KPU Board of Governors
Regular Meeting

Date:	**November 26, 2025**
Time:	**5:00 pm – 6:00 pm**
Online:	**MS Teams**

BOARD OF GOVERNORS – REGULAR MEETING AGENDA

November 26, 2025
5:00– 6:00 pm
via MS Teams

Attending: Anirudh Agnihotri, Kwuntiltunaat (Kim) Baird, Erin Barnes, Karanbir Boparai, Bruce Choy, Dianne Doyle, Furquan Gehlen, Gabby Gill, Kim McGill, June Park, Lyndsay Passmore, Stephanie Smith, Amanda Smith-Weston

Regrets:

Presenters & Administrative Resources: Sonia Banwait, Laurie Clancy, Brent Elliott, Randall Heidt, Shelly Kean, Carole Laplante, Lori McElroy, Zena Mitchell, Diane Purvey, Asma Sayed, Peter Smailes, Keri Spindler

> *M = Motion to Approve*
> *D = Discussion*
> *I = Information*
> *E = Education*

Regular Board Meeting
Closed Board Meeting to follow

AGENDA ITEM	RESOURCE	ACTION	TIME	PAGE
1. Presentation on Freedom of Information and Protection of Policy Act (FIPPA) of BC	Shelly Kean	E	5:00	
2. Call to Order & Introductory Remarks	Erin Barnes		5:15	

We at Kwantlen Polytechnic University respectfully acknowledge that we live, work and study in a region that overlaps with the unceded traditional and ancestral First Nations territories of the Musqueam, Katzie, Semiahmoo, Tsawwassen, Qayqayt, and Kwikwetlem, and with the lands of the Kwantlen First Nation, which gifted its name to this university.

AGENDA ITEM	RESOURCE	ACTION	TIME	PAGE
3. Approval of Agenda	Erin Barnes	M	5:16	2

MOTION: THAT the Board of Governors approve the regular meeting agenda for November 26, 2025.

AGENDA ITEM	RESOURCE	ACTION	TIME	PAGE
4. Conflict of Interest	Erin Barnes		5:17	

5.	Consent Agenda	Erin Barnes	M	5:18	5
	5.1. Minutes of the October 1, 2025 Regular Board of Governors Meeting				6
	5.2. Approval of Policy and Procedure: RS1 Research Involving Humans		M		10
	5.3. Opportunity to Opt-in: Policy Phase One Posting: Amendment of Policy & Procedure – SR10 International Travel & Security		I		73

MOTION: THAT the Board of Governors approve the following items on the Consent Agenda:
5.1. Minutes of the October 1, 2025 Regular Board of Governors Meeting
5.2. Approval of Policy and Procedure – RS1 Research Involving Humans
AND
THAT the Board of Governors receive the following items for information:
5.3. Opportunity to Opt-in: Policy Phase One Posting: Amendment of Policy and Procedure – SR10 International Travel & Security

6.	Governance Committee Report	Erin Barnes			
	6.1. Committee Chair Report	Erin Barnes	I	5:20	
	6.2. Approval of the Revisions to the Board Governance Manual	Keri Spindler	M	5:20	78

MOTION: THAT the Board of Governors approve the tracked changes in the Board Governance Manual, as recommended by the Board Governance Committee.

7.	Human Resources Committee Report				
	7.1. Committee Chair Report	Stephanie Smith	I	5:25	
8.	Audit Committee Report				
	8.1. Committee Chair Report	Gabby Gill	I	5:26	
9.	Finance Committee Report				
	9.1. Committee Chair Report	Gabby Gill	I	5:27	
	9.2. Revision of GV4 Signing and Spending Authority Procedure	Peter Smailes / Carole Laplante	M	5:30	80

MOTION: THAT the Board of Governors approve the revised GV4 Signing and Spending Authority and Schedule A, effective December 1, 2025, as recommended by the Board Finance Committee.

9.3. Revision of Bylaw No. 4 Fees – Human Resources Management Post- Baccalaureate Diploma Tuition Reduction Assessment	Lori McElroy	M	5:35	103

MOTION: THAT the Board of Governors approve the revisions to Bylaw No. 4 Fees, as presented.

10. Review of Policy and Procedure – GV10 Mission, Vision and Values Development and Amendment	Bruce Choy	M	5:40	124

MOTION: THAT the Board of Governors approve Dr. Bruce Choy to review KPU's Mission, Vision and Values, in accordance with KPU Policy GV10 – Mission, Vision and Values Development and Amendment Policy.

11. President's Report 11.1. Report to the Board	Bruce Choy	I	5:45	126
12. Provost's Report 12.1. Report to the Board	Diane Purvey	I	5:50	Verbal report
13. Senate Report – Meeting Held on September 29, 2025 and October 27, 2025	Bruce Choy	I	5:55	130
14. Any Other Business	Erin Barnes	D	6:00	
15. Closing Remarks & Adjournment	Erin Barnes		6:00	
Next Meeting: Regular Board Meeting Wednesday, January 28, 2026 **KPU Tech/Cloverdale – Room 1853** 5:00 – 8:00 pm	Erin Barnes			

BOARD OF GOVERNORS - REGULAR MEETING
Agenda Number: *5*
Meeting Date: *November 26, 2025*
Presenter(s): *Erin Barnes*

AGENDA TITLE: CONSENT AGENDA

ACTION REQUESTED: Motion

RECOMMENDED RESOLUTION

THAT the Board of Governors approve the following items on the Consent Agenda:
5.1. Minutes of the October 1, 2025 Regular Board of Governors Meeting
5.2. Approval of Policy and Procedure – RS1 Research Involving Humans
AND
THAT the Board of Governors receive the following items for the information:
5.3. Opportunity to Opt-in: Policy Phase One Posting: Amendment of Policy and Procedure – SR10 International Travel & Security

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Attachments

1. Minutes of the October 1, 2025 Regular Board of Governors Meeting

2. Approval of Policy and Procedure – RS1 Research Involving Humans

3. Policy Phase One Posting: Amendment of Policy and Procedure – SR 10 International Travel & Security

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Submitted by

Sonia Banwait, Executive Assistant to the Board of Governors

Date submitted

November 17, 2025

BOARD OF GOVERNORS - REGULAR MEETING

Minutes of Regular Meeting
Wednesday, October 1, 2025
5:01 p.m. – 5:58 p.m.
Surrey Cedar 2110

Present:

Board
Kim (Kwuntiltunaat) Baird, Chancellor
Erin Barnes, Chair
Bruce Choy, President & Vice-Chancellor
Dianne Doyle
Furquan Gehlen
Gabby Gill
Kim McGill
Stephanie Smith
Amanda Smith-Weston

University G7 members
Laurie Clancy, Vice-President, Human Resources
Randall Heidt, Vice-President, External Relations
Zena Mitchell, Vice-President, Students
Asma Sayed, Vice-President, Equity & Inclusive Communities
Peter Smailes, Vice-President, Finance and Administration

Presenters and Administrative Resources
Sonia Banwait, Executive Assistant, Board of Governors
David Burns, Associate Vice-President, Academic and Acting Provost
Carole Laplante, Associate Vice-President, Financial Services
Jennifer Duprey, General Counsel
Lori McElroy, Associate Vice-President, Planning and Accountability
Keri Spindler, University Secretary & Executive Assistant to the President & Vice Chancellor

Regrets:

Anirudh Agnihotri
Karanbir Boparai
June Park
Lyndsay Passmore
Diane Purvey, Provost

1. Call to Order and Introductory Remarks	The Vice-Chair called the meeting to order at 5:01pm.
	The Vice-Chair acknowledged KPU's commitment to reconciliation and recognition that we live, work and study in a region that overlaps with the unceded traditional and ancestral First Nations territories of the Musqueam, Katzie, Semiahmoo, Tsawwassen, Qayqayt, and Kwikwetlem, and with the lands of

the Kwantlen First Nation, which gifted its name to this university.

1.1. Welcome by KPU Elder in Residence

The Vice-Chair welcomed Lekeyten, KPU Elder in Resident, for his welcome to the shared traditional territories.

2. Approval of Agenda	**MOTION #01-25/26** **MOVED, SECONDED AND CARRIED THAT the Board of Governors approve the regular meeting agenda for October 1, 2025.**
3. Conflict of Interest	No other Conflict of Interest was declared.
4. Approval of Consent Agenda	**MOTION #02-25/26** **MOVED, SECONDED AND CARRIED the motion THAT Board of Governors approve the following item on the Consent Agenda as circulated:** *4.1.* **Minutes of the June 25, 2025 Regular Board of Governors Meeting.** *4.2.* **Policy & Procedure AC15 Digital Credentials** *4.3.* **Update to GV4 – Signing Authority Policy, Procedures and Schedules**
5. Governance Committee Report	*5.1.* **Committee Chair Report** Erin Barnes, Committee Chair, informed the committee met on September 17, 2025 and noted the items are on the agenda. *5.2.* **Accountability Plan & Report 2024/25** Lori McElroy, Associate Vice-President, Planning & Accountability, shared the Accountability Plan Report for 2024/25 was brought forward as a draft to the Board in June 2025 and was reviewed by the Ministry in the summer and no additional feedback was provided. The purpose of the report is to ensure that post secondary institutions are accountable to the government and vice versa. This final report fulfills the requirements of the Ministry of Post-Secondary Education and Future Skills Accountability framework. Meredith Haaf, Director, Planning and Accountability, informed there are 5 key goals aligned with VISION 2026 and noted the performance measures set by the Ministry as well as measures set by the University and provided a brief description of each goal.

MOTION #03-25/26
MOVED, SECONDED AND CARRIED the motion THAT Board of Governors approve the 2024/25 Accountability Plan & Report for submission to the Ministry of Post-Secondary Education and Future Skills, as recommended by the Board Governance Committee.

6. **Human Resources Committee Report**

6.1. **Committee Chair Report**

Stephanie Smith, Committee Chair, informed the committee met on September 18, 2025 and there is nothing to report.

7. **Audit Committee Report**

7.1. **Committee Chair Report**

Gabby Gill, Committee Chair, informed that the committee met on September 16, 2025 and there is nothing to report.

8. **Finance Committee Report**

8.1. **Committee Chair Report**

Gabby Gill, Committee Chair, informed that the committee met on September 16, 2025 and items are on the agenda.

8.2. **Executive Statement of Financial Information (SOFI) Public Bodies Report as at March 31, 2025**

Peter Smailes, Vice-President, Finance and Administration, presented the Executive Statement of Financial Information (SOFI) Public Bodies Report as of March 31, 2025, and as required by the Ministry of Finance in accordance with the Financial Information Act. The report includes audited financial statements that have been presented previously by external auditors and management and approved by the Board. The report also includes unaudited financial information that has been prepared by the finance and payroll teams.

MOTION #04-25/26
MOVED, SECONDED AND CARRIED the motion THAT Board of Governors approve the Statement of Financial Information (SOFI) Public Bodies Report as at March 31, 2025 for submission to the Ministry of Post-Secondary Education and Future Skills, as recommended by the Board Finance Committee.

9. **President's Report**

9.1. **Report to the Board**

The President's report was circulated in the agenda package and summarized in the meeting.

10. Provost's Report	*10.1.* **Report to the Board**
	David Burns, Associate Vice-President, Academic, on behalf of the Provost Diane Purvey, provided a brief report highlighting academic accomplishments in each faculty led by their respective Dean.
11. Senate Reports	Senate report from June 23, 2025 was included in the meeting package.
	11.1. **Senate Meeting Dates 2025/26**
	The Vice-Chair shared the Senate meeting dates for 2025/26 and encouraged Board members to reach out to the Board Office to attend an upcoming Senate meeting.
12. Any Other Business	The Vice-Chair informed Joe Vosburgh, Elected Faculty Board Member, has resigned from the Board. The Vice-Chair thanked Vosburgh for his service and time on the Board.
	Kim McGill, Support Staff Board Member and Manager, Community Engagement shared KPU Open House takes place on Saturday, October 4th at 2:00pm and welcomed Board members to attend.
13. Closing Remarks & Adjournment	The meeting adjourned at 5:58pm.
Next Meeting	The next meeting has been scheduled for Wednesday, November 26, 2025 via MS Teams.

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Board Chair

![KPU Logo] KWANTLEN POLYTECHNIC UNIVERSITY

BOARD OF GOVERNORS - REGULAR MEETING
Agenda Number: *5.2*
Meeting Date: *November 26, 2025*
Presenter(s): *N/A*

AGENDA TITLE: POLICY AND PROCEDURE AMENDMENT RS1 RESEARCH INVOLVING HUMANS

ACTION REQUESTED: Motion

RECOMMENDED RESOLUTION

THAT the Board of Governors approve Policy and Procedure RS1 Research Involving Humans, effective January 1, 2026, as recommended by the Board Governance Committee.

COMMITTEE REPORT

On November 12, 2025, the Board Governance Committee received, reviewed and recommended that the Board of Governors approve Policy and Procedure RS1 Research Involving Humans, effective January 1, 2026.

Context and Background

RS1 Policy on Research Involving Human Participants has undergone a major revision to align with the latest Tri-Council Policy Statement (TCPS): Ethical Conduct for Research Involving Humans Edition 2 (2022) standards and interpretations. Related key updates include the addition of a fourth core principle supporting Indigenous research, integration of Generative AI and human genomics considerations, and enhanced clarity on roles across the university, REB, and researchers. The policy strengthens commitments to equity, diversity, and inclusion, supports community-based research with marginalized groups, and streamlines review and incident reporting processes. Following Phase Two Posting in June 2025, the drafts were refined for added clarity, governance alignment, and operational efficiency.

Key Messages

1. Board of Governors is the approving jurisdiction for Policy and Procedure RS1 Research Involving Humans.

2. Following the Phase Two Posting in June 2025, the Policy Developer carefully considered and addressed all feedback received and made additional copy-edits to polish the drafts for added clarity.

Resource Requirements

The Office of Associate Vice President, Research and Innovation is responsible for ensuring institutional compliance with TCPS and all other related institutional requirements set out in the Tri-Agency Framework on Responsible Conduct of Research, including all relevant Research Ethics Board guidance documents, Office of Research Services guidelines and standard operating procedures.

Implications/Risks

Policy and Procedure RS1 must be updated to ensure continued compliance with regulatory requirements as set out in the Tri-Agency Framework on Responsible Conduct of Research. The up-to-date policy also enables KPU to fulfil its obligations as part of the Research Ethics BC harmonization initiative.

Consultations

The following key parties were consulted as part of the policy development and consultation process:

3. Finance

4. Melissa Cuthill, Data Librarian

5. Legal

6. Privacy

7. Organizational Risk

8. Labour Relations

9. Office of Equity and Inclusive Communities

10. Gayle Bedard, Associate Vice President, Indigenous Leadership

11. Office of Accessibility

12. Research Ethics Board

13. Arts Research Advisor

14. Senate Standing Committee on Research

15. Senate Standing Committee on Policy

16. Wilson School of Design

17. Faculty of Arts

18. Office of the Provost

Attachments

1. RS1 Research Involving Humans Policy Draft
2. RS1 Research Involving Humans Procedure Draft
3. RS1 Research Involving Humans Policy Draft – Track Change
4. RS1 Research Involving Humans Procedure Draft – Track Change
5. RS1 Research Involving Humans Phase Two Blog Post – KPU Policy Blog

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Submitted by

Josephine Chan, Special Assistant to the Provost on Policy and Academic Affairs

Date submitted

October 9, 2025

	Policy History
	Policy No.
	RS1
	Approving Jurisdiction:
	Board of Governors
	Administrative Responsibility:
	Provost and Vice President Academic
	Effective Date:
	January 1, 2026

KWANTLEN POLYTECHNIC UNIVERSITY

Research Involving Humans
Policy

A. CONTEXT AND PURPOSE

KPU's strategic goals include: to foster cultural, social and environmental sustainability through our offerings, research and operations; to expand activity, funding, intensity and impact of research, scholarship and innovation partnerships; to foster teaching excellence and expand innovation in teaching, learning and curriculum; to foster decolonization and reconciliation with Indigenous peoples; advance anti-racism initiatives across KPU; advance equity, diversity, inclusion and accessibility across KPU; ensure continuous improvement of all KPU programs and services; and to be accountable and transparent to its friends, communities, partners, and governments.

KPU is committed to the ethical advancement of knowledge through scholarly activities, including through research involving humans. The purpose of this policy is to ensure that all research involving humans carried out under KPU's auspices comply with the Agreement on the Administration of Agency Grants and Awards by Research Institutions ("Tri-Agency Agreement").

As an institutional signatory to the Tri-Agency Agreement, KPU is required to comply with its requirements set out in the Tri-Agency Framework: Responsible Conduct of Research, as amended from time to time. Specific to research involving humans, the Agreement requires the following:

"The Institution shall, for all research involving humans carried out under its auspices:

1. comply with the Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans, as amended;

2. establish, maintain and comply with its own policy and procedures, or have a formal agreement with another institution, that conform to the requirements set out in the Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans;

3. ensure that Researchers are informed of their obligations under the Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans and provided such training as they may reasonably require;

4. ensure, through the use of financial or other controls, that the Institution's research ethics board ("REB"), or an REB designated by the Institution, has approved the research project before research activities involving humans have commenced, and that REB approval is maintained as long as activities involving humans are carried out. Where appropriate controls are in place, all Grant funds may be released prior to (or pending) REB approval."

According to the TCPS Interpretation on Governance published by Panel on Research Ethics, the Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans ("TCPS") requires that the highest governing body of the institution establish the REB (or REBs), define an appropriate reporting relationship with the REB (or REBs), and ensure that REBs have the necessary financial and administrative resources to fulfil their duties. For the highest governing body, a focus on the one that holds the highest administrative rather than academic responsibility is noted in the TCPS Interpretation on Governance. REBs are independent in their decision making and are accountable to the highest body that established them for the process of research ethics review (per Article 6.2 of TCPS).

B. SCOPE AND LIMITS

This Policy applies to all research involving:

1. human participants,

2. human biological materials derived from individuals living or deceased, and/or

3. other human data not otherwise exempted under the TCPS, that is carried out under the auspices of KPU. This includes, but is not limited to, research conducted:

    a. by KPU employees, students, or volunteers;

    b. in affiliation with KPU;

    c. using KPU equipment, space, or resources; and

    d. in collaboration with other institutions, Indigenous peoples and communities, organizations, or partners, including while under the oversight of multiple REBs.

C. STATEMENT OF POLICY PRINCIPLES

KPU requires research involving humans be conducted in accordance with the TCPS, including the following Core Principles (Chapter 1, TCPS) that underlie respect for human dignity as the minimal standard:

1. **Respect for Persons**: a recognition of the intrinsic value of human beings and the respect and consideration they are due.

2. **Concern for Welfare**: a requirement of researchers and REBs to aim to protect the welfare of participants, and, in some circumstances, to promote that welfare in view of any foreseeable risks associated with the research.

3. **Justice**: an obligation to treat people fairly and equitably.

The University recognizes that research involving Indigenous peoples requires distinct considerations, as outlined in TCPS Chapter 9, and as per the BC Declaration on the Rights of Indigenous Peoples Act. Accordingly, given its strategic goal of furthering decolonization and reconciliation with Indigenous peoples, KPU embraces a fourth principle as follows:

4. **Cultural Safety and Respect for Indigenous Peoples**: A commitment to recognizing and valuing the unique cultural identities, knowledge systems, and traditions of Indigenous peoples. This principle requires researchers and REBs to ensure that research involving Indigenous communities is conducted in a manner that is culturally safe, respectful, and inclusive, actively involving Indigenous peoples in the research process and addressing their specific needs and perspectives.

D. DEFINITIONS

Refer to RS1 Research Involving Humans Procedure for a list of definitions in support of this policy.

E. RELATED POLICIES, REFERENCES, AND LEGISLATION

Related Policies

HR1 Conflict of Interest
IM4 Confidentiality
IM7 Management of Surveys
IM9 Information Security
RS2 Integrity in Research and Scholarship
RS3 Indirect Costs of Research

RS4 Administration and Control of Research and Special Funds

ST2 Academic Integrity

External Standards and References

Tri-Agency Framework: Responsible Conduct of Research (RCR Framework), as updated. The current version referenced in this Policy and Procedure is the 2021 edition.

Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans (TCPS), as updated. Article and chapter references in this Policy and Procedure are with respect to the current edition which is Edition 2 (2022).

Pulling Together: A Guide for Researchers, Hiḱ̓ala: A guide for Indigenization of post-secondary institutions. A professional learning series. Dianne Biin; Deborah Canada; John Chenoweth; and Lou-ann Neel. BC campus, Victoria, B.C.

Committee and Board Documents

REB Terms of Reference (under revision)

Terms of Reference for REB Chair and Vice Chair Nomination Committee (under development)

Legislation

University Act, RSBC 1996 c 468

Declaration on the Rights of Indigenous Peoples Act, SBC 2019 c44

Freedom of Information and Protection of Privacy Act, RSBC 1996 c 165

Agreements

1. Agreement on the Administration of Agency Grants and Awards by Research Institutions

2. Memorandum of Understanding Between Kwantlen Polytechnic University and the University of the Fraser Valley Concerning Research Ethics Board Appeals ("Appeals Agreement")

3. BC Research Ethics Review Reciprocity Agreement

Strategy Documents

[Kwantlen Polytechnic University Research Data Management Strategy](#)

REB Guidance Documents, ORS Guidelines, and SOPs

Guidance Documents: [Guidance Documents](#)

Guidelines and SOPs from the ORS: [Guidelines & SOPs from the ORS](#)

F. RELATED PROCEDURES

RS1 Research Involving Humans Procedure

Policy History	
Policy No.	
RS1	
Approving Jurisdiction:	
Board of Governors	
Administrative Responsibility:	
Provost and Vice President Academic	
Effective Date:	
January 1, 2026	

KPU | KWANTLEN POLYTECHNIC UNIVERSITY

Research Involving Humans Procedure

A. DEFINITIONS

1. **Administrative Approvals:**
Administrative approvals refer to the other institutional approvals needed for a research project beyond ethical approval from the Research Ethics Board (REB) for research involving humans). These approvals generally follow from university policies and other legal obligations and commitments.

2. **Amendment:**
A request submitted to the REB by researchers to modify an already approved research project proposing changes that affects the ethical acceptability of research. Amendments may involve proposed modifications to the study's protocol, procedures, consent forms, recruitment methods, study personnel, or other elements that may affect the ethical acceptability of the research.

3. **Application or Research Ethics Application:**
A request submitted by a researcher to the REB (for ethical consideration in accordance with the TCPS) that sufficiently delineates the goals, methodology, risks, and benefits of a proposed research study involving humans.

4. **Appeal:**
A process that allows a researcher to request a review of a REB decision when, after reconsideration, the REB has refused ethics approval of the research (adapted from Glossary, TCPS).

5.	**Appeal Board or Research Ethics Appeals Board:**	A body designated by KPU to review appeals from researchers of decisions made by a REB. This board functions as an independent, impartial body composed of individuals with the relevant expertise to assess appeals fairly.
		Note: At this time, KPU has an agreement with the University of the Fraser Valley whereby the REB of each university serves as the Appeal Board for appeals originating from the other university.
6.	**Community-Based Research:**	A research approach that involves active participation of stakeholders, those whose lives are effected by the issue being studied, in all phases of research for the purpose of producing useful results to make positive changes (as used by Community Based Research Canada[1])
7.	**Continuing Research Ethics Review:**	Any review of ongoing research conducted by a REB occurring after the date of initial REB approval and continuing throughout the life of the project to ensure that all stages of a research project are ethically acceptable in accordance with the principles in the Policy (adapted from Glossary, TCPS).
8.	**Core Principles:**	The four core principles that together express the overarching value of respect for human dignity: Respect for Persons, Concerns for Welfare, and Justice (per Article 1.1, TCPS) as well as Cultural Safety and Respect for Indigenous Peoples.
9.	**Delegated REB Review:**	The level of REB review generally assigned to minimal risk research projects.
10.	**Data Management Plan(s):**	Data management plans (DMPs) are living documents that outline a project team's plans for research data management (RDM) during a research project and for its long-term storage. DMPs describe:

- how data will be collected, documented, formatted, protected and preserved;

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[1] adapted from Nelson, Ochocka, Griffin & Lord, 1998, p2 "Nothing about me without me": Participatory action research with self-help/mutual aid organizations for psychiatric consumers/survivors. American Journal of Community Psychology, 26, 881-912)

- how existing datasets will be used and what new data will be created over the course of the research project;

- whether and how data will be shared; and

- where data will be deposited.

DMPs also indicate who is responsible for managing the project's data, describe the succession plans in place should that person leave the research team, and identify the data-related roles and responsibilities of other team members where appropriate. Finally, DMPs outline ethical, legal and commercial constraints the data are subject to, and methodological considerations that support or preclude data sharing (adapted from Tri-Agency RDM policy).

11.	**Duty of Care:**	In this context, refers to the ethical and legal obligation of researchers and the institution to ensure the safety, well-being, and rights of research participants. Specifically, researchers must act with diligence, fairness, and integrity, taking all reasonable steps to prevent harm and uphold the highest standards of responsible research conduct. This duty extends across various dimensions, including physical, psychological, and informational protections (from the Office of General Counsel).
12.	**Ethics Approval:**	An approval of an application to conduct a specified research project involving humans, granted by the REB in accordance with this policy, confirming that the proposed study adheres to the ethical principles defined in the TCPS and in this policy.
13.	**Equity-Denied:**	Refers to individuals who are historically disadvantaged and underrepresented due to systemic inequities or biases based on race, gender, socioeconomic status, disability, sexual orientation, or other characteristics. (adapted from Glossary: Canadian Center for Diversity and Inclusion)
14.	**Full REB Review:**	The level of REB review assigned to above minimal risk research projects. Conducted by the full membership of the REB, it is the default requirement for the ethics review of research involving humans (adapted from Glossary, TCPS).

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15.	**Guidance Documents:**	Developed by the REB, guidance documents are designed to support researchers (and the REB) in interpreting the TCPS and navigating research ethics considerations and related processes at KPU. They may include position statements, interpretive guidelines, or related documents.
16.	**Guidelines:**	Administrative documents developed by the Office of Research Services to interpret and implement the university's policies by providing practical direction, procedural clarity, and tools to help researchers, administrators, and oversight bodies in day-to-day practice. These may include process steps, timelines, and forms.
17.	**Human Biological Materials:**	This refers to tissues, organs, blood, plasma, skin, serum, DNA, RNA, proteins, cells, hair, nail clippings, urine, saliva, and other body fluids. The term also includes materials related to human reproduction, including embryos, fetuses, fetal tissues and human reproductive materials (adapted from Glossary, TCPS).
18.	**Human Genetic Research:**	The study of genetic factors responsible for human traits and the interaction of those factors with each other, and with the environment (adapted from Glossary, TCPS).
19.	**Incident Reporting Form:**	A formal document from the REB for researchers to report any unanticipated incident occurring while carrying out a REB-approved study. These events may arise during or after data collection, leading to a greater risk of harm (physical, psychological, economic, or social) to participants than was previously anticipated.
20.	**Indigenous Peoples:**	In Canada, the term "Indigenous peoples" refers to persons of First Nations, Inuit, or Métis descent, regardless of where they reside and whether their names appear on an official register. In Canada, a comparable term, "Aboriginal peoples" is also used in certain contexts (adapted from Glossary, TCPS).
21.	**Indigenous Research:**	Research in any field or discipline that is conducted by, grounded in or engaged with First Nations, Inuit, Métis or other Indigenous nations, communities, societies or individuals, and their wisdom, cultures, experiences or

knowledge systems, as expressed in their dynamic forms, past and present. Indigenous research can embrace the intellectual, physical, emotional and/or spiritual dimensions of knowledge in creative and interconnected relationships with people, places and the natural environment (per SSHRC definition of Indigenous research).

22.	**Marginalized:**	Members of society that face exclusion due to societal and systemic barriers (adapted from Glossary: Canadian Centre for Diversity and Inclusion).
23.	**Minimal Risk:**	Research in which the probability and magnitude of possible harms implied by participation in the research is no greater than those encountered by participants in the aspects of their everyday life that relate to the research (adapted from Glossary, TCPS).
24.	**Multi-Jurisdictional Research:**	Research involving multiple institutions and/or multiple REBs. It is not intended to apply to ethics review mechanisms for research involving multiple REBs within the jurisdiction or under the auspices of a single institution (adapted from Glossary, TCPS).
25.	**Ongoing Research:**	Research that has received REB approval and has not yet been completed (adapted from Glossary, TCPS).
26.	**Participant:**	An individual whose data, biological materials, or responses to interventions, stimuli, or questions by an individual conducting research are relevant to answering the research question(s). Also referred to as a "human participant," and in other policies/guidance as "subject" or "research subject" (adapted from Glossary, TCPS).
27.	**Principal Investigator (PI):**	The principal investigator is the lead researcher who provides overall intellectual leadership and direction of the research and related activities. The PI may may be designated as the applicant or co-applicant on a research funding application and may be responsible for the financial and administrative aspects of the project according to their defined role. The PI must be qualified to undertake the research independently, cannot be a student, has the necessary expertise to guide members of research team, and meets the eligibility criteria for their defined role. The PI

takes responsibility for the responsible conduct (including ethical conduct) of the research, and for the actions of any member of the research team at a local site (adapted from NSERC CCI program and Glossary, TCPS).

Note: For student research, the qualified researcher (typically the faculty member) guiding the student(s) shall function as the PI for the purposes of this Policy.

28.	**Research:**	An undertaking intended to extend knowledge through a disciplined inquiry and/or systematic investigation (adapted from Glossary, TCPS).
29.	**Research Ethics Board (REB):**	A body of researchers, community members, and others with specific expertise (e.g., in ethics, in relevant research disciplines) established by an institution to review the ethical acceptability of all research involving humans conducted within the institution's jurisdiction or under its auspices (adapted from Glossary, TCPS). It may also be referred to as an Human Research Ethics Board (HREB).
30.	**Risk:**	The possibility of the occurrence of harm. The level of foreseeable risk posed to participants by their involvement in research is assessed by considering the magnitude or seriousness of the harm and the probability that it will occur, whether to participants or to third parties (adapted from Glossary, TCPS).
31.	**Scholarly Review:**	Specific to this policy framework, scholarly review is the process by which objective and independent experts from relevant disciplines critically assess the quality of a research proposal by reviewing its scientific merit (i.e., design, methodology, validity, feasibility, and relevance) and often originality, to ensure it meets scholarly standards.
32.	**Standard Operating Procedures:**	Standard operating procedures (SOPs) are institutional process documents developed together by the REB and Office of Research Services to operationalize procedures for conducting research with humans (adapted from McGill University REB).

33.	**Terms of Reference:**	A formal document that outlines the a board or committee's purpose, mandate, and governance. It typically defines operational procedures, review processes, the composition, the members' roles, and accountability.
34.	**Unanticipated Issues:**	Issues that: occur during the conduct of research; may increase the level of risk to participants or have other ethical implications that may affect participants' welfare; and were not anticipated by the Principal Investigator in the research proposal submitted for research ethics review (adapted from Glossary and Article 6.15, TCPS).
35.	**Underserved:**	Groups who face systemic barriers that prevent them from accessing or receiving the same quality of services as people not facing those barriers. (adapted from Glossary: Canadian Center for Diversity and Inclusion)
36.	**Vulnerability (adjective form Vulnerable):**	A diminished ability to fully safeguard one's own interests in the context of a specific research project. This may be caused by limited decision-making capacity or limited access to social goods, such as rights, opportunities and power. Individuals or groups may experience vulnerability to different degrees and at different times, depending on their circumstances (adapted from Glossary, TCPS).

B. PROCEDURES

1. Roles and Responsibilities

The ethical conduct of research involving humans is a responsibility shared across the institution.

a. Institutional Responsibility

The University is ultimately accountable for the research carried out in its own jurisdiction or under its auspices (per Article 6.1, TCPS). For fulfilling this responsibility, the University through the Office of Associate Vice President, Research and Innovation (or their delegate) shall:

    i. establish or appoint an REB (or REBs in case of multiple boards) to review the ethical acceptability of all research involving humans conducted within its jurisdiction or under its auspices (per Article 6.1, TCPS) in accordance with TCPS;

ii. ensure the REB is provided with necessary and sufficient ongoing financial and administrative resources to fulfill their duties (per Article 6.2, TCPS);

iii. grant the REB the mandate to review the ethical acceptability of research on behalf of the university, including approving, rejecting, proposing modifications to, or terminating any proposed or ongoing research involving humans. This mandate shall apply to research conducted under the auspices or within the jurisdiction of the university, using the considerations set forth in TCPS (per Article 6.3, TCPS);

iv. authorize its REB to accept reviews undertaken by an external REB of the ethical acceptability of research. The approvals are based on cross-institutional agreements involving several REBs as outlined in TCPS (per Articles 8.1 and 8.2, TCPS);

v. ensure that the membership of the REB is designed to ensure competent and independent research ethics review;

vi. ensure that a well-functioning REB is appropriately composed and structured, according to the TCPS (per Article 6.4, TCPS). To ensure the independence of REB decision making, institutional senior administrators shall not serve on the REB;

vii. ensure that the REB has provisions for consulting ad hoc advisors in the event that it lacks the specific expertise or knowledge to review the ethical acceptability of a research proposal competently (per Article 6.5, TCPS);

viii. establish the terms of REB members to allow for continuity of the research ethics review process (per Article 6.6, TCPS);

ix. appoint a Chair for the REB who provide overall leadership for the REB and to facilitate the REB review process, based on institutional policies and procedures and TCPS (per Article 6.8, TCPS);

x. establish quorum rules for REB that meet the minimum requirements of membership representation outlined in Article 6.4 of TCPS (per Article 6.9, TCPS);

xi. take responsibility for appointment, renewal and removal of members of the REB (per Article 6.2, TCPS);

xii.   ensure that appropriate resources, training and facilities are allocated to the REB, as dictated by TCPS (per Article 6.7, TCPS);

xiii.   recommend, develop, and implement educational opportunities and develop resources for individuals conducting research involving humans, in collaboration with the REB;

xiv.   provide administrative support for the ethics review process, approvals and ongoing regulatory activities (per Article 6.2 TCPS);

xv.   ensure that processes are in place so that research involving humans is preceded by a REB approval;

xvi.   enter into any agreements with other institutions to conduct the ethics review and approval of research involving humans under the auspices of KPU (per Article 6.7, TCPS);

xvii.   establish appropriate institutional security safeguards to protect research data held at the university and participant confidentiality, train researchers and REB members on privacy best practices (per Articles 5.4, 6.2 and 6.7, TCPS, and related ORS Guidelines);

xviii. investigate allegations of non-compliance and instigate Continuing Research Ethics Review monitoring where required (per Article 6.15, TCPS); recommend additional training resources to the researcher as needed;

xix.   have an established mechanism and a procedure in place for promptly handling appeals from researchers when, after reconsideration, the REB has refused ethics approval of the research (per Article 6.19, TCPS);

xx.   facilitate ethical partnership between researchers and communities and ensure relevant training resources are available for researchers (per Chapters 9 and 10, TCPS; and related Guidance Document);

xxi.   ensure a process is in place for the review and approval of SOPs as per university policy and legal requirements;

xxii.   develop and implement conflict of interest polices including procedures to identify, eliminate, minimize or otherwise manage conflicts of interest that may affect research and compromise participants' protection (per Article 7.1 TCPS) and disclose such conflicts to REB through established conflict of interest mechanisms (per Article 7.2 TCPS); and

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xxiii. provide a framework for administrative reviews and administrative approvals (e.g. in accordance with policies, agreements, and laws) for research

b. Responsibilities of Principal Investigator

The principal investigator (PI) provides intellectual leadership to the project and the project team. The PI has the responsibility to ensure that all research is conducted responsibly by the project team.

Specifically, all PIs who plan to conduct research involving humans must:

i. comply with KPU policy frameworks relating to research;

ii. request the REB to determine whether any research involving humans that they, their research team, or the students under their direction are proposing to undertake is subject to REB review (per Articles 2.1-2.6, TCPS): the authority to determine whether or not that research is exempt from REB review or not rests solely with the REB (per REB Guidance Document for ethics exemptions);

iii. submit an ethics application with sufficient information for the REB to assess whether the proposed research complies with the TCPS and ensure that all required prior approvals are in place before commencement of activities requiring such prior approval. Specifically, REB review and approval of the ethical acceptability of research are required before recruitment, data collection involving participants, access to data, or collection of human biological materials: such requirements are also applicable to human genetic research or that involve use of human biological material (per Article 6.11 and Chapter 5 Section D, Chapter 12 TCPS; and related REB Guidance Document);

iv. conduct all REB approved research in accordance with the TCPS, relevant KPU policy frameworks, SOPs, guidance documents and other legal obligations (e.g. human rights) and commitments;

v. consider the international/legal requirement of jurisdiction outside of Canada (Chapter 1, Article 1.1 and Chapter 8, TCPS) for research involving global participants;

vi. establish and implement appropriate research data management plans according to disciplinary best practices, including procedures for the collection, use, storage, security, disclosure, and disposal of

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data (per related REB Guidance Document and Chapter 3 Section E and Chapter 5 Article 5.3 and 5.7 TCPS);

vii. ensure full disclosure and informed consent from participants about how their data will be used, through informed consent templates and research data management plan templates. (per related REB Guidance Document and ORS Guidelines);

viii. promptly report to the REB any Unanticipated Issues in accordance with TCPS (per Articles 6.13 and 6.15, TCPS; and related REB Guidance Document) including any unanticipated issue that increases the level of risk to participants or has other ethical implications that should be reported without delay;

ix. ensure ongoing research approvals are in place, including applying for Continuing Research Ethics Review of research by submitting a progress report as per required timelines and securing renewal of the existing REB approval prior to expiry of such approval (per Article 6.4, TCPS);

x. immediately notify the REB of any proposed modifications (e.g. involving recruitment, design, data collection or storage) by submitting a request for amendment (per Article 6.14 and 6.16, TCPS) while recognizing that in some types of qualitative research, for example, emergent design (per Article 10.5, TCPS), the research design evolves over time, and so adjustments to the research are to be expected and need not be reported to the REB, unless they alter the level of risk or have other ethical implications for participants (per Article 6.16, TCPS);

xi. implement amendments only after the REB has reviewed and approved them.

xii. submit a completion report to the REB once the research has concluded, in a timely manner (per Article 6.14, TCPS);

xiii. guide all research team members in conducting research responsibly and ensure that the members engaged in research complete all required training (such as the TCPS Course on Research Ethics for research involving humans) prior to commencement of work on the project (per Article 6.14, TCPS);

xiv. be aware of relevant ethical duties that govern real, potential or perceived conflicts of interest related to the consent of participants,

especially cognizant of conflict of interest that may arise from their dual roles such as a researcher and a supervisor (per Article 3.2(e) and 7.4, TCPS and and related REB Guidance Document);

xv. demonstrate the steps they have taken to engage with their communities and other considerations based on principles of community-based research outlined in TCPS and university guidelines (per Chapters 9 and 10, TCPS; and related REB Guidance Document);

xvi. demonstrate due preparation in addition to a high degree of sensitivity, ethical awareness, and adherence to guidelines such as TCPS while working with vulnerable, marginalized, equity-denied, and underserved populations (related to Article 4.7, TCPS; and related REB Guidance Document);

xvii. be informed of guidance documents from KPU and the Panel on Research Ethics for recruiting participants, the consent process, and payments to participants where required (also related Guidance Document from REB);

xviii. respectfully partner with Indigenous peoples to develop and undertake Indigenous research in accordance with Chapter 9 of TCPS and the Pulling Together: A Guide for Researchers, Hiɫ ̱kala: A guide for Indigenization of post-secondary institutions.

c. Responsibilities of Principal Investigators as Supervisors of Student Research

i. All student research must be supervised by a qualified researcher who serves as PI and accepts responsibility for overseeing the ethical conduct of the student's research (further to RCR Framework Interpretations: Appropriate supervision and training in the conduct of research related to Article 2.7 of RCR Framework, per Article 6.14, TCPS and related REB Guidance Document);

ii. Student research supervisors should act as a resource for the student when preparing an ethics application and must review the application prior to submission. They must:

1) ensure that their students have up-to-date training and competence necessary to conduct the proposed research;

2) guide students with preparing application for REB review;

3) submit or otherwise endorse the application for REB review;

     iii.   establish and implement appropriate DMPs; (per related REB Guidance Document and Chapter 3 Section E and Chapter 5 Article 5.3 and 5.7 TCPS);

     iv.   ensure that all requirements of the ethics approval are met.

d. Responsibilities of the REB

The REB ensures that KPU adheres to the TCPS as well as any applicable institutional (per REB Terms of Reference), national, and provincial requirements. To fulfill this responsibility, the REB shall:

     i.   review on behalf of KPU all proposed or ongoing research involving humans conducted under the auspices of KPU in a way that is consistent with this Policy and all applicable ethics guidelines (per Article 6.4 TCPS);

     ii.   approve, reject, propose modifications to, terminate, or suspend any proposed or Ongoing Research involving humans (per Article 6.3 TCPS) based on the ethical acceptability of the research;

     iii.   conduct Continuing Research Ethics Reviews on an annual basis at a minimum

     iv.   report the outcome of an ethical review to PI in a clear and timely manner (per Article 6.14 TCPS);

     v.   as part of the research ethics review, the REB shall review the ethical implications of the methods and design of the research and if required, conduct a scholarly review. Research that poses more than minimal risk requires scholarly review. (per related REB Guidance Document; and per Article 2.7 TCPS);

     vi.   require the protection of participants' privacy, assessing the risk of re-identification in human genetic research, and evaluating risks associated with the use of human biological materials through a proportionate and context-sensitive ethics review process (per Article 6.11, Chapter 5 and 12 TCPS, related Guidelines and SOPs);

     vii.   prepare and maintain minutes of all REB meetings and include all attendance, decisions, and dissents, and the reasons for them. REB decisions should be supported by clear references (e.g., date of decision), timelines, reasoning and limitation (per Article 6.17 TCPS);

viii. contribute to development and implementation of guidance documents, policies, and procedures for ethical research involving humans (per Article 6.12, TCPS; all online under guidelines and resources: REB SharePoint)

ix. declare actual, perceived, and potential conflicts of interest associated with all reviews and recuse oneself when a conflict of interest exists or is declared to exist by the Chair (per Article 7.3 TCPS);

x. collaborate with other REBs on the review of multi-jurisdictional research (per Article 8.1, TCPS and BC Research Ethics Review Reciprocity Agreement);

xi. take appropriate steps to ensure researchers are responsive to ethically relevant aspects of research context, for research conducted across multiple global sites (per Article 8.3 TCPS);

xii. establish, when appropriate, its own internal guidelines that do not conflict with those approved by University governance or the TCPS;

xiii. meet regularly to further its mandate (per Article 6.10, TCPS);

xiv. ensure the quorum is met during meetings as required by TCPS (per Articles 6.4 and 6.9, TCPS, and REB Terms of Reference);

xv. prepare and submit an annual report on its activities in a format and timeline provided by the Office of Associate Vice President, Research and Innovation, to that Office. Following approval from the Associate Vice President, Research and Innovation, submit it to the relevant executive and governance bodies at the University for information, as well as publish online as a public document.

xvi. engage in training periodically to ensure the REB is up-to-date on current legal and regulatory requirements, ethical standards and policies (per Article 6.7, TCPS);

xvii. promote training that encourages ethical conduct of research at KPU;

xviii. regularly review and update (preferably every year, but at least every three years) its guidance documents to meet current ethical standards and policies;

xix. collaborate with the Office of Research Services to develop and update SOPs as required;

xx.　require that all data collection, management, usage and storage procedures adhere to ethical standards (including Indigenous data sovereignty) and legal requirements, including obtaining informed consent from participants (and communities, where applicable) and implementing appropriate measures to safeguard confidentiality and privacy throughout the research process (Chapter 5, Articles 5.4, 6.2 and 6.7 TCPS; Pulling Together: A Guide for Researchers, Hiȼ̓ka̱la: A Guide for Indigenization of Post-secondary Institutions; related REB Guidance Documents and ORS Guidelines);

xxi.　review research that involves communities, based on the community-based research protocols and guidelines outlined in the TCPS (Chapter 9, TCPS and related REB Guidance Documents);

xxii.　fulfil its duty of care by advising PIs, and/or university research administration about any concerns (ethical or otherwise) identified during the review process that pose harm;

xxiii.　ensures timely response mechanisms are in place, such as for unexpected harms (per Article 6.15, TCPS) or adverse incidents (per Article 11.9, TCPS). Establish procedures for reviewing such events and determine how to respond and implement these responses as needed (also see related REB Guidance Document);

xxiv.　foster training for researchers to increase understanding of ethical conduct of research involving humans; and

xxv.　review Indigenous research in accordance with Chapter 9 of TCPS, and the Pulling Together: A Guide for Researchers, Hiȼ̓ka̱la: A Guide for Indigenization of Post-secondary Institutions.

2. **Membership of the REB**

a. The REB shall consist of at least five members as required by TCPS (per Article 6.4 TCPS). KPU shall also consider the nomination of substitute REB members so that REBs can continue to function when regular members are unable to attend due to illness or other unforeseen eventualities. The appointment of substitute members should not, however, alter the REB membership composition. Substitute members should have the appropriate knowledge, expertise, and training to contribute to the research ethics review process;

b. In addition to regular members and substitute members, the REB may consult with non-members such as Ad Hoc Advisors where it lacks the specific expertise

or knowledge to review the ethical acceptability of a research proposal competently. Ad Hoc Advisors shall not be counted toward a quorum, and they are not allowed to vote on REB decisions (per Article 6.5, TCPS);

c. Recruitment of REB members will follow an open, transparent, and inclusive competition, with a selection process that is fair, impartial, and free from any bias or discrimination, organized by the Office of Associate Vice President, Research and Innovation or their designate;

d. To ensure the independence of REB decision-making and to avoid perceived conflicts of interest, institutional senior administrators shall not serve on the REB (per Article 6.4, TCPS);

e. All members of the REB are appointed by the Associate Vice President, Research and Innovation for a continuous (without any breaks) term of up to three years, with the possibility of renewal for a further term up to three years (per Article 6.6, TCPS and REB Terms of Reference). The terms shall be arranged and membership rotated to balance the need to maintain continuity with the need to ensure diversity of opinion, and the opportunity to spread knowledge and experience gained from REB membership throughout the institution and community;

f. The Chair of the REB must be a qualified member who is responsible for ensuring that the REB review process conforms to the requirements of TCPS. The Chair provides overall leadership for the REB and facilitates the REB review process, based on institutional policy frameworks (especially those related to research) and TCPS. The Chair monitors the REB's decisions for consistency and ensure that these decisions are recorded accurately and communicated clearly to researchers in writing as soon as possible (per Article 6.8, TCPS);

g. The Chair will be appointed by the Associate Vice President, Research and Innovation following an open, transparent, and inclusive competition (open to all current REB members in good standing) based on the recommendation by a nomination committee struck by Associate Vice President, Research and Innovation (Terms of Reference for REB Chair and Vice Chair Nomination Committee; REB Terms of Reference);

h. The Chair will serve a continuing term of up to three years, renewable once on the recommendation of the nomination committee, for a maximum of two terms at a time;

i. The Vice-Chair must be a qualified member of REB whose role is to fulfill the role of the Chair when the Chair is unavailable, or there is a conflict of interest declared by the Chair (REB Terms of Reference);

j. The Vice-Chair shall be appointed by the Associate Vice President, Research and Innovation following an open, transparent, and inclusive competition (open to all current REB members in good standing) based on the recommendation of the nomination committee.

k. The Vice-Chair shall serve, a continuing term of up to three years, renewable once on the recommendation of the nomination committee (REB Terms of Reference);

l. The composition of committees to select or recommend members, chair, and vice chair of the REB shall reflect the diversity, expertise, and judgement needed to critically assess the competence of applicants applying for these various roles. The committees shall draw their membership from current or former members, chairs, or vice chairs of the REB, in addition to research services personnel supporting the REB. The selection or nomination processes shall be fair, impartial, and free from any bias or discrimination, and rely on open, transparent, and inclusive competitions; and

m. An REB member may resign or be removed in accordance with the REB Terms of Reference.

3. **Procedures for Review of New and Ongoing Research**

a. The REB will use a proportionate approach to research ethics review such that, as a preliminary step, the level of review is determined by the level of risk presented by the research (per Articles 2.7 and 2.9, TCPS; REB Terms of Reference).

    i. the lower the level of foreseeable risk to participants or their communities, the lower the level of scrutiny (delegated review); and

    ii. the higher the level of risk, the higher the level of scrutiny (Full Research Ethics Review);

b. A proportionate approach to assessing the ethical acceptability of the research, at either level of review, involves consideration of the foreseeable risks, the potential benefits and the ethical implications of the research (Chapter 1 section C, Article 2.9 and 6.12 TCPS);

c. Full REB Reviews are conducted at a REB meeting while minimal risk research can usually be reviewed by delegated REB review;

d. Delegated REB Review is used for research assigned as minimal risk. Delegated reviewers are selected from among the REB membership, with the exception of the ethics review of minimal risk student course-based research activities, which can be reviewed by the faculty or instructor delegated from the student's department, faculty, or an equivalent level (per Article 6.12, TCPS);

e. Delegated reviewers who are not members of the REB must have experience, expertise and knowledge comparable to what is expected of a REB member;

f. Ethics Approvals are issued for a period of no more than one year. Renewal is required for multi-year study.

4. Scholarly Review Process

a. Research in the humanities and social sciences posing more than minimal risk requires an independent scholarly review, which may be internal or external depending on the study's complexity (adapted from Article 2.7 TCPS; and related REB Guidance Document);

b. The appropriate type of review depends on the nature of the study and individuals are encouraged to consult with the Office of Research Services for assistance. For student thesis projects, the supervisory committee's approval is deemed to constitute sufficient scholarly review;

c. PI must detail any scholarly reviews in the university's electronic research administration system, including whether the review is ongoing or completed, and upload corresponding reports.

5. Unanticipated Issue - Incident Reporting

In conducting their approved research, should unanticipated issues arise that may increase the level of risk or have other ethical implications, researchers shall report them to REBs in a timely manner (per Articles 6.14 to 6.16, 11.6 and 11.8, TCPS and related REB Guidance Document);

a. The PI should report any unanticipated issue or event that may increase the level of risk to participants or that has other ethical implications that may affect participants' welfare;

b. PIs must complete and submit an Incident Reporting Form to the REB for the unanticipated issue as early as reasonably possible as per this procedure and guidance documents;

c. Upon receiving an Incident Reporting Form, the REB will review and may recommend changes to mitigate risks, including modifying recruitment methods, informing participants of new risks, or pausing research activities until issues are resolved and risks are adequately addressed.

6. **Course-Based Student Research (CBSR)**

   a. A CBSR application is required when an instructor seeks to supervise student research involving humans in the context of a course (per related REB Guidance Document). The research activities are supervised by the instructor, who, upon approval, is delegated by the REB to assess and monitor the ethics of student research according to the principles, guidelines, and requirements of the TCPS. Even when students collect data from peers in the same course, this is still considered CBSR and requires REB approval;

   b. The TCPS (per Article 6.12, TCPS) allow institutions to delegate ethics review of minimal risk course-based research activities with a pedagogical purpose to non-REB members at the institution's department, faculty or equivalent level. Thus, the objectives of CBSR research must be educational;

   c. If a student research project begins with approval of an REB Protocol for CBSR and later expands outside the scope of approved activities, a regular application for ethical review must be approved by the REB prior to recruitment of participants and/or collection of research data;

   d. Instructors cannot use data collected under a CBSR approval for their own research without documented consent for such use. They are responsible for storing and disposing of students' data appropriately;

   e. Instructors are eligible to complete a Course-based Research Ethics Application for students' activities and assignments under the following conditions:

      i. Within the course presentation, instructors set parameters and instructions for students as to the research skills and conditions under which students will undertake activities;

      ii. Instructors supervise and teach students about conducting one or more research activities (e.g., students practice recruiting

participants, collecting data, interpreting data, compiling the data in various formats, and reporting on findings); and

    iii.   All students complete and submit proof of completion of the required research ethics training (such as the TCPS CORE certificate) to the instructor before beginning any research activities;

f.   The course instructor is responsible for the ethical conduct of all student research activities conducted under the auspices of the course;

g.   CBSR cannot be used for capstone projects, undergraduate theses, or research linked to an instructor's or faculty member's research program. In such cases, students must be added to an existing REB approval as research assistants through an amendment process. (per Articles 2.1 and 6.12 TCPS, and related REB Guidance Document).

7. Reconsideration of REB decisions

a.   PI has the right to request, and the REB has the obligation to establish timelines to promptly conduct reconsiderations and issue the decision (per Article 6.18, TCPS);

b.   Initial reconsideration may consist of informal discussions involving the PI and the REB. If the matter is resolved through this process, the resolution will be documented in the online application system and will also be reflected in the application materials as appropriate;

c.   If informal discussions do not lead to a resolution, the PI may request a formal reconsideration in writing to the REB Chair, outlining the concerns they have with the initial REB review;

d.   The PI has the right to be heard in a meeting with the REB to discuss the issues identified; and

e.   When requesting reconsideration, the onus is on the PI to justify the grounds on which the reconsideration is requested and to indicate any alleged breaches to the established research ethics review process, or any elements of the REB decision not supported by the TCPS (per Article 6.13, TCPS) or this Policy framework;

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8. **Appeal process**

   a. If the PI is not satisfied with the outcome of the reconsideration, the PI may file a written request for an Appeal to REB decision with the Associate Vice President, Research and Innovation within 30 calendar days of the reconsideration (per Article 6.19, TCPS and related ORS Guideline), following the process outlined below:

      i. KPU shall have an agreement with another Canadian institution, whose REB shall function as an Appeal Board for the purposes outlined in this Policy;

      ii. A researcher wishing to formally Appeal a decision of the KPU REB to reject a human research ethics application or an amendment request or to rescind approval of ongoing research (the Appellant) must engage in the reconsideration process described above; Within 30 calendar days of receipt of notification of the REB's decision following its reconsideration;

      iii. The Appellant shall provide the Office of Associate Vice President, Research and Innovation with the following:

         1) the application, as submitted to the REB; and

         2) a statement of the basis of the appeal (procedural, substantive, or both) and the rationale for the appeal;

      iv. The REB Chair or designate will provide to the Office of Associate Vice President, Research, Innovation, the REB materials specified in the appeals agreement as follows;

         1) a written statement of the final decision of the REB and a written rationale for the decision

         2) copies of minutes of the meeting(s) that the REB discussed and made the decision.

         3) Copies of the materials and resources that the REB consulted in making the decision

      v. The Associate Vice President, Research and Innovation or designate shall forward all above materials to the Appeal Board;

      vi. The Appeal Board shall have the authority to review negative decisions made by an REB. In so doing, it may approve, reject or

request modifications to the research proposal (per Article 6.20 TCPS);

vii. Appeal Board decisions on behalf of the university shall be final and should be communicated in writing (in print or by electronic means) to researchers and to the REB whose decision was appealed. Recourse to judicial review may be available to the researcher (per Article 6.20, TCPS)

viii. The PI acknowledges receipt of the decision in writing to Office of Research Services within five working days of receiving the decision and provides assurance to comply with the decision (per Article 6.20, TCPS).

9. **Use of Generative Artificial Intelligence Technologies**

All members of the University community are to consult and comply with the upcoming Guideline on Enabling Responsible Use of Generative AI for Research which provides guidance on the appropriate use of generative artificial intelligence technologies across the life cycle of research activities. Of particular importance to researchers are considerations of full disclosure and informed consent from participants in use of such technologies, and full disclosure on applications and amendments submitted to the Research Ethics Board when proposing the use of such technologies as part of research projects involving humans.

C. RELATED POLICY

RS1 Research Involving Humans

Policy History	
Policy No. RS1	
Approving Jurisdiction: Board of Governors	
Administrative Responsibility: Provost and Vice President Academic	
Effective Date: TBC	

Research Involving Humans
Policy (Track Change)

A. CONTEXT AND PURPOSE

KPU's strategic goals include: to foster cultural, social and environmental sustainability through our offerings, research and operations; to expand activity, funding, intensity and impact of research, scholarship and innovation partnerships; to foster teaching excellence and expand innovation in teaching, learning and curriculum; to foster decolonization and reconciliation with Indigenous peoples; advance anti-racism initiatives across KPU; advance equity, diversity, inclusion and accessibility across KPU; ensure continuous improvement of all KPU programs and services; and to be accountable and transparent to its friends, communities, partners, and governments.

KPU is committed to the ethical advancement of knowledge through scholarly activities, including through research involving humans. The purpose of this policy is to ensure that all research involving humans carried out under KPU's auspices comply with the Agreement on the Administration of Agency Grants and Awards by Research Institutions ("Tri-Agency Agreement").

As an institutional signatory to the Tri-Agency Agreement, KPU is required to comply with its requirements set out in the Tri-Agency Framework: Responsible Conduct of Research, as amended from time to time. Specific to research involving humans, the Agreement requires the following:

"The Institution shall, for all research involving humans carried out under its auspices:
1.   comply with the Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans, as amended;

2. establish, maintain and comply with its own policy and procedures, or have a formal agreement with another institution, that conform to the requirements set out in the Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans;

3. ensure that Researchers are informed of their obligations under the Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans and provided such training as they may reasonably require;

4. ensure, through the use of financial or other controls, that the Institution's research ethics board ("REB"), or an REB designated by the Institution, has approved the research project before research activities involving humans have commenced, and that REB approval is maintained as long as activities involving humans are carried out. Where appropriate controls are in place, all Grant funds may be released prior to (or pending) REB approval."

According to the TCPS Interpretation on Governance published by Panel on Research Ethics, the Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans ("TCPS") requires that the highest governing body of the institution establish the REB (or REBs), define an appropriate reporting relationship with the REB (or REBs), and ensure that REBs have the necessary financial and administrative resources to fulfil their duties. For the highest governing body, a focus on the one that holds the highest administrative rather than academic responsibility is noted in the TCPS Interpretation on Governance. REBs are independent in their decision making and are accountable to the highest body that established them for the process of research ethics review (per Article 6.2 of TCPS).

B. SCOPE AND LIMITS

This Policy applies to all research involving:

1. human participants,
2. human biological materials derived from individuals living or deceased, and/or
3. other human data not otherwise exempted under the TCPS, that is carried out under the auspices of KPU. This includes, but is not limited to, research conducted:

    a. by KPU employees, students, or volunteers;
    b. in affiliation with KPU;
    c. using KPU equipment, space, or resources; and
    d. in collaboration with other institutions, Indigenous peoples and communities, organizations, or partners, including while under the oversight of multiple REBs.

C. STATEMENT OF POLICY PRINCIPLES

KPU requires research involving humans be conducted in accordance with the TCPS, including the following Core Principles (Chapter 1, TCPS) that underlie respect for human dignity as the minimal standard:

1. **Respect for Persons**: a recognition of the intrinsic value of human beings and the respect and consideration they are due.
2. **Concern for Welfare**: a requirement of researchers and REBs to aim to protect the welfare of participants, and, in some circumstances, to promote that welfare in view of any foreseeable risks associated with the research.
3. **Justice**: an obligation to treat people fairly and equitably.

The University recognizes that research involving Indigenous peoples requires ~~additional~~distinct considerations, as outlined in TCPS Chapter 9, and as per the BC Declaration on the Rights of Indigenous Peoples Act. ~~In addition~~Accordingly, given its strategic ~~commitment~~ goal of ~~furthering~~to decolonization and reconciliation with Indigenous peoples, KPU embraces a fourth principle as follows:

4. **Cultural Safety and Respect for Indigenous Peoples**: A commitment to recognizing and valuing the unique cultural identities, knowledge systems, and traditions of Indigenous peoples. This principle requires researchers and REBs to ensure that research involving Indigenous communities is conducted in a manner that is culturally safe, respectful, and inclusive, actively involving Indigenous peoples in the research process and addressing their specific needs and perspectives.

5.4. ~~The University recognizes that research involving Indigenous peoples requires additional considerations, as outlined in TCPS Chapter 9, and as per the BC Declaration on the Rights of Indigenous Peoples Act.~~

D. DEFINITIONS

Refer to section A of RS1 Research Involving Humans Procedure for a list of definitions in support of this policy.

E. RELATED POLICIES, REFERENCES, AND LEGISLATION

Related Policies

HR1 Conflict of Interest Policy
IM4 Confidentiality Policy
IM7 Management of Surveys
IM9 Information Security Policy
RS2 Integrity in Research and Scholarship

RS3 Indirect Costs of Research
RS4 Administration and Control of Research and Special Funds
ST2 Academic Integrity

External Standards and References

Tri-Agency Framework: Responsible Conduct of Research (RCR Framework), as updated. The current version referenced in this Policy and Procedure is the 2021 edition.

Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans (TCPS), as updated. Article and chapter references in this Policy and Procedure are with respect to the current edition which is Edition 2 (2022).

Pulling Together: A Guide for Researchers, Hiłḱala: A guide for Indigenization of post-secondary institutions. A professional learning series. Dianne Biin; Deborah Canada; John Chenoweth; and Lou-ann Neel. BC campus, Victoria, B.C.

Committee and Board Documents
REB Terms of Reference (under revision)
Terms of Reference for REB Chair and Vice Chair Nomination Committee (under development)

Legislation
University Act, RSBC 1996 c 468
Declaration on the Rights of Indigenous Peoples Act, SBC 2019 c44
Freedom of Information and Protection of Privacy Act, RSBC 1996 c 165

Agreements

1. Agreement on the Administration of Agency Grants and Awards by Research Institutions (~~"Tri-Agency Agreement"~~)
2. Memorandum of Understanding Between Kwantlen Polytechnic University and the University of the Fraser Valley Concerning Research Ethics Board Appeals ("Appeals Agreement")
3. BC Research Ethics Review Reciprocity Agreement

Strategy Documents

Kwantlen Polytechnic University Research Data Management Strategy

REB Guidiance Documents ~~from the REB~~, ORS Guidelines, and SOPs

Guidance Documents: Guidance Documents

Guidelines and SOPs from the ORS: Guidelines & SOPs from the ORS

1.	REB-GD # 1 Panel on Research Ethics Guidance on the Use of Crowdsourcing to Recruit Participants (May 2022)

2.	REB-GD # 2 Undergraduate Course-Based Student Research involving Human Participants (November 2024)

3.	REB-GD # 3 Scholarly Review Guidance Document (November 2024)

4.	REB-GD # 4 Panel on Research Ethics Interpretation: New Consent Process for De-identified Data Available for Future, Unspecified Research (April 2024)

5.	REB-GD # 5 Guidance Document on use of Data for Future Research (October 2024)

6.	REB-GD # 6 REB Guidance Document for Ethics Exemptions (February 2025)

7.	REB-GD# 7a REB Guidance Document for Scholarship of Teaching and Learning: Long Version (March 2025)

8.	REB-GD# 7b REB Guidance Document for Scholarship of Teaching and Learning: Short Version

9.	REB-GD # 8 Guidance Document on Payments to Participants (March 2025)

10.	REB-GD #TBA: Guidance Document for DMPs in Research Ethics (in progress)

11.	REB-GD #TBA: Guidance Document on Unanticipated Issues (in progress)

12.	REB-GD #TBA: Guidance Document on Research with Vulnerable Populations (planned)

13.	REB-GD #TBA: Guidance Document on Community-Based Research (in progress)

Standard Operating Procedures

14.	KPU SOP 408B: Human Genetic Research (in progress)

15.	KPU SOP 108: SOP Maintenance (in progress)

Guidelines from the Office of Research Services

16.	ORS Guidelines #1: Stewardship of Human Remains (May 2022)

17.	ORS Guidelines #2: Payments to Research Participants (draft September 2022)

18.	ORS Guidelines #3: FIPPA Compliance for Access to Personal Information (in progress)

19.	ORS Guidelines #4: Enabling Responsible Use of Generative AI in Research (in progress)

20.	ORS Guidelines # 5 Guidelines on Appeal Process (in progress)

F. RELATED PROCEDURES

RS1 Research Involving Humans Procedure

	Policy History
Policy No.	
RS1	
Approving Jurisdiction:	
Board of Governors	
Administrative Responsibility:	
Provost and Vice President Academic	
Effective Date:	
TBD	

KPU | KWANTLEN POLYTECHNIC UNIVERSITY

Research Involving Humans
Procedure (Track Change)

A. DEFINITIONS

1.	**Administrative Approvals:**	Administrative approvals refer to the other institutional approvals needed for a research project beyond ethical approval from the Research Ethics Board (REB) for research involving humans). These approvals generally follow from university policies and other legal obligations and commitments.
2.	**Amendment:**	A request submitted to the REB by researchers to modify an already approved research project proposing changes that affects the ethical acceptability of research. Amendments may involve proposed modifications to the study's protocol, procedures, consent forms, recruitment methods, study personnel, or other elements that may affect the ethical acceptability of the research.
3.	**Application or Research Ethics Application:**	A request submitted by a researcher to the REB (for ethical consideration in accordance with the TCPS) that sufficiently delineates the goals, methodology, risks, and benefits of a proposed research study involving humans.
4.	**Appeal:**	A process that allows a researcher to request a review of a REB decision when, after reconsideration, the REB has refused ethics approval of the research (adapted from Glossary, TCPS).

5.	**Appeal Board or Research Ethics Appeals Board:**	A body designated by KPU to review appeals from researchers of decisions made by a REB. This board functions as an independent, impartial body composed of individuals with the relevant expertise to assess appeals fairly. Note: At this time, KPU has an agreement with the University of the Fraser Valley whereby the REB of each university serves as the Appeal Board for appeals originating from the other university.
~~6.~~	~~Auspices:~~	~~With the protection or support of someone or something, especially an organization (from the Cambride Dictionary, https://dictionary.cambridge.org/dictionary/english/auspices)~~
~~7.~~6.	**Community-Based Research:**	A research approach that involves active participation of stakeholders, those whose lives are effected by the issue being studied, in all phases of research for the purpose of producing useful results to make positive changes (as used by Community Based Research Canada[1])
~~8.~~7.	**Continuing Research Ethics Review:**	Any review of ongoing research conducted by a REB occurring after the date of initial REB approval and continuing throughout the life of the project to ensure that all stages of a research project are ethically acceptable in accordance with the principles in the Policy (adapted from Glossary, TCPS).
~~9.~~8.	**Core Principles:**	The four core principles that together express the overarching value of respect for human dignity: Respect for Persons, Concerns for Welfare, and Justice (per Article 1.1, TCPS) as well as Cultural Safety and Respect for Indigenous Peoples.
~~10.~~9.	**Delegated REB Review:**	The level of REB review generally assigned to minimal risk research projects.

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[1] adapted from Nelson, Ochocka, Griffin & Lord, 1998, p2 "Nothing about me without me": Participatory action research with self-help/mutual aid organizations for psychiatric consumers/survivors. American Journal of Community Psychology, 26, 881-912)

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| 1.10. | **Data Management Plan(s):** | Data management plans (DMPs) are living documents that outline a project team's~~'s~~ plans for research data management (RDM) during a research project and for its long-term storage. ~~DMPs can be modified to accommodate changes throughout the course of a research project.~~ DMPs describe: |

- how data will be collected, documented, formatted, protected and preserved;

- how existing datasets will be used and what new data will be created over the course of the research project;

- whether and how data will be shared; and

- where data will be deposited.

DMPs also indicate who is responsible for managing the project's data, describe the succession plans in place should that person leave the research team, and identify the data-related roles and responsibilities of other team members where appropriate. Finally, DMPs outline ethical, legal and commercial constraints the data are subject to, and methodological considerations that support or preclude data sharing (adapted from Tri-Agency RDM policy).

| 2.11. | **Duty of Care:** | In this context, refers to the ethical and legal obligation of researchers and the institution to ensure the safety, well-being, and rights of research participants. Specifically, researchers must act with diligence, fairness, and integrity, taking all reasonable steps to prevent harm and uphold the highest standards of responsible research conduct. This duty extends across various dimensions, including physical, psychological, and informational protections (from the Office of General Counsel). |

| 3.12. | **Ethics Approval:** | An approval of an application to conduct a specified research project involving humans, granted by the REB in accordance with this policy, confirming that the proposed study adheres |

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to the ethical principles defined in the TCPS and in this policy.

4.13.	**Equity-Denied:**	Refers to individuals who are historically disadvantaged and underrepresented due to systemic inequities or biases based on race, gender, socioeconomic status, disability, sexual orientation, or other characteristics. (adapted from Glossary: Canadian Center for Diversity and Inclusion)
5.14.	**Full REB Review:**	The level of REB review assigned to above minimal risk research projects. Conducted by the full membership of the REB, it is the default requirement for the ethics review of research involving humans (adapted from Glossary, TCPS).
6.15.	**Guidance Documents:**	Developed by the REB, guidance documents are designed to support researchers (and the REB) in interpreting the TCPS and navigating research ethics considerations and related processes at KPU. They may include position statements, interpretive guidelines, or related documents.
7.16.	**Guidelines:**	Administrative documents developed by the Office of Research Services to interpret and implement the university's policies by providing practical direction**,** procedural clarity**,** and tools to help researchers, administrators, and oversight bodies in day-to-day practice. These may include process steps, timelines, and forms.
8.17.	**Human Biological Materials:**	This refers to tTissues, organs, blood, plasma, skin, serum, DNA, RNA, proteins, cells, hair, nail clippings, urine, saliva, and other body fluids. The term also includes materials related to human reproduction, including embryos, fetuses, fetal tissues and human reproductive materials (adapted from Glossary, TCPS).
9.18.	**Human Genetic Research:**	The study of genetic factors responsible for human traits and the interaction of those factors with each other, and with the environment (adapted from Glossary, TCPS).

0.19.	**Incident Reporting Form:**	A formal document from the REB for researchers to report any unanticipated incident occurring while carrying out a REB-approved study. These events may arise during or after data collection ~~due to deviation from REB-approved protocols~~, leading to a greater risk of harm (physical, psychological, economic, or social) to participants than was previously anticipated.
1.20.	**Indigenous Ppeoples:**	In Canada, the term "Indigenous peoples" refers to persons of First Nations, Inuit, or Métis descent, regardless of where they reside and whether their names appear on an official register. In Canada, a comparable term, "Aboriginal peoples" is also used in certain contexts (adapted from Glossary, TCPS).
2.21.	**Indigenous Rresearch:**	Research in any field or discipline that is conducted by, grounded in or engaged with First Nations, Inuit, Métis or other Indigenous nations, communities, societies or individuals, and their wisdom, cultures, experiences or knowledge systems, as expressed in their dynamic forms, past and present. Indigenous research can embrace the intellectual, physical, emotional and/or spiritual dimensions of knowledge in creative and interconnected relationships with people, places and the natural environment (per SSHRC definition of Indigenous research).
3.22.	**Marginalized:**	Members of society that face exclusion due to societal and systemic barriers (adapted from Glossary: Canadian Centre for Diversity and Inclusion).
4.23.	**Minimal Risk:**	Research in which the probability and magnitude of possible harms implied by participation in the research is no greater than those encountered by participants in the aspects of their everyday life that relate to the research (adapted from Glossary, TCPS).
5.24.	**Multi-Jurisdictional Research:**	Research involving multiple institutions and/or multiple REBs. It is not intended to apply to ethics review mechanisms for research involving multiple REBs within the

jurisdiction or under the auspices of a single institution (adapted from Glossary, TCPS).

6.25.	**Ongoing Research:**	Research that has received REB approval and has not yet been completed (adapted from Glossary, TCPS).
7.26.	**Participant:**	An individual whose data, biological materials, or responses to interventions, stimuli, or questions by an individual conducting research are relevant to answering the research question(s). Also referred to as a "human participant," and in other policies/guidance as "subject" or "research subject" (adapted from Glossary, TCPS).
8.27.	**Principal Investigator (PI):**	The principal investigator (PI) is the lead researcher who provides overall intellectual leadership and direction of the research and related activities. The PI may may be designated as the applicant or co-applicant on a research funding application and may be responsible for the financial and administrative aspects of the project according to their defined role. The PI must be qualified to undertake the research independently, cannot be a student, has the necessary expertise to guide members of research team, and meets the eligibility criteria for their defined role. The PI takes responsibility for the responsible conduct (including ethical conduct) of the research, and for the actions of any member of the research team at a local site (adapted from NSERC CCI program and Glossary, TCPS). Note: For student research, the qualified researcher (typically the faculty member) guiding the student(s) shall function as the PI for the purposes of this Policy.
9.28.	**Research:**	An undertaking intended to extend knowledge through a disciplined inquiry and/or systematic investigation (adapted from Glossary, TCPS).
0.29.	**Research Ethics Board (REB):**	A body of researchers, community members, and others with specific expertise (e.g., in ethics, in relevant research disciplines) established by an institution to review the ethical acceptability of all research involving humans conducted

within the institution's jurisdiction or under its auspices (adapted from Glossary, TCPS). It may also be referred to as an Human Research Ethics Board (HREB).

1.30.	**Risk:**	The possibility of the occurrence of harm. The level of foreseeable risk posed to participants by their involvement in research is assessed by considering the magnitude or seriousness of the harm and the probability that it will occur, whether to participants or to third parties (adapted from Glossary, TCPS).
2.31.	**Scholarly Review:**	Specific to this policy framework, scholarly review is the process by which objective and independent experts from relevant disciplines critically assess the quality of a research proposal by reviewing its scientific merit (i.e., design, methodology, validity, feasibility, and relevance) and often originality, to ensure it meets scholarly standards.
3.32.	**Standard Operating Procedures:**	Standard operating procedures (SOPs) are institutional process documents developed together by the REB and Office of Research Services to operationalize procedures for conducting research with humans (adapted from McGill University REB).
4.33.	**Terms of Reference:**	A formal document that outlines the a board or committee's purpose, mandate, and governance. It typically defines operational procedures, review processes, the composition, the members' roles, and accountability.
5.34.	**Unanticipated Issues:**	Issues that: occur during the conduct of research; may increase the level of risk to participants or have other ethical implications that may affect participants' welfare; and were not anticipated by the Principal Investigator in the research proposal submitted for research ethics review (adapted from Glossary and Article 6.15, TCPS).
36.	**Under the Auspices:**	Means with the protection or support of someone or something, especially an organization such as a university or a hospital (adapted from Cambridge Dictionary)

| 7.35. | **Underserved:** | Groups who face systemic barriers that prevent them from accessing or receiving the same quality of services as people not facing those barriers. (adapted from Glossary: Canadian Center for Diversity and Inclusion) |
| 8.36. | **Vulnerability (adjective form Vulnerable):** | A diminished ability to fully safeguard one's own interests in the context of a specific research project. This may be caused by limited decision-making capacity or limited access to social goods, such as rights, opportunities and power. Individuals or groups may experience vulnerability to different degrees and at different times, depending on their circumstances (adapted from Glossary, TCPS). |

B. PROCEDURES

1. **Roles and Responsibilities**

The ethical conduct of research involving humans is a responsibility shared across the institution.

   a. Institutional Responsibility

   The University is ultimately accountable for the research carried out in its own jurisdiction or under its auspices (per Article 6.1, TCPS). For fulfilling this responsibility, the University through the Office of Associate Vice President, Research and Innovation (or their delegate) shall:

   i. establish or appoint an REB (or REBs in case of multiple boards) to review the ethical acceptability of all research involving humans conducted within its jurisdiction or under its auspices (per Article 6.1, TCPS) in accordance with TCPS;

   ii. ensure the REB is provided with necessary and sufficient ongoing financial and administrative resources to fulfill their duties (per Article 6.2, TCPS);

   iii. grant the REB the mandate to review the ethical acceptability of research on behalf of the university, including approving, rejecting, proposing modifications to, or terminating any proposed or ongoing research involving humans. This mandate shall apply to research conducted under the auspices or within the jurisdiction of the university, using the considerations set forth in TCPS (per Article 6.3, TCPS);

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iv.   authorize its REB to accept reviews undertaken by an external REB of the ethical acceptability of research. The approvals are based on cross-institutional agreements involving several REBs as outlined in TCPS (per Articles 8.1 and 8.2, TCPS);

v.   ensure that the membership of the REB is designed to ensure competent and independent research ethics review;

vi.   ensure that a well-functioning REB is appropriately composed and structured, according to the TCPS (per Article 6.4, TCPS). To ensure the independence of REB decision making, institutional senior administrators shall not serve on the REB;

vii.   ensure that the REB has provisions for consulting ad hoc advisors in the event that it lacks the specific expertise or knowledge to review the ethical acceptability of a research proposal competently (per Article 6.5, TCPS);

viii.   establish the terms of REB members to allow for continuity of the research ethics review process (per Article 6.6, TCPS);

ix.   appoint a Chair for the REB who provide overall leadership for the REB and to facilitate the REB review process, based on institutional policies and procedures and TCPS (per Article 6.8, TCPS);

x.   establish quorum rules for REB that meet the minimum requirements of membership representation outlined in Article 6.4 of TCPS (per Article 6.9, TCPS);

xi.   take responsibility for appointment, renewal and removal of members of the REB (per Article 6.2, TCPS);

xii.   ensure that appropriate resources, training and facilities are allocated to the REB, as dictated by TCPS (per Article 6.7, TCPS);

xiii.   recommend, develop, and implement educational opportunities and develop resources for individuals conducting research involving humans, in collaboration with the REB;

xiv.   provide administrative support for the ethics review process, approvals and ongoing regulatory activities (per Article 6.2 TCPS);

xv.   ensure that processes are in place so that research involving humans is preceded by a REB approval;

xvi. enter into any agreements with other institutions to conduct the ethics review and approval of research involving humans under the auspices of KPU (per Article 6.7, TCPS);

xvii. establish appropriate institutional security safeguards to protect research data held at the university and participant confidentiality, train researchers and REB members on privacy best practices (per Articles 5.4, 6.2 and 6.7, TCPS, and related ORS Guidelines #3: FIPPA Compliance for Access to Personal Information);

xviii. investigate allegations of non-compliance and instigate Continuing Research Ethics Review monitoring where required (per Article 6.15, TCPS); recommend additional training resources to the researcher as needed;

xix. have an established mechanism and a procedure in place for promptly handling appeals from researchers when, after reconsideration, the REB has refused ethics approval of the research (per Article 6.19, TCPS);

xx. facilitate ethical partnership between researchers and communities and ensure relevant training resources are available for researchers (per Chapters 9 and 10, TCPS; REB-GD #TBA:and related Guidance Document on Community-Based Research);

xxi. ensure a process is in place for the review and approval of SOPs as per university policy and legal requirements;

xxii. develop and implement conflict of interest polices including procedures to identify, eliminate, minimize or otherwise manage conflicts of interest that may affect research and compromise participants' protection (per Article 7.1 TCPS) and disclose such conflicts to REB through established conflict of interest mechanisms (per Article 7.2 TCPS); and

xxiii. provide a framework for administrative reviews and administrative approvals (e.g. in accordance with policies, agreements, and laws) for research

b. Responsibilities of Principal Investigator

The principal investigator (PI) provides intellectual leadership to the project and the project team. The PI has the responsibility to ensure that all research is conducted responsibly by the project team.

Specifically, all PIs who plan to conduct research involving humans must:

i. comply with KPU policy frameworks relating to research;

ii. request the REB to determine whether any research involving humans that they, their research team, or the students under their direction are proposing to undertake is subject to REB review (per Articles 2.1-2.6, TCPS): the authority to determine whether or not that research is exempt from REB review or not rests solely with the REB (~~REB-GD # 6~~per REB Guid~~elines~~ance Document for e~~E~~thics e~~E~~xemptions);

iii. submit an ethics application with sufficient information for the REB to assess whether the proposed research complies with the TCPS and ensure that all required prior approvals are in place before commencement of activities requiring such prior approval. Specifically, REB review and approval of the ethical acceptability of research are required before recruitment, data collection involving participants, access to data, or collection of human biological materials: such requirements are also applicable to human genetic research or that involve use of human biological material (per Article 6.11 and Chapter 5 Section D, Chapter 12 TCPS; and related REB Guidance Document~~REB-GD # 4 Panel on Research Ethics Interpretation: New Consent Process for De-identified Data Available for Future, Unspecified Research~~);

iv. conduct all REB approved research in accordance with the TCPS, relevant KPU policy frameworks, SOPs, guidance documents and other legal obligations (e.g. human rights) and commitments;

v. consider the international/legal requirement of jurisdiction outside of Canada (Chapter 1, Article 1.1 and~~&~~ Chapter 8, TCPS) for research involving global participants;

vi. establish and implement appropriate research data management plans according to disciplinary best practices, including procedures for the collection, use, storage, security, disclosure, and disposal of data (~~REB-GD #5 Guidance Document on Use of Data for Future Research~~per related REB Guidance Document and Chapter 3 Section E and Chapter 5 Article 5.3 and 5.7 TCPS);

vii. ensure full disclosure and informed consent from participants about how their data will be used, through informed consent templates

and research data management plan templates. (~~REB GD #5 Guidance Document on use of Data for Future Research~~per related REB Guidance Document and~~,~~ ORS Guidelines~~#4 Guideline on Enabling Responsible use of Generative AI for Research~~);

viii.   promptly report to the REB any Unanticipated Issues in accordance with TCPS (per Articles 6.13 and 6.15, TCPS; ~~REB GD #TBA:~~and related REB Guidance Document ~~on Unanticipated Issues~~) including any unanticipated issue that increases the level of risk to participants or has other ethical implications that should be reported without delay;

ix.   ensure ongoing research approvals are in place, including applying for Continuing Research Ethics Review of research by submitting a progress report as per required timelines and securing renewal of the existing REB approval prior to expiry of such approval (per Article 6.4, TCPS);

x.   immediately notify the REB of any proposed modifications (e.g. involving recruitment, design, data collection or storage) by submitting a request for amendment (per Article 6.14 and 6.16, TCPS) while recognizing that in some types of qualitative research, for example, emergent design (per Article 10.5, TCPS), the research design evolves over time, and so adjustments to the research are to be expected and need not be reported to the REB, unless they alter the level of risk or have other ethical implications for participants (per Article 6.16, TCPS);

xi.   implement amendments only after the REB has reviewed and approved them.

xii.   submit a completion report to the REB once the research has concluded, in a timely manner (per Article 6.14, TCPS);

xiii.   guide all research team members in conducting research responsibly and ensure that the members engaged in research complete all required training (such as the TCPS Course on Research Ethics for research involving humans) prior to commencement of work on the project (per Article 6.14, TCPS);

xiv.   be aware of relevant ethical duties that govern real, potential or perceived conflicts of interest related to the consent of participants, especially cognizant of conflict of interest that may arise from their

dual roles such as a researcher and a supervisor (per Article 3.2(e) and 7.4, TCPS and ~~REB-GD# 7a~~and related REB Guidance Document ~~for Scholarship of Teaching and Learning: Long Version~~);

xv. demonstrate the steps they have taken to engage with their communities and other considerations based on principles of community-based research outlined in TCPS and university guidelines (per Chapters 9 and 10, TCPS; ~~REB-GD #TBA:~~and related REB Guidance Document ~~on Community-Based Research~~);

xvi. demonstrate due preparation in addition to a high degree of sensitivity, ethical awareness, and adherence to guidelines such as TCPS while working with vulnerable, marginalized, equity-denied, and underserved populations (related to Article 4.7, TCPS; and related REB ~~GD #TBA:~~ Guidance Document ~~on Research with Vulnerable Populations~~);

xvii. be informed of guidance documents from KPU and the Panel on Research Ethics for recruiting participants, the consent process, and payments to participants where required (~~REB-GD #8~~also related Guidance Document from REB ~~For Payment to Participants~~);

xviii. respectfully partner with Indigenous peoples to develop and undertake Indigenous research in accordance with Chapter 9 of TCPS and the Pulling Together: A Guide for Researchers, Hiɫk̓ala: A guide for Indigenization of post-secondary institutions.

c. Responsibilities of Principal Investigators as Supervisors of Student Research

i. All student research must be supervised by a qualified researcher who serves as PI and accepts responsibility for overseeing the ethical conduct of the student's research (further to RCR Framework Interpretations: Appropriate supervision and training in the conduct of research related to Article 2.7 of RCR Framework, per Article 6.14, TCPS and related REB Guidance Document~~REB-GD # 2 Undergraduate Course-Based Student Research Involving Human Participants~~);

ii. Student research supervisors should act as a resource for the student when preparing an ethics application and must review the application prior to submission. They must:

1) ensure that their students have up-to-date training and competence necessary to conduct the proposed research;

2) guide students with preparing application for REB review;

3) submit or otherwise endorse the application for REB review;

 iii. establish and implement appropriate DMPs; (per related REB ~~GD #5~~ Guidance Document ~~on Use of Data for Future Research~~ and Chapter 3 Section E and Chapter 5 Article 5.3 and 5.7 TCPS);

 iv. ensure that all requirements of the ethics approval are met.

d. Responsibilities of the REB

The REB ensures that KPU adheres to the TCPS as well as any applicable institutional (per REB Terms of Reference), national, and provincial requirements. To fulfill this responsibility, the REB shall:

 i. review on behalf of KPU all proposed or ongoing research involving humans conducted under the auspices of KPU in a way that is consistent with this Policy and all applicable ethics guidelines (per Article 6.4 TCPS);

 ii. approve, reject, propose modifications to, terminate, or suspend any proposed or Ongoing Research involving humans (per Article 6.3 TCPS) based on the ethical acceptability of the research;

 iii. conduct Continuing Research Ethics Reviews on an annual basis at a minimum

 iv. report the outcome of an ethical review to PI in a clear and timely manner (per Article 6.14 TCPS);

 v. as part of the research ethics review, the REB shall review the ethical implications of the methods and design of the research and if required, conduct a scholarly review. Research that poses more than minimal risk requires scholarly review. (per related REB ~~GD # 3 Scholarly Review~~ Guidance Document; and per Article 2.7 TCPS);

 vi. require the protection of participants' privacy, assessing the risk of re-identification in human genetic research, and evaluating risks associated with the use of human biological materials through a proportionate and context-sensitive ethics review process (per Article 6.11, Chapter 5 and 12 TCPS, ~~ORS~~ related Guidelines and #1 ~~Guideline: Stewardship of Human Remains and KPU~~ SOPs) ~~408B;~~: ~~Human Genetic Research, ORS Guidelines #4: FIPPA Compliance for Access to Personal Information;~~

vii. prepare and maintain minutes of all REB meetings and include all attendance, decisions, and dissents, and the reasons for them. REB decisions should be supported by clear references (e.g., date of decision), timelines, reasoning and limitation (per Article 6.17 TCPS);

viii. contribute to development and implementation of guidance documents, policies, and procedures for ethical research involving humans (per Article 6.12, TCPS; all online under guidelines and resources: REB SharePoint)

ix. declare actual, perceived, and potential conflicts of interest associated with all reviews and recuse oneself when a conflict of interest exists or is declared to exist by the Chair (per Article 7.3 TCPS);

x. collaborate with other REBs on the review of multi-jurisdictional research (per Article 8.1, TCPS and BC Research Ethics Review Reciprocity Agreement);

xi. take appropriate steps to ensure researchers are responsive to ethically relevant aspects of research context, for research conducted across multiple global sites (per Article 8.3 TCPS);

xii. establish, when appropriate, its own internal guidelines that do not conflict with those approved by University governance or the TCPS;

xiii. meet regularly to further its mandate (per Article 6.10, TCPS);

xiv. ensure the quorum is met during meetings as required by TCPS (per Articles 6.4 and 6.9, TCPS, and REB Terms of Reference);

xv. prepare and submit an annual report on its activities in a format and timeline provided by the Office of Associate Vice President, Research and Innovation, to that Office. Following approval from the Associate Vice President, Research and Innovation, submit it to the relevant executive and governance bodies at the University for information, as well as publish online as a public document.

xvi. engage in training periodically to ensure the REB is up-to-date on current legal and regulatory requirements, ethical standards and policies (per Article 6.7, TCPS);

xvii. promote training that encourages ethical conduct of research at KPU;

xviii.   regularly review and update (preferably every year, but at least every three years) its guidance documents to meet current ethical standards and policies;

xix.   collaborate with the Office of Research Services to develop and update SOPs as required;

xx.   require that all data collection, management, usage and storage procedures adhere to ethical standards (including Indigenous data sovereignty) and legal requirements, including obtaining informed consent from participants (and communities, where applicable) and implementing appropriate measures to safeguard confidentiality and privacy throughout the research process (Chapter 5, Articles 5.4, 6.2 and 6.7 TCPS; REB GD #TBA: Guidelines for DMPs in Research Ethics; Pulling Together: A Guide for Researchers, Hiłk̓ala: A Guide for Indigenization of Post-secondary Institutions; related REB Guidance Documents and, ORS Guidelines #4: Enabling Responsible Use of Generative AI in Research);

xxi.   review research that involves communities, based on the community-based research protocols and guidelines outlined in the TCPS (Chapter 9, TCPS and related REB GD #TBA Guidance Documents on Community-based Research);

xxii.   fulfil its duty of care by advising PIs, and/or university research administration about any concerns (ethical or otherwise) identified during the review process that pose harm;

xxiii.   ensures timely response mechanisms are in place, such as for unexpected harms (per Article 6.15, TCPS) or adverse incidents (per Article 11.9, TCPS). Establish procedures for reviewing such events and determine how to respond and implement these responses as needed (also see related REB GD #TBA: Guidance Document on Unanticipated Issues);

xxiv.   foster training for researchers to increase understanding of ethical conduct of research involving humans; and

xxv.   review Indigenous research in accordance with Chapter 9 of TCPS, and the Pulling Together: A Guide for Researchers, Hiłk̓ala: A Guide for Indigenization of Post-secondary Institutions.

2. Membership of the REB

a. The REB shall consist of at least five members as required by TCPS (per Article 6.4 TCPS). KPU shall also consider the nomination of substitute REB members so that REBs can continue to function when regular members are unable to attend due to illness or other unforeseen eventualities. The appointment of substitute members should not, however, alter the REB membership composition. Substitute members should have the appropriate knowledge, expertise, and training to contribute to the research ethics review process;

b. In addition to regular members and substitute members, the REB may consult with non-members such as Ad Hoc Advisors where it lacks the specific expertise or knowledge to review the ethical acceptability of a research proposal competently. Ad Hoc Advisors shall not be counted toward a quorum, and they are not allowed to vote on REB decisions (per Article 6.5, TCPS);

c. Recruitment of REB members will follow an open, transparent, and inclusive competition, with a selection process that is fair, impartial, and free from any bias or discrimination, organized by the Office of Associate Vice President, Research and Innovation or their designate;

d. To ensure the independence of REB decision-making and to avoid perceived conflicts of interest, institutional senior administrators shall not serve on the REB (per Article 6.4, TCPS);

e. All members of the REB are appointed by the Associate Vice President, Research and Innovation for a continuous (without any breaks) term of up to three years, with the possibility of renewal for a further term up to three years (per Article 6.6, TCPS and REB Terms of Reference). The terms shall be arranged and membership rotated to balance the need to maintain continuity with the need to ensure diversity of opinion, and the opportunity to spread knowledge and experience gained from REB membership throughout the institution and community;

f. The Chair of the REB must be a qualified member who is responsible for ensuring that the REB review process conforms to the requirements of TCPS. The Chair provides overall leadership for the REB and facilitates the REB review process, based on institutional policy frameworks (especially those related to research) and TCPS. The Chair monitors the REB's decisions for consistency and ensure that these decisions are recorded accurately and communicated clearly to researchers in writing as soon as possible (per Article 6.8, TCPS);

g. The Chair will be appointed by the Associate Vice President, Research and Innovation following an open, transparent, and inclusive competition (open to all current REB members in good standing) based on the recommendation by a nomination committee struck by Associate Vice President, Research and Innovation (Terms of Reference for REB Chair and Vice Chair Nomination Committee; REB Terms of Reference);

h. The Chair will serve a continuing term of up to three years, renewable once on the recommendation of the nomination committee, for a maximum of two terms at a time;

i. The Vice-Chair must be a qualified member of REB whose role is to fulfill the role of the Chair when the Chair is unavailable, or there is a conflict of interest declared by the Chair (REB Terms of Reference);

j. The Vice-Chair shall be appointed by the Associate Vice President, Research and Innovation following an open, transparent, and inclusive competition (open to all current REB members in good standing) based on the recommendation of the nomination committee.

k. The Vice-Chair shall serve, a continuing term of up to three years, renewable once on the recommendation of the nomination committee (REB Terms of Reference);

k.l. The composition of committees to select or recommend members, chair, and vice chair of the REB shall reflect the diversity, expertise, and judgement needed to critically assess the competence of applicants applying for these various roles. The committees shall draw their membership from current or former members, chairs, or vice chairs of the REB, in addition to research services personnel supporting the REB. The selection or nomination processes shall be fair, impartial, and free from any bias or discrimination, and rely on open, transparent, and inclusive competitions; and

l.m. An REB member may resign or be removed in accordance with the REB Terms of Reference.

3. **Procedures for Rreview of Nnew and Oongoing Rresearch**

a. The REB will use a proportionate approach to research ethics review such that, as a preliminary step, the level of review is determined by the level of risk

presented by the research (per Article~~s~~ 2.7 and~~&~~ 2.9, TCPS; REB Terms of Reference).

    i.   the lower the level of foreseeable risk to participants or their communities, the lower the level of scrutiny (delegated review); and

    ii.   the higher the level of risk, the higher the level of scrutiny (Full Research Ethics Review);

b. A proportionate approach to assessing the ethical acceptability of the research, at either level of review, involves consideration of the foreseeable risks, the potential benefits and the ethical implications of the research (Chapter 1 section C, Article 2.9 and 6.12 TCPS);

c. Full REB Reviews are conducted at a REB meeting while minimal risk research can usually be reviewed by delegated REB review;

d. Delegated REB Review is used for research assigned as minimal risk. Delegated reviewers are selected from among the REB membership, with the exception of the ethics review of minimal risk student course-based research activities, which can be reviewed by the faculty or instructor delegated from the student's department, faculty, or an equivalent level (per Article 6.12, TCPS);

e. Delegated reviewers who are not members of the REB must have experience, expertise and knowledge comparable to what is expected of a REB member;

f. Ethics Approvals are issued for a period of no more than one year. Renewal is required for multi-year study.

4. Scholarly Review Process

a. Research in the humanities and social sciences posing more than minimal risk requires an independent scholarly review, which may be internal or external depending on the study's complexity (adapted from Article 2.7 TCPS; ~~REB GD # 3 Scholarly Review~~ and related REB Guidance Doc~~u~~ment);

b. The appropriate type of review depends on the nature of the study and individuals are encouraged to consult with the Office of Research Services for assistance. For student thesis projects, the supervisory committee's approval is deemed to constitute sufficient scholarly review;

c. PI must detail any scholarly reviews in the university's electronic research administration system, including whether the review is ongoing or completed, and upload corresponding reports.

5. **Unanticipated Issue - Incident R~r~eporting**

In conducting their approved research, should unanticipated issues arise that may increase the level of risk or have other ethical implications, researchers shall report them to REBs in a timely manner (per Articles 6.14 to 6.16, 11.6 and 11.8, TCPS and related REB ~GD # TBA:~ Guidance Document ~on Unanticipated Issues~);

a. The PI should report any unanticipated issue or event that may increase the level of risk to participants or that has other ethical implications that may affect participants' welfare;

b. PIs must complete and submit an Incident Reporting Form to the REB for the unanticipated issue as early as reasonably possible as per this procedure and guidance documents;

c. Upon receiving an Incident Reporting Form, the REB will review and may recommend changes to mitigate risks, including modifying recruitment methods, informing participants of new risks, or pausing research activities until issues are resolved and risks are adequately addressed.

6. **Course-Based Student Research (CBSR)**

a. A CBSR application is required when an instructor seeks to supervise student research involving humans in the context of a course (per related REB ~GD # 2 REB Undergraduate Course-Based Student Research involving Human Participants~Guidance Document). The research activities are supervised by the instructor, who, upon approval, is delegated by the REB to assess and monitor the ethics of student research according to the principles, guidelines, and requirements of the TCPS. Even when students collect data from peers in the same course, this is still considered CBSR and requires REB approval;

b. The TCPS (per Article 6.12, TCPS) allow institutions to delegate ethics review of minimal risk course-based research activities with a pedagogical purpose to non-REB members at the institution's department, faculty or equivalent level.~"~ Thus, the objectives of CBSR research must be educational;

c. If a student research project begins with approval of an REB Protocol for CBSR and later expands outside the scope of approved activities, a regular application for ethical review must be approved by the REB prior to recruitment of participants and/or collection of research data;

d. Instructors cannot use data collected under a CBSR approval for their own research without documented consent for such use. They are responsible for storing and disposing of students' data appropriately;

e. Instructors are eligible to complete a Course-based Research Ethics Application for students' activities and assignments under the following conditions:

  i. Within the course presentation, instructors set parameters and instructions for students as to the research skills and conditions under which students will undertake activities;

  ii. Instructors supervise and teach students about conducting one or more research activities (e.g., students practice recruiting participants, collecting data, interpreting data, compiling the data in various formats, and reporting on findings); and

  iii. All students complete and submit proof of completion of the required research ethics training (such as the TCPS CORE certificate) to the instructor before beginning any research activities;

f. The course instructor is responsible for the ethical conduct of all student research activities conducted under the auspices of the course;

g. CBSR cannot be used for capstone projects, undergraduate theses, or research linked to an instructor's or faculty member's research program. In such cases, students must be added to an existing REB approval as research assistants through an amendment process. (per Articles 2.1 and 6.12 TCPS, and related REB Guidance Document GD-# 2 Undergraduate Course-Based Student Research Involving Human Participants).

7. **Reconsideration of REB decisions**

a. PI has the right to request, and the REB has the obligation to establish timelines to promptly conduct reconsiderations and issue the decision (per Article 6.18, TCPS);

b. Initial reconsideration may consist of informal discussions involving the PI and the REB. If the matter is resolved through this process, the resolution will be

documented in the online application system and will also be reflected in the application materials as appropriate;

c. If informal discussions do not lead to a resolution, the PI may request a formal reconsideration in writing to the REB Chair, outlining the concerns they have with the initial REB review;

d. The PI has the right to be heard in a meeting with the REB to discuss the issues identified; and

e. When requesting reconsideration, the onus is on the PI to justify the grounds on which the reconsideration is requested and to indicate any alleged breaches to the established research ethics review process, or any elements of the REB decision not supported by the TCPS (per Article 6.13, TCPS) or this Policy framework;

8. Appeal process

a. If the PI is not satisfied with the outcome of the reconsideration, the PI may file a written request for an Appeal to REB decision with the Associate Vice President, Research and Innovation within 30 calendar days of the reconsideration (per Article 6.19, TCPS and related ~~# 5~~ ORS Guideline ~~Guidelines on Appeal Process~~), following the process outlined below:

   i. KPU shall have an agreement with another Canadian institution, whose REB shall function as an Appeal Board for the purposes outlined in this Policy;

   ii. A researcher wishing to formally Appeal a decision of the KPU REB to reject a human research ethics application or an amendment request or to rescind approval of ongoing research (the Appellant) must engage in the reconsideration process described above; Within 30 calendar days of receipt of notification of the REB's decision following its reconsideration;

   iii. The Appellant shall provide the Office of Associate Vice President, Research and Innovation with the following:

      1) the application, as submitted to the REB; and

      2) a statement of the basis of the appeal (procedural, substantive, or both) and the rationale for the appeal;

<ol type="i" start="4">
The REB Chair or designate will provide to the Office of Associate Vice President, Research, Innovation, the REB materials specified in the appeals agreement as follows;

<ol type="1">
a written statement of the final decision of the REB and a written rationale for the decision
copies of minutes of the meeting(s) that the REB discussed and made the decision.
Copies of the materials and resources that the REB consulted in making the decision

The Associate Vice President, Research and Innovation or designate shall forward all above materials to the Appeal Board;
The Appeal Board shall have the authority to review negative decisions made by an REB. In so doing, it may approve, reject or request modifications to the research proposal (per Article 6.20 TCPS);
Appeal Board decisions on behalf of the university shall be final and should be communicated in writing (in print or by electronic means) to researchers and to the REB whose decision was appealed. Recourse to judicial review may be available to the researcher (per Article 6.20, TCPS)
The PI acknowledges receipt of the decision in writing to Office of Research Services within five working days of receiving the decision and provides assurance to comply with the decision (per Article 6.20, TCPS).

9. **Use of Generative Artificial Intelligence Technologies**

All members of the University community are to consult and comply with the upcoming Guideline on Enabling Responsible Use of Generative AI for Research which provides guidance on the appropriate use of generative artificial intelligence technologies across the life cycle of research activities. Of particular importance to researchers are considerations of full disclosure and informed consent from participants in use of such technologies, and full disclosure on applications and amendments submitted to the Research Ethics Board when proposing the use of such technologies as part of research projects involving humans.

C. RELATED POLICY

Policy RS1 Research Involving Humans

KPU POLICY BLOG

[PHASE TWO POSTING] RS1 RESEARCH INVOLVING HUMANS (AMENDMENT)

This Phase Two Posting is open for feedback until 11:59 p.m. Pacific time on June 26, 2025. Please note that due to the announced server upgrade, KPU's WordPress sites, including the KPU Policy Blog, will be viewable only from 8 a.m. to 6 p.m. Pacific time on June 17, 2025. During the server upgrade period, please email policy@kpu.ca your comments on the drafts.

Policy and Procedure RS1 Research Involving Human Participants is being proposed for amendment, with a proposed new policy name "Research Involving Humans."

Background

The RS1 Policy Research Involving Human Participants (effective date April 10, 2012) and related Procedure needed a comprehensive revision as they are dated. Since the implementation of RS1 in 2012, there have been several changes that necessitate this revision, including:

- The current policy is based on the Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans (TCPS) 2nd Edition (2010) which has since been replaced by the 2022 version.
- KPU has witnessed a clinical research project through the Faculty of Health, and there are plans to grow health research through the Traditional Chinese Medicine program.
- KPU is engaged in multi-jurisdictional research ethics harmonization through the Health Research BC harmonization initiative.
- KPU needs policy guidelines around clinical reviews to ensure it fulfills its obligations as part of the Health Research BC harmonization initiative.
- The Research Ethics Board (REB) has identified limitations of existing policy and procedures (e.g. in matters such as handling complaints, member transitions, appeals, data management, and emerging digital technologies such as generative artificial intelligence).
- Genomic and metabolomic research are now undertaken at KPU.
- There is the importance of incorporating sound ethical practices for working with **Indigenous Peoples** and various **vulnerable or marginalized communities**.

Summary of Main Points

- Major changes made to RS1 include:
  - updating the policy and procedure as per TCPS 2 (2022) and related TCPS interpretations from the Panel on Research Ethics;
  - updating the policy jurisdiction and title in accordance with TCPS;
  - incorporating references to Generative AI;
  - adding a fourth core principle (exceeding the TCPS requirements) to create space for Indigenous research;
  - providing clarity on the roles and responsibilities of the university, research administration, REB, and the researchers;

SEARCH

Search …

CONTACT US

We welcome your ideas and questions about the KPU Policy Blog via the webform below. You can also send us an email at policy@kpu.ca.

Contact the PAA Team

Let us know any difficulties you have when you use the website. Do you find it difficult to find a posting? Do you have suggestions for the Policy Blog? Do you want to talk to us about any other topics? Feel free to let us know.

Submit your query here!

SUBMIT

You can find more information at:

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- creating provisions for research data management plans and human genomics research;
- reflecting considerations for diversity, equity, and inclusion through the policy documents and guidelines;
- consideration for community-based research, including those involving equity-denied, marginalized, underserved, and vulnerable populations;
- update to key review processes for new and ongoing research, such as scholarly review and students' course-based research;
- clarifying and streamlining incident reporting and appeals process; and
- developing leadership capacity on the REB through the role of a Vice Chair.

Consultation

From September 23 to October 17, 2022, a **Phase One Rationale (PDF)** for RS1 Research Involving Humans was posted on **the KPU Policy Blog** to invite the University community to opt in for consultation.

The following members/groups of the university community were consulted for feedback during the policy development process:

- Finance
- Melissa Cuthill, Research Data Management
- Legal
- Privacy
- Organizational Risk
- Labour Relations
- Office of Equity and Inclusive Communities
- AVP, Indigenous Leadership
- Office of Accessibility
- Research Ethics Board
- Arts Research Advisor
- Senate Standing Committee on Research
- Senate Standing Committee on Policy
- Wilson School of Design
- Faculty of Arts
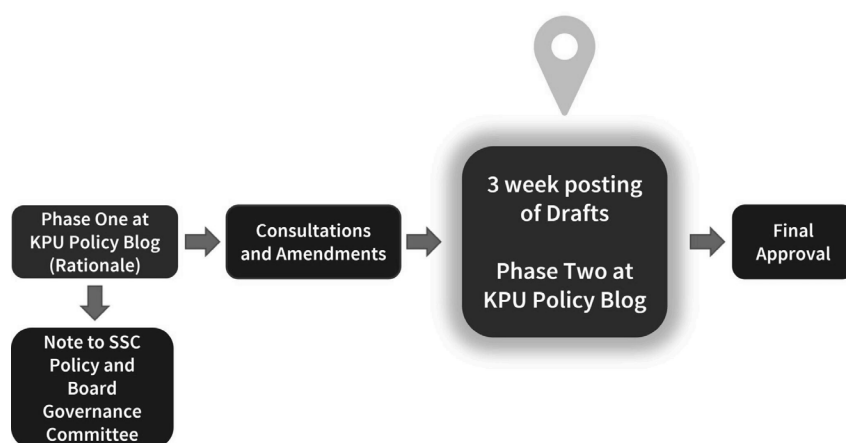
Draft for Feedback – Phase Two Posting

The Policy Developers conducted a Phase One Posting, where requests for consultation were collected. The Policy Developers then conducted thorough consultations and reviewed and considered all feedback and suggestions received to finalize the draft Policy and Procedure.

The draft Policy and Procedure, linked below, is now available for feedback from the University community for a three-week Phase Two Posting period, before going through the governance process for final approval. The Policy Developers will review and respond to all comments on the Blog after the posting period is complete.

Policy and Academic Affairs SharePoint

GV2 STEPS EXPLAINED

Phase One (3 weeks): A rationale document is posted. KPU Employees and Students can comment on the post and request to be included in consultations during the policy development.

Consultation: Policy Developers consult with mandatory, identified and opted-in consultees.

(List of Policies and Procedures at Consultation Stage)

Phase Two (3 weeks): A set of drafts are posted for review and feedback (for new/revised Policy and Procedure only).

RECENT POSTS

[Phase Two Posting] BP4 Campus Planning (Amendment) September 3, 2025

[Phase One Posting] SR13 Closed Circuit Video Equipment (Procedure Amendment) June 10, 2025

[Phase Two Posting] RS1 Research Involving Humans (Amendment) June 6, 2025

[Phase Two Posting] SR12 Emergency Planning (Amendment) June 6, 2025

[Phase Two Posting] SR2 Threat Assessment Team (TAT) (New) June 6, 2025

CATEGORIES

Administration

Board

New Policy/Procedure

OPEN

Phase One Posting

Phase Two Posting

Policy Amendment

Policy/Procedure Elimination

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1. **RS1 Draft Policy (pdf)**
2. **RS1 Draft Procedure (pdf)**

Comments and feedback are welcomed on this post until 11:59 p.m. Pacific time on June 26, 2025. Please note that due to the announced server upgrade, KPU's WordPress sites, including the KPU Policy Blog, will be viewable only from 8 a.m. to 6 p.m. Pacific time on June 17, 2025. During the server upgrade period, please email policy@kpu.ca your comments on the drafts.

Policy Developer

Dr. Deepak Gupta, AVP Research and Innovation

Posted in Board, Phase Two Posting, Policy Amendment, Procedure Amendment and tagged Academic, REB, Research, Research Ethics on June 6, 2025 by Policy and Academic Affairs. › Edit

← [PHASE ONE POSTING] EI2 TRANS INCLUSION (NEW)

[PHASE ONE POSTING] SR13 CLOSED CIRCUIT VIDEO EQUIPMENT (PROCEDURE AMENDMENT) →

8 COMMENTS

Julia Murphy
June 26, 2025 at 2:09 pm › Edit

Thank you, Dr. Gupta, for your response to Dr. Orban's and my questions.

The relationship between this revised policy, the university's strategic goals, and TCPS2, especially with regards to research involving Indigenous Peoples, is still not clear to me.

In my earlier posting I inquired, "In Part C of the Policy, it is unclear to me how principle 4 relates to TCPS2 Chapter 9 mentioned below it. Could a research project involving Indigenous Peoples meet all requirements of TCPS2 but be found not to meet Core Principle 4?"

To elaborate on this concern, I find the wording of the statement that follows the fourth principle unclear, specifically the term "additional considerations." Are these additional to those in the TCPS2? As an editorial suggestion to address this, the statement following principle 4 could be placed to precede the principle. Is it necessary to restate KPU's commitment to decolonization and reconciliation on page 3, when this is clearly stated on page 1 as one of the university's strategic goals? I suggest that these two small changes would clarify that nothing beyond what is in the TCPS2 is required, if this is indeed the case.

As a former member of the REB (2013–2017), as a cultural anthropologist who teaches courses about Indigenous Peoples in Canada and Latin America, and as a researcher whose work with Indigenous Peoples has been approved by the REB, in my opinion Chapter 9 of the TCPS2 is rigorous and very well-developed to ensure the fourth principle is integral to the consideration of research projects involving Indigenous Peoples.

I support KPU's commitment to decolonization and reconciliation but caution that these two terms are not understood in the same way in all Indigenous communities, nor are they in all quarters of the university.

For example, I have been challenged in the classroom for assigning sections of the report of the Truth and Reconciliation Commission on the basis that the TRC was a project to extend state power over Indigenous Peoples. I was told that discussing the TRC was therefore "colonialist" and counter to "true decolonization." A faculty colleague, for

RECENT COMMENTS

Josephine Chan on [Phase Two Posting] RS1 Research Involving Humans (Amendment)

Julia Murphy on [Phase Two Posting] RS1 Research Involving Humans (Amendment)

Taranum Sultana on [Phase Two Posting] RS1 Research Involving Humans (Amendment)

Taranum Sultana on [Phase Two Posting] RS1 Research Involving Humans (Amendment)

Josephine Chan on [Phase Two Posting] RS1 Research Involving Humans (Amendment)

ARCHIVES

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similar reasons – and exercising his academic freedom – argued that indigenization efforts in our department should not use the term "reconciliation." How would the REB handle such divergent points of view if "decolonization and reconciliation" were to be concepts applied in research ethics review?

Thank you.

Josephine Chan
June 30, 2025 at 6:22 pm › Edit

Posted on behalf of Dr. Deepak Gupta:

Dear Dr. Murphy, thank you very much for this feedback. I believe we are aligned on the goals for decolonization and reconciliation as it relates to human research ethics. This is a journey for both researchers and research administrators at KPU. In recent years, the REB has undertaken professional development on Indigenous research. Some institutions in Canada have gone beyond and created distinct Indigenous research ethics boards.

The TCPS has been regularly updated with a broad pan-Canadian perspective. Specific to Indigenous research, this broad perspective needs to be augmented with local and regional perspectives from Indigenous communities in this area (especially given many Nations that have not ceded sovereignty via treaties or otherwise). BC is one province that adopted UNDRIP (United Nations Declaration on the Rights of Indigenous Peoples) into legislation. While the jurisprudence evolves (see https://www.oktlaw.com/undrip-is-now-part-of-canadas-domestic-positive-law-what-does-this-mean/), there is a growing recognition of Indigenous rights and Indigenous sovereignty in BC. The addition of Core Principle 4 also advances this reconciliation. A meticulously conceived research project that meets or exceeds the requirements of TCPS Chapter 9 should also meet Core Principle 4.

Some questions from the comment are hypothetical and can best be answered/tested in the context of an actual application before the REB. The editorial suggestion to relocate a sentence is excellent and has been adopted.

Julia Murphy
June 12, 2025 at 12:55 pm › Edit

I would like to reiterate Levante's question concerning "how "values-based commitments intersect with academic freedom and methodological diversity." Neither RS1 Policy nor Procedures mentions academic freedom.

In Part C of the Policy, it is unclear to me how Core Principle 4 relates to TCPS2 Chapter 9 mentioned below it. Could a research project involving Indigenous peoples in Canada meet all requirements of TCPS2 but be found not to meet Core Principle 4?

Julia Murphy
June 19, 2025 at 11:57 am › Edit

Can I expect a response to my feedback before the end of this consultation period? Thank you.

Josephine Chan
June 19, 2025 at 4:07 pm › Edit

Hi Julia, thank you for your comment. The Policy Developer will review your feedback and provide a response on this post.

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Regards,
Josephine
On behalf of Policy and Academic Affairs

Taranum Sultana
June 23, 2025 at 5:02 pm › Edit

On behalf of Dr. Deepak Gupta
Please also see the response to Levente Orban below. In addition, it is clarified that Core Principle 4 flows from Core Principle 1 (Respect for Persons) and from TCPS Chapter 9.

In general, the framework for human research ethics has arisen over the decades in response to harms done to Indigenous Peoples, as well as various equity–denied populations in the name of research. So, the references to equity, diversity, inclusion, reconciliation, and community engagement continue in the spirit of recognizing that harms continue to happen (be it in the name of research or not) in Canada and around the world today.

Levente Orban
June 6, 2025 at 10:31 pm › Edit

The revised RS1 policy and procedures clearly reflect KPU's institutional priorities, and the enhanced emphasis on reconciliation, equity, and community engagement aligns with broader national frameworks. That said, I would welcome further clarity on how these values–based commitments intersect with academic freedom and methodological diversity, particularly in disciplines or research designs where such frameworks may not be centrally applicable. Ensuring that the REB maintains its role as an impartial ethics reviewer—not a values compliance board—will be crucial to preserving research integrity, especially for exploratory or critical work.

Taranum Sultana
June 23, 2025 at 5:01 pm › Edit

On behalf of Dr. Deepak Gupta
The policy document reflects the university's strategic goals from Vision 2026 to provide broader context and purpose. These strategic goals were developed by engaging with the university community. The university's aspirational goals do not impinge upon academic freedom and responsibility enshrined both in the faculty collective agreement as well as in a dedicated academic policy (KPU Policy AC8). Researchers engage in critical enquiry and scholarly discourse as they always have. Researchers are obligated to conduct their research responsibly, which includes compliance with existing laws (e.g., human rights) and institutional policies.
The various references to reconciliation, equity, and community engagement are meant to inform and sensitize research practices, not restrict valid lines of inquiry or impose uniform methodologies. The procedure document refers to roles and responsibilities of the university administration, researchers, and the research ethics board (REB). The REB continues to be a human research ethics reviewer, not a values compliance board.

COMMENTS ARE CLOSED.

BOARD OF GOVERNORS - REGULAR MEETING

Agenda Number: *5.3*
Meeting Date: *November 26, 2025*
Presenter(s): *N/A*

AGENDA TITLE: OPPORTUNITY TO OPT IN: PHASE ONE POSTING – SR10 INTERNATIONAL TRAVEL AND SECURITY – POLICY AND PROCEDURE (AMENDMENT)

ACTION REQUESTED: Information

RECOMMENDED RESOLUTION

N/A

COMMITTEE REPORT

For Secretariat Use Only

Context and Background

3-week Phase One Posting: Background

A rationale for the policy/procedure development, proposed scope and content, and a list of proposed key parties for consultation, will be posted on the KPU Policy Blog for a 3-week period. An information note regarding the proposed policy/procedure development is sent to both the Senate Standing Committee on Policy and Board Governance Committee where both committees may request that additional key parties be added to the consultation list. During this phase, KPU employees and students can comment on the Policy Blog in order to request to be consulted during the policy development process.

Phase One Posting @ KPU Policy Blog

The Phase One Rationale document for SR10 International Travel and Security is posted on the KPU Policy Blog for a 3-week Phase One Posting from October 21 to November 10 at 11:59pm PST.

SR10 International Travel and Security Phase One Posting

Policy Developers

Carole St. Laurent, AVP International

Andy Sidhu, Director, Risk and Security

Key Messages

1. During the Phase One Posting period, the Committee can request to be included in the consultation during the policy development process. It can also request that additional group(s) or individuals be added to the proposed consultation list in the Rationale document.

2. The Rationale document is posted on the KPU Policy Blog for the Phase One Posting from October 21 to November 10 at 11:59pm PST (3 weeks), where KPU employees and students can request to be included in consultations during the policy development process.

3. KPU Policy Blog link for Phase One: SR10 International Travel and Security Phase One Posting

Resource Requirements

N/A

Implications/Risks

N/A

Consultations

N/A

Attachments

1. Rationale – Phase One Posting: SR10 International Travel And Security

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Submitted by

Josephine Chan

Date submitted

November 17, 2025

Phase One Rationale: Revision

Policy number and name: SR10 Travel Risk Management
Approving jurisdiction: President
Policy Sponsor: Vice President Human Resources
Anticipated Policy approval date: March 31, 2026
Anticipated Policy implementation date: May 1, 2026

A.   Rationale for the Policy and/or Procedure Amendment

Policy and Procedure SR10 are currently outdated. There is a need to incorporate travel safety plans and an emergency response framework for all KPU members, including students traveling internationally. Discussions have already taken place with KPU's Risk and Security team, Vice President of Students, and an external travel/risk subject matter expertise to initiate the process of updating the policy and procedures to ensure a comprehensive travel and risk management plan is in place.

KPU has a responsibility to safeguard its members by implementing best practices that prioritize the safety and security of personnel during travel. The existence of a waiver does not absolve KPU of its duty of care, nor does it eliminate accountability. It remains essential that KPU takes all reasonable measures to prevent harm to its travelling members.

B.   Proposed scope and content of the Policy and/or Procedure Amendment

SR10 Travel Risk Management Policy (proposed for renaming) will be updated to broaden its coverage to include all KPU international travel undertaken by employees and students. This includes, but not limited to travel for academic instruction, research collaborations, partnership development, recruitment activities, field schools, exchanges, and professional development opportunities such as conferences, training programs, and study tours. The intent is to strengthen KPU's travel authorization process and ensure standards for risk assessment, insurance coverage, and emergency preparedness while ensuring consistency, accountability, and institutional compliance across all areas of the University.

The policy will establish clear definitions of international travel and identify specific risk categories guided by the Government of Canada's Global Affairs advisories and KPU's institutional risk tolerance levels, ensuring transparent and consistent decision-making.

The revised policy will outline pre-departure requirements, including approval, insurance, and training, while clarifying the roles and responsibilities of travelers and supervisors to ensure accountability and preparedness.

The updated SR10 Policy will address existing gaps, such as inconsistent approval practices, unclear definitions, and limited emergency integration. It will provide KPU with a comprehensive, proactive approach to travel risk management that upholds the University's duty of care and safeguards both individuals and institutional interests.

C.   List of consultations with individuals and groups

Mandatory Consultations per GV2 Policy Protocol:

- Legal (Legal@kpu.ca)
- Privacy (Privacy@kpu.ca)
- Risk (Risk@kpu.ca)
- Labour Relations
- OEIC (Oeic@kpu.ca)
- Gayle Bedard, Associate Vice President, Indigenous Leadership
- Dr. Fiona Whittington-Walsh, Lead Advisor on Disability, Accessibility and Inclusion
- Opt-in consultees requested via the Policy Blog, SSC Policy and Board Governance Committee during Phase One

- *   Policies that require recommendation or approval from Senate must also consult with the Senate Standing Committee on Policy

Proposed Consultations:

- Polytechnic University Executive

- Deans and Associate Deans
- Divisional Business Managers
- Student Services
- Finance
- Procurement Services

D.   Contact information for consultation requests

Name: Carole St. Laurent, Associate Vice President International, and Andy Sidhu, Director, Risk and Security

Department: KPU International, Risk and Security

Email: policy@kpu.ca

KWANTLEN POLYTECHNIC UNIVERSITY
Senate

BOARD OF GOVERNORS - REGULAR MEETING
Agenda Number: *6.2*
Meeting Date: *November 26, 2025*
Presenter(s): *Keri Spindler*

AGENDA TITLE: APPROVAL OF CHANGES TO BOARD GOVERNANCE MANUAL

ACTION REQUESTED: Motion

RECOMMENDED RESOLUTION

THAT the Board of Governors approve the tracked changes in the Board Governance Manual, as recommended by the Board Governance Committee.

COMMITTEE REPORT

On November 12, 2025, the Board Governance Committee received, reviewed and recommended that the Board of Governors approve the changes in the Board Governance Manual.

Context and Background

The Board Governance Manual sets out the governance structure and principles pursuant to which the Board exercises its responsibilities and carries out its duties of stewardship and accountability. The Board Manual is meant to be reviewed every two years, or as needed, through the governance committee.

Key Messages

1. The Board Governance Manual was last updated in November 2024. Recent changes to KPU's leadership and management structures have caused sections of the manual to become out of date.

2. The key changes being requested are in the following sections: President Position Description; Committee terms of reference; Board Meeting Guidelines; Appendix D Board Approved University Policies.

Implications/Risks

Not updating the Board Governance Manual to current practices will lead to out of date information being available to the public and causing confusion regarding approved processes.

Attachments

1. [Board Governance Manual – Tracked Changes](#) (via SharePoint)

Submitted by

Keri Spindler, University Secretary

Date submitted

October 23, 2025

BOARD OF GOVERNORS - REGULAR MEETING

Agenda Number: *9.2*
Meeting Date: *November 26, 2025*
Presenter(s): *Peter Smailes/Carole Laplante*

AGENDA TITLE: REVISION OF GV4 SIGNING AND SPENDING AUTHORITY PROCEDURE

ACTION REQUESTED: Motion

RECOMMENDED RESOLUTION

THAT the Board of Governors approve the revised GV4 Signing and Spending Authority Procedure and Schedule A, effective December 1, 2025, and as recommended by the Board Finance Committee.

COMMITTEE REPORT

On November 18, 2025, the Board Finance Committee received, reviewed and recommended that the Board of Governors approve the revisions in GV4 Signing and Spending Authority Procedure and Schedule A, effective December 1, 2025.

Context and Background:

The Board Governance Manual delegates to the Finance Committee the responsibility to review and make recommendations to the Board any changes to the schedule of signing authorities.

The Signing Authority Policy (GV4) establishes the framework for delegating authority to execute financial and legal commitments on behalf of Kwantlen Polytechnic University. Under Section C of GV4, the Board of Governors holds ultimate fiduciary responsibility for the management of university resources and may delegate authority as appropriate.

Management has rewritten the GV4 Signing and Spending Authority Procedure which was prompted by feedback from leaders and staff who have found the current procedures overly complex and unclear. While the GV4 Policy itself remains relevant, the procedures and signing authority schedules required simplification to ensure responsibilities and authority limits are clearly understood. The existing documents contain undefined terms and overlapping authorities, which we aim to resolve. Specifically addressing Board authority thresholds.

KPU's procurement processes are governed by a robust policy framework that ensures compliance with legislation, competitive sourcing, and risk mitigation.

As previously discussed with the Finance Committee, management proposes increasing KPU's Board approval threshold to $2,000,000, aligning with peer institutions and enabling more responsive operations. The revised procedure also has now included a requirement that any commitment or agreement that is precedent-setting or involves sensitive issues will require Board approval.

Key Messages

- GV4 is a governance policy under the authority of the Board of Governors.
- It governs financial and legal commitments, distinct from academic or operational policy domains.
- The proposed change to increase the Board approval threshold from $200,000 to $2,000,000, aligns with peer institutions and enables more responsive operations.
- GV4 has been modernized and simplified so that readers better understand their responsibilities and authorization limits.
- The GV4 Procedure and Schedule A now reference other relevant policies and procedures that govern certain specific aspects of the signing authority for specific items.
- The procedure clarifies the difference between signing versus spending authority for users.
- According to the Board Governance Manual, the Finance Committee of the Board of Governors will review and approve Schedule A annually or whenever substantive amendments are proposed—excluding routine administrative updates. This ensures continued alignment with institutional governance and fiduciary responsibility.

Resource Requirements

N/A

Implications/Risks

N/A

Consultations

A significant internal consultation process has taken place with senior leaders and delegates in the following areas, prior to posting for university community feedback:

• President's Office	• Advancement
• Finance Administration	• International
• Legal	• Office of the Provost & VP Academic
• Risk	• Student Affairs
• Facilities	• University Librarian
• Campus Planning	• Divisional Business Managers
• Information Technology	• Procurement
• Research	• Financial Operations
• Enrolment Services	• Financial Budget and Reporting
• Human Resources	• Policy Office

Attachments

Revised GV4 Signing and Spending Authority Procedure
Guidelines for Schedule A – Signing and Spending Authority Matrix
Schedule A – Signing and Spending Authority Matrix

Submitted by

Peter Smailes, Vice-President Finance and Administration

Date submitted

November 7, 2025

Policy History	
Policy No. GV4	
Approving Jurisdiction: Board of Governors	
Administrative Responsibility: Vice President Finance and Administration	
Effective Date: November XX, 2025	

Signing and Spending Authority

Procedure

A. PURPOSE

The purpose of this procedure is to ensure that all financial commitments, revenues, expenditures, and contractual obligations undertaken on behalf of Kwantlen Polytechnic University (KPU) are authorized, documented, and executed in a manner that upholds institutional accountability, complies with applicable policies and regulations, and mitigates financial and legal risk. This procedure establishes a clear framework for delegating, exercising, and reviewing both signing and spending authority across the University.

B. DEFINITIONS

1. **Agreement**: An agreement is an arrangement between two or more parties (e.g., individuals, corporations, trusts, or partnerships) by which the parties agree to undertake or to alter their respective rights and/or obligations.

2. **Contingent Liability:** A contingent liability refers to a liability that exists but may not have to be fulfilled; one which will become an obligation upon a future, uncertain event. This also includes a liability to perform the obligation of another party if that other party fails to perform it.

3. **Contract:** A contract is a legally enforceable agreement, willingly entered into, between two or more parties, typically involving an exchange of promises. It may take the form of:
   a. A standard agreement enforceable by law

b. An agreement under seal, which may bind a party even without reciprocal consideration

Contracts are used for purchases or business relationships that are/have:
a. High Value or Risk
b. Custom or Complex terms
c. Regulatory or Legal Requirements
d. Long-Term or Ongoing Arrangements

4. **FIPPA Freedom of Information and Protection of Privacy Act (BC)**

The Freedom of Information and Protection of Privacy Act (FIPPA) applies to public sector organizations in British Columbia, including universities, government ministries, school districts, and municipalities. It serves two main purposes:

- Freedom of Information

Protection of Privacy

5. **Indemnity**:

Indemnity involves a commitment under which a party undertakes to prevent a loss or to provide reimbursement or compensation in the event of a loss; the obligation under the agreement could be, but need not be, dependent upon default by the indemnifying party or anyone else. The obligations under an indemnity may be a contingent liability of the party that has given the commitment.

6. **One-Over-One Approval Requirement**:

To uphold KPU's code of conduct, individuals with spending and signing authority are prohibited from authorizing payments to themselves or for their personal benefit, regardless of the amount. In such instances, supervisory approval, one- over-one, is mandatory to confirm the legitimacy of the expense. This requirement applies to all university employees and grantees who may also be claimants on the funds in question.

7. **Purchase Order**:

The KPU Purchase Order (PO) is a templated form of a contract whereby KPU has defined the terms and conditions of the purchase, and the vendor accepts those terms and conditions by fulfilling the PO.

8.	**Purchase Requisition**:	A Purchase Requisition (also referred to as a **purchase request**) is an internal request, typically initiated as web requisition to formally begin the procurement process for goods, services, or construction.
9.	**Precedent-Setting**:	A precedent-setting transaction refers to a decision, agreement, or expenditure that may establish a standard or expectation for future actions within the University. These transactions often involve new, unusual, or exceptional circumstances that, once approved, could influence future practices, policies, or interpretations.
10.	**Signature:**	A signature is a person's name or mark used to show they agree to something. It can be written by hand (wet signature) or done electronically (digital signature). It is used to authenticate, approve, or agree to the contents of a document or transaction.
11.	**Signing Authority**:	Signing authority refers to the legal power to sign documents on behalf of an organization, such as contracts, agreements, or cheques. Signing Authority can exist with or without spending authority, depending on the role.
		Example: A Vice President Finance and Administration will sign a contract with a supplier, legally committing the company—even if someone else approved the spending as the spending authority.
12.	**Signing Officer**:	This term is identical to "Signing Authority" above except that the term "Signing Officer" will be used, within this Policy and Procedures, to refer only to those instances where the term is required by a third party such as a bank.
13.	**Spending Authority:**	Spending authority refers to the **power to approve or initiate expenditures** within a set budget or financial limit. A person who has spending authority does not necessarily include the ability to sign contracts or legal documents as the signing authority. However, an individual with spending authority may serve as the

designated approver for invoices tied to an executed contract.

Example: A department manager can approve a $5,000 purchase for office supplies because it's within their budget—but they can't sign the vendor contract.

14. <u>**Total Value:**</u>   The total value refers to the estimated overall cost, inclusive of applicable taxes, for the entire duration of the agreement. This includes initial setup costs, any anticipated modifications, and potential contract extensions.

C. GENERAL PROCEDURES - SIGNING AND SPENDING LIMITS

1. **Maintenance of Schedule of Spending and Signing Authority Limits**

   The Vice President Finance and Administration (VPFA) will be responsible for developing and maintaining a comprehensive **Spending and Signing Authority Table** (referred to as *Schedule A*). This schedule outlines:

   a. Categories of documents that require formal signature

   b. Applicable financial thresholds, where relevant

   c. Roles authorized to request and approve expenditures = spending authority

   d. Roles authorized to sign and execute contracts and agreements – including non-value, revenue and expenditure agreements = signing authority

   e. Roles that shall be consulted for review of documents or procurement methods

   The VPFA will ensure that *Schedule A* remains current and accurate. Updates will be made as necessary to reflect:

   a. Changes in document types requiring signature

   b. Adjustments to financial limits

   c. Modifications to authorized roles or titles

   d. Schedule A is maintained independently of this procedure and, as such, does not require community consultation under the GV2 Policy and Procedures.

2. **Board Oversight**

   According to the Board Governance Manual, the Finance Committee of the Board of Governors will review and approve Schedule A annually or whenever substantive

amendments are proposed - excluding routine administrative updates. This ensures continued alignment with institutional governance and fiduciary responsibility.

3. **Training and Communication**

   The VPFA will ensure that all designated signing and spending authorities:

   a. Receive the Signing and Spending Authority Policy, Procedures, and Schedule(s)

   b. Are provided with training to understand their roles and responsibilities under this framework.

4. **Temporary Delegation of Signing or Spending Authority**

   Signing or spending authority may be further delegated under special circumstances with the following conditions e.g., vacation coverage and/or for specific time limited projects:

   a. Must be in writing and copied to the supervisor and Financial Reporting Systems Coordinator at: Fin.Reporting.Coord@kpu.ca

   b. Must specify the time period and should generally not exceed a one-year commitment

   c. Cannot exceed the original authority's dollar limits

   d. Must be within approved budgets and specify the scope of the delegation, e.g., Fund/Organization Code.

   e. Delegate must accept the responsibility and report commitments that they signed to the original signing officer promptly

   f. Persons delegated authority must be employees of KPU unless approved by the VPFA

5. **Spending Authority Guidelines**

   a. **Budget-Based Authority**

      i. Budget approval by the Board grants authority to spend within allocated amounts subject to the terms and conditions of the relevant Procurement or Human Resources policies and procedures, or specific procedures within an operating unit.

      ii. Spending authority is not the same as signing authority and does not provide the authority to an individual to sign contracts. All contracts

require additional review and approval processes beyond spending authority delegation.

    iii. The intentional division or "splitting" of purchase requisitions to circumvent this financial threshold is prohibited.

b. **Restricted Funds**

    i. Individuals managing restricted funds (e.g., research, endowment spending, revenue generating and other trust funds) may delegate signing authority over expenditures but remain accountable to ensure that the expenditures are consistent with the restricted intent for those funds and do not exceed the authorized dollar amounts.

c. **Approval Rule: "One-Over-One"**

    i. Applies to all employees and grantees.

    ii. Any purchase, expense, or reimbursement that benefits—or may appear to benefit—an individual must be approved by a supervisor one level above the claimant.

    iii. All P-card purchases, and expense report reimbursements will require one-over-one approval, regardless of value.

    iv. Approval must come from the same organizational unit and from the person with spending authority for the relevant budget account. Note: This individual may differ from the one-over-one approval.

    v. KPU reimbursed visiting researchers' expenses must be approved by the host's supervisor.

d. **High Value or Precedent Setting Contracts**

    i. Any planned acquisition exceeding **$2,000,000**, and/or deemed **precedent setting**, meaning they could influence future procurement practices or expectations, or involve atypical terms, goods, or services must receive prior approval from the Board of Governors.

    ii. Determination of whether a purchase is precedent-setting should be made in consultation with the appropriate Vice President.

D. SPENDING AUTHORITY VERSUS SIGNING AUTHORITY

The spending of funds at the University is governed by a structured framework that promotes fiscal responsibility, policy adherence, and strategic alignment. Procurement Services plays a

key role in this process—coordinating competitive sourcing, issuing purchase orders, and managing contract execution. Many goods and services are already covered under existing contracts, including university-wide agreement agreements, Corporate Supply Arrangements (CSAs), or Cross Institutional Supply Arrangements such as BCNET contracts, which should be utilized whenever possible and practical to streamline procurement, maximize value, and minimize risk.

All expenditures must follow the approved process, with clearly defined roles and responsibilities at each stage.

1. **Requisition and Contract Signing**

   All purchase requests must be submitted to Procurement Services via a Purchase or Web Requisition, unless:

   a. They are delegated to other departments under Procurement Policy (AD3),

   b. Eligible for P-card use.

   For proactive planning other communication methods, including email, may be used to convey purchasing needs pending submission of approved web requisition by spending authority. Spending authority for these requisitions is based on the total value of the purchase. The total value is defined as the projected total cost over the full term including initial costs, any potential modifications, maintenance, end of life disposal.

   Requisitions will be processed, and the solicitation will result in a purchase order or formal contract with detailed terms and conditions covering higher risk areas as determined by procurement services.

   For P-card eligible purchases, as per FM5 Business and Travel Expense Policy and procedure, authorized individuals may opt to use their KPU-issued P-card, provided they follow the specific procedures outlined for P-card usage.

   Purchases made via formal contracts require a different level of signing authority. Proposals that may lead to formal contracts must be treated with the same level of scrutiny and signing authority as the executed agreements themselves. These documents, may introduce legally binding terms and conditions, necessitating higher-level review and approval to ensure alignment with KPU's legal and institutional standards. See table below for comparison.

	Spending Authority	**Signing Authority**
Form	**Requisition**	**Purchase Order or Contract**
Purpose	Internal request to buy something or spend University budget e.g., purchasing equipment or hiring employees	A formal agreement established between two parties, outlining the terms and conditions related to the exchange of goods, services, or financial assets. This agreement may pertain to procurement activities, sales transactions, or revenue-generating arrangements, and serves to define the responsibilities, deliverables, and obligations of each party involved.
Legal Binding	Not legally binding	Legally enforceable with obligations and rights
Risk Exposure	Low—mostly operational	High—can involve penalties, liabilities, disputes
Approval Level	Departmental or mid-level manager as per Schedule A	Senior leadership or delegated contracting officer – Minimum Director level
Compliance Needs	Basic policy checks	Must comply with laws, trade agreements, and regulations. Requires Procurement, Risk, General Counsel review

E. SPENDING AUTHORITY

All spending must follow the approved phases outlined below, with clear roles and responsibilities at each stage.

Phase	Description	Required Spending Authority
1. Requisition or P-Card	Internal request to procure goods/services; initiates the procurement process.	Person responsible for managing the budget account or delegate - refer to Schedule A
2. Purchase Order / Procurement Contract	Formal commitment to a supplier or service provider. May be a PO (Requires Procurement involvement) or a legally binding contract.	Procurement Services or authorized departments e.g., Bookstore, Library

3. Invoice Approval	Confirms goods/services received and matches PO/contract terms.	Budget holder, designated approver or qualified receiver
4. Payment Execution	Final payment processed by Finance.	Finance department only

1. **Requisition Phase**

    a. Initiation: A department identifies a need for goods or services.

    b. Documentation: A web requisition form or system entry is completed, including scope, estimated cost, and funding source.

    c. Authorization: Must be approved by the spending authority or their delegate before proceeding to procurement as per Schedule A. The approver is responsible for verifying:

       i. Availability of funds

       ii. Reasonableness of the request

       iii. Alignment with institutional policies, priorities, and operational requirements

2. **Purchase Order or Contract Phase**

    Procurement Services will determine the most appropriate method of commitment—either a Purchase Order (PO) or a formal contract—based on the nature, value, and complexity of the purchase. This decision may involve a competitive bidding process, in accordance with applicable trade agreements, procurement laws, and University policies.

    a. **Purchase Order (PO):**

       i. Issued by Procurement Services based on an approved requisition.

       ii. Becomes a binding agreement once accepted by the supplier.

       iii. Certain departments (e.g., Bookstore, Library) may have delegated authority to issue POs directly under defined conditions.

    b. **Contract:**

       i. Required for services, research agreements, or non-standard terms.

       ii. Must be reviewed by Legal and/or Risk Management if applicable.

       iii. Only designated signing officers may execute contracts on behalf of the University.

3. **Invoice Approval Phase**

    a. **Matching:** Invoices are matched against the PO or contract terms (price, quantity, deliverables).

    b. **Approval:**

        i. Must be approved by the spending authority or designated approver prior to payment.

        ii. Designated approver is responsible for confirming that:

            1) Goods or services have been received in full and meet the agreed-upon terms

            2) Invoice details and calculations align with the original PO or contract (including pricing and deliverables)

            3) Budget coding is accurate and appropriate

        iii. If the invoice amount exceeds the original commitment, the next level approval may be required, based on the amended and cumulative value, in accordance with Schedule A.

4. **Payment Execution Phase**

    a. **Processing:** Finance verifies approved invoices and processes payment.

    b. **Controls:** Payments are subject to audit and compliance checks.

    c. **Restrictions:** No individual may authorize payment to themselves without one-over-one approval.

Example: Finance releases payment for a consulting invoice after confirming contract terms and approval signatures.

F. SIGNING AUTHORITY

When a contract is determined necessary to purchase goods or services, or to engage others to provide services, the contract or agreement will follow these phases per below:

Phase	Description	Required Signing Authority
1. Delegation	Signing authority is formally delegated by the Board of Governors to the President and senior roles.	Board of Governors, President, Vice Presidents

2. Authorization	Delegated individuals are notified, trained, and provided with policy documents outlining scope and limits.	VP Finance & Administration, Delegated Signatories
3. Pre-Execution Review	Documents undergo review for legal, risk, insurance, and financial implications before being signed.	Legal Counsel; Risk Management; Insurance Advisor; Procurement (as applicable); Finance
4. Document Execution	Authorized individuals sign contracts, agreements, and other binding documents on behalf of KPU.	Designated signing officers per Schedule A
5. Oversight & Compliance	Signed documents are reviewed, tracked, and audited to ensure compliance with policy and legal standards.	VP Finance & Administration; Internal Audit

1. **Responsibilities of Signing Authorities**

   Before signing any contract or agreement, authorized individuals must:

   a. **Agreement Review**

      i. Fully review the agreement before submission for Legal or Risk review

      ii. Confirm the University can meet all terms and specifications

      iii. Ensure all required reviews are completed prior to final signature

   b. **Legal Compliance**

      i. Ensure the agreement complies with applicable laws in Canada and British Columbia

   c. **Due Diligence**

      i. Confirm appropriate stakeholder approvals

      ii. Complete necessary legal, risk, procurement, financial, and other reviews

      iii. Disclose any identified risks

   b. **Indemnity and Insurance**

      i. Verify that appropriate indemnities and insurance coverage are included

   c. **Documentation**

      i. Include Legal and/or Risk review documents with each stage of sign-off

      ii. Clearly label the agreement with version number and date

d. **Total Value Authorization**

    i. Signing authority must reflect the full contract value, not just the value of amendments or modifications, and potential renewal options that may be exercised.

e. **Strategic Alignment**

    i. Ensure the agreement aligns with the KPU's mission, strategic plan, budget, collective agreements, and academic priorities

f. **Intellectual Property**

    i. Address IP matters in accordance with RS5 Intellectual Property policy and applicable legislation

g. **Overhead Rates**

    i. Confirm that overhead rates comply with KPU's overhead rate policies

    ii. Any exceptions must be approved by the President, VP Finance and Administration, or AVP Research, based on the type of the agreement

h. **Research MOUs**

    i. All research-related research agreements, contracts, and Memorandums of Understanding (MOUs) must be submitted to the Office of Research Services (ORS) for approval

2. **Legal, Privacy and Risk Management Reviews**

Procurement Contracts: The Procurement team will assess whether legal review is necessary based on the nature and scope of the agreement.

For non-procurement contracts the legal review shall encompass the following:

To protect the interests of the University, signing authorities must undertake appropriate due diligence assessment prior to execution of documents which include:

a. **Legal Reviews**

    i. The Office of General Counsel must be consulted prior to signing any contractual document, agreement, or contract, unless based on pre-approved templates developed with legal counsel.

    ii. Legal and Privacy review focuses solely on legal and FIPPA risks and does not assess the business rationale. The delegated signing authority is responsible for ensuring the agreement aligns with operational and strategic needs.

b. **Indemnity Matters**

  i. Any document, contract or agreement which contains an indemnification to other parties, must be reviewed by the University's Risk department and may need to be approved by the applicable Provincial Ministry, prior to such a document being finalized and executed.

c. **Contractual or Agreement Matters**

  i. No person may sign any document or enter into a verbal or non-verbal agreement that creates an obligation or undertaking on behalf of the University unless the individual has been granted authority through this Policy, Procedures, and related Schedule(s).

  ii. All employees must understand the extent and limits of their authority and comply with the University's policies, procedures and processes.

  iii. Approving an agreement without appropriate authorization exposes the individual to personal liability

3. **Procurement and Financial Review**

Procurement Contracts: The Procurement team will assess whether additional financial review is necessary based on the nature and scope of the agreement.

Non-Procurement Contracts: For contracts related to revenue generation, sales, or other non-procurement activities, a financial review is strongly recommended to ensure fiscal responsibility and institutional alignment.

The review may include:

a. **Budget Alignment:**

  i. Ensures the financial commitments in the agreement are within approved budgets and funding sources.

b. **Cost Validation:**

  i. Verifies that pricing, payment terms, and financial obligations are accurate, reasonable, and consistent with KPU and market standards.

c. **Avoids Hidden Liabilities:**

  i. Identifies clauses that may introduce unexpected costs, penalties, or long-term financial exposure.

d. **Policy Consistency:**

> i.   Confirms the agreement complies with institutional financial policies, procurement procedures, and signing authority levels.

> e.   **Audit Readiness:**

>> i.   Ensures documentation and financial terms meet audit standards and can be properly tracked and reported.

> f.   **Payment Terms Review:**

>> i.   Validates timelines, conditions, and triggers for payment to prevent disputes or cash flow issues

4.   **Insurance**

   a.   The University carries broad insurance coverage for board members, officers, and employees

   b.   Any agreement that deviates from standard approved contract language, regarding insurance or liability limits, must be reviewed by the Risk Department before signing

5.   **Use of University Seal**

   a.   Only designated positions may use the University Seal

   b.   Section 56 of the University Act governs proper execution of documents under seal

   c.   GV6 Use of Institutional Name, Coat of Arms, Crest, Logo, Seal and Other Graphic Images provides more details

6.   **Records Management**

   a.   For non-procurement contracts, the primary signing authority is the Office of Primary Responsibility, for example, Human Resources for employee contracts, and as such, must retain the original contract per the University's retention schedule.

   b.   Procurement Services, as the Office of Primary Responsibility, holds records for procurement-related contracts and distributes copies to signing authorities.

G. RELATED POLICY

GV4 Spending and Signing Authority Policy

AD3 Procurement Policy and Procedures

BP4 Campus Planning

FM5 - Business and Travel Expense

FM9 Financial Structure of Revenue Based Activities excluding Sales of Academic services and Research

GV6 Use of Institutional Name, Coat of Arms, Crest, Logo, Seal and Other Graphic Images

GV8 Memorandum of Understanding / Letter of Intent

HR11 Search Advisory and Appointment of Administrative Positions

HR14 Employment Students

HR20 Search Advisory, Appointment & Re-appointment of Senior Academic Administrator Positions

HR22 Presidential Search Advisory, Appointment and Re-appointment

HR25 Search Advisory and Appointment of Senior Administrative Positions

IM8 Privacy

RS3 Indirect Costs of Research

RS4 Administration and Control of Research and Special Funds

RS5 Intellectual Property policy

Other Related Documents:

Schedule A: Spending and Signing Authority Table

PURCHASE ORDER (PO) EXEMPTION MATRIX

Contract signing form(s) TBD

Delegation of Signing Authority Form TBD

Signing and Spending Authority Procedure Guidance

General Principles:

- **Legal and Risk Review**: All agreements must be reviewed by the Office of General Counsel (GC) and Risk or utilize approved KPU templates.
- **Procurement Involvement**: Procurement must be consulted for all expenditures, except those permitted under P-Card limits or under the Purchase Order (PO) Exemption Matrix.
- **Finance Involvement:** Finance (Budget & Reporting) should be engaged, where practical and possible, to conduct a comprehensive review of the agreement to ensure that pricing, payment terms, and financial obligations are accurate, reasonable, and aligned with KPU and prevailing market standards. This review should also confirm the agreement's compatibility with internal reporting requirements and financial management capabilities.
- **Executive Oversight:** The Board Chair serves as the one-over for the President
- **Human Resources Oversight:** The Vice President, Human Resources (VPHR) must be involved in matters concerning HR forms and contracts.
- **Leadership Roles:** AVPs, Deans, and Division Heads include all leadership positions reporting directly to a Vice President.
- **Contract Minimum Signing Level:** Contracts require a minimum signature from a director-level position.
- **Dual Signatures:** Consideration should be given to whether all contracts require two KPU signatures**.**
- **Position-Based Authority:** Spending and signing authority is inherently granted by virtue of the position; no signing forms are required**.**
- **Manager Roles:** Include Departmental and Divisional Business Managers assigned to the department
- **Any Designated Employees:** Where authority is not position-based, designated employees and Manager must complete signing forms.
- **Board Approval:** Board motions for contracts are required at the requisition stage.
- **Form Alignment:** Any discrepancies between current forms and Schedule A, forms will be reconciled.
- **Internal Division Authority:** Signing authority which is limited to internal or specific procedures within a single/limited number of department(s) (e.g., banking) is excluded from being detailed on Schedule A.

Guidelines for Using the Approval Schedule

Legend:

- **R =** Review
- **s-1, s-2, s-3, s-4=** Signature levels 1, 2, 3 and 4 respectively

Review Requirements:
- If a Review is required, it must be completed prior to collecting any signatures.
- Evidence of the review should be documented and shared with signatories.

Signature Protocol:
- When multiple signatures are required, each must come from a distinct category (e.g., when a document requires 3 signatures it is one of s-1, one of s-2 and of one s-3)
- The most senior position should typically provide the final signature.

Hierarchical Flow:

- Signatures should follow the organizational hierarchy. For example, if a manager requires approval from a Vice President, the document should progress through the Director and AVP levels before reaching the VP unless otherwise directed by the VP.

Spending and Signing Authority Schedule A

R= review, s-1= signature 1, s-2=signature 2, etc. Where more than one signature is required must have one signature in each category. E.g. 3 signatures require one of each s-1, s-2, and s-3

GV4 Policy and Procedure applies where no other policy or procedure is noted.

	Notes and Related Policy/procedure	Consult GC & Risk	# of signatures	Total Value/ Dollar threshold	Board approval	President	VP Finance & Admin	Provost	VP Human Resources	Other VP's	AVP, Dean, Divisional Head	Director/ Assoc Dean	Manager	Any Designated Employee	HR Business Partner	Finance - Budget
1 Requisitions for Goods, Services or Construction	**AD3 Procurement**															
a Requisitions Unit/Faculty most responsible	Web requisitions		1	$2,000,000+	motion	s-1	s-1									
			1	$200,000+ to $2,000,000		s-1	s-1	s-1	s-1	s-1						
			1	$75,000+ to $200,000		s-1	s-1	s-1	s-1	s-1	s-1					
			1	$25,000+ to $75,000		s-1	s-1	s-1	s-1	s-1	s-1	s-1				
			1	up to $25,000		s-1	s-1	s-1	s-1	s-1	s-1	s-1	s-1			
b Subsequent Invoice Approval	Matched: Invoices agree to PO/Contract terms and conditions and receipt of goods or services are confirmed		1	Matched to PO		s-1	s-1	s-1	s-1	s-1	s-1	s-1	s-1	s-1		
			1	Not Matched		Approval reverts to Requisition levels (1a)										
c Invoice approval - Direct Pay	Non-PO or Contract **See Purchase Order Exemption Matrix**		1			Approval reverts to Requisition levels (1a)										
2 Purchase Cards	**AD3 Procurement Policy and Procedures**															
a P-Card Application	Holder plus one-over one		3	Defined P-Card limits both by transaction and monthly limits		s-2	s-2	s-2	s-2	s-2	s-2	s-2	s-2	s-1 (P-card holder)		
	Finance Approval										s-3 (AVP Fin)	s-3 (Dir Fin Ops)				
b Purchases on a KPU P-Card	P-Card Holder		1											s-1 P-card holder		
c P-Card Reconciliations	Holder plus one-over one		2			s-2	s-2	s-2	s-2	s-2	s-2	s-2	s-2	s-1 (P-card holder)		
d Waiver of transaction or monthly limit	Finance Approval		1						s-1		s-1 (AVP Fin)	s-1 (Dir Fin Ops)				
3 Employee Expense Reimbursements	**FM5 - Business and Travel Expense**															
a Pre-approval for travel	Employee plus one-over one		2			s-2	s-2	s-2	s-2	s-2	s-2	s-2	s-2	s-1 (Employee)		
b Advances	Minimum $200		2								s-2 (AVP Fin)	s-2 (Dir Fin Ops)		s-1 (Employee)		
c Expense Report	Employee plus one-over one and spending authority if different (President & Board members - see Board governance manual)		2			s-2	s-2	s-2	s-2	s-2	s-2	s-2	s-2	s-1 (Employee)		
d Missing Receipts			2	Under $50		s-2	s-2	s-2	s-2	s-2	s-2	s-2	s-2	s-1 (Employee)		
	Employee plus one-over one plus Finance		3	Over $50		s-2	s-2	s-2	s-2	s-2	s-2	s-2	s-2	s-1 (Employee)		
											s-3 (AVP Fin)	s-3 (Dir Fin Ops)				

Effective November XX, 2025

Spending and Signing Authority Schedule A

R= review, s-1= signature 1, s-2=signature 2, etc. Where more than one signature is required must have one signature in each category. E.g. 3 signatures require one of each s-1, s-2, and s-3

GV4 Policy and Procedure applies where no other policy or procedure is noted.

#	Category	Notes and Related Policy/procedure	Consult GC & Risk	# of signatures	Total Value/ Dollar threshold	Board approval	President	VP Finance & Admin	Provost	VP Human Resources	Other VP's	AVP, Dean, Divisional Head	Director/ Assoc Dean	Manager	Any Designated Employee	HR Business Partner	Finance - Budget
4	**Contracts and Agreement (Revenue and Expenditures)**	Purchase of Good and Services **AD3 Procurement** or Revenue Agreements **FM9 Financial Structure of Revenue Based Activities** excluding Research. For expenditure Procurement determines method of purchase, BCNET contract, PO, RFX, etc.	Minimum approval level is Director on a Contract. Consider including Finance review prior to executing revenue contracts.														
	Unit/Faculty most responsible		R	2	$2,000,000+	information	s-1	s-2	s-1	s-1	s-1						R
	Expenditure Agreements - Procurement determines when legal, risk or finance review is needed. Revenue Agreements- require legal, risk, and finance review.		R - as needed	2	$200,000+ to $2,000,000		s-2	s-2	s-1	s-1	s-1						R- as needed
			R - as needed	2	$75,000+ to $200,000		s-2	s-2	s-2	s-2	s-2	s-1					R- as needed
			R - as needed	2	Up to $75,000		s-2	s-2	s-2	s-2	s-2	s-2	s-1				R- as needed
5	**Contracts and Agreement - Non Procurement**	**GV8 Memorandum of Understanding / Letter of Intent**: Non-Procurement - i.e. trade agreements do not apply, MOU's, Licenses, Partnerships	R	2			s-2	s-2	s-2	s-2	s-2	s-1					R
6	**Human Resources**	**HR11, HR14, HR20, HR22, HR25: Search Advisory and Appointment of Positions**															
	a **Taleo Requisition**	Collective agreement		2		motion	s-2			s-1							
		All Positions		4			s-2	s-2	s-2	s-2	s-2	s-1	s-1	s-1		s-3	s-4
	b **Employee Transaction Form (ETF)**	All Positions		1			s-1	s-1	s-1	s-1	s-1	s-1	s-1			
	c **Employment Contract/Offer Letter**	President		1		s-1										
		Vice Presidents		1		motion	s-1									
		Deans, Academic AVPs, Academic Executive Directors		1			s-1		s-1							
		Faculty - Hire ongoing		1			s-1		s-1			s-1				
		Faculty - Hire NR1/NR2		1			s-1		s-1			s-1	s-1			
		Administrative AVPs, Administrative Executive Directors		1			s-1	s-1	s-1	s-1	s-1					
		Administrative and Support Staff and Casual Employees & Students		1			s-1	s-1	s-1	s-1	s-1	s-1	s-1	s-1		
7	**Research & Restricted Funds**	**RS4 Administration and Control of Research and Special Funds**															
	a **Contracts & Agreements**	Grants and Contracts	R	2	$200,000+		s-2	s-2	s-2			s-1 AVP Research					R
			R	2	$10,000+ to $200,000		s-2	s-2	s-2			s-2 AVP Research	s-1 Dir Research				R
			R	1	Up to $10,000		s-1	s-1	s-1			s-1 AVP Research	s-1 Dir Research				R
	b **Non- value Contracts & Agreements**	Such as non-disclosure agreements, material transfer agreements, or letters of intent, with no financial commitment	R	1	n/a		s-1	s-1	s-1			s-1 AVP Research	s-1 Dir Research				
	c **Applications for External Funding**		R - as needed	3	Any value		s-3		s-3			s-2; s-3 AVP Research	s-2 Dir Research		s-1		R

Spending and Signing Authority Schedule A

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8 Use of Land, Buildings and Space	**BP4 Campus Planning**															
a Purchase, Lease, Sale or Disposal of Land and Lease of Space	(may require Board and Ministry Approval)	R	2	$25,000+ to $2,000,000	approval of Capital plans	s-1	s-1 or s-2			s-2 (VP External)	s-2 (ED Facilities or AVP, CCP)					
		R	2	Under $25,000		s-1&2	s-1&2			s-1&2 (VP External)	s-1&2 (ED Facilities or AVP, CCP)					
b Right of Way, Easement, Land Titles, Zoning, etc.		R	2	Unlimited		s-1	s-1				s-2 (Facilities or CCP)					
9 International Contract and Agreements																
	Academic & Student Exchanges and Development Programs	R	2	$25,000+ to $2,000,000		s-2	s-2	s-2		s-2 (VP Students)	s-1 (AVP International)					
		R	1	Under $25,000		s-1	s-1	s-1		s-1 (VP Students)	s-1 (AVP International)					
10 Donations	Gifts to be accepted by the university. **ER1 Fundraising**		1			s-1	s-1			s-1 (VP Ext)						
11 University Student Loans, Bursaries, Financial Awards	Set up university and endowment funded student awards, loans or bursaries **ST1 Student Awards**		1			s-1		s-1		s-1 (VP Students)	s-1 (AVP Student Affairs)					
	Disbursement of Emergency bursaries/loan to individual students		1			s-1		s-1		s-1 (VP Students)	s-1 (AVP Student Affairs)	s-1 (Director Students)	s-1 (Manager Students)	s-1 (Financial Aide Advisor)		
	Disbursement of individual awards under guidance of the award program term of reference (refer to Section 1c invoice approval)															

Effective November XX, 2025

> Where thought meets action

BOARD OF GOVERNORS - REGULAR MEETING
Agenda Number: *9.3*
Meeting Date: *November 26, 2025*
Presenter(s): *Lori McElroy / Alia Somji*

AGENDA TITLE: FY2025 REVISIONS TO BYLAW NO. 4 FEES

ACTION REQUESTED: Motion

RECOMMENDED RESOLUTION

THAT the Board of Governors approve the revisions to Bylaw No. 4, Fees, as presented.

COMMITTEE REPORT

Board Finance reviewed the proposal at its November 18th meeting. The Committee requested that management review comparable programs at other institutions and bring back a revised proposal and motion that is more competitive.

Context and Background

The Board Finance Committee is responsible for reviewing and recommending matters related to the setting, determination, and collection of fees, as authorized by the University Act. KPU's tuition and fees are listed in Bylaw No. 4 – Fees, which is approved by the Board of Governors.

The Melville School of Business has requested a reduction in domestic tuition fees for the Human Resources Management (HRMT) Post-Baccalaureate Diploma program, which has experienced declining enrolment in recent years. The Faculty attributes this trend in part to the program's tuition rate, which is significantly higher than comparable offerings at other local institutions.

To address this concern, the Faculty proposes lowering the tuition rate from Category 2.a.9 ($410.07 per credit) to Category 2.a.7 ($219.79 per credit).

The proposed tuition adjustment aims to improve student retention by removing financial barriers. If the lower rate leads to increased enrolment and completion, the tuition revenue from one student at the new rate would offset the loss from two students at the current rate. Given the program's low enrolment and completion rates, only a modest increase in student numbers would be needed to balance the financial impact.

Key Messages

1. An amendment to Bylaw No. 4 is recommended to reduce the domestic tuition fees for the Human Resources Management (HRMT) Post-Baccalaureate Diploma program.

2. A comparative analysis of five similar programs at Douglas College, BCIT, and SFU shows that KPU's current tuition and fees are more than double those of the next most expensive program, and nearly triple those of the others. The curriculum for the program is being restructured from a 42-credit program to a 33-credit program. The combined impact of reduced tuition fee and reduced credit structure will result in a 61% reduction in the cost of the program.

Consultations

1. Office of Planning and Accountability

Attachments

1. FY2025 Update Draft Bylaw No.4, Fees (clean)

2. FY2025 Updated Draft Bylaw No. 4, Fees (track changes)

3. Assessment of Tuition Reduction for HRMT Post-Bacc. Diploma Nov 23 2025

Submitted by

Lori McElroy, Associate Vice President, Planning & Accountability

Date submitted

November 24, 2025

Bylaw History	
Bylaw No. 4	
Approving Jurisdiction: Board of Governors	
Original Effective Date: November 16, 1982	
Revised Date: November 26, 2025	

Bylaw No. 4
Fees

1. Pursuant to the *University Act*, program or course fees and charges to be paid to the University by students shall be determined and/or revised by the Board of Governors. The rates effective September 1, 2025 are included below.

2. Tuition fee structure for domestic students[1]

   a. Credit based programs, excluding graduate level programs:

Category	$ / credit	
1	$162.84	▪ Existing courses as at September 1, 2011 will remain in Category 1. [2] ▪ Accessible Education and Training courses.
2	$196.77	▪ Education Assistant Program courses. ▪ New courses developed for degrees/programs in Faculties such as Business and Arts.
3	$219.79	▪ Bachelor of Design, Product Design courses. ▪ New courses developed for programs that incorporate smaller classes, labs, and/or studios, e.g., Design, Science, Horticulture and Health.
4	$251.54	▪ Health Unit Coordinator courses. ▪ New online courses developed for degrees/programs and other specialized programs. ▪ Diploma in Front-End Development for Interactive Application courses.

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[1] *Courses eligible as "new" for the purposes of this Bylaw (including courses designated as online) are courses assigned newly designated subject codes accompanying Ministry-approved programs not previously offered by KPU. New courses approved by Senate that bear a pre-existing subject code are not considered "new" for the purposes of this Bylaw (unless they are being newly classified at a different academic level).*

[2] *With the exception of the Health Unit Coordinator and Education Assistant Programs.*

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5	$310.82	▪ Brewing and Brewery Operations courses. ▪ Health (HEAL) courses. ▪ Mechatronics and Advanced Manufacturing Technology Diploma courses.
6	$652.14	▪ Post-Baccalaureate in Technical Apparel Design courses.
7	$263.61	▪ Post-Baccalaureate Diploma in Accounting courses. ▪ Post-Baccalaureate Diploma in Human Resource Management courses.
8	$358.02	▪ Diploma in Traditional Chinese Medicine – Acupuncture courses. ▪ Certificate in Farrier Science courses.
9	$410.07	▪ Post-Baccalaureate Diploma in Operations and Supply Chain Management courses. ▪ Post-Baccalaureate Diploma in Technical Management and Services courses. ▪ Entertainment Arts courses. ▪ Citation in Cloud Architecture and Security courses.

b. Fixed term programs:

Category	$ / week	
1	$141.86	▪ Existing courses as at September 1, 2011.
2	$290.97	▪ New courses developed for degrees/programs in skilled trades programs, e.g. Arborist courses.

c. Adult Upgrading   No charge

d. English Language Studies   No charge

e. Eligible Indigenous students   No charge

> Tuition will be waived for incoming and current KPU students who are members of the Kwantlen, Katzie, Semiahmoo, Musqueam, Tsawwassen, Qayqayt, and Kwikwetlem First Nations.

e. Credit based graduate level programs:

Category	$ / credit	
1	$410.07	▪ Graduate Diploma in Business Administration-Green Business courses. ▪ Graduate Diploma in Business Administration-Global Business courses.
2	$652.14	▪ Graduate Certificate in Sustainable Food Systems and Security courses.

3. Other fees and charges for domestic students:

a. Student fees for libraries, technologies and student life	7% of tuition
b. Application fee	$40.00 No charge for self-declared Aboriginal applicants
c. Transcript fee	$10.00 per transcript
d. Appeals	$15.00
e. Confirmation deposit	Domestic applicants are required to remit a non-refundable $250.00 confirmation deposit to signify acceptance of an offer of admission to open intakes and a $500.00 confirmation deposit to signify acceptance of an offer of admission to a limited intake program. If the student registers this fee will be applied towards the full tuition fees assessment, thereby reducing the total fees owing.
f. Graduation fee	No charge

4. Prior Learning Assessment and Recognition (PLAR):

a. Students receiving PLAR credit awarded for individual course(s) will be charged the domestic rate of tuition based on the fee category for the assigned course.

b. Students receiving PLAR credit(s) as a result of a competency-based assessment will be charged an assessment fee of $750 or the cost associated with the resulting credit at the domestic rate of tuition based on the fee category for the assigned course(s), whichever is the lesser of the two.

c. Students receiving PLAR credit for coursework previously completed at KPU in a different academic level may be exempt from PLAR fees, with approval of a PLAR advisor/assessor and the relevant Dean. Where a previous assessment is on file as precedent, a flat fee of up to $750 may be assessed at the discretion of the Dean with approval of the Chief Financial Officer.

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5. Continuing and Professional Studies:

    Fees and charges will be assessed by the appropriate Vice President.

6. Service charges:

    All discretionary fees will be determined by the appropriate Vice President (e.g. duplicate tuition receipt charge, NSF cheque/stop payment charge, calendar charge, rush documents, graduation late fee, document evaluation fee, external invigilation charge, supplementation exam fee, library card replacement fee, cheque replacement fee, etc.).

7. Co-operative Education Work Term for both domestic and international students:

All Co-operative Education Students	Tuition	Student Fees (LTSD)
Full-time work terms	$732.78 per work term	7% of tuition

    a. The tuition fee for a Co-operative Education Work Term is a flat fee per work term. This is equivalent to 4.5 credit hours based on the amount per credit in category 2. a.1. Note however, the student will be awarded the equivalent of 9 credit hours.

8. International student fees

    a.   International student tuition fees for credit based programs, excluding graduate level programs:

Category	$ / credit
1	$740.95 / credit

    b. International student tuition fees for English Upgrading (ENGQ) and English Language Studies (ELST)

Category	$ / credit
1	$410.08 / credit

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c. International student tuition fees for credit based graduate level programs:

Category	$ / credit	
1	$740.95	▪ Graduate Diploma in Business Administration- Green Business courses. ▪ Graduate Diploma in Business Administration- Global Business courses. ▪ Graduate Certificate in Sustainable Food Systems and Security courses.

d. International student tuition fees for fixed term programs:

Category	$ / week
1	$740.95 / week

9. Other fees and charges for international students are as follows:

a. Student fees for libraries, technologies and student life	7% of tuition
b. Application fee	$120.00
c. Transcript fee	$10.00 per transcript
d. Appeals	$15.00
e. Confirmation deposit	International applicants are required to remit a non-refundable $5,000 confirmation deposit to signify acceptance of an offer of admission. If the student registers, this fee will be applied towards the tuition fees assessment, thereby reducing the total fees owing.
f. International tuition deposit	Continuing international students are required to remit a non-refundable $2,200 international tuition deposit to signify their intent to register in classes for the upcoming term. Once an international student registers for courses, the international tuition deposit is applied toward the account balance, thereby reducing the total fees owing for the term.
g. Graduation fee	No charge

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Fees

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c. Students receiving PLAR credit for coursework previously completed at KPU in a different academic level may be exempt from PLAR fees, with approval of a PLAR advisor/assessor and the relevant Dean. Where a previous assessment is on file as precedent, a flat fee of up to $750 may be assessed at the discretion of the Dean with approval of the Chief Financial Officer.

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5. Continuing and Professional Studies:

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Full-time work terms	$732.78 per work term	7% of tuition

    a. The tuition fee for a Co-operative Education Work Term is a flat fee per work term. This is equivalent to 4.5 credit hours based on the amount per credit in category 2. a.1. Note however, the student will be awarded the equivalent of 9 credit hours.

8. International student fees

    a. International student tuition fees for credit based programs, excluding graduate level programs:

Category	$ / credit
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g. Graduation fee	No charge

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To: KPU Board of Governors;

Cc'd: Diane Purvey, VP Academic; David Burns, AVP, Academic

From: Lori McElroy, AVP, Planning & Accountability

Date: REVISED November 23, 2025

Re: Assessment of Tuition Reduction for Human Resources Management Post-Bacc. Diploma

Purpose:

The Melville School of Business (MSoB or the Faculty) offers a Human Resources Management (HRMT) Post-Baccalaureate Diploma program that has seen declining enrolment in recent years. The cost of the KPU program is significantly higher than other locally offered programs which the Faculty believes has contributed to the enrollment declines. To address this issue, the Faculty has requested that the <u>domestic</u> tuition rate for the Post-Baccalaureate in Human Resources Management (HRMT) be reduced from category 2.a.9 ($410.07 per credit) to 2.a.7 ($263.61 per credit), which is the same tuition charged for the Post-Baccalaureate in Accounting. In response to feedback from the Board Finance committee, the request as been revised to reduce tuition to category 2.a.3 (219.79 per credit).

This submission provides an assessment of the merits of this request, comparing KPU's program with four related programs from three post-secondary institutions in the Lower Mainland: BCIT, SFU and , Douglas College (Douglas), which offers both a Post-Degree and a Post-Baccalaureate program.

Recommendation:

Based on the assessment below, I recommend that KPU reduce tuition for the HRMT Post-Baccalaureate Diploma from category 2.a.9 ($410.07 per credit) to 2.a.3 ($219.79 per credit).

Program Comparisons:

This section provides a summary of the key features of the comparable programs and respective tuition. Details on each program are provided in Appendix A, while the list of courses offered for each program is provided in Appendix B.

Of the programs compared, BCIT's has the most similar admission requirements to KPU's, as shown in Table 1, below. BCIT's program and Douglas' Post-Baccalaureate Diplomas have more required courses (16 and 20, respectively) compared to the others. SFU's program is an outlier as it is a continuing studies program and so it does not have admission requirements and has no credits. All four programs provide an exemption for the Chartered Professional in Human Resources (CPHR) exam for CPHR certification.[1]

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[1] Note: While information on the CPHR exam exemption is available for KPU's program, it was not readily accessible; however, it is featured prominently for all the other programs identified.

Table 1: Program Features

Program	Admission Requirements	# of Courses	Total Credits
KPU HRMT Post Bacc Diploma	Degree or equivalent	13	42
BCIT HRMT Diploma with Advanced Placement	Degree or diploma	16	56.5
Douglas HRMT Advanced Post Bacc Diploma	Degree	20	60
Douglas HRMT Post-Degree diploma	Degree	10	30
SFU HRMT Certificate – Continuing Studies	None	9	n/a

Table 2 compares the tuition and fee structure of the five programs. Also included for the KPU program is the tuition and fees for the recommended change to category 2.a.3. The Faculty has revised the HRMT program curriculum, reducing it to 33 credits effective September 2026, so that scenario is also included in the table. All fees are for Academic Year 25/26, except for the SFU, which is for calendar year 2026.

At the current rate of 2.a.9, including tuition and all fees, KPU's program is over twice the cost of the next most expensive program, and roughly three times the cost of the other three programs. Even at the reduced rate of 2.a.7, KPU's program would be about double the cost of the three lower cost programs with its current credit structure. At 33 credits, with the current fee rate, KPU's program is more than double the cost of most these programs, but with the reduced fee, the cost to students is under that of the Post-Bacc. from Douglas, the next highest cost program.

The reduction in both credits and tuition rates for KPU's program results in a cost reduction from $19,777.52 to $7,760.78, a 61% reduction in cost to the student.

Table 2: Program Tuition and Fees

Program	Tuition	Tuition + Fees
KPU HRMT Post Bacc. Diploma at 2.a.9 fee (42 credits)	$17,222.94	$19,777.52
KPU HRMT Post Bacc. Diploma at 2.a.3 fee (42 credits)	$9,231.18	$9,877.36
KPU HRMT Post Bacc. Diploma at 2.a.9 fee (33 credits)	$13,532.31	$14,479.57
KPU HRMT Post Bacc. Diploma at 2.a.3 fee (33 credits)	$7,253.07	$7,760.78
BCIT HRMT Diploma with Advanced Placement	$5,695.74	$6,740.34
Douglas HRMT Advanced Post Bacc. Diploma	$7,970.00	$9,950.00
Douglas HRMT Post-Degree diploma	$4,280.00	$5,270.00
SFU HRMT Certificate – Continuing Studies	$6,921.00	$6,921.00

Domestic headcounts for four of the five programs over the past five years are shown in Table 3, below. Enrolments for SFU's continuing studies program were not available. As mentioned previously, KPU's enrolments have declined, while Douglas's have increased. Reducing the credits in KPU's program to 33 would be similar to Douglas' Post-Degree program, which has had the best enrolment in recent years.

Table 3: Domestic Enrolments by Program by Academic Year

Program	19/20	20/21	21/22	22/23	23/24
KPU HRMT Post Bacc Diploma	21	18	19	15	11
BCIT HRMT Diploma with Advanced Placement	20	23	21	16	13
Douglas HRMT Advanced Post Bacc Diploma	4	3	4	9	16
Douglas HRMT Post-Degree diploma	3	16	26	19	26

Comparison with Douglas Collage

Douglas College's HRMT Post-Degree diploma is the most comparable of the other programs, so a closer comparison with Douglas' tuition is warranted. Douglas College tuition is lower than KPU's for all programs. Douglas charges $119.00 per credit for most lower-level courses, and $142.55 for most upper-level courses. The HRMT Post-Degree diploma is in the latter category. The lowest tuition fee per credit charged by KPU is $162.84. That covers the majority of KPU's undergraduate courses. Post-Baccs and other newer programs are charged at rates higher than $162.84 because of the cost to deliver the course. Just considering the salary and benefits of the instructor, a 35-seat course with all 35 seats filled with domestic students paying $162.84 per credit, costs $1,034.69 more than the tuition revenue it brings in. We rarely fill 100% of seats in a class, and many courses have maximums well under 35 seats, so the actual difference between revenue and instructional cost is higher. Assuming we filled all 35 seats and charged our lowest tuition of $162.84 per credit, the program would cost KPU $11,382 per year just to cover instructor's salaries and benefits. This doesn't consider the overhead of running the university. If we charged the same tuition that Douglas does, $142.55 per credit, KPU would need to subsidize the program by at least $34,817 annually. Charging the proposed fee of $219.79 per credit ensures the cost of instruction is covered, as long as there are at least 28 domestic students in each class.

Not only is it not financially feasible to charge the lower tuition that Douglas College charges, there is no evidence that we need to match Douglas's tuition. All KPU programs are more expensive than those offered by Douglas, yet thousands of students choose KPU each year despite the higher tuition. We know from our annual Student Satisfaction Survey that location is the top reason why domestic students choose KPU, followed by having the program they want. Tuition is in third place, tied with small class size, and easier admission requirements.

KPU's HRMC Post-Baccalaureate Diploma program is intended to serve the large and growing population of the KPU region south of the Fraser. It is expected that reducing the tuition from 410.07 per credit to 219.79 per credit will substantially reduce financial barriers to attendance, so that students in our region will chose KPU's program rather than travel over the Fraser River to Douglas College. In addition, other changes being made to the program's curriculum, should make the program more attractive.

Another factor to consider is that KPU is a university, whereas Douglas is a college. There can be prestige associated with attending a university and could be another factor influencing students' choice of KPU over Douglas.

Assessment of Impact on KPU:

Table 4, below, provides the number of graduates in KPU's Post-Bacc. program. In recent years, almost all graduates were international students.

Table 4: KPU Graduates

Academic Year	18/19	19/20	20/21	21/22	22/23	23/24
Domestic	4	10	9	2	2	4
International	7	24	6	2	106	120
Total	**11**	**34**	**15**	**4**	**108**	**124**

The number of domestic graduates has been very low in recent years due to two reasons: low student demand, as shown in Table 3, and low graduation rates, as illustrated in Figure 1, below. While most international students graduate within a couple of years of starting, most domestic students leave without graduating.

Figure 1: Retention of Domestic and International students in KPU's HRMT Post-Bacc. Diploma
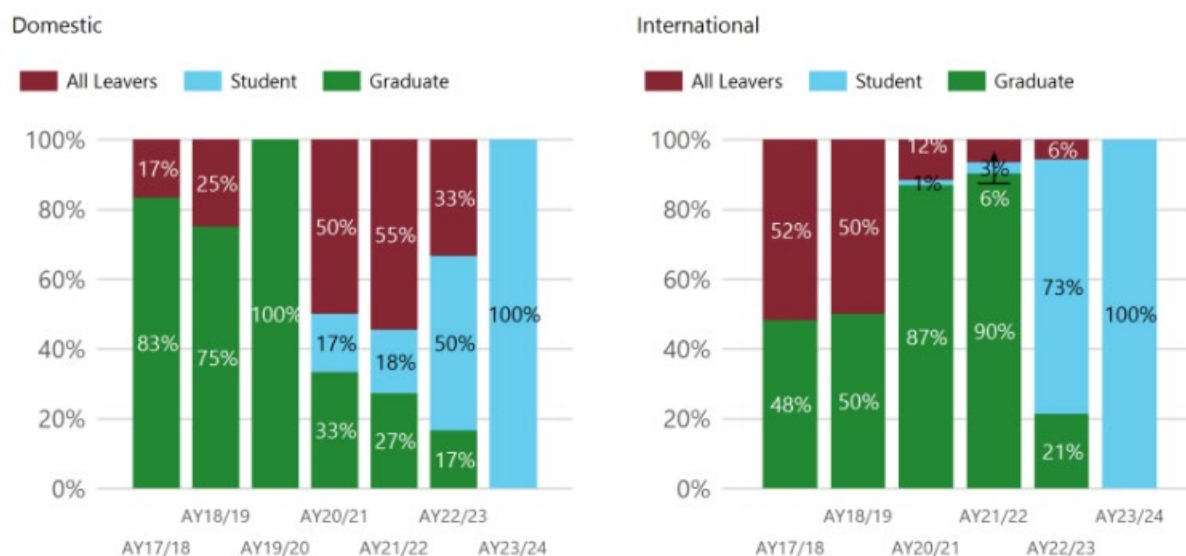
If the tuition reduction doesn't increase enrolments and retention in the program, KPU would forgo $13,437.57 in revenue (tuition and KPU fee of 7% of tuition) for each student who completes the program with the new tuition fee and 33 credits. At the same time, the cost instructor salary plus benefits will be reduced by about $36,256 due do the reduction in the size of the program. Even without increasing enrolments, with the lower delivery costs, the program's finances are improved.

Reducing tuition will make the program more competitive, as will reducing the number of credits. These changes should increase demand for the program, especially if marketed effectively. The reduced tuition may also increase retention, since the high tuition may be a barrier to completing the program. If the tuition reduction increases the number of students who enrol in the program and complete it, about one and three-quarters additional students at the new rate would almost cover the forgone revenue for two students at the old rate. Given the low number of students currently taking the program, and even lower number completing it, we don't need to increase enrolments by much to offset the forgone tuition at the higher rate. Making the program more competitive will likely increase in demand, and retention, resulting in higher revenue from the program.

Appendix A: Program Descriptions

KPU in Human Resources Management Post-Baccalaureate Diploma

Features:

- Two years, can be taken full- or part-time; can be completed in 16 months full-time
- 42 credits
- 13 required courses, including a practicum
- Includes a co-op option
- Combination on online and hybrid (partially online) courses
- Intakes in September only
- Degree or equivalent combination of education and experience required for admission
- Graduates with a 2.67 GPA or above can apply for exemption for the CPHR exam for CPHR certification
- Program Domestic Tuition $17,222.94 (AY25/26)
- Fees: $2,554.58 ($1,205.40 KPU fees + $1,349.18 KSA Fees assuming completed in one year)
- Total Domestic cost: $19,777.52
- Text: $unknown

BCIT Human Resources Management Diploma with Advanced Placement

Features:

- 9-month, full-time
- 16 courses, including a consulting projection in their final term, where the students work on a real human resource problem for a company.
- 56.5 credits
- In-person
- Degree or diploma required for admission, also recommend students take an introductory HR course before starting the program
- Intakes in September only
- Graduates with 70% or above can apply for exemption for the CPHR exam for CPHR certification
- Program Domestic Tuition $5,695.74 (AY25/26)
- Fees: $1,044.60
- Total Domestic cost: $6,740.34
- Text: $1,620

Douglas College Advanced Human Resource Management Post-Baccalaureate Diploma

Features:

- 2-year duration
- 60 credits
- 20 courses, including a few options, including an internship course option
- Includes a co-op option
- 3 intakes a year, fall, winter and summer

- Degree required for admission
- Graduates with 70% or above can apply for exemption for the CPHR exam for CPHR certification
- Program Domestic Tuition $7,970 (AY25/26)
- Fees: $1,980
- Total domestic costs: $9,950
- Textbooks: $1,750 each year

Douglas College Human Resource Management Post-Degree Diploma

Features:

- 1-year duration
- 30 credits
- 10 courses, 9 specific courses, plus one of two options
- 3 intakes a year, fall, winter and summer
- Degree required for admission
- Graduates with 70% or above can apply for exemption for the CPHR exam for CPHR certification
- Program Domestic Tuition $4,280 (AY25/26)
- Fees: $990
- Total domestic costs: $5,270
- Textbooks: $1,750

SFU Human Resources Management Certificate

Features:

- Continuing Studies, part-time, online
- Self-paced with set deadlines
- 9 required courses
- Each course is 8 weeks in duration, 7-10 hours per week
- Continuous intake, no admission requirements
- Accredited by CPHR BC & Yukon
- Graduates with a B- or above can apply for exemption for the CPHR exam for CPHR certification
- Graduates eligible for admission into SFU's graduate diploma in Business Administration
- Program domestic tuition in 2026: $6,921
- Total domestic cost: $6,921
- etextbook: $77.95

Appendix B: Program Courses

KPU Post-Baccalaureate Diploma in Human Resources Management

Course Requirements:

- Financial and Managerial Accounting for Managers
- Quantitative Methods for Business Analysis
- HR & the Business
- HR Management
- Professional Communications for HR Professionals
- Talent Acquisition
- Human Relations & Intercultural Fluency
- Health and Safety
- Total Rewards
- Talent Management
- Organizational Development & Leadership
- Labour and Employee Relations
- Strategic Human Resources Management Practicum

BCIT Human Resources Management Diploma with Advanced Placement

Course Requirements:

- Human Resource Management Law
- Finance 1 – Administration
- Labour Relations and the Collective Bargaining Cycle
- Talent Acquisition and OnBoarding
- Employee Development
- Employee Relationships and Conflict Management
- Strategic Human Resources
- Management Science
- Management Policy
- High-Performance Culture
- Total Rewards
- People Analytics and Technology
- Applied Change Management Workshop
- Business Consulting Projects
- Workplace Health, Safety and Wellness

Douglas College Advanced Human Resource Management Post-Baccalaureate Diploma

Course Requirements:

- Management Essentials
- Human Resource Management
- Introductory Business Law

- Introductory Marketing
- One of either:
  - Academic Writing
  - Business Communications
- Employment Law
- Excel for Business
- Financial and Managerial Accounting for Managers
- Workforce Planning and Talent Management
- Occupational Health and Safety
- Business Ethics
- One of either:
  - Organizational Management Skills
  - Behaviour in Organizations
- Ethical Management and Decision Making
- Labour Relations
- Innovation and Change Management
- Training, Development and Performance Management
- Managing Personal Conflict
- Business Strategy and Competitive Analysis
- HR Metrics and Total Rewards
- One of either:
  - Principles of Microeconomics
  - Principles of Macroeconomics
  - The Canadian Economy
  - Experiential Learning & Internship

Douglas College Human Resource Management Post-Degree Diploma

Course Requirements:

- Management Essentials
- Human Resource Management
- Employment Law
- Financial and Managerial Accounting for Managers
- Training, Development and Performance Management
- Workforce Planning and Talent Management
- Labour Relations
- Occupational Health and Safety
- HR Metrics and Total Rewards
- One of either:
  - Organizational Management Skills
  - Behaviour in Organizations

SFU Human Resources Management Certificate

Course Requirements:

- Human Resources Management in Canada
- Organizational Engagement
- Workplace Health, Safety and Wellness
- Workforce Planning and Talent Management
- Accounting and Financial Management Essentials
- Learning, Development and Performance Management
- Employee Total Rewards
- Employee and Labour Relations in Canada
- Strategic Human Resources Management

BOARD OF GOVERNORS - REGULAR MEETING

Agenda Number: *10*
Meeting Date: *Wednesday, November 26, 2025*
Presenter(s): *Bruce Choy, President and Vice Chancellor*

AGENDA TITLE: REQUEST TO REVIEW KPU'S MISSION, VISION AND VALUES IN ACCORDANCE WITH GV10

ACTION REQUESTED: Motion

RECOMMENDED RESOLUTION

THAT the Board of Governors approve Dr. Bruce Choy to review KPU's Mission, Vision and Values, in accordance with KPU Policy GV10 Mission, Vision and Values Development and Amendment Policy.

COMMITTEE REPORT

For Secretariat Use Only

Context and Background

In 2018, KPU created VISION 2023 which served as KPU's Strategic Plan, with revised Mission, Vision and Values statements and 15 goals organized under five interconnected themes. Vision 2026 was approved by the Board of Governos in May 2023. It added a new goal on the health and wellness of students and employees, a new set of values and other language improvements.

Key Messages

1. Vision 2026 will be expiring soon. A new Strategic Plan needs to be developed to provide clear direction and leadership to the KPU Community. In order to have a new plan in place by the end of the governance year (June 2026), the process and consultations will need to start in early 2026.

2. GV10, Mission, Vision and Values Development and Amendment Policy and Procedures, requires that the Board of Governors and Senate receive and approve any requests to amend KPU's mission, vision and values (in whole or in part).

Implications/Risks

If a review of the Strategic Plan does not start in early 2026, the consultations may not be completed on time and KPU could have an out of date plan.

Submitted by

Dr. Bruce Choy

Date submitted

October 23, 2025

Report to the Board of Governors
Dr. Bruce Choy, President and Vice-Chancellor
Regular Meeting
November 26, 2025

1.   Purpose and Context

1.1.   The purpose of this report is to provide a summary update of key activities and events at the University and the environment we are operating in for the prior period. It is for information only.

2.   Recommendation

2.1.   It is recommended that the Board of Governors note this report.

3.   Federal Budget and Future Implications

3.1.   On November 4, 2025, Canada's Finance Minister François-Philippe Champagne delivered the 2025 Federal Budget in the House of Commons. The budget confirms that the significant and ongoing risk to KPU's revenue streams from international student fees is here to stay. It locks in a structural change; graduating international students will not be succeeded by cohorts of a similar size.

3.1.1.   The federal government has set significantly lower targets for international student permits, with annual caps of 155,000 in 2026, and 150,000 in 2027 and the same in 2028 (where the 2025 target was 305,900 but had included research masters and PhD students). Government actions to date have already resulted in a 60% decline in new international student arrivals compared to 2024 levels. This policy target ensures international student levels will continue the downward trajectory.

3.1.2.   The number of new permanent residents will be set at 380,000 per year for 2026, 2027, and 2028, slightly below the 395,000 planned for 2025. To offset the narrowing pathway for graduates to remain in Canada, the government plans to prioritize and increase the share of permanent residents admitted under the economic migrant category to 64%, up from 59%.

3.1.3.   The announcement of these two policies continues the damage to Canada's global education brand. International students in key markets are expressing concern about investing in a future in Canada and are actively choosing other destinations for western higher education credentials.

3.2.   Other signature policies that on face-value look to enhance our sector, also do not provide any direct support from a specific KPU perspective,

3.2.1.   Up to $120m has been allocated to recruiting top academic talent to universities. Politically, this is targeting discontent about academic freedom and political influence on research in the U.S. and will disproportionally benefit U15 research universities. It distorts the employment market and disadvantages the mobility of local academics.

3.2.2.   The federal budget had a focus on enhancing skilled trade capacity needed to support ambitious infrastructure, nation building programs. However, these funds are primarily being channeled into union-based apprenticeship training rather than directed into college/polytechnic institutes such as KPU.

3.2.3.   'Big bets' in research sees the lion's share of new research funding in the fields of artificial intelligence and quantum computing (with over $1 billion dollars allocated over five years). Neither field are research areas of where KPU has a competitive advantage and has high infrastructure/compute investment needs.

4.   Looking Towards other Opportunities from Victoria/Ottawa

4.1.   On November 14, Premier Eby and Minister Sunner (Post-Secondary and Future Skills) announced a significant funding package of $54 million for skilled trades training, scaling up over three years. s. Allocation rules are still to be announced as to how much KPU will directly benefit. It will be used to increase per-seat funding as well as to address waitlists for targeted trades.

4.2.   I spent four days in Ottawa in early November along with other university and polytechnic Presidents, as part of lobbying efforts across different ministries. Despite the disappointing headlines from the budget and IRCC, there were other opportunities to diversify revenues. These included the Natural Sciences and Engineering Research Council (NSERC) of Canada expanding several of their initiatives including a sizable increased commitment to their Research Chairs program; Department of National Defense expressing interest to partner specifically with polytechnics to help them advance their Arctic strategic priority; and,- the Ministry of Jobs and Family signaling that it is keen to fund youth unemployment initiatives.

5.   Focus on Safety and Security

5.1.   New provincial Ministry guidance and legislation was introduced concerning sexual violence in the post-secondary education sector. On October6 , Minister Sunner announced she was introducing legislation and an action plan to support institutions in supporting and responding to sexual violence. The new *Sexual Violence Policy Act* updates and replaces the existing 2016 *Sexual Violence and Misconduct Policy Act*, with strengthened consultation requirements, increased accountability and transparency, and policies that are guided by a trauma-informed approach. KPU complies with the existing legislation and already aligns with best practices; minimal changes are expected.

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5.2.   Dr Tara Lyon's *Walk with Me* well-being initiative hosted MLA Amna Shah, Parliamentary Secretary for Anti-Racism Initiatives and Parliamentary Secretary for Mental Health and Addictions, at KPU on October 15. Ms Shah spoke about the priority need for studies on the impact of the toxic drug crisis on university students.

5.3.   October saw the return of cybersecurity awareness month with the launch of refreshed mandatory security awareness training across all KPU employee groups. Additionally, the senior administration team has started a series of desktop crisis scenario simulations to strengthen our risk management preparedness and capabilities.

6.   Search for next KPU Chancellor Commenced

6.1.   On October 9, a search committee was convened to identify a successor to Chancellor Kim Baird, whose term ends mid 2026. Chaired by the new President of the KPU Alumni Association, Mr Henry Flowers, we plan to have nominated a new Chancellor candidate in early 2026 for ratification by our bicameral governing bodies (i.e. Senate and Board of Governors)

7.   Select University Activity Highlights

7.1.   There has been considerable activity in student recruitment initiatives. These have included: KPU *Open House* which was a large-scale event held at our Surrey campus on October 4 and saw over one thousand registered guests visit KPU. A fee waiver initiative for the day saw the locking in of 77 on-the spot new applications demonstrating the importance of such face-to-face marketing of our offerings. The Richmond campus held a similar student recruitment initiative called *Creative Connections* focused on our creative sector offerings on October 18.

7.2.   On October 8, KPU signed an agreement with Alexander College to provide pathways for their students to enter one of three KPU target programs: the Bachelor of Science in Health Sciences, Bachelor of Arts in Psychology, and Bachelor of Psychiatric Nursing.

7.3.   The VP Students, Zena Mitchell, was in China from October 17 to 27 to further advance KPU's student recruitment efforts in this critical international market. She visited four cities and numerous partners, as well as explored a new pathway collaboration that includes an online component at the beginning of their program to help with the situation with international student permits.

7.4.   The Melville School of Business was the title sponsor for the 2025 Canadian Digital Marketing Summit held on Surrey campus on October 2, attracting over 200 in-person attendees, including marketing professionals, business leaders, and educators. This partnership offered a platform to showcase MSB's deep connection with industry.

7.5.   On November 13, an Indigenous Land Awakening ceremony was conducted by leaders from the Kwantlen First Nation and Semiahmoo First Nation, and in partnership with Métis Nation British Columbia. This marked the positive start of the 61-space childcare facility on Surrey campus.

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8.   Notable Partnerships, Grants and Donations

8.1.   Two KPU researchers were awarded coveted Canadian Research Chairs on October 22. Dr Lisa Monchalin and Dr Cayley Velazquez have combined secured over $1 million for research funding for KPU:

8.1.1.   Health scientist Dr Velazquez studies the intersection of race, food and health to better understand what is impacting the availability, accessibility and utilization of food here in Surrey. Her work in collaboration with numerous local partners is making a direct impact on our community.

8.1.2.   Criminologist Dr Monchalin has a long-standing commitment of investigating miscarriages of justice and false accusations in Canada, particularly those affecting Indigenous Peoples. Her research shines a necessary light on this chapter of our history, helping us move forward as a more just society.

9.   Other

9.1.   In my first months as President and Vice-Chancellor, I continue to focus on making new connections and engage with the KPU community and external key parties. This has included being featured in an article by student newspaper, The Runner; participating in KPU led community events, such as the Movember 24hr Bike-a-thon; speaking on a panel for the Pan-Asian leadership organization, Ascend Canada's gala event; and joining other university and polytechnic Presidents in Ottawa for lobbying efforts etc.

Appendix

Link to The Runner article can be found here:
https://runnermag.ca/2025/10/kpus-new-president-brings-transformational-leadership-to-the-university/

4

Vice Chair's Report to Board of Governors

Notes from the Senate Meeting of September 29, 2025 to the Board of Governors

The 2025 Senate meeting was held at the Surrey Conference Centre, where members of all Senate Committees were invited to attend, observe proceedings, and participate in a meet-and-greet with those who support, advise, or represent the KPU community on Senate. Senate was honoured by the presence of Elder Lekeyten and his wife Cheryl, who graciously shared insights into Kwantlen history and emphasized the importance of acknowledging Indigenous territories and voices.

All motions on the agenda were passed, including bylaw revisions from the Graduate Studies Council and the Faculty of Academic and Career Preparation, the approval of academic schedules for the next three years, and the establishment of Search Advisory Committees for three Associate Dean positions across various faculties. The meeting concluded with the unanimous approval of the September 2025 list of graduates.

Following the meeting, senators and observers stayed to enjoy refreshments, reconnect with colleagues, and welcome new members to the Senate community.

On behalf of Senate, I wish all members of the KPU Board of Governors a successful and fulfilling year ahead. We look forward to continued collaboration in support of KPU's academic mission and shared governance.

Catherine Schwichtenberg
Vice Chair, Senate

Vice Chair's Report to Board of Governors

Notes from the Senate Meeting of October 27, 2025 to the Board of Governors

Senate met on Teams, chaired by Dr Choy.

Dr Choy provided an update on his first month in office, which included the news that Health Science Instructor Dr Cayley Velazquez (Race, Food and Health) and criminologist Dr Lisa Monchalin (Wrongful Convictions) were each awarded Tier2 Canada Research Chairs in their respective areas. Bruce also emphasized the importance and focus on campus safety. Dr Purvey, Provost provided a variety of updates but focused on the many collaborative initiatives occurring between Faculties and also between Faculties and Industries.

After each Dean presented their list of graduands, Senate approved the entire list as presented by University Registrar Nadia Henwood.

Curricular motions were mainly about improving access or removing barriers. These included prerequisite removal from four EDAS and one Health Science course, and the removal of the portfolio requirement from Entertainment Arts. Senate Governance and Nominating had a stellar list of appointments to Senate committees. Finally, a plan to incorporate UN Sustainable development Goals in Program Quality Assurance Plans was supported.

Respectfully

Catherine Schwichtenberg
Vice Chair, Senate