

Name:	Safe Disclosure Policy
Policy Number:	12-009
Approving Authority:	Board of Governors
Approved:	March 24, 2023
Responsible Office:	President
Responsibility:	University Secretary & General Counsel
Revision Date(s):	Not Applicable
Supersedes:	Not Applicable
Next Review:	March 23, 2026 (3 years from effective date or last revision)

- 1. **Purpose:** The purpose of this Policy is to:
- a. Provide a process for members of the University community to disclose concerns about suspected Improper Activity; and
- b. Protect those individuals making or involved in the investigation of a Good Faith Disclosure of suspected Improper Activity from Reprisal

2. Scope:

- a. This Policy applies to all employees, students, volunteers, contractors, and suppliers of Saint Mary's University. This Policy applies to suspected Improper Activity as defined in Section 3b. This Policy <u>does not stand on its own</u>. There are several other codes and policies which set forth standards of conduct. They are noted in Section 6. If another Policy provides a complaint or reporting process that is more directly applicable to the subject matter of a potential disclosure, the disclosing individual should consider whether recourse under such other Policy is appropriate.
- b. This Policy does not modify or supersede the terms of any collective agreement binding upon the University. This Policy shall be read and interpreted in harmony with the terms of any such collective agreement. In such case where this Policy directly conflicts with a term or terms of an applicable collective agreement, that term or those terms of that applicable collective agreement shall prevail for that case.
- 3. **Definitions:** Terms used in this Policy have the following meanings:
- a. **Good Faith Disclosure** means a disclosure concerning suspected Improper Activity that is determined to be based on reasonable belief and is not malicious, frivolous, or vexatious.

b. **Improper Activity** means:

- i. A breach of any University policy;
- ii. A violation of a legal or regulatory requirement;
- iii. Research misconduct; or

- iv. Financial misconduct, including but not limited to:
 - 1) theft, misapplication, or misappropriation of University assets;
 - 2) destruction, removal or concealment of University records or property for personal gain;
 - 3) forgery, falsification or alteration or inappropriate destruction of finance-related documents;
 - 4) accepting or seeking anything of material value from contractors, vendors or persons providing or seeking to provide goods or services to the University for personal gain or benefit. For clarity, this shall not include free samples of teaching materials; and
 - 5) authorizing or receiving payments for goods not received, services not performed, or hours not worked.
- c. **Reprisal** means any act of intimidation, harassment, discipline, or retaliation towards any individual related to a Good Faith Disclosure and includes, without limitation, any demotion, suspension, termination, or any actual or threatened action that adversely affects the employment or learning environment of any faculty, staff or student, or the working conditions or contractual arrangements of a contractor or supplier.

4. Policy:

a. **Commitment to integrity:** Saint Mary's University is committed to conducting its activities and managing its resources with integrity and in accordance with all applicable legislative and regulatory requirements and University policies. All persons subject to this Policy are expected to act with integrity and to deal with University assets and resources in a fiscally responsible manner, in compliance with applicable legislative and regulatory requirements and University policies.

b. Disclosure of Improper Activity:

- i. To support the University's commitment to integrity, accountability, and transparency, any faculty, staff, student, volunteer, contractor, or supplier who has reasonable grounds to believe that Improper Activity has occurred or will occur is entitled and encouraged to make a Good Faith Disclosure. Good Faith Disclosures should, wherever possible, be made directly to the relevant academic or administrative unit or supervisor.
- ii. Nothing in this Policy relieves those responsible for the administration and management of academic, administrative, or service departments from the responsibility of addressing situations of Improper Activity in accordance with good management practices and existing policies, guidelines, and procedures. It is also the expectation that members of the University community will continue to use existing channels to report Improper Activity and only resort to this Policy if such channels prove ineffective or are inappropriate in the circumstances.
- iii. Where an individual does not wish to disclose directly to the relevant unit or supervisor, the individual may make a Good Faith Disclosure under this Policy in accordance with the Safe Disclosure Procedures.
- iv. The University will use reasonable efforts to keep the details of a Good Faith Disclosure confidential, including the identities of all participants in an investigation of wrongdoing, including the persons making the Good Faith Disclosure, witnesses, and the persons alleged to be responsible for wrongdoing, and any details of the alleged misconduct that could identify persons, to the extent permitted under legislation, regulations, University policy and collective agreements. All participants in an investigation of alleged Improper Activity, including persons who make a disclosure, witnesses, and the persons alleged to

be responsible for Improper Activity, shall keep the details and results of the investigation confidential, and shall not discuss the matter with anyone other than those conducting the investigation. Any person who violates this confidentiality requirement will be subject to disciplinary measures up to and including suspension or termination.

- v. If an individual wishes to make a Good Faith Disclosure under this Policy anonymously, the procedures set out in the Safe Disclosure Procedures should be followed. An anonymous Good Faith Disclosure will be investigated, but the investigation may be challenged if it is not possible to confirm allegations from attributable sources.
- vi. The University will make reasonable, good faith efforts to investigate and respond to Good Faith Disclosures of Improper Activity, in accordance with any applicable legislative and regulatory requirements, University policies and collective agreements.

c. **Protection for Good Faith Disclosure**

- i. The University will take all reasonable steps to ensure that individuals who are determined to have made a Good Faith Disclosure in accordance with this Policy, or who have provided information or participated in an investigation of a Good Faith Disclosure, are protected from Reprisal.
- ii. Any individual who experiences a Reprisal or threat of Reprisal related to a Good Faith Disclosure made in accordance with this Policy should inform the University Secretary who shall ensure that the matter is investigated, and appropriate action taken.
- iii. Any individual who is found to have been involved in any act of Reprisal in contravention of this Policy may be subject to disciplinary action up to and including termination of employment.
- d. **Knowingly false, frivolous, or vexatious disclosures:** Any person who knowingly makes an allegation of Improper Activity which is determined to be false, frivolous, or vexatious will be subject to disciplinary action up to and including termination of employment. Such disciplinary action shall follow the appropriate procedures in a collective agreement, if applicable.
- e. **Compliance and reporting:** The President, supported by the University Secretary, is responsible for the interpretation and application of this Policy. The University Secretary shall annually provide a report to the Audit and Risk Committee of the Board of Governors. The report will include a summary of the number, nature and disposition of all investigations made under this Policy. but will exclude personal information. This report, together with any recommendations, will be provided to the Board of Governors, normally at the annual general meeting.

5. Related Policies, Procedures & Documents (not an exhaustive list)

- a. Related Policies:
 - i. Code of Student Conduct Policy 8-1020
 - ii. Board of Governors Code of Conduct
 - iii. Sexual Violence and Harassment Policy 6-2025
 - iv. Research Policies:
 - 1. Conflict of Interest Policy 8-1003
 - 2. Integrity in Research Policy 8-1007
 - v. Procurement Policy 4-1002
- b. Related Procedures: Appendix A

APPENDIX A - SAFE DISCLOSURE PROCEDURES:

Purpose: To outline the procedures for receiving, responding to, investigating, and reporting disclosures made pursuant to the Safe Disclosure Policy ("Policy").

PART A	1.	How disclosures may be made
How Disclosures may be made	•	ndividual may make a Good Faith Disclosure using one of the ng methods:
	a)	In writing to the Vice President responsible for the area of the University in which the activity giving rise to the Disclosure is alleged to have occurred
	b)	In writing to the University Secretary at <u>board@smu.ca</u> or the President at <u>president@smu.ca</u>
	c)	In writing to the Chair of the Audit and Risk Committee of the Board of Governors, via the University Secretary (see above).
	d)	Online through the Grant Thornton CARE website at <u>https://www.grantthorntoncare.ca</u>
	e)	By phone to the Grant Thornton CARE phone line: 1-855-484-CARE (2273)
	<u>the Ur</u> Chair	omplaint against a member of the Executive Management Group, niversity Secretary, or the President shall be made directly to the of the Audit and Risk Committee or via the Grant Thornton CARE e noted above.
	2.	Content of Disclosures
	A Good Faith Disclosure should be as detailed as possible and include description of the conduct, dates, places, persons involved, witnesse other individuals who have knowledge of the behaviour, releva documentation, etc. so that a reasonable investigation can be conducted	
	3.	Anonymous Disclosures
	should websit provid investi the ful identit	dividual wishing to make an anonymous Good Faith Disclosure I use the Online reporting option using the Grant Thornton CARE is (see Part A 1(e) above). Please note that the information ed by an individual may be the basis of an internal and/or external gation into the issue reported and anonymity will be protected to lest extent possible by law. Grant Thornton will not divulge your y to the University without your permission, but your identity may ne known to persons during the investigation.
PART B	3.	Receipt of disclosures
How disclosures will be processed	option with th	10 business days of receipt, a disclosure made through one of the s set out above will be reviewed by the recipient, who may consult be General Counsel & University Secretary or additional resources uired at their discretion, and who will determine whether there are

reasonable grounds to investigate and whether there is any reason to believe the disclosure is not made in good faith.

4. **Confidentiality of disclosures**

As set out in Section 4 of the Policy, the University will endeavor to protect the confidentiality of the discloser and any participants in an investigation, subject to any of the requirements of any collective agreements, University policies or applicable legislative and regulatory requirements.

5. Investigations

If the disclosure is determined to have reasonable grounds and to have been made in good faith, within 5 business days of the determination the disclosure will be:

- a. Referred to the appropriate policy owner for investigation pursuant to the applicable policy; or
- b. Referred to the University Secretary for investigation if there is no applicable policy; or
- c. If it is determined to be appropriate, referred to an external investigator.

If the disclosure is determined to lack reasonable grounds to investigate or to have not been made in good faith, the University may decline to investigate further, and the University Secretary will notify the discloser of this decision if contact information or a mechanism for contacting the discloser is available. This will be reported to the Audit and Risk Committee of the Board of Governors at the next meeting of the Audit and Risk Committee.

6. **Requirements for investigations**

The University may require additional documentation, including but not limited to a signed attestation by the discloser, before proceeding with the investigation.

Investigations shall be conducted with due regard to the sensitivity of the complaint and the investigator shall use reasonable efforts to protect the privacy of the complainant and the confidentiality of the investigation, to the extent consistent with a fair investigation.

The investigation shall be completed within a reasonable amount of time, considering the circumstances, the content of the complaint, and the best interests of the University.

7. Interim measures

Pending the outcome of an investigation, the University Secretary or the President may make recommendations regarding interim measures to the appropriate policy owner or, where there is no applicable policy, to the appropriate Vice-President.

PART C

8. Investigation reports

Reporting of disclosures Any investigation conducted in response to a disclosure under the Safe Disclosure Policy must result in a written report which shall be provided to the applicable administrators under the relevant policy and in all cases to the President and the University Secretary.

9. Reporting to Board

The University Secretary shall annually provide a report to the Audit and Risk Committee of the Board of Governors. The confidential summary report will include a summary of the number, nature and disposition of all investigations made under this Policy, but will exclude personal information. This report, together with any recommendations, will be provided to the Board of Governors, normally at the annual general meeting.

10. Reporting to discloser

Where required by law or University policy, the individual who submits the disclosure will be provided with a summary of the results of the investigation if contact information or a mechanism for contacting the discloser is available.