

STATEMENT of POLICY and PROCEDURE			
Chapter:	General Policies		SPP No.
Policy:	INTERNET, PHONE & SOCIAL MEDIA		Page: 1 of 2
Date Issued:	December 11, 2013	Reviewed/Amended:	November 23, 2016

1 POLICY

- 1.01 **INTERNET** – All CMHA-CVB worksites are equipped with computers and high speed internet access.
- 1.02 Use of the internet by Association employees will be for official authorized business only.
- 1.03 Activities for personal or commercial financial gain are not permitted. These include but are not limited to chain letters, commercial solicitation, buying and trading of stocks or bonds and the sale personal property.
- 1.04 Storing, processing, displaying, sending or otherwise transmitting offensive or obscene language or material is strictly prohibited and may result in police prosecution.
- 1.05 Viewing, changing, deleting or otherwise blocking access to another user’s account or files is prohibited.
- 1.06 The CMHA-CVB reserves the right to monitor all electronic traffic into and out of the agency.

2 SOCIAL MEDIA

- 2.01 All employees must ensure that any public communication they make on social media sites does not negatively impact the reputation of the CMHA-CVB or its clients and staff members.
- 2.02 Examples of social media include:
 - Blogs
 - Micro-blogs, i.e. Twitter
 - Social Networks, i.e. Facebook, MySpace, LinkedIn, Snapchat
 - Wikis, i.e. Wikipedia
 - Multimedia Sharing, i.e. Flickr, YouTube.
- 2.03 ***Guidelines for the Use of Social Media When Discussing the CMHA-CVB & its stakeholders:***
 - Never disclose confidential information about the CMHA-CVB, its clients or staff members
 - Always be respectful and never say something online that you wouldn’t say in front of colleagues or clients
 - Always be truthful
 - Never use profanity or hateful language

- Think twice, write once
- Do not engage in online arguments
- Do not provide professional advice.

3 PERSONAL PHONE CALLS & TEXTING AT WORK

- 3.01 The CMHA-CVB recognizes that there are circumstances in which staff members need to make and receive personal phone calls during work hours. This policy sets out the circumstances in which staff members may make and receive personal phone calls during work hours, the limits of acceptable usage and applies to both company and personal cell phones and land lines.
- 3.02 The making and receiving of texts and personal phone calls while at work is a benefit and not a right. When a staff member needs to make or receive a personal phone call during work hours, the following guidelines apply:
- Except in an emergency or other urgent situation, personal calls and texts should only be made or received during break times.
 - Calls or texts made or received outside of breaks must be kept as short as possible.

STATEMENT of POLICY and PROCEDURE			
Chapter:	Employment Policies	SPP No.	
Policy:	POLICY ON ETHICAL BUSINESS PRACTICES AND CORPORATE RESPONSIBILITY	Page:	1 of 2
Date Issued:	December 31, 2013	Reviewed/Amended:	November 23, 2016

1 POLICY

- 1.01 As part of a nation-wide association leading and championing for mental health, Canadian Mental Health Association-Cowichan Valley Branch (CMHA-CVB) facilitates access to the resources people require to maintain and improve mental health and community integration, build resilience and support recovery from mental illness. This association promotes ethical business practices and corporate responsibility in the following areas:
- Business
 - Marketing
 - Service delivery
 - Professional responsibilities
 - Human resources
 - Contractual Relationships
 - Waste, fraud, abuse and other wrongdoing
- 1.02 CMHA-CVB staff and board members recognize that they are accountable to the membership and funders in addition to the clients, and that they must comply with the letter and spirit of all laws and regulations governing this society.
- 1.03 Business and Marketing activities shall uphold the integrity of the organization and always respect the dignity and privacy rights of the clients. All marketing materials and activities shall not be designed to elicit sympathy, but rather will focus on people rather than disabilities. Marketing activities shall never knowingly mislead or misinform the public or misrepresent the agency.
- 1.04 The CMHA-CVB adheres to ethical practices in human resources pursuant to human rights legislation and the Canadian Charter. The CMHA-CVB will:
- Provide equal employment opportunity to qualified individuals regardless of disability, race, ethnicity, religion, gender, socioeconomic status, marital status, sexual orientation, national origin, political affiliation, age.
 - Ensure harassment or misconduct of any form is immediately addressed and, if necessary, investigated.
 - Ensure that discipline, where necessary is based on thorough investigation and fair and objective treatment of culpable employees.
- 1.05 CMHA-CVB staff members are committed to serving the needs of clients as their first priority, and remembering that all clients are equal and worthy of respect, freedom and

dignity, regardless of race, age, ability, gender, religion or lifestyle.

- 1.06 Contractual Relationships – Annual, routine service contracts with the funder may be signed by the Executive Director. New service contracts, mortgage renewals, banking service agreement renewal, changes to investments and acquisition or selling of property require two of the authorized signatories to sign. Contracts with service providers may be signed by the Executive Director or designate.
- 1.07 Any Board member that has a controlling interest in a company that may contract with the CMHA-CVB to provide service must not be involved in the Board decision-making process. Board minutes must clearly state the conflict and indicate that the Board member has removed her or himself from the decision to award the contract.
- 1.08 All employees and volunteers of the CMHA-CVB are responsible for the prevention, detection and reporting of fraudulent or wasteful practices or any other wrong-doing. If at any time an employee, volunteer or other stakeholder of the Society is aware of or has witnessed an impropriety, it is their responsibility to report it immediately as per the Chain of Command Policy without fear of reprisal.
- 1.09 Any breaches of ethical codes, applicable laws or regulations governing the Association are subject to progressive discipline as outlined in the Association's employment guidelines and bylaws. Any person wishing to report a breach should follow the stakeholder conflict resolution policy without fear of reprisal.
- 1.10 Corporate responsibility within the community is achieved in a variety of different ways, including but not limited to:
 - Mental Health Week
 - Community awareness events hosted by the Association
 - Sponsoring community events

STATEMENT of POLICY and PROCEDURE			
Chapter:	Employee Relations	SPP No.	
Policy:	PERSONAL INFORMATION PROTECTION	Page:	1 of 7
Date Issued:	December 31, 2013	Reviewed/Amended:	November 23, 2016

1 POLICY

- 1.01 Canadian Mental Health Association-Cowichan Valley Branch (CMHA-CVB) is committed to protecting the privacy of its employees, clients and confidential business information.
- 1.02 CMHA-CVB has designated a Privacy Officer to ensure compliance with Canadian Legislation; to receive and respond to client's questions and complaints and to deal with requests for access and rectification of files.
- 1.03 Employees are obligated to ensure that personal information to which they have access remains confidential, is only used for the purposes for which it was collected, is not disclosed without authorization or used for personal gain.
- 1.04 Employees are required to follow all procedures regarding collection, use, and disclosure of personal information as set out in this policy.
- 1.05 Employees who disclose personal information contrary to this policy will be subject to disciplinary measures up to and including discharge for cause.
- 1.06 CMHA-CVB is required to honour a Request for Access providing all Ministry regulations are followed. CMHA-CVB may charge for photocopying.
- 1.07 The Executive Director is accountable for the implementation of this policy. Any issues or questions regarding this policy should be directed to the Executive Director.

2 PURPOSE

- 2.01 CMHA-CVB may use the information collected for the following purposes:
- File management as per contract requirements.
 - Client contact/evaluations.
 - Integrated Case Management.
- 2.02 All employees at one time or another may receive personal, privileged and/or confidential information concerning other employees, company operations or clients. The purpose of this policy is to preserve the privacy of employees, clients and CMHA-CVB by outlining employee obligations and procedures dealing with personal,

privileged and/or confidential information.

3 SCOPE

3.01 This policy applies to all employees, contractors, subcontractors of CMHA-CVB or anyone else who is granted access to personal, privileged and/or confidential information.

4 RESPONSIBILITY

4.01 Employees are responsible for:

- Keeping their own employee files current.
- Being familiar with and following policies and procedures regarding personal information.
- Obtaining the proper consents and authorizations prior to disclosure of personal, privileged and/or confidential information.
- Immediately reporting any breaches of confidentiality to their Program Manager.
- Keeping passwords private and protecting access to personal, privileged and/or confidential data.
- Keeping all client files secured in a locked file cabinet or desk drawer to prevent unauthorized persons gaining access to client data.
- When including client information in a day timer, ensure the protection of this information by either locking the day timer away at the end of the day or if taking the day timer home or transferring it to a locked briefcase or bag.
- Explaining this policy to clients and referring them to the Executive Director if necessary.
- Relinquishing any personal, privileged, confidential or client information in their possession before or immediately upon termination of employment.

4.02 Program Managers are responsible for:

- Notifying employees of the purposes of the collection, use and disclosure of employee personal information and obtaining consent from employees.
- Ensuring policies and procedures regarding collection, use and disclosure of personal information are consistently adhered to.
- Responding to requests for disclosure after the proper release is obtained.
- Cooperating with the Executive Director to investigate complaints or breaches of policy.
- Obtaining any personal, privileged, confidential or client information terminating employees may have in their possession prior to their termination.
- Ensuring that disclosure of personal information or personal health information to a Third Party is done with the approval of the Executive Director.

4.03 Payroll personnel are responsible for:

- Ensuring that appropriate consents have been obtained from employees with respect to the collection, use and disclosure of employee personal information.

- Maintaining systems and procedures to ensure employee records are kept private.
- Obtaining the proper consents and authorizations prior to disclosure of information contained in employee records.
- Responding to employees' requests for access or corrections to their files.
- Ensuring proper disposal of unnecessary files/information.
- Maintaining separate files to ensure that personal health information is protected.
- Ensuring that disclosure of personal information or personal health information to a Third Party is done with the approval of the Executive Director.

4.04 The Executive Director is responsible for:

- Internal compliance with applicable policies or legislation.
- Cooperating with supervisors, human resources and/or payroll personnel in developing internal policies for the collection, use and disclosure of personal information and personal health information of employees and clients.
- Monitoring and responding to Third Party requests for personal information or personal health information.
- Ensuring appropriate consents are obtained for the collection, use and disclosure of personal information and personal health information.
- Where collection, use or disclosure is permitted without prior consent, notifying individuals of the collection, use and disclosure of personal information and/or personal health information after such occurrence.

5 DEFINITIONS

5.01 **“Contact information”** means information to enable an individual at a place of business to be contacted and includes the name, position name or title, business telephone number, business address, business e-mail or business fax number of the individual.

5.02 **“Employee personal information”** means personal information about an individual that is collected, used or disclosed solely for the purposes reasonably required to establish, manage or terminate an employment relationship between the organization and that individual, but does not include personal information that is not about an individual's employment, contact information or work product information. Employee personal information also includes information that may relate to the work performance of the individual, any allegations, investigations or findings of wrongdoing, misconduct or discipline but does not include contact information or job description.

5.03 **“Personal information”** is any information about an identifiable individual and includes employee personal information. Personal information also includes information such as race, ethnic origin, colour, age, marital status, family status, religion, education, medical history, criminal record, employment history, financial status, address, telephone number, WCB claims information and any numerical identification, such as Social Insurance Number.

- 5.04 **“Personal health information”** is information about an identifiable individual that relates to the physical or mental health of the individual, the provision of health care to the individual, the individual’s entitlement to payment for health care, the individual’s health card number, the identity of providers of health care to the individual or the identity of substitute decision-makers on behalf of the individual.
- 5.05 **“Third parties”** are individuals or organizations other than the subject of the records or representatives of CMHA-CVB . Note that in certain circumstances, the company may be entitled to provide personal information to an external party acting as an agent of CMHA-CVB .
- 5.06 **“Work product information”** means information prepared or collected by an individual or group of individuals as a part of the individual’s or group’s responsibilities or activities related to the individual’s or group’s employment or business but does not include personal information about an individual who did not prepare or collect the personal information.

6 PROCEDURE

6.01 Employee Records

- (a) An employee’s Program Manager, the Executive Director, and payroll personnel shall have access to employee records containing employee personal information. An employee’s Program Manager, the Executive Director, and payroll personnel will have access to an employee’s personal health information if the Executive Director determines that such access is permissible and necessary. Personal information and personal health information will not be disclosed outside of the organization without the knowledge and/or approval of the employee. Notwithstanding the foregoing, CMHA-CVB will cooperate with law enforcement agencies and will comply with any court order or law requiring the use or disclosure of personal information without the employee’s consent.
- (b) Employees may request access to review their own file by making arrangements with their Program Manager. Employees shall provide at least twenty-four (24) hours’ notice to their Program Manager. Employees may obtain a copy of any document in their file which they have signed previously. No material contained in an employee file may be removed from the file. The Program Manager will be present during viewing of the file. Notwithstanding the foregoing, an employee is not allowed access to his or her file if the file contains information which would reveal the identity of an individual who has provided personal information about that individual and the individual providing the personal information does not consent to disclosure of his or her identity. If that information can be severed from the file, the employee may have access.
- (c) An employee may provide a written notice of correction related to any data contained in the employee’s file. The notice of correction shall be provided to their Program Manager. If CMHA-CVB is satisfied on reasonable grounds that such a request should be implemented, the information shall be corrected as soon as reasonably possible and the corrected personal information will be sent to each organization to which the personal information was disclosed during the

year before the date the correction was made. If no correction is made, CMHA-CVB shall annotate the personal information under its control with the correction that was requested but not made.

- (d) Employee requests for disclosure of their own personal information to Third Parties must be accompanied by a completed, signed and dated Authorization to Release Information form. Attachment A to this policy is used for this purpose. This form should also be used in dealings with insurance companies with respect to employee benefits and to provide confirmation of earnings to financial institutions for lending purposes.
- (e) Unless retention of personal information is specified by law for certain time periods, personal information that is no longer required to fulfil the identified purpose shall be destroyed, erased or made anonymous within twelve (12) months after its use.

6.02 **Client Information**

- (a) Personal, privileged and/or confidential information about clients may only be collected, used, disclosed and retained for the purposes identified by CMHA-CVB as necessary, and only after such purpose has been disclosed to clients prior to collection and their consent obtained in writing.
- (b) Employees must ensure that no personal, privileged and/or confidential client information is disclosed without the client's consent and then only if security procedures are satisfied.
- (c) Client files are to be kept locked in file cabinets or a locked desk drawer when not in use.
- (d) Client information is only to be accessed by employees with appropriate authorization.
- (e) Unless retention of personal information is specified by law for certain time periods, personal information that is no longer required to fulfil the identified purpose shall be destroyed, erased or archived within twelve (12) months after its use.

6.03 **Personal Information Security**

All information collected is protected from misuse or loss and from unauthorized access, modification or disclosure. A range of physical and technological procedures are in place to provide a secure environment as follows:

- (a) Restricting access to computer systems and physical records to authorized persons.
- (b) Using firewalls and other network security measures within computer systems.
- (c) Preventing unauthorized access to premises by employing physical and / or electronic security measures.
- (d) Practicing a clean desk policy in the premises and providing secure storage for physical records.
- (e) Only allowing access to personal information where the individual seeking access has satisfied identification requirements.

6.04 **Disclosures and sharing of information**

The only circumstance under which personal information may be disclosed to third parties is for the fulfilment of file management, client contact or evaluations and for Integrated Case Management. Only personnel of the program of the client will have access to information. Consent must be obtained from the client for any other disclosure unless contrary to contract requirements, which will be outlined prior to services rendered. CMHA-CVB will ensure that personal information is secure by the exchange of privacy policies with third parties. CMHA-CVB does not sell, trade, or rent information to third parties.

6.05 **Request for Access**

Request for accessing files must be submitted in writing. Submitted requests will be reviewed and are subject to Ministry regulations in regards to the Freedom of Information and Protection Act. Approved access will be provided within thirty (30) working days of the request. A client has the right to access his/her file and request rectification of any personal information in the file that may be obsolete, incomplete or incorrect. CMHA-CVB will need to validate the identity of anyone making such a request. CMHA-CVB may charge for photocopying.

6.06 **Work product information**

Work product information may be collected, used or disclosed without consent and employees do not have the right of access to this information.

6.07 Notwithstanding Paragraphs 6.01(e) and 6.02(e) personal information that is the subject of a request by an individual or a Privacy Commission shall be retained as long as necessary to allow individuals to exhaust any recourse they may have under PIPEDA or PIPA.

6.08 Concerns or complaints related to privacy issues must be made, in writing, to the Privacy Officer setting out the details of the concern or complaint. The Privacy Officer shall investigate the matter forthwith and make a determination related the resolution of the concern(s) or complaint(s). All complaints must be submitted in writing to:

Privacy Officer
Canadian Mental Health Association - Cowichan Valley Branch
371 Festubert Street
Duncan, BC V9L 3T1
Mark "**Confidential**" on the envelope

Should CMHA-CVB fail to resolve a complaint, contact the Privacy Commissioner's office at:

Office of the Information and Privacy Commissioner for British Columbia
PO Box 9038, Stn Prov Govt
Victoria, BC V8W 9A4
Telephone – 250-387-5629

6.09 No employee shall be disadvantaged or denied any benefit of employment by reason

that CMHA-CVB believes that an employee will do anything referred to paragraphs (a), (b), or (c) below or by reason that an employee, acting in good faith and on the basis of reasonable belief:

- (a) Has disclosed to a Privacy Commissioner that CMHA-CVB or any other person has contravened or intends to contravene a provision of PIPEDA or PIPA related to the protection of personal information.
- (b) Has refused or stated the intention of refusing to do anything that it is in contravention of a provision of PIPEDA or PIPA related to the protection of personal information.
- (c) Has done or stated an intention of doing anything that is required to be done in order that a provision of PIPEDA or PIPA related to the protection of personal information not be contravened.

6.10 An employee who is found to be in breach of this policy will be subject to discipline up to and including discharge for cause.