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Policy:

SACL is committed to providing accessibility to its services, and does this through the identification and reduction or removal of barriers within the organization's operations, and where applicable, within the community. When barriers are identified that impact upon Persons Served at SACL but are outside of SACL's control and influence, the Association will advocate for their removal.

Procedure:

The organization evaluates the existence of barriers formally on an annual basis, and as needed in response to input by the Persons Served, Personnel, and other Stakeholders. Barriers are identified, and actions to reduce or remove the barrier are recorded.

The formal accessibility evaluation includes:

1. The Administrative Supervisor, or designate, completes the "Accessibility Checklist" annually, as well as compiling input from Persons Supported, Staff & Stakeholders as a means to evaluate where accessibility barriers exist.
2. The evaluation process may involve:
 - ❖ Inspection of all Service areas & sites
 - ❖ Interviews or focus group with Persons Served, Personnel & Stakeholders
 - ❖ Review of the organizations promotional material
 - ❖ Review of records of concerns, complaints or suggestions regarding issues of inappropriate attitudes
 - ❖ Review of satisfaction survey results
 - ❖ Review of hiring patterns
 - ❖ Review of Advocacy activities
3. The Administrative Supervisor prepares the "Accessibility Report/Improvement Plan" (annually), identifying existing barriers for Persons Supported and the corrective actions to be taken to remove or minimize the barrier. The report identifies each barrier; a proposed solution; facilitation provided until barrier is removed; person responsible for action; projected cost; and target date for completion.
4. Corrective action is implemented, as indicated in the report.
5. The Executive Director monitors progress and provides a status report to the Board of Directors on an annual basis, identifying progress made.
6. The plan is summarized by the Administrative Supervisor in the SACL Annual Report and is available to Persons Supported, Personnel and Stakeholders upon request or via the SACL Website.

Input from Persons Supported, Personnel, and Stakeholders about accessibility issues are to be directed to the Administrative Supervisor, or the OH&S Committee. The Administrative Supervisor reports to the Executive Director, who responds within five working days by assessing the issue through the means described above (See item 2). Where necessary, and “Accessibility Report and Improvement Plan” is updated.

Description of Accessibility Barriers:

Architectural (Physical Barriers):

May include, but not limited to; access to a building for an individual who uses a wheelchair, narrow doorways that need to be widened, bathrooms that need to be made accessible, the absence of light alarms for individuals who have hearing impairment, and the absence of signs in Braille for individuals who are sight impaired.

Environment:

may include, but are not limited to: any location or characteristic of the setting (internal or external) that compromises, hinders, or impedes service delivery and the benefits to be gained. Some service sites may be located in areas where the persons served and/or personnel do not feel safe or that confidentiality may be risked. Internal may include; noise level, lighting, fragrances in the workplace, lack of sound proof counselling rooms, highly trafficked areas used for service delivery, or type or lack of furnishing and décor that impact the comfort level of the Persons Supported or personnel.

Attitudes:

May include, but are not limited to: the terminology used by Personnel and Stakeholders involved with the organization during interactions with clients, language used in literature about its services, how Persons Supported are viewed and treated by the agency, their families and the community, whether the input of Persons Supported is solicited and used, and whether discriminatory practices exist with regard to eligibility for services.

Finances:

May include, but are not limited to: sufficiency of funds for services, adequacy of advocating for additional funds as necessary, promote activities to directly raise money for the support of a service or Person Supported.

Employment:

May include, but are not limited to: the hiring practices of the organization in relation to its stated mandate of being an equal opportunity employer.

Communication:

May include, but are not limited to: appropriateness of the ways in which information is provided to clients and stakeholders – use of plain language, availability of alternate forms of communication (audio, large print, braille etc.), and availability of information to members of the community about the services offered.

Technology:

May include, but are not limited to; Developing user-friendly interfaces for websites and assistive technology, addressing needs identified in the agency technology plan, providing accessible and understandable formats of information for Persons Supported.

Transportation:

May include, but are not limited to: accessibility of services by public transit, availability and affordability of parking for those using private transportation that may restrict Persons Supported from participating in the full range of service/supports and activities offered.

Community Integration:

May include, but are not limited to: any barrier that would keep the Person Supported from returning to full participation in their community of choice.

Other Identified Barriers (by Persons Supported, Personnel or Stakeholders):

Any barrier to services and supports identified by the Person Supported, Personnel, or other Stakeholders. These could include those raised by evolving technology, the upkeep of equipment/assistive technology and issues more specific to the populations.



Policy:

Anyone interested in receiving services through Shuswap Association for Community Living must contact CLBC for planning supports and to discuss the Host Agency concept.

Persons Supported who have been referred by CLBC are receiving services through Customized Employment or Individualized Funding.

SACL is a “Host Agency” for families wishing to participate in CLBC Individualized Funding program. The family, CLBC and SACL enter into a contractual agreement to provide services. SACL will assist you to hire, supervise, and if necessary terminate support staff. Families can be as involved as they wish.

Anyone wishing to receive services through SACL who are not eligible to be referred by CLBC, may approach the Executive Director to develop a personal service plan for an individual that may be provided on a cost per service basis. Costs will be determined or equivalent to the funding amounts for service as provided by CLBC.



Applicable To:

All Staff, Volunteers, Board Members, and where applicable, Persons Supported.

Principles:

The Shuswap Association for Community Living has developed the following Code of Ethics to establish guidelines to ensure the highest standards of integrity are practiced in the delivery of services to all Persons Supported, and as to how we conduct ourselves, our business, treat our staff and volunteers, and present our organization to, and within the community.

The Code of Ethics are designed as an ethical guide to apply to the actions of Staff/Volunteers/Board Members, and is to include, but is not limited to:

- ❖ Business
- ❖ Marketing
- ❖ Contractual Relationships
- ❖ Service Delivery
- ❖ Professional Responsibilities
- ❖ Human Resources
- ❖ Prohibition of Waste, Fraud, Abuse & other Wrongdoing

Preamble:

Shuswap Association for Community Living Code of Ethical Conduct is supported by the agency's policies and procedures, and shall read as follows:

The Association strengthens the community by helping Persons Supported to achieve their maximum potential through the provision of quality, ethical supports and services that meet identified needs. This commitment is carried out in a variety of settings and through a wide range of services where our roles can include direct practice, supervision, administration, teaching and training, consultation, and advocacy.

As Employees, Volunteers or Board Members, we play a critical role in the lives of Persons Supported, families, support systems, and the community. Through performing this role, we will encounter situations that have ethical dimensions and implications. Each person has a responsibility to strive to meet high ethical standards of ethical conduct. What follows, is a decision making process and a set of principles intended to guide the Employees, Volunteers & Board Members of this agency to the course of action. Each individual is expected to be consistent with the spirit and intent of decision making process and principles outlined below;

Procedure:

The Association requires its Staff Members, Volunteers, and Members of the Board of Directors to read, understand, and implement the Organizational Code of Ethics for the Society as well as for

their respective professions. Opportunities for learning about the Association's Code of Ethics shall include, but is not limited to:

- ❖ Review of the Code of Ethics during orientation of new employees
- ❖ Inclusion of the Code of Ethics in the Policy and Procedure Manual
- ❖ Inclusion of the Code of Ethics in the Board/Volunteer orientation package
- ❖ Review of the Code of Ethics on an annual basis

Each individual commencing employment, volunteering services, or participating on the Board of Directors must read, understand, agree to adhere to, and sign the Code of Ethics prior to engaging in service provision with SACL. A review of the Code of Ethics and renewed signatures of the Code of Ethics for each Employee/Volunteer/Board Member are obtained on an annual basis. Any updates, changes, or corrections to the Code of Ethics or related agency policies or procedures are circulated to staff via email or the internal agency Nucleus system (com-box) for review and signature. Any Staff/Volunteer/Board Member who is found in violation of the SACL Code of Ethics may face corrective or disciplinary action, up to and including dismissal.

Ethical Decision Making

When a situation or course of action presents an ethical dilemma that cannot be easily resolved by reference to the principles outlined below, Employees/Volunteers/Board Members will first consult with their peers and/or their Services Manager/ Executive Director. The use of the following decision making model is recommended for resolving the dilemma:

- ❖ Identification of the ethical issues and the principles that might apply
- ❖ Development of alternative courses of action
- ❖ Analysis of likely short-term, ongoing, and long-term risks and benefits of each course of action regarding the issue involved
- ❖ Choice of a course of action
- ❖ Action, with a commitment to assume responsibility for the consequences of the action
- ❖ Evaluation of the course of action
- ❖ Assumption of responsibility for consequences of the action, including correction of negative consequences (if any and if possible) or re-engaging in the decision making process if the ethical issue is not resolved

BUSINESS PRACTICES

Board of Directors:

1. Board Members are responsible for adhering to the policies and procedures as specified in the Board Governance Policy Manual and all subsequent policy revisions of the *Shuswap Association for Community Living*
2. Board Members are responsible for preventing real or perceived conflicts of interest to protect the integrity of the *Shuswap Association for Community Living*
3. Contravention may result in a request for a Board Member/Director to resign from the Board and/or other sanctions

Board Members Shall:

- ❖ Perform duties with integrity and in a way that will maintain public, Stakeholder and Board Member confidence in the *Shuswap Association for Community Living*

- ❖ Ensure no real or perceived advantage is taken by virtue of their position or from information obtained due to their position as a Board Member, and
- ❖ Immediately disclose to the Chair of the Board or to the Board Members at the Board meeting any existing or potential conflict of interest on any issue. This disclosure will be recorded in the minutes

Conflict of Interest:

SACL recognizes the right of Staff, Volunteers & Board Members to be involved in activities as citizens of their community. However roles as private citizens must be kept separate and distinct from their responsibilities at SACL.

Staff, Volunteers, and Board Members should not place themselves in a situation where they are under obligation to any person who might benefit from or seek to gain special consideration or favour. The honesty and impartiality of SACL Staff, Volunteers, and Board Members must be above suspicion.

Conflict of Interest can include;

- ❖ Where SACL Staff, Volunteer, or Board Member's private affairs or financial interests are in conflict with his/her duties, responsibilities, and obligations or may result in a public perception that a conflict exists.
- ❖ Where SACL Staff, Volunteer, or Board Member enters into contract, whether written or verbal, with Community Living BC or another service provider, to provide Community Living services. This includes the full spectrum of Community Living services including, residential, day or respite services.
- ❖ Where SACL Staff, Volunteer, or Board Member performs in a way as to make it appear to be an official act or to represent the Associations' option or policy.
- ❖ Where SACL Staff, Volunteer, or Board Member's actions would compromise or undermine the trust that the public places in the Association.

(See Business Practices portion of the SACL Policy and Procedure Manual – BP--Conflict of Interest)

Financial and Business Practices:

- ❖ All SACL financial and business practices shall be handled in accordance with all applicable federal, provincial and local legislation.
- ❖ All SACL financial and business matters shall be conducted with the standards of commonly accepted, sound financial management practices.
- ❖ All SACL financial and business matters that fall within the purview of the Association's financial management policies shall comply with those policies.
- ❖ All SACL financial and business matters covered by the Association's Bylaws/Board Policies shall be handled in accordance with those Bylaws/Board Policies.
- ❖ All contractual agreements shall be negotiated and entered into in accordance with the agency code of ethical practice, and adhere to objectives of the society as outlined in the mission, vision and ENDS policies.
- ❖ Any request to a SACL Staff Members, Volunteers or Members of the Board of Directors to witness personal or professional documents for a Person Supported, or by the families or caregivers of Persons Supported, shall be immediately directed to the Executive Director for assessment & referral to professional legal advice. SACL will not directly undertake the witnessing of personal or professional documents for persons served due to potential conflict of interest and/or liability issues.

- ❖ Any authorized person/s conducting financial or business matters on behalf of the SACL, who does not comply with the Code of Ethics, are subject to disciplinary action up to and including dismissal.

Administration & Human Resources:

- ❖ All SACL administrative and human resource practices shall be handled and in accordance with all applicable federal, provincial and local legislation, in accordance with the current and applicable collective agreement, CARF Standards, and with applicable agency policies & procedures manual.
- ❖ All Management, Staff, and Volunteers shall treat each other, and each person's professional and personal property, and the property of the agency with the utmost respect.
- ❖ Any complaints from Staff or Volunteers shall be addressed in a fair and timely manner, without fear of repercussions for the complaint as outlined in the agency's policies and procedures
- ❖ Any Staff Member or Volunteer of the agency who does not act in accordance with the agency Code of Ethics is subject to disciplinary action, up to and including dismissal.

Marketing & Fundraising Activities:

- ❖ All SACL marketing and fundraising activities are part of the agency's accountability to the public.
- ❖ All SACL marketing and fundraising activities/efforts shall always respect the dignity and privacy rights of those receiving services.
- ❖ Never will any SACL marketing or fundraising activities knowingly mislead or misinform the public or misrepresent the Shuswap Association for Community Living.
- ❖ All SACL marketing and fundraising activities will uphold the integrity of the agency so as to merit the continued support and trust of the public.
- ❖ No individual Staff Member, Volunteer, or Board Member shall solicit funds on behalf of a personal cause. Fundraising shall be strictly limited to approved efforts relating to the mission, vision, and the strategic plan of Shuswap Association for Community Living, as designated by the Board of Directors.
- ❖ All SACL marketing and fundraising activities shall be in accordance with applicable agency policies and procedures.

Waste, Fraud , Abuse or other Wrongdoing:

- ❖ The Shuswap Association for Community Living is committed to the responsible stewardship of our resources and encourages any individual who is aware of, or suspects acts of fraud, waste or abuse of organizational resources to report such acts as outlined in the SACL policy **Reporting of Waste, Fraud, Abuse and other Wrongdoing**. SACL does not tolerate fraudulent or other dishonest behaviour and will take appropriate action upon receiving such reports

(See Business Practices section of the Policies & Procedures –Reporting of Waste, Fraud, Abuse and other Wrongdoing)

Acceptance of Gifts

No Staff Member, Volunteer, or member of the Board of Directors shall accept compensation or rewards from individuals or agencies because of the position they occupy in Association. Money or other gifts offered should be firmly but kindly refused.

Setting of Boundaries, Physical Contact and Sexuality

- ❖ No Staff Member, Volunteer, or Member of the Board of Directors, under any circumstances, shall engage in a romantic or sexual relationship with any Persons Supported.
- ❖ SACL Staff, Volunteers, and Members of the Board of Directors, are not encouraged to pursue a romantic or sexual relationship with other Staff, Volunteers, or Members of the Board of Directors. Such a relationship, if conducted outside the scope of service provision and away from the agency during the hours of professional employment, is left to the ethical decision making process of each individual. However, should the romantic or sexual relationship interfere with or negatively affect service provision or the agency reputation within the community, the trust or comfort of Persons Supported, other employees, or the professional responsibilities of the individuals involved in the relationship, the Executive Director will have the obligation under the agency's ethical practices to address the matter with the individuals involved, and take appropriate action to resolve any unethical situation for the protection of the agency and Persons Supported. This may include disciplinary action up to and including dismissal.
- ❖ Sexuality of Persons Supported will be respected as a natural and integral part of the development and growth of all human beings. Specific guidelines and procedures are outlined in the SACL policy **Sexual Expression**
- ❖ Physical contact between Staff and Persons Supported is also a natural and integral part of Persons Supported development and growth. Care will be taken by Staff to respect the individual wishes and comfort levels of the Persons Supported. Persons Supported are discouraged from showing excess or violent physical contact to staff members.

(See the Service Delivery section of SACL Policies and Procedures –Sexual Expression)

SERVICE DELIVERY

Service Delivery will be characterized by integrity in decision-making, freedom of choice for program participants, and the priority of professional responsibilities over personal interests.

All Employees/Volunteers/Board Members of the Association will conduct themselves consistent with the following ethical principles:

Respect for the uniqueness of the individual including their values and beliefs as well as their potential for growth and development.

Practice Implications:

- ❖ Ensure that individual differences including values and beliefs are respected
- ❖ Maintain a client-centred perspective in our approach to service delivery
- ❖ Assist Persons Supported to develop to their full potential
- ❖ Look for and promote strengths and capacity in Persons Supported

Respect for, honouring of, and upholding a duty to protect the rights of participants

Practice Implications:

- ❖ Recognize and respect participant confidentiality
- ❖ Protect and promote legal and human rights of participants

- ❖ Ensure that all Persons Supported have the opportunity to provide informed consent to services to the greatest extent possible

Promoting the health, safety and well-being of all participants, their families and support networks, and the communities they live in.

Practice Implications:

- ❖ Promote the physical, mental, social, emotional, and spiritual health of the Persons Supported
- ❖ Ensure that safety is a priority in the delivery of all agency programs consistent with CARF requirements and agency Health & Safety policies & procedures.
- ❖ Where possible, participate in activities that promote the health and safety of the community consistent with the Association's Mission and Values.
- ❖ Maintain sensitivity and responsibility to the community's needs

Caring, support, and striving to enhance the dignity of Persons Supported

Practice Implications:

- ❖ Respect the privacy, dignity, and worth of Persons Supported and their property
- ❖ Show compassion and empathy in the services we provide
Refrain from any activity that might embarrass, belittle, or demoralize participants

Practices that emphasize partnerships with the Person Supported, family, support network and the community including other community agencies

Practice Implications:

- ❖ Where possible, take a collaborative approach to service delivery that emphasizes shared responsibility.
- ❖ Endeavour to include and consult families and support networks of the Persons we serve while respecting the wishes and confidentiality of participants.
- ❖ Establish and maintain effective working relationships with community partners and referring sources.
- ❖ Develop and promote the expectations and choices of Persons Supported.
- ❖ Ensure the honest representation of the organization in any business or promotional efforts.

Respect for diversity, cultural heritage and spiritual beliefs

Practice Implications:

- ❖ Show sensitivity to the impact of cultural heritage and spiritual beliefs in the delivery of services.
- ❖ Accommodate cultural and spiritual practices and beliefs to the greatest extent possible.
- ❖ Take reasonable action to prevent and eliminate discrimination in all forms including age, race, skin colour, gender, income, sexual orientation, and disability.

Advocacy for Persons Supported, their families and support networks, fellow professionals and the community

Practice Implications:

- ❖ Endeavour to empower Persons Supported, their families, and support networks
- ❖ Where possible and consistent with the agency's mission and values, advocate for Persons Supported to receive fair and equitable treatment within the society.
- ❖ Ensure that Persons Supported self-determination is respected to the greatest extent possible.
- ❖ Engage in actions that prevent the abuse, neglect, or exploitation of Persons Supported.

- ❖ Advocate for public policies and community services that meet the needs of the Persons Supported we serve.

Commitment to competent and accountable practice that is both ethical and responsible

Practice Implications:

- ❖ Practice our professions to the best of our ability.
- ❖ Practice within the policies and procedures of the Association.
- ❖ Promote ethical conduct within the Association and in the community.
- ❖ Recognize when personal problems, needs, or conflicts can interfere with professional effectiveness and act to eliminate or minimize the impact.
- ❖ Demonstrate integrity in all professional relationships.
- ❖ Identify and avoid all conflicts of interest.
- ❖ Act with diligence, efficiency, and conscientiousness.
- ❖ Abstain from exploiting Persons Supported for advantage or personal gain.
- ❖ Maintain accountable reporting practices including reporting all incidents of abuse or neglect, and all instances where harm or the potential for harm to Persons Supported, Staff or members of the community at large occurs or is present.
- ❖ Ensure that hiring & employment practices are fair, transparent, respect equality and are conducted in the best interests for the Person Supported.

Commitment to excellence through personal, professional, agency, and community development

Practice Implications:

- ❖ Strive to provide the most effective service possible by participating in activities designed to improve the services we deliver.
- ❖ Pursue the knowledge, skills, and self-awareness necessary to be professionally competent.
- ❖ Value participant input to the greatest extent possible.
- ❖ Staff are to keep current and updated with agency internal training and policy/practice reviews.

Perceived Violations of the Code of Ethics:

Staff:

If a Staff Member witnesses what they feel is a violation of the SACL Code of Ethics:

1. Address the concern directly with the person involved. Often people are not aware that their actions are in violation. Outline exactly why you perceive a violation has occurred and how it can be resolved. Respect for the individual being addressed must be observed at all times.
2. If the Staff Member or Volunteer does not agree, or is unwilling to address the situation, confirm an opinion of a perceived violation of the SACL Code of Ethics, and accordingly, the issue is then reported in writing, to the Services Manager. The Services Manager will then arrange a mediation meeting to assess the situation and resolve the matter. The meeting will be documented and documentation will be distributed to all applicable parties within 5 working days of receipt of the original complaint.
3. If step 2 fails to provide a satisfactory resolution, a formal written complaint may be submitted to the Executive Director. The Executive Director will review and investigate the complaint within five (5) working days of receiving the complaint. The Executive Director will hold a mediation meeting with the parties involved, and documentation of this meeting, and the solutions proposed will be distributed to all involved parties within ten (10) working days of receiving the

complaint.

4. If the violation(s) of the Code of Ethics continues beyond the steps listed above, the Executive Director will implement disciplinary action as deemed appropriate to protect the integrity of SACL, up to and including dismissal.
5. A resolution to a claim of violation of the SACL Code of ethics will come to a resolution no later than twenty (20) days after receipt of the original written complaint.
Note: All complaints or concerns must be presented in writing to be considered a formal complaint.

Executive Director, Volunteers & Board Members

If an individual has a concern of breach of the Code of Ethics by the Executive Director, a Volunteer, or a Member of the Board of Directors;

- ❖ Address the concern directly with the person involved. Often people are not aware that their actions are in violation. Outline exactly why you perceive a violation has occurred and how it can be resolved. Respect for the individual being addressed must be observed at all times.
- ❖ If Executive Director, Volunteer or Member of the Board of Directors does not agree, or is unwilling to address the situation, confirm an opinion of a perceived violation of the SACL Code of Ethics, and accordingly, the issue is then reported in writing, to the Chair of the Board of Directors. The Board Chair will review the situation, and arrange a mediation meeting to resolve the matter. The resolution meeting will be documented and documentation will be distributed to all applicable parties within ten (10) working days of receipt of the original complaint.
- ❖ If an appropriate resolution is not obtained at the mediation meeting, the Board of Directors as a whole will review the matter and implement disciplinary action as deemed appropriate to protect the integrity of SACL, up to and including dismissal from service or cancellation of contracts.
- ❖ A resolution to a claim of violation of the SACL Code of ethics will come to a resolution no later than twenty (20) days after receipt of the original written complaint.

NOTE: All complaints must be presented in written form to be considered a formal complaint.



Preamble

Shuswap Association for Community Living strives to provide the highest quality services possible to our Persons Supported, their families & caregivers, and to the community we serve. We ensure the integrity of this process through the development, constant review, and revision of detailed Persons' Supported oriented policies and procedures that are based on applicable Federal, Provincial and Municipal regulations. We aspire to excellence by applying for and attaining accreditation from CARF (Commission for the Accreditation of Rehabilitation Facilities) for service provision. By complying with the required CARF criteria, our organization is able to provide the highest quality of service, and to be accountable to you – the Person Supported, stakeholder and community member.

It is the right of all Persons Supported, their family members/caregivers, staff members, stakeholders and community members to have access to a fair, non-discriminatory process to address their concerns.

Policy:

It is the policy of SACL to ensure prompt investigation and resolution to any issues or concerns received. Complaints must be **documented in writing** on the SACL Complaints/Suggestion Form.

The complaint will not jeopardize future service and there will be no retaliation in any way. In fact we appreciate a person's efforts to let us know if aspects of services are unsatisfactory. All input, both positive and constructive, helps us continue to improve our service delivery and address service gaps.

Complaints will be reviewed on an annual basis to determine:

- ❖ Trends
- ❖ Areas needing improvement

Procedure:

It is important to be able to differentiate between routine problems/issues/concerns that are resolved at the program level by staff and complaints/issues/concerns that rise to the level that they need to be tracked and dealt with through the complaint process.

Criteria that help identify complaints include:

- ❖ Any issue that has been dealt with in the past but according to the complainant is still unresolved.

- ❖ Any issue that requires follow-up and coordination with other staff, including management. This does not include an issue that is dealt with immediately by program staff or that is followed up and closed in a short period of time without any complications, unless the issue falls into the other categories listed. This does not include issues that need involvement of

management and/or policy/process issues that require long term follow up.

- ❖ Any issue that deals with overreaching policy/process concerns that cannot be resolved at the program level. Staff would still close the issue with the complainant in the appropriate manner and document the issue so that management can identify systematic issues that need to be addressed. These issues may include eligibility issues, waiting list issues, etc.
- ❖ Issues/complaints about quality of care being provided that do not meet the level of requiring a critical incident report. Some complainants may contact with concerns about care which are resolved by the staff, which do not identify any major concerns. However, if staff confirms that there is a significant issue about quality of care then this needs to be followed up by management.

Complaints/Suggestion Process

- ❖ Staff person receiving complaint collects as much information as possible/applicable from the complainant on the Complaint form. A complaint must be submitted in writing (Complaint Form) and have a proposed solution or resolution from the complainant.
- ❖ The staff person receiving the complaint then determines, based on the information provided:
 - If an critical incident report needs to be filed
 - If the complaint needs to be referred to a more appropriate person or agency to resolve (key worker, management, CLBC)
 - The amount of time needed to follow up and resolve the complaint
 - SACL's standard is to contact the complainant within three (3) business days to inform them of the progress made on the complaint. Unless otherwise noted, complaints should be resolved within seven (7) business days.

If there is still a problem...

If a complaint resolution has not provide satisfactory results to the complainant, the complainant will be referred to the Executive Director. The Executive Director will immediately initiate an inquiry. The process may include one or more of the following and will be concluded within 7 business days:

- ❖ Talking to the complainant on the telephone and/or meeting with them in person.
- ❖ Talking to the complainant and the other person involved.
- ❖ Reviewing documentation
- ❖ Having a team meeting to come up with workable solutions

The Executive Director will provide written notification to the complainant regarding the actions to be taken in resolving the issue.

If the outcome of the above is still not satisfactory...

If still unsatisfied with the above, the complainant has the right to appeal to their Community Living BC worker.

Community Living BC Complaint Procedure

If, following eligibility acceptance and planning with a facilitator, Community Living BC (CLBC) does not provide any support or inadequate levels of support or the complainant feels that the complainant has been treated inappropriately, there is a CLBC Complaint Resolution Process. Information is available on their website <http://www.communitylivingbc.ca/wp-content/uploads/Learn-about-the-Complaints-Resolution-Process.pdf>

Step One:

There are three ways to file a complaint:

- ❖ Use the on-line form which can be found on the Community Living BC front page (bottom) at www.communitylivingbc.ca
- ❖ Contact CLBC Quality Assurance Office directly at 1-877-660-2522.
- ❖ Visit any CLBC office and ask staff to assist with filling out a short form.

Step Two:

A regional review will be conducted and a response, giving a decision, recommendation(s) will be provided.

Step Three:

If the complainant is not satisfied following a review of the complaint they will be directed to contact CLBC's Manager of Quality Assurance directly at 1-877-660-2522 or ComplaintsResolutionCLBC@gov.bc.ca. The Manager will contact the complainant within 72 hours, initiate a review and provide a written response within 10 days.

If the complainant is not satisfied with the Quality Manager's response, they will be invited to contact CLBC's Chief Executive Officer who will conduct a review and submit a written decision to you within 10 days.

Chief Executive Officer: Seonag Macrae
Address: Suite 700 - 1200 West 73rd Avenue
Vancouver BC V6P 6G5
Phone: 604-664-0101
1-877-660-2522 toll free
Email: seonag.macrae@gov.bc.ca

At any time during the CLBC process above you may and should also take the following steps:

- ❖ Contact your MLA
- ❖ Contact Inclusion BC
- ❖ Contact the Advocate for Service Quality

- ❖ Write to the Minister responsible for Community Living BC.
- ❖ Write to the opposition party.
- ❖ Write to the Premier.
- ❖ When the issue concerns a youth about to transition to adulthood, contact the Representative for Children and Youth
- ❖ Contact the BC Ombudsperson
- ❖ Contact the Family Support Institute (FSI)

1. Contact the MLA

Name: Greg Kylo
 Address: PO Box 607
 Suite 202A – 371 Alexander Street NE
 Salmon Arm, BC V1E 4N7
 Phone: 250-833-7414
 Email: greg.kylo.MLA@leg.bc.ca
 To find your local MLA, visit <http://www.leg.bc.ca/mla/3-1-1.htm>

2. Call or Email Inclusion BC

Inclusion BC's mission is to advocate for children, youth and adults with developmental disabilities and their families to ensure justice, rights and opportunities in all areas of their lives. You can contact Inclusion BC if you need someone to advocate for you. Sometimes we will connect you with someone in your community who can help, and other times we will get involved directly with your situation.

Web: www.inclusionbc.org
 Phone: 604-777-9100 or 1-800-618-1119
 Contact: Karen De Long
kdelong@inclusionbc.org

 Karla Verschoor
kverschoor@inclusionbc.org

3. Advocate for Service Quality, Leanne Dospital).

Phone: 604.775.1238
 Web: <http://www.sdsi.gov.bc.ca/advocate/>

4. Contact the Minister responsible for Community Living BC. (Honourable Michelle Stilwell)

To contact the current Minister responsible for Community Living BC, the complainant will be directed to Enquiry BC to ask to be connected to the Minister responsible for Community Living BC. Enquiry BC will forward you to either the Minister's office or his/her constituency office, and will also tell you the current email address for that Minister.

Telephone (Enquiry BC): 1-800-663-7867

5. Contact the current Opposition Critic for Community Living BC.

The Complainant can reach him/her toll-free by calling Enquiry BC and asking for the Official Opposition Caucus: 1-800-663-7867

6. Write to the Premier, Christy Clark.

Online: <http://www.christyclark.ca/premierchristyclark/contact.php>

Phone: 250-387-1715

Fax: 250-387-0087

7. The Representative for Children and Youth

If the complainant or their family member is a youth transitioning to CLBC's adult services, or is between 19-24 years old, you can contact the Representative for Children and Youth.

Phone: 1-800-476-3933.

Web: <http://www.rcybc.ca/content/home.asp>

8 The BC Ombudsperson (Jay Chalke) is;

- an officer of the provincial legislature
- independent of government and political parties
- responsible for making sure that the administrative practices and services of public agencies are fair, reasonable, appropriate and equitable

Phone: toll-free at 1-800-567-3247

Web: <https://www.bcombudsperson.ca/>

SACL Complaint Forms can be found on our website at:

<http://shuswapacl.com/feedback/#.UoVCiV8WKU>



Policy

Information concerning a SACL Person Supported or the affairs of the Association is privileged and confidential. Employees shall not transmit any information to another person without authorization from the Executive Director. When authorized release of confidential information shall be on a need to know basis. For more information, see the Freedom of Information and the Protection of Privacy Policies. (PIPA)

Procedure

When confidential information is requested, employees must state that they are not authorized to release any information concerning SACL Persons Supported or Association affairs. Employees should then refer the person requesting information to the Executive Director.

Information requests from the media should be referred as above. Employees without appropriate authorization should make no public comments.

A breach of confidentiality will result in disciplinary action up to and including dismissal.

Staff who work for more than one community living agency, micro-board or family, must ensure that they are maintaining both SACL's and the other entity's clients, residents, family member's confidentiality.

All matters and information pertaining to SACL and its Persons Supported, which has been gained within the association, must be treated as confidential. Under no circumstances may Persons Supported or association information be divulged either inside or outside the association other than to persons authorized to receive such information in the course of their duties.

Under no circumstances will any person working in or for the Shuswap Association for Community Living use any such information to his or her personal advantage. Violation of this policy will result in disciplinary action up to and including dismissal.



Policy

SACL recognizes the right of employees to be involved in activities as citizens of their community. However, staff members must keep their role as private citizens separate and distinct from their responsibilities as employees.

Conflicts of interest can include the following situations:

- ❖ Where an employee's private affairs or financial interests are in conflict with his or her work duties, responsibilities and obligations, or may result in a public perception that a conflict exists.
- ❖ Where an employee enters into contract, either written or verbal, with Community Living BC or another service provider, to provide Community Living services. This includes the full spectrum of Community Living services including, residential, day or respite services
- ❖ Where an employee performs in a way as to make it appear to be an official act or to represent the Association's opinion or policy; or
- ❖ Where an employee's actions would compromise or undermine the trust that the public places in the Association.

Employees should not place themselves in a situation where they are under obligation to any person who might benefit from or seek to gain special consideration or favour. The honesty and impartiality of employees must be above suspicion.

Employees may engage in remunerative employment with another employer, carry on a business, or receive remuneration from public funds for activities outside their position provided that:

- ❖ It does not interfere with the performance of their duties as employees.
- ❖ It does not bring the Shuswap Association for Community Living into disrepute; or
- ❖ It does not involve the use of the Shuswap Association for Community Living's premises, services, equipment or supplies to which the employee has access by virtue of their employment.

No staff members shall accept compensation or rewards from individuals or agencies because of the position they occupy in the Association. Money or other gifts offered should be firmly but kindly refused. If a Person Supported or his or her family insists and the gift is of a minor nature (a value of no more than \$20), it may be accepted with the prior approval of the Executive Director. No employee shall sell goods or services to a Person Supported nor accept money or loans from a Person Supported.

Note: There may be special occasions when Persons Supported and Staff choose to exchange gifts. The most prevalent time is at Christmas, when a mutual gift exchange can be done. Those participating in a mutual gift exchange do so of their own volition. There are some Persons Supported who are unable to express their choice, therefore in the spirit of normalization, staff may assist them to participate.



Policy:

The Shuswap Association for Community Living and its Board of Directors wants to be known for being a responsible corporate citizen. We do everything we can to operate in a manner that is sustainable: economically, socially, and environmentally – in the best interest of long-term success for our enterprise.

The Shuswap Association for Community Living 's Service Direction is based on the fundamental rights of every individual, such as the protection of privacy, freedom of opinion and expression, freedom of association, non-discrimination, and the right to be heard.

- ❖ We seek to promote and protect the rights defined in the Universal Declaration of Human Rights of the United Nations within our sphere of influence. We do not tolerate human rights abuses within our own business operations.

Our Staff are key to our success. We base our human resources policies and practices on fairness, equal practices, openness, and mutual respect.

- ❖ We pay competitive and fair wages. We want our staff to have time for family, social activities, leisure and for contributing back to their community.
- ❖ We strive to provide our Staff with a stimulating and challenging working environment and with opportunities for personal and professional development, while expecting from them a high level of performance and commitment to the success of The Shuswap Association for Community Living.
- ❖ We recognize and respect the cultural differences found in the worldwide marketplace. We strive to build and sustain diversity by attracting, developing, promoting, and retaining the best people from all cultures.
- ❖ We believe in constructive dialogue between employer and employees and support the principle of freedom of association.

We want to be a leader in Health, Safety and Environmental Protection.

- ❖ The health and safety of our employees, Persons Supported, community members, and all others affected by our business activities, as well as protection of the environment, have priority in all our activities.
- ❖ We strive to make efficient use of natural resources and minimize the environmental impacts of our activities and our products over their life cycle.

We care about the expectations and concerns of our stakeholders.

- ❖ We recognize the interest of our Stakeholders, employees, community members, the authorities, and the public at large in our societal behaviour, and the health, safety, and environmental impacts of our business.

We integrate the principles of Corporate Citizenship into our business strategies.

- ❖ We give priority to business partners, suppliers, and contractors who share our societal and environmental values, and we support their efforts to promote these values through their business activities.
- ❖ We foster awareness of and commitment to this Policy among our employees; to this end, we provide appropriate information and training to develop their skills.
- ❖ We participate in activities that promote the environment and encourage others to join us.
- ❖ All employees shall comply with this Policy, related Guidelines, and regulations applicable to their area of operational responsibility.



Policy:

In the event that SACL is not able to provide services to an individual who is referred or seeks services from SACL the individual, their family and/or support system will be informed in writing as to why they were refused service provision. If service provision is denied, suggestions will be offered fee for service options, or provided information for alternative services that may be available.

Reasons for Declining Services:

- ❖ Individual does not meet CLBC funding requirements
- ❖ Service offered previously by SACL is no longer offered
- ❖ Individual is self-referred and chooses not to enter into the 'fee for service' requirement.



Policy:

SACL does not discriminate on the grounds of race, colour, national origin, disability, sex, sexual orientation, disability, language or age. SACL endorses a policy of multiculturalism that will affirm and promote the dignity and fundamental worth of all human beings regardless of racial, religious, language, or cultural background. The implementation of all policies shall foster acceptance and understanding of all people and encourage an appreciation of diversity.

Procedure:

1. Anyone whose rights and freedoms, as outlined in the above policy, have not been recognized or who believes he, or she, has suffered discrimination, unequal treatment, or unfair treatment has the right to present their concern(s) to the Executive Director in writing.
2. If the person(s) are not able to reach a reasonable solution with the Executive Director, they may file a formal complaint in writing to the Chair of the Board of Directors.



Policy:

SACL is committed to providing services and supports appropriate to the needs of each person we serve. SACL will make every effort to provide the required services identified by the individual and/or their support team in the scope of SACL Services.

Entrance

All referrals to SACL services come from CLBC.

SACL will consider providing services to self-referred individuals based on a 'fee for service' basis, where the fee for service is equivalent to the funding rates provided by CLBC for that service.

Discontinuation of Services by SACL

A person will not have their services discontinued by the organization until all possibilities have been exhausted within the organization and funding for appropriate alternative support services have been secured.

Services may be considered inappropriate for an individual for any of the following reasons:

1. the current setting is systematically unable to meet the needs of the person
2. different supports/services are required or desired by the person
3. the placement was inappropriate
4. conflicts with co-participants or roommates
5. dissatisfaction with the services provided
6. the service recipient declines service or refuses three consecutive times to take advantage of a requested work/training opportunity and the reason for refusal is not medically related
7. a self-referred individual chooses to discontinue the 'fee for service' option.

If requested, representatives of the agency will provide temporary assistance to the individual in order to adjust to his/her new service site.

Service discontinuation or transfer requires notification as per the service contract and procedures.

Discontinuation of Services by Person Supported/Family/CLBC

Persons Supported, their family, advocate or appropriate CLBC Staff will provide a 30 day notice to the Executive Director or Designate when they wish to discontinue service.

- ❖ The Services Manager will notify the appropriate service area and the funding body.
- ❖ If requested, representatives of the Society will assist the individual to adjust to his/her new home or service site.

- ❖ The applicable Services Manager will prepare and provide the person with the following:

From the home:

- ❖ The individual's clothing and possessions
- ❖ The original and current personal possession list
- ❖ Medications
- ❖ Identification
- ❖ Funds
- ❖ Appropriate file information

The applicable Services Manager will prepare and provide the person with the following:

From day services:

1. Medications
 2. Identification
 3. Appropriate file information
 4. Items from the person's locker(s).
- ❖ Documents/information pertaining to the service recipient will be disposed of as directed by the funding body. Documents/information returned to the funding body will be documented and signed upon receipt of the material.
 - ❖ The Executive Director will ensure the agency information relating to the person is stored in a secured area for a minimum of seven years.
 - ❖ The applicable Services Manager, or designate, will provide the person and/or their family with an exit interview (see exit interview policy) to complete. The completed form is to be returned to the Executive Director or designate.

In the event that an individual passes away, the person's personal items will be released to their legal guardian by the Executive Director or designate, who will ensure the legal guardian signs a receipt noting the return of the personal items.



Policy

SACL employees, Board Members, and volunteers are required to comply with the provisions of the Freedom of Information and Protection of Privacy Act.

If the personal information SACL collects is used to make a decision directly affecting people we support, records are made accessible to that person, or persons appointed by that person, for at least one year.

Access and facilitation to assist in the release or obtaining of information is provided by either SACL or other person designated for this purpose.

Responses to requests for access to information will be made within 30 calendar days of the receipt of the request.

Decisions to release or not release materials are made in conjunction with the person(s) whose information resides in the material.

Refusals to allow access will be accompanied by an explanation delivered in a manner that is accessible to the person requesting the information.

Materials supplied to an applicant, third party, or others may be made available in an accessible format, upon request.

All documentation maintained by SACL complies with applicable legislation in regards to confidentiality, access, storage, archiving, and destruction.

Procedure:

Please see the Protection of Privacy Policy and PIPA for more information.

All material pertaining to the request is filed in the file of the people served by SACL involved in the request.

Release of Information to Applicant or Third Party

- ❖ Applicant writes to SACL, requesting release of information.
- ❖ Determine if the information is within SACL's scope of responsibility.
 - If not, within 10 days, the applicant is referred to the appropriate body.
 - If it does reside within the SACL's scope, continue with the procedures below.
- ❖ SACL contact conducts a preliminary investigation to determine what can be released, if there are other people involved and if the release of the material would create harm to another person or body.
- ❖ SACL contact identifies any waivers that may be completed by any of the people concerned. Please see Protection of Privacy Policy for more information.
If there are third parties to notify, the Third Party Notification Form is completed by the SACL contact. Third party has 20 days to respond.

- ❖ If it difficult to access the material, or difficult to determine who else may need to be contacted, an extension from the applicant may be requested. Please see Extension Request Form.
- ❖ If the material is released, the Granting Access Form is completed by the SACL contact.

Refusal to Release Information

- ❖ If material cannot be released, for whatever reason, the Denial of Request Form is completed by the SACL contact. The SACL contact completes the sections as indicated. Appeal of Refusal to Release Information
- ❖ An applicant or third party can appeal the decision to either not release all or some of the material requested. The appeal process is outlined in all the forms.
- ❖ The applicant must appeal the decision within 10 business days of the receipt of the denial.
- ❖ The applicant contacts the SACL contact, in writing, outlining the reasons why the information should be released.
- ❖ The SACL contact has 10 business days to respond to the appeal. The response details either the reasons for denying the request, or the reasons why it would be reconsidered.
- ❖ Appeals may also be written to the Privacy Commissioner. Office of the Information and Privacy Commissioner for British Columbia, PO Box 9038, Stn. Provincial Govt. Victoria, B.C. V8W 9A4



Preamble

It is the responsibility of SACL as a non-profit agency, to ensure Accountability by confirming that any 3rd party hired to provide services to, or on behalf of SACL has the appropriate qualifications and insurance coverage. It is also required that a competitive comparison for suitability and cost effectiveness be observed for each contract service requirement.

Policy

When the need to hire a 3rd party individual or agency to provide services to, or on behalf of the Shuswap Association for Community Living is determined by the Board of Directors, Executive Director or other approved designate, the following guidelines will be observed:

- ❖ The service or job will be outlined by the Executive Director to the person responsible for carrying out the contract research
- ❖ Three (3) companies will be contacted for quotes on the required job or service
- ❖ The submitted quotes will be reviewed, based on the following criteria
 - ❖ Proof of Work Safe BC coverage for the company/individual submitting the quote
 - ❖ Proof of Liability Insurance Coverage (minimum amount \$2,000,000)
 - ❖ Completeness, competency, and professionalism of the quote provided
 - ❖ Costing and price of the quotes provided
 - ❖ Location of the provider of the quote (Support local business where applicable)
- The quotes for service will be submitted to the Executive Director with applicable recommendations for final approval and hire
- Proof of the successful candidates WSBC Insurance and Liability Insurance is required to be kept on file, prior to the commencement of any service provision or work on any SACL property

Once the Executive Director or approved designate has approved the final candidate, that person/company will be informed of their successful application, and the work/service can take place.



Policy:

In accordance with SACL's Code of Ethics and related mandate of both SACL and CLBC, staff members are required to be aware of their actions within the community that may reflect negatively on SACL. Actions of SACL staff both during times of employment and during private time, that are of an inappropriate, illicit, or illegal nature will not be tolerated.

If a complaint is made by a Person Supported, other SACL Staff, or a Member of the Community regarding any SACL Staff member, the matter will be investigated thoroughly. If a Staff Member has been deemed to partake in inappropriate, illicit, or illegal behavior while providing services to a Person Supported, then disciplinary action up to and including dismissal may take place. Should the activity reported be illegal (such as partaking in illegal substances or sharing/purchasing alcohol for minors etc.), SACL shall report the illegal activity to the proper authorities (R.C.M.P.)

Staff are also responsible and obligated to take into consideration the ethical decision making process when planning outings for Persons Supported, taking care not to expose Persons Supported to alcohol or illegal or addictive substances or activities (such as marijuana or gambling etc.). As independent adults, Persons Supported may pursue any of these (legal) activities on their own time, but are not encouraged to do so by Staff or Management during programs or services at SACL.

At no time shall Staff encourage or purchase alcohol for a Person Supported. It is inappropriate for either Staff or Persons Served to consume alcohol while taking part in any SACL programs or services. Should adult Persons Supported wish to purchase alcohol on their own time, they are encouraged to do so by their own means and not with the assistance of any SACL Staff member.

Note: See SACL Policies:

1. Code of Conduct



Policy

Due to health, safety, and liability factors (including sanitary/food handling procedures, allergens, housekeeping, and pet behaviour), pets are not allowed to accompany Staff or be in contact with Staff or Persons Supported while providing/receiving any SACL service(s) for SACL. SACL does not allow any pets in agency owned residences.

Exceptions (for Persons Supported only):

1. **Service Animals:** – for any Person Supported who require the use of service animals (seeing-eye dogs etc.), SACL will review and arrange appropriate settings to accommodate. Service Animals must follow the guidelines below.
 2. **Grandfathered Pets:** SACL will accommodate current pre-authorized pets. Once the current pet no longer resides with the Person Supported (death, adopted to new home etc.), no new pets will be permitted. Persons Supported with pre-authorized pets must follow the guidelines below.
- ❖ All pets/animals must be spayed or neutered.
 - ❖ All pets/animals must have current and updated vaccinations, worming, flea & tick protection and any other applicable health requirements as suggested by the pet's veterinarian.
 - ❖ All pets/animals must be licensed as required by civil requirements.
 - ❖ All pets/animals must be kept clean and in good health.
 - ❖ All pet/animal owners (Person Supported) are responsible for appropriate processes for urination & defecation management and cleanliness (owners must ensure that all forms of defecation are cleaned up immediately from any SACL property, and litter boxes [as applicable] are cleaned daily).
 - ❖ Any pet that urinates or defecates inside a SACL working environment (excluding litter boxes) will not be allowed in the residence.
 - ❖ Persons Supported are **FULLY RESPONSIBLE** for any mess or damage done by their pet.
 - ❖ All pets/animals behaviour must be enforced by the owner & will include;
 - Pets demonstrating aggressive behaviour must be confined to the Persons Supported bedroom when SACL Staff are providing services.
 - Pets are not to be allowed to affect health, safety, or sanitary/food preparation procedures (E.G. animals will not be allowed on counters or in areas that food preparation takes place)
 - ❖ Any pet that is reported to be a disturbance, or interferes with any required duties will not be allowed in the residence.
 - ❖ Any pet affecting the health, well-being, property, or environment of Staff or the Person Supported will not be allowed in the residence.



Intent

At the Shuswap Association for Community Living (SACL), we are committed to providing our Persons Supported/Stakeholders/Employees with exceptional service. As providing this service involves the collection, use and disclosure of some personal information about our Persons Supported and other Stakeholders, protecting their personal information is one of our highest priorities.

While we have always respected our members/clients/employees privacy and safe-guarded their personal information, we have strengthened our commitment to protecting personal information as a result of British Columbia's Personal Information Protection Act (PIPA). PIPA, which sets out the ground rules for how B.C. businesses and not-for-profit organizations may collect, use and disclose personal information.

We will inform our Persons Supported/Stakeholders/Employees of why and how we collect, use, and disclose their personal information, obtain their consent where required, and only handle their personal information in a manner that is reasonable and appropriate.

This Policy, in compliance with PIPA, outlines the principles and practices we will follow in protecting members' personal information. Our privacy commitment includes ensuring the accuracy, confidentiality, and security of our Persons Supported/Stakeholders/Employees' personal information and allowing our Persons Supported/Stakeholders/Employees to request access to, and correction of, their personal information.

Scope

This Policy applies to SACL and all of its subsidiaries, and local associations throughout the Province of B.C.

This Policy also applies to any individuals, service providers collecting, using or disclosing personal information on behalf of SACL.

Definitions

Personal Information – Information about an identifiable individual. Personal information includes information that relates to their personal characteristics (e.g. gender, age, income, home address, home phone number, ethnic background, family status, etc.), their health (e.g. health history, health conditions, health services received, etc.), or their activities and view (e.g. religion, politics, opinions

expressed by the individual, etc.). Personal information, however, does not include contact information.

Contact Information – Information that would enable an individual to be contacted at a place of business and includes name, position name or title, business telephone number, business address, business email or business fax number. Contact information is not covered by this Policy or PIPA.

Collecting Personal Information

Unless the purposes for collecting personal information are obvious and the Persons Supported/Stakeholders/Employees voluntarily provides his or her personal information for those purposes, we will communicate the purposes for which personal information is being collected, either orally or in writing, before or at the time of collection.

We will only collect Persons Supported/Stakeholders/Employees information that is necessary to fulfill the following purposes:

- ❖ Name, address, phone number, cell phone number, fax number and e-mail address for the purpose of communicating and reporting about the SACL's membership, programs, events and activities.
- ❖ Banking information, social insurance number, criminal records check, resume, and beneficiaries for the SACL payroll, company insurance and health plan.
- ❖ Criminal records check and related personal reference information for the purpose of implementing the employee/contractor/volunteer screening program.
- ❖ Contact information for use in the event of medical emergency.
- ❖ Name, address, phone number, cell phone number, fax number and e-mail address for the purpose of providing insurance coverage, managing insurance claims and conducting insurance investigations.

Consent

SACL will obtain consent to collect, use or disclose personal information (except where, as noted below, we are authorized to do so without consent).

Consent can be provided by orally, in writing, electronically, through an authorized representative or it can be implied where the purpose for collecting using or disclosing the personal information would be considered obvious and the Persons Supported/Stakeholders/Employees voluntarily provides personal information for that purpose.

Consent may also be implied where a member is given notice and a reasonable opportunity to opt-out of his or her personal information being used for mail-outs, marketing, or fundraising, and the member/client/employee does not opt-out.

Subject to certain exceptions (e.g., the personal information is necessary to provide the service or product, or the withdrawal of consent would frustrate the performance of a legal obligation), Persons Supported/Stakeholders/Employees can withhold or withdraw their consent for SACL to use their personal information in certain ways. A decision to withhold or withdraw their consent to certain uses of personal information may restrict our ability to provide a particular service or product. If so, we will explain the situation to assist them in making the decision.

We may collect, use or disclose personal information without the member's/clients/employee's knowledge or consent in the following limited circumstances:

- ❖ When the collection, use or disclosure of personal information is permitted or required by law;
- ❖ In an emergency that threatens an individual's life, health, or personal security;
- ❖ When the personal information is available from a public source (e.g., a telephone directory);
- ❖ When we require legal advice from a lawyer;
- ❖ For the purposes of collecting a debt;
- ❖ To protect ourselves from fraud;
- ❖ To investigate an anticipated breach of an agreement or a contravention of law

Using and Disclosing Personal Information

We will only use or disclose member personal information where necessary to fulfill the purposes identified at the time of collection or for a purpose reasonably related to those purposes such as:

- ❖ To conduct surveys in order to enhance the provision of our services;
- ❖ To contact our Persons Supported/Stakeholders/Employees directly about services that may be of interest;

We will not use or disclose personal information for any additional purpose unless we obtain consent to do so.

We will not sell or distribute Persons Supported/Stakeholders/Employees lists or personal information to other parties.

Retaining Personal Information

If we use Persons Supported/Stakeholders/Employees personal information to make a decision that directly affects them, we will retain that personal information for at least one year so that the member/client/employee has a reasonable opportunity to request access to it.

SACL will retain personal information only as long as necessary to fulfill the identified purposes or a legal or business purpose.

Ensuring Accuracy of Personal Information

SACL will make reasonable efforts to ensure that Persons Supported/Stakeholders/Employees personal information is accurate and complete where it may be used to make a decision about them or disclosed to another organization.

Persons Supported/Stakeholders/Employees may request correction to their personal information in order to ensure its accuracy and completeness. A request to correct personal information must be made in writing and provide sufficient detail to identify the personal information and the correction being sought.

A request to correct personal information should be forwarded to the Administrative Supervisor and the applicable Services Manager.

If the personal information is demonstrated to be inaccurate or incomplete, we will correct the information as required and send the corrected information to any organization to which we disclosed the personal information in the previous year. If the correction is not made, we will note the members' correction request in the file.

Securing Personal Information

We are committed to ensuring the security of member personal information in order to protect it from unauthorized access, collection, use, disclosure, copying, modification or disposal or similar risks.

The following security measures will be followed to ensure that member personal information is appropriately protected:

Methods of protection and safeguards include, but are not limited to:

- ❖ Locked filing cabinets.
- ❖ Restricted access to offices.
- ❖ Security clearances.
- ❖ Need-to-know access and technological measures including the use of passwords, encryption and firewalls.

The following steps will be taken to ensure security:

1. Paper information is either under supervision or secured in a locked or restricted area.
2. Electronic hardware is either under supervision or secured in a locked or restricted area at all times. In addition, passwords are used on computers and web based programs.
3. Paper information is transmitted through sealed, addressed envelopes or in boxes by reputable courier/delivery companies.
4. Electronic information is transmitted either through a direct line or is encrypted.
5. Staff is trained to collect, use and disclose personal information only as necessary to fulfill their duties and in accordance with this policy.
6. External consultants and agencies with access to personal information will provide SACL with appropriate privacy assurances.

SACL will use appropriate security measures when destroying personal information such as shredding documents, deleting electronically stored information.

SACL will continually review and update our security policies and controls as technology changes to ensure ongoing personal information security.

Providing Access to Personal Information

Persons Supported/Stakeholders/Employees have a right to access their personal information, subject to limited exceptions.

A full listing of the exceptions to access can be found in section 23 of PIPA. Some examples include: solicitor-client privilege, disclosure would reveal personal information about another individual, health and safety concerns.

A request to access personal information must be made in writing and provide sufficient detail to identify the personal information being sought. A request to access personal information should be forwarded to the Executive Director.

Upon request, we will also tell Persons Supported/Stakeholders/Employees how we use their personal information and to whom it has been disclosed if applicable.

We will make the requested information available within 30 business days, or provide written notice of an extension where additional time is required to fulfill the request.

A minimal fee may be charged for providing access to personal information. Where a fee may apply, we will inform the Persons Supported/Stakeholders/Employees of the cost and request further direction from the member on whether or not we should proceed with the request.

If a request is refused in full or in part, we will notify the member in writing, providing the reasons for refusal and the recourse available to the member.

Questions and Complaints

The Executive Director is responsible for ensuring SACL compliance with this policy and the Personal Information Protection Act.



Policy:

Privacy is a right.

The Shuswap Association for Community Living adheres to relevant legislation pertaining to privacy and information.

Materials gathered from the people we support, employees, volunteers, or stakeholders is treated confidentially and used only for the express purpose for which it was gathered.

The Shuswap Association for Community Living ensures that people and their materials are treated in ways that ensure privacy.

Procedure:

- ❖ Please see Freedom of Information and PIPA Policy for more information.
- ❖ The privacy of the people we support is safeguarded at all times; while gathering information, during personal support, while in the community or in other situations.
- ❖ People or organisations requesting information from the people we support request this information from them.



Policy:

The Shuswap Association for Community Living complies with all federal, provincial, municipal and regional legislation in regards to the keeping of business related records. Other applicable agency requirements and standards may also be taken observed when filing and storing business records, including directives from WSBC, CSSEA, CUPE, and CARF.

Procedure:

Applications & Resumes

In accordance with Section 35(1) of the **Personal Information Protection Act (PIPA)** SACL will keep all solicited applications/resumes for the period of one year. SACL will not use or disclose any personal information from received applications/resumes for any other purpose than for the hiring of qualified and well-suited employees or volunteers.

- ❖ **Unsolicited Applications/Resumes:**
 - No personal information will be collected that has not been requested. Any unsolicited resumes will be confidentially shredded.
- ❖ **Solicited Applications/Resumes:**
 - If solicited applications/resumes are used or considered for possible future use, SACL assumes responsibility for the personal information attached, and will keep the application/resume on file for the period of one year. After the period of one year, unused resumes/applications will be confidentially shredded.

Employment Records

In accordance with the **Employment Standards Act of BC**, SACL will keep all employment records for a period of two (2) years after employment ends. These records will be kept in English at SACL's principal place of business, or in a secured storage facility. SACL will not use or disclose any personal information from any Employment Records for any other purpose than keeping accurate and up-to-date Employee records. All records will be confidentially shredded after the required time limit has expired.

The following is considered criteria of Employment/Payroll records;

- ❖ Name, date of birth, occupation, telephone number and residential address
- ❖ Date employment commenced
- ❖ Employee's wage rate, and type (hourly, commission, salary etc.)
- ❖ Hours worked each day (regardless of how the employee was paid)
- ❖ Benefits paid to the employee
- ❖ Employee's gross and net wages for each pay period
- ❖ Reason/amount of deductions made from the employee's wages
- ❖ Dates/amount of statutory holidays taken by the employee

- ❖ Dates/amount of vacation taken and owed
- ❖ Dates/amount paid from employee's time bank and balance remaining

Payroll Records

In compliance with the **Canada Revenue Agency** requirements (*Income Tax Act, Excise Tax Act, Excise Tax Act 2001, Canada Pension Plan, and the Employment Insurance Act*), SACL will keep complete and organized records as required for any verification required at the request of the CRA. Payroll records (either paper or electronic) as specified, will be securely retained at SACL's principal place of business, or at a secured storage facility for the period of seven (7) years. Should a 3rd party accounting or payroll agency be approved or contracted to provide business, accounting or payroll services to SACL, that agency will have access to original records for the current fiscal year only. All original records will be returned to SACL's principal place of business, by the 3rd party service provider no later than June 30th of each year. SACL, or any contracted 3rd party business/accounting/payroll service provider will not use or disclose any personal information from Payroll Records for any other purpose than for payroll purposes. All records will be confidentially shredded after the required time limit has expired.

The following is considered criteria of Employment/Payroll records;

- ❖ Hours worked each day by each employee
- ❖ All CPP contributions, EI premiums or taxes withheld for each employee
- ❖ A form TD1, *Personal Tax Credits Return* for all employees
- ❖ CRA letters of authority that allow employees to reduce the tax deductions for certain employees for a specific year
- ❖ All Information slips issued and returns filed
- ❖ Registered Pension Plan Information

Persons Supported Records

In compliance with the Document Disposal Act, SACL will keep complete and organized records (both paper form and electronically) for each Consumer who accesses SACL services. These records will be kept in English at SACL's principal place of business, or in a secured storage facility for a period of seven (7) years after the Consumer has ceased to access SACL services. SACL will not use or disclose any personal information from Consumer Records for any reason other than to keep accurate information for service provision regarding Persons Supported. All records will be confidentially shredded after the required time limit has expired.



Policy Statement:

The Shuswap Association for Community Living is committed to the responsible stewardship of our resources and encourages any individual who is aware of or suspects acts of fraud, waste, or abuse of organizational resources to report such acts. The Shuswap Association for Community Living does not tolerate fraudulent or other dishonest behaviour and will take appropriate action upon receiving such reports.

Purpose:

To explain the procedure for Board Member, Employees, Persons Supported, and others who wish to report known or suspected acts of fraud, waste, or abuse of SAACL resources, and to describe the organization's procedure for responding to such reports.

Definitions:

Fraud: Obtaining money or some other personal benefit by deliberate deception to the detriment of another party or organization. Fraud may include, but is not limited to, the following:

- ❖ Theft or misappropriation of funds, supplies, property, or other resources
- ❖ Forgery or alteration of documents (whether financial, operational or academic)
- ❖ Unauthorized alteration or manipulation of computer files
- ❖ Falsification of reports to management or external agencies
- ❖ Pursuit of a benefit or advantage in violation of organization's Conflict of Interest policy
- ❖ Authorization or receipt of compensation for hours not worked

Waste: The intentional or unintentional, thoughtless or careless expenditure, consumption, mismanagement, use, or squandering of organizational resources to the detriment or potential detriment of the Shuswap Association for Community Living. Waste also includes incurring unnecessary costs as a result of inefficient or ineffective practices, systems, or controls.

Abuse: Employing one's position or any Shuswap Association for Community Living resources in a manner contrary to applicable laws, policies, or generally accepted practices. This includes intentional destruction, diversion, manipulation, misapplication, or misuse of assets, information, systems, relationships, or other resources. Abuse can occur in financial or non-financial settings.

Procedures

When to Report Fraud, Waste, or Abuse:

The Shuswap Association for Community Living Board Members, Staff and Volunteers with a reasonable basis for believing fraud or other wrongful acts have occurred are responsible for reporting such incidents. Persons Supported and other interested citizens are strongly encouraged to report known or suspected acts of fraud, waste, or abuse. It is not necessary to have proof of wrongdoing at the time of reporting dishonest or suspicious activity; however, anyone reporting such activity must have reasonable grounds for doing so.

How to Report Fraud, Waste, or Abuse:

Suspected incidents of fraud, waste, or abuse should be reported immediately to the Executive Director . If you receive a report of a known or suspected fraud from any party, contact the Executive Director immediately for further assistance. Do not confront or terminate the suspected employee or accept the resignation of an employee who is suspected of or who admits to fraudulent or other gross misconduct.

Investigations:

Investigation objectives include verifying the facts, maintaining objectivity and confidentiality, determining responsibility, and recommending corrective actions to help ensure that similar actions do not occur in the future. Upon receiving a report of fraud, waste, or abuse, within 24 hours the Executive Director will determine the best way to gather information necessary to meet these objectives. Depending on the situation, the Executive Director may consult with the board of directors, legal counsel, Services Managers, Human Resources, or others. Investigations will be completed expeditiously but always in a thorough manner and in accordance with established procedures. It is the duty of all individuals to cooperate fully with those performing an investigation pursuant to this policy. Shuswap Association for Community Living employees who intentionally impede an investigation may be subject to adverse employment action.

Individuals found to have participated in fraud or other wrongful acts will be subject to disciplinary action, up to and including prosecution and termination of employment, if appropriate.

Non-Retaliation Policy:

The Shuswap Association for Community Living shall not intimidate, threaten, coerce, discriminate against, or take any retaliatory action against any Person Supported, legally authorized representative, employee, association, organization or group that in good faith:

1. Discloses or threatens to disclose information about a situation they feel is inappropriate, potentially illegal, and/or is in violation of this policy.
2. Provides information to or testifies against the alleged offending individual or The Shuswap Association for Community Living;

3. Objects to or refuses to participate in an activity they feel is in violation of federal and/or state law, or Shuswap Association for Community Living policy;
4. Is involved in any compliance review or peer review process; or
5. Files a valid or legitimate report or a complaint, or an incident report.

All Staff and Management Personnel are responsible for enforcing this policy. Individuals who violate this policy will be subject to the appropriate and applicable disciplinary process, up to and including termination or dismissal.



Policy:

Research involving human participants is premised on a fundamental moral commitment to advancing human welfare, knowledge and understanding and to examining cultural dynamics. The Shuswap Association for Community Living shares this commitment in its promotion of responsible research.

The fundamental imperative of research involving human participation is respect for human dignity and well-being. To this end, the Association endorses the ethical principles cited in the Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans (1998), and any subsequent revisions thereto).

This policy applies to funded and non-funded research investigations involving human participants (including procedures such as interviews, questionnaires and observations on individuals or groups) carried out by anyone conducting research at or under the auspices of the Shuswap Association for Community Living.

The Association is committed to assisting the research community in identifying and addressing ethical issues inherent in its research, recognizing that all members of the Association share a commitment to maintaining the highest possible standards in research involving humans.



Policy:

Purpose & Scope

The purpose of this directive is to inform employees of the Shuswap Association for Community Living the way in which legal documents that are served on the organization are handled. In the course of its normal business the Shuswap Association for Community Living employees are occasionally served with legal process in the form of subpoenas, warrants, court orders, garnishments, investigations, and other civil matters. This policy statement attempts to balance the interests of the Shuswap Association for Community Living by cooperating with judicial and law enforcement agencies, while at the same time, preventing embarrassment and preserving the privacy and dignity of its employees and Persons Supported.

Topics Addressed

This policy will address legal process regarding subpoenas, garnishment orders, search warrants, investigations, and service of other legal processes.

General Policy

The Shuswap Association for Community Living and/or its employees are periodically served with legal process in the form of subpoenas for the production of witnesses and/or documents regarding the normal course of business of the Shuswap Association for Community Living, court orders, and garnishments. All legal processes or investigations must be received in the Shuswap Association for Community Living Administrative Office. Due to the often immediate need for response to subpoenas the Executive Director or designate will review for legal sufficiency, legal processes received by its employees during the normal course of business. If the documents are determined to be legally sufficient, the applicable staff member or Person Supported will be promptly summoned to the Administration office to be informed of the issue and ensure prompt compliance. The Shuswap Association for Community Living Managers and other officials are responsible for prompt compliance with requirements to produce staff or documents as outlined in PIPA, and for informing the Executive Director of the actions taken to comply.

If an office other than the Administrative Office receives legal process, it shall be immediately directed to the Administrative Office and the Executive Director. Any staff member or Persons Supported who is contacted by a process server shall promptly refer the person to the Executive Director. No employee shall produce documents or disclose any information or produce material as part of the employee's official status without prior authorization of the Executive Director or designate.

The reasons for this policy are as follows:

- a. To conserve the time of the Shuswap Association for Community Living employees for conducting official business

- b. To minimize the possibility of involving the Shuswap Association for Community Living in controversial issues that are not related to the mission
- c. To prevent the possibility that the public will misconstrue variances between personal opinions of the Shuswap Association for Community Living employees and the Shuswap Association for Community Living policy
- d. To have a central repository for subpoenas
- e. To avoid spending the Shuswap Association for Community Living money for private purposes
- f. To protect confidential and sensitive information
- g. To assure that the Shuswap Association for Community Living and its employees timely comply with subpoenas and legal process in accordance with law
- h. To protect the rights of Persons Supported, and ensure that they understand the legal process involved, or to ensure that the responsible parent or caregiver is present to represent the Person Supported.

A Shuswap Association for Community Living employee may not give testimony, produce documents, answer inquiries from a person not employed by the Shuswap Association for Community Living without the approval of the Executive Director or designate. All inquiries for such information shall be referred to the Administrative Office. All the Shuswap Association for Community Living employees who are requested to testify in an official proceeding or produce documents concerning information acquired in the course of their employment must seek approval from the Executive Director.

Subpoenas

A subpoena is a call to come before a court, a deposition, or other legal proceeding and may include a direction to bring specified records. A subpoena normally indicates the date, time and place of the required appearance or that a response is required within a certain number of days.

If the Executive Director or designate determines that the Shuswap Association for Community Living should not comply with the subpoena, the Executive Director will attempt to have the subpoena withdrawn or modified. If the Shuswap Association for Community Living is unsuccessful in having the subpoena withdrawn or modified, the Executive Director will obtain representation from legal counsel as necessary.

Subpoenas and other process that are required to be served on the Shuswap Association for Community Living should be served as follows:

- (a) If authorized by law to be served by mail, any mailed process should be sent to the Shuswap Association for Community Living at PO Box 153, Salmon Arm, BC V1E 4N3
- (b) If served by an individual, the process should be delivered to the Executive Director at the Shuswap Association for Community Living Administration Office at #301 – 371 Hudson Avenue NE, Salmon Arm, BC

Garnishment Orders

All garnishment and earnings withholding orders shall be served upon the Administrative Offices. All legal process in the nature of a garnishment shall be date and time stamped by the Administrative Supervisor for submission to the Bookkeeper upon receipt. Garnishments concerning employees of the Shuswap Association for Community Living will also be reviewed by Executive Director and if necessary by the Association's Lawyer, for legal sufficiency and thereafter be forwarded for processing to the Shuswap Association for Community Living Bookkeeper. This ensures that the garnishment is sufficient as to legal form and contains adequate information for identification of the employee.

All garnishment and earnings withholding orders will be processed in accordance with law.

Search Warrants

A search warrant is an order signed by a judge directing a law enforcement officer to conduct a search of a designated person, a designated object or a designated place for the purpose of inspecting or seizing designated property or kinds of property.

If law enforcement officers bring a court order in the form of a search warrant:

1. A search warrant is executable immediately, unlike a subpoena. The law enforcement officers may begin a search of the Shuswap Association for Community Living records as soon as they enter the appropriate office
2. Request that the law enforcement officers wait until the Executive Director or designate is present before the search begins in order to allow the opportunity to examine the search warrant and to assure that the search conforms to the terms of the search warrant. (The law enforcement officials are not required to accede to your request to delay the search.)
3. Cooperate with the search to ensure that only the records identified in the warrant are produced and that no other person's records are disclosed

Service of other Legal Process

1. All service of legal process shall be done through the Administrative Office. The Executive Director will be informed immediately of any legal process of a personal nature (civil or criminal) regarding an employee of the Shuswap Association for Community Living
2. Except for emergency situations, the Executive Director or designate shall ask law enforcement personnel executing arrest warrants to do so in a pre-arranged private setting (e.g., Administrative office)
3. The Executive Director shall be promptly notified of any legal process received by the Shuswap Association for Community Living concerning personnel litigation or administrative proceedings brought by a current or past Shuswap Association for Community Living employee

If you have any questions concerning this policy, contact the Executive Director.



Policy

Effective risk management ensures the protection of the interests of Persons Supported, and families, Staff Members, Volunteers, the public, continuity of organization operations, and the maintenance of services. Because risks are present throughout the organization operations, successful delivery of services is contingent upon effective management of risks.

SACL will identify and reduce or eliminate risks to people, organization property, and interests; to minimize and contain the costs and consequences in the event of harmful or damaging incidents arising from those risks; and to provide for adequate and timely restoration and recovery.

Procedure

Risk management is a step-by-step process to protect the organization and consequently minimize risks.

Risk management is everyone's responsibility.

1. The organization will develop an annual risk management plan to address the steps below. The risk management plan shall be reviewed and accepted by the Board of Directors.
2. The risk management plan involves the following steps:
 - a. Identification of loss exposures
 - b. Analysis of loss exposures
 - c. Identification of how to rectify identified exposures
 - d. Implementation of actions to reduce risk
 - e. Reporting results of actions taken to reduce risks
 - f. Inclusion of risk reduction in performance improvement activities

Implement the Risk Management Plan, report to the Board of Directors and adjust the plan as necessary.

The Risk Management Plan will;

- a. Be reviewed at least annually for relevance
- b. Be updated as needed



Policy

In the event that service provided by a particular program are restructured, reduced or ended in an unplanned or unanticipated manner, it is critical that the organization is prepared to manage the situation effectively.

The agency will be prepared to respond to an unanticipated service modification, reduction or closure by ensuring an orderly and efficient response that maximizes the safety and well-being of Persons Supported.

Procedures:

The agency is prepared to respond to unanticipated changes to a service including;

- ❖ The partial loss of program funding necessitating a reduction or downsizing in the amount or type of services that can be offered to Person Supported.
- ❖ A significant modification of services that requires a restructuring or re-organizing of service delivery model.
- ❖ The complete loss of program funding necessitating a complete winding down of program operations.

The following steps will be followed in response to any of the situations outlined above:

- ❖ Any communication received by agency Staff regarding changes to funding or support necessitating a reduction, downsizing or restructuring will be forwarded immediately to the Executive Director. The Executive Director will confirm the information and immediately forward it to members of Board of Directors.
- ❖ The Executive Director will meet with Management staff to establish a plan to address the changes. The plan will identify specific actions, responsibilities and timelines and will address, at minimum, the following broad areas:
 - Ensuring the safety and well-being of Persons Supported to the greatest extent possible
 - Providing for an orderly transition to other supports and services (where possible) that strives for continuity of care for Persons Supported. This may include the development of individual transition plans for Persons Supported to address their specific needs where appropriate.
 - Addressing the needs of staff, including open communication about changes and facilitating an orderly and respectful transition to other agency programs or lay-offs
 - Ensuring the protection of agency assets and mitigating any potential risks or liabilities associated with the changes

A copy of the plan will be provided to the Board of Directors and to funders where appropriate or required.



Intent

Shuswap Association for Community Living (SACL) is committed to the ongoing protection of the health and safety of our employees, customers and visitors as well as the protection of properties, both physical and intellectual. In pursuit of this commitment, we have adopted this policy to ensure that appropriate surveillance of SACL premises is performed, which will assist us in the achievement of our goals for a secure and safe workplace.

Please be advised that SACL may employ Security Cameras on our premises.

This Policy Shall:

- ❖ Provide definitions for the surveillance measures currently employed;
- ❖ Outline surveillance guidelines and procedures; and
- ❖ Define legal obligations, and disciplinary actions in the event of a breach of policy.

Definitions

Camera Surveillance - Surveillance performed using a video camera designed to monitor and/or record activity.

Guidelines

Security Cameras

- ❖ SACL will employ the use of security cameras, as they offer to assist us in the maintenance of the safety of our Persons' Supported help provide a safe and secure workplace.
- ❖ When installing security cameras, SACL will ensure that they are located in areas that create minimal intrusion to personal privacy, while monitoring required areas at all times.
- ❖ SACL will provide notice that the area is under surveillance by posting visible signs.
- ❖ To ensure the ongoing privacy of our staff and the public at large, SACL shall ensure that only authorized personnel shall be allowed to operate video surveillance equipment, and review recordings.
- ❖ SACL may retain all video surveillance footage for a period of 30 days. Footage will be retained in excess of the 30 day period where the footage is required as part of an ongoing safety plan, or for the purposes of continued safety for a Person Supported, or investigation into breach of policy.

- ❖ All recordings shall be labelled and documented appropriately.
- ❖ All activities regarding surveillance activities, access to recordings, and the storage or disposal of recordings shall be documented. Only authorized personnel shall have access to the surveillance activities documentation.
- ❖ All recordings shall be stored securely in an access-controlled area.
- ❖ With the exception of requests by law enforcement agencies, individuals must submit a formal request to view recordings, and will be subject to approval by the Executive Director.
- ❖ Requests for access to recordings shall be bound by and subject to the Freedom of Information and Protection of Privacy Act (FIPPA), PIPEDA (Ont.), and applicable legislation depending on geographical location.
- ❖ In the event that any law enforcement agency requests access to SACL surveillance recordings, SACL will act in accordance with the law, and provide the materials as necessary.
- ❖ All recordings created by means of security surveillance cameras shall be the sole property of SACL, and may not be taken, reproduced or destroyed for any reason without prior express written permission. Authorized personnel shall be the only parties eligible to delete recordings, and then only in accordance with this policy, and following the expiration of the 14 day holding period, notwithstanding the requirements for retention in the event of an investigation or for the purposes of evidence.
- ❖ Where recordings are disposed of, they must be deleted or destroyed in such a manner as to ensure that they cannot be viewed or accessed by anyone.

Unauthorized Access and/or Disclosure (Privacy Breach)

Any SACL employee that witnesses the unauthorized disclosure of any surveillance recordings that are in violation of this Policy, and/or a potential privacy breach must report the incident to SACL management immediately.

SACL will investigate all reported breaches of privacy, unauthorized viewings or disclosures. Any breaches of this Policy may result in disciplinary action up to and including termination of employment.