1.0 POLICY STATEMENT

1.1 Simon Fraser University ("the University") is committed to providing a healthy, safe, and respectful learning, teaching, research, and work environment in which bullying and harassment are neither acceptable nor tolerated. As an academic institution, the University promotes teaching, scholarship and research, and the free and critical discussion of ideas.

2.0 PURPOSE

2.1 These procedures establish the processes that will be followed to respond, informally or formally, to a Report of bullying and harassment made under the Bullying and Harassment Policy (GP 47) ("the Policy").

3.0 DEFINITIONS

3.1 See Appendix A to the Bullying and Harassment Policy (GP 47) for definitions of words used in the policy and in these procedures.

4.0 GENERAL PRINCIPLES

4.1 The University will respond to a Report in an objective, fair, and timely manner. Individuals exercising their authority and discretion under these procedures will do so in conformity with the principles of procedural fairness and in accordance with a relevant collective agreement or other applicable University policy or procedure, including notice requirements, timelines, and other related process issues.
4.2 The University will take steps, as needed, to address the safety and well-being of the Complainant.

4.3 A Complainant or Respondent may be accompanied by a support person and/or a representative of their Constituency Organization throughout the processes under these procedures.

4.4 In responding to a Report, efforts at problem-solving and informal resolution will normally be made first.

4.5 In all cases, efforts will be made to mitigate the impact of a substantiated Report, such as mandating corrective action(s), implementing actions to reduce the opportunity for recurrence, and taking steps to restore a respectful working and learning environment.

5.0 INTERIM MEASURES

5.1 It may be necessary to take interim measures to mitigate risk or to mitigate the impact of the Respondent’s alleged conduct while a Report is being considered, resolved, investigated, or determined. Such measures will be precautionary and are expressly non-disciplinary.

5.2 The Respondent’s Supervisor may impose interim measures on the Respondent and may consult with the Responsible Office for guidance prior to doing so. Interim measures will be reassessed on a weekly basis.

5.3 Interim measures may include, but are not limited to, the following examples:

5.3.1 the exclusion of individuals from all or any part of the University campuses;
5.3.2 limiting proximity or contact to specific individuals;
5.3.3 limiting participation in University activities;
5.3.4 limiting the use of the University’s information and communications technology; or
5.3.5 requiring a person to meet regularly with designated members of the University Community.

6.0 ACCOMMODATIVE MEASURES FOR COMPLAINANTS

6.1 A Complainant may request reasonable and appropriate academic, workplace, or other accommodative measures designed to meet their health or safety needs, where such needs are directly related to the incident(s) in the Report. The University will assess these requests on a case-by-case basis.

7.0 ANONYMOUS ALLEGATIONS OF BULLYING AND HARASSMENT

7.1 The University’s ability to act upon an anonymous allegation of bullying and harassment is very limited. The University will consider anonymous allegations for the purpose of determining whether there is evidence of a significant risk to the health or safety of members of the University Community.
7.2 All members of the University Community who experience or observe bullying and harassment are strongly encouraged to notify the University in a timely way by completing, or seeking assistance to complete, the Bullying and Harassment Report Form (see section 10) so that the University has the information it needs to take timely and appropriate action.

8.0 IMMINENT RISK - CONTACT POLICE AND CAMPUS PUBLIC SAFETY

8.1 Any member of the University Community who believes they are being bullied and harassed and who has concerns about active or imminent acts or threats of violence, or concerns about safety, security, or emergency, should immediately contact the police and inform Campus Public Safety.

9.0 DISCLOSING BULLYING AND HARASSMENT - INFORMATION AND SUPPORT

9.1 Any member of the University Community who believes they are being bullied and harassed should seek information and support. Depending upon the circumstances, it may be possible to resolve the matter without making a Report to the University.

9.1.1 A Student may choose to disclose to and seek support and information from, for example, their Constituency Organization, the Ombudsperson, or the Office of Student Support, Rights, and Responsibilities.

9.1.2 An employee may choose to disclose to and seek support and information from, for example, their immediate manager or supervisor, their Department Chair or Dean, or their Constituency Organization.

9.1.3 If the disclosure is about the employee’s immediate manager or supervisor, the employee should complete the Report Form and submit it to Safety and Risk Services and, if comfortable doing so, should disclose the bullying and harassment to the person to whom the manager or supervisor reports.

10.0 HOW TO REPORT BULLYING AND HARASSMENT

Notify the University by Completing the Report Form

10.1 A member of the University Community who believes they are being bullied and harassed is required to notify the University by completing, or authorizing someone else to complete, the Bullying and Harassment Report Form and submitting it to Safety & Risk Services so that appropriate action can be taken.

10.2 The Report Form notifying the University should be completed as soon as possible after the bullying and harassment occurred so that the Report can be addressed in a timely manner. All Reports will be considered and assessed, regardless of when they are made, but a significant lapse of time may hinder the University’s ability to take effective action.
11.0 WHAT HAPPENS WHEN A REPORT ABOUT BULLYING AND HARASSMENT IS RECEIVED BY SAFETY & RISK SERVICES?

11.1 Safety and Risk Services will receive the Report and will immediately forward it to the Responsible Office, for action.

11.2 The Responsible Office will review and assess the Report and take appropriate and timely steps to respond to it, including notifying the Complainant that the Report has been received.

11.3 Where the Report appears to involve discrimination, the Responsible Office will consult with the University’s Human Rights Office.

12.0 UNIVERSITY’S PROCESS FOR RESPONDING TO A REPORT ABOUT A STUDENT’S CONDUCT

12.1 Where the Report is about a Respondent who is a Student, the Student Conduct Policy (S 10.05) will apply and the Office of Student Support, Rights and Responsibilities will respond to the Report in accordance with the processes and procedures under that policy.

12.2 The Office of Student Support, Rights, and Responsibilities will, where appropriate, inform, consult, or involve, the office responsible for the Complainant (based on the Complainant’s affiliation with the University).

12.3 If it is determined that bullying and harassment has occurred, the Respondent will be held accountable and any corrective measures or disciplinary sanctions will be imposed pursuant to the Student Conduct Policy (S 10.05).

13.0 UNIVERSITY’S PROCESS FOR RESPONDING TO A REPORT ABOUT OTHERS

13.1 Where a Report is about the conduct of a person who is not a Student and not a University employee, the Responsible Office will respond to it in a manner that is generally analogous with the following procedures.

14.0 UNIVERSITY’S PROCESS FOR RESPONDING TO A REPORT ABOUT AN EMPLOYEE’S CONDUCT

14.1 Where the Report is about the conduct of a University employee, the Responsible Office will respond to the Report in accordance with any relevant collective agreement or other applicable University policy or procedure, including notice requirements, timelines, and other related process issues.

14.2 Where the Report is about a University employee, the Responsible Office will:

14.2.1 acknowledge receipt of the Report;

14.2.2 assess the risk to the Complainant, the Respondent, or other members of the University Community, with reference to Policy GP 25 Response to Violence and Threatening Behaviour.
14.2.3 assess the Report, to determine whether the alleged conduct appears to meet the definition of bullying and harassment.

14.2.4 inform the office responsible for the Complainant (based on the Complainant’s affiliation with the University) that a Report has been received and will consult or involve that office in addressing the matter, as appropriate.

14.2.5 directly, or through the office responsible for the Complainant:
   a. inform the Complainant of their right to be accompanied by a support person and to have a member of the Constituency Organization present throughout all processes in these procedures; and
   b. meet with the Complainant about the Report.

14.2.6 determine the Respondent’s Supervisor and inform the Respondent’s Supervisor that a Report has been received.

14.2.7 provide advice, guidance, and support to the Respondent’s Supervisor in addressing the Report.

14.2.8 directly, or through the Respondent’s Supervisor:
   a. inform the Respondent that a Report has been received;
   b. inform the Respondent’s Constituency Organization of the Report when required by a collective agreement;
   c. inform the Respondent of their right to be accompanied by a support person and to have a member of their Constituency Organization present throughout all processes in these procedures; and
   d. meet with the Respondent about the Report.

15.0 INFORMAL RESOLUTION OF A REPORT

15.1 Where appropriate, directly or through the Respondent’s Supervisor, the Responsible Office will work collaboratively with the Complainant, the Respondent, and as relevant, their respective managers or Supervisors, Constituency Organizations, or others, to determine an informal resolution to the Report.

15.2 An informal resolution process does not result in a determination of whether the Policy has been violated. Taking into account the safety, comfort, and well-being of the Complainant, the focus of an informal resolution process is to find an acceptable resolution to the Report. Examples of internal University processes for informal resolution are:

   15.2.1 an apology;
   15.2.2 an educational conversation with the Respondent;
15.2.3 the Complainant communicating to the Respondent that the Respondent’s behaviour is unacceptable;

15.2.4 a facilitated conversation between the Complainant and the Respondent; or

15.2.5 mediation.

15.3 If no resolution is reached through informal resolution processes, or where such processes are not appropriate, the Responsible Office may initiate an investigation.

**16.0 INVESTIGATION OF A REPORT**

16.1 The Responsible Office will determine whether and how to investigate the Report, including whether to investigate it internally or whether the investigation will be undertaken by an external investigator. The Responsible Office will communicate its decision to both the Complainant and the Respondent in writing, with reasons.

16.2 Where more than one Report has been made about a Respondent, the Responsible Office may decide that the Reports will be investigated together.

16.3 All investigations of University employees under these procedures must:

16.3.1 be undertaken promptly and diligently, and be as thorough as necessary, given the circumstances;

16.3.2 be objective, and be fair and impartial to both the Complainant and the Respondent when evaluating the allegations;

16.3.3 comply with all relevant provisions in any applicable collective agreement or policy, including notice, timelines, and other process requirements;

16.3.4 be sensitive to the interests of all parties involved and maintain confidentiality to the extent possible under the circumstances; and

16.3.5 be focused on finding facts and evidence, which includes interviewing the Complainant, the Respondent, witnesses, and such other persons as the investigator determines might have relevant information, as well as obtaining and reviewing any documents that the investigator considers may contain relevant information.

16.4 Upon the conclusion of an investigation, the investigator will prepare a written report (“Investigator’s Report”) in a manner that facilitates compliance with the access to information and protection of privacy provisions of the *Freedom of Information and Protection of Privacy Act* (“FIPPA”).

16.5 The investigator will submit the Investigator’s Report to the Responsible Office for the Respondent.

16.6 The Responsible Office will provide the Investigator’s Report to both the Complainant and the Respondent (redacted as required for FIPPA compliance).
16.7 Where an external investigator conducts the investigation, the Guidelines in Appendix B will apply.

17.0 DECISION AND CORRECTIVE MEASURES

17.1 The Responsible Office will provide the Investigator’s Report to the Respondent’s Supervisor.

17.2 The Respondent’s Supervisor will read and consider the Investigator’s Report.

17.3 If the Investigator has not been directed to do so, the Respondent’s Supervisor will determine whether the Policy has been violated and if so, whether disciplinary measures will be imposed.

17.4 The Respondent’s Supervisor will determine the appropriate corrective measures or disciplinary sanctions applicable to the Respondent.

17.5 Where the Respondent is covered by a collective agreement or other relevant employment policy, any discipline will be determined and imposed consistent with the terms of that agreement or policy.

18.0 RESTORATIVE MEASURES

18.1 In all cases where it is determined that a violation of the Bullying and Harassment Policy (GP 47) has occurred, the University will make efforts to mitigate the impact of the incident(s) by taking actions and implementing measures to reduce the opportunity for recurrence and to restore a respectful working and learning environment.

19.0 DELIBERATELY MISLEADING REPORTS

19.1 Making a deliberately misleading Report of bullying and harassment is prohibited conduct that is subject to a range of corrective and disciplinary measures. Making a report about bullying and harassment based on a genuinely held but mistaken belief that bullying and harassment occurred is not considered to be deliberately misleading.

19.2 If the University determines that a deliberately misleading Report of bullying and harassment was made, the Responsible Office will, in consultation with the office responsible for addressing the conduct of the Complainant, consider disciplinary action.

20.0 RETALIATION

20.1 Retaliation is unacceptable and prohibited conduct that will be taken seriously by the University and may result in discipline. An allegation about Retaliation can be made at any time.

20.2 A Student who has a concern about Retaliation should contact the Office of Student Support, Rights and Responsibilities, the Ombudsperson, or their Constituency Organization for information, guidance, and support. A Student may choose to report the Retaliation to the
University by completing a Bullying and Harassment Report Form (see section 10) which will be referred to the appropriate Responsible Office, for action.

20.3 A University employee who has a concern about Retaliation may choose to disclose it informally to their immediate manager or supervisor or their Constituency Organization for information, guidance, and support. A University employee may choose to report the Retaliation to the University by completing a Bullying and Harassment Report Form (see section 10) which will be referred to the appropriate Responsible Office, for action.

20.4 Where a Report involving an allegation of Retaliation is received, the Responsible Office (as determined by the Respondent’s affiliation with the University) will normally respond to and manage it in the same way the Responsible Office responds to and manages other Reports made under these procedures.

20.5 The University reserves the right to address an allegation of Retaliation under any University policy, process, or collective agreement, or by any external process that the University deems relevant and appropriate to the circumstances.

21.0 ACCESS TO INFORMATION, CONFIDENTIALITY, AND PROTECTION OF PRIVACY

21.1 The information and records made and received to administer the Policy and these procedures are subject to the access to information and protection of privacy provisions of British Columbia’s Freedom of Information and Protection of Privacy Act and the University’s Information Policy series. To the extent possible, the information and records will be treated in a confidential manner, in compliance with the Act and with applicable University policies.

21.2 Reports filed under the Bullying and Harassment Policy (GP 47) and addressed under these procedures may involve the collection, use, and disclosure of sensitive personal information. Confidentiality is required so that those who may have experienced bullying or harassment will feel free to come forward. Confidentiality is also required so that the reputations and interests of those accused of bullying or harassment are protected. However, either party may discuss the case in confidence with their supervisor, support person, and/or representative of their Constituency Organization.

21.3 Subject to any limits or disclosure requirements imposed by law or by the Policy or these procedures, any and all information, oral and written, created, gathered, received or compiled through the course of a Report is to be treated as confidential by both the Respondent and Complainant, their representatives, support persons, witnesses, and the officials designated by the Policy or these procedures.

22.0 AGGREGATED DATA FOR ANNUAL REPORT

22.1 For the purposes of the Annual Report, as outlined in section 7 of the Bullying and Harassment Policy, each Responsible Office must inform the Chief Safety Officer, or designate, of the number and types of Reports made under the Policy and the method of resolution.
23.0 REVIEW OF PROCEDURES

23.1 The policy statement at section 1.1. of these procedures will be reviewed annually.

23.2 These procedures will be reviewed annually.

24.0 RELATED LEGAL, POLICY AUTHORITIES, AND AGREEMENTS

24.1 The legal and other University Policy authorities and agreements that may bear on the administration of the Bullying and Harassment Policy or these procedures, and may be consulted as needed, include but are not limited to:

24.1.1 University Act, R.S.B.C. 1996, c. 468

24.1.2 Freedom of Information and Protection of Privacy Act, R.S.B.C. 1996, c. 16

24.1.3 Workers Compensation Act, S.B.C. 2019, c.1

24.1.4 Occupational Health & Safety and WorkSafe BC regulations, policies, and guidelines

24.1.5 Information Policies (I 10)

24.1.6 Code of Faculty Ethics and Responsibilities (A 30.01)

24.1.7 University Health and Safety Policy (GP 17)

24.1.8 Human Rights Policy (GP 18)

24.1.9 Response to Violence and Threatening Behaviour (GP 25)

24.1.10 Conflict of Interest Policy (GP 37)


24.1.12 Student Conduct Policy (S 10.05)

24.1.13 Collective agreements and human resources employment policies