The Office of the Ombudsperson is jointly funded by Simon Fraser University, the Graduate Student Society and the Simon Fraser Student Society.
LOOKING FORWARD

SFU has the distinction of being one of the first campuses in North America to have established an Ombudsperson. 2015 will mark the 50th year that this service has been offered to our students. While the office has gone through different models of service over the years it has remained committed to championing fairness, providing impartial advice, information, mediation and referrals to students and the university community. The jointly funded model created in 2008 with the SFU, the Simon Fraser Student Society (SFSS) and the Graduate Student Society (GSS) continues to demonstrate a commitment by all parties to the fair and equitable treatment of students.

As we look forward to 2013 the Office will continue to build bridges to the community in our effort to promote our services and resources to the University. The mission of the Office is greatly enhanced by the support and cooperation of many individuals in the SFSS, GSS and the University who contribute to positive organizational changes at our campuses. In particular we would like to thank Dr. Pat Hibbitts, Vice President of Finance; Dr. Wade Parkhouse, Dean of Graduate Studies; Dr. Mary Ellen Kelm, Associate Dean of Graduate Studies; Kate Ross, Registrar; Jo Hinchliffe, Assistant Registrar; Dr. Tim Rahilly, Associate Vice President of Students; Julia Lane and Christina Batstone from the GSS; and Humza Khan of the SFSS. Their willingness to collaborate on many issues to bring about fair and equitable outcomes is deeply appreciated.
EXECUTIVE SUMMARY

The focus of this year’s report is mental health issues on campus. SFU Health and Counselling has experienced a substantial increase in the number of students seeking their services in recent years. Our Office observes that there are insufficient supports for students, faculty and staff to address matters of health, conflict, and security of person for the individual experiencing mental health issues and potentially the community at large. Looking forward, our Office recommends:

• Greater integration and coordination across the university to address mental health issues, including an awareness and education campaign and available faculty/staff training;

• A robust implementation of policy GP 25 with an emphasis on prevention and early identification/intervention;

• Working with other BC post-secondary institutions to secure additional provincial resources to mental health services, as exemplified by universities in Alberta and Ontario, to remedy the inadequate access to and gaps in mental health services.
THE YEAR IN REVIEW

From January 3, 2012 to December 20, 2012, a total of 364 students (up from 332 in 2011) have sought the services of the Ombudsperson. According to the Association of College and University Ombudspersons most offices in Canada report an annual caseload of approximately 1% of the total student population. SFU’s annual caseload is consistent with the national average.

**Distribution of Cases**

<table>
<thead>
<tr>
<th>Category</th>
<th>Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact by Instructors for advice on student</td>
<td>12</td>
</tr>
<tr>
<td>WA (Withdrawal under Exigentcircumstances)</td>
<td>46</td>
</tr>
<tr>
<td>Other</td>
<td>55</td>
</tr>
<tr>
<td>Cheating and Plagiarism</td>
<td>36</td>
</tr>
<tr>
<td>Grade Appeal</td>
<td>41</td>
</tr>
<tr>
<td>Supervisory Concerns (Graduate Students)</td>
<td>31</td>
</tr>
<tr>
<td>Complaints about Instructors</td>
<td>19</td>
</tr>
<tr>
<td>Conflict</td>
<td>17</td>
</tr>
<tr>
<td>Fees</td>
<td>9</td>
</tr>
<tr>
<td>Non-Academic Misconduct</td>
<td>5</td>
</tr>
<tr>
<td>Exam</td>
<td>10</td>
</tr>
<tr>
<td>PDP Withdrawal</td>
<td>9</td>
</tr>
<tr>
<td>Course Requirements</td>
<td>7</td>
</tr>
</tbody>
</table>

“Other”

Other = Many issues that present themselves to the Office do not fit neatly into one category. Some issues are examples of students struggling to navigate the complex and often confusing bureaucracy. In many cases, students just need support or a safe and confidential space to work through their challenges. Some students are dealing with mental health issues and often need referral to counselling services. Examples of other concerns include: tuition refunds; forged documentation; graduate student leave requirements; transfer of credits; privacy concerns; disability issues; student visa issues; questions related to the “Back On Track” program; charges of theft from the bookstore; non-payment of tuition/student loans; loss of scholarship; denial of graduate diploma; missed final; parking permit changes/parking tickets; course qualification; readmission; and housing.

It should be noted that we are encouraged by the growing number of staff, chairs and instructors contacting the office for advice and guidance on managing student issues, interpretation of policies and procedures. However, while it is the norm at most Canadian colleges and universities to include the Ombudsperson in the review of policies, processes and to participate in select committees there still appears to be reluctance at SFU. Perhaps this reflects the lingering misconception that the Office is an “advocate” for students and would therefore be biased. The Ombudsperson assesses all matters through an impartial lens with the goal of improving fairness and transparency. This standard is of equal benefit to both students and the university. It is hoped that in time the value of the Office will be embraced more widely.
Graduate Students

As has been the case in the past few years Graduate students continue to represent close to 30% of the overall caseload. The Office receives a number of complaints from graduate students relating to conflict with supervisors or committee members, withdrawal from program due to academic performance, plagiarism, program administration, and the overall quality of some graduate courses or programs. In addition, these cases are more complex and require a greater period of time to resolve. On average four to eight hours are spent working with a graduate student. This involves in person meetings, review of appeals and supporting documents, referrals and a significant amount of time coaching. As an impartial office the Office seldom intervenes directly in a conflict between two parties but has been asked to facilitate discussions in cases where all agree to mediation. At other times the Ombudsperson has sought the opinion of or intervention with the Associate Dean of Graduate Studies.

The Office continues to have an excellent working relationship with the Dean of Graduate Studies Office and has found the office to be extremely helpful in resolving many issues in a positive and constructive manner. We have also established a strong working relationship with the GSS Advocate. Together with the Associate Dean of Graduate Students and the GSS Advocate we have been hosting a series of workshops for graduate students that have been very well received. We have also participated in a “Brown Bag, Lunch and Learn” session for faculty on supervision issues.

We will continue to offer these workshops several times per semester throughout the upcoming year.
Office of the Ombudsperson 2012 Annual Report

Action Taken

- Advice: 64%
- Information: 20%
- Intervention - Clarifying: 3%
- Intervention - Mediation: 1%
- Direct Mediation: 12%

Case Distribution by Faculty

- Health Sciences: 8 cases
- Communication, Art and Technology: 13 cases
- Education: 24 cases
- Science: 56 cases
- Business Administration: 15 cases
- Applied Sciences: 86 cases
- Arts and Social Sciences: 162 cases

Method of initial contact

<table>
<thead>
<tr>
<th>Method</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phone</td>
<td>31%</td>
</tr>
<tr>
<td>Email</td>
<td>41%</td>
</tr>
<tr>
<td>Drop-in</td>
<td>22%</td>
</tr>
<tr>
<td>Referral</td>
<td>6%</td>
</tr>
</tbody>
</table>

Gender Distribution

- Male: 46%
- Female: 54%
WHAT HAPPENS WHEN WE RECEIVE A COMPLAINT OR CONCERN?

The student contacts the office to discuss the issue. The case is assessed to determine if it within fits within the mandate of the office.

No

Yes

Refer to external body (i.e. Residential Tenancy Branch for off campus housing or Employment Standards for employment issues)

Has the student tried to resolve the issue with the department, instructor or other party? Does a channel of redress exist? Has it been used?

No

Yes

• Review further to determine how the office might assist or respond
• Use coaching, mediation, shuttle diplomacy or investigation to address the issue(s)
• If an investigation is required, obtain consent from the student to proceed. Inform the other party of the investigation.
• Is further action needed?

No

Yes

Close the file. Provide an explanation to the student and if appropriate advise the department of the outcome

Issue individual and/or systemic recommendations. Recommendations accepted?

No

Yes

• Assess the reasons
• Consider whether or not to take the issue further (material for annual report)
• Report decision to the student

Report back and close case.
CASE STUDIES

Students bring a wide range of issues to the office. The following case studies are examples of issues that students regularly refer to the office.

PhD Stress and Anxiety

A PhD student contacted the office to discuss a disagreement he was having with his supervisor over his future career plans. Although the student had demonstrated success as a researcher he decided not to pursue an academic career. The student's attempt to explain his decision to his supervisor was met with dismissiveness and resistance. The supervisor continued to pressure the student to accept a post-doctoral position at another institution after the completion of his PhD; when the student voiced his unwillingness to accept a post-doc position the supervisor indicated that it was not worth his time to support the student through the competition of his degree if he was not intending to purse an academic career. The student expressed concern that if he does not follow his supervisor request it will be difficult for him to complete his degree. Although the student does not want to be pressured he tells the Ombudsperson that he is considering accepting the postdoc so that his supervisor will continue to support him, and then withdraw his acceptance after he completes his PhD.

Conflict is often the result of incompatible or competing interests. While students come to university with the expectation that faculty are there to support them through the completion of their degree, the reality is that some faculty members are also concerned with developing a positive supervisory track record that demonstrates their ability to successfully mentor future researchers. The added power imbalance between students and supervisors also contributes to the anxiety many students face. The student in this situation felt extremely vulnerable and anxious when he realized that his future plans did not meet his supervisor's expectations. After the student described the impact this situation was having on the relationship with his supervisor and in his personal life, the student was coached on other ways to approach the issue of his post-degree career. In many cases we provide a way for the student to reframe the conflict or to change the focus of their approach. In this particular situation the student tended to be extremely defensive and this only exacerbated the conflict. By suggesting that the student change the focus of his approach to using "I" statements that articulated how he felt about the prospect of pursing a post-doc, and what specific non-academic opportunities were attractive to him. It was also suggested that the student seek out the advice of trusted allies in the department, members of his committee or instructors he felt comfortable discussing his issue with. It became clear that members of his thesis committee had expressed their support for the student's decision to pursue a non-academic position. The student followed up several weeks later the student indicated that although his supervisor remained unhappy with his decision. He did indicate that his supervisor had stopped pressuring him to accept a post-doc and was continuing to support him in completing his thesis.
Course Delivery

Student consulted the Office about course delivery concerns. The student said that the course material was not presented clearly. In our discussions the student clarified that more examples and practice questions were needed. She added that students were frustrated because they had raised their concerns in class after the first test, but the instructor did not respond to their issues. Through discussion, we helped the student identify constructive ways of presenting her concerns and she recognized the possible value of meeting one on one with the instructor. The student later reported that the instructor had been very receptive to the feedback and willing to consider some changes.

Mental Health Issues on Campus

In recent years this subject has become a focal point for post-secondary institutions across the country. The discussions seem to reflect a growing concern that many colleges and universities are struggling to address the growing challenges associated with this issue. This issue has become so prevalent at campuses across the country that the Association of Universities and Colleges Canada recently established a working group to come up with a roadmap to help universities develop a set of best practices that could be adopted by campuses across the country.

SFU Health and Counselling has noted that there appears to be a growing number of students reporting mental health issues. Over the past few years The Office of the Ombudsperson has noticed an increase in the number of students seeking our services who report anxiety, stress and depression. Some of these students also seem to be engaged in a wide range of conflicts with staff, faculty, and other students. Some are regular users of counselling services, but there also appears to be a growing group of students who are not receiving adequate support or choosing not to engage support services.

Unlike most other health issues, mental health still has a stigma attached to it, so there is the temptation to marginalize the problem—but this can lead to serious, and sometimes tragic, consequences. Addressing the challenge while promoting the benefits of wellbeing must be a priority for SFU. Moreover, this is not solely a challenge for Student Services. This is an issue that has an impact on our entire campus community. All levels of the administration, students, faculty and staff need to be part of the conversation if we are to have a positive impact on addressing this issue.

According to the Canadian Mental Health Association some 18% of young people (15-24) suffer from some form of mental health issue. For this population this is made more immediate by a variety of factors. Early manifestations of more serious mental illness often develop at this age. In addition, many more students with pre-existing diagnosis of mental illness now attend university.

We must recognize and address the burden of serious mental illness, with its associated morbidity and mortality, openly and effectively. Stigma associated with mental illness
impedes social recognition of a need for meaningful change in our institutional responses to individuals’ needs.

Individuals and societies have long distanced themselves from those with mental illness, due to fear, misunderstanding and ignorance. In reducing stigma, it is important to create a strategy that does not further isolate those with mental illness. By recognizing the need to address the systemic barriers to well-being for all students, we avoid stigmatizing those in distress and instead create an approach that is inclusive of all individuals.

It is also imperative, however, to note that “mental health” means more than just the absence of mental illness. For our students, the transition from home to university, the normal adjustment processes of this phase of life, expectations of success, as well as financial, personal and cultural pressures are added to the dynamic milieu of a new environment.

Many post-secondary campuses are putting in place campus-wide strategies to address mental health issues on their campuses. These strategies not only require addressing individuals with mental illness issues (dealing with distressed and suicidal students, providing training and support to staff who work with these students, ensuring quality treatment for those in need), but they also need to address and recognize the larger picture of mental well-being. Our SFU students are increasingly reporting being stressed, overwhelmed and isolated (NCHA, 2010) and their mental well-being is reliant upon us creating healthy and supportive environments in which all individuals can thrive socially, academically and personally. We need to look beyond individual factors that may impact mental illness and include a broader focus to see how the University itself (policies, processes, community engagement, physical spaces, learning environments etc.) might be able to better support our students’ mental health and well-being.

We know that students’ mental well-being greatly impacts their academic success. For instance, the top reported impacts on academic performance of SFU students were stress (32.3%, NCHA, 2010). In addition, positive aspects of well-being, such as happiness, social connectedness and emotional resilience are strongly associated with learning, satisfaction and productivity. Many of the common issues among college/university students, including fatigue, headaches, depression, anxiety and inability to cope can all be attributed to stress. Stress reduces work effectiveness, contributes to bad habits, and can result in addictions, crime, absenteeism, poor academic performance, school drop-out, professional burnout, and career failure. In addition to individual impacts on student mental health and academic success, various needs assessments conducted with SFU students also illustrate community/organizational level impact. Based on student feedback at SFU, lack of community (commuter campus, low participation in campus events) is a barrier to mental health on campus. This is exemplified in the University Report Card of 2008 where 73.7% rarely/never participated in on-campus community service/volunteer activities, 32.9% of students were dissatisfied with the sense of community on campus and 54% rarely/never attended campus social events. The results from the National Student Engagement Survey of 2009 reports low perceptions that university
institution helps students cope with non-academic responsibilities (i.e. work, family etc.); low-mid perception from students that the institutional environment provides supports needed to help students succeed academically; and low perceptions that the institutional environment helps students thrive socially.

Over the past couple of years the Health Promotion team within Health and Counseling has been working to develop a campus wide approach to addressing the issue of mental health and well-being. In Fall 2012 they released the “Healthy Campus Community in Action” report. This report outlines a series of current projects, resources, and recommendations that can contribute to the well-being and success of our students. These strategies contribute to the well-being of all students, including those with mental illness.

Healthy Campus Community in Action can be found at http://students.sfu.ca/healthycampuscommunity.html

While recognizing the need to take all steps possible to systemically create a campus community that supports well-being, it is similarly important that we recognize and address the burden of serious mental illness, with its associated morbidity and mortality, openly and effectively. Impeding meaningful change is the stigma associated with mental illness. Individuals and societies have long distanced themselves from those with mental illness, due to fear, misunderstanding, ignorance and bias. In reducing stigma, it is important to create a strategy that does not further isolate those with mental illness. By recognizing the need to address the systemic barriers to well-being for all students, we avoid stigmatizing those in distress and instead create an approach that is inclusive of all individuals.

In preparation for this report I had discussions with a wide range of stakeholders on campus. From these discussions several key themes arise.

1. Silos prevent coordination.

It is clear that there are some excellent programs to support students being offered through Student Services, however the university needs to recognize that this issue requires input and action from across the university community. This issue affects our entire community and cannot be the sole responsibility of one division. Issues stemming from mental health have the potential to affect all faculties, departments, staff, instructors and students and there must be a universal commitment to support improvements to serving this population. Many outside of Student Services have suggested that workshops and programs need to be offered to a wider range of the university community. It should be noted that Health Promotion has recently partnered with TLC and are working together to support instructors to foster well-being.

It is important to note that this is not a challenge that can be resolved through workshops alone. One administrator made the analogy that we still treat mental health issues like a medical problem. Triage them through a workshop, send them for emergency treatment,
patch them up and move them along. It was suggested that we need to start addressing mental health in the same way we create programs, services and opportunities to foster a positive and supportive workplace. There is no one program or workshop that creates a good workplace; there are many pieces that collectively contribute to wellbeing of employees. Mental health needs to be approached in the same manner.

2. Prevention and early identification/intervention
 Recently approved changes to GP 25 will in part help identify students who may be suffering from mental health issues or who may be displaying behavior that could lead to an incident or cause concern. The revisions will: (a) bring the policy in line with best practices; and (b) strengthen the institution’s capacity to respond to violent incidents and threats. Recent incidents on Canadian and American campuses do require that universities are responsive and do everything possible to protect our community. The revisions to the policy are important, as there will now be a mechanism to assess risks, identify and potentially support students in severe distress before their behavior escalates. More specifically, the revised policy will: clearly separate policy (which provides overall guidance when developing procedures) from procedure and establish a multi-disciplinary threat assessment team and incident management team. The new policy will also clearly outline the responsibilities of the Chief Safety Officer and establish when and how certain responsibilities may be shared between other key administrators. Finally the policy will outline the procedures to be followed when responding to violent incidents and threats.

While changes to GP 25 are welcomed the university occasionally has interactions with students who are experiencing more severe mental health issues and can no longer fully engage with their studies. In the uncommon circumstance that a student cannot safely remain in their studies or meet academic standards even with accommodations and other supports, the university should consider the development of an involuntary withdrawals policy. Similar policies have been implemented at other post-secondary institutions (e.g. Windsor, Carleton, Brock) and would require that the university has reasonable grounds to conclude that the withdrawal is necessary. To return the student must demonstrate his/her fitness to return to academic study. If developed the policy and process should be implemented only if it found that there is a significant risk that the student will harm him/herself or others either physically or psychologically, or that the student cannot successfully meet minimum academic and administrative criteria through a reasonable level of accommodation. Some have incorrectly interpreted this type of policy as an attempt to limit access. The spirit of such a policy should be to ensure that the necessary supports are in place so that the student can be successful in the future.

3. Student access to mental health services
 It is interesting to note that BC lags behind other jurisdictions in terms of funding for mental health services. Alberta and Ontario for example have recently announced additional funding to assist colleges and universities to expand their mental health services. Currently there are 4 mental health counselors serving 30,000 students at three
campuses. At peak times during the term students have reported waiting weeks before seeing a counselor. This needs to be addressed, as such a delay in access is unacceptable. It should be noted that Health and Counseling has worked to address this issue with a new triage system that filters students into workshops or other services while they wait for time with a counselor. It is also important to note that while the university has provided additional funding in recent years the ratio of mental health counselors to the student population has actually declined.

4. Campus wide campaign
Many universities have made mental health a priority with presidents and senior administrators elevating the issue. The university needs to do more to enhance accessibility to mental health services on campus and to start addressing the perceptions of mental health. This should also include considerations related to the stigma associated with students’ willingness to access services, such as potential cultural perceptions in accessing and utilizing mental health services. This should also include an emphasis on mental health and well-being a positive resource that contributes to student success and learning.

5. Faculty/Staff development and education
Many faculty and staff note the perception that there seems to be an increasing number of student complainants whose behavior is frequently challenging in a number of ways: they tend to be very angry, aggressive and abusive to frontline staff; they sometimes appear threatening; they can be dishonest or intentionally misleading in presenting the facts, or deliberately withhold relevant information. These complainants tend to insist on outcomes that are clearly not possible or appropriate, or demand things they are not entitled to. At the end of the process they are often unwilling to accept our decisions and continue to demand that we take further action on their complaint. Many of these students find their way to the Ombudsperson and we can report a growing number of “regular visitors” that can be very difficult to serve. Many of these students are involved in conflicts that are exacerbated by their mental health issues and separating “real issues” from their perceptions or “self inflicted” challenges can be extremely time consuming and difficult.

We believe there needs to be a comprehensive shift away from focusing on “difficult” students to a focus on training staff to better manage conduct.

• This allows for a more focused approach in targeting particular behaviours and therefore recognizes that a range of management strategies may be needed.
• Transparency is achieved in interactions between complaint handlers and complainants – if the complaint handler is targeting individual instances of observable conduct, then this conduct can be explicitly referred to as a reason for taking particular action.
The separation of behaviour from issue is facilitated so that the issue can be effectively addressed without being clouded by behavioural problems. Faculty and staff on the front lines are often the first point of contact for many students and more needs to be done to provide them with the tools to address students in distress or students exhibiting concerning behavior. While there are a number of initiatives being provided by Health and Counselling providing consistent, ongoing and more importantly pan campus education aimed at incorporating best practices should be a priority.

In particular the university should provide more information and training for Department Chairs. Chairs and Graduate Program Coordinators are often a first point of contact for many faculty dealing with students in distress yet there is little training provided on how to manage these challenges. The university should consider integrating this topic into the orientation currently provided for new Chairs.

6. Recognition of gaps in services

This category of responses includes observations related to gaps in the campus mental health service delivery system.

SFU needs to consider adopting a more comprehensive approach to this issue. Such an approach should included:

- The creation of an executive task force to study the recommendations in the Healthy Campus Community in Action report prepared by Health Promotion and examines gaps in services and policies. This should include a broad coalition of stakeholders that includes members of all campuses.
- Continue to look for opportunities to provide and facilitate services, programs and policies that recognize the inherent transitions and adjustments to university life and foster resilience, coping and other life skills;
- Actively encourage help-seeking and helping behaviours such that students in difficulty may receive the assistance, accommodation and treatment they require; and provide accessible, high quality health services, both on campus and, as appropriate, with tight linkages to the academic, health sciences and community sectors.
- Expand the orientation for new Faculty and Chairs to include more information on dealing with students in distress. Faculty, Chairs and Graduate Program Coordinators are often a first point of contact for many dealing with students in distress yet there is little training provided on how to manage these challenges. The university should consider integrating this topic into the orientation currently provided for new Faculty and Chairs.
- Over the past year the university has strived to foster an engaged and sustainable community. Our students are an essential part of that community and there should be equal commitment in resources and visibility to championing issues related mental health and mental well-being. This is an issue that must be approached from a broad perspective that understands that all members of the campus community have the
potential to contribute to the wellbeing of our students. A campus that supports students with mental illness, beyond service provision, has the potential to enhance the well-being of the entire student population and contribute to overall academic success.

Below are some notable findings from the 2010 National College Health Assessment

- Stress was the #1 factor reported by SFU students that impacted their academic performance. Anxiety was #2.
- Over the past 12 months, the following percentage of students reported:
  - 83.8% SFU students reported ‘feeling overwhelmed by all they had to do’ in the last 12 months.
  - 81.6% SFU students reported ‘feeling exhausted (not from physical activity)’ in the last 12 months.
  - 58.2% feeling very lonely
  - 62.1% Feeling very sad
  - 50.5% Feeling things were hopeless
  - 51.6% feeling overwhelmed by anxiety
  - 37.7% feeling so depressed it was difficult to function

Student feedback in 2007, 2008 through HCS told us that:

- Students feel they are mentally healthy, but stressed
- Students identified the balance of study, work, and personal life was one of the most challenging aspects of their lives
- Students experience various types of stress such as academic pressure, parents expectations, tuition, relationships etc.
- Some students reported that their social health is limited by a lack of community at SFU or lack of time to see friends
- Students recognized the environmental impact on mental well-being (i.e. physical spaces on campus)

THE ROLE OF THE OMBUDSPERSON

a) To advise and/or refer members of the University student community as needed about all situations and University procedures concerning which grievances may arise; specifically, to advise students of their rights and responsibilities and of the proper procedures to follow in order to pursue whatever business or complaint they may have. Where such information exists in University offices or publications, the Ombudsperson shall direct enquirers to these sources and emphasize their responsibility for initiating the appropriate actions and for returning to the Ombudsperson if not satisfied with the results;
b) To investigate, in an impartial fashion, student complaints that may arise against the University or against anyone in the University exercising authority. Complaints may be made by any member holding status as a student of the University community, by former members of the student body or by student applicants to the University (dependent on the discretion of the Office of the Ombudsperson), whether accepted or not at the time of the complaint. Investigations may also begin on the independent initiative of the Ombudsperson in respect of anyone of the above entitled to make a complaint.

c) To bring findings and recommendations to the attention of those in authority by the most expeditious means possible.

2. It shall be the special concern of the Ombudsperson that:

a) Decisions affecting members of the University student community are made with reasonable promptness;

b) Procedures and policies used to reach decisions affecting students are adequate and consistently applied and that criteria and rules on which the decisions in question are based are appropriate;

c) Any gaps and inadequacies in existing University policies and procedures that might jeopardize the principles of fairness and natural justice of members within the University student community be brought to the attention of those in authority. It is not the function of the Ombudsperson to devise the new rules and procedures, but to make recommendations and follow these up to the extent necessary for their formulation and/or improvements; and

d) The complaints received by the Ombudsperson are analyzed on an annual and multi-year basis, to determine trends and identify potential for systemic or system-wide problems."
PROFESSIONAL DEVELOPMENT

The Ombudsperson attends quarterly meetings with Ombudspersons from The University of British Columbia, The University of Victoria, Camosun College and Douglas College. These meetings allow university ombudspersons from other post-secondary campuses across the province to come together and discuss various topics and issues unique to the profession. It is the intention of the group to expand membership to eventually include all post-secondary Ombudspersons from across the province. The Ombudsperson has also started to connect with the Northwest Ombuds Group and the California Caucus of Colleges and University Ombuds. These groups are made up of Ombudspersons in BC, Washington State, Oregon and California. They meet several times a year and offers training and workshops and other professional development opportunities.

The Ombudsperson at SFU is a member of the Association of Canadian University and College Ombudspersons (ACCUO); the International Ombudsman Association (IOA) and The Forum of Canadian Ombudsmen. The associations provide access to a network of international Ombudsmen from universities, colleges, government and the private sector. The associations also provide training opportunities, networking and research materials. The Ombudsperson attended ACCUO annual conference in Edmonton in June 2012.