

 DALHOUSIE UNIVERSITY Harassment Policy	<i>Policy Sponsor:</i> Board of Governors	<i>Approval Date:</i> Board: June 24, 2025
	<i>Responsible Unit(s):</i> Human Rights & Equity Services	<i>Revisions:</i>

A. Background and Purpose

Dalhousie University is committed to providing world-class living, learning and working environments. As such, the University prioritizes wellness and respect among and between its Members.¹ The University will take all precautions reasonable to ensure its physical premises, and all manner of its learning and working environments, are free from Harassment.

The University's commitment to respecting human dignity at every level of the institution is central to this Policy. The University further recognizes that, as a post-secondary institution, it undertakes this commitment in a context and environment in which power imbalances are inherent and systemic.

The University further acknowledges that academic freedom and freedom of discussion are accompanied by the expectation that all Members of the University Community will conduct themselves in a responsible manner so as not to cause, condone or participate in the Harassment of another person or group of persons.

This Policy is one of the main components for strategic action to prevent and respond to Harassment. The purpose of this Policy is three-fold:

1. to prevent Harassment by indicating the seriousness with which the University views and responds to this issue;
2. to increase awareness and education about Harassment and its prevention; and
3. to provide timely, coordinated, consistent, context-sensitive and fair responses to Disclosures and Reports of Harassment.

¹ Capitalized terms are defined in section [C](#) below.

B. Application & Exclusions

1. This Policy applies to the conduct of University employees, Associates and Visitors.
2. Members of the University Community may Disclose or Report Harassment.
3. Members of the University Community, Associates or Visitors who Disclose Harassment may access University services and supports.
4. Subject to B(1) above, this Policy applies to any experience of Harassment that is substantially connected to the University. A substantial connection is established when the Harassment:
 - a) occurred in the course of University-related programs, operations, or activities (including, but not limited to, classes, non-credit courses, offsite conferences, fieldwork or research activities, Advancement events and experiential learning programs such as co-op work placements and field/practicum placements);
 - b) occurred within the scope of University employment;
 - c) occurred while participating in University-sponsored activities, events or organizations (including but not limited to field trips, athletic team road trips, conferences, training events and social functions);
 - d) adversely affects the reasonable participation by a Member of the University Community in their University living, learning, or working environments; or
 - e) creates a risk to the physical or psychological health or safety of a Member of the University Community in their University living, learning, or working environments.
5. Disclosures and Reports may be brought against employees without regard to their title, position, authority, financial or professional successes or status, subject to the following limitations:
 - a) this Policy does not apply to alleged sexual harassment; instead the *Sexualized Violence Policy* applies; and
 - b) this Policy does not apply to Students who have allegedly engaged in Harassment; instead the *Code of Student Conduct* will apply, except where the Student is an employee and the alleged Harassment occurred in the course of their employment.
6. This Policy applies to alleged Harassment even if:
 - a) the Complainant is pursuing processes external to the University, including:

- i. reporting to police;
 - ii. initiating a civil proceeding; or
 - iii. reporting to the Labour Board or other regulatory body; or
 - b) a University proceeding has been initiated to address an alleged failure to meet standards of professional conduct as required by a College, Faculty or School, and nothing in this Policy in any way precludes the College, Faculty or School from commencing such a proceeding in circumstances where this Policy also applies.
7. Members of the University Community continue to have the right to seek assistance from the applicable provincial regulatory body or University process for addressing alleged failures to meet professionalism standards, where applicable, even when actions are being taken under this Policy.
 8. This Policy does not replace or supersede existing collective agreement provisions relevant to Harassment. It also does not replace or supersede applicable legislation.

C. Definitions

Note regarding language and definitions below and throughout: Language, particularly as it relates to psychological health and safety, involves social constructs which evolve over time. The definitions below and the terms used throughout this Policy are meant to be helpful functional descriptors. They are not standardized and may be used differently by different people. It is expected that the terms used throughout this Policy will evolve and change over time and be updated accordingly through the proper channels.

1. In this Policy,
 - a) “Administrative Head” refers to the appropriate Dean, Director, Chair, Associate Vice-President, Provost, Vice-President, President, or other administrator normally responsible for initiating disciplinary action against an employee.
 - b) “Associate” refers to a person who is not a Member of the University Community who is engaged in activities with the University or its Members and includes, but is not limited to, visitors, contractors, agents, affiliates, vendors, alumni, donors, prospective donors, corporate or foundation representatives, visiting scholars, and employees of organizations participating in experiential learning opportunities facilitated by the University.

- c) “Bullying” is a form of Harassment that is typically a repeated, targeted pattern of behaviour that is intended to, or ought to reasonably be known to cause fear, intimidation, humiliation, distress or other forms of harm. The individual engaging in Bullying frequently alternates between behaviours that are cruel and kind, such that the victim has difficulty interpreting or anticipating the individual’s behaviour. The impact on the victim may be physical or mental, damaging their body, psychological safety, reputation or property. Bullying may be obvious or subtle, direct or indirect, and can occur in person, in writing, or through the use of technology such as social media, text or email.
- d) “Complainant” refers to the Member of the University Community, Associate or Visitor who has made a Disclosure or Report of one or more direct experiences of Harassment.
- e) “Designated Supports” refer to any support persons that a Process Participant needs during any process outlined in this Policy. Designated Supports take the role of observer or emotional support and do not have independent participation in the process. The Process Participant may speak freely about their experiences with their Supports at any time during the process. Support can include but is not limited to: parent, friend, Elder, translator, therapist, spouse. Designated Supports are subject to confidentiality provisions in section [F1](#) of this Policy.
- f) “Disclosure” refers to the sharing of information by a Member of the University Community, Associate or Visitor with a Human Rights & Equity Advisor or other Member Designated under section [F3\(12\)](#) of this Policy about a direct experience of Harassment.
- g) “Employer Reprisal” means an action that adversely affects an employee with respect to terms or conditions of employment or any opportunity for employment or promotion and includes dismissal, layoff, suspension, demotion, transfer of job or location, change in hours of work, coercion, intimidation, imposition of any discipline, reprimand or other penalty including reduction in wages, salary or other benefits, or the discontinuation or elimination of the job of the employee.
- h) “Harassment” includes derogatory (e.g., condescending, insulting, belittling) or vexatious (e.g., aggressive, angry, antagonistic) conduct or comments that are known or ought reasonably to be known to be offensive or unwelcome. Harassment includes actions or comments that create an intimidating, demeaning or offensive living, learning or working environment and/or unreasonably interferes with a person’s or group of persons’ academic activities, performance, or career opportunities. Whether Harassment

constitutes Violence as defined by the *Violence in the Workplace Regulations* will depend on the nature of the conduct.

Harassment may be perpetrated against any individual, regardless of whether they occupy a subordinate, superior or equal position of power or authority vis-à-vis the alleged harasser. Harassment may occur as a serious one-time single incident but more commonly is a course of conduct or pattern of behaviour.

Examples of Harassment include but are not limited to:

- i. abusive conduct or language, whether or not directed at a particular individual;
 - ii. repeated incivility, such as acts of rudeness, discourteousness, belittling, interrupting, disregarding or demeaning the expression of others;
 - iii. spreading malicious rumours;
 - iv. isolating or excluding an individual from peer groups or their living, learning or working environments;
 - v. persistent criticism;
 - vi. shouting or screaming, whether or not directed at a particular individual;
 - vii. deliberately seeking to control or manipulate another person (including gaslighting);
 - viii. Bullying;
 - ix. mean-spirited or dangerous pranks, practical jokes or hazing; or
 - x. other forms of aggressive verbal or physical behaviour.
- i) “Health and safety” includes both physical and psychological health and safety.
- j) “Intersectional” refers to an approach that acknowledges the integrative nature of social identities and social oppressions, including various forms of violence. An intersectional approach to Harassment considers the fact that the impact of Harassment can overlap and interact with experiences of sexism, homophobia, transphobia, racism, classism and ableism.
- k) “Investigative Stream” refers to the process where a Report is investigated by an Investigator and where disciplinary, remedial and/or facilitated outcomes may result.

- l) “Investigator” refers to the person selected from a pool of qualified, experienced and trained individuals who may be external or internal to the University and available to conduct investigations under the Investigative Stream of this Policy.
- m) “Issue of Concern” refers to the sharing of information by a Member of the University Community, Associate or Visitor to an Administrative Head, Human Resources Lead of a faculty or unit, or other trusted individual employed by the University for the purpose of case assessment and support.
- n) “Member(s) of the University Community” refers to faculty, staff and Students of Dalhousie University.
- o) “Non-Investigative Stream” refers to the process where a Report is addressed without an investigation through remedial, educational and/or facilitated outcomes.
- p) “Party” or “Parties” refer to the Complainant(s) and/or Respondent(s) named in a Disclosure or Report.
- q) “Policy” refers to the Harassment Policy.
- r) “Process Participant” refers to an individual who participates in any process outlined in this Policy, including but not limited to the Parties, individuals with relevant knowledge of alleged events, or those directly affected by alleged events.
- s) “Psychological Safety” refers to an experience of a Member of the University Community of the absence of harm and/or threat of harm to their mental well-being, where “harm” is defined as actual damage or injury, and “threat of harm” is defined as a reasonable apprehension of actual damage or injury. For greater certainty, discomfort and inconvenience do not constitute harm unless they form part of a persistent pattern of conduct that rises to the level of harm or threat of harm.
- t) “Psychologically Healthy and Safe Workplace” refers to a workplace that promotes workers’ psychological well-being and actively works to prevent harm to worker psychological health including in negligent, reckless, or intentional ways.
- u) “Report” refers to a Member of the University Community’s written statement of allegations submitted to their Administrative Head or Human Rights & Equity Advisor about one or more experiences of Harassment by a University employee.

- v) “Respondent” refers to a University employee alleged to have engaged in Harassment. Concerns raised about a Student allegedly engaging in Harassment in their capacity as a Student will be dealt with under the *Code of Student Conduct* as per section B(5)(b) of this Policy.
- w) “Student” refers to a person registered in or enrolled at the University in any academic work or placement for a program that leads to the recording and/or issue of a mark, grade or statement of performance in a University-recognized Student information system.
- x) “Supportive Measures”, for the purpose of this Policy, refer to temporary or permanent adaptation to an employee or Student’s living, learning, or working environment and/or workload or duties to reduce or eliminate barriers to full performance or participation due to an experience of Harassment.
- y) “Systemic Concerns” refer to policies, practices, patterns of behaviour or attitudes that are part of the social or administrative structures of an organization that, whether intentional or not, cause or contribute to the creation of negative experiences in one’s living, learning or working environments.
- z) “Trauma-Informed” refers to an approach that takes into consideration the profound and complex physical, psychological, and social (biopsychosocial) impacts of trauma on an individual.
- aa) “Trauma-Informed Practices” are intended to minimize the negative impacts of sharing Issues of Concern, Disclosures and Reports, recognizing that the processes for responding to Harassment may, in themselves, be stressful, traumatizing and harmful for Process Participants, especially the Parties. Examples of Trauma-Informed Practices include, but are not limited to:
 - i. providing Process Participants with choice and flexibility whenever practicable, subject to reasonable limits identified in this Policy;
 - ii. providing the Parties with as much information in advance as possible, including clarity about their choices regarding confidentiality and privacy;
 - iii. providing regular updates to and check-ins with Parties, as appropriate;
 - iv. making best efforts to minimize process delays;
 - v. eliciting sensitive information from Process Participants on a need-to-know basis so that they are not required to share their experiences multiple times;

- vi. refraining from asking irrelevant questions or making assumptions based on irrelevant factors such as immutable characteristics or identity expression; and
 - vii. facilitating processes and communications under this Policy with sensitivity to any Intersectionalities, given the social identities of Process Participants.
- bb) “Violence” refers to the definition in Nova Scotia’s *Violence in the Workplace Regulations* and includes any of the following:
- i. threats, including a threatening statement or threatening behaviour that gives an employee reasonable cause to believe that the employee is at risk of physical injury; and
 - ii. conduct or attempted conduct of a person that endangers the physical health or physical safety of an employee.
- cc) “Visitor” refers to a person who is not a Member of the University Community who is engaged in activities on Dalhousie University’s property or with Members of the University Community.

D. Policy

1. The University is committed to maintaining respectful, inclusive and safe campus living, learning and working environments.
2. No person with a substantial connection to the University shall Harass Members of the University Community, Associates or Visitors.

D1. Shared Responsibility

1. Harassment should not be ignored. All Members of the University Community have a shared responsibility to foster and maintain University living, learning and working environments that are free from Harassment. Members who experience or witness conduct that may be prohibited by this Policy are encouraged to share their concerns with an Administrative Head, Human Rights & Equity Advisor, or other trusted faculty or staff member.
- a) employees shall:
- i. report any incidents of Violence or Harassment that have been experienced or witnessed. Reports should be directed to the

- employee's supervisor, an Administrative Head or to People and Culture;
 - ii. cooperate in the investigation of Harassment complaints in the workplace; and
 - iii. assume responsibility towards their own health and behaviour.
- b) other Members of the University Community are encouraged to share their concerns about potential Harassment with a trusted source such as a professor, advisor, or other Member of the University Community that is familiar with this Policy.
2. Administrative Heads, Human Resources Leads within each faculty and unit, and the People and Culture team have a shared responsibility to encourage:
- a) practices that foster a Psychologically Healthy and Safe Workplace that enables Members of the University Community to report errors, hazards, adverse events, and close calls;
 - b) the mitigation of any consequences of Harassment in living, learning or working environments;
 - c) education that assists with:
 - i. the identification of Systemic Concerns that interfere with or adversely affect a Psychologically Healthy and Safe Workplace; and
 - ii. how to address, mitigate or eliminate identified Systemic Concerns; and
 - d) the implementation of recommended corrective and preventive actions after completion of a Report process.

D2. Education & Prevention

1. Human Rights & Equity Services or People and Culture shall develop and disseminate information to Members of the University Community about the following topics:
- a) Harassment;
 - b) Psychological Health and Safety;
 - c) applicable University policies, processes and available supports; and
 - d) Trauma-Informed Practices and how to appropriately support and refer individuals who share information about an experience of Harassment.

D3. University Response to Disclosures & Reports

1. Where information has been shared about potential Harassment under this Policy, Administrative Heads, Human Resources Leads within the faculty or unit, and the People and Culture team, including Human Rights & Equity Services, have a shared responsibility to:
 - a) take a proactive, early-intervention approach to potential Harassment;
 - b) recognize the potential complexities of psychological health and safety situations, the unique needs of the individuals affected, and the skills needed to effectively respond; and
 - c) take reasonable steps to remedy the effects of Harassment and to prevent or minimize future incidents of Harassment.
2. Nothing in this Policy restricts management's authority and responsibility to manage performance of employees, take appropriate disciplinary action when necessary, or take immediate action to ensure a safe work environment.

Procedural Commitments

3. Disclosures and Reports of Harassment shall be addressed under this Policy in an equitable manner without regard to the Parties' title, position, authority, financial or professional successes, public reputation or status.
4. The University will strive to provide Harassment response and support that is:
 - a) confidential, within the limits defined below;
 - b) respectful of the dignity and privacy of individuals;
 - c) non-judgemental, empathic and compassionate;
 - d) Trauma-Informed;
 - e) timely;
 - f) transparent;
 - g) accessible;
 - h) culturally relevant and Intersectional;
 - i) respectful of the rights of all Process Participants; and
 - j) consistent with principles of due process and procedural fairness.
5. The University is committed to making every reasonable effort to ensure procedures under this Policy are completed as expediently as possible. The University

acknowledges, however, that time frames will vary depending on the circumstances involved.

6. Where an Issue of Concern, Disclosure or Report raises issues addressed by more than one University policy, Human Rights & Equity Services, in consultation with Legal Services or other units as appropriate, will determine which University policies are engaged and which procedure is most appropriate to use in the circumstances.

Supportive and Interim Measures

7. Human Rights & Equity Services shall provide information about available Supportive Measures and process options, including potential Student or employee accommodations, interim measures, and potential process outcomes to the Parties through separate advisors.

No Retaliation

8. The University will not tolerate any retaliation or threat of retaliation against any person on account of sharing an Issue of Concern, Disclosure, Report, or an expressed intention to submit a Report under this Policy or on account of evidence or assistance given with respect to a Report under this Policy. Such retaliation is considered to be a serious offence and may constitute grounds for disciplinary action under the applicable collective agreement or handbook (for employees).
9. There will be no negative consequences for persons sharing an Issue of Concern, Disclosing or Reporting Harassment in good faith. The University will not engage in Employer Retaliation.

Remediation

10. Upon conclusion of a complaint addressed under the investigative stream in section [F6](#) of this Policy, Administrative Heads are responsible for:
 - a) taking action(s) necessary to mitigate any consequences of Harassment within their respective faculty or unit; and
 - b) implementing any outcomes determined by the Vice-President, People and Culture or their delegate in section [F7](#) of this Policy.

E. Administrative Structure

1. Authority: This Policy falls under the authority of the Board of Governors.
2. Responsible Unit: Human Rights & Equity Services is the unit responsible for the administration of this Policy, in consultation with University partners in Student Affairs, People and Culture, Security Services and Administrative Heads, as necessary.
3. Reporting: The Vice-President, People and Culture or their delegate will deliver an annual report to the Board of Governors on Harassment, which will include anonymized aggregated data whenever possible regarding:
 - a) the number of Disclosures and Reports at the end of each academic year;
 - b) Reports by type (Complainant or University-Initiated);
 - c) Reports by Party status (faculty, staff (union affiliation), Student, Associate Visitor);
 - d) Reports by kind of outcomes (e.g., dismissal of Reports, Non-Investigative Stream, Investigative Stream);
 - e) Investigation Stream outcomes (e.g., no finding or finding of Harassment);
 - f) outcomes applied as a result of a finding that an act of Harassment was committed;
 - g) the number of incidents which were, versus were not, deemed to have met the criteria in section B(4)(e); and
 - h) the average, median and maximum number of days a case is open.

The Annual Report will be made available to Members of the University Community.

4. Human Rights & Equity Services will consult at least annually with the Joint Occupational Health and Safety Committee to discuss the annual report described in section E(3) above. The Joint Occupational Health and Safety Committee may provide input to Human Rights & Equity Services regarding the implementation of requirements related to Harassment and Psychological Health and Safety pursuant to applicable occupational health and safety legislation.
5. Review: This Policy will be reviewed every three (3) years thereafter or earlier if deemed necessary by the Board of Governors or Vice-President, People and Culture.

F. Procedures

F1. Confidentiality and Its Limits

1. Issues of Concern, Disclosures and Reports of Harassment will be kept confidential to the greatest extent possible, within the limitations described in this section.
2. Confidentiality is limited where those within the University Community need to know information to carry out their responsibilities under this Policy, including providing Supportive Measures, determining what, if any, interim measures are required, investigating a Report, responding to a Report, and administering outcomes resulting from a Report. In all cases, the Human Rights & Equity Advisor will share the least amount of information possible.
3. Confidentiality is limited in circumstances where a serious safety risk exists and/or the University has a legal obligation that requires it to act. Examples of such circumstances are:
 - a) where the Human Rights & Equity Advisor, in consultation with the Vice-President, People and Culture, Director of Security, or any other appropriate Member of the University Community, determines that the Complainant and/or the Respondent poses a serious and credible risk of harming themselves and/or another person;
 - b) where there are reasonable grounds to believe that one or more Members of the University Community, Associates or Visitors pose a serious and credible risk of harm based on information that has been provided;
 - c) where there is a legal obligation to report, such as where the alleged Harassment may constitute Violence pursuant to Nova Scotia's *Violence in the Workplace Regulations*; or
 - d) where there is a legal obligation to act or cooperate in an extra-University judicial process.

Information that must be disclosed pursuant to this section will be limited to the least amount of information possible for the University to fulfill its legal obligation.

4. For educational purposes, Human Rights & Equity Services/People & Culture may discuss specific Issues of Concern, Disclosures and Reports, and their resolutions without personal information or other information that may result in identifying individuals.

5. For reporting purposes, Human Rights & Equity Services/People & Culture may disclose general information about Issues of Concern, Disclosures and Reports so long as all information is provided without personal information or other information that may result in identifying individuals.

F2. Sharing an Issue of Concern

1. A Member of the University Community, Associate or Visitor who believes they may have witnessed or experienced Harassment at the University may choose to share their Issue of Concern and seek help from a Member of the University Community whom they trust, such as an Administrative Head, Human Resources Lead, professor, advisor, supervisor or mentor.
2. Sharing an Issue of Concern with a Member of the University Community does not constitute a Disclosure or Report under this Policy.
3. The Member of the University Community who learns of an Issue of Concern should listen compassionately without judgment, apply Trauma-Informed Practices, inform the individual about this Policy, and discuss with the individual their preferences as to how the matter should be addressed and their desired outcomes. If the individual expresses interest in learning more about processes available under this Policy, then the Member of the University Community receiving the Issue of Concern will refer the individual to Human Rights & Equity Services.
4. The individual sharing an Issue of Concern may indicate their preference for privacy, which will be respected by the Member of the University Community who receives the information, subject to the exceptions set out in section [F1\(3\)](#). The Member of the University Community will outline for the individual the potential circumstances in which their Issue of Concern could be shared.
5. The Member of the University Community who learns of an Issue of Concern will consult with Human Rights & Equity Services if there is a reasonable prospect that any of the exceptions set out in section [F1\(3\)](#) are met.
6. While an Administrative Head or Human Resources Lead of a faculty or unit may seek advice from People and Culture at any time, they are required to notify People and Culture when an Issue of Concern:
 - a) may fall within any of the exceptions listed in section [F1\(3\)](#);
 - b) raises a significant risk to the University's reputation or external relationships;
 - c) is regarding alleged conduct of an Administrative Head;

- d) is regarding a situation involving three or more potential Complainants or Respondents;
- e) is similar to another Issue of Concern previously raised about the same individual; or
- f) may substantially impact the workplace climate for a significant proportion of employees within the affected faculty or unit.

F3. Disclosures and Reports Generally

1. A Disclosure and a Report are separate actions that a Complainant can choose to take. An Associate or Visitor can only make a Disclosure.

Supporting Complainants

2. The University recognizes that a Member of the University Community, Associate or Visitor may require time before deciding whether they wish to make a Disclosure or Report. Potential Complainants are, however, encouraged to make a Disclosure and/or submit a Report as soon as they are able and no later than twelve (12) months after the last instance of the alleged Harassment. In exceptional circumstances, the Human Rights & Equity Advisor or Member Designated under section [F3\(12\)](#) may extend the time limit to make a Disclosure or Report.
3. The University will consider the wishes of the Complainant when deciding how a Report or Disclosure will be processed, including whether Supportive Measures or interim measures shall be taken or varied.
4. A Complainant can be accompanied by a Designated Support or advocate at any time when making a Disclosure or Report. Any additional supports will also be offered by the Human Rights & Equity Advisor or Member Designated under section [F3\(12\)](#), for example:
 - a) when a Student makes a Disclosure or Report, they will be advised of assistance available from the Ombudsperson, Student Health and Wellness, and other supports; or
 - b) when an employee makes a Disclosure or Report, they will be advised of Employee & Family Assistance Program, if applicable.
5. Nothing in this Policy limits the rights of those impacted by Harassment to share their personal experiences. During an ongoing investigation, however, confidentiality should be maintained, as set out in section [F6\(35\)](#)(e) below.

Process Participants' Rights & Obligations

6. Members of the University Community, Associates or Visitors who witness or have concerns about an experience of Harassment are encouraged to contact the Human Rights & Equity Advisor. They may provide the Human Rights & Equity Advisor with information on an anonymous basis.
7. Process Participants will be informed by the Human Rights & Equity Advisor of their rights and obligations to maintain confidentiality, as set out in section [F1](#) of this Policy. However, Process Participants may speak freely with their Designated Supports at any time.
8. The Human Rights & Equity Advisor will address all Disclosures and Reports in a transparent manner and will keep the Parties informed of expected timelines.
9. In making any determinations with respect to a Disclosure, Report, or University Report, the Human Rights & Equity Advisor, the Vice-President, People and Culture or their delegate, or other Member Designated under section [F3\(12\)](#) of this Policy may consult with other appropriate employees for advice. Any sharing of information as part of that consultation will be done in accordance with section [F1\(2\)](#) of this Policy.

Systemic Concerns

10. In the event that Systemic Concerns of Harassment have been raised with the Human Rights & Equity Advisor, the Advisor, in consultation with the Vice-President, People and Culture or their delegate, will determine whether and/or what further procedures or actions should be initiated to address the Systemic Concerns.
11. The Human Rights & Equity Advisor will communicate a summary of any process or actions taken, and outcomes resulting from, the University's steps to address Systemic Concerns, subject to confidentiality requirements in section [F1](#) of this Policy. The summary will be provided to individuals directly affected by the Systemic Concerns and may be shared more widely with the affected community, faculty or unit, as appropriate.

Designated Members

12. In circumstances where the usual procedure cannot apply because of the identities of the individuals involved, another Member of the University Community will be designated to address the Disclosure or Report ("Member Designated under section [F3\(12\)](#)"), as follows:

- a) if the Human Rights & Equity Advisor is unable to discharge their responsibilities under this Policy due to a conflict of interest or absence from the workplace, the Vice-President, People and Culture will ensure that another employee within Human Rights & Equity Services who is trained to help individuals who have experienced Harassment is able to carry out the responsibilities usually assigned to Human Rights & Equity Advisor under this Policy;
- b) in the event that the Respondent named in a Disclosure or Report is an employee within Human Rights & Equity Services, the responsibilities usually assigned to the Human Rights & Equity Advisor under this Policy will be assumed by a Vice-President of the University selected by the President, and who can then in turn delegate as appropriate; or
- c) in the event that the Respondent named in a Disclosure or Report is the President or the Vice-President, People and Culture, all responsibilities usually assigned to the Human Rights & Equity Advisor and Vice-President, People and Culture or their delegate will be assumed by an ad hoc committee of the University's Board of Governors consisting of the Chair of the Board, the Chair of the Governance and Human Resources Committee, and the Chair of the Finance, Audit, Investment, and Risk Committee, who can then in turn delegate as appropriate.

Conflict of Interest

- 13. The Human Rights & Equity Advisor, the Vice-President, People and Culture or their delegate, the Administrative Head, or any other member of the University Community who receives information to carry out their responsibilities under this Policy, shall disclose any actual or potential conflict of interest with respect to a Disclosure or Report in accordance with the University's Conflict of Interest Policy.
- 14. Where a Party is aware or has reasonable grounds to believe that an undisclosed actual or potential conflict of interest exists with respect to a Disclosure or Report, they shall report the matter to the Human Rights & Equity Advisor. In such circumstances, the Human Rights & Equity Advisor shall be deemed to be the Administrative Head for purposes of the University's Conflict of Interest Policy and the matter shall be addressed in accordance with that policy.

F4. Disclosure Process

- 1. A Disclosure does not result in a Report being made and does not initiate the Investigative or Non-Investigative Streams under this Policy.

2. The Human Rights & Equity Advisor, or Member Designated under section [F3\(12\)](#) where applicable, shall listen compassionately without judgment, apply Trauma-Informed Practices, and inform the individual about this Policy.

Supportive Measures

3. The Human Rights & Equity Advisor will ask the Complainant what their needs are, who their Designated Supports are, and will inform the Complainant of additional support and services available. Those supports and services may include:
 - a) safety planning and protective measures;
 - b) information about University supports, advocacy and counselling services, including, where applicable, services available to employees through their union, association or group, and Employee & Family Assistance Program, and services available to Students through Dalhousie's Student Health and Wellness Centre.
 - c) Supportive Measures to support the Complainant's learning, living, and/or working environments, such as student residence relocation, class schedule changes, academic accommodations, temporary work location reassignment, and work scheduling changes; and
 - d) faculty-level supports.

F5. Report Processes

Report by Member of the University Community

1. A Report shall be directed to a Human Rights & Equity Advisor or Member Designated under section [F3\(12\)](#) where applicable. The Human Rights & Equity Advisor will provide support, information and/or referral to assist the Complainant with submission of the Report and to understand the reporting process under this Policy.
2. A Report must be submitted by the Complainant in writing and include:
 - a) the names of the Complainant(s) and the Respondent(s);
 - b) a detailed description of the behaviour that forms the basis of the Report, including where and when the incident(s) occurred; and
 - c) an indication of the redress sought by the Complainant.

Report by University

3. The University respects the Complainant's choice not to proceed with a Report process under this Policy. In limited circumstances, the University may determine it is necessary to submit a Report in its own name where one of the circumstances set out in section F5(4) below applies and the Vice-President, People and Culture or their delegate determines that:
 - a) proceeding with the processing of the University Report is in the interest of the health and safety of Members of the University Community or consistent with the University's obligations and responsibilities; and
 - b) it is reasonably likely that sufficient evidence can be obtained to determine if the Respondent has committed an act of Harassment without the Complainant's ongoing involvement.
4. The University may initiate a University Report where:
 - a) one or more Members of the University Community, Associate or Visitors, by name or anonymously, have provided information about an act of Harassment against a Member of the University Community;
 - b) there has been more than one Disclosure made about more than one alleged act of Harassment committed by the same Respondent;
 - c) the allegations name a Respondent who is deceased or otherwise no longer a Member of the University Community, if failure to address those allegations could negatively impact the University's reputation; or
 - d) the allegations raise significant concerns about equitable operations at the University such as Systemic Concerns and/or matters of institutional culture.
5. A University Report will be processed and responded to by the University in a manner that is consistent with the University's core values and principles set out in section [D3](#) of this Policy and in the same manner as a Report by a Member of the University Community in accordance with the procedures set out in section [F6](#) of this Policy except that:
 - a) all references to Report shall be read as University Report;
 - b) the Complainant will not be required to participate in any way;
 - c) there will be no communication with the Complainant about the University Report unless the Complainant has indicated that they wish to be kept informed; and
 - d) any information that would have been sought from the Complainant that may be known by Security Services will be obtained from Security Services.

F6. University Responses to Reports

Initial Assessment

1. Upon receipt of a Report, the Human Rights & Equity Advisor will determine:
 - a) if the criteria in section [B\(4\)](#) of this Policy have been met;
 - b) if based on the Report, there could be a finding that Harassment occurred under this Policy; and
 - c) if the allegations in the Report are not being heard and have not been heard through another University process.
2. If the Human Rights & Equity Advisor determines that any elements in section F6(1) above have not been met, the Complainant will be advised of support and resources as appropriate, and that no further action with respect to the Report will be taken and why. If new information is subsequently provided, this decision may be re-evaluated.
3. Where there are external proceedings (i.e. police investigation or criminal proceeding, civil proceeding, investigation or adjudication by the applicable human rights commission or other provincial regulatory body), or internal proceedings (i.e. University process for addressing alleged failures to meet professionalism standards) pending against a Member of the University Community for conduct related to a Report, the Vice-President, People and Culture or their delegate may, but does not have to, defer the processing of a Report. That deferral will be on such terms and conditions as are appropriate in the circumstances (including any interim measure listed in section [F6\(13\)](#) below and notice to the union where the Respondent is represented by a union) until the conclusion of all or part of the external or internal proceedings. Conviction of a criminal offence or a finding that provincial human rights legislation has been breached will be considered on its face evidence of a parallel violation under this Policy.
4. If the Human Rights & Equity Advisor determines that all elements in section F6(1) above have been met, the Advisor, in consultation with the Vice-President, People and Culture or their delegate, will determine whether the Report should proceed under the Investigative Stream or Non-Investigative Stream. In making that determination, the Human Rights & Equity Advisor will consider the following criteria:
 - a) the informed and non-coerced choice of the Complainant (i.e. – the Complainant’s preference after receiving information about the Investigative Stream and Non-Investigative Stream);

- b) the safety of all Process Participants and Members of the University Community generally;
 - c) the voluntary participation of the Respondent (i.e. – to the extent that any resolution options involve the participation of the Respondent, the Respondent must be in agreement); and
 - d) any applicable collective agreement or employee handbook.
5. The Human Rights & Equity Advisor will notify the Complainant in writing of the decision made under section F6(4) above as well as provide reasons for that decision and information on available resources, such as Dalhousie's Employee & Family Assistance Program, contact information for the appropriate union or employee group and/or faculty-level supports, as applicable. Where the Complainant is a Student, information regarding the Ombudsperson and Student Health and Wellness will be provided.
 6. Where two or more Complainants have made Reports against the same Respondent arising out of essentially the same conduct or incident, these Reports may be addressed in the same process unless the Human Rights & Equity Advisor concludes that prejudice might thereby result to the Complainants or Respondent.
 7. Report processes outlined in this section do not apply to Reports that name Associates or Visitors as Respondents. A Report about an Associate or Visitor will be assessed by the Human Rights & Equity Advisor according to the criteria in section F6(1) above. Where the criteria are met, the Report will be addressed pursuant to sections [F7\(6-7\)](#) below.

Withdrawal of Report or Departure

8. The Complainant may decide to stop participating in the Report process or withdraw their Report at any time. The University will decide whether the Report process shall proceed as a University Report based on its analysis of the considerations in sections [F5\(3–4\)](#) of this Policy.
9. If a Respondent's relationship with the University ends before the Report process is concluded, the University may:
 - a) suspend the process, with the option of reinstating it if the Respondent rejoins the University community;
 - b) continue the process, whether or not the Respondent participates; or
 - c) terminate the process.

10. If the University continues with the process after the Respondent's relationship with the University has ended, and the Report proceeds to the Investigative Stream, then the Respondent will be notified of the process according to the procedure in sections [F6\(25\)](#), [\(28\)](#) and [\(35\)](#), and provided the opportunity to participate. If the Respondent does not participate in the investigation, then the Investigator may draw an adverse inference (i.e. – that the Respondent is refusing to meet with the Investigator because they have evidence that would adversely affect their position).

Supportive Measures

11. The Human Rights & Equity Advisor will ask the Complainant what their needs are, who their Designated Supports are, and will inform the Complainant of additional support and services available. Those supports and services may include:

- a) safety planning and protective measures;
- b) information about University supports, advocacy and counselling services, including, where applicable, services available to employees through their union, association or group, and Employee & Family Assistance Program, and services available to Students through Dalhousie's Student Health and Wellness Centre;
- c) Supportive Measures to support the Complainant's learning, living, and/or working environments, such as student residence relocation, class schedule changes, academic accommodations, temporary work location reassignment, and work scheduling changes; and
- d) faculty-level supports.

12. Accommodations to work or study may be obtained pursuant to the *Student Accommodation Policy* or *Employee Accommodation Policy*, as applicable. If the Complainant wishes to obtain accommodations, the Human Rights & Equity Advisor will assist the Complainant in requesting the accommodations while maintaining the right of the Complainant to confidentiality.

Interim Measures

13. Interim measures are non-disciplinary conditions that may be imposed upon a Respondent where the allegations in a Report would, if proven, constitute Harassment, and with regard to all of the circumstances, are necessary to ensure:
- a) the safety and wellbeing of the Complainant, Respondent, and other Members of the University Community;
 - b) the integrity of any potential investigation, or

- c) where there is evidence that the Respondent poses a threat of disruption or of interference with the operations of the University or the activities of Members of the University Community.
14. Where interim measures are imposed, they must be proportionate to the seriousness of the alleged act of Harassment and as minimally restrictive as possible upon the Respondent to achieve their purpose.
15. Before interim measures are implemented, the Human Rights & Equity Advisor may discuss the potential measures with the Respondent, who may consent to the measures, object to the measures, or provide information in support of alternate, less restrictive, measures. In the case of employee Respondents, interim measures must also be permissible under, and imposed in accordance with, any applicable collective agreement or employee handbook.
16. At any time following receipt of a Report, the Vice-President, People and Culture or their delegate (in consultation with the Respondent's Administrative Head, as applicable) may consider all of the available information to determine whether and what interim measures will be imposed upon the Respondent.
17. Where interim measures are required, the Human Rights & Equity Advisor will give written notice to the Respondent of the interim measures being imposed.
18. Interim measures may include, but are not limited to:
- a) separating the Complainant and Respondent to minimize or prevent encounters in living, working, and learning environments;
 - b) implementing a no-contact agreement; or
 - c) prohibiting the Respondent from being on some or all of the University premises and attending University-affiliated activities.
19. Alleged breaches of interim measures are to be reported to the Human Rights & Equity Advisor, who will then refer the matter to the Vice-President, People and Culture or their delegate to take appropriate steps to determine:
- a) whether the interim measures have been breached; and
 - b) if so, what action will be taken as a result of any such breach. Where there is a concern of risk to physical safety that requires immediate intervention, alleged breaches should be reported to Security Services.
20. The University reserves the right to impose interim measures against a Respondent in the absence of a Report in extraordinary circumstances where the Vice-

President, People and Culture or their delegate (in consultation with the Respondent's Administrative Head, as applicable) determines that such measures are necessary to mitigate an immediate, serious and credible risk of harm to self, others, or University operations.

Non-Investigative Stream

21. Under the Non-Investigative Stream, the Human Rights & Equity Advisor will work with all applicable Parties to identify outcomes desired and design processes to achieve those outcomes.
22. If the Human Rights & Equity Advisor determines that the Report will proceed under the Non-Investigative Stream, the Human Rights & Equity Advisor will determine the appropriate remedial, educational and/or facilitated process according to the nature of the Report, which does not necessarily require face-to-face or in-person interaction between the Parties. Examples of Non-Investigative Stream processes include, but are not limited to:
 - a) **impact statement, letter, or video:** the Complainant communicates to the Respondent the harm that they have experienced, that the Respondent's behaviour is unwelcome and unwanted, and that the behaviour must stop immediately;
 - b) **facilitation:** the Complainant may request that the Human Rights & Equity Advisor or other qualified person facilitate a discussion between themselves and the Respondent with the goal of developing mutual understanding of the incident(s) and mutually agreeable resolution;
 - c) **notification:** the Human Rights & Equity Advisor (with a copy to their Administrative Head or supervisor) notifies the Respondent that the behaviour must stop immediately;
 - d) **no contact:** Parties agree to have no contact for a period of time that both are Members of the University Community;
 - e) **education:** the Human Rights & Equity Advisor arranges coaching, support, or educational opportunities for the Respondent and other Members of the University Community as appropriate through Human Rights & Equity Services;
 - f) **apology:** the Respondent may wish to apologize to the Complainant;
 - g) **written agreement:** the Parties agree to interim or other measures for as long as one or both of them are Members of the University Community; or
 - h) any other process or intervention that incorporates a restorative approach, or one or both Parties' cultural or community values.

23. A Non-investigative Stream process is inappropriate where previous Reports have been made about the Respondent, where the University has received multiple Disclosures about the Respondent, or where there are other identified safety concerns.
24. Any process under the Non-Investigative Stream that involves face-to-face communication between the Parties must be facilitated by a person with training or experience appropriate to the seriousness and nature of the allegations and the context of the Parties. Specifically, training or experience is required in Trauma-Informed Practices, mediation or counselling, and managing communication and power dynamics between Parties.
25. Where a remedial, educational or facilitated outcome requires the voluntary participation of the Respondent or will otherwise impact the Respondent in any way, prior to being required to advise the Human Rights & Equity Advisor if they will voluntarily participate or engage in any process whatsoever, the Respondent will be provided with:
- a) written notice that a Report has been brought against them and that at this time the Report will be proceeding under the Non-Investigative Stream;
 - b) contact information for the HRES Advisor to whom they have been assigned and to whom they may direct any questions about the Report or process;
 - c) a copy of the Report and this Policy;
 - d) opportunity to identify their Designated Supports and details of available advocacy and support services;
 - e) a reminder that information shared while proceeding under the Non-Investigative Stream may be documented and subsequently disclosed to outside parties (e.g. – police, professional regulatory body), if such disclosure is required by law (as set out in sections [F1](#)(3 – 4) of this Policy);
 - f) a reminder that this Policy prohibits retaliation; and
 - g) if the Respondent is not willing to voluntarily participate in the desired remedial, educational or facilitated process, the Human Rights & Equity Advisor may, after considering the factors outlined in section [F6](#)(4) of this Policy, decide to proceed under the Investigative Stream.
26. Except for section [F6](#)(25)(e) above, Parties that engage in a process under the Non-Investigative Stream do so on a ‘without prejudice’ basis; either Party may withdraw from the process at any time and any information or admissions shared in the process cannot be used against either Party in a Report process or any other University proceeding.

27. Where a process pursuant to the Non-Investigative Stream does not result in the desired outcomes, the Human Rights & Equity Advisor may, after considering the factors outlined in section [F6\(4\)](#) of this Policy, decide that the Report will proceed under the Investigative Stream.

Investigative Stream

Initiating an investigation

28. If the Human Rights & Equity Advisor determines that the Report will proceed under the Investigative Stream, the Human Rights & Equity Advisor will:
- a) provide written notice to the Respondent that:
 - i. a Report has been brought against them and that at this time the Report will be proceeding under the Investigative Stream;
 - ii. contact information for the HRES Advisor to whom they have been assigned and to whom they may direct any questions about the Report or process;
 - iii. a copy of the Report and this Policy;
 - iv. they have the opportunity to identify their Designated Supports and receive details of available advocacy and support services;
 - v. a reminder that information shared while proceeding under the Investigative Stream may be documented and subsequently disclosed to outside parties (e.g. – police, professional regulatory body), if such disclosure is required by law (as set out in sections [F1\(3 – 4\)](#)); and
 - vi. a reminder that this Policy prohibits retaliation;
 - b) notwithstanding section [B\(4\)](#), upon receiving a written request from the Respondent, suspend processing a Report under this Policy pending completion of all or part of those other proceedings to avoid potential procedural unfairness, conflicting and prejudicial outcomes for either Party, or where circumstances otherwise warrant;
 - c) appoint an Investigator, whether internal or external, who is:
 - i. qualified to conduct a procedurally fair and Trauma-Informed investigation; and
 - ii. an independent decision-maker with no actual or reasonable apprehension of bias given the particular facts and identities engaged by investigation of the Report; and

- d) provide the Investigator with all relevant materials in the University's possession, including any materials submitted by Process Participants.

29. In the event that a Report under this Policy engages issues under other policies, such as intersecting issues of Discrimination or other alleged misconduct, and Human Rights & Equity Services determines that the Report will be investigated under this Policy, then the Investigator's terms of reference may include consideration of all other relevant and appropriate intersecting issues and policies.

Investigator's Obligations

30. The Investigator will conduct the investigation in a manner that is consistent with this procedure and the principles set out in section D3(4) of this Policy. For greater certainty, the Investigator will conduct the investigation process in a manner that is fair, transparent and flexible in recognition that the process should be responsive to the Parties' stated needs and maximize opportunities for choice and agency, subject to reasonable limits.
31. All steps under the Investigative Stream will be completed in a timely manner, having regard to the circumstances surrounding a particular Report, this Policy, and requirements of fairness and due process. Wherever possible, the investigation, including the submission of the investigation report, will be completed within sixty (60) calendar days of the receipt of materials by the Investigator pursuant to section F6(28)(d) above.
32. Where the Investigator becomes aware that more than sixty (60) days will be required to complete the investigation, the Investigator shall submit an interim report to the Human Rights & Equity Advisor setting out:
- a) steps completed in the investigation process to date;
 - b) any delays experienced and their causes;
 - c) steps remaining to be taken before the investigation is complete;
 - d) a realistic estimate of the additional time required to complete those steps; and
 - e) in the case of an external Investigator, any adjustments to actual and anticipated costs of the investigation.
33. The Investigator will submit an additional interim report for every subsequent sixty (60)-day period until the investigation is completed.
34. External Investigators shall treat all materials related to the investigation as confidential and shall retain secure custody and control of investigation materials

for as long as there is a reasonable prospect of legal proceedings and not less than seven (7) years.

Investigation Process

35. The investigation process requires that:

- a) the Investigator will treat all information received in the course of the investigation in accordance with the confidentiality provisions outlined in section [F1](#) of this Policy;
- b) the Investigator will give written notice to the Parties that the allegations set out in the Report will be investigated;
- c) the Investigator may request and/or receive additional clarifying information or evidence to supplement the Report or names of any potential witnesses. The Complainant will be provided a reasonable opportunity to schedule an interview. For the purpose of scheduling an interview or follow-up interview, “reasonable opportunity” shall be no more than thirty (30) calendar days after the Investigator’s initial request;
- d) the Respondent will be given a reasonable opportunity to participate in the investigation process, including a reasonable opportunity to schedule an interview or follow-up interview, as the phrase “reasonable opportunity” is defined in F6(35)(c) above. The Respondent may also provide names of any potential witnesses, and submit any additional information they wish to have considered as a part of their response;
- e) the Investigator will remind all Process Participants of the importance of maintaining confidentiality until the investigation process is concluded. To protect the integrity of information gathered during the investigation, Process Participants are not to speak about the fact that they have participated in the investigation or the information they provided with anyone other than their Designated Supports until the investigation is concluded; and
- f) interviews with Process Participants will be recorded. If, for some reason, recording is not available or the Process Participant does not consent to recording, the Investigator will prepare written notes of the Process Participant’s evidence and review those notes with the Process Participant. The Process Participant will have the opportunity to make corrections, clarifications or additions to the Investigator’s notes. Process Participants are not permitted to retain a copy of the Investigator’s notes or review the notes when the Investigator is not present.

Investigation Report

36. At the conclusion of the investigation, the Investigator will prepare a confidential draft written investigation report that makes a finding as to whether or not, on a balance of probabilities (i.e. more likely than not), the Respondent has committed an act of Harassment against the Complainant and provide reasons for the finding. Reasons will include findings of credibility, a description of what evidence was accepted and was not, and a weighing of that evidence.
37. The Investigator will provide the investigation report to the Human Rights & Equity Advisor.
38. Once the investigation report is finalized, the Investigator will prepare the investigation report for distribution to each Party by redacting the personal information (as that term is defined in applicable privacy legislation) of any person other than the intended recipient of the investigation report.
39. The Investigator will provide redacted versions of the investigation report to the Human Rights & Equity Advisor.
40. The Human Rights & Equity Advisor will provide the Parties with their respective redacted version of the investigation report along with information regarding available advocacy and support services.
41. The Complainant and the Respondent will be given ten (10) calendar days to provide written comments on the report to the Human Rights & Equity Advisor, including but not limited to:
 - a) challenging the report's finding based upon jurisdiction, a denial of natural justice, unfairness in the application of the Policy, or that the finding is unreasonable based on the evidence or the Investigator's reasoning. This is the only stage at which the finding of Harassment made by the Investigator can be challenged; and
 - b) commenting on appropriate outcomes and sanctions.
42. The Parties may request a time extension not exceeding thirty (30) days to submit their comments. If extenuating circumstances necessitate that a Party requires additional time in excess of the thirty (30)-day extension, then the Party shall submit a written request to the Human Rights & Equity Advisor that sets out the length of additional time needed and reasons for the requested extension.
43. The Human Rights & Equity Advisor will submit the final investigation report and any comments received from the Parties to the Vice-President, People and Culture or their delegate.

F7. Outcomes

Outcome and Disciplinary Measures where Respondent is an Employee

1. The final investigation report and any comments received from the Parties will be reviewed by the Vice-President, People and Culture, who will decide whether to accept the Investigator's report, and advise the Parties accordingly.
2. Where the Investigator's finding that the Respondent has breached the Policy is accepted, then the Vice-President, People and Culture, in consultation with the Respondent's Administrative Head, will proceed to determine any further procedures, or remedial or disciplinary measures in accordance with the applicable collective agreement or employee handbook.
3. The Vice-President, People and Culture will advise the Respondent, with a copy to the Human Rights and Equity Advisor, in writing of that decision, along with information on available resources, such as Dalhousie's Employee & Family Assistance Program, if applicable, and contact information for the appropriate union where the Respondent is a unionized employee.
4. The Complainant will be informed of any disciplinary outcomes imposed upon an employee Respondent that have a direct impact on them. They will also be provided with information on available resources, such as Dalhousie Student Health and Wellness for Student Complainants and Dalhousie's Employee & Family Assistance Program for some employees, as well as contact information for the appropriate union where the employee is represented by a union.
5. Documents received by the Vice-President, People and Culture pursuant to section F7(1) above will be retained by the Vice-President, People and Culture in accordance with the applicable collective agreement or employee handbook.

Outcomes where Respondent is an Associate or Visitor

6. If the Human Rights & Equity Advisor determines that any elements in [F6\(1\)](#) have not been met, the Complainant will be advised of support and resources as appropriate, and that no further action with respect to the Report will be pursued. If new information is subsequently provided, this decision may be re-evaluated.
7. If the Human Rights & Equity Advisor determines that all of the elements in [F6\(1\)](#) have been met, the Human Rights & Equity Advisor, in consultation with the appropriate Administrative Head or Vice-President, People and Culture, will determine whether and/or what further procedures or actions should be initiated. Possible further actions include banning the Associate or Visitor from Dalhousie

property or activities, terminating any contract or agreement pursuant to which the Associate or Visitor is on Dalhousie University's property or participating in Dalhousie University activities, and advising the Associate or Visitor's employer or home academic institution of the Report.

G. Resources and Related Policies, Procedures and Legislation

G1. Supports within the Dalhousie University Community:

- **Human Rights & Equity Services**

Website linked [here](#).

<https://www.dal.ca/about/mission-vision-values/equity-diversity-inclusion-and-accessibility/about-office-equity-inclusion/human-rights-and-equity-services.html>

- **Security Services**

Website linked [here](#).

<https://www.dal.ca/about/contact-us.html>

- **Ombudsperson** (*independent and impartial support*)

Website linked [here](#).

https://www.dal.ca/campus_life/safety-respect/ombudsperson.html

- **Dalhousie Student Health & Wellness Centre** (*for students*)

Website linked [here](#).

https://www.dal.ca/campus_life/health-and-wellness.html

- **Student Health & Wellness Centre, Truro** (*for students at the Agricultural campus*)

Website linked [here](#).

https://www.dal.ca/campus_life/health-and-wellness/my-health/Medical-Services/agricultural-campus-services.html

- **Resident Affairs** (*for medical residents across the Maritimes*)

Website linked [here](#).

<https://medicine.dal.ca/departments/core-units/resident-affairs/about.html>

- **Union or employee group** (*for employees*)

Website linked [here](#).

<https://www.dal.ca/dept/hr/EmployeeResources/new-employees/Employee-Groups.html>

- **Dalhousie Employee & Family Assistance Program** (*for employees*)

Website linked [here](#).

<https://www.workhealthlife.com/>

G2. Additional Resources in the Broader Community

- Occupational Health and Safety Act, SNS 1996, c 7
Website linked [here](#).
<https://www.canlii.org/en/ns/laws/stat/sns-1996-c-7/latest/sns-1996-c-7.html>
- Violence in the Workplace Regulations
NS Reg 209/2007 pursuant to the *Occupational Health and Safety Act*
Website linked [here](#).
<https://www.csagroup.org/store/product/CAN-CSA-Z1003-13-BNQ%209700-803-2013/>
- **National Standard of Canada, *Psychological health and safety in the workplace Prevention, promotion, and guidance to staged implementation*** CAN/CSA-Z1003-13/BNQ 9700-803/2013 (R2022)
Website linked [here](#).
<https://www.csagroup.org/store/product/CAN-CSA-Z1003-13-BNQ%209700-803-2013/>
- **Canadian Mental Health Association, Nova Scotia Division**
Resources & Supports webpage linked [here](#)
<https://novascotia.cmha.ca/find-help/>

Training webpage linked [here](#).
<https://novascotia.cmha.ca/training/>
- **Provincial Mental Health Crisis Support**
Website linked [here](#).
<https://mha.nshealth.ca/en>
- **Nova Safe - Harassment and Violence**
Website linked [here](#).
https://www.novasafe.ca/en/topics/harassment_violence#summary

G3. Related Policies and Procedures

- **Applicable collective agreement or handbook (for employees)**
Website linked here.
<https://www.dal.ca/dept/hr/labour-relations/collective-agreements.html>
- **Code of Student Conduct**
Website linked [here](#).
<https://www.dal.ca/content/dam/www/about/leadership-and-governance/governing-bodies/code-student-conduct.pdf>

- **Conflict of Interest Policy**
Website linked [here](#).
<https://www.dal.ca/content/dam/www/about/leadership-and-governance/university-policies/conflict-interest-policy.pdf>
- **Employee Accommodation Policy**
Website linked [here](#).
<https://www.dal.ca/content/dam/www/about/leadership-and-governance/university-policies/employee-accommodation-policy.pdf>
- **Records Management Policy**
Website linked [here](#).
<https://www.dal.ca/content/dam/www/about/leadership-and-governance/university-policies/records-management-policy.pdf>
- **Student Accommodation Policy**
Website linked [here](#).
<https://www.dal.ca/content/dam/www/about/leadership-and-governance/university-policies/student-accom-policy.pdf>
- **Student Feedback on Learning Experiences Policy**
Website linked [here](#).
<https://www.dal.ca/content/dam/www/about/leadership-and-governance/university-policies/Student%20Feedback%20on%20Learning%20Experiences%20Policy%20rev%202023.pdf>
- **Workplace Violence Policy**
Website linked [here](#).
<https://www.dal.ca/content/dam/www/about/leadership-and-governance/university-policies/workplace-violence.pdf>

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