.2 Statement of Intent

Brandon University recognizes the diversity of its employees and is committed to providing a work environment in which all members of the University community are treated in a fair and equitable manner. The University acknowledges its responsibility to remove barriers for its employees in accordance with *The Accessibility for Manitobans Act*. Under this legislation, the Government of Manitoba has mandated that public sector organizations, such as universities, help remove barriers by providing a more encouraging and welcoming environment for all students, faculty and staff. By promoting inclusion and diversity, Brandon University will also achieve higher levels of accessibility.



### 3.0 Definitions

- 3.1 *The Accessibility for Manitobans Act:*** Under this legislation, the Government of Manitoba has mandated that public sector organizations, such as universities, help remove barriers by providing a more encouraging and welcoming environment for all students, faculty and staff.
- 3.2 *Manitoba Human Rights Code:*** provincial legislation which prohibits unreasonable discrimination in areas such as employment, housing, accommodation, the provision of services or contracts, and signs and notices.
- 3.3 *Disability:*** as defined in *The Accessibility for Manitobans Act (AMA)*, disabilities may include, but are not limited to, blindness or visual impairment, deafness or hearing impairment, intellectual or developmental disabilities, mental health issues and chronic illness.
- 3.4 *Reasonable accommodation:*** According to *The Manitoba Human Rights Code*, an accommodation is "reasonable" when there is an adequate process has taken place and the effort and measures taken are sufficient.
- 3.5 *Accommodation:*** includes but not limited to, a modification of job duties, technical aids or devices, workstation modifications, employment practice modifications, building and accessibility modifications, communication services, and alternate support services.
- 3.6 *Duty to accommodate:*** The duty to reasonably accommodate is often described in human rights law as "accommodation short of undue hardship".
- 3.7 *Undue hardship:*** Undue hardship is defined as more than minimal hardship and must be based on actual evidence, not assumptions or prejudices. While financial implications tend to be a contributing factor in determining undue hardship, The Manitoba Human Rights Commission considers the nature, size and scope of an organization when determining if undue hardship is valid.
- 3.8 *Barrier:*** an obstacle or circumstance that inhibits or prevents someone from being able to perform their duties. Barriers can be attitudinal, communication, informational, technological, systemic or physical.
- 3.9 *Discrimination:*** treating someone differently, to their disadvantage and without a valid reason or failing to take steps to accommodate special needs that are based on the characteristics covered under *The Code*.
- 3.10 *Systemic discrimination:*** Systemic discrimination has been defined as "practices or attitudes that have, whether by design or impact, the effect of limiting an individual's or a group's right to the opportunities generally available because of attributed rather than actual characteristics."
- 3.11 *Bona fide occupational requirement:*** establishes a requirement that is necessary for proper or efficient performance of a job.
- 3.12 *Service Animal:*** an animal trained to assist a person with a disability. The assistance performed by a service animal must be directly related to the person's physical or mental disability. A service animal is not a pet.

### 4.0 Accountability

The Vice-President (Administration & Finance) is responsible for the communication, administration and interpretation of this policy. The Vice-President (Academic & Provost) supports the communication, administration and interpretation of this policy.

The Vice-President (Administration & Finance) is responsible for advising the President and Vice-Chancellor that a formal review of this policy and secondary documents is required. The Chief Human Resources Officer is a point of contact for reference and advice.

## **5.0 Secondary Documents**

The Chief Human Resources Officer or designate may approve procedures which are secondary to and comply with this policy.

## **6.0 Review**

- 6.1 Formal review of the policy will be conducted every three (3) years. The next scheduled review date for this policy is January 2020.
- 6.2 In the interim, this policy may be revised or rescinded if the Board of Governors deems necessary or if there are changes within legislation which require such.
- 6.3 If this policy is revised or rescinded, all secondary documents will be reviewed as soon as reasonably possible to ensure that they:
  - 6.3.1 Comply with the revised policy; or
  - 6.3.2 Are in turn rescinded.

## **7.0 Previous Policies**

- 7.1 This policy supersedes all previous Board/Senate policies on the subject matter herein; and
- 7.2 All previous administration policies on the subject matter contained herein.

## **8.0 Cross Reference**

### **8.1 Sources**

- 8.1.1 Manitoba Human Rights Commission  
<http://www.manitobahumanrights.ca/index.html>
- 8.1.2 Manitoba Human Rights Code  
<http://web2.gov.mb.ca/laws/statutes/ccsm/h175e.php>
- 8.1.3 The Accessibility for Manitobans Act  
[http://www.accessibilitymb.ca/pdf/accessibility\\_for\\_manitobans\\_act.pdf](http://www.accessibilitymb.ca/pdf/accessibility_for_manitobans_act.pdf)
- 8.1.4 Disability Issues Office <http://www.gov.mb.ca/dio/>
- 8.1.5 Personal Information Protection and Electronic Documents Act (PIPEDA)  
[https://www.priv.gc.ca/leg\\_c/leg\\_c\\_p\\_e.asp](https://www.priv.gc.ca/leg_c/leg_c_p_e.asp)
- 8.1.6 Freedom of Information and Protection of Privacy Act (FIPPA)  
[http://www.gov.mb.ca/chc/fippa/public\\_bodies/index.html](http://www.gov.mb.ca/chc/fippa/public_bodies/index.html)
- 8.1.7 Personal Health Information Act (PHIA)  
<http://web2.gov.mb.ca/laws/statutes/ccsm/p033-5e.php>
- 8.1.8 Ryerson University
- 8.1.9 McMaster University
- 8.1.10 Carleton University
- 8.1.11 University of Manitoba

## **8.2 Documents**

- 8.2.1** *Workplace Accommodation Procedure*
- 8.2.2** *Accommodation Request form*
- 8.2.3** *Workplace Accommodation Planning Checklist*
- 8.2.4** *Workplace Accommodation Plan*
- 8.2.5** *Workplace Accommodation Fund Policy*
- 8.2.6** *Workplace Accommodation Fund Procedure*
- 8.2.7** *Workplace Accommodation Fund Guidelines and Application*



 <b>BRANDON UNIVERSITY</b>	Workplace Accommodation Procedure	<b>First Approved:</b> November 26, 2016
		<b>Updated:</b>
<b>Board of Governors Procedure</b>	<b>Approved by</b> Vice-President (Administration & Finance) and Vice-President (Academic & Provost) <b>Administered by</b> President & Vice-Chancellor through: Vice-President (Administration & Finance), Vice-President (Academic & Provost) and Chief Human Resources Officer	<b>Reviewed:</b>

## 1.0 Scope

**1.1** This procedure applies to all Brandon University employees (faculty and staff) as well as job applicants.

**1.2 Employees:** Employees have a responsibility when requesting an accommodation to:

- Communicate the request to their immediate supervisor along with the necessary requirements;
- Actively participate in the accommodation process to find reasonable solutions.

**1.3 Job Applicants:** Job applicants have an obligation to communicate any known accommodation needs to the University and to participate in the accommodation process. Human Resources will work with the selection committee to facilitate a reasonable accommodation during the interview process, such as providing translators or interpreters, offering a wheelchair-accessible interview space, or rescheduling interviews to respect religious observances.

**1.4 Supervisors:** When Supervisors, including Department Chairs, Directors, Deans, Managers and Senior Administrators, are presented with a workplace accommodation request, they have an obligation to:

- Accept the accommodation request in good faith;
- Handle the accommodation request as quickly as possible;
- Manage the process by including the employee and all relevant stakeholders in determining accommodation solutions;
- Document the process including the accommodation request and the appropriate steps taken; and
- Maintain confidentiality and adhere to privacy legislation (PIPEDA, PHIA, FIPPA).

**1.5 Unions and Associations:** Employee unions and associations are expected to actively participate with and support their members and the University to help find reasonable solutions to workplace accommodation requests.

**1.6 Human Resources Office:** The Human Resources Office (HRO) will:

- provide advice and guidance to employees and supervisors regarding workplace accommodation procedures;
- aid in the interpretation and application of the workplace accommodation process;
- assist with disability management and return-to-work plans;
- request medical documentation to support the implementation of a reasonable workplace accommodation;
- maintain confidentiality and ensure that accommodation requests are handled in a manner consistent with privacy legislation (PIPEDA, PHIA, FIPPA).

**1.7 Diversity and Human Rights Advisor:** The Diversity and Human Rights Advisor (DHRA) is available to provide confidential consultation regarding human rights concerns and/or complaints related to workplace accommodations.

## **2.0 Reason for Procedure**

To set out procedures secondary to the *Workplace Accommodation Policy* as Brandon University supports and promotes the employment of persons with disabilities by providing accommodation in employment for those with disabilities.

### **2.1 Workplace Accommodation Procedure**

Brandon University acknowledges its responsibility to its employees to adapt the workplace for reasonable accommodation requests, to the point of undue hardship. Employees have a responsibility to take an active role in the accommodation process. Unions and associations have a responsibility to support the employees and University, and to participate in the implementation of reasonable accommodations.

All parties will respect and preserve confidentiality when dealing with an accommodation request. Where the accommodation process requires the release of confidential information to a third party, that third party will be required to ensure that confidentiality is protected and is used solely for the purpose of implementing the accommodation.

## **3.0 Procedure(s)**

**3.1 Reasonable Accommodation:** In order to address a workplace accommodation request, it must be determined that the request is reasonable. A reasonable workplace accommodation must meet a 'need', not necessarily a 'want'. Although a reasonable accommodation may not be ideal, the duty to accommodate is described as 'accommodation short of undue hardship'.

**3.2 Statement on Undue Hardship:** Undue hardship is defined as more than minimal hardship and must be based on actual evidence, not assumptions or prejudices. While financial implications tend to be a contributing factor in determining undue hardship, *The Manitoba Human Rights Commission* considers the nature, size and scope of an organization when determining if undue hardship is valid.

**3.3 Return-to-Work Accommodation Protocol:** The University understands that employees who are returning to work due to illness or injury may require return-to-work accommodations in order to facilitate the transition to regular work duties. A full Return-to-Work protocol has been created to help manage this transition.

## 4.0 Process

### 4.1 Workplace Accommodation Process

The process for a workplace accommodation includes the following:

**4.1.1 Step 1: Request a Workplace Accommodation:** An employee who requires a workplace accommodation must provide a written accommodation request using the *Accommodation Request form*. This request must include:

- The nature of the workplace accommodation;
- The reasons for which the accommodation is being sought (eg. Disability, Family Status, etc.);
- For cases of disability, supporting medical documentation.

**4.1.2 Step 2: Consideration of Accommodation Request:** Workplace accommodations may include, but are not limited to:

- Technical aids, including software and hardware;
- Workstation modifications or building modifications;
- Work schedule modifications or adjustments;
- Alternative media formats for communication;
- Restructuring non-essential job duties;
- Alternate supports, such as sign language interpreters, service animals.

Funding for items required to meet the individual's accommodation request are to be processed through the department/unit budget. For an extensive accommodation request which may affect or impact the University, application may be made by the supervisor to Senior Administration to request supplementary budget funds from the University's *Workplace Accommodation Fund (WAF)*.

Workplace accommodations may be declined in rare situations when:

- It causes undue hardship; or

- A bona fide occupational requirement is reasonably necessary to perform the duties of the position.

**4.1.3 Step 3: Stakeholders' Involvement:** Because a workplace accommodation impacts multiple workplace parties, it must be a collaborative process. This process includes discussion with the employee, union or association representative (if applicable), the employee's supervisor, Human Resources and the attending physician or practitioner (if applicable). A collaborative discussion should occur regarding the employee's needs and the University's operational requirements.

**4.1.4 Step 4: Implementation of Accommodation Plan:** Once the parties have discussed the workplace accommodation request, a written plan will be prepared to outline the nature of the accommodation. The *Workplace Accommodation Plan (WAP)* will include the University's commitment as well as the employee's commitment to cooperatively implement the accommodation. The plan will include details such as:

- Person(s) responsible;
- Person(s) involved;
- Details of the accommodation plan;
- Timelines for implementing the accommodation;
- Duration of the accommodation;
- Follow-up process to evaluate the accommodation;
- Signatures of workplace parties supporting their commitment to the implementation of the accommodation plan.

Should the accommodation require adjustment, the plan may be revised accordingly. It is a dynamic document intended to support the employee in the workplace.

**4.1.5 Step 5: Review, Assessment and Evaluation of Accommodation:** The accommodation plan will be reviewed at regular intervals mutually agreed upon by both the employee and the employee's supervisor. The plan will be assessed to determine its effectiveness in meeting the needs of the employee and ensuring the work functions are being satisfied.

When the plan has an end-date, the employee and supervisor will meet to evaluate the plan's effectiveness and to determine if an extension to the accommodation is required.

Accommodation plans will be taken into consideration when employee performance assessments are conducted.

A *Workplace Accommodation Planning Checklist (WAPC)* is available for supervisors to follow to ensure they are following the Workplace Accommodation Process.

## **5.0 Accountability**

**5.1** The Chief Human Resources Officer or designate may revise or rescind process as identified in these procedures to:

- comply with the revised policy; or
- adjust process as reasonably necessary.

## **6.0 Secondary Documents**

### **6.1 Forms**

- *Accommodation Request form*
- *Workplace Accommodation Planning Checklist*
- *Workplace Accommodation Fund guidelines and application*
- *Workplace Accommodation Plan*


## **7.0 Review**

**7.1** Review of the procedures will be conducted every three (3) years. The next scheduled review date for the procedures is January 2020.

## **8.0 Cross Reference**

### **8.1 Documents**

- *Workplace Accommodation Policy*

	<b>Discrimination and Harassment Prevention Policy</b>	<b><i>First Approved:</i></b> <i>June 24, 2017</i>
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<b><i>Board of Governors Policy</i></b>	<b><i>Approved by Board of Governors Administered by Vice-President, Administration &amp; Finance</i></b>	<b><i>Reviewed:</i></b>

## 1. Introduction

Brandon University is committed to maintaining a productive and respectful work and learning environment and believes it is the right of all employees and students to work and study in an environment free of discrimination and harassment. To this end, the University will make best efforts to prevent the occurrence of discrimination and harassment through education, training, and early resolution of conflict in the workplace.

In positive terms, all members of the University community should strive to:

- a. respect and value the diversity of people, values and beliefs represented;
- b. preserve the dignity of others in all interactions;
- c. act in a courteous manner at all times;
- d. engage in communication that is solution-focused; and
- e. collaborate with colleagues where appropriate.

When a concern is brought forward, the first step will be for the Diversity and Human Rights Advisor (DHRA) to determine if the issue is best dealt with under the processes outlined in the *Guide to Resolving Conflict at Brandon University* or if it falls under the *Discrimination and Harassment Prevention Policy*.

## 2. Responsibilities Under this Policy

Brandon University is committed to combatting discrimination and harassment through raising awareness and providing training to employees and students on the *Manitoba Human Rights Code (MHRC)*, the *Workplace Safety and Health Act and Regulations (WSH Act and Regulations)*, and responding to incidents of discrimination and harassment.

Brandon University has a responsibility to prevent acts of discrimination and harassment and to address them when they happen. Even in cases where no report has been filed, the University has a duty, under the *WSH Act and Regulations*, to respond to incidents that appear to be discriminatory or harassing in nature. For example, a University initiated investigation may be necessary in situations where there are repeated concerns about the same individual or where there is evidence of an unhealthy work environment in an area of the University.

Where a member of the University community, especially anyone in a leadership, management or supervisory role, is aware of acts of discrimination or harassment and fails to take action to address the behaviour they may be subject to penalties under this policy or under the *WSH Act and Regulations*.

*For detailed information on the roles and responsibilities of particular groups or individuals, see APPENDIX A: ROLES AND RESPONSIBILITIES.*

### **3. Manitoba Legislation and this Policy**

At Brandon University the *Discrimination and Harassment Prevention Policy* and related procedures are informed and guided by the *MHRC* and the *WSH Act and Regulations*. These two pieces of legislation apply to and prevail over all provincial legislation (with few exceptions), as well as over University policies and collective agreements. Subject to applicable legislation, all processes in this policy shall be pursued in accordance with the respective collective agreements entered into between the University and its employees and all University Policies and Procedures.

The *MHRC* governs any discrimination or harassment that is based on the “prohibited grounds” listed in the Code. The *WSH Act and Regulations* prohibit both harassment based on the prohibited grounds, and what will be termed here as “Personal Harassment”, and also speaks to what is not considered harassment. The *MHRC* applies to the University as a workplace, a service to the public and a housing provider.

*For detailed definitions of Discrimination, Harassment and other pertinent terms, see APPENDIX A: DEFINITIONS*

### **4. Guiding Principles**

#### **a) Shared responsibility**

Preventing and stopping discriminatory/harassing behaviour at Brandon University requires that all members of the University community work together to behave in a respectful and collegial manner, and to address disrespectful or unproductive behaviour when it happens.

**b) Laws of Natural Justice**

The implementation of this policy will be conducted based on the laws of natural justice. This means that the respondent has the right to know the allegations against them in full detail, and the right to reply to these allegations. It also means that anyone investigating a concern or complaint must endeavour to remain neutral and avoid allowing any personal bias to influence their decisions. Remedial or punitive actions resulting from the implementation of this policy will be based on evidence, and that evidence will be shared with both the complainant and respondent.

**c) Problem solving versus punitive action**

The main purpose of the *Discrimination and Harassment Prevention Policy and Procedures* is to assist with resolving issues. While it is recognized that sanctions are sometimes necessary and effective, a process that encourages discussion and a negotiated agreement is preferred where possible.

**5. Scope and Application of This Policy**

Every member of the Brandon University community has both the right to work and study in an environment that is free from discrimination and harassment, and the responsibility to maintain a discrimination and harassment free environment. This policy applies to all members of the Brandon University community, which includes all employees, students, contractors and suppliers of services, volunteers, visitors, and individuals who are connected to any University initiatives. This policy applies to all members of the University community in their interaction with other members of the University community. The context of the interaction need not be University-related if the parties' primary relationship is through their mutual connection to the University.

Behaviours which constitute discrimination and harassment, which impact the work and/or study environment of a member of the Brandon University community, may be covered by this policy even though they may occur outside the normal working hours, or during off-campus activities such as work, athletic, or academic related travel, campus related social functions, or work or academic assignments or placements. Conduct on social media or communication through electronic means may constitute a breach of this policy.

It is important to note that a harassing or discriminatory act can be unintentional, and still warrant action under this policy. Where the actions of an individual or group have the effect of harassing or discriminating against a member of the University community, whether intended or not, the "reasonable person test" may be used to determine whether they should have known that their actions were unwelcome and would cause harm to the member.



## **6. Education and Communication**

The cornerstone of prevention efforts is education. Brandon University is committed to promoting the principles of diversity and human rights through education and conversation in many forums and formats throughout the community on an ongoing basis. The DHRA will coordinate and deliver a program that raises awareness of:

- a) forms of discrimination, including both direct and systemic discrimination,
- b) the damage that discrimination and harassment cause to both the individual and to the University,
- c) how to prevent discrimination and harassment, and
- d) what to do about discrimination and harassment when they occur.

## **7. Confidentiality**

Brandon University recognizes the importance of confidentiality, and issues brought to the DHRA will be treated as confidential. All information collected as a result of any action under this policy will be managed in accordance with *The Freedom of Information and Protection of Privacy Act (FIPPA)* and *Personal Health Information Protection Act (PHIA)* as applicable.

## **8. Academic Freedom**

Brandon University recognizes that, as an academic and free community, it must uphold its fundamental commitments to academic freedom and freedom of thought, inquiry and expression. Therefore, this policy will not be interpreted, administered or applied to infringe upon these freedoms. These freedoms, however, must be exercised in a responsible manner and are subject to limits prescribed by law, including those related to human rights, and workplace safety and health legislation. Members of the University community, in exercising their academic freedom and freedom of thought, inquiry and expression, shall respect the rights and dignity of others, and not engage in actions that deny equality to, or harass others.

## **9. Review**

As is required by Workplace Safety and Health Legislation, this policy and the associated procedures will be reviewed, at a minimum, every 3 years, with any changes requiring approval by the Board of Governors. In the intervening time periods between these reviews, the procedures may be updated or revised by the DHRA as needed, following consultation with unions and other stakeholders. Changes to both the policy and procedures will be tracked and summarized in an attached document.

## **10. Related Policies and Procedures**

- a. Discrimination and Harassment Prevention Procedures
- b. Guide to Resolving Conflict at Brandon University
- c. Manitoba Human Rights Code, C.C.S.M. c. H175;
- d. Workplace Safety and Health Act and Regulation of Manitoba 217/2006.
- e. Sexualized Violence Prevention Policy
- f. Collective Agreements
- g. Guide to Investigations at Brandon University
- h. Records Management Policy
- i. Freedom of Information and Protection of Privacy Act
- j. Personal Health Information Act

# **Brandon University**

## **Discrimination and Harassment Prevention Procedures**

### **1. Purpose**

The Discrimination and Harassment Prevention Policy and related procedures are based on principles of fairness and due process for all parties involved in any human rights proceeding at Brandon University. These procedures are in place to implement the Discrimination and Harassment Prevention Policy. The University's Discrimination and Harassment Prevention Policy was established to support a climate of mutual respect in the workplace and learning environment so that all members of the University community are free from discrimination and harassment.

These procedures apply to cases of direct and systemic discrimination, discrimination-based harassment and personal harassment. Cases of sexual harassment fall under Brandon University's Sexualized Violence Policy.

### **2. Recourse Options**

This Policy and Procedure does not limit the right of a member of the University community to file a complaint with the Manitoba Human Rights Commission. This Policy and Procedure is not intended to discourage the complainant from exercising any other rights under the law. Members of the University community retain the right to address issues through the grievance process outlined in their respective collective agreement or through other University policies. It is possible to pursue more than one of these options at a time.

### **3. General**

Any party to a complaint has the right to have another individual accompany them to interviews or other meetings required under this procedure. This may include union/association representative, student advocate, elder, friend, relative, or other. Interpretation or translation services will be provided where needed.

Complaints submitted anonymously cannot be used on their own in any disciplinary action against the respondent, though they may prompt further inquiry by the University.

Complaints should be brought forward to the Diversity and Human Rights Advisor (DHRA) at the earliest possible date to prevent further harm and to increase the chance of an early and positive resolution. Complaints should be made within 12 months of the offending

behaviour. Extenuating circumstances may delay the reporting of concerns, so members of the University community are encouraged to contact the DHRA if they wish to file a complaint either within or beyond the 12 month time frame.

Complainants may choose to withdraw their complaint or resolve it through other means at any point in this procedure. Under some circumstances the University may find it necessary to continue with an investigation or to consider other action.

Complaints which are found to be malicious or made in bad faith may, in turn, be treated as harassment under this Policy and Procedure.

#### **4. Consultation**

Anyone who believes they have been subject to discrimination and/or harassment, or anyone who receives an inquiry or concern about discrimination and/or harassment from a member of the Brandon University community should consult the *Guide to Resolving Conflict at Brandon University*. This guide contains information to assist determining whether a complaint meets the threshold for discrimination and/or harassment. The DHRA can help members of the University Community in making this determination. Others who may be available to consult on these issues include Human Resources Officers, Student Services Personnel, BUSU, union representatives, direct supervisors, Department Chairs, Deans or Directors.

When a concern has been brought to a member of the University community, they are encouraged to give the complainant a copy of the Discrimination and Harassment Prevention Policy and Procedures (the Policy and Procedures) and assist the complainant in contacting the DHRA.

The DHRA, in consultation with the Chief Human Resources Officer, may recommend engaging an external investigator at any point during this procedure. Potential reasons for engaging an external investigator include, but are not limited to:

- nature or complexity of the case is beyond the expertise of the DHRA.
- the DHRA has a conflict of interest in the case leading to real or perceived bias.
- workload of DHRA would preclude a timely resolution.

#### **5. Confidentiality**

Brandon University recognizes the importance of confidentiality, and issues brought to the DHRA will be treated as confidential. All information collected as a result of any action under this policy will be managed in accordance with *The Freedom of Information and Protection of Privacy Act* and *Personal Health Information Protection Act* as applicable.

Confidentiality must be balanced with the University's legal obligations to address discrimination and harassment, so at times information will need to be shared in order to

investigate a matter, to address a risk or threat, or to comply with requests from legal entities. This confidentiality extends to any member of the University community who may be privy to information or who possesses documentation about a complaint or investigation. Breaches of confidentiality may be subject to penalties.

Confidentiality should not be confused with anonymity. Those who bring forward a concern and wish for action to be taken on their concern must be prepared to be identified as the complainant. The University will make every attempt to ensure that there are no reprisals against anyone making a complaint under this policy or participating in an investigation.

The DHRA will provide a summative report of issues dealt with under the *Discrimination and Harassment Prevention Policy and Procedures* to the President on a yearly basis. This report will not include personal information about the complainant, respondent or other parties to an incident or investigation. It will not include other details, such as department or job titles, which could lead to the identification of any of the parties.

## **6. Complaint/Investigation Process**

The University strives to resolve complaints as quickly as possible. A complaint is considered submitted once it is received by the DHRA in writing on the appropriate form and signed by the complainant. The term “investigator” in this section is used to refer to either an internal investigator (normally the DHRA) or an external investigator.

### **STEP 1: WRITTEN COMPLAINT**

Where the consultation indicates that the concern should be dealt with under the Discrimination and Harassment Prevention Policy and Procedures, and the complainant wants the University to take action, they must file a written complaint with the DHRA. The form is available online. The DHRA can provide guidance on what information should be included in the complaint. If the written complaint lacks sufficient detail to determine if it falls under this Policy the investigator may request that the complaint be clarified and resubmitted.

As the university has a responsibility to ensure the work and learning environment are free of discrimination and harassment, there are times when an investigation must be conducted even when no complainant comes forward. In this instance the University will document the alleged discriminatory and/or harassing behaviour so that the respondent is afforded due process and is presented with the allegations prior to being asked to respond.

At the earliest stage of contact with the complainant, the investigator will consider whether there needs to be interim measures put in place to safeguard the physical and psychological safety of all parties. This may involve sharing limited information with supervisors/faculty members or others so that the involved parties may be kept separate or other measures put in place.

The complaint will be addressed through alternate means if the investigator determines that the written complaint:

- seems to fall under the heading of “interpersonal conflict”. The investigator will inform the complainant of this, and will review options for resolving the concern through other means, such as the Guide to Resolving Conflict at Brandon University.

The complaint may not proceed to Step 2 if the investigator determines the written complaint:

- is based on events occurring more than 12 months prior to the complaint being filed. The complaint may either be dismissed as “out of time” or accepted where the delay in reporting is due to extenuating circumstances.
- is trivial, frivolous, malicious, or made in bad faith. The investigator will advise the complainant of this and may recommend that the complaint not be addressed. Malicious or bad faith complaints may be considered personal harassment under this policy and procedure.

The complaint will move forward to Step 2 if the investigator determines that the written complaint:

- seems to fall under the heading of direct or systemic discrimination, discrimination-based harassment or “personal harassment”. The investigator will notify the complainant of this and will proceed to Step 2. At this point, the investigator contacts the respondent to inform them of the complaint and to provide them with a copy of the written complaint.

## **STEP 2: COMPLAINANT AND RESPONDENT INTERVIEWS**

The complainant meets with the investigator at the earliest possible time to go over the details of their complaint, to fill in any missing information and to be advised of the process that will be followed. The investigator will compile a summary of allegations based on the written complaint and the information from this interview to provide to the respondent.

The respondent is normally given up to 10 working days to review the summary of allegations and prepare a response before being interviewed by the investigator. The respondent may choose to prepare a written response to the allegations in order to acknowledge or deny the validity of the allegations in whole or in part, provide additional information as well as information identifying any possible witnesses and/or propose a resolution of the complaint.

Alternatively, the respondent may choose not to participate in all or part of these procedures. In this case these procedures will continue without such input from the respondent.

After interviewing both complainant and respondent, the investigator conducts a complaint review to decide on next steps.

**STEP3: COMPLAINT REVIEW** The investigator will at this point conduct a review of the complaint and may consult with appropriate external or internal resources in order to determine:

- if there needs to be further investigation;
- the scope of that investigation;
- whether the use of an external investigator is required (if not already implemented);
- if the complaint is malicious or made in bad faith, and should be dismissed;
- if additional interim measures are needed to ensure physical/psychological safety of any party; and
- what “appropriate administrators” will decide on the resolution of the complaint

If the information already gathered is sufficient to determine if the Policy was breached, the investigator prepares a Report of Findings, as described in step 5, and provides it to the appropriate administrators. If additional information is needed, either the investigator continues to step 4.

#### **STEP 4: WITNESS INTERVIEWS AND EVIDENCE GATHERING**

Where an investigation is required, the investigator gathers information as quickly as possible, and either the DHRA or the external investigator contacts both the complainant and respondent regularly to inform them of the progress and expected timelines. An internal investigation will normally be completed within 20 working days, and where an external investigator is engaged the investigation will normally be completed within 40 working days. A quick resolution is of great importance, but the need to be thorough and fair takes precedence, so any timelines given are estimates and may be adjusted depending on the circumstances.

Respondents or other parties to a complaint may choose not to participate in an investigation. In such cases the investigation will proceed without their input.

Under Workplace Safety and Health legislation, the University must ensure that no one is subjected to harassment in the workplace, so at times investigations are required even in the absence of a named complainant.

For more detailed information on the process, please see the *Guide to Investigations at Brandon University*.

#### **STEP 5: REPORT OF FINDINGS**

The investigator produces a report outlining the alleged breach(es) of the Policy and the relevant evidence pertaining to each allegation. Using the “balance of

probabilities” standard, the report specifies if there is evidence of a breach for each allegation. Implementation of remedial and disciplinary action falls to the appropriate administrators, as identified in step 3. The investigator will normally submit this report to the appropriate administrators no more than 10 working days after the completion of the investigation.

## **7. Resolution of Complaint**

For respondents who are staff and faculty, the Chief Human Resources Officer will normally be involved in the resolution of the complaint. For respondents who are students, the Dean of Students will normally be involved in the resolution of the complaint. For respondents who are members of PAC, the President will normally be involved in the resolution of the complaint. Where the respondent is a member of PEC, the Chairperson of the Board of Governors of Brandon University will normally be involved in the resolution of the complaint.

After a review of the Report of Findings, the appropriate administrators meet with the complainant to inform them of the results of the investigation. The appropriate administrators also meet with the respondent to inform them of the results of the investigation.

### **No Breach – No Further Action Required**

In some circumstances, beyond informing both complainant and respondent that there was no finding of a breach of this policy and procedure, no further action is required from the University. An example would be when the complaint was made in good faith, but resulted from a misunderstanding which has resolved between the complainant and respondent.

### **No Breach – Remediation and/or Corrective Action Required**

Even where it is determined that this policy has not been breached, the behaviour giving rise to the complaint may be contrary to the University’s commitment to maintaining a productive and respectful work and learning environment, or may be in breach of another policy, a collective agreement or legislation. In such a case, Brandon University may find it necessary to remediation or corrective action to address the behaviour. This may include:

- Verbal feedback from the appropriate supervisor/administrator to the respondent to cease the behaviour.
- An opportunity for the complainant to share the impact of the behaviour with the respondent, either directly or through the appropriate administrator.
- Mediation between the complainant and the respondent.
- Corrective action or discipline appropriate to the circumstances.



### **Breach – Remediation and/or Corrective Action Required**

The University takes corrective action respecting any person in the University community who subjects another to discrimination and/or harassment. These remedies or penalties are meant to prevent further acts of discrimination and/or harassment, and restore the working and learning environment to a positive, respectful space. The nature and severity of the behaviour determines the level of initial response. Repetition of the behaviour following clear communication that it is unwelcome adds to the severity of the response.

Some possible responses to a finding of discriminatory/harassing behaviour may include those listed in the previous section and/or any of the following:

- A written directive from the appropriate supervisor/administrator to the respondent to cease the behaviour, with information about possible consequences should the behaviour continue.
- Education or personal development for the respondent.
- A planned course of supervision and feedback for the respondent by the appropriate administrator.
- A verbal or written apology from the respondent to the complainant.
- Counselling and/or coaching for the respondent.
- Restricted access to a physical area of the University.
- Restrictions on attendance or participation in specific University activities.
- Removal from residence.
- Banning from campus.
- Suspension for a set period of time for students.
- Suspension with or without pay for a set period of time for employees.
- Expulsion for students.
- Dismissal for employees.
- Cancellation of contract for contractors and suppliers of services.

These actions shall be recorded on the respondent's personnel or student file. Disciplinary action is confidential, and the complainant or other parties to the investigation are not normally informed of the nature of such action.

The University will share as much information about remedial and/or disciplinary as is required to maintain the complainant's ongoing physical or psychological safety, or to reduce the possibility of contact between the parties, while still adhering to its obligations under the law, including FIPPA and/ or PHIA. Where remedial action includes some course of education for the respondent, for example, both the complainant and the respondent will receive notification in writing from the appropriate administrator when they are satisfied that this is complete.

## **8. Malicious Complaints and Retaliation**

Maliciously and deliberately making a false complaint under this policy or any other Brandon University policy will be considered an act of harassment and will be treated as such. An unsubstantiated complaint is not by default a malicious or deliberately false complaint.

Retaliating against someone who has made a complaint in good faith under this policy or any other University policy, against someone who has cooperated in good faith in an investigation under this policy or any other University policy or legislation, will also be treated as harassment.

## **9. Right to Grievances and Appeals**

Both parties involved in an investigation have the right to appeal the decision of the investigator.

- a) Union members may grieve decisions or actions under this policy through the processes outlined in their respective collective agreements.
- b) Students may appeal decisions or actions under this policy directly to the Vice-President (Academic & Provost).
- c) Exempt staff may appeal decisions or actions under this policy directly to the Vice-President (Administration & Finance).
- d) Members of the President's Executive Council (PEC) may appeal decisions or actions under this policy directly to the Chair of the Board of Governors.

Timelines for grievances are outlined in the relevant collective agreements. Appeals must be brought forward within 15 working days of being informed of the outcome of the investigation. Appeals must be in writing and must outline the grounds for the appeal.

Some possible grounds for grievance or appeal include, but are not limited to:

- bias on the part of the investigator.
- failure to follow the policy and processes outlined in these procedures.
- new substantive information or evidence not made available previously to the investigator.
- errors made by the investigator which likely affected the outcome of the investigation.
- the level or nature of the corrective action.

## APPENDIX A: DEFINITIONS

### Protected Characteristics

The Protected Characteristics identified in the Manitoba Human Rights Code apply to complaints of discrimination and/or grounds-based harassment. These characteristics are

- i. ancestry, including colour and perceived race;
- ii. nationality or national origin;
- iii. ethnic background or origin;
- iv. religion or creed, or religious belief, association or activity;
- v. age;
- vi. sex including sex-determined characteristics or circumstances;
- vii. gender identity and gender expression\*;
- viii. sexual orientation;
- ix. marital or family status;
- x. source of income;
- xi. political belief, political association or political activity (including union affiliation or activity);
- xii. physical or mental disability or related characteristics or circumstances; and
- xiii. social disadvantage.

Where an individual is mistreated because of a relationship or association with someone identified as belonging to any of the above groups, this also infringes on their right to be free from discrimination and harassment.

\*Although gender expression is not explicitly mentioned in the *MHRC*, Brandon University recognizes it as a protected characteristic.

**Discrimination:** The University adopts the definition of discrimination as per the *MHRC*. The *MHRC* defines discrimination as pertaining to the areas of employment, living accommodations and access to services where;

- there is differential treatment of people based on the person's actual or presumed membership in, or association with, some class or group of people, rather than on their personal merit; or
- there is differential treatment of an individual or group on the basis of any protected characteristic; or
- there is failure to make reasonable accommodation for the special needs of any individual or group, if those special needs are based upon any protected characteristic.

**Harassment:** The University adopts the definitions of harassment from the MHRC and the WSH Act and Regulations.

**Grounds Based Harassment:** The MHRC defines harassment as

- a course of abusive and unwelcome conduct or comment based on a protected characteristic; or
- a series of objectionable and unwelcome sexual solicitations or advances: or
- a sexual solicitation or advance made by a person who is in a position to confer any benefit on, or deny any benefit to, the recipient of the solicitation or advance, if the person making the solicitation or advance knows or ought reasonably to know that it is unwelcome; or
- a reprisal or threat of reprisal for rejecting a sexual solicitation or advance.

**Personal Harassment:** The WSH Act and Regulations interprets personal harassment more broadly as:

- objectionable conduct that creates a risk to the health of a worker: or
- severe conduct that adversely affects a worker's psychological or physical well-being

Conduct is considered to be "objectionable" if it is based on any of the protected characteristics from the MHRC. Conduct based on appearance, physical size or weight can also be deemed "objectionable". Conduct is considered "severe" if it could reasonably cause a worker to be humiliated or intimidated, and is repeated, or in the case of a single occurrence, has a lasting, harmful effect on a worker. Conduct refers to written or verbal comment, a physical act or gesture or a display, or any combination of these.

**Not Harassment:** It is important to note that not every interaction that is perceived as negative in the work or learning environment constitutes harassment. For example, the *WSH Act and Regulations* explicitly states that appropriate use of legitimate authority by a supervisor responsible for functions such as performance appraisals, discipline, and directing the work of others is not considered harassment. By extension, the appropriate use of legitimate authority by faculty in determining grades, identifying and preventing inappropriate classroom behaviour, and recommending discipline is not harassment. Interpersonal conflict or disagreements in the work and/or learning environment are not harassment; for assistance in determining if a situation is conflict or discrimination/harassment please see the *Guide to Conflict Resolution at Brandon University*.

**Complainant** is a person who discusses a concern and/or makes a complaint (an allegation, whether oral or written) of harassment or discrimination under the policy.

**Reasonable Person Test** is a standard used to decide if an individual used due care in their words or actions. In other words, should that person reasonably have expected their actions or words would do harm to another.

**Respondent** is a person against whom a complaint has been made under this policy or is the subject of allegations of harassment or discrimination under the policy.

**Balance of Probabilities** refers to the standard of proof used in deciding harassment complaints. It requires that the evidence be weighed and the decision be made in favour of the side which is more likely to be true. This is in contrast to the “beyond a reasonable doubt” standard used in criminal matters.

**Management Rights** are implicit rights of management to determine the institution’s mission, budget, and strategy, and to make operational decisions such as work assignments, direction of employees, and hiring of employees.

**Student Advocate** is a representative appointed by the Brandon University Students’ Union (BUSU) to assist and support students and at the student’s request to assist in resolving complaints under this policy.

## **APPENDIX B: ROLES AND RESPONSIBILITIES**

### **a) Responsibilities of All Individuals**

Every member of the University community must adhere to University policies and support the aim of the University to create a climate of understanding and respect for the dignity and rights of all. Every member of the University community is expected to respect the rights of academic freedom and freedom of thought, inquiry and expression and also to support the University's efforts to ensure that the working and learning environment is free of discrimination and harassment.

### **b) Responsibilities of President's Executive Council**

The President's Executive Council (PEC) at Brandon University includes the President, Vice Presidents, and the Chief Human Resources Officer. These leaders are ultimately responsible for providing and supporting a work and learning environment which is free from harassment and discrimination. PEC will provide resources for the education of members of the University community, lead by example by carrying out their duties in a respectful manner, and ensure that there are policies and procedures in place for addressing instances of discrimination and harassment.

### **c) Responsibilities of Managers and Supervisors**

Managers and supervisors are those who, by virtue of their position at Brandon University, are responsible for overseeing others in the workplace. Managers and supervisors must monitor the work and learning environment for signs that harassment or discrimination are taking place, and take early action to address any concerns they are aware of, even in the absence of a complaint. Managers and supervisors must ensure that their employees are aware of this policy and related procedures and that they are provided opportunities to participate in education and training related to harassment and discrimination. When complaints have been made and corrective actions recommended to address them, it is the manager's or supervisor's responsibility to ensure these corrective actions are implemented and to monitor the situation. Managers and supervisors are expected to take part in learning opportunities, or to consult with the DHRA, to ensure they are appropriately addressing issues of human rights, discrimination, and harassment.

### **d) Responsibilities of People in Authority**

Even those who do not hold a formal leadership or supervisory role hold authority in certain circumstances, and therefore have a responsibility under this policy. For example, faculty members hold authority over students in a classroom and employees who oversee the activities of volunteers hold authority in that context. People in authority are expected to participate in training to ensure they understand their responsibilities in preventing and addressing incidents of discrimination and harassment. People in authority must also ensure, to the extent practicable, that

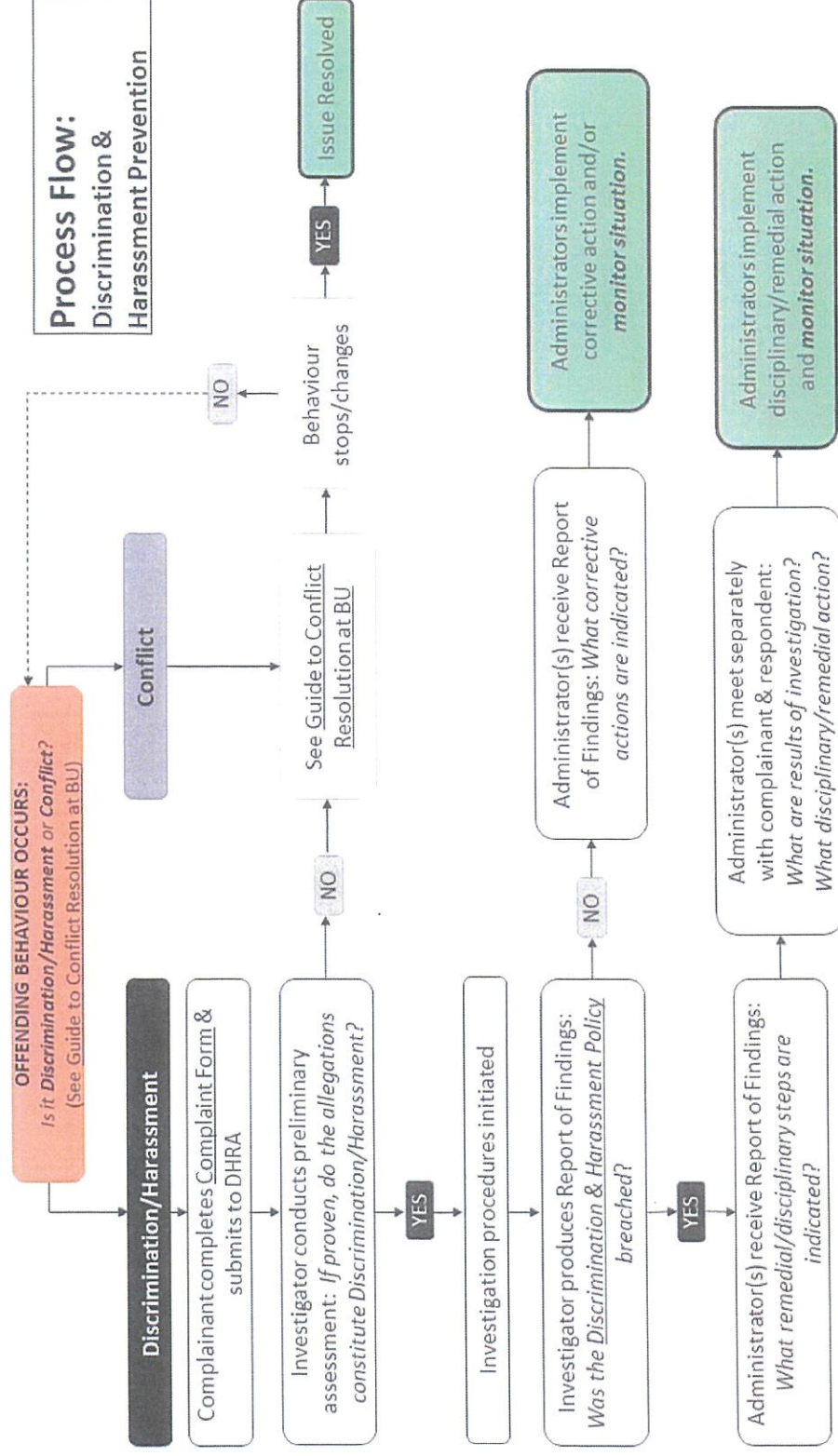
those they oversee are aware of human rights issues and their rights and responsibilities.

**e) Responsibilities of the Diversity and Human Rights Advisor (DHRA)**


The DHRA is responsible for developing and facilitating education and prevention initiatives around issues of discrimination, harassment, equity, diversity, and human rights. The DHRA provides advice and assistance to all members of the University Community on matters relating to human rights, equity, and diversity. The DHRA may consult, provide guidance for early resolution of issues, provide educational opportunities, facilitate conversations, mediate between parties in conflict, conduct workplace assessments and internal investigations, or coordinate the services of an external facilitator or group in providing any of these services.

This document is available in PDF and Microsoft Word format on the Brandon University website. A printed copy can be obtained from the Diversity and Human Rights Office, Room 333 Clark Hall. Persons involved with the processes outlined in this policy (complainants, witnesses or respondents) may conduct their involvement verbally or with the assistance of an interpreter upon request.

## APPENDIX C: Process Flow: Discrimination & Harassment Prevention





 <b>BRANDON UNIVERSITY</b>	<b>Brandon University Sexualized Violence Policy</b>	<b>First Approved:</b> <i>March 25, 2017</i>
		<b>Updated:</b> <i>June 23, 2018</i>
<b>Board of Governors Policy</b>	<b>Approved by:</b> <i>Board of Governors</i> <b>Administered by:</b> <i>Vice-President (Academic &amp; Provost)</i>	<b>Reviewed:</b> <i>June 23, 2018</i>

## 1. Introduction/Preamble

Brandon University does not tolerate sexualized violence in any form. Brandon University is playing an essential role in combatting sexualized violence in our community and society more broadly.

Brandon University is committed to cultivating a productive and respectful environment that ensures the safety and security of all members of the Brandon University community, and is working toward preventing sexualized violence. The University is ensuring that complainants receive supportive and affirming responses to their disclosures and are given clear, confidential, and survivor-centered options for reporting sexualized violence, while balancing the rights of each respondent to due process and privacy, keeping in mind the safety of the University community as a whole.

We strive to instill a safe, inclusive and respectful University community informed by intersectionality, which recognizes that people's lives are multi-dimensional and complex yet interconnected, and are therefore made up of different social locations, power relations and experiences. We also recognize that universities are not immune to wider social environments, gender biases, and rape culture, in which dominant ideas, social practices, media images, sexual assault myths, and societal institutions implicitly or explicitly condone sexual assault by normalizing or trivializing sexualized violence and by blaming individuals for their own abuse.

This commitment is being accomplished by addressing acts of sexualized violence, raising awareness, and providing education. Brandon University is supporting these goals through policy, procedure, programming, and various committees made up of staff and students dedicated to responding and preventing sexualized violence. The university also recognizes that all persons have an inherent right to control their own bodies and to engage only in sexual activity that they consent to.

This policy and accompanying protocol is guided by the [Manitoba Post-Secondary Sexual Violence Policy Guide](#) developed by the Government of Manitoba in April 2017.

*This document is available in PDF format on the Brandon University website. This document can be attained in alternative formats from the Office of the President, Room 116 Clark Hall.*

## **2. Purpose**

The purpose of this policy is to promote a culture of consent and respect, develop awareness and prevention of sexualized violence, reduce the occurrence of sexualized violence, and respond to the needs of the complainants respondents and all those affected by sexualized violence.

This Policy also includes an ongoing commitment to the safety of the University community and to social change.

## **3. Scope**

This policy applies to all members of the Brandon University community, including our students, staff, faculty, contractors and suppliers of services, volunteers, visitors, and individuals who are connected to any University initiatives. This policy applies to actions, interactions, and behaviours that take place on or off campus including the business of Brandon University or other actions sanctioned by or representing the University including but not limited to athletic events, practical and clinical placements, academic or professional conferences, volunteer activities, and academic or field research work. The context of the interaction need not be University related if the primary relationship is through a mutual connection to the University. This applies to all forms of sexualized violence, including sexual assault, sexual harassment, and all other forms of sexual misconduct, see Section 4, Definitions of this policy.

A violation of this policy may include, but is not limited to electronic communications: social media, text messages, email, sharing of images without consent, etc.

## **4. Definitions**

*See Appendix A attached.*

## **5. Guiding Principles**

### **a) Trauma-Informed Approach**

It is critical that all members of the University community recognize the trauma that survivors of sexualized violence can experience, and react to disclosures of sexualized violence in a mindful way so that they do not compound that trauma. This means that anyone coming forward to disclose sexualized violence must be treated with dignity and respect. Effective and respectful interventions require both the avoidance of re-traumatization and supportive policies and procedures to assist people with rebuilding their lives. They must also be informed and empowered to choose what support they require and when or decline the same.

#### **b) Survivor-Centered Approach**

Any time a complainant comes forward to disclose sexualized violence; their needs must be the primary focus. A survivor-centred approach means giving the complainant information about processes and supports, implementing measures to protect both their physical safety and their privacy, and maximizing their ability to choose how or if to disclose, report, and access support. A survivor-centred approach recognizes that events affect everyone differently and that the lived experience of the complainant cannot be minimized. Therefore, only within this policy and protocol will the term “complainant” be used to refer to a survivor of sexualized violence. Survivor will be used in all educational and awareness materials and prevention/education curriculum.

#### **c) Culture of Consent**

The University fully supports the right of every individual to have complete autonomy over their own body, and recognizes the legal requirement of asking for and receiving consent before engaging in, and/or during any kind of sexual activity. A culture of consent requires that the person initiating the activity ask for consent, and that the only valid consent is freely given, not passive, silent, or coerced. Consent can be withdrawn at any time. Any sexual act carried out in the absence of consent is an act of sexualized violence.

#### **d) Inclusivity**

Recognizing the gendered nature of sexualized violence is critical to our support of survivors, and in our education and prevention efforts. Sexualized violence is predominantly perpetrated by cisgender men against women. We recognize that LGBT2SQ+ individuals are particularly vulnerable to sexualized violence, as are Indigenous women and women of colour, and people with disabilities. Everyone who experiences sexualized violence deserves equal respect and treatment at the University, and is equally protected under this policy.

#### **e) Safety for All**

The University recognizes the need for safety of anyone who discloses that they have experienced sexualized violence. The responsibility of the University extends also to the safety of other members of the University community, including the respondent, witnesses, bystanders and in the larger community in which we operate.

#### **f) Prevention through Education**

Members of the University community must share an understanding of the roles and responsibilities of each of us in preventing, recognizing, and responding to acts of sexualized violence. Education and awareness are key to developing this understanding and require an ongoing commitment from the University.

### **g) Due Process**

Anyone investigating a concern or report must remain neutral, and curb any bias in how they proceed and make decisions. Due process also means that the respondent has the right to know the report made against them in full detail and has the right to reply to these reports. Disciplinary decisions made under this policy will be based on evidence, and that evidence will be shared with both the complainant and respondent.

## **6. Parameters of Consent**

The University Community is working to promote a culture of consent as follows:

- a) Consent is active and freely given, not passive, silent, or coerced.
- b) It is the responsibility of the person who wants to engage in physical contact or sexual activity to make sure that they have consent from the other person(s) involved.
- c) Consent to one sexual act does not constitute or imply consent to a different sexual act.
- d) Consent is required regardless of the relationship status or sexual history.
- e) Consent cannot be given by a person who is incapacitated by alcohol or drugs, or who is unconscious or incapable of giving consent due to some other physical or mental incapacity.
- f) Consent cannot be given when the respondent induces the person to engage in the activity by abusing a position of trust, power, or authority.
- g) Consent can be revoked at any time.

*Source: Ryerson University, Sexual Violence Policy, Section 3, Parameters of Consent, 2016*

## **7. Confidentiality**

Safeguarding confidentiality is central to creating an environment of security and respect, where complainants feel safe to disclose and to seek support and accommodation. Brandon University is committed to securing such an environment. We are committed to keeping all parties informed when there is a situation where confidentiality may be lifted. All information collected as a result of a report made under this policy will be managed in accordance with *The Freedom of Information and Protection of Privacy Act* and *Personal Health Information Protection Act* as applicable.



## 8. Conflicts of Interest

If a Dean, Director or member of the Sexualized Violence Response Team (SVRT), or any other Brandon University authority empowered to impose sanctions has a conflict of interest in a particular matter, or there is a reasonable apprehension of bias, that individual must disclose the conflict of interest and must not continue their involvement in the matter. Brandon University will appoint another person to continue with the disciplinary action.

For more information about Conflict of Interest at Brandon University, please see the [Conflict of Interest By-Law \(By-law No. 10\)](#).

## 9. Support

- a) Brandon University is committed to providing staff, faculty and students support through the appropriate offices if they have experienced sexualized violence.
- b) We strive to ensure complainants can choose to participate in the continuum of support and investigation with a respondent at any level at which they feel comfortable.
- c) The SVEPC works with complainants to determine their needs for support and/or workplace and academic accommodation, and assists with access to these supports and/or accommodation. We recognize that accommodations requested and approved are likely to differ on a case-by-case basis. There is no one-size fits- all approach to accommodating and meeting the needs of complainants, and every effort will be made to minimize disruption to the complainant's work/studies and/or daily routine.
- d) Complainants have the right to determine whether and how much they choose to disclose or report about their experience, and to decide if they will initiate a formal report off campus to Police and/or on campus to University Administration.
- e) Complainants will not be required or pressured to make a formal report. In some rare cases, when safety is an issue, the University may be required to take action without the complainant's approval, see Section 7, Confidentiality. If this action becomes necessary, the complainant will be fully informed and will be supported through the entire process. The decision to determine if Confidentiality needs to be broken to ensure safety for all will only be done collaboratively with Administration in consultation with the SVEPC and the Sexual Violence Response Team.
- f) Complainants have the right to be protected from face to face encounters with the respondent within any disclosure or report process.
- g) The University acknowledges that individuals may be hesitant to disclose or report sexualized violence in situations where they have been drinking alcohol and/or using

drugs at the time the sexualized violence took place. Therefore, a complainant is protected from disclosing any drug or alcohol use at the time of the incident. A complainant that discloses or reports sexualized violence in good faith will not be subject to violations under Brandon University's policies related to drug and alcohol at the time the incident took place.

- h) Complainants have the option to make an anonymous report of sexualized violence through the SVEPC to law enforcement. The third party report provides detailed information about the crime and the respondent, but does not include the name or contact information of the complainant.
- i) Members of the BU community have the option of anonymous reporting to their post-secondary institution. This involves coming forward to inform the University about incidents of sexualized violence but never have their identity revealed to the institution (other than to the SVEPC). The information is then given to the University.

Note: The University may be unable to proceed with an investigation involving anonymous or third party allegations due to lack of evidence from the individual who was directly subjected to sexualized violence, or where the process would violate procedural fairness. However, where sufficient evidence exists, and procedural fairness is not violated, the University may decide to proceed.

## **10. Disclosure Options**

Brandon University recognizes that the survivor of sexualized violence should choose the person to whom they first disclose their experience.

Disclosure occurs when the complainant tells a member of the University community that they have experienced sexualized violence. A disclosure may not necessarily lead to a formal report. The complainant can make a disclosure and request that no action be taken.

Individuals may disclose an incident of sexualized violence to people in many different roles within the University community. With the permission of the individual, we encourage all students, staff, and faculty to refer any such disclosures or incidents immediately to the Sexual Violence Education and Prevention Coordinator (SVEPC). Should the SVEPC not be available, there are other resources both on campus and within the community, such as the Student Services Counsellors, Human Resources, and community-based resources. See section 19, Resources and Support.

## **11. Reporting Options**

Individuals who have experienced sexualized violence have options when filing a formal report in response to an incident. The SVEPC can assist individuals in understanding each of these options and ensure that they have all the information they require to decide next best steps in their healing. In accordance with rape shield protection, the complainant will not be required

to disclose past sexual history. Detailed information on options, is available on our Sexualized Violence Support and Information website. All processes are required to protect the rights of both the complainant and the respondent. Reporting options include the following:

- a) **Criminal Option** - a report can be made to a Police Service or local Royal Canadian Mounted Police (RCMP), depending on where the incident occurred, in an effort to pursue criminal charges under the *Criminal Code of Canada*.
- b) **Medical assistance/forensic medical exam** - A complainant has the option to attend a hospital or Emergency Room for medical attention to address possible physical injury, pregnancy and/or sexually transmitted infections or consent to a forensic exam. Complainants may be referred to a physician in the community where they feel comfortable to ensure their health is secure.
- c) **Non-Criminal on-Campus Options** - a report can be made under the following policies and/or processes:
  - Brandon University Sexualized Violence Policy
  - Brandon University Discrimination and Harassment Prevention Policy
  - Brandon University Statement of Student Rights and Responsibilities Process

Where an investigation is required, the Investigator gathers information as quickly as possible, following the processes outlined in the [Guide to Internal Investigations at Brandon University](#).

## 12. Retaliation

Brandon University will not tolerate any retaliation, directly or indirectly, against anyone who discloses or reports sexualized violence, or who participates in a Brandon University process that addresses reports of sexualized violence against a member of the University community. Anyone found in violation of this commitment will be sanctioned in accordance with University policies (the Discrimination and Harassment Prevention Policy, The Statement of Student Rights and Responsibilities Process, etc.).

## 13. Corrective Actions

Even where it is determined that this policy has not been breached, the behaviour giving rise to the report may be contrary to the University's commitment to maintaining a productive and respectful work and learning environment. In such a case, Brandon University may find it necessary to provide developmental or educational opportunities to address the behaviour.

Examples of corrective actions and/or remedial actions may include one or more of the following:

- Written warning

*This document is available in PDF format on the Brandon University website. This document can be attained in alternative formats from the Office of the President, Room 116 Clark Hall.*

- Formal apology
- Mandated education or workshops
- Community service
- Loss of privileges
- Probation
- Restitution/alternative resolution
- Interim suspension (with/without pay, pending an investigation) (removal from a course or part of a course)
- Termination or expulsion or formal removal from campus
- Specific for employees: change in work assignment
- Personal counselling

The complainant will receive enough information about the corrective action to maintain the complainant's ongoing safety and/or reduce the possibility of contact between the parties.

#### **14. Additional Recourse**

Nothing in this Policy or the Procedure is intended to discourage or prevent a member of the University community, including students and employees, from filing a complaint with the Manitoba Human Rights Commission, or from exercising any other legal rights pursuant to any other law.

#### **15. Appeals**

Both parties involved in an investigation have the right to appeal the decision of the investigator.

- a) Union members may grieve decisions or actions under this policy through the processes outlined in their respective collective agreements.
- b) Students may appeal decisions or actions under this policy directly to the Vice-President (Academic & Provost).
- c) Exempt staff may appeal decisions or actions under this policy directly to the Vice-President (Administration & Finance).
- d) Members of the President's Executive Council (PEC) may appeal decisions or actions under this policy directly to the Chair of the Board of Governors.

#### **16. Education and Prevention of Sexualized Violence**

Brandon University is committed to ending sexualized violence through a culture of raising awareness and providing training for bystanders. Brandon University is working in partnership with the internal and external community to develop a yearly education strategy, which includes presentations, awareness campaign, workshops, online resources, email blasts and other materials throughout the school year. This will be accomplished by committed funding to



support programs and the development of Prevention/Education and Support Committee for Sexualized Violence to develop yearly strategy on campus.

University departments and faculties are encouraged to include education on rape culture and sexualized violence in their course materials and program curriculum where appropriate.

## **17. Roles and Responsibilities**

There are a number of roles at the University that are integral in the execution of this policy. Specifically, the Office of the Vice-President (Academic and Provost) in coordination with the SEVPC who oversees the day-to-day operation of this policy and is responsible for monitoring and updating this policy and accompanying protocol on a continual basis.

*For detailed information on the roles and responsibilities of the below, see Appendix B attached.*

- a) **Sexual Assault Advisory Group (SAAG)**
- b) **Office of the Vice-President (Academic and Provost)**
- c) **Sexual Violence Education and Prevention Coordinator (SVEPC)**
- d) **Dean of Students**
- e) **Chief Human Resources Officer**
- f) **Sexualized Violence Response Team (SVRT)**
- g) **Student Accessibility Services Coordinator**
- h) **Diversity and Human Rights Advisor (DHRA)**
- i) **All members of the University Community**
- j) **Faculty and Academic Departments**

## **18. Maintenance of Statistics**

The office of the SVEPC office will house and maintain confidential reports and files of all forms of sexualized violence, and in coordination with Human Resources and Student Services, will track, report on and institute prevention measures as appropriate.

Brandon University will publicly report activities being undertaken to raise awareness and contribute to the prevention of sexualized violence at Brandon University. This will be accomplished through annual reports published on the [Sexual Violence Support and Information website](#). The SVEPC will also track and report on results of activities being undertaken, such as the number of staff/students that attend information sessions, training

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activities and the results of consultations.

## **19. Resources and Support**

### **On Campus (during business hours from 8:30 am to 4:30 pm, Monday to Friday):**

Sexual Violence Education and Prevention Coordinator (SVEPC): 204-727-7498

Human Resources: 204-727-7416

Diversity and Human Rights Advisor: 204-727-9785

Student Services: 204-727-9737

### **Off Campus:**

Klinic 24-hour toll-free Sexual Assault Crisis Line: 1-888-292-7565

Women's Resource Centre: 204-726-8632, Toll-Free: 1-866-255-4432

Crisis Stabilization Unit: 1-855-222-6011

Mobile Crisis Unit: 204-725-4411 or 1-888-379-7699

Adult Crisis Line (Available 24/7): 1-888-379-7699

Youth Crisis Line (Available 24/7): 1-866-403-5459

## **20. Related Policies and Procedures**

- a) Discrimination and Harassment and Prevention Policy
- b) Statement of Student Rights and Responsibilities
- c) Criminal Code of Canada, RSC 1985, c C-46
- d) The Human Rights Code, C.C.S.M. c. H175
- e) Workplace Safety and Health Act and Regulations
- f) Manitoba Child and Family Services Act
- g) The Sexual Violence Awareness and Prevention Act, Bill 15
- h) Brandon University Accessibility Plan

## **21. Review**

This policy will be reviewed every three years (or as necessary) by the Office of the Vice-President (Academic and Provost).

*This document is available in PDF format on the Brandon University website. This document can be attained in alternative formats from the Office of the President, Room 116 Clark Hall.*

## APPENDIX A: Definitions

- a) **Bystanders** are individuals who witness sexualized violence or the conditions that perpetuate violence (rape culture). Bystanders are not directly involved in the situation, but can make a choice to intervene by discouraging, preventing, or interrupting an incident
- b) **Cisgender** denotes or relates to a person whose self-identity conforms with the gender that corresponds to their assigned sex at birth.
- c) **Complainant** is an individual who has disclosed/reported an experience of sexualized violence. We recognize that it is an individual's choice how they are referred to, and Brandon University will honour that choice. Within this policy, the term complainant is interchangeable with victim and survivor.
- d) **Consent** is the voluntary agreement to engage in a sexual activity and to continue to engage in the activity. An individual's consent can be withdrawn at any time. Consent as it relates to sexual assault is referred to in the *Criminal Code of Canada* s.265(3) and s.273.1. See section 6 Parameters of Consent.
- e) **Culture of Consent** is a culture that normalizes and condones ongoing and voluntary consent as an integral aspect of healthy sexuality, and the safety and security of a person. A culture of consent disrupts and dismantles rape culture, see Section 6, Parameters of Consent in this policy.
- f) **Disclosure** is when the complainant tells a member of the University community that they have experienced sexualized violence. A disclosure may not necessarily lead to a formal report.
- g) **Electronic Communication** may include, but is not limited to, email, texting, and forms of social media: e.g. Facebook, Instagram, Snapchat, Twitter.
- h) **Initial Contact** is the person to whom the complainant initially discloses the incident of sexualized violence. This person may be a fellow student, colleague, coach, professor and/or student services counsellor, etc.
- i) **Intersectionality** is the interconnected nature of social categorization such as race, class and gender as they apply to a given individual or group, regarded as creating overlapping and interdependent systems of discrimination or power inequalities.
- j) **Rape Culture** is a range of beliefs, attitudes, behaviours, and values that condone, encourage, justify, excuse, and/or perpetuate sexualized violence. Rape culture can be

used as an umbrella term to encompass individual, institutional, and systemic normalization and trivialization of sexualized violence, including (but not limited to) rape jokes, victim-blaming, and the lack of criminal convictions and/or other accountability mechanisms for perpetrators of sexualized violence.

- k) **Rape shield protection:** refers to explicit protections given to complainants to not be required to disclose their past sexual history as part of a sexualized violence investigation process.
- l) **Report** is a formal account of an incident of sexualized violence to the institution for initiating some form of investigation or adjudication on or off campus.
- m) **Respondent** is a person who has been accused of committing (an) incident(s) of sexualized violence.
- n) **Safety Plans** are essential to optimize the safety of victims/survivors of sexualized violence at every stage. Survivors know their own situation the best and are suited to identify where the dangers lie while advocates can assist in the process by offering options for dealing with different situations. Safety plans include information about potential triggers or dangerous situations, methods to control these risks, and internal and external resources that are available to the survivor. Safety plans should consider issues of physical, online/digital, psychological/emotional, cultural and financial safety.
- o) **Sexual Assault** is any form of sexual contact forced and unwanted that occurs without ongoing and freely given consent, such as non-consensual touching that is sexual in nature, or forced vaginal, anal and oral penetration. Sexual assault can be committed by an intimate partner, someone known to the victim/survivor, an acquaintance, or stranger. Sexual Assault is outlined in s.271-273 in the *Criminal Code of Canada*.
- p) **Sexual Harassment** is unwanted communications or actions that are sexual in nature, and are offensive, intimidating, or humiliating. It can take many forms, including verbal, written, or visual. Sexual harassment includes unwanted touching, offensive jokes, sexual requests and verbal abuse. Sexual harassment is a type of sex discrimination, and falls under the *Manitoba Human Rights Code*, s.19(2) and *Workplace Safety and Health Act and Regulations*.
- q) **Sexual Misconduct** is a broad term used to describe any unwelcome behaviour of a sexual nature that is committed without consent, by force, intimidation, coercion or manipulation. It includes, but is not limited to sexual assault, sexual harassment, sexual exploitation and sexual intimidation.
- r) **Sexualized Violence** is a spectrum of non-consensual sexual contact, behavior and violence. Examples include sexual harassment, sexual assault, sexual exploitation, criminal harassment, indecent exposure and voyeurism. Sexualized violence can be

perpetrated by anyone – an acquaintance, classmate, professor, family member, colleague, supervisor/dean, non-academic staff, friend past or current dating partner, intimate partner, or stranger. Sexualized violence can affect anyone, regardless of gender, race, class, dis/ability, citizenship, age, or size.

*Source: Brock University, Sexual Assault and Harassment Policy, Purpose 1.1, 2017*

- s) **Victim/Survivor** is a term used in the policy and protocol but does not suggest that the outcome of any investigation or decision making process has already been determined, and will not prejudice the outcome of an investigation.

## APPENDIX B: Roles and Responsibilities

### a) Sexual Assault Advisory Group (SAAG)

SAAG is a standing committee responsible for maintaining and communicating an ongoing commitment to address the issue of sexualized violence on university campuses, receiving and reviewing the SVEPC's annual report, and provide advice on potential amendments to this policy and the procedure.

### b) Office of the Vice-President (Academic and Provost)

The office of the Vice-President (Academic and Provost) provides an organizational home for the SVEPC and oversees of the implementation of the Statement of Student Rights and Responsibilities. The Vice-President (Academic and Provost) is chair of the Sexual Assault Advisory Group (SAAG) and is responsible for maintaining and communicating an ongoing commitment to address the issue of sexualized violence among the University community.

### c) Sexual Violence Education and Prevention Coordinator (SVEPC)

All members of the Brandon University community are encouraged to inform the SVEPC of any sexual assaults, or allegations of any forms of sexualized violence governed by this policy, that are brought to their attention. Such information may include witnessing or having either knowledge of or a reason to believe that an incident of sexualized violence may have occurred. The SVEPC can be consulted at any point in the process.

The SVEPC oversees the day-to-day operation of this policy as outlined in the office's job description and is responsible to monitor and update this policy and accompanying protocol on a continual basis. The SVEPC works with partners and stakeholders on and off campus to develop and deliver awareness, prevention, education, and training programs, and provides guidance to the University community on how best to implement this policy and the procedure.

The SVEPC maintains statistical data on the number and types of disclosures/reports received, investigations conducted, and the outcomes of these investigations. The SVEPC prepares an annual report of aggregated data collected, information on any observed trends, a summary of prevention and awareness programming undertaken, and recommendations for potential amendments to this policy and procedure. The data will not include any information that would identify any community member. It is available on the [Sexualized Violence Support and Information webpage](#).

### d) Dean of Students

The Dean of Students works in close partnership with the Vice-President (Academic and



Provost), SVEPC, Chief Human Resources Officer, and Diversity and Human Rights Advisor on the interpretation and application of this policy. The Dean of Students is responsible for ensuring that the appropriate supports are in place for complainants who are students, through the many units within Student Services: Student Counselling, Academic Advising, the Indigenous Peoples' Centre, the Office of International Activities, and Student Accessibility Services.

**e) Chief Human Resources Officer**

The Chief Human Resources Officer works in close partnership with the Vice-President (Academic and Provost), SVEPC, Dean of Students, and Diversity and Human Rights Advisor (DHRA) on the interpretation and application of this policy. The Chief Human Resources Officer is responsible for ensuring that appropriate supports are in place for survivors who are employees of the institution, through Human Resources benefits and programs, and the Employee and Family Assistance Program (EFAP). The Chief Human Resources Officer also works with Human Resources consultants, managers, and supervisors to support workplace accommodations required in response to incidents of sexualized violence at Brandon University.

**f) Sexualized Violence Response Team (SVRT)**

The team consists of a core group of members with skills and expertise to coordinate and facilitate a response to all forms of sexualized violence on our campus. SVRT is co-chaired by the Chief Human Resources Officer and the Dean of Students. Other members of the University community will be included on the team on a case by case basis. The team will develop a plan around services, supports and options for all individuals affected by sexualized violence.

SVRT is convened by the SVEPC and they will make decisions about how to proceed to the next steps, which could include proceeding with an investigation and determine whether it is internal or external.

**g) Student Accessibility Services Coordinator**

The Student Accessibility Services Coordinator works in close partnership with the Vice-President (Academic and Provost), SVEPC, and Dean of Students as a liaison between students and faculty to implement accommodations for student academic success. This position may also be engaged to join the SVRT when a report is made.

**h) Diversity and Human Rights Advisor (DHRA)**

The DHRA works in close partnership with the Vice-President (Academic and Provost), SVEPC, Director of Human Resources and Dean of Students on the interpretation and application of this policy. The DHRA brings an awareness that addressing issues of sexualized violence needs to be grounded in an understanding that each person's experience is affected by many factors, including sex, ancestry, race, ethnicity, language, ability, faith, age, socioeconomic status, sexual orientation, and gender identity.


**i) All members of the University Community**

Any member of the University community who receives a disclosure about an incident of sexualized violence will consult with the SVEPC as soon as possible to ensure that there is a coordinated response. If the complainant does not wish to speak to the SVEPC, all members of the University community are expected to report the fact of the disclosure (without identifying details), to the SVEPC for statistical purposes. All members of the University community will respect the privacy of the persons involved and will respect the role of the SVEPC as the lead coordinator of institutional support for the complainant.

**j) Faculties, Schools and Academic Departments**

In addition to the responsibilities outlined in the previous section, Faculties, Schools and academic departments will cooperate to the extent possible with students or their advocates as they attempt to seek academic accommodation in the face of incidents of sexualized violence and their aftermath, and will recognize the need for confidentiality in these situations.



 <b>BRANDON UNIVERSITY</b>	<b>Information Technology Acceptable Use Policy (AUP)</b>	<b>Approved by:</b> President's Administrative Council  <b>Administered by:</b> Chief Information Officer
<b>Administrative Policy</b>	<b>First Approved:</b> January 11, 2006	<b>Updated:</b> June 16, 2022

Brandon University ("the University") is committed to providing secure and high-quality Information Technology (IT) resources and services for all faculty, students, staff, and authorized external users and guests.

The University respects the privacy of all users of its IT resources and makes reasonable efforts to maintain confidentiality of Personal Information. The University monitors IT resources for malicious activity and may monitor the activity and accounts of individual users without notice, under any one or more of the following circumstances:

- a. It reasonably appears necessary to do so to protect the integrity, security, or functionality of the University or its IT resources, or to protect the University from liability.
- b. An account appears to be engaged in unusual or unusually excessive activity, as indicated by the monitoring of general activity and usage patterns.
- c. There are reasonable grounds to suspect a breach of acceptable use or a possible violation of any law or University policy.

Access to Personal Information may be granted to an Authorized User, System Administrator, or agent to meet legitimate University business needs and operational requirements, or if an Authorized User is unavailable, or has their access revoked. Such access will be subject to the authorization of the Chief Information Officer or equivalent in consultation with the Associate Vice President People and Talent, Dean of Students, Provost, Vice President Administration and Finance, or President.

The University respects principles of academic freedom and open access to information for academic and teaching purposes. The free exchange of ideas is central to the educational process and the Information Technology Acceptable Use Policy supports this principle. The exceptions are uses that violate the law, endanger IT resources, or violate the policies articulated in this document.

## 1.0 Scope

The Information Technology Acceptable Use Policy (AUP) has been established to ensure the security and integrity of the University's IT resources, and fair and equitable access to those resources by all the members of the University community. The University is the sole owner and operator of the University's IT resources. Information Technology Services

("ITS") has a responsibility to maintain IT resources in a manner consistent with the University's mission.

This policy shall apply to all members of the University community, including faculty, staff, students, contractors, and authorized external users, and guests.

This policy governs the use of IT resources owned and operated by the University, including those purchased through research funds administered by the University or acquired by the University through a contractual agreement. "IT resources" is inclusive of all University computing systems, devices, and technologies including servers, desktops, laptops, laboratory computers, smart phones, networks and network devices, hardware, software, data, and applications related to these systems. This policy covers all University-owned IT resources, facilities, equipment, and services regardless of location or access site (on campus or off campus).

IT resources are intended to support research, education, instruction, and administrative processes of the University. Members of the University community using IT resources shall be aware they may have access to sensitive data in the course of their work and study and that such data should be appropriately managed and protected. Members of the University community should likewise be aware that improper usage of the University networks and systems could have adverse effects on other IT resources, facilities, and users at the University.

The policy has been developed in the context of, and is designed to complement:

- Existing University policies and regulations, particularly those governing use of University property and services, privacy, security, disciplinary aspects, respectful workplace compliance, non-academic misconduct, discrimination and harassment prevention, student records, copyright and intellectual property.
- Any Municipal, Provincial, and Federal Laws or Regulations.
- Collective agreements.

## **2.0 Policy**

### **2.1 Authorized Use**

- a. University students, staff, faculty, visiting professors, researchers, or special presenters are entitled to the secure wireless network provided by the University.
- b. Visitors and guests to the University are allowed access to the University's open, non-secure wireless network.
- c. Users have access to the IT resources for which they are authorized.
- d. Users are responsible for the use of their accounts and devices and shall keep their passwords and devices secure.

- e. While this policy allows for reasonable personal use of University IT resources, the University is committed to the resources allocated for University related teaching, learning, research, and administrative work. The use of the IT resources for non-University-related activities that place heavy loads on University resources, causes network congestion, or that severely impacts the work of others is prohibited.
- f. Users are responsible to follow the license agreements of the software they use and install. ITS may require users to obtain clarification from vendors on the responsibilities and limitations under software license agreements.

## **2.2 Breaches of Acceptable Use**

Unless explicitly authorized (for instance, for purposes of study and research or for University business purposes) breaches of acceptable use include, but are not limited to:

- a. Deliberate attempts to tamper with IT resources.
- b. Attempting to circumvent information security provisions or exploit vulnerabilities, activities intended to disrupt normal University operations, IT resources, data security, networks, network security, hardware, or computer facilities.
- c. Attempting unauthorized access to any IT resources.
- d. Giving access to licensed or access-controlled IT resources to non-authorized persons.
- e. Divulging passwords or credentials to any person, system, or third-party. ITS does not require access to users' passwords, nor does any other party.
- f. Moving, modifying, or copying programs, or any other forms of software from one system to another without proper authorization. This includes personal computers, devices, and personal workstation software.
- g. Use of software belonging to or licensed to other users or to Brandon University without proper authorization to do so.
- h. Breaking or attempting to circumvent copyright, intellectual property, access, and licensing provisions.
- i. Attempts to misrepresent or use other mechanisms to access restricted data.
- j. Attempts to collect, use, or disclose, the personal information of others without informed consent of the other party.
- k. Installation of network-enabled devices on the University's secure networks without authorization from ITS.
- l. Use of University IT resources to create, display, distribute or disseminate threatening, discriminatory, harassing, abusive, or malicious material.
- m. Use of University IT resources to send threatening, discriminatory, harassing, abusive, or malicious emails or messages.
- n. Sending messages under an assumed name or modified address with intent to misidentify the sender or origin of the message.
- o. The use of IT resources for personal business or commercial use, including but not limited to the posting of commercial web pages and the distribution of unsolicited advertising.
- p. Use of IT resources for private consulting or for any form of direct personal financial gain.

- q. Passwords used at the University shall not be used for any other system or service outside of Brandon University.

## **2.7 Consequences of Prohibited Use**

- a. The nature and severity of violations of this policy determines the level of initial response. Repeated violations of this policy following clear communication or warnings adds to severity of the response.
- b. If the integrity or security of an IT resource is compromised or at-risk through suspected violation of this policy, ITS may direct the immediate removal of a user's access to IT resources pending completion of an internal investigation.
- c. Examples of corrective actions and/or remedial actions may include one or more of the following:
  - Verbal or written warning from the appropriate supervisor/administrator
  - Formal apology
  - Mandated education or training
  - Community service
  - Loss of privileges
  - Probation
  - Restitution/alternative resolution
  - Interim suspension (with/without pay, pending an investigation) (removal from a course or part of a course)
  - Termination or expulsion or formal removal from campus
  - Specific for employees: change in work assignment
- d. If violation of this policy is concurrent with violation of other University policies, then University Administrators may investigate the violation of all applicable policies and assign corrective action based on combined severity of all applicable policy violations.
- e. If violation of this policy is concurrent with illegal actions, law enforcement will be notified.

## **3.0 Definitions**

- 3.1** Access: The ability to view, use, edit information and data in IT resources.
- 3.2** Account: A system-generated user identification.
- 3.3** Authorized External User: An individual granted authorization to use IT resources owned by and operated by Brandon University but who is not an employee or student of the institution (e.g. invited speaker).
- 3.4** Facility: Any combination of IT resources or services, including physical spaces such as labs, or virtual services such as learning management systems.
- 3.5** Guest: A member of the public who is not an employee, student, or authorized external user of the institution (e.g. community user in the library, using wireless at Healthy Living Centre).
- 3.6** Hardware: The physical equipment used for networking and computing.

- 3.7 Information Technology (IT) Resources:** Any information, data, software, hardware, research equipment, system, network, network enabled devices, facility, peripherals owned, leased, controlled, or operated by the University.
- 3.8 Messages:** Electronically transmitted communication, including but not limited to emails, text messages, and chats.
- 3.9 Network:** Any number of computers and devices joined together by a physical communications link which provides the roads for information traffic (e.g., sending files and e-mail) within an organizational environment, and allow users to access databases and share applications residing on servers.
- 3.10 Personal Information:** Personal information as defined by Manitoba Freedom of Information and Protection of Privacy Act (FIPPA).
- 3.11 Software:** The programs and other operating information used by a computer.
- 3.12 Users:** Any individual that is using IT resources owned by and operated by Brandon University.

#### **4.0 Review**

Formal review of this policy will be conducted every three (3) years with the next scheduled review date June 2025. In the interim, this policy may be revised or rescinded if the President deems necessary or if there are changes within legislation which require such.

#### **5.0 Referenced Policies**

- Brandon University Collective Agreements
- Brandon University Discrimination and Harassment Prevention Policy and Procedures
- Brandon University Sexualized Violence Policy
- Brandon University Student Non-Academic Misconduct Policy
- Guide to Internal Investigations at Brandon University
- Brandon University's Student Records Policy
- FIPPA (Freedom of Information and Protection of Privacy Act)

#### **6.0 Related Procedures**

- ITS Procedures related to Account Provisioning
- ITS Procedures related to Incident Management

## **Acknowledgement of Brandon University Policies**

**As part of my onboarding with Brandon University, I have received the following practices and policies (please check each box):**

- ☐ **Pre-Employment Practices**
- ☐ **Employment Practices**
- ☐ **Accessibility Policy**
- ☐ **Workplace Accommodation Policy and Procedures**
- ☐ **Discrimination and Harassment Policy**
- ☐ **Sexualized Violence Policy**
- ☐ **Information Technology Acceptable Use Policy**

**This is to confirm that I have reviewed these policies. Should I have questions about any of these policies, I will ask my supervisor or Human Resources for clarification.**

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(Employee Name – print)

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(Employee Signature)

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(Date)

This form is available in an alternate format upon request.

Please return this form to Human Resources where it will remain in the employee's personnel file.