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Title: Weapons and Contraband

Category: Operations

Reference No: OPS-1

Approved by: Senior Leadership Team

Effective Date: Aug 2013

Policy

MPA Society believes that residents, service users, employees and visitors are entitled to an atmosphere that is free from threats to their physical safety. Therefore, it is the policy of MPA Society that all firearms, illegal drugs, legal drugs that could be abused and/or used in an illegal manner, and other forms of contraband – as defined by MPA Society – are prohibited at all MPA program sites. Since MPA operates a number of community homes, the implementation of this policy will be considerate of resident’s rights and the Residential Tenancy Act.

No policy can cover all conceivable items or situations that may occur and involve contraband. For the purpose of this policy, contraband shall be defined as any item or substance which (1) is illegal to possess and/or (2) has the potential to cause injury or death or inflict physical harm or damage to residents, service users, employees, visitors, facilities or property. This policy specifically prohibits bringing any gun, knife, or other contraband weapon into any MPA program site.

Organizational Value

Safety & Well-being

Procedure

The following procedures will be followed when dealing with suspected and/or confirmed contraband:

In the event that an employee encounters a resident, service user or other visitor who is in possession of contraband as defined in this policy, the employee will (1) ask the person to leave the facility and/or (2) contact local law enforcement to deal with the situation.

Common sense and judgment should always dictate the best ways to handle situations involving contraband but must always consider any risks to personal safety that might result from direct confrontation by employees.

ALL MPA SOCIETY EMPLOYEES ARE RESPONSIBLE FOR COMPLIANCE WITH THIS POLICY.
Title: Critical Incident Reporting *

Category: Operations | Reference No: OPS – 2
Approved by: Senior Leadership Team | Effective Date: Jan 2014
Reviewed: April 2015

Policy

The accurate and timely reporting of significant events involving MPA Society’s service users, employee’s, facilities or community reputation – and that occur either on or off MPA Society property/premises – is of paramount importance to the organization’s leadership and all significant events will be expeditiously reported to the Executive Director as required.

For purposes of this policy, the following situations, conditions and/or circumstances must be reported:

(1) Incident’s involving violence or aggression;
(2) Communicable diseases;
(3) Infection control;
(4) Sentinel events (incidents involving death, injury, significant property destruction, etc.);
(5) Use or possession of weapons;
(6) Vehicular accidents involving employees transporting clients on behalf of the organization;
(7) Bio-hazardous accidents,
(8) Unauthorized use and possession of legal or illegal substances;
(9) Medication errors;
(10) Suicide or attempted suicide;
(11) Abuse;
(12) Sexual assault;
(13) Neglect,
(14) Missing persons and
(15) Other situations, events, conditions or circumstances that are required by relevant regulatory bodies.

The use of seclusion or restraint is strictly prohibited by MPA Society and must be reported immediately to the Executive Director and the appropriate regulatory bodies as determined by the Executive Director.

Procedure

Employees will immediately, and no later than 24 hours after discovering the incident, report all significant incidents as defined in this policy using the Critical Incident Reporting Form. Directors/Program Managers will ensure that a copy of the Critical Incident Reporting Form is centrally maintained in a locked file and, if appropriate, provided to all necessary regulatory, licensing or funding bodies.

At least annually, the Executive Director or his/her designate will be responsible for a written analysis of all critical incidents which addresses:

(1) Potential causes;
(2) If the event represents part of an ongoing trend;
(3) Remedial action;
(4) Results of performance improvement plans;
(5) Necessary education and training for personnel,
(6) Prevention of recurrence; and
(7) Compliance with internal and external reporting requirements.

Directors/Program Managers will be responsible for ensuring that timely debriefings follow all significant incident reports. Debriefings will include all employees involved to (1) discuss the incident and its antecedents, (2) identify any procedural and/or policy changes that need to be made to prevent a reoccurrence of the incident and, (3) to ensure that employees have an opportunity to discuss and disclose their feelings, emotions and reactions to the incident. MPA Society employees are also able to retain the services of the Employee Assistance Program to assist in debriefing and supporting their needs.

To conform to this policy, employees shall complete an individual report for all significant employee related incidents and resident/service user incidents. All Critical Incident Reports will, at minimum, include the following:

a. What happened (detail of incidents);
b. How it happened (sequence of events);
c. When it happened (exact or approximate date and time);
d. Where it happened (exact or approximate location);
e. Individuals involved;
f. Action taken;
g. What happened to the employee/resident/service user; and
h. The time and date the report is written with all appropriate signatures.

ALL EMPLOYEES OF MPA SOCIETY ARE RESPONSIBLE FOR CONFORMANCE WITH THIS POLICY.
Big Picture

At MPA Society, we believe that planning and preparedness are essential to ensuring that our organization endures any disaster and is able to continue to provide service to those whom we are responsible for.

Organizational Value

Safety & Well-being

Policy

MPA Society has the responsibility to make sure the organization is prepared in the event of an emergency or disaster. MPA Society will have an evacuation plan in place for each of our work locations. The plan will minimally address method of exit, location to gather, and accounting for all parties.

In the event of an emergency or disaster, the duty of employees is to not abandon the people we serve or our service responsibilities, until relieved of this duty.

Procedure

Building Evacuation

• Facility supervisors determine the escape routing for occupants and gathering location, under the direction of local fire regulations or in concert with Human Resources. Escape route plans for each work area are to be posted in conspicuous locations throughout the facility.
• Timed practice evacuations take place periodically, under the direction of the Facility supervisor.
• Authorization to re-enter the building after an evacuation is given by the Facility supervisor or in the absence of the supervisor, by staff on site.

The fire alarm is a general emergency alarm and in addition to fire, may also be used in the event of a gas leak, chemical spill, act of terrorism, or some other emergency that requires building evacuation.

When the fire alarm sounds, the following steps must be followed:

• Stop what you are doing and walk, do not run, to the primary or alternate exit. Close all doors and windows behind you.
• Evacuate the building immediately via your evacuation route, to the agreed upon meeting place.
• Do not open a hot door. Before opening a door, touch it near the top to see if it is hot. A fire on the other side could blast through the smallest opening with tremendous force and heat.
• Once evacuated, proceed to your designated gathering area.
• Report to your supervisor, at the agreed upon meeting area, for a headcount. Visitors must report to the receptionist for headcount.
• Do not re-enter the building until the all clear announcement is given by the emergency coordinator.
• All Employees are asked to assist in the evacuation process, and:
  ✓ Ensure work areas are evacuated and doors are closed, not locked.
  ✓ Ensure rest rooms are evacuated.
  ✓ Coordinate assistance for injured or incapacitated individuals.
  ✓ Await directions from the Supervisor/Director in charge
• Emergency Personnel will confirm evacuation status with supervisors or section managers.

A building evacuation rarely results in the end of the workday. Once the Fire Department has assessed the situation, they will inform the Society liaison of action to be taken.

Employees are not to leave the premises until they have been authorized to do so.

Disaster Plan
• The Management Team and each program area develops and maintains written procedures and guidelines:
• to be followed in the event of an emergency or natural disaster (e.g. fire, earthquake)
• for business continuity or resumption
• Supervisors and Directors are responsible to make sure the members of their group have read the disaster plan and know where to find it.

Hazardous Chemicals
The Supervisor is responsible for:
• Providing information about hazardous chemicals in their facility
• Documenting in the employees file that the information has been provided to the employee
• Compliance with WHIMIS regulations
• Maintain Material Data Safety Sheets (MSDS) and other reference material and documentation.
• Is responsible to make sure all suppliers know that purchase orders for hazardous chemicals are valid only if a Material Safety Data Sheet accompanies the product
• Documenting and implementing practices for the disposal of hazardous waste
• Documenting and implementing practices for clean-up of hazardous chemicals and waste spills
• Conducting safety inspections to audit compliance with written chemical hazard practices.

Earthquake Response
Employees shall be familiar with the following guidelines:
• Movement of the ground is seldom the actual cause of death or injury.
• Most injuries result from partial building collapse and falling objects and debris.
- Before the shaking starts, know the safe and danger spots in your area.
- Avoid non-essential telephone use, as the lines will be congested with emergency calls.

**Safe Spots**
- Against inside walls
- Under sturdy tables, desks or supported doorways.

**Danger Spots**
- Windows
- Mirrors
- Hanging objects
- Tall, unsecured furniture and fixtures.
Policy

As part of its commitment to providing a healthy and safe environment for service users, residents, employees and visitors, it is the policy of MPA Society that emergency plans and procedures will be developed and implemented to address a variety of emergency situations. These include, but are not limited to: (a) violent or other threatening behavior; (b) fires; (c) medical emergencies; (d) natural disasters; and (f) power failures. As part of this policy, all emergency procedures will include provisions for handling evacuees, temporary shelter, and a continuation of essential services.

Organizational Value

Safety & Well-being

Procedure

The following general guidelines and procedures for emergencies apply at all MPA Society program sites.

Fire

Each program site will be equipped with smoke alarms and fire extinguishers which are well maintained and accessible.

In the event of a fire:

- If available, pull the fire alarm
- As soon as it can be practically accomplished, call 9-1-1 and report location of the fire, suspected cause (if known) and your name and phone number. Do not hang up until the operator has ended the call
- Use the fire extinguisher if you are trained and the fire is small
- Initiate evacuation procedures as appropriate at each program site.
- Follow instructions of emergency personnel
- DO NOT re-enter the building until given permission by the fire personnel

Bomb Threat

All bomb threats are assumed to be real and are to be taken seriously.

If an individual phones in with a bomb threat:
a. Stay calm, Listen and be courteous and do not interrupt the caller
b. Take notes and obtain as much information as possible such as:
   • Exact location of the bomb
   • When it is set to go off
   • What kind of bomb is it
   • Description of the callers voice and any background noises
c. Contact police via 911 immediately and inform them that a bomb threat is in progress. Ask if they have any special instructions until authorities arrive.
d. Initiate evacuation procedures.
e. Follow instructions of emergency personnel
f. DO NOT re-enter the building until given permission by emergency personnel.

Power Outage

Power outages may occur as a result of weather or infrastructure related incidents. Most power outages are of short duration and do not interfere with programs or service delivery. After a power outage check to see that an electrical breaker has not blown.

If the outage is prolonged, the health and safety of the staff and residents/service users may be at risk. Necessary emergency procedures, including evacuation, should be followed. Therefore, the Executive Director or Director will determine the appropriate course of action at their program site in the event of a power outage. Every attempt will be made to communicate with utility company officials to determine the estimated duration of the outage so that a reasonable decision can be made regarding program operations and more specifically, if operations should be temporarily suspended.

Natural or other Disasters

For the purposes of this policy, natural disasters are defined as, but not limited to: (a) earthquakes; (b) floods; (c) storms; and (d) other acts of nature over which man has no control. All emergency procedures shall provide for: (1) the immediate evacuation of all service users, residents, employees and visitors to a safe location (as pre-determined by the Executive Director and/or Director/Program Manager or as identified in a local community action plan) if so directed by local law enforcement officials; (2) immediate evacuation of all service users to a safe location (as predetermined or as identified in a local community action plan) if it appears to the Executive Director/Director/Program Manager or senior employees that to remain in the facility would subject any person to physical injury or harm; (3) accounting for all service users, residents, employees and visitors to local law enforcement officials/authority; (4) securing the facility to prevent unauthorized entry during the emergency and to protect property and service user/resident records; and (5) immediate notification to the Executive Director.

In the event that an evacuation cannot be conducted in time to avoid a natural disaster and persons are forced to remain in any MPA Society program site during the disaster, persons shall remain away from windows and doors as a way to protect themselves from glass and other debris. Additionally, all persons should congregate in an interior room and seek shelter under desks or other substantial furniture that would provide shelter from falling objects and/or debris. As soon as it can be practically accomplished, employees should immediately notify appropriate law enforcement via phone to advise them of their situation and seek advice regarding a further course of action.
**Medical Emergencies**

In the event of a medical emergency, the first priority should be to determine if the person is breathing, and if his/her heart is beating, so that cardiopulmonary resuscitation (CPR) can be administered, if required. For medical emergencies that involve fainting, lapses of consciousness, chest pains, convulsions, severe bleeding, and other similarly serious symptoms, 911 should be used to summon professional medical assistance. Ideally, one or more employees will attend to the victim while other employees notify appropriate medical emergency personnel. Until such help arrives, employee shall render any and all such aid and comfort as is indicated by the situation and, that can be provided within the scope of their training in first aid and CPR.

Employees shall access the victim’s emergency medical information and make information available to emergency medical personnel upon their arrival.

**Violent or other Threatening Situations**

In the event that any person acts in an aggressive or combative manner, the overriding rule in all cases must be to always avoid or minimize physical injury to self or others. Every effort should be made to use NVCI verbal/non-contact de-escalation techniques to de-escalate/defuse any situation that appears to pose the potential for personal harm or injury.

- Assess the situation to determine action necessary.
- Take precautions to enhance the safety of the individual, other residents/service users or employees.
- Maintain distance of at least an arm’s length away.
- Calmly attempt intervention using NVCI techniques, including verbal techniques.
- If attempts at de-escalating are not successful, efforts will be made to calmly move the individual from the immediate area (this is especially important if there are other residents/service users present or the environment is not safe).
- Employees should position themselves closest to the door so that a safe and quick exit can be made.

In the event that de-escalation is not possible and a violent incident occurs, employees should seek to protect themselves and others by either evacuating the premises or seeking shelter in a locked office/area. In the event that escape is not possible, employees should cooperate with any demands made of them and, avoid any action that would exacerbate the situation. In some cases, the preferred course of action will be to ask other residents/service users and employees to leave the premises until the situation can be resolved. In other situations, the most prudent course of action will be to engage in verbal dialogue to attempt to de-escalate the situation. In still other cases, the severity of the situation may dictate that the employees request immediate emergency assistance from police via 911. For clarification, direct physical confrontation is viewed as an undesired course of action although this policy recognizes that employees might well find themselves in situations in which they are forced to defend themselves from physical assault.

In the event of the recognition of a face-to-face potential psychiatric crisis, the direct care employees closest by physical proximity to the resident/service user or the closest therapeutic relationship with the resident/service user will assess the situation to determine the appropriate course of action. This could include contacting local Mental Health Emergency Services for psychiatric care follow up, contacting the individuals mental health service provider as indicated in case file or contacting police via 911 for
immediate assistance.

**Evacuations and Continuation of Essential Services**

Since MPA Society operates a variety of programs including housing, housing support and advocacy services, each program location and/or program service will maintain evacuation and continuation of essential service plans which are specific to their program and location. These plans will be reviewed at least annually and updated as required. Essential elements of each plan will include: (1) when evacuation is appropriate, (2) complete evacuation from the physical facility, (3) the safety of evacuees, (4) accounting for all persons involved, (5) temporary shelter, when applicable, (6) identification of essential services, (7) continuation of essential services, (8) emergency phone numbers (9) notification of the appropriate emergency authorities and (10) evacuation routes that are (a) accessible and (b) understandable to persons served, personnel and other stakeholders including visitors.

**Tests of Emergency Plans and Procedures**

As a way to maintain employee readiness to handle emergency situations, each emergency plan/procedure will be tested at least annually on each shift and at each location. It is the responsibility of the Director/Program Manager/Supervisor to schedule drills in accordance with this procedure. Tests of emergency procedures will include drills for fire, bomb threats, natural/other disasters, power failures/outages, medical emergencies, and workplace threats and violence. The tests of emergency plans and procedures may include evacuation of residents/service users/visitors and/or employees as appropriate to the setting and the drill being conducted. It may not be possible to successfully conduct one or all steps of the drill. For example, overnight staff will not be able to evacuate residents or some people supported may be distressed by drills. This will vary from site to site. All tests of emergency plans and procedures will be documented and provided to the Health and Safety Officer for review. The Health and Safety Officer is responsible for analyzing the effectiveness of the drill for performance improvement purposes; including actions that need to be taken, necessary education and training of personnel and results of any performance improvement plans. In the event that the tests result in any recommendation for corrective actions or program changes, Directors/Program Managers/Supervisors will discuss those recommendations with their Manager or Director for resolution. Completed forms will be maintained on file at the respective program site along with all other health and safety program documentation.

ALL EMPLOYEES OF MPA SOCIETY ARE RESPONSIBLE FOR CONFORMANCE WITH THIS POLICY
Title: Health and Safety Inspections

Category: Operations  
Reference No: OPS – 5

Approved by: Senior Leadership Team  
Effective Date: August, 2013
Revised: Mar 9, 2018

Policy

MPA Society is dedicated and committed to providing services in locations and facilities that protect the health, safety and welfare of people they serve, visitors and employees. It is the policy of MPA Society that all programs will undergo periodic internal and external health and safety inspections as a way to maintain an environment that protects the health and safety of service users and employees alike. Internal health and safety inspections are those self-inspections conducted at least semi-annually and on every shift. External inspections are defined as those conducted annually by a local fire department employee, representatives of insurance carriers, local building code inspectors or health and safety experts not employed by MPA Society. The assigned employee whom conducts the inspection will file a report that will be maintained on file by the Health and Safety Officer for an indefinite period of time. The Health and Safety Officer will also maintain copies of inspection reports from external inspections on file.

Organizational Value

Safety & Well-being

Procedure

The Executive Director is ultimately responsible for the implementation of this policy and specifically, for ensuring that internal and external health and safety inspections are scheduled, conducted, and documented as required herein. Management, and the Occupational Health and Safety Committee, are responsible for the correction of any deficiencies/discrepancies noted as a way to ensure that MPA Society always provides an environment that protects the health and safety of all interested stakeholders.

Management will monitor the health and safety climate and environment of all facilities under their responsibility to ensure compliance with this policy and will work with the OH and S Committee and/or the Executive Director as necessary in the correction of any and all problems, discrepancies and deficiencies.

All employees are responsible for identifying any condition that is unsafe, unhealthy or, that poses a potential risk to service users, visitors and employees, and for reporting their observations to his/her Director/Program Manager or Executive Director.
Title: Medication Errors/Emergencies

<table>
<thead>
<tr>
<th>Category: Operations</th>
<th>Reference No: OPS – 6</th>
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<tr>
<td>Approved by: Senior Leadership Team</td>
<td>Effective Date: April, 2006</td>
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Policy

All Medication Emergencies shall be reported immediately to the appropriate person(s) to assist with the emergency - Director/Program Manager/ On Call Manager.

Organizational Value

Safety & Well-being

Definition

A Medication Emergency is considered to be:

1. When a person-in-care could be in danger of toxic effects, illness. Examples: wrong medication, inaccurate dose.

2. A person-in-care is having a severe reaction to medication(s).

   FYI: Most people experience some side effects (e.g. EPS) this does not mean the drug should be stopped.

3. A person-in-care missing medication(s) as designated in their care plan and MAR.

Procedure

1. Do not leave the person-in-care unattended until further instructions.

2. Contact Poison Control Centre first if an extra dose of a prescribed medication or a wrong medication is given, otherwise contact one of the following persons in this order:

3. STATE IT IS AN EMERGENCY WHEN PHONING:

   • POISON CONTROL CENTRE: 682-5050 (Vancouver)
   • THE PERSON-IN-CARE’S DOCTOR OR CARE TEAM (MON-FRI 0900-1700 hrs)
• MENTAL HEALTH EMERGENCY SERVICES: 874-7307 (Vancouver)

4. Follow instruction and continue to monitor person-in-care if necessary.
5. Fill out INCIDENT REPORT and leave for the Manager.

ALL MPA SOCIETY EMPLOYEES ARE RESPONSIBLE FOR COMPLIANCE WITH THIS POLICY.
Title: Medication Support and Administration Policy

Category: Operations  Reference No: OPS – 7

Approved by: Senior Leadership Team  Effective Date: October 9, 2014

Big Picture

Medications will be safely administered and stored in a manner that protects members and staff in accordance with relevant legislative requirements. To ensure the health and safety of our members, MPA Society is committed to setting and maintaining standards for safe practice involving medication support and medication administration programs. By maintaining compliance with the Residential Care Regulations under the Community Care and Assisted Living Act, MPA strives to ensure all staff are properly orientated and trained in medication support and medication administration policies and procedures. MPA also ensures compliance with the Pharmacy Operations and Drug Scheduling Act.

Organizational Value

Safety & Well-being

Policy

MPA and the contracted pharmacy will ensure compliance in all matters relating to pharmacy services, medication support and medication administration programs, including:

- Medication delivery and storage
- Medication support supervision (including self-administration by members)
- Medication administration
- Medication Reviews
- Medication Safety Committees
- Members’ medication administration records
- Medication orders and processing
- Medication returns to pharmacy
- Reporting of medication errors / incidents

Procedure

All staff, including nurses, mental health workers and recreational therapists will receive the appropriate level of orientation and ongoing training equal to the demands of the job description and program description.

Appropriate training and educational resources will be located at all programs and staff training needs will be evaluated annually.

Pharmacy services will be evaluated by senior management on an annual basis.
**Title: Missing Person Policy**

**Category:** Operations  
**Reference No:** OPS – 8  
**Approved by:** Senior Leadership Team  
**Effective Date:** August, 2011  
**Revised:** July 2015

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**Policy**

Levels of support for MPA Society residents and service users vary and, unless otherwise reported, a person will be considered missing if they are absent for a significant or unusual length of time without explanation. This amount of time may vary in consideration of the resident or service users’ level of independence and judgment of the staff at the worksite.

**Organizational Value**

Safety & Well-being

**Procedure**

If an MPA resident or service user goes missing, as determined by staff, a search of the immediate area should be conducted. Depending on the individual’s level of independence, emergency personnel may be contacted at this point. Follow instructions of emergency personnel.

1. Contact the emergency contacts listed in the persons file or other known contacts, places the individual may frequent. Also contact Mental Health Teams and local hospitals.

2. If, after a length of time determined by staff as unusual and/or out of character, notify the police. Explain the situation and give a detailed description of the missing person including height, weight, hair and eye color, clothing and any unique markings (i.e. tattoos).

3. When the missing person is located, notify all persons who were contacted

4. Staff on duty will document the incident using the Incident Report form.

**ALL MPA STAFF ARE RESPONSIBLE FOR COMPLIANCE WITH THIS POLICY.**
Title: Agency Transportation Policy

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<tr>
<th>Category: Operations</th>
<th>Reference No: OPS – 9</th>
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<tr>
<td>Approved by: Senior Leadership Team</td>
<td>Effective Date: Aug 2013 Revised: December 2017</td>
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Policy

It is the policy of MPA Society that agency vehicles will be used only for the conduct of official MPA Society business and be liability insured, safe, and in operable condition. Inherent in this policy is the use of private vehicles owned by employees who are required and/or authorized to provide transportation to persons served. In the event that an employee chooses to use a private vehicle which has not been authorized for such use by MPA Society, the employee will be doing so in violation of this policy and the organization’s vehicular insurance coverage will not pay for any damages or injuries incurred and the employee will be liable for all incurred expenses.

Organizational Value

Safety & Well-being
Responsibility & Accountability

Procedure

The following procedures pertain to all transportation activities conducted by the organization:

1. Guidelines for use of MPA Society’s vehicles are as follows:

   A. Any vehicle used to transport a resident/service user will have appropriate insurance coverage for business use.

   B. The vehicle will contain a copy of the vehicle insurance coverage and procedures for handling emergencies, including roadside and personal emergencies that may occur during vehicle operation.

   C. Drivers must have a valid driver’s license.

   D. Drivers and all passengers must wear seatbelts at all times the vehicle is in operation.

   E. A vehicle shall not be used to transport more passengers than designated by the manufacturer.

   F. A cellular phone shall be available for emergency use. Drivers shall not use cellular phones while driving.

   G. Use of tobacco products is not allowed in MPA Society vehicles at any time or in personal vehicles when being used to transport residents/service users or other employees.
H. Every vehicle used for resident/service user transportation shall have a fully stocked first-aid kit that is easily accessible but secured so that these items are not loose in the vehicle.

I. The Director/Program Manager must approve use of the vehicle prior to using it for transporting residents/service users.

J. When operating an agency vehicle, all drivers shall utilize a transportation log to include, at a minimum:

1. Date and time;
2. Destination/purpose of trip;
3. Driver(s);
4. Beginning and ending mileage to each point.
5. Confirmation that standard safety features and devices are in satisfactory operating condition.
6. Report of current and new damage to the vehicle.

K. Drivers shall observe all safe driving practices and laws while operating vehicles for official MPA Society business.

L. Drivers will immediately report any new damage to the vehicle, regardless of fault, to their immediate supervisor. This includes completion and submission of a Critical Incident Report.
Title: Personal Vehicle Use

Big Picture

Employees are notified, at the time of their application for employment with MPA Society, whether a vehicle is required for their position. If this requirement exists, the Organization will reimburse the employee at a current standard per Kilometer rate. Employees are expected to maintain, in good standing, their license, insurance and access to a vehicle. Should an employee lose their license or be in any situation where they are not able to drive, they need to report this to their supervisor immediately.

MPA Society encourages green initiatives. To this end, we encourage all employees interested in proposing sustainable transportation options to approach their supervisor to discuss these possibilities.

Organizational Value

Responsibility & Accountability

Policy

1. Where having access to a vehicle is required, as part of an employee’s position description, their personal car should be used when conducting business.

2. The reimbursement rate is determined by the Collective Agreement.

3. Employees must have the designated business use insurance coverage prior to using their vehicle for Society purposes and obtain $3 million liability insurance.

4. There may be exceptions to using personal cars (e.g. where a program has access to a Society vehicle), but the exception should be noted on an expense report. The Society will reimburse an employee for any additional insurance coverage required, in accordance with standard provisions outlined in the Society’s collective agreements.

5. MPA reimburses employee’s round trip mileage. However, the distance should be calculated as the shorter of the distance from the office to the destination or from an employee’s home to the destination.

6. Mileage expenses between an employee’s home and their assigned work location are not reimbursable.

7. Employees operating a vehicle on Society business assume financial responsibility for their actions.

8. MPA Society will not assume responsibility for any parking fines, loss or damage to a vehicle or contents concerning a private vehicle which is being used for the organization’s business, except as provided in the Collective Agreement. Where an employee uses a personal vehicle on Society business, they assume full responsibility for:
• Wear, destruction, fire, theft or damage of any kind or nature to the vehicle (including parts, tires, accessories or personal property) occurring during the period of use on Society business.

• Anyone who violates the laws or ordinances of the area in which they are operating a vehicle on Society business assumes financial responsibility for their actions.

Procedure

1. Employees will provide proof of valid BC Driver’s license, of which a photocopy will be made and placed on the employee’s file. At the Society’s discretion, an employee may also be required to provide a current driver’s extract. In this case, the cost of the extract will be borne by the Society.

2. The Employee will provide proof of required business insurance.

3. The Society will reimburse employees for the following:
   • The cost of business insurance coverage on your automobile, and the difference between the insurance coverage as prescribed by the collective agreement, and our required $3 million third party liability.
   • The amount of reimbursement to the employee is based upon a comparison between (1) business use and $3 million third party liability with a 4 year safe driver discount, and (2) pleasure to/from work rate and $2 million third party liability with a 4 year safe driver discount.

   Note: business use coverage is required only if an employee uses their vehicle for business at least 6 times in a month.

4. Employees will immediately advise their employer of any change in their driver or vehicle status.

5. Employees will submit mileage expense claims monthly to their immediate supervisor. The supervisor will review and authorize payment and forward to Finance.

*Forms available from MPA Society Accounting Dept.*
Title: Vehicle Safety Inspection and Liability Reporting

Category: Operations | Reference No: OPS – 11
Approved by: Senior Leadership Team | Effective Date: Aug 2013

Policy

MPA Society requires all employees that operate leased/rented/owned (personal) vehicles during the performance of their jobs to submit proof of automobile liability insurance coverage and a quarterly self-reported vehicle inspection checklist to ensure these vehicles are maintained in safe driving condition.

Organizational Value

Safety & Well-being
Responsibility & Accountability

Procedure

The following guidelines support this policy and provide direction for employees to submit ongoing proof of auto liability insurance requirements and to complete a self-report of the safe and operable condition of the vehicle through the use of quarterly inspection reports.

1) As a condition of employment, all licensed drivers who use personal vehicles to conduct performance related activity for MPA Society are required to obtain and submit ongoing proof of appropriate liability insurance requirements.

2) Employees are required to submit a vehicle inspection report quarterly as scheduled by Human Resources. The information must include the employee name, date of inspection, and license plate number of the vehicle used.

3) The self-report contains a list of items to be checked as in satisfactory or unsatisfactory condition and an affirmation that the vehicle is in safe driving condition. All unsatisfactory conditions should be explained in the remarks section of the vehicle inspection report.

4) It is the employee’s responsibility to take immediate action to maintain the safe operation of vehicle use.

5) The report must be signed by the employee making the inspection and reviewed by management before the vehicle may continue to be operated for agency related tasks and or assignments.

Management will review the reports for accuracy and provide reminder notifications as necessary.
Title: Psychosocial Rehabilitation Policy

Category: Operations Policies
Reference No: Ops-12

Approved by: Senior Leadership Team
Effective Date: May 26, 2016
Revised:

Big Picture

MPA Society has been practicing the guiding principles of Psychosocial Rehabilitation before it was being described in academic literature. The reason was simple; MPA was formed by people experiencing the debilitating effects of mental illness during a time when stigmatization and shame resulted in only institutional services being available.

Policy

Psychosocial Rehabilitation (PSR) promotes personal recovery, successful community integration and satisfactory quality of life for persons who have a mental illness or mental health concern. Psychosocial rehabilitation services and supports are collaborative, person directed, and individualized, and an essential element of the human services spectrum. They focus on helping individuals develop skills and access resources needed to increase their capacity to be successful and satisfied in the living, working, learning and social environments of their choice and include a wide continuum of services and supports. This Policy guides the actions of management, staff, volunteers and students in their treatment of persons served.

Organizational Value(s)

Respect & Dignity
Empowerment & Growth
Responsibility & Accountability

Procedure

The following Core Principles and Values further describe key elements of Psychosocial Rehabilitation practice. These principles and values are related to evidence-based PSR practices and informed by the lived experiences of individuals with mental health challenges. Employees, volunteers and students of MPA Society will conduct themselves consistent with the following principles and values:

PSR CORE PRINCIPLES & VALUES

- Psychosocial rehabilitation practitioners convey hope and respect, and believe that all individuals have the capacity for learning and growth.
• Psychosocial rehabilitation practitioners recognize that culture and diversity are central to recovery, and strive to ensure that all services and supports are culturally relevant to individuals receiving services and supports.

• Psychosocial rehabilitation practitioners engage in the processes of informed and shared decision-making and facilitate partnerships with other persons identified by the individual receiving services and supports.

• Psychosocial rehabilitation practices build on strengths and capacities of individuals receiving services and supports.

• Psychosocial rehabilitation practices are person-centered; they are designed to address the distinct needs of individuals, consistent with their values, hopes and aspirations.

• Psychosocial rehabilitation practices support full integration of people in recovery into their communities, where they can exercise their rights of citizenship, accept the responsibilities and explore the opportunities that come with being a member of a community and a larger society.

• Psychosocial rehabilitation practices promote self-determination and empowerment. All individuals have the right to make their own decisions, including decisions about the types of services and supports they receive.

• Psychosocial rehabilitation practices facilitate the development of personal support networks by utilizing natural supports within communities, family members as defined by the individual, peer support initiatives, and self- and mutual-help groups.

• Psychosocial rehabilitation practices strive to help individuals improve the quality of all aspects of their lives, including social, occupational, educational, residential, intellectual, spiritual and financial.

• Psychosocial rehabilitation practices promote health and wellness, encouraging individuals to develop and use individualized wellness plans.

• Psychosocial rehabilitation services and supports emphasize evidence-based, promising, and emerging best practices that produce outcomes congruent with personal recovery. Psychosocial rehabilitation programs include program evaluation and continuous quality improvement that actively involve persons receiving services and supports.

• Psychosocial rehabilitation services and supports must be readily accessible to all individuals whenever they need them; these services and supports should be well coordinated and integrated as needed with other psychiatric, medical, and holistic treatments and practices.
Title: Overdose Prevention and Naloxone Administration Policy

Category: Operations Policies
Reference No: Ops-13

Approved by: Senior Leadership Team
Effective Date: January 3, 2017

Big Picture

MPA Society operates under a harm reduction framework and supports interventions aimed at mitigating harms associated with high risk behaviours, such as illicit drug use. As such, MPA Society supports the implementation of naloxone administration as a response to opioid overdose across all programs. MPA Society is committed to ensuring all staff are trained in the administration of Naloxone. Moreover MPA Society is committed to the promotion of person’s served receiving training and access to Naloxone through collaboration with community training sessions.

Policy

MPA Society provides naloxone training for staff and supports the administration of naloxone to persons served in the event of an overdose. Staff participation in the training is a requirement of their position. Staff must have received naloxone training in order to administer. Administration is in conjunction with calling 911.

Organizational Value(s)

Safety & Well-Being
Respect & Dignity

Procedure

MPA Society will provide the required naloxone administration training to all staff. Staff participation in this training will be mandatory. Naloxone kits will be available at each program site and to all outreach staff. MPA Society programs will also facilitate clients receiving administration training and access to naloxone kits. At program sites naloxone kits shall be safely stored in an accessible area, for example next to the emergency first aid kit. Program Coordinators and Managers will be responsible to ensure supplies are maintained.

In case of a suspected opioid overdose, the following steps must be followed:

SAVE ME protocol

- 911 – Call immediately
- **Stimulation:** Can you wake them? Shout and do a stern rub. Non responsive?
- **Airway:** Check their mouth, remove obstructions and tilt head back.
- **Ventilate:** Keep head tilted, pinch nose and give 2 breaths. Continue 1 breath every 5 seconds
- **Evaluate:** If person not breathing move to naloxone administration.
• **Muscular Injection:** snap top off ampoule, draw all of naloxone. Inject into large muscle (thigh, upper arm, or buttock)

• **Evaluate:** Continue to administer breaths (if person not breathing) and if no response give another dose in 5 minutes.

**Follow Up:**

• Staff will remain with individual until paramedics arrive and take over care, individual never to be left alone.

• Staff will complete required documentation, including a Critical Incident Report and the Overdose Response Information Form and ensure they are forwarded to proper recipients.

• Staff will contact their manager to arrange a debriefing session.
Title: Code of Conduct

Category: Workplace and Regulatory Conduct

Reference No: WRC – 1

Approved by: Senior Leadership Team

Effective Date: April 18, 2013
Revised: July 2015, August 2018

Big Picture

MPA is committed to promoting integrity and maintaining the highest standard of conduct in all of its activities.

At MPA Society our work environment is friendly and casual but professional, and one that has boundaries.

One of our fundamental principles is an expectation that all individuals, Members, business, and property be treated with respect and that people conduct themselves with a high degree of integrity, objectivity and professionalism.

Organizational Value

Responsibility & Accountability

Policy

1. Employees are expected to know, understand, and adhere to organizational practices in order to protect the best interests of the Society and individuals within it. All employees are expected to respect the rights and feelings of others and demonstrate personal integrity and professionalism.

2. Employees are required to refrain from engaging in improper conduct. Employees are subject to dismissal for engaging in serious improper conduct. “Improper conduct” includes any illegal, fraudulent, dishonest, or unethical behavior, or serious negligence in the performance of duties.

3. All Employees are expected to maintain professional boundaries with the people MPA Society serves, including their families.

4. This policy applies to both on duty conduct and off duty conduct and to electronic media including online technology and social media.

Procedure

1. The following are some examples of activities that MPA Society views as improper conduct. This is by no means an exhaustive list, and all employees are expected to exercise good judgment. However, these are actions for which an Employee can assume immediate disciplinary action will be taken, up to and including termination of employment:
• Sexually, verbally, physically, or mentally abusing or harassing any person associated with the Society – on or off premises.

• Theft

• Abuse of Society property or equipment

• Breach of trust

• Engaging in a personal or financial relationship or transaction with clients or members

• Solicitation or acceptance of personal gifts or gratuities in exchange for preferential treatment

• Falsifying Society records

• Disclosing confidential or proprietary Society information to unauthorized persons

• Engaging in activity that is determined to be a serious conflict of interest with the Society

• Making libelous, slanderous or maliciously false statements towards or concerning MPA, its employees, members or services.

• Possession, use or sale of impairing substances or illegal substances on Society premises

• Being under the influence of impairing substances at any time on Society premises or while on Society business

• Insubordination or failure to carry out instructions

• Job abandonment

2. Any employees having questions regarding conduct, should direct these to their immediate Supervisor or Manager or Program Director.
Big Picture

In the course of day-to-day service, all employees come into contact with sensitive information including items such as our business processes, participant information, contracts, Human Resources information, etc. Every employee has a responsibility to use good judgment and safeguard sensitive Agency information. Our practice is to consider all information an employee gains at work as confidential and not to be discussed with others unless they work for MPA and have a legitimate business reason for needing the information.

Many of the MPA program areas will have external regulatory requirements detailing specific practice expectations for safe-guarding confidential information. Our expectation is that these regulations will be met and upheld.

Organizational Value

Confidentiality
Responsibility & Accountability

Policy

We define confidential information as any information that would put the Society at a competitive disadvantage if improperly communicated or information that cannot be communicated due to contractual or legal obligations.

1. All data stored must be classified for data sensitivity. This enables IT to implement the appropriate back up and restoration procedures and ensure that confidentiality is maintained.

Confidential information, pertaining to the people that MPA Society serves shall not be shared by staff, during casual conversation, including with staff and colleagues of outside agencies and family and friends of residents. Information to be shared with outside agencies must be limited to matters of psychiatric treatment except in an emergency.

1. Wherever possible staff will gain client consent prior to the sharing of any information.

2. The only exception to this policy is where the immediate safety of a resident or employee is threatened.
Procedure

The following guidelines shall be adhered to:

- Confidential Agency information must not be divulged to anyone other than authorized persons and should be used only for the Agency’s benefit.

- Communicating confidential material to a co-worker should only be done when it’s essential for that person to perform his or her job. (eg. payroll and HR information).

- Confidential information going through internal or external mail should be marked as such on the outside of the envelope.

- When faxing confidential material take steps to ensure that the recipient obtains the information directly.

- Confidential information in hard copy form should be kept in a secure, locked location. Sensitive documents being disposed of should be shredded.

- All contracts are held in a secure cabinet in the Director of Finance’s office.

- Individuals are responsible for protecting the security of confidential information on the computer network. Passwords should not be shared.

- All sensitive files being transferred electronically should be password protected.

- Individuals are expected to keep a clean desk. This means that when employees leave work for the day or are absent from their desk for extended period, all sensitive information is placed in their desks or locked storage cabinet(s). This includes papers and computer storage media such as disks and CD's.

- Alleged breaches of confidentiality will be reported to the employee’s manager.

- Improperly divulging or using confidential information may result in corrective action including counseling, reprimand or termination.

Examples of Confidential Information

Sensitive Society information includes, but is not limited to:

- Confidential information relating to projects and processes
- Schedules and estimates
- Information presented at staff meetings
- Marketing information
- Financial information, accounting data and practices
- Business plans and strategies
- Security information
- Negotiations and contracts
- Client information
- Incident reports
- Personal information about employees, and other Agency individuals.
Title: Personal Information Protection Policy

Category: Workplace and Regulatory Conduct  Reference No: WRC – 3

Approved by: Senior Leadership Team  Effective Date: April, 2013

Big Picture

At MPA Society, we are committed to providing our participants, members, donors, employees and supporters with exceptional service. As providing this service involves the collection, use and disclosure of some personal information about our participants, members, donors, employees and supporters, protecting their personal information is one of our highest priorities.

While we have always respected our participants, members, donors, employees and supporter’s privacy and safeguarded 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 came into effect on January 1, 2004 sets out the ground rules for how B.C. businesses and not-for-profit organizations may collect, use and disclose personal information.

Organizational Value

Confidentiality

Policy

1. We will inform our participants, members, donors, employees and supporters 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 a reasonable person would consider appropriate in the circumstances.

2. This Personal Information Protection Policy, in compliance with PIPA, outlines the principles and practices we will follow in protecting participants’, members’, donors’ and supporters’ personal information. Our privacy commitment includes ensuring the accuracy, confidentiality, and security of our participants’, members’, donors’, employees’ and supporters’ personal information and allowing our participants, members, donors, employees and supporters to request access to, and correction of, their personal information.

Contact information – means 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.

Privacy Officer – means the individual designated responsibility for ensuring that MPA Society complies with this policy and PIPA.
Definitions

Personal Information – means information about an identifiable individual [E.g., including name, age, home address and phone number, social insurance number, marital status, religion, income, credit history, medical information, education, employment information]. Personal information does not include contact information (described below).

Contact information – means 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.

Privacy Officer – means the individual designated responsibility for ensuring that MPA Society complies with this policy and PIPA.

Policy 1 – Collecting Personal Information

1.1 Unless the purposes for collecting personal information are obvious and the member, donor, employee and supporter 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.

1.2 We will only collect member, donor, employee and supporter information that is necessary to fulfill the following purposes:

• To verify identity;
• To identify member, donor, employee and supporter preferences;
• To deliver requested products and services;
• To process a magazine or newsletter subscription;
• To enroll the member in a program;
• To meet Human Resource functions, such as payroll and benefits administration;
• To satisfy Labour Relations requirements for supervision of workforce;
• To send out Society membership information;
• To contact our participants, members, donors, employees and supporters for fundraising;
• To ensure a high standard of service to our members, donors, and supporters;
• To meet regulatory requirements;
• To assess suitability for tenancy;
• To collect and process rent payments;

Policy 2 – Consent

2.1 We will obtain Member, donor, employee and supporter consent to collect, use or disclose personal information (except where, as noted below, we are authorized to do so without consent).
2.2 Consent can be provided in writing and electronically, or it can be implied where the purpose for collecting using or disclosing the personal information would be considered obvious and the participant, member, donor, employee and supporter voluntarily provide personal information for that purpose.

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

2.4 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), participants, members, donors, employees and supporters can withhold or withdraw their consent for MPA Society to use their personal information in certain ways. A customer’s, member’s, employee’s, donor’s 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 the participant, member, donor, employee and/or supporter in making the decision.

2.5 We may collect, use or disclose personal information without the member’s, donor’s, employee’s or supporter’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

Policy 3 – Using and Disclosing Personal Information

3.1 We will only use or disclose member, donor and supporter personal information where necessary to fulfill the purposes identified at the time of collection.

Some examples include:

- To conduct member, donor, employee and supporter surveys in order to enhance the provision of our services;
- To contact our members, donors, employees and supporters directly about policy decisions and/or services that may be of interest;

3.2 We will not use or disclose member, donor, employee and supporter personal information for any additional purpose unless we obtain consent to do so.

3.3 We will not sell member, donor, employee and supporter lists or personal information to other parties.
Policy 4 – Retaining Personal Information

4.1 If we use member, donor, employee and supporter personal information to make a decision that directly affects the participant, member, donor, employee and supporter, we will retain that personal information for at least one year so that the participant, member, donor, employee and/or supporter has a reasonable opportunity to request access to it.

4.2 Subject to policy 4.1, we will retain member, donor, and employee and supporter personal information only as long as necessary to fulfill the identified purposes or a legal or business purpose.

Policy 5 – Ensuring Accuracy of Personal Information

5.1 We will make reasonable efforts to ensure that member, donor and supporter personal information is accurate and complete where it may be used to make a decision about the participant, member, donor, employee and supporter or disclosed to another organization.

5.2 Members, donors, employees and supporters 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 Privacy Officer or designated individual.

5.3 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 participants’, members’, donors’, employees’ and/or supporters’ correction request in the file.

Policy 6 – Securing Personal Information

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

6.2 The following security measures will be followed to ensure that member, donor, employee and supporter personal information is appropriately protected:

- the use of locked filing cabinets;
• physically securing offices where personal information is held;
• the use of user IDs, passwords, encryption, firewalls;
• restricting employee access to personal information as appropriate (i.e., only those that need to know will have access;
• contractually requiring any contracted service providers to provide comparable security measures.

6.3 We will use appropriate security measures when destroying members, donors, employees and supporter’s personal information such as shredding documents and deleting electronically stored information.

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

Policy 7 – Providing Participants, members, donors, employees and supporters Access to Personal Information

7.1 Members, donors, employees and supporters have a right to access their personal information, subject to limited exceptions.

Some exceptions include: solicitor-participant privilege, where disclosure would reveal personal information about another individual, and health and safety concerns

7.2 A request to access personal information must be made in writing and provide sufficient detail to identify the personal information being sought. Any request to access personal information should be forwarded to the Privacy Officer or designated individual.

7.3 Upon request, we will also tell participants, members, donors, employees and supporters how we use their personal information and to whom it has been disclosed if applicable.

7.4 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.

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

7.6 If a request is refused in full or in part, we will notify the participant, member, donor, employee and supporter in writing, providing the reasons for refusal and the recourse available to the participant, member, donor and supporter.
Policy 8 – Questions and Complaints: The Role of the Privacy Officer or designated individual

8.1 The Privacy Officer or designated individual is responsible for ensuring MPA Society’s compliance with this policy and the Personal Information Protection Act.

8.2 Members, donors, employees and supporters should direct any complaints, concerns or questions regarding MPA Society’s compliance in writing to the Privacy Officer. If the Privacy Officer is unable to resolve the concern, the member, donor, employee and supporter may also write to the Information and Privacy Commissioner of British Columbia.

Contact information for MPA Society’s Privacy Officer:

Liz Hatton
Telephone: 604-482-3723
privacyofficer@mpa-society.org
Title: External Communication

Category: Workplace and Regulatory Conduct

Reference No: WRC – 4

Approved by: Senior Leadership Team

Effective Date: April, 2013

Revised: May 26, 2016

Big Picture

There may be opportunities or situations when we are individually approached to publish, interview, discuss or present to organizations or the press on behalf of the Society. It is important to our MPA Mission and Values, that all external communication on behalf of the Society be pre-approved by a Member of the Senior Management Team and in the case of media communications, the Executive Director, or his/her designate.

Organizational Value

Responsibility & Accountability

Policy

1. MPA Society information released externally must be controlled in such a way as to protect and preserve the MPA’s interest. Information must be managed to prevent unauthorized disclosure, modification, destruction or use. It must be agreed that Society proprietary information will be provided adequate physical security, recovery abilities, electronic access controls, and non-disclosure agreements.

2. Written or electronic approvals must be obtained from a member of the Senior Management Team before proceeding with the following:

   • All external communication distributed via the general media (including newspapers, magazines, radio, TV, etc.) or by printed media (including brochures, handbills, leaflets, and direct mail) – Requires Executive Director’s approval.
   • Advertising
   • Literature, and other such material relating to the Society, its programs, services, or facilities and presentations
   • Initiation of any campaign that will receive financial support for or from the Society or in which the Society will play a significant role.
   • Solicitation for donations.
• Any correspondence on MPA letterhead that is outside of the writer’s area of responsibility/authority or which presents a policy position. ie: staff member writing Ministry of Health to lobby for changes to practices in psychiatric wards in hospitals

3. Employees engaging in personal activities, such as blogs, letters to the editor, debates, etc. shall not represent themselves as MPA Society employees, without permission from their Director.

4. With the rise of social media, the ways in which MPA employees can communicate internally and externally continues to evolve. Social media activities should not disclose any information that is confidential or proprietary to the agency or that is in breach of any MPA Society policy.

Procedure

Before an employee engages in any external communication that is about or may have an impact on our Agency, they must obtain written or electronic approval from a member of the Senior Management Team. This includes but is not limited to:

• Print or electronic publications
• Speeches/Presentations
• Interviews
• Online discussion groups
• “Commenting to the press” – requires approval from the Executive Director

References: Code of Conduct Policy (WRC-1)
  Code of Ethics (LDR-1)
  Confidential Information Policy (WRC-2)
  Personal Information Protection Policy (WRC-3)
Title: Legal Actions or Inquiries

Category: Workplace and Regulatory Conduct
Reference No: WRC – 5

Approved by: Senior Leadership Team
Effective Date: January, 2014

Big Picture
There are very rare occasions when MPA employees have to deal with work-related legal conflicts, so when we are confronted by them we don’t always know how to respond. In order to ensure accuracy of information and protection of the MPA Society and the employees involved, the organization has enacted policies, should legal inquiries arise.

Organizational Value
Responsibility & Accountability

Policy
1. All legal inquiries shall be referred to the Executive Director, Director of Human Resources or his/her designate.

Procedure
In an effort to direct legal inquiries to the proper locations, the following procedure should be followed:

• If an employee, former employee, or job applicant has a legal inquiry or requests a legal action, direct the inquiry to the Human Resources department.

• If a funder, office visitor, or any other outside presence has a legal inquiry, direct the inquiry to the Executive Director.

Search Warrants, Subpoenas, Investigations and Other Legal Actions
In the event that any employee of MPA Society receives or is notified of any search warrant, subpoena, investigation, inquiry or other legal action involving the agency, the Executive Director, or Director and/or Program Manager will be immediately contacted by the most expedient means; ie. Telephone, e-mail, cellphone, fax, etc.

Copies of all legal documents served against MPA Society and/or its employees will be immediately copied and faxed or hand delivered to the Executive Director, Director and/or Program Manager. Under no circumstances will any records, files, receipts or other forms of documentation be released without authorization from the Executive Director.
This policy recognizes that employees might find themselves in a situation in which they could potentially be threatened or coerced into releasing documentation without following this policy. All employees must fully recognize and understand that:

1. “due process’ includes the established procedures of MPA Society regarding search warrants, subpoenas, investigations and other legal actions; and

2. these procedures include immediate notification to the Executive Director, Director and/or Program Manager in all cases and without delay. Only the Executive Director and his/her designee shall represent MPA Society with legal actions. Thus, only the Executive Director or the designee will converse in verbal or written form and provide MPA Society’s responses to any legal actions. The Executive Director or his/her designee shall contact the organization’s legal counsel promptly for guidance in responding to subpoenas, search warrants, investigations, and other legal actions.
Big Picture

MPA Society employs ethical individuals and we are an ethical Agency. We have a reputation to uphold and we want to make sure that our behavior and practices are sound and reflect our professionalism. At the same time, we never want to stifle off-hour activities, creativity, or the ability to engage in outside interests.

We trust employee judgment, but if an employee is unsure of a situation that may place them in a conflict of interest, please refer to the guidelines below or discuss the situation with their immediate Supervisor.

Partial list of potentially sensitive areas: Engaging in outside work; financial transactions with a potential client or Member, supplier, or competitor; immediate family member engaging in a business similar to ours; receiving personal gifts from a client or supplier; engaging in social activities outside of working hours, and social networking with a client.

Organizational Value

Responsibility & Accountability

Policy

Our agency, our Members, and the outside world, place high expectations on integrity. It is important that a high standard of ethical, moral, and legal conduct be upheld when business is conducted both internally and externally.

1. Employees may pursue personal, employment and private business interests and ventures, and may participate in other forms of decision-making organizations, provided these activities do not interfere with their employment at MPA Society or are in some way in conflict with or adverse to the Agency.

2. It is the responsibility of every individual to clarify such outside activities with the Agency. In such cases, the individual must provide a full written disclosure to the Executive Director so that an assessment can be made and any potential conflicts of interest may be prevented.

Procedure

The following situations require full written disclosure and approval:

- Employees are required to disclose any outside employment with their Director in advance. The Director will need to know the organization the employee will be working for and the type of work he or she will be performing.
• An employee accepts a retainer, commission, consulting fee, or any other fee arrangement or remuneration for any services related directly or indirectly to the services provided by MPA Society.

• An employee, or any member of their immediate family, directly or indirectly borrows from, lends to, invests in or engages in any financial transaction with a Member or anyone receiving services from MPA. Immediate family includes spouse, children, and any other relative sharing their household.

• An employee performs outside work during regular Agency working hours and makes use of the Agency’s facilities, equipment, labor, or supplies to conduct this outside activity.

1. If an employee engages in any approved outside work, they are under obligation to ensure their clients are aware that the work is in no way by, for, or in the name of MPA.

2. Failure to disclose or discuss information related to any of the above points may lead to corrective action, including dismissal.
Title: Gifts and Gratuities

Category: Workplace and Regulatory Conduct

Reference No: WRC – 7

Approved by: Senior Leadership Team

Effective Date: April, 2013

Revised: July 2017

Big Picture

There are many ways people show gratitude to one another. Because of the complexity involved in staff/member relationships, all of our interactions with the people we serve must be transparent and above suspicion. While we encourage generosity and recognize this as a value that we wish to impart with everyone, there are limits to what employees are able to accept and consequently, we encourage gratitude, from our members, to be demonstrated in non-material ways.

Organizational Value

Responsibility and Accountability

Policy

1. An employee is in conflict of interest when they:
   • sell goods or services to a client or accept loans or money from a member; or
   • behave in a way that would compromise or undermine the trust which the public places in the organization.

2. 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.

Procedure

1. No employee shall accept gifts in excess of $20 value, from individuals or agencies as a direct or indirect result of the position they occupy in the organization or the services they provide on behalf of the organization.

2. Gifts offered, with an estimated value of greater than $20 should be kindly and politely refused. Under no circumstances shall cash be accepted.

3. In the event that a gift is made to an employee, where the value is greater than $20 and the employee is unable to return or politely refuse the gift, the gift shall become the property of MPA Society and be turned over to the program manager or director.

4. Where a Member is indicating interest in giving a gift to an employee the Member should be encouraged to direct a gift to the program or service or make a donation to MPA Society or another charity, in the employee’s name.

5. Any employee with any question about this policy should contact their Director.
Title: Criminal Record Review – Mandatory Consent *

Category: Human Resources
Reference No: HR – 1

Approved by: Senior Leadership Team
Effective Date: April 18, 2013
Revised: July 2015

Big Picture

In accordance with the Criminal Records Review Act, all persons employed with the Society must undergo a criminal record check, at the time employment is offered, and at least once every 5 years thereafter.

Organizational Value
Safety and well-being

Policy

1. In accordance with the applicable legislation, a criminal record check will be required following a conditional offer of employment, and at minimum once every 5 years thereafter.

2. If an employee is charged with or convicted of a relevant offense subsequent to a criminal record check, the employee must promptly report the charge or conviction to their immediate supervisor and provide a criminal record check authorization for a further criminal record check.

Procedure

1. An individual who is offered employment must provide consent to a criminal record check authorization form to the Human Resource Manager, along with the processing fee. The consent form and processing fee will be forwarded to the BC Ministry responsible for the Act.

2. At least once every 5 years, existing employees will be provided notice to provide a criminal record check authorization to Human Resources.

3. The existence, or lack thereof, of a criminal record will be communicated by the Ministry directly to the Society.

4. If a criminal record exists, the Ministry may contact the employee directly, to request additional information relevant to an adjudication process. Results of the adjudication process will be communicated to both the employer and the employee.

5. If the adjudication process results in a determination that the employee poses a risk of physical, sexual or financial abuse to vulnerable adults, the employee will not be able to work the Society’s clients, which could result in termination of employment.
6. An employee may request a re-consideration, or file an appeal, directly with the Registrar of the Criminal Records Review Program.

7. Failure to notify the Society of a criminal charge, subsequent to hiring, may result in discipline, up to and including dismissal.

8. The employee is responsible for any costs associated with the procurement of a criminal record check.

9. Newly hired employees will not be permitted to start in their position until the clearance is received. Exceptions must be reviewed and approved by the Human Resources Director or Executive Director.

10. Registered members of a governing body (LPN, RPN, RN) are required to undergo a criminal record check through their governing body and are therefore exempt from these requirements. The Society will verify licensing annually to ensure compliance.
Title: Providing References

Category: Human Resources | Reference No: HR – 2
Approved by: Senior Leadership Team | Effective Date: April 18, 2013
Revision No:

Policy

Former Employees
1. Written authorization from the employee is required prior to the release of a telephone or written reference.

2. Request for references should be forwarded to the director

3. All enquiries made by outside parties, i.e. potential employers, recruiting agencies, etc. with regard to employment history of former employees, will be directed to the appropriate Director.

Exiting Employees
4. Employment references printed on the organization’s letterhead, or written by a Director acting in a capacity representing the organization, will be provided in consultation with the Human Resources Manager.

Confirmation of Employment for Credit Purposes
5. Verification of employment for present employees for the purposes of establishing credit, bank loans, mortgages, etc. will be released only by the Human Resources Director. Such information will only be provided where written consent is provided by the employee.

Organizational Value
Respect & Dignity
Confidentiality

Procedure

1. If a prospective new employer requests information concerning a former employee’s employment, the following information about the employee’s position may be provided without the employee’s consent and without providing notice of the request to the employee:
• The nature of the position held by the former employee including job description and classification;
• The dates of employment with MPA Society;
• The function of the position held by the employee including the duties of the position; and
• The remuneration for the position including salary and benefits.

2. If the prospective new employer provides a copy of the employee’s written consent, information from the employee’s employment history may be shared.

3. If a prospective employer has not provided to the MPA Society the written consent of the employee to the release of information from the employment history. MPA Society must attempt to notify the employee that information has been requested, and receive authorization, prior to the release of such information.

4. A written request and employee consent will be obtained prior to the writing of a reference letter pursuant to the prospective employers or employee’s request as it may result in disclosure of personal information.
Title: Attendance Policy

Category: Human Resources  |  Reference No: HR – 3
Approved by: Senior Leadership Team  |  Effective Date: April 18, 2013
Revised: July 2015

Big Picture

At MPA Society, much of our work is interdependent on others, so being ready for work at your location of employment at your appointed time is expected. Punctuality reflects a positive interest and attitude toward your job. Habitually arriving late for work is not acceptable.

Organizational Value

Responsibility & Accountability

Policy

1. It is the responsibility of every employee to attend work as scheduled on a regular and consistent basis. Employees are expected to be punctual and ready to commence work at the start of their scheduled shifts, at the end of their scheduled breaks and to remain on duty until the stipulated shift end time.

2. Employees who are unable to report to work at the scheduled time must advise their supervisor in advance so that necessary arrangements can be made.

3. Employees who breach this policy may be disciplined up to and including termination of employment.

Procedure

Prompt and regular attendance is required to maintain effective service delivery.

1. If an employee is going to be late for work, they are required to notify their manager as soon as possible but definitely no later than their regular starting time.

2. Employees and managers are responsible for ensuring that everyone adheres to their regular workday start and end times.

3. Individuals who are unable to observe appropriate attendance standards may be subject to disciplinary action up to and including dismissal.

4. Employees whose attendance is adversely impacted by a disability must advise Human Resources. MPA Society will support such employees with the principles of duty to accommodate.
Title: Equal Employment Opportunity

Category: Human Resources
Reference No: HR – 4
Approved by: Senior Leadership Team
Effective Date: April 18, 2013
Revised: July 2015
July 2017

Big Picture

At MPA, non-discrimination is part of who we are. We welcome diversity and the synergy stemming from all perspectives as a result of different backgrounds and experiences.

We provide respect and equal employment opportunities for all individuals and applicants for positions regardless of race, color, national origin, political belief, religion, marital or family status, physical or mental disability, gender, sexual orientation, age, or irrelevant record of offence.

Decisions pertaining to recruitment, hiring, training, transfers, dismissals, layoffs, counseling, compensation, hours of work, benefits and performance reviews are based on job performance, merit, and qualifications. Family members and relatives may be considered for employment on their merits in accordance with our policies on this subject.

Our practice has been and will continue to be one of honest evaluation of each individual’s qualifications and contributions.

Organizational Value

- Respect & Dignity
- Empowerment & Growth

Policy


2. MPA Society promotes a work and service environment where all persons are treated with respect and dignity. MPA Society is committed to ensuring that all employees, supporters, Members, clients and guests are entitled to a workplace and service environment that is free from any form of discrimination or harassment (including sexual harassment) prohibited by the *B.C. Human Rights Code*.

3. All employees shall not engage in discriminatory conduct (including harassment or sexual harassment) prohibited by the *B.C Human Rights Code*.

4. Discrimination means unfair or differential treatment of an individual or group, whether intentional or unintentional, on the basis of one or more of the prohibited grounds contained in the *B.C. Human Rights Code*. These grounds are: race, colour, ancestry, place of origin, political belief, religion, marital status, family status, physical or mental disability, sex, sexual orientation, gender identity or expression, age, and conviction of a criminal or summary conviction offence that is unrelated to the employment or the intended employment of that person.
5. This policy shall not interfere with any procedures specified in the current collective agreement between MPA Society and unions, regarding human rights pursuant to the B.C. Human Rights Code.

6. This policy is not in substitution for any rights that an individual may have under the BC Human Rights Code.

Procedure

1. At MPA Society, we base all employment decisions on the principles of equal employment opportunity and with the intent to further the Society's commitment to equal opportunity. We are committed to ensure that all people-related actions, such as recruitment, hiring, promotion, compensation, benefits, layoffs, returns from layoffs, Agency-sponsored training, educational tuition assistance, and social and recreational programs are administered solely based on merit and without regard to any discriminatory factors.

2. Any individual who feels they, or another individual, have been the subject of discriminatory treatment should report it immediately to Human Resources or their immediate Supervisor. An HR representative will investigate all complaints of alleged discrimination.

3. All complaints will be handled in a confidential and discreet manner and any and/or all employee party to information about the alleged incident or complaint shall respect the confidentiality of the matter and refrain from discussion of same, except with the person conducting the investigation.

4. Individuals presenting false allegations make themselves, those alleged and the Society look foolish. Consider the allegation; seek guidance from Human Resources if you are unsure. Making false allegation is considered serious and those making false allegations will be dealt with through our disciplinary policy.
Title: Employee Relations Philosophy

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<th>Category: Human Resources</th>
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<td>Approved by: Senior Leadership Team</td>
<td>Effective Date: April 18, 2013 Revised: July 2015 February 2018</td>
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Big Picture

At MPA Society, we recognize that our Employees are our most valuable asset. To that end, we wish to ensure that the Employer/Employee relationship is built on the very principles that guide our Mission and Core Values.

Organizational Value

- Respect & Dignity
- Empowerment & Growth
- Responsibility & Accountability
- Safety/Well-being

Policy

1. Mutual respect in all working relationships will be achieved by open, honest and fair communication that shows respect for every employee’s rights and dignity.

2. MPA Society will provide leadership, assistance, support, information and guidance as appropriate to foster an effective, positive and productive human resource atmosphere.

3. Employees are our most important resource. They will be treated fairly, their successes recognized and their growth and development encouraged.

4. The Society will maintain a team of competent employees following appropriate recruiting and screening techniques.

5. Should a vacancy occur, efforts will be made to fill the vacancy from within, with due regard for ability, qualifications, experience and length of service, consistent with any applicable collective agreement.

6. The Society will not discriminate or allow discrimination against a staff member on the basis of any of the 14 grounds prohibited under the BC Human Rights Code: race, colour, ancestry, place of origin, political belief, religion, marital status, family status, physical or mental disability, sex, sexual orientation, gender identity or expression, age, or unrelated criminal conviction.
7. MPA Society strives toward achieving an environment that will result in the best possible care for those whom we serve and support, while recognizing the importance of the roles that both union and management play in the development of harmonious working relationships.

8. MPA Society's approach in human resource matters shall be consistent, respectful, reasonable and fair.

9. Local issues will be settled at their source or lowest level, by ensuring that Program Managers fully exercise their responsibilities. Employees with concerns or complaints under this policy should discuss them with their Manager. If unsatisfied with the outcome they may raise the concern with the next level manager. The Executive Director has ultimate decision-making authority in the event a decision is appealed to a higher level. Employees represented by a union may access the grievance procedure in accordance with the applicable collective agreement.

10. MPA Society's bargaining agent is the Health Employers Association of BC. MPA Society shall be a dependable partner in the signed collective agreement with all unions and shall abide by the standards established in those agreements.
Title: Respectful Workplace Policy

Category: Human Resources  Reference No: HR - 6

Approved by: Senior Leadership Team  Effective Date: April 18, 2013
Revised: July 2015, July 2017

Big Picture

MPA Society is committed to promoting and maintaining a respectful workplace. All employees will be treated with respect and dignity, and have a right to work in an environment free from bullying, harassment and discrimination, without fear of being subject to humiliation or intimidation.

Organizational Value

Respect & Dignity
Safety & Wellbeing
Responsibility & Accountability

Policy

All employees are accountable for their own conduct and must conduct themselves a civil, respectful, cooperative and non-discriminatory manner in the workplace, at work related functions, and in work related communications including electronic media and social media. Failure to maintain respectful conduct will lead to discipline, up to and including dismissal.

Excluded managers or supervisors are responsible for modeling respectful and appropriate conduct in the workplace. Nothing in this Policy is intended to reduce the rights and responsibilities of an excluded manager or supervisor to appropriately, and in good faith, manage the work performance of employees.

An employee who believes that that there has been a breach of this policy should follow the “Process for Resolving Complaints” set out in this policy.

MPA Society has the right to investigate incidents, with or without the person’s consent, where there are concerns about the alleged disrespectful conduct or discrimination and the impact of such conduct on maintaining a respectful workplace.

1. DEFINITIONS:

Respectful Workplace
A workplace environment where employees are treated with respect and dignity. This is characterized by courteous and considerate behaviour towards others, inclusion of all people with different backgrounds, cultures, strengths and opinions, and constructive resolution of differences.
Disrespectful Conduct
Includes any inappropriate behavior directed against another person that a reasonable person knows, or ought to know, would cause offence, humiliation or intimidation. It includes any conduct that results in injury or threat of injury including but not limited to acts of aggression, verbal or written threats, or vandalism to personal property. Examples include:

- Misuse of power such as reprimanding in front of others
- Profanity, name calling, yelling, abusive language
- Gestures or comments that are demeaning or belittling causing personal humiliation
- Gossiping or spreading malicious rumours
- Purposefully ignoring questions or requests from colleagues or withholding information

Disrespectful conduct does not include:

- Reasonable actions taken by a supervisor in managing and directing the workforce (managing performance, taking reasonable disciplinary action, assigning work)
- Expressing disagreement in a professional manner that is not threatening or demeaning
- Offering constructive feedback, guidance or advice about work related activities

Bullying and Harassment
Any inappropriate conduct or comment by a person towards a worker that the person knew or reasonably ought to have known would cause that worker to be humiliated or intimidated. Excludes any reasonable action taken by an employer or supervisor relating to the management and direction of workers or the place of employment.

Examples of conduct or comments that might constitute bullying and harassment include verbal aggression or insults, calling someone derogatory names, harmful hazing or initiation practices, vandalizing personal belongings, and spreading malicious rumors.

Workers must:

- not engage in the bullying and harassment of other workers
- report if bullying and harassment is observed or experienced
- apply and comply with the employer’s policies and procedures on bullying and harassment.

Discrimination
Conduct or comments that would constitute a breach of the BC Human Rights Code. The BC Human Rights Code makes it unlawful to discriminate on certain grounds or protected categories including: race, colour, ancestry, place of origin, political belief, religion, marital status, family status, physical or mental disability, sex, sexual orientation, gender identity or expression, age, and conviction of a criminal or summary conviction offence that is unrelated to the employment or the intended employment of that person.

Sexual harassment is defined as unwelcome conduct that is sexual in nature that may detrimentally affect the work environment or lead to adverse job related consequences for the victim of harassment. Examples of sexual harassment include:

- unwelcome remarks, jokes, or innuendo about a person’s body, sex or sexual orientation, including sexist comments or sexual invitations
- display of pornographic or other sexual materials
• unwanted physical contact such as touching, pinching or hugging
• sexual advances with actual or implied work related consequences

2. PROCESS FOR RESOLVING COMPLAINTS

Incidents or complaints should be addressed or reported as soon as possible. The unique circumstances of each complaint will determine the appropriate steps to take in resolving the complaint, and whether it can be resolved through an informal process or is better suited to a formal fact finding process. For both formal and informal processes, the goal is to resolve situations of alleged bullying, harassment, discrimination or disrespectful conduct as soon as possible in a fair, constructive and respectful manner.

In the event of a complaint under this Policy, the following shall apply:

**Step 1 - Informal Conversation**

Whenever possible, the individuals involved should attempt to resolve the problem themselves. An employee who experiences unwanted conduct or comments that they feel is disrespectful, discriminatory, or constitutes bullying and harassment should, if it is reasonable to do so, ask the other individual to discuss the behaviour and attempt to resolve the matter.

**Step 2 - Report to Manager**

If resolution is not possible through an informal conversation, for example because the complainant is not comfortable engaging the other individual directly because the issues are too complex or sensitive, a verbal or written complaint should be filed with the individual’s direct manager. If the manager is the person engaging in bullying and harassing behaviour, the complaint should be submitted to the next level manager above. Incidents or complaints should be reported as soon as possible after experiencing or witnessing an incident, to allow for the incident to be investigated and addressed promptly.

The complaint should include the following information: the date, time and location of the incident(s); the individual(s) involved, a description of the unwanted behaviour (specific actions and words); and any witnesses to the incident.

The Manager, in consultation with Human Resources, will review the complaint and assist the employees to attempt to resolve the matter. The goal is to understand and resolve the issue so that all parties conduct themselves in a civil, respectful and cooperative manner.

If the matter is resolved at Step 2 then no further action is required.

**Step 3 - Formal Fact Finding Process**

If the other options for resolution are not successful or are not appropriate due to the circumstances, a formal fact finding process may be initiated. If not already provided, a written submission to initiate a formal complaint, outlining the facts, must be provided to Human Resources. The complaint should include the names of people involved, witnesses, where the events occurred, when they occurred, and the specific behaviour and/or words that led to the complaint. Supporting documents such as emails, handwritten notes, or photographs should be included. Physical evidence, such as vandalized personal belongings, can also be submitted.
A complainant is not obligated to pursue a formal fact finding, however, MPA Society reserves the right to pursue the matter with or without the complainant's consent when it has sufficient concerns about the alleged behaviour and the need to ensure a safe and respectful workplace. If an investigation is conducted, it will be undertaken promptly and diligently. It will be objective, fair, and provide due process for all parties. The formal fact finding process may include the following:

- Review of written documentation and other evidence
- Interview those involved including any witnesses that may be relevant
- Allow for each party to respond to all allegations
- Review the information provided
- Provide a summary of the findings and make a determination on whether or not the Policy was violated

If there has been a violation of the Policy, Human Resources will bring recommendations forward to the appropriate leadership for direction and action. The complainant and respondent will be informed of the result.

**Step 4 - Appeal**

If the employee filing the complaint is not satisfied with the result from Step 3, he/she may appeal the decision in writing to the Executive Director. The appeal will include reasons as to why the employee is not satisfied with the resolution of the complaint. The Executive Director will review the appeal and determine an appropriate course of action. The Executive Director will make the final determination with respect to any remedial and/or disciplinary action, up to and including termination of employment, for violations of this policy.

**Violation of a Respectful Workplace**

Any person found to be engaged in bullying, harassment, and/or disrespectful or discriminatory conduct at work or work related functions may be subject to remedial and or disciplinary action up to termination of employment.

**Bad Faith Complaints**

If complaints are found to be in bad faith, vindictive or vexatious in nature, the employee making the complaint may be disciplined accordingly. An example of a bad faith complaint is one that a person has “made up” to cause trouble for another person.

**Retaliation**

Any retaliation against a person who has filed a complaint or a respondent or witness, or any interference with an investigation, will result in disciplinary action.

**Record and Disposition**

All written file material will be kept in confidence in Human Resources. No record of a complaint, investigation or decision will be placed in the complainant’s employee file if the complaint was made in good faith. If there is no finding of evidence to support the complaint, no documentation regarding the complaint will be placed in the respondent’s employee file. If there is a finding of evidence to support the complaint, the incident and corrective action will be recorded in the respondent’s employee file as appropriate. In the case of bad faith complaints, the incident and corrective action will be recorded in the complainant’s employee file as appropriate.
Title: Safety Practices

Category: Employee Wellness and Safety

Reference No: EWS – 1

Approved by: Senior Leadership Team

Effective Date: April 18, 2013

Revised: May 26, 2016

Big Picture

MPA Society is committed to providing a safe and healthy working environment and establishing and maintaining safety and health standards through proper procedures and direction. Safety is everyone’s responsibility – it rests with all levels of management and each employee.

Organizational Value

Safety & Well-being

Policy

MPA Society will ensure compliance with all legislative requirements concerning all aspects of workplace safety.

All employees are responsible for taking steps to ensure their individual safety.

After ensuring their own safety, employees will proceed to ensure the safety of their co-workers and participants, until relief is available.

Procedure

Responsibilities of the Society:

- To maintain a safe work environment by properly equipping our work areas, promptly correcting dangerous conditions, developing and enforcing safe work practices, ensuring suitable training and planning for disasters and emergencies, and ensuring that employees are advised of any potential risk of exposure to bloodborne pathogens, related protocols and where to receive immunization.

- To meet applicable government and WorkSafeBC health and safety standards

- To reduce the potential for unsafe circumstances by setting and communicating expectations for working in a safe manner.

*The following systems have been established in order to ensure that we meet these responsibilities:*

- Joint Occupational Health & Safety Committee
- Accident reporting and prevention practices
- Emergency and disaster plan
• Violence prevention
• Practices concerning working alone
• Appointed an HR representative with overall responsibility for WorkSafeBC claims
• Site inspection policy

The Details

Responsibilities of Supervisors

• Review safety procedures with new hires including escape routes, as well as potential for exposure to pathogens such as Hepatitis B as applicable and where immunization is available (see the New Hire Orientation Checklist).
• Maintain a safe work environment by properly equipping your work areas, promptly correcting dangerous conditions, developing and enforcing safe work practices maintaining cleanliness and organization and planning for disasters and emergencies
• Reduce the potential for unsafe circumstances by setting and communicating expectations for working in a safe manner.
• Holding practice evacuations, such as fire drills, and conducting debriefing to address effectiveness.
• Investigating incidents that impact the safety of our employees and those we serve, undertaking corrective action and communicating action or expectations.
• To consider and expeditiously deal with complaints relating to the health and safety of staff.

Responsibilities of Employees

Employees must observe all health and safety rules and regulations. They must conduct themselves in a manner that does not endanger the wellbeing of themselves or others or cause property damage. They are required to report any unsafe conditions and or acts to their supervisor.
Title: Critical Incident Response Policy

Category: Employee Wellness and Safety  |  Reference No: EWS – 2

Approved by: Senior Leadership Team  |  Effective Date: April 18, 2013

Big Picture

A workplace critical incident is an event — like an injury, fatality, or robbery — that causes emotional or psychological trauma in people exposed to the incident directly, or indirectly. It is a sudden, powerful event outside the range of normal experience — and outside of the worker's control.

Reactions to highly stressful events can include:

- Feeling jumpy, anxious, moody, or irritable
- Having difficulty concentrating, making decisions, or thinking clearly
- Having trouble going near the accident scene, or to places that trigger memories of the accident or incident
- Having trouble being around people
- Having difficulty being alone
- Sleep disturbance/nightmares

These reactions are normal responses to stressful or abnormal events. Workers' feelings about their jobs and the workplace can be seriously affected, and the whole workplace may suffer after a critical incident. Effects may include poor morale, decreased productivity, increased accidents and sick time, higher disability claims, and greater staff turnover.

The MPA Society will make every effort to effectively manage critical incidents through clear policies and procedures that are humane, sensitive, and responsive to workers. Intervention procedures may reduce the intense reactions of workers to an incident and assist them in returning to their duties.

Organizational Value

Safety/Well-being

Policy

MPA will provide staff with an opportunity to access critical incident debriefing, should a serious work related incident occur.

Procedure

Following a critical incident, the Supervisor or Manager of a program will:
• Assess the need for a debriefing session
• ensure that proper documentation of incident occurs as soon as possible after the incident on behalf of the staff member involved
• ensure that the staff member has access to a variety of resources to assist in the resolve of serious work related incident. (Resource List: EAP, Safer Critical Incident Response Work Safe BC)
• contact the staff member involved immediately after critical incident and provides support and assistance to the staff member.
• investigate and report findings/recommendations to Executive Director and Senior Management Team as a part of the continued improvement of health and safety practices within the MPA Society

At the end of 3 months staff will be asked to evaluate the effectiveness of critical incident debriefing through discussion with their manager.

Within **30 days of an incident**, the employer conducts a broad review of all steps taken in response to the incident, including:

• First aid
• Emergency procedures
• Critical incident debriefing
• Accident investigation
• Corrective responses
• Claims management

The purpose of a review is to assess the effectiveness of MPA's procedures, how the organization responded, and suggest other corrective steps that should be put in place. This does not replace an accident investigation.

**Debriefing session**

A debriefing session is ideally held **within 24 to 72 hours** after an incident. It is a confidential, non-judgmental discussion of the continuing effects of a traumatic incident on workers. The purpose of this session is to alleviate the trauma of affected workers, and to assist in the recovery process. Debriefing focuses on the emotional well-being of workers – it does not attempt to find the cause of the accident or assign blame. Sessions ideally should be led by trained professionals and participation voluntary.

**Critical Incident Review**

A review is held **a few weeks after** the incident. Employers, supervisors, and workers review all aspects of the incident. The session looks at how the incident was handled, if it could have been handled better, whether it could have been prevented, and the effectiveness of the intervention. Related organization policies, safety regulations, safe work procedures are also reviewed.
Title: Joint Occupational Health & Safety (OH&S) Committee

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<td>Approved by: Senior Leadership Team</td>
<td>Effective Date: April 18, 2013 Revised:</td>
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Big Picture

At MPA Society, we believe that together we can proactively address situations before they become unsafe and learn and make recommendations from any matters that the organization needs to respond to. The OH&S Committee provides a forum for us to work together to foster a safe and healthy work environment.

Organizational Value

Safety/Well-being

Policy

In accordance with legislation, MPA Society will establish and operate an OH&S Committee.

The reasons we have a Joint OH&S Committee are to:

- Promote safe work practices, conditions and assist in creating safe work places by recommending actions to improve the effectiveness of the Society’s health and safety programs
- Facilitate a safe work environment and reduce the number of work-related accidents through supervisor & employee awareness, safety education and training
- Maintain site inspection processes

The responsibilities of the Joint OH&S Committee are to:

- identify situations that may be unhealthy or unsafe for staff and to make recommendations for correction;
- to consult with staff, supervisors and the Society on issues related to occupational health and safety and occupational environment;
- to make recommendations to the Society and staff for the improvement of the occupational health and safety and occupational environment of staff;
- to make recommendations to the Society on educational programs promoting the health and safety of staff and compliance and the regulations and to monitor their effectiveness;
• to advise the Society on programs and policies required under the regulations for the workplace and to monitor their effectiveness;
• to advise the Society on proposed changes to the workplace or the work processes that may affect the health or safety of staff;

The Joint OH&S Committee operates as follows:
• Representatives of the Society and each Union appoint members and alternates.
• Meetings are held monthly.
• Two Co-chairs are appointed, one from the Society and the second from the union members.
• The committee makes recommendations to the Executive Director.
• The Joint OH&S Committee consists of 5 union representatives (2 HEU, 1 HSA, 1 BCGEU and 1 BCNU) and 3 management representatives.
• Members or their alternates are scheduled to conduct on site safety inspections (programs are scheduled to conduct self inspections). The inspections are monitored by the committee.
• The Joint OH&S Committee is scheduled to meet on a monthly basis, but more frequent meetings may be called at the discretion of the Chairpersons.
• Between meetings committee representatives can initiate action through contacting another representative (a union appointee would contact the management co-chair or a management appointee or a management appointee would contact the union co-chair).
• Minutes from these meetings shall be maintained and approved by the Committee at the next meeting. Following approval by the Committee, these minutes will be circulated/posted at all staff locations.
Title: Injury and Illness at Work

Category: Employee Wellness and Safety
Reference No: EWS – 4

Approved by: Senior Leadership Team
Effective Date: April 13, 2015
Revised: July 2015

Big Picture

MPA Society is committed to making our workplace as safe as possible. We work hard to ensure we are compliant with WorkSafe BC standards. Despite everyone's best efforts, however, accidents at the workplace do happen. When they do, we want to ensure that all employees are aware of the steps that are necessary to ensure the injured employee receives appropriate care and administrative processes are satisfied.

Organizational Value

Safety/Well-being

Policy

MPA Society will adhere to WorkSafe BC regulations regarding our procedures for preventing, reporting, managing and responding to injury and illness at work.

In the event of a workplace accident resulting in injury, MPA Society staff will ensure that the injured employee is cared for, all necessary documentation is completed and submitted to the appropriate parties in the required time frame, and corrective action addressing any unsafe conditions is taken immediately.

Procedure

If an employee becomes injured or sick while on the job:

- The work-related injury or illness must be reported to the individual’s manager immediately or as soon as is practical.

- In the event that an injury or illness requires medical attention, the individual’s manager is responsible to ensure that they are transported to the nearest appropriate medical facility. The Society will pay for any transportation charges incurred.

- The individual’s manager and the first aid attendant must complete and submit an illness and injury report to WorkSafe BC within three working days of the incident. Contact Manager or Supervisor for further information and the appropriate forms.

Serious incidents must be reported immediately to the program manager and Director, who will communicate this to the Executive Director and Director of Human Resources regardless of whether or not the manager is aware of any resulting injury or illness:

- Any incident that kills, causes risk of death, or seriously injures a worker.

- A major leak or release of a dangerous substance.
• A major structural failure or collapse of a structure, equipment, construction support system, or excavation.

The Details

Employee’s Responsibility
If you are injured at work, you must:

• report it to your employer immediately;
• Seek medical attention for your injury. If you need an ambulance or transportation from your workplace to your doctor’s office or to the hospital, your employer is required to pay those costs.
• Advise your doctor that your injury is work-related
• Report your injury to WorkSafeBC as soon as possible

If a WorkSafeBC representative asks you to complete a Worker’s Incident and injury report or an Application for Compensation and Report of Injury or Occupational Disease (Form 6 – Appendix A1), this should be submitted as soon as possible. (http://www.worksafebc.com/FORMs/assets/PDF/6a.pdf). The supervisor/director shall obtain a copy of the completed Form from the employee. Once the Form is completed it must be distributed, and retained, in the same manner as the Form 7.

The employee must meet with the supervisor to review the circumstances. Together with the supervisor, corrective action shall be undertaken or communicated to avoid a repeat of the incident.

Employer’s Responsibility
As an employer, our responsibilities when a worker is injured on the job include:

• Ensuring First Aid is provided
• Ensuring transportation of the injured worker to the nearest location where medical treatment can be obtained and covering the costs of transportation.
• Reporting the incident/injury to WorkSafeBC within three business days of the injury’s occurrence or within three business days of becoming aware of the injury.
• Submitting an Incident and Injury Report (electronic Form 7 – Appendix A2) or completing and sending the Employer’s Report of Injury or Occupational Disease (Form 7 – PDF 270kb) (http://www.worksafebc.com/FORMs/assets/PDF/7.pdf), when an employee is injured at work AND goes to a hospital or health care clinic OR is absent from work due to the injury, to WorkSafeBC.
• Complete the Worker Information, as well as portions 5 to 23 of the Form 7;
• Report fatalities and serious injuries immediately to the Prevention Emergency Line at 604 276-3301.
• Ensure the employee has completed Form 6.
• Obtain a copy of the Form 6 (completed by injured employee);
• Forward the above to the Operational Director with 24 hours of the injury.
• If the employee misses work, ensure they contact Teleclaim as soon as possible to report the injury to WorkSafeBC.
• Investigate the causes and take or recommend corrective action
• Refer the employee to the Enhanced Disability Management Program (EDMP) after one full missed shift, if applicable (union employee only)

Refer to: www.worksafebc.com/claims/report_injury/default.asp.

Witnesses responsibilities:
Others who witness the incident, or are present, during the injury shall provide a signed statement. These statements shall also be retained and forwarded as described above. These witnesses shall also suggest corrective action to avoid a repeat of the incident.

Operational Director’s responsibilities:
Boxes 24 to 25 of the Form 7 shall be completed by the Operational Director. Copies of Forms 6 & 7 and witness statements shall be provided to Finance and Human Resources.

Payroll Department’s responsibilities
Boxes 26 to 38 of the Form 7 shall be completed by payroll and forwarded to Human Resources.

Human Resources responsibilities
• Human Resources will review Forms 6 & 7 for completion, and complete the Return-to-work information and sign off the report. Human Resources will submit Form 7 to Worksafe BC within 3 business days of the incident/injury.

• Human Resources will store copies of Forms 6 & 7, along with all related correspondence.

• Human Resources will inquire as to the cause, resolution, outcome of the claim and liaise with EDMP to facilitate the coordination of the employee’s return to work.

• Human Resources will provide a copy of Forms 6 & 7 to the Employer’s Representative/Chair of the OH&S committee, who will present the situation to the safety committee. Once the OH&S Committee has discharged its duties, documentation can be placed in the original Worksafe BC file maintained by HR to ensure consistent file management.

Definition of Work-Related Injury or Illness
A work-related injury or disease is one that arises out of and in the course of employment or is a recognized industrial disease arising out of and due to the nature of employment. To be covered by Worker’s Compensation benefits, for a personal injury, the worker must have been in the course of working when hurt, and the injury must have been caused or exacerbated by something to do with the job. In the case of disease, the contracted disease must be recognized as one that is caused by the work or work environment.

Reporting Work-Related Accidents, Injuries or Illnesses
All employees are responsible for reporting all work-related injuries and illnesses to their manager immediately following their occurrence. Failure to report work related injuries and illnesses in a timely manner may result in the denial of benefits under WorkSafeBC regulations.
Upon being advised of an incident, the manager will immediately go to the scene of the occurrence to assure prompt medical attention for the individual(s) involved and address any safety hazards which may have caused or contributed to the incident.

**Lost Time from Work**

If an employee loses time from work following a work-related injury or illness, a claim will be made for Worker’s Compensation benefits. Upon acceptance of the claim, the employee will be paid for time loss according to the current worker’s compensation guidelines. Payment to the employee will be made directly from WCB and any and all compensation from the employer will cease during the WCB coverage period.

Employees requiring further information on the administration of lost time from work should contact Human Resources.
Title: Providing Medical Information

<table>
<thead>
<tr>
<th>Category: Employee Wellness and Safety</th>
<th>Reference No: EWS – 5</th>
</tr>
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<tbody>
<tr>
<td>Approved by: Senior Leadership Team</td>
<td>Effective Date: April 23, 2014</td>
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<td>Revised: July 2015</td>
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Big Picture

MPA Society is committed to promoting a safe and healthy work environment for staff and members. All employees share the responsibility for and commitment to a safe and healthy workplace and for working within the established wellness and safety policies and procedures. That responsibility includes reporting when they are ill and unable to work, providing medical evidence when requested for absences due to illness as well as medical evidence of fitness to return to work.

Organizational Value

Safety & Well-being

Purpose

To protect MPA Society’s entitlement to inquire and request proof of illness for absences from work in the event of illness or injury. Proof of illness medical evidence is required by the employer for the purposes of benefit administration, rehabilitation, and return to work planning.

Employees covered by a collective agreement and who are absent for five consecutive shifts or more due to illness, or one full shift or more due to workplace injury, are referred to the Enhanced Disability Management Program (EDMP) in accordance with the applicable collective agreement. Disability Management services for EDMP are provided by a contracted service provider and employees are required to participate in the program. MPA Society reserves the right to request medical information directly from the employee until such time as their participation in EDMP is confirmed.

Policy

Absence from work will be authorized by the Manager/ Supervisor when the employee has a bona fide illness or injury and is disabled from working. It is the responsibility of the employee to provide adequate medical information to their Manager/ Supervisor when requested. It is recommended that Supervisors require proof of illness in accordance with the relevant collective agreements or terms and conditions of employment. Proof of illness will be accepted from bona fide medical practitioners only and should include the following information:

- Is the employee disabled from working due to a bona fide illness or injury
- Anticipated length of absence
• Prognosis for performing modified or full duties
• Has a treatment program been recommended
• Is the treatment program being followed
• Identification of restrictions and/or limitations
• Examination and Reassessment Dates

Further medical evidence may be required in the event of extended illness or absence or for more complex cases.

Failure to provide medical information in a form satisfactory to the employer may be grounds for discipline up to and including termination of employment.

Costs associated with completion of the Medical Certificate form or providing this information are the responsibility of the employee. Benefits may be withheld when an employee fails to provide satisfactory evidence of a medical condition or disability.

Due to the sensitivity of medical information, confidentiality of employee health information is fundamental. Information is collected and stored in accordance with applicable privacy legislation and will only be accessible to those with a responsibility requiring access to the information for a purpose consistent with the reason for collection.

Employees participating in EDMP will provide medical information directly to the EDMP provider for review and use in medical case management. Certain aspects of such medical information may be shared with MPA Society by the EDMP service provider, in accordance with the EDMP program procedures.

Scope
This policy applies to all employees of MPA Society.

Accountability

Senior Leadership and Management

• Communicate the policy and procedure to all staff, ensuring all staff are aware of the information required to establish proof of illness as described in this policy.
• Determine when a medical certificate is required and request it from the employee. Supervisors/Managers are advised to use reasonable judgment when requesting further medical evidence in regard to frequency and may seek advice from Human Resources. Ensure the requesting and reviewing of medical documentation is applied consistently.
• Review medical information as provided, to determine entitlement to sick leave and for return to work planning.
• Ensure all employee health information is forwarded to Human Resources to be maintained in the employee’s confidential medical file.

Employees

• Ensure any absence from work for reasons of illness or injury is bona fide
• Be prepared to establish proof of illness as described in this policy

Human Resources
• Retain and secure all employee medical/health information in confidential employee health file, and maintain security standards for storage of such information.
• Support effective communication with employees and leadership regarding requesting medical information under this policy.

Procedure
See Appendix A - Medical Certificate form
Big Picture

Influenza can be a serious contagious disease spread by droplet transmission through close contact with an infected individual. According to the Public Health Agency of Canada, nationally there are between 2000 and 8000 deaths per year from influenza and its complications. Infected individuals are highly contagious and can transmit influenza for 24 hours before they are symptomatic. Among vaccine-preventable diseases, influenza causes by far the most deaths, outpacing all other vaccine preventable diseases combined. Influenza in vulnerable groups especially the elderly, the very young and the immunosuppressed, is associated with significant morbidity and mortality, and is a major contributor to hospitalizations in winter.

Vaccination of staff will reduce their risk of getting influenza and spreading it to members. The most effective strategy for preventing influenza is annual vaccination. Influenza vaccine is safe and effective.

The wearing of masks can serve as a method of source control of infected workers who may have had no symptoms. Masks may also protect unvaccinated workers from as yet unrecognized infected patients or visitors with influenza.

Other infection control measures such as hand hygiene, cough etiquette, restrictions on work and visiting, and the use of anti-viral medications all help but vaccination remains the cornerstone of efforts to control influenza transmission.

Organizational Value
Safety/Well-being

Policy

All individuals covered by this Policy must be vaccinated annually against influenza or wear a surgical/procedure mask during influenza season when in a Client Location in accordance with this Policy.
Scope

This policy applies to all MPA Society employees (unionized and excluded), volunteers, students, contractors, and vendors (collectively, these individuals are referred to as “Covered Individuals”) who attend a Client Location.

This policy also applies to any other persons who attend a Client Location (these individuals are referred to as “Visitors”).

Responsibilities

1. All Covered Individuals must annually advise MPA Society of their influenza immunization status, in a manner acceptable to MPA Society, by the Vaccination Required Date.
2. During the annual Vaccination Required Period, Covered Individuals and Visitors who are not vaccinated against influenza are required to wear a surgical/procedural mask provided by MPA Society while at a Member/ Resident Location. Individuals required to wear a mask will be responsible for maintaining their mask in good condition.
3. Covered Individuals who witness any instances of non-compliance with this policy are expected to report the incident of non-compliance immediately to their supervisor.
4. MPA Society will inform Visitors of the requirements of this Policy and will make surgical/procedure masks available to Visitors.

Definitions

Vaccination Required Date
The date established annually by the Provincial Health Officer, after which all persons covered under this policy are required to be vaccinated against influenza or wear a mask in accordance with this Policy. The Vaccination Required Date will usually be no later than the first week of December.

Vaccination Required Period
A period determined by the Provincial Health Officer and starting on the Vaccination Required Date. The Vaccination Required Period will usually be from the end of November until the end of March but may vary with seasonal epidemiology. During the Vaccination Required Period, Covered Individuals will be required to be vaccinated against influenza or wear a surgical/procedure mask in accordance with this Policy.

Client Location
Client Locations include:

1. any building, property, or site operated by MPA Society where members, residents or clients receive services; and
2. any other location where Covered Individuals interact with the member/resident in the course of his/her work for MPA Society;

3. but does not include any location designated by MPA Society to be excluded from the definition of Client Location.

Consequences of Non-Compliance

Any Covered Individual found in violation of this policy may be subject to remedial and/or disciplinary action up to and including termination of employment, cancellation of contract and/or revocation of privileges. Any Visitor found in violation of this Policy may be denied access to Member/Resident Locations.

In the event an outbreak is declared in an MPA Society facility (Licensed Housing only):

- If a documented medical contraindication for both vaccination and antiviral medication, the employer will review options for relocation of the employee will be sent home with pay.
- Employees with a medical contraindication for the antiviral medication but who are medically able to be vaccinated and refuse to be vaccinated, will be sent home without pay or redeployed to work areas unaffected by the influenza outbreak where operationally feasible.
Big Picture

MPA Society is committed to maintaining a work environment free from violence, threats of violence, harassment, intimidation, and other disruptive behavior. No one should ever feel threatened or unsafe while on our premises or in the conduct of their duties. Anyone who engages in any physical assault, threatening behavior or verbal abuse in the work setting will be immediately removed from the situation and may be subject to disciplinary action, including termination of employment and possibly criminal penalties.

If anyone feels unsafe or threatened while at work, they shall proceed to a place of safety and notify their supervisor immediately. All concerns, regardless of severity, will be handled fairly, promptly and without retaliation for bringing a valid claim forward.

Organizational Value

Safety/Well-being

Policy

1. MPA Society is committed to providing a violence-free environment and recognizes that workplace violence is a health and safety issue. All reasonable steps will be taken to reduce or eliminate the threat to the personal safety of employees caused by aggressive behavior or overreaction of participants, visitors or staff.

2. Violence is defined as an act of aggressive, verbal or physical assaults, or threats in a workplace which may involve, but are not limited to name calling, threatening, swearing, hitting, biting, scratching, pinching, use of weapons, sexual harassment or assault and battery.

3. Assault refers to an attack against another person. The two components of assault are the threat and the ability of the person to carry through on the threat.

Procedure

In order to ensure a safe environment for everyone, we strictly enforce the following:

1. An employee who is the victim of workplace violence will be treated with respect and consideration and MPA Society will support the employee by arranging, where necessary, prompt medical and/or emotional assistance.
2. A risk assessment shall be performed in any place of employment in which a risk of injury to workers from violence arising out of their employment may be present. The risk assessment shall include the consideration of:
   (a) previous experiences in that place of employment
   (b) occupational experience in similar places of employment
   (c) the location and circumstances in which work shall take place

3. Employees who, in the course of their work, may encounter, or are likely to encounter violent persons will be instructed in:
   - Recognizing the potential for violence;
   - The procedures, policies, work environment arrangements to minimize or control the risk from violence;
   - The appropriate response to incidents of violence, including how to obtain assistance;
   - Verbal, behavioral, or evasive defense, appropriate to the type of client or degree of violence likely to be encountered; and
   - Reporting and documenting violent incidents.

4. A staff member reporting any injury or adverse symptom as a result of a violent incident shall be advised that they may seek counseling from their physician and may obtain critical trauma/incident counseling if required.

5. Weapons or firearms even if properly registered are not permitted on MPA property or in vehicles parked on MPA property. Individuals are not authorized by law to carry a weapon or firearm while performing Society business outside Agency premises. Weapons include: any device from which a projectile may be fired, guns, knives, any simulated firearm, sling shots, clubs, metal knuckles, explosives, pepper spray and other items with the potential to harm another person.

6. Desks, cabinets, telephones and computers are Society property. The Society reserves the right to search these areas or view email and data stored on computers. Any conversations, statements or messages that can be deemed threatening to other individuals, can and will be used as a basis for disciplinary action including termination of employment.

7. If a claim of workplace violence is found to be made in bad faith, vindictive or vexatious in nature, the Society will take disciplinary action against the employee making the complaint.
Title: Blood and Bodily Fluid Exposure Policy

Category: Employee Wellness and Safety
Reference No: EWS – 8

Approved by: Senior Leadership Team
Effective Date: August 2013
Revised: May 26, 2016

Policy

Blood and bodily fluid exposure is defined as an event where blood or other potentially infectious bodily fluids comes into contact with non-intact skin, mucous membranes or subcutaneous tissue. Risk of exposure may include Hepatitis B, Hepatitis C, Human Immunodeficiency Virus (HIV) and other diseases

Exposure can occur if:

- You have been cut, pricked or stuck with a dirty needle or other sharp instrument
- You have had blood or bodily fluids come into contact with mucous membranes or non-intact skin, eyes, nose or mouth
- You have been bitten by another person and your skin is broken

Organizational Value

Safety/Well-being

Scope

All MPA Society employees are responsible for compliance with this policy.

Procedure

Employees who believe they may have come into contact with an infectious organism through exposure to blood or bodily fluid must:

1. Immediately report the incident to a first aid attendant and your supervisor. If there is no first aid attendant, administer first aid yourself

2. Clean the exposed area with warm water and soap if applicable

3. Arrange for transportation to the nearest hospital to seek medical evaluation and treatment within two hours of the exposure incident. Place the needle, or whatever object was involved in the incident, in a sharps container and bring with you to hospital.

4. Complete a Critical Incident Report Form and any other required documentation.

5. Follow up with any hospital procedures/treatments as needed.
Title: Drug and Alcohol Free Workplace Policy

Category: Human Resources
Reference No: EWS – 9

Approved by: Senior Leadership Team
Effective Date: April 18, 2013
Revised: July 2015, Aug 2018

Big Picture

At MPA Society we recognize that the state of one's health affects job performance and the quality of work performed. Drug and alcohol abuse adversely affect one's health and will inevitably result in problems at work.

Employees must not be under the influence of alcohol or controlled substances that impair job performance and endanger other employees or members. The use, possession, sale, distribution, or manufacture of impairing and/or controlled substances, on MPA premises and in work-related locations, is prohibited.

Organizational Value

Safety/Well-being
Responsibility & Accountability

Policy

1. The use of drugs, the inappropriate use of alcohol, and the abuse of medications and other substances can have serious adverse effects on an employee's health, safety and job performance. Abuse of these substances negatively impacts other employees, Members, clients and the community.

2. MPA Society will not tolerate substance use or abuse where such use affects workplace safety and job performance.

3. Every employee is responsible to ensure that they do not consume during or report to work under the influence of alcohol, drugs or misused medications and to ensure that the safety of the workplace and their job performance (including attendance) does not suffer because of the use of illicit drugs, alcohol or misused medications. Employees who breach this policy may be subject to discipline up to and including termination.

4. Each employee has a responsibility to themselves, other employees and the MPA Society to help eliminate alcohol, drug and medication misuse and abuse. Alcohol and drug, (including medication), dependency is a treatable condition and early intervention greatly improves the probability of lasting recovery.

5. MPA Society is committed to the health and safety of its employees and recognizes substance addiction as a treatable disease.
Procedure

1. If an employee is suspected of possessing or being under the influence of drugs or alcohol at work, that person will be sent home without pay. An investigation will be conducted and the employee will be subject to discipline, up to termination of employment.

2. Employees must disclose any use of medically prescribed impairing substances such as medical cannabis or prescription drugs that may affect work performance or safety.

3. Employees with substance dependency should seek assistance to address their dependency and disclose the condition to MPA. MPA Society will support the rehabilitation and return to work of employees who have experienced alcohol, drug or medication dependency within the principles of the duty to accommodate. Society employees will also be encouraged to seek support through the Employee Assistance Program, Enhanced Disability Management Program (EDMP) and/or other public services available.
Title: Abuse and Neglect *

Category: Rights of Persons Served  Reference No: PS – 1

Approved by: Senior Leadership Team  Effective Date: August, 2013

Revised: May 26, 2016

Policy

Persons served by MPA Society have a right to expect an environment that is safe and free from any abuse or neglect.
In order to maintain an atmosphere in which persons served may be free from fear of abuse, every possible effort will be made to ensure that all reported incidents are thoroughly investigated and dealt with expeditiously. Any employee or volunteer who, upon investigation, has inflicted abuse or neglected a person served or resident will be subject to disciplinary action up to and including termination. On no occasion is it appropriate for an employee/volunteer to take retaliatory measures against an individual.

Organizational Value

Safety & Well-being
Respect & Dignity

Procedure

1. Any employee or volunteer who has knowledge of or has witnessed an incident of suspected abuse or any infringement of rights has the responsibility to report such an incident immediately to their Supervisor/Manager/Director.

2. The employee/volunteer must complete and submit a Critical Incident Report as per Health and Safety policy – Critical Incident Reporting.

3. The responsible Supervisor must immediately inform the Manager/Director.

4. The Manager/Director will commence an investigation following program protocol (i.e. licensing requirements) and report the incident to relevant external agencies including the police as deemed necessary and/or legally required.

5. In the event that the allegation is against the Supervisor, the complaint will be reported to the Manager/Director; the complaint should always be reported to someone in a position of authority from the person the allegation is made against with the exception of the Executive Director. If a complaint is made against the Executive Director, it should be reported to an Operational Director who will then report it to the Board of Directors.

6. The investigation will include the gathering all pertinent information, thorough review and assessment of information, and resolution of conflicting information.
7. Following the investigation a decision will be made whether or not an infringement occurred and an appropriate response will be determined.

8. If the investigation provides satisfactory proof of such abuse by an employee, s/he will be subject to disciplinary action up to and including termination.

9. Any volunteer who has abused a person served/resident or whose behaviour has put a person served/resident at risk will be relieved of his/her volunteer responsibilities.

Definitions

Abuse is defined as: any act or behaviour that may result in physical, emotional, or mental harm to a person served. Seclusion and restraint are specifically prohibited under this policy. Categories of abuse include, but are not limited, to:

1. Physical:
   - Assault (i.e. slapping, hitting, kicking, punching).
   - Rough handling without regard for the person’s served/resident’s comfort (i.e. unnecessary force applied during lifts, transfers and activities of daily living).
   - Gross physical neglect (i.e. withholding of food or personal or medical care).

2. Emotional:
   - Verbal or emotional abuse (i.e. yelling, making demeaning or derogatory remarks, teasing, swearing and/or name-calling).
   - Gross psychosocial neglect (i.e. lack of attention, isolation, confinement).

3. Sexual Abuse Assault:
   - Any form of sexual conduct by intimidation, force or threat of force
   - Any sexual relationship between an employee and a person served or resident, whether it is consensual or not.

4. Medication Abuse:
   - Misuse of a person’s medications and prescriptions, non-compliance with medication refills.

5. Violation of Rights:
   - Denial of basic civil/human rights.

6. Neglect:
   - Physical - withholding basic necessities and care from a person served or resident, e.g. food, medication and personal care
• Psychosocial - neglect of a person served or resident, e.g. lack of attention, isolation, confinement
• Neglect may be active (intentional) or passive (lack of experience or information)

7. Humiliation:
• Depriving one of self-esteem, literally the act of being made humble, or reduced in standing or prestige

8. Retaliation:
• Revenge or vengeance against a person or group in response to perceived wrongdoing

9. Financial or other exploitation
• Theft (i.e. money or personal property)
• Fraud (i.e. deceitful manipulation of finances)
• Solicitation for compensation
**Title: Confidentiality and Privacy of Persons Served**

**Category:** Rights of Persons Served

**Reference No:** PS – 2

**Approved by:** Senior Leadership Team

**Effective Date:** Sept 2013

**Revised:**

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**Purpose**

To ensure that person served rights to privacy and confidentiality are respected, and that MPA Society complies with privacy legislation.

**Policy**

MPA Society recognizes the rights of all people served to privacy and confidentiality. MPA Society collects personal and/or sensitive information about the people we serve in order to provide appropriate supports and services. We treat this private information as confidential. MPA Society advises the people we serve that we keep records containing confidential information about them and that they may access all information about them that is held by MPA Society and may view their files upon request.

All matters and information pertaining to service users that has been gained within the organization must be treated as confidential. Under no circumstances may service user information be divulged either inside or outside the organization other than to persons authorized to receive such information in the course of their duties.

**Organizational Value**

Respect & Dignity

Confidentiality

**Practice Standards**

Ensure that all information and documentation related to persons served is secure and treated as confidential. This includes their name, all files, notes, documents, references, assessments, medical, financial, employment and educational histories as well as photographs, verbal information and video footage or other personal information. The obligation to maintain confidentiality continues indefinitely.

Avoid unnecessary conversation regarding persons served and their private affairs, except on a need-to-know basis.

Do not release any information about a person served without the consent of that person or their legal representative.

Ensure all employees, contractors, students and volunteers have signed a confidentiality agreement and provide them with access only to the information required to perform their assigned responsibilities.

Provide persons served with information about their rights to privacy and confidentiality.
Service User Access to Records

In the event that a service user desires to review his/her record or any part thereof, the request should be submitted in writing to the Program Manager or Director. The Program Manager or Director will schedule an appointment with the service user in a timely manner. Whenever possible, access to and the release of service user related information will be accomplished in sufficient time for the service user to make fully informed decisions about his/her care.

Every effort should be made to ensure that service users understand how to access their own records and have the support required to understand the information contained in their records.
Title: Persons Served Orientation to Services

Category: Rights of Persons Served

Reference No: PS – 3

Approved by: Senior Leadership Team

Effective Date: August, 2013

Policy

MPA Society will provide persons served with orientation to the Society and services offered. The orientation information shall be presented in an understandable manner.

Organizational Value

Safety & Well-being
Respect & Dignity

Procedure

1. Individuals who are receiving services or on request, and those considering services provided by MPA society will receive orientation information. This information will be presented during orientation sessions and/or via an exchange of information between MPA Society and the interested party.

2. The orientation information may include:

   • An introduction to the Society.
   • A tour of the program location and introduction to individuals, employees, and/or volunteers (where applicable and appropriate).
   • A review and discussion of policies pertinent to persons served, including health and safety.
   • An overview of the individualized service planning and delivery of services.

3. The rights of persons served are communicated at the beginning of services and annually in a program longer than one year including the rights of:

   • Confidentiality of information
   • Privacy
   • Freedom from:
     o Abuse
     o Financial or other exploitation
     o Retaliation
     o Humiliation
     o Neglect
   • Access to pertinent information
   • Informed consent or right to refuse
• Access or referral to legal entities
• Access to self-help and advocacy services
• Investigation and resolution of infringement of rights
• Program specific requirements
Title: Service User Rights

Category: Rights of Persons Served | Reference No: PS – 4

Approved by: Senior Leadership Team | Effective Date: Jan 2014

Purpose

To create and foster an atmosphere that vigorously recognizes and supports both the rights and responsibilities of the people we serve.

Policy

MPA Society believes and asserts that the people we serve and support enjoy the same rights, opportunities, and privileges as all citizens. MPA Society complies with current laws and regulations regarding rights of persons receiving services, by maintaining current information about rights and providing training and orientation to staff and the people we serve about these rights as per the Persons Served Orientation Policy.

MPA Society recognizes and is committed to the following statement of rights of the person served. These rights are respected at all times, except when exercising them would cause harm to the individual or others. MPA Society also asserts that the people we serve have responsibilities as citizens, and provides appropriate information and support to enable the people we serve to make informed, responsible, and safe decisions.

Organizational Value

Respect & Dignity
Empowerment & Growth
Confidentiality

Practice Standards

It is a policy of MPA Society that service users have the same rights as every other adult. These rights include but are not limited to the Canadian Charter of Rights and Freedoms. Furthermore, a service user rights statement will be posted at each program site stating:

As a program participant or service user of MPA Society, you have the following rights:

1. You have the right to be treated with dignity, respect and to be listened to.
2. You have the right to be understood as an individual with unique strengths, views and beliefs.
3. You have the right to be given a reasonable amount of time to make a decision; and should be given all of the information you are entitled to in order to assist in making that decision.
4. You have the right to choose social and leisure activities within your means.
5. You have the right to see your own records and decide who else can see them.
6. You have the right to give your input into how your services will be delivered.
7. You have the right to express your opinion on who provides your services to you.
8. You can refuse services you do not want.
9. You have the right never to be subjected to abuse, financial or other exploitation, retaliation, neglect, or humiliating or degrading treatment by MPA Society employees or volunteers.
10. You have the right to know the rules and what's expected from the program and the consequences if expectations are not followed.
11. You have the right to choose your own friends and personal relationships.
12. If you live in an MPA Housing Program, you have the right to choose who enters your bedroom and other private living space.
13. If you live in an MPA Housing Program, you are entitled to be consulted and to have your preferences respected with regard to who are your housemates.
14. You have the right to access community services that are available to everyone.
15. You have the right to the safe use of your personal property.
16. You have the right to access legal, self-help, and advocacy services as you wish.
17. You are provided frequent and regular opportunities to voice opinions, raise concerns, or to lodge a complaint to persons in authority without fear of retaliation in any form or barriers to service.

All staff will observe these rights and support service users in advocacy for their rights as per the Service User Complaints and Conflict Resolution Policy.
Title: Persons Served Complaint and Conflict Resolution

Category: Rights of Persons Served

Reference No: PS – 5

Approved by: Senior Leadership Team

Effective Date: September 2013

Revised: September 2018

Purpose

To create and sustain a service delivery and working environment that is positive, open, conflict-free, and focused on meeting the needs and upholding the rights of service users.

Policy

MPA Society is committed to preventing and resolving complaints. A complaint, either verbal or written, may be defined as a situation that is unacceptable or unsatisfactory.

All service user complaints shall follow the procedure listed below.

- Open communication and shared problem solving are encouraged.
- Persons served are involved and listened to when decisions are made that affect them.
- Decisions are communicated in a timely and understandable manner and individuals served may appeal a decision.
- People are treated with respect and dignity.
- All staff have a responsibility to resolve problems in a prompt, professional manner. MPA Society expects that its staff take an active, respectful role in resolving issues as they arise.
- Complaint processes are readily accessible to persons served
- Semi-annual review and analysis of all complaints that involve investigation and/or response from Operational Directors and/or Executive Director

Organizational Value

Respect & Dignity
Empowerment & Growth
Responsibility & Accountability
Confidentiality

Exceptions

This policy does not apply to cases of suspected abuse or neglect. See Abuse and Neglect Policy for further information.
Procedure

1. Whenever possible, an attempt to resolve complaints or disputes should be made by speaking with the staff directly involved. If this is not possible, contact the supervisor of the program involved. The supervisor will meet or speak with the complainant and will provide a verbal response within ten days. The supervisor receiving and responding to the complaint will document this process utilizing the organization’s Incident Reporting Form.

2. If speaking to a supervisor is not possible, or does not resolve the complaint, the dispute should be taken to the Program Manager.

3. The Program Manager will meet or speak with the complainant and will provide a written response within ten days of receiving the complaint.

4. If not satisfied, the complainant may formally appeal to the Director with responsibility for that program. The Director will meet or speak with the complainant and will provide a written response to the appeal within ten days of receiving the complaint.

5. If still not satisfied, the complainant may formally appeal to the Executive Director. The Executive Director will meet or speak with the complainant and will provide a written response to the appeal within ten days of receiving the complaint. The Director will also advise the complainant of their option to submit a complaint to the appropriate Health Authority Patient Care Quality Office if applicable.

6. If still not satisfied, complainants may seek external consultation and review as they see fit.

In all applicable areas noted above, the written response to the complainant shall include any actions taken to address the complaint.

At all steps noted above, a complaint may be made either verbally or in writing. The procedure noted herein will be followed regardless of which method was used to deliver the complaint.

Rights and Responsibilities

Throughout the complaint process, all parties have the right to a transparent, honest dialogue about the concern that has been brought forward. Both parties similarly maintain the responsibility to ensure that this is provided.

All parties responding to a complaint bear the responsibility to thoroughly investigate the concern brought forward and to attempt to ensure an outcome satisfactory to both the complainant and to the organization.

Complainants have the right to be free from retaliation or barriers to service and are assured that the act of complaining will not result in either. Complainants have the right to be free from any coercion, intimidation or bias, either before, during, or after the review. The organization bears the responsibility to ensure this.

Complainants have the right to have all complaints taken seriously and to have review and investigation of all such matters. It is the responsibility of the organization to ensure this. However, the organization is not expected to resolve complaints that are determined to be frivolous or vexatious.

Support to Service Users

A program participant who disputes a decision or practice of MPA Society is entitled to the support of advocate(s) of his or her choice throughout this procedure. Such advocate(s) shall be the one or two individuals that the program participant says is his or her advocate(s), and said advocate(s) shall be permitted access to the process if consent is given by the participant.
Due to conflict of interest, MPA Society staff shall not act as advocate under these circumstances but will support the service user in accessing other self-help, advocacy or legal services.
Purpose

The purpose of the Records Management Policy is to ensure that full and accurate records of all activities related to MPA Society’s business are created, managed and retained or disposed of appropriately, and in accordance with relevant legislation.

Policy

MPA Society will maintain administrative and client records in an organized, systematic fashion that ensures the security of the information and complies with all legal and regulatory requirements.

All Employees, contractors and consultants must comply with this policy and associated Records Management Procedures in their conduct of business on behalf of the agency. This policy applies to records (client and administrative) in all formats, including electronic records.

Organizational Value

Confidentiality

Procedure

1. Storage & Back-Up

   a. Current hardcopy records are to be stored at each location. Hardcopy client records and Personnel files are to be stored in locked filing cabinets in locked offices. Administrative records are to be stored in locked administrative offices. In both cases, access restrictions must be applied as outlined below.

   b. Electronic records, such as those on a client database, may either be retained online (on servers) or offline (on CD ROMS, DVDs, or other removable media). Offline electronic records must be stored in the same manner as hardcopy records (see above).

   c. Records may not be moved or stored off-site unless express written permission is given by the Executive Director.
d. Agency servers are to be backed up daily with a copy maintained off-site.

2. Client Record Entries & Maintenance
   a. All client data is to be stored on the client database or in the hardcopy file at all times.
   b. It is the responsibility of employees working with a client to ensure that all client file data (electronic and hardcopy) is up to date. Documentation in client files must be maintained consistent with policy relating to service delivery. Entries into client files should be made no more than 24 hours after the interaction or event being recorded has occurred. In the case of Critical Incidents, documentation should occur immediately.

3. Retention & Disposal
   a. Employees are not to dispose of any client or administrative records unless directed to by the Executive Director.
   b. Client records shall be maintained for a minimum of 7 years unless the records are subject to legislation or contractual requirements that require retention for a longer period of time.
   c. Human Resources records are to be maintained for a minimum of 7 years.
   d. Financial records are to be maintained as per Canada Revenue Agency Requirements.
   e. Disposal of any records requires that the information be shredded on site at the direction of the Executive Director and under the supervision of employees.

4. Release/Transfer
   a. Any release of personal client information requires the written consent of the client consistent with the Personal Information Protection Policy.

5. Access
   a. Records are only to be accessed by authorized employees that require access to them for business purposes. For client files, employees may only access the files of clients they are directly involved in providing services to or have clinical or supervisory responsibility for.
   b. Clients may access their file information by following the “Personal Information Protection Policy- Policy 7”.
   c. Personnel may access their human resources file by making a request to their Manager and/or Director.

6. Contractors and outsourced functions
a. All records created by contractors performing work on behalf of MPA Society are the property of MPA Society unless outlined in a contract for services. This includes the records of contract employees working on the premises as well as external service providers.

7. Responsibilities

a. Executive Director
   i. Ensures that MPA Society complies with the requirements of privacy legislation by acting as or appointing a Privacy Officer.
   ii. Complies with other legislation of contractual requirements relating to records management and recordkeeping.
   iii. Ensures that the records are managed consistent with this policy and with policies related to record keeping in the client policies.

b. Administrative Staff
   i. Comply with Records Management Policy and Procedures
   ii. Ensure back-up of all information stored electronically on agency servers on a daily basis.
   iii. Manages access to agency electronic files (e.g., passwords, permissions).

c. Service Delivery Staff
   i. Comply with Records Management Policy and Procedures, including the policy and procedures related to the documenting of service delivery processes and protection of information.
   ii. Create full and accurate records of their activities.
   iii. Report to their direct supervisor on all matters relating to records management, including requests for release of information and access to records.

d. Contractors
   i. Manage records that they create on behalf of MPA Society according to this policy and the terms of their contract.
Title: Harm Reduction

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<thead>
<tr>
<th>Category: Rights of Persons Served</th>
<th>Reference No: PS-7</th>
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<tr>
<td>Approved by: Senior Leadership Team</td>
<td>Effective Date: September 2018 Revised:</td>
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Big Picture
Harm reduction aims to keep people safe and minimize death, disease, and injury from high risk behaviour. MPA Society is committed to providing a safe environment for members in different stages of their lives, recognizing that those still active in their addictions deserve to be provided service in a safe, stigma-free space.

Organizational Value
Self-Determination
Safety & Well-being
Respect and Dignity

Policy
1. MPA Society is committed to creating a relationship with all members where they feel comfortable letting staff know if they are using drugs, and being treated with respect and dignity; members will not be punished for disclosing drug-use
2. In applicable programs, MPA will strive to prevent unnecessary harm caused by drug-use through the provision or encouragement of:
   a. Harm reduction supply distribution and recovery programs
   b. Substitution drug therapies
   c. Take Home Naloxone kits
   d. Supervised consumption services or Overdose Prevention Sites for people who use substances
   e. Outreach services to encourage safer behavior
   f. Peer support programs that improve quality of life and address gaps in services
   g. Education programs for both staff and members (e.g. Naloxone training)
3. MPA Society will support members in recovery by reducing possible triggers and providing a recovery-based environment in limiting drug use to designated areas.
Procedure

1. In designated programs, members will be asked to either use consumption areas or let staff know when they are using in their suites.
2. Once notified, staff will check in with members using in their suites at an agreed upon time frame to ensure wellbeing.
3. Designated consumption areas must be supervised while in-use; if a consumption area cannot be monitored, it must be closed until staff can return.
Title: Code of Ethics Policy

Category: Administration/Leadership
Reference No: LDR – 1

Approved by: Senior Leadership Team
Effective Date: January 2014
Reviewed: May 2015
Revised: May 26, 2016

Policy

MPA Society’s Code of Ethics guides the actions of management, staff, volunteers and students in their treatment of persons served. MPA Society’s 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. Each new staff member, volunteer or student is required to review the Code of Ethics and sign acknowledgement for indicating that they have done so. Violation of the MPA Society Code of Ethics Policy may result in disciplinary action up to and including termination of employment, volunteer service or practicum placement.

Organizational Value
Respect & Dignity
Responsibility & Accountability
Confidentiality

Procedure

MPA Society requires its personnel, volunteers and practicum students to know and follow the organizational Code of Ethics and the codes of ethics of their respective professions.

Opportunities for learning about the ethical code of conduct shall include:

• Review of the Code of Ethics during orientation of new employees
• Inclusion of the Code of Ethics in the Board Orientation Package
• Public access to the Code of Ethics via the MPA Society website.

Code of Ethics

All employees, volunteers and students of MPA Society will conduct themselves consistent with the following ethical principles:

1) Respect for the uniqueness of the people we serve, including their values and beliefs as well as their potential for growth and development.

Practice Requirements:

• Ensure that individual differences including values and beliefs are respected.
• Maintain a strength and solution oriented perspective in our approach to service delivery consistent with MPA Society’s mission, vision and philosophy.
• Support service users to develop to their full potential.

2) **Respect for, honoring of, and upholding of the rights of people living with mental illness.**

*Practice Requirements:*

• Recognize and respect participant confidentiality.
• Protect and promote legal and human rights of persons living with mental illness.
• Ensure that client self-determination is respected to the greatest extent possible.
• Engage in actions that prevent the abuse, neglect, or exploitation of individuals.
• Ensure that all individuals have the opportunity to provide informed consent to services to the greatest extent possible.

3) **Promoting the health, safety and well-being of the people we serve, their support networks, and the communities they live in.**

*Practice Requirements:*

• Promote the physical, mental, social, emotional, and spiritual health of the people we serve.
• Ensure that safety is a priority in the delivery of all MPA Society programs consistent with Health and Safety policy.
• Where possible and appropriate, to participate in activities that promote the health and safety of the community consistent with our mission, vision and philosophy.

4) **Practice that emphasizes partnerships with the people we serve, their support networks, and the community including other community agencies.**

*Practice Requirements:*

• Where possible, to take a collaborative approach to service delivery that emphasizes shared responsibility.
• Endeavour to include and consult families and support networks of the people we serve while respecting their wishes and confidentiality.
• Establishing and maintaining effective working relationships with community partners.
• Develop and promote the expectations and choices of the people we serve.
• Follow up with all community complaints, where possible.
• Involvement on Boards and Committees by senior management team.
• Maintain an open dialogue regarding services and the outcomes MPA Society is anticipating.

5) **Respect for diversity, cultural heritage, and spiritual beliefs.**

*Practice Requirements:*

• Showing sensitivity to the impact of cultural heritage and spiritual belief in the delivery of services.
• Accommodating cultural and spiritual practices and beliefs where possible and reasonable within the context of the service we provide.
• Take reasonable action to prevent and eliminate discrimination in all forms including age, race, skin color, gender, income, sexual orientation, and disability.
6) **Commitment to competent and accountable practice that is both ethical and responsible.**

*Practice Requirements:*

- Practice our professions to the best of our ability.
- Practice within the policies and procedures of the agency.
- Identify and avoid all conflicts of interest.
- Promote ethical conduct within MPA Society and in the community.
- Recognize when personal problems or needs can interfere with professional effectiveness and act to eliminate or minimize the impact through setting firm professional boundaries.
- Demonstrate integrity in all professional relationships.
- Act with diligence, efficiency, and conscientiousness.
- Abstain from activities that might result in the actual or perceived exploitation of participants for advantage or personal gain, including accepting or exchanging gifts, money, and gratuities or engaging in personal fund raising while at work.
- Employees are not permitted to witness legal documents for members.
- Maintain accountable reporting practices including reporting all incidents of abuse or neglect and all instances where harm or the potential for harm to the people we serve is present.

7) **Commitment to professional and organizational excellence through an accountable, transparent and results oriented approach to delivering services.**

*Practice Requirements:*

- Strive to provide the most effective service possible by participating in activities designed to improve the services we deliver.
- Continuously pursue improvement in our ability to provide services through seeking out and implementing best practices, taking actions to enhance the knowledge, skills, and self-awareness necessary to be competent, and evaluating our efforts.
- Value participant input to the greatest extent possible.
- Ensure that human resource practices are fair, transparent, respect equality and are conducted in the best interests of the people served.
- Ensuring the honest representation of the organization in any business, marketing or promotional efforts.
- Ensuring that all contracts entered into by the agency are consistent with the best interests of the people served and that contractual relationships avoid conflicts of interest.
- Ensure all financial practices of MPA Society are handled in accordance with the applicable federal, provincial and municipal laws.
- Abstain from any act of professional misconduct, including activity or practices that involve intentionally wasting or misusing of resources, committing fraud, engaging in intimidating or abusive behavior or any other wrong doing.

**Reporting Violations of the Code of Ethics**

The culture of MPA Society encourages and supports any person who has witnessed or suspects a violation of the Code of Ethics to report the violation and be confident of doing so without fear of retaliation and in a supportive environment.
Upon receiving an allegation that the Code of Ethics has been breached by an individual or group of employees, the Executive Director or designate will begin a thorough investigatory process which is considerate of the complexity and seriousness of the specific allegation and results in a timely decision.
Title: Cultural Competency and Diversity Policy

Purpose

MPA Society recognizes that persons receiving services are best served when services are provided in a manner that is sensitive to and respectful of the person’s culture.

This policy is specifically intended as a tangible demonstration of the organization's commitment to awareness, respect and diversity in the following areas: (a) culture, (b) age, (c) gender, (d) sexual orientation, (e) spiritual beliefs, (f) socioeconomic status, (g) language, and (h) ethnicity. The organization’s commitment to cultural safety and diversity specifically applies to the individuals who receive services, all employees, and the organization's stakeholders.

Policy

MPA Society recognizes its moral, ethical and legal responsibilities to respect the varied cultures represented by the people who access its services and supports, and is committed to providing a culturally safe, supportive, inclusive, respectful environment for our members, staff, and other stakeholders.

MPA Society recognizes that the organization provides services in a variety of locations and to a diverse population, and will actively and continuously strive to be culturally competent and diverse. MPA Society also acknowledges that culture is complex and dynamic, and that it is not possible to know everything about all cultures. Therefore the Society adopts a cultural humility approach, recognizing that the most useful way to approach another person is with genuine curiosity, comfort with "not knowing", openness to learning, and a willingness to reflect on what one is bringing from one’s own background into the encounter.

Procedure

1. MPA Society will develop and implement a Cultural Competency and Cultural Humility Plan to ensure that services are designed and delivered in a manner that will be most effective given the cultures served, and to provide settings that respect diversity and promote comfort and trust.

2. The Cultural Competency and Cultural Humility Plan will be made available to all employees and will be reviewed at a minimum annually by the Senior Leadership Team, to ensure that the Society remains keenly aware of the cultures, ethnicity, attitudes, values and predominant beliefs of the clients served throughout its various programs.
3. MPA Society realizes that, in order to provide the highest quality services to a diverse population, training is needed on cultural competency, cultural humility and diversity as a way to increase employees’ awareness on the subjects. The leadership team of MPA Society is responsible for ensuring that appropriate training and resources on cultural competency, cultural humility and diversity are available to all employees in accordance with the Cultural Competency and Cultural Humility Plan.
Title: Accessibility and Accessibility Plans

Category: Administration/ Leadership
Reference No: LDR – 3
Approved by: Senior Leadership Team
Effective Date: Jan 2014

Policy

MPA Society recognizes the need to provide supports and services that are easily and readily accessible to residents, service users, employees, visitors and other stakeholders. Toward that end, MPA Society will make every reasonable effort to eliminate any and all barriers that might potentially limit services to persons seeking services at MPA programs. This policy recognizes that all MPA programs may not be fully accessible by all people seeking services. However, the organization is committed to providing reasonable accommodations at all program locations. MPA Society will establish and maintain an adequate referral network with other providers and provider organizations as a way to meet the needs of those persons who need services that cannot be readily accessed in MPA programs. Each program site owned and operated by MPA Society will develop and maintain an Accessibility Plan that addresses the needs of residents, service users, employees, visitors and other interested stakeholders.

Organizational Value
Respect & Dignity
Safety & Wellbeing

The basic Accessibility Plan for MPA Society consists of:

1. An acknowledgment that barriers to service extend beyond those of the physical property. Such barriers can include, but are not limited to: (a) attitudinal barriers; (b) architectural barriers; (c) environmental barriers; (d) financial barriers; (e) employment barriers; (f) communication barriers; (g) transportation barriers; and (h) other barriers not covered above but identified by persons served, employees and other stakeholders.

2. Management review of all requests from service users and employees for reasonable accommodations and decisions based on individual need, the good of the organization and the existing business/fiscal or other climate. For emphasis, this element of the plan DOES NOT automatically guarantee that each and every request for reasonable accommodation will be approved by management. It does, however, ensure a fair, impartial and expeditious review of the request.

3. An annual review of the plan by Directors/Program Managers as a way to monitor access to MPA Society’s programs and make improvements where necessary and when indicated. The annual review will result in the development of a status report that will include: (a) a description of the barriers, (b) a description of the proposed solutions, (c) if applicable, a description of alternative facilitation that is to be provided until actual barrier removal occurs, (d) the person responsible, (e) the due date, (f) actual completion date and, (g) any other remarks. The purpose of the annual review is to objectively evaluate accessibility to service provision and to work toward full access through the elimination of all identified barriers. The requirement for the annual status report can be satisfied by updating the Accessibility Plan and/or by developing a new Accessibility Plan for the next year.
4. Implementation of accessibility plans will address the integration of service users into their local community of choice, so as to advocate for reducing and eliminating barriers in these community settings;

5. A conscientious effort to lease/rent/purchase facilities that are fully accessible by persons who use assistive devices as a means of enhancing their physical mobility;

6. An annual review of the Accessibility Plan by the Executive Director with recommendations for changes/improvements to enhance accessibility and remove barriers noted;

7. Consideration of any and all service user and stakeholder input pertaining to accessibility;

8. Efforts to work toward full compliance with all federal, provincial and local requirements pertaining to accessibility at all program locations, and;

9. Expeditious identification and review of any request – either by service user and/or employees for reasonable accommodations and prompt decision-making relative to that request.

Procedure

Directors/Program Managers are primarily tasked with implementation of this policy and with conducting an annual accessibility review at all program locations and developing a program specific Accessibility Plan. The Executive Director will review the organization’s accessibility plan annually (as well as any recommendations made by the Directors/Program Managers to improve accessibility) and when appropriate, address accessibility issues in the organization’s strategic plan.

All employees are responsible for the identification of barriers to service and for bringing those barriers to the attention of the appropriate management employees.
Title: Whistleblower (Non-Punitive Reporting) Policy

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<td>Approved by: Senior Leadership Team</td>
<td>Effective Date: July 2015 Revised:</td>
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**Purpose**

Member, employee, funder, and public satisfaction are central to our continued success. The organizations that contribute to MPA Society expect that we will be accountable for the prudent stewardship and use of financial and other resources that enable us to deliver services in a cost-efficient and effective manner. While MPA Society's internal controls are intended to detect and prevent improper activities, we have a responsibility to facilitate and encourage processes that enable a person to independently report legal, regulatory, financial or ethical violations. MPA Society has made a commitment to an internal process by which employees may raise concerns without fear of discrimination, retaliation or reprisal.

**Organizational Value**

Responsibility & Accountability
Confidentiality

**Policy**

MPA Society expects, supports, and will protect all individuals who report wrongdoings of which they are aware. MPA Society shall not dismiss, suspend, demote, discipline or otherwise disadvantage an employee who reports an incident of waste, fraud, abuse or other violations of ethical codes on the part of the agency.

This policy does not preclude an employee from reporting a concern through the normal organizational reporting structure and policies. This policy supplements normal processes and supports individuals if they do not believe the existing processes are appropriate.

**Scope**

This policy applies to improper conduct or wrongdoing, which includes but is not limited to serious actions that:

- Are unlawful or not in compliance with any laws or regulations to which the Society is subject
- Do not adhere to Society policies or contractual obligations
- May amount to fraud or corrupt activity
• Reflect a real or perceived conflict of interest
• Represent the unauthorized use, misuse, or waste of funds or resources
• Are of substantial and specific danger to the member, staff, or the public
• Do not adhere to appropriate MPA Society accounting policies or procedures, internal accounting controls, or auditing procedures
• Constitute any other unethical or improper conduct or abuse

Procedure

1. All reports of the above nature should be directed to the Executive Director. All such reports will be submitted in writing or via email.

2. The Executive Director will determine whether the concern should be addressed by any other policy or process, or by investigation.

3. If an investigation is appropriate, the investigation into the matter will be conducted by the Executive Director or a designate who is not in conflict with the matter.

4. Initiation of the investigation into the matter will commence no later than seven days after the submission of the report.

5. At the request of the employee, the employee’s identity will be held in the strictest of confidence.

6. If the individual is not satisfied with the action taken in response to their concern they may contact either the Chair of the Audit Committee or the Chair of the Board of Directors.

7. MPA Society will not take, tolerate or allow any reprisal, harassment or informal pressure against a person for, in good faith, reporting a suspected violation. Any such reprisal will itself be considered a serious breach of this policy and any individual who attempts to execute an act of reprisal may face disciplinary action.

8. Where an investigation determines that the concern was reported in bad faith or with malicious intent, action will be taken including, if appropriate, disciplinary proceedings.
Title: Login ID and Passwords

Category: Information Technology | Reference No: IT – 1
Approved by: Senior Leadership Team | Effective Date: April 2013

Big Picture

Computer security is becoming increasingly important as technology advances. Every employee has a unique logon ID and password for accessing the Organization’s network. Employees are to ensure their password is well written - that is, it uses a combination of alphanumeric and special characters. They are not to share their passwords with anyone else. Allowing someone else to use an employee ID and password to access the Organization’s network is a breach of trust and puts our network at risk.

Organizational Value

Safety/Well-being

Policy

In order to ensure maximum computer security, MPA Society has implemented best practice industry standards for protecting our computer systems. These standards are enacted in procedures that all MPA Society employees will familiarize themselves with and follow.

Procedure

1. Every employee has a unique logon ID and password. Their logon ID - or user name - is assigned by the Executive Assistant and thereafter, employees create and maintain their own passwords.

2. Employees are responsible for the control and use of their logon ID and password. The combination of a logon ID and password to an automated system is the equivalent of a signature. To put this in perspective, giving your logon ID and/or password to another individual is like handing them a signed blank check.

3. If an employee logs on from within the network, there is no time limit to the length of time s/he may remain logged on. However, it is strongly recommended that employees log out of the system whenever they are going to be away from their computer for any significant length of time or when they leave the office for the day.

4. When your logon ID was created, you were given permission to access all of the public folders, servers and applications on the network. Access to some servers, however, may be restricted to those who need the information in the daily course of their jobs. If you need access to such a server, please contact your manager who will provide the necessary approvals to facilitate this.
5. Password must be 6 characters or longer, must be changed every 90 days, and are not reusable for at least 6 months. The following are some tips for creating good passwords:
   - Don’t associate your password with personal information (e.g. PIN numbers, family birthdays, phone numbers, family names, etc.).
   - Passwords should not be a word found in the dictionary
   - Passwords should not be the name of a pet, spouse, or child;
   - Passwords should contain a combination of letters, numbers, and symbols;
   - Passwords should use both upper and lower case characters.
   - Make sure your password uses an apparently random combination of upper and lower case alphanumeric and special characters.
   - Try creating your password using the first letters of each word in a sentence, making sure you also insert numbers or special characters.

6. Should an employee forget their password, they should contact the Executive Assistant to have it reset.

7. There are some circumstances under which an employee’s logon ID will be automatically removed from the system:
   - Upon departure from MPA Society;
   - If the logon ID has not been used for 45 days. Therefore, Individuals taking extended leaves should be aware that this might occur while they’re away unless prior arrangements are made.
   - If it is suspected that the logon ID is being used in a manner that is not in accordance with Agency policy (e.g. suspected use by someone other than the owner, or the logon ID is connected to illicit or illegal activities, etc.).
Title: Email Use

Category: Information Technology

Reference No: IT – 2

Approved by: Senior Leadership Team

Effective Date: April 2013

Revised:

Big Picture

At MPA Society, employee’s access to e-mail is determined by program Managers, based on service need. Email is a key communication tool, and we all like to have fun and flexibility in how we write and communicate. However, employees must consider that an email message is equivalent to an Agency memo. One should use the same care in creating an email message that one does creating any other Agency document.

We need to balance our need for freedom of expression, humor, and creativity with respect for each other, the speed and accessibility of email, and the law. When using our email system, MPA Society expects our employees will use the application appropriately, and co-operatively.

Organizational Value

Responsibility & Accountability
Respect/Dignity

Policy

1. Our Executive Assistant/Office Manager manages the creation and maintenance of all email accounts and passwords, as well as the installation and maintenance of email software on MPA Society computers and our network.
2. Mail folders are backed up daily.
3. Individuals are responsible to purge and manage their own inboxes and personal folders.
4. Incidental and occasional personal use of electronic mail is permitted so long as it is not abused.
5. Agency oversight of personal messages is managed in the same way as business-related messages. Every email message sent to, or received by, an individual in the Society using Society resources is considered a Society record that is backed up daily.
6. The contents of any email can be monitored without an individual’s permission.
7. Chain letters are not allowed, no matter how inspirational, informative or alarming they seem to be.
8. Sending emails to our “MPA all” distribution lists without prior authorization from a member of the Senior Management Team is not allowed.
9. All external MPA professional communications shall be sent on MPA addresses only.
Procedure

1. Individuals using the email system should expect that messages sent on Agency business or with the use of Agency facilities are available for review by any authorized representative of the Society for any purpose related to Society business.

2. When sending any external communications on behalf of MPA Society, employees must do so using an MPA address only. No one shall send out professional external e-mails from their home addresses or other non-MPA Society addresses.

3. MPA Society employs are expected to read their e-mail on every shift and respond to e-mail inquiries within a reasonable timeframe.

4. The Society reserves the right to access the contents of email communications at any time and for any reason.

5. Email communications may be monitored at any time and for any reason, including but not limited to, breaches in security, violations of law, or infringement of Agency rules.

6. If indications of illegal activity or violations of Agency policy or security are noted during monitoring, the individual(s) involved will be reported in accordance with Society policy.

7. Any employee who receives interactions or material that may be considered offensive is responsible for advising the sender to discontinue sending inappropriate emails or messages. If the recipient is not comfortable advising the sender to stop sending these types of message, they should contact their immediate Supervisor or an HR Representative for assistance.

Practice

E-mail should be treated like regular business correspondence and follow the guidelines of email etiquette:

- When receiving an email, provide a response to the sender within the same business day – even if it’s simply to acknowledge receipt of the email and when you will get back to the sender.
- Use courteous language.
- Do not send unsolicited emails without a specific business-related purpose.
- Be cautious about sending confidential information via email.
- Do not use antagonistic words or critical comments that can hurt people and cause awkward situations. Email is not the place to make negative comments. If there is a problem, resolve it in person, and avoid war of words on email.
- Remember that few people like "spam." When sending unsolicited emails, make sure there is value to the recipient, or they will likely consider it "spam" and delete it unread.
- Do NOT send emails to our “MPA all” distribution lists without the authorization of a member of the Senior Management Team. Develop distribution lists for specific audiences.
- Always be aware that nothing on email is private. There is no such thing as a private email, even once a message has been deleted. Before you click "send," consider what may happen if the message is read by someone else. A helpful guideline is to not send personal or confidential emails.
Out-of-office Email Notification

When you are out of the office and unable to retrieve email in a timely manner, we ask that you turn on your "out of office assistant". This will generate an automatic reply email and notify senders that you are not available to respond to them. For your convenience, you may want to use the following templates as guidelines to develop your out-of-office message:

1. **Out of the office – limited access to email**: Thank you for your email. I will be out of the office from [date] to [date] and will have irregular access to email. I will respond to your message as soon as I can. If the matter is urgent, contact [person] at [contact information]. Thank you, and have a great day!

   [Standard email signature]

2. **Out of the office – no access to email**: Thank you for your email. I will be out of the office from [date] to [date] and will not have access to email. I will respond to your message when I return on [date]. If the matter is urgent, please contact [person] at [contact information]. Thank you, and have a great day!

   [Standard email signature]
Title: (Acceptable) Use of Information Technology *

Category: Information Technology | Reference No: IT – 3

Approved by: Senior Leadership Team | Effective Date: April 18, 2013
Revised: July 2015, Mar 2018

Big Picture

MPA provides computers, electronic data storage, internet services, emails, smart phones and other electronic devices and services as important tools to support the Society’s business and assist individuals in performing their job responsibilities. The systems must be used in an appropriate and professional manner that does not improperly disclose confidential, sensitive, or proprietary information to unauthorized individuals or in violation of federal, provincial or local law. Further, the Society wishes to protect its computer systems from attack by worms, viruses, and unauthorized use through personal e-mails, instant messaging, blogs, and unauthorized web sites.

Organizational Value

Responsibility & Accountability
Confidentiality

Policy

1. The Society’s communication systems are intended for business purposes.

2. The Computer System including all hardware, software, networks, WIFI and records/data contained therein, is the property of MPA Society.

3. Usage of the computer system including internet and e-mail usage must be able to withstand public scrutiny. Users must comply with the applicable legislation, regulations, policies and standards. Users must:
   - Comply with copyright and license provisions with respect to both programs and data;
   - Protect personal or confidential information from inappropriate access or disclosure;
   - Avoid accessing internet sites that carry offensive material, including but not limited to, pornography, hate literature or any material that may contravene the Human Rights Code; and
   - Not use e-mail to distribute hoaxes, chains or advertisements and/or send rude, obscene or harassing messages.

4. The Society has the right to view all files that have been downloaded and to monitor Internet and email usage at any time. Use and content of the Computer System may be audited by persons so authorized by the Society without notice to the user, including but not limited to internet sites visited.
(including network sites), e-mail traffic, and the content of data stored, including documents and e-
mail.

5. Any inappropriate use of the computer system may be investigated by the Society and any user may, as a result, be subject to discipline, including termination.

Procedure

Providing Internet access to individuals represents a considerable Agency investment in telecommunications, software, storage, and computers.

1. The following activities are considered appropriate use of Agency-provided Internet access:
   • Communicating with colleagues, and liaison professionals, regarding business matters
   • Researching topics relevant to your specific job requirements
   • Conducting other business activities that are directly relevant to your specific job requirements or productivity.

2. When using MPA resources:
   • Special care is required when participating in chat room, newsgroup, blogs, instant messaging, and email communications. Only those authorized to speak to the media, to analysts or in public gatherings on behalf of MPA are allowed to speak officially in the name of the Society to newsgroups, chat rooms, blogs or any other electronic medium.
   • Nothing sent on the Internet should be considered private. Don’t send information that is confidential, or proprietary regarding its contents, or use.
   • All existing Society policies apply to Employee conduct on the Internet, especially those that deal with property protection, privacy, misuse of resources, sexual harassment, and information and data security.
   • Consideration for other users should be shown by not monopolizing system resources and adhering to the security measures we’ve put in place to maintain system integrity.

3. Although this list is not exhaustive, the following activities are considered prohibited:
   • Transmission of chain or threatening letters
   • Any use of the Internet for illegal activities, or to transmit SPAM
   • Disabling or circumventing security measures put in place by the Society such as firewalls, authorization, virus protection, etc. and thereby putting Agency computers and information at risk.
   • Visiting sites that are considered inappropriate, pornographic or “obscene”. If you connect unintentionally to a site that contains sexually explicit or offensive material, you must disconnect from the site immediately and advise your manager.

4. Individuals should be aware that when access is accomplished using Internet addresses and domain names registered to the Agency, they may be perceived by others to represent the Agency. Users
are advised not to use the Internet for any purpose that would reflect negatively on MPA.

5. The Society has the right to view all files that have been downloaded and to monitor Internet and email communications. The Executive Director has access to all email and software and links associated with individual transactions.

6. Everyone with Internet access via MPA facilities will familiarize themselves with this policy and:
   • Acknowledge they have received, read and understand the MPA Internet Use policy;
   • Will abide by the terms specified in the Internet Use policy;
   • Recognize that our security software may record their Internet activity, including all transmissions, file transfers and Internet locations accessed;
   • Recognize that any message sent or received will be recorded and stored in an archive file for management use;
   • Acknowledge they have no privacy expectations for any Internet activity they may undertake, including both internal and external email communications; and
   • Recognize that violation of the policy may result in discipline, suspension, or termination. Additionally, if the violation resulted in criminal conduct, management will provide the records to the appropriate authorities for possible criminal prosecution.

7. Specific policies regarding the downloading/uploading of software and images, and one’s general conduct while using Agency Internet resources are:
   • All software downloaded from the Internet becomes the property of MPA, but keep in mind that downloading or distributing pirated software or data is prohibited.
   • Downloading entertainment software or games, or playing games against opponents over the Internet is not permitted.
   • Downloading images or videos, unless there is an explicit business-related use for the material, is not permitted.
   • Uploading any software licensed to MPA or data owned or licensed by the Society without appropriate authorization, is not permitted.
   • All downloaded files must first be scanned for possible virus infection. Anyone who tries to propagate a file infected with a virus, worm, Trojan horse or trap door may be subject to termination.
   • The Society has installed software to keep out hackers. Any user who tries to override our security measures will be subject to termination.
   • Honestly disclose who you are when you send email, register accounts or conduct other Internet transactions.
   • Display of any kind of sexually explicit image or document on any Company system is a violation of our policy on sexual harassment. Sexually explicit material may not be archived, stored, distributed, edited, or recorded using the Agency network or computing resources.
   • You must keep your user ID and password information confidential.
• You may not connect your own personal computer or electronic device to the network without proper authorization.

8. **Blogging - Definition:** A Web site that contains dated entries in reverse chronological order (most recent first) about a particular topic. Functioning as an online journal, blogs can be written by one person or a group of contributors. Entries contain commentary and links to other Web sites.

• Do not blog about MPA matters unless the content has been pre-approved by the Executive Director.

• Do not use Agency Intranet or websites to create or set up blogs.
Title: Use of Portable Electronic Devices

Category: Information Technology  
Reference No: IT – 4

Approved by: Senior Leadership Team  
Effective Date: Apr 18, 2013  
Revised: April 2018

Big Picture

MPA Society supplies and maintains cell phones and/or wireless e-mail devices and/or laptop computers for individuals whose positions so require. Alternatively, employees can be given authorization to use their own electronic devices for business purposes. Guidelines regarding the use of these devices are in place for the integrity and safety of both the Organization and the Employee.

When using an electronic device, Employees are expected to use good judgment and follow the guidelines included in this document and other information technology use policies and guidelines.

Organizational Value

Responsibility & Accountability

Policy

1. Employees in receipt of a cell phone or wireless e-mail device or laptop are responsible for the care of this equipment.

2. All Employees, upon issuance of a portable electronic device, will sign an acknowledgement form:
   - indicating receipt of the device,
   - accepting responsibility for the care and maintenance of the device;
   - acknowledging that the device is MPA Society property and must be produced for inspection upon the request of the Employee’s supervisor; and
   - Will return the device upon departure from MPA Society.

3. The Society does not permit individuals to use cameras or recording devices on Society property at any time without explicit permission.

4. Guidelines for the use of portable electronic devices apply to both employer provided devices as well as the personal devices of employees who have been given authorization to use the electronic device for business purposes.
Procedure

1. Employees are asked to adhere to the following guidelines regarding use of electronic devices.
   - Do not conduct Agency business on a wireless device while driving, unless using a head set or hands free device.
   - If the Society has supplied an Employee with a wireless e-mail device, or if an employee is using their own electronic device for business purposes, it must be **password protected** so that sensitive information does not get into the hands of unauthorized individuals.
   - Personal calls may be placed and received on the wireless device as long as they do not interfere with Society business hours and do not incur additional cost to the Organization. Costs incurred for personal use of Society-supplied electronic devices are the responsibility of the individual.
   - Use discretion when using your electronic device while out of town as roaming and long distances charges can add up very quickly.
   - Protect your electronic device from theft, loss or damage. If your device becomes lost, stolen or damaged, please notify your Supervisor immediately. Our Administration may have the resources to instantly de-activate the use of the wireless device by using technology available for lost or stolen wireless devices.
   - At any time, Employees may be asked to produce the electronic device for return or inspection.
   - Employees must return their Society cellular phone or electronic device immediately upon discharge or separation from MPA.

2. The Society will not be liable for the loss or theft of personal cellular phones or other electronic devices brought into the workplace.
Title: Virus Protection

Category: Information Technology  
Reference No: IT – 5

Approved by: Senior Leadership Team  
Effective Date: April 2013  
Revised: March 2018

Big Picture

Viruses are a major threat to any Organization’s computer system. There are a number of simple steps that all employees should follow to help MPA Society avoid network problems due to viruses.

Organizational Value

Safety/Well-being

Policy

1. All MPA Society computers will utilize and maintain the anti-virus software that has been installed.
2. Employees will not open any suspicious e-mails, such as those from senders whose name is not known to the recipient.
3. Employees will immediately report any suspicions about computer viruses to their immediate supervisor.

Procedure

The most common ways viruses can be introduced into our systems is by downloading files from the internet or other external computers, connections to the internet or other external computers and loading files to our systems from diskettes which we receive from other organizations or bring from home.

To reduce this threat, we have installed anti-virus software on all of the Organization’s computers and servers. Firewalls are also installed to protect these systems from outside connections.

1. In order to assist us to avoid network security problems, Employees will follow the following procedures:
   - Not disable the anti-virus and disk/file scanning software on your MPA-supplied computer(s)
   - Scan files and removable storage devices before using them on a computer connected to our network
   - Not open emails containing attachments from names you don’t recognize
   - Download and install updates to the anti-virus software when available.
2. If a virus program is suspected or detected on one of our computers, stop using the computer and report any concern to your Supervisor immediately. They will take appropriate action to have the virus removed, determine what damage the virus may have caused, which other systems may have been infected, and attempt to discern how the virus was introduced to the system.
Title: Social Media and Online Communication

Category: Information Technology  
Reference No: IT – 6

Approved by: Senior Leadership Team  
Effective Date: March 2018

Big Picture

This policy describes the responsibilities for employees using various online communication tools, including social media platforms, websites, blogs and applications that permit users to share information with others in a contemporaneous manner.

The purpose of the policy is to: ensure an efficient and coordinated approach to agency online communications; to minimize privacy and confidentiality risks to MPA, its employees, members and clients; and to promote a professional and respectful work and service environment.

Organizational Value

Responsibility & Accountability
Respect/Dignity

Policy

Everyone should be aware of the effect their actions and comments may have on the individuals or agencies depicted in online communications. The information posted, published or collected may be public for a very long time.

Employees should exercise their best judgement in posting material. It should not be inappropriate or harmful to MPA, its employees or its members and clients.

Procedure

1. While engaging in any social media and online communication, employees should at all times consider the content of their communication and its potential impact on MPA and its clients, members and employees.

2. Information, comments and images posted, published or collected must not be harmful to MPA, its clients, members and employees.

3. While not an exhaustive list, some examples of prohibited social media conduct include posting commentary, content, or images that are defamatory, disparaging, proprietary, harassing or that can create a hostile work or service environment.

4. Employees are not to publish, post, release or collect any information that is considered confidential. This includes any reference or information that could be used to identify individual clients, members, or employees. If there are questions about what is considered confidential, employees should seek guidance from their manager.

5. Employees should use social media as private individuals only, and not as a representative of MPA.
6. Employees should not speak on behalf of MPA unless specifically authorized to do so.
7. Employees may not use their MPA email address for any personal social media or online accounts.
8. Employees should not engage in any sort of personal relationship with clients online, including initiating or accepting friend requests on various social media platforms.
9. If an employee encounters a situation while using social media that may potentially harm MPA, its employees or its members and clients, the employee must immediately inform their manager.
10. Any suspected privacy breach should be immediately reported to your manager.
11. Using social media may not interfere with the employee’s work responsibilities.
12. Activity that violates this policy, while either on duty or after hours, may result in disciplinary action.
Title: Texting

Category: Information Technology

Reference No: IT – 7

Approved by: Senior Leadership Team

Effective Date: March 2018

Revised:

Big Picture

MPA recognizes that texting can be an essential communication tool for working with clients in outreach programs.

The purpose of this policy is to establish procedures that guide the use of texting, to mitigate privacy and security concerns associated with the use of text messaging for work purposes, as well as to promote a professional and respectful work and service environment.

Organizational Value

Responsibility & Accountability

Respect/Dignity

Policy

Communications with clients are legal documents that can be subpoenaed as a portion of the client’s records. Staff should exercise judgement in individualizing the use of text messaging as a communication tool with clients.

Procedure

1. Staff should clearly discuss and explain expectations around texting communications upon meeting clients.
2. Texting should only be used on an as needed basis, to relay simple administrative information – running late, booking appointments, change of meeting location, reminders.
3. Personal or confidential information should not be included in a text message.
4. Emoticons and other expressions should be avoided in communications with clients and members as they can easily be misinterpreted.
5. Ongoing case planning or personal narrative is not appropriate in text communications and clients who engage in that form of texting should be redirected to a personal meeting with their worker.
6. Text communications of significance should be documented in the client’s record in accordance with usual charting requirements. Once documented, the text should be deleted.
7. The same standards of communications used in a work environment should be applied to text messaging. Vulgar language, swearing, provocative images and innuendo should not be part of texting communications. These standards should be communicated to clients.
8. Staff may seek guidance and support in managing text communications with clients. Please consult your manager to block existing text communication services with a Client.
9. Staff should not send or respond to text messages outside of their scheduled working hours, and clients should be made aware of this limitation.
Title: Staff Expenses Policy

Category: Finance | Reference No: FIN – 1

Approved by: Executive Director | Effective Date: July 1 2014

Big Picture

MPA has made a commitment to its members, funders and the general public to provide excellent, responsive and transparent services with a clear commitment to accountability and good governance.

A component of this accountability and good governance is ensuring the prudent and appropriate use of public monies for authorized purposes.

Organizational Value

Responsibility / Accountability

Purpose

The purpose of the Staff Expense Policy is to ensure that administration of the financial resources of MPA maintain an appropriate balance between the commitment to minimize operating expenses to the greatest extent possible and fair reimbursement of expenses incurred while conducting business on behalf of the Society.

Scope

This policy applies to all Staff while conducting Society business.

Responsibility

Every individual is responsible for:

- Behaving as a representative of the Society at all times.
- Following company procedures and guidelines for expenses.
- Retaining all receipts.
- Consulting their manager for guidance if there is any doubt as to the appropriateness of a specific expense.

Operating department managers are responsible for:

- Reviewing and approving all expenses submitted by the employee.
• Providing guidance to employees regarding appropriate types and levels of expenses.

The Finance Department is responsible for:
• Ensuring that expenses are properly authorized.

REFERENCES and RELATED STATEMENTS of POLICY and PROCEDURE
SPP FN 2.01 – Expense Authorization

Allowable Expenses

TELECOMMUNICATIONS

MPA provides voice and data plans for a number of Staff. Staff must reimburse MPA for personal use in excess of the shared maximum voice and data plan. Personal use should be minimized where possible.

MPA will reimburse Staff for reasonable use of their personal phones for MPA business.

Any computer equipment purchased by MPA, for example cell phones and laptops, are the property of the organization and will be retained by MPA in the event that an employee leaves the employ of the organization.

APPROVED PROGRAM ACTIVITIES

From time to time it is appropriate for MPA to pay for approved program activities with stakeholders.

MPA will reimburse for reasonable food costs. Alcohol should not be consumed by participants.

Receipts are required to claim expenses. The receipt must include a record of the purpose of the activity and the participants’ names.

TRANSPORTATION

When conducting business requiring travel within the operating locale of the MPA, all reasonable transportation costs will be reimbursed.

Use of Personal Car
• Mileage will be reimbursed at a rate of $.52/km. Total mileage for each trip is required on the expense claim form, including date, purpose of the trip, starting and ending point of each trip.
• Requirements and conditions set out in MPA’s Transportation Policy must be met.
Parking
- All parking charges when incurred on MPA business will be reimbursed.

Fines
- Fines for traffic or parking violations will not be reimbursed.

Procedure

PROCESS FOR REIMBURSEMENT

Timeline
All claims for expense reimbursement should be submitted within 5 business days of month end. Cheques for expense reimbursement will be issued promptly upon the receipt of a properly completed and authorized request.

Approval Process
Staff expense reimbursement claims are approved by the employee’s reporting manager. The responsibility to observe the Expense Policy rests with both the person who submits the claim and the person who authorizes the claim. A signature to submit or approve an expense claim certifies that the completed expense claim is in accordance with MPA’s Expense Policy.

Completion of Expense Claim Form

The minimum information required on all expense claim forms:
1. Name of the personal claiming the expenses.
2. Purpose of the expense, including the location and names of participants.
3. Dates the expenses were incurred.
4. Amount of the expense, identifying related HST/GST.
5. Signature of the claimant.

Receipts or invoices are required to support all expenses and must be attached to the expense claim form. Exceptions are for meal per diems, lodging at a private residence and mileage.

Original copies of receipts or invoices are required when available. A credit card slip is not an acceptable receipt or invoice. Any expenses not supported with proper documentation will not be reimbursed.

Any costs that have been reimbursed by another organization cannot be claimed for reimbursement from MPA.
Title: Expense Authorization Policy

Category: Finance  
Reference No: FIN – 2

Approved by: Executive Director  
Effective Date: April 23, 2010

Big Picture

MPA has made a commitment to its members, funders and the general public to provide excellent, responsive and transparent services with a clear commitment to accountability and good governance.

A component of this accountability and good governance is ensuring the prudent and appropriate use of public monies for authorized purposes.

The organization’s policies ensure that purchases are for budgeted and approved expenditures, represent good value and benefit to the Society and its stakeholders, and are approved at an appropriate level of operational or financial authority.

Organizational Value
Responsibility / Accountability

Purpose

All employees shall obtain appropriate authorization for any expenditure of Society funds. The purpose of this Policy is to establish internal controls over the authorization of expenses.

Scope

This policy applies to all Directors and staff making purchases on behalf of the Society.

Responsibility

Every individual is responsible for:

- Following Society procedures and guidelines for expenses and expense authorization.
- Retaining all receipts for purchases made on behalf of the Society.
- Consulting their manager for guidance if there is any doubt as to the appropriateness of a specific expense.

Operating department managers are responsible for:
• Ensuring all purchases are for budgeted and approved expenditures.
• Reviewing and approving all budgeted expenses and purchases originating in their department.
• Ensuring that expenditures made on behalf of the Society represent good value and a benefit to the Society and its stakeholders.

The Finance Department is responsible for:
• Ensuring that no payments are made without appropriate authorization.
  See also FN 5.04 – Cheque Issuance.

DEFINITIONS
“Petty cash” means a small amount of cash kept on hand at a work site to be used for necessary minor purchases.

“Cheque requisition” means a form requesting a cheque be prepared for payment of a company expense.

“Budget” means a financial plan outlining expected revenues, expenses and expenditures for fixed assets that is formally reviewed and approved by the Board of Directors.

REFERENCES and RELATED STATEMENTS of POLICY and PROCEDURE
SPP FN 2.02 – Petty Cash
SPP FN 2.03 – Company Credit Cards
SPP FN 5.04 – Cheque Issuance
SPP GV 3.05 – Delegation of Authorities and Authorization Procedures

PROCEDURES
Goods or Services less than $100
(a) Goods or services costing less than $100 required in the normal course of business may be paid for from petty cash (see FN 2.02 – Petty Cash).
(b) All withdrawals from petty cash and all expenditures using petty cash must be authorized by the employee’s supervisor or the supervisor’s delegate. This authorization may occur at the time that the petty cash fund is replenished.

Goods or Services greater than $100 and less than $1,000
(a) Goods or services greater than $100 and less than $1,000 required in the normal course of business may be purchased without a purchase order either through normal invoice procedures or via a cheque requisition.
(b) A cheque requisition must be completed by the employee and authorized by the employee’s supervisor.
(c) Invoices must be sent to the employee’s department and authorized for payment by the
employee’s supervisor before the Finance Department will pay the invoice.

**Goods or Services greater than $1,000**

(a) For individual goods or services costing more than **$1,000** required in the normal course of business, the purchase must be authorized by the Director, except in the case of regular predictable expenses such as rent, utilities, or remittances for employee withholdings or benefits.

(b) For purchases of a recurring nature from major suppliers, or for standing order purchases, the purchase may be authorized by Director.

**Purchase authorizations are as follows:**

(a) Any purchase with a gross value under **$500** shall be reviewed and authorized by a manager.

(b) Any purchase with a gross value greater than **$500** but less than **$1,000**, and approved in the budget shall be reviewed and authorized by a manager.

(c) Any purchase with a gross value greater than **$500**, but less than **$1,000**, and not approved in the budget shall be reviewed and authorized by the Department Head.

(d) Any purchase with a gross value greater than **$1,000** and approved in the budget shall be reviewed and authorized by the Department Head.

(e) Any purchase with a gross value greater than **$1,000** and not approved in the budget shall be reviewed and authorized by the Executive Director

**Authorization for any activity, unless specified otherwise in another policy, shall be as follows:**

(a) Any agreement that may materially affect the direction or the finances of the Society shall be reviewed and authorized by the Board of Directors. This includes, but is not restricted to:

(i) Acquisitions, or the purchase of assets with a gross value of **$50,000** or greater

(ii) Divestitures, or the sale of assets of the Society

(iii) Any contract for purchase out of the ordinary course of business

(iv) Board authorization may take the form of a motion documented in the minutes of a board meeting.

**Purchases Initiated by Management**

All purchases made on behalf of the Society must have an authorizing signature other than that of the initiator of the purchase. Where a manager or Department Head initiates a purchase, the authorization will be in accordance with the above, or the individual's direct supervisor, whichever level is higher.

**HST/GST**

In this policy, for the purpose of determining authorization and approval levels, the amount of a purchase ("gross value") excludes HST/GST and QST, but includes any other taxes or charges.

**Authorization by Board of Directors**

(a) The Board of Directors authorizes the annual expenses of the Society by approving the annual budget.

(b) For major purchases not reflected in the budget, the Board of Directors delegates’
authorization responsibility to the Executive Director. However, the Board of Directors shall be informed of major purchases that have the potential to affect the direction or financial results of the Society.
Title: Petty Cash

Category: Finance
Reference No: FIN – 3

Approved by: Executive Director
Effective Date: Apr. 23, 2010
Revised:

Big Picture

MPA has made a commitment to its members, funders and the general public to provide excellent, responsive and transparent services with a clear commitment to accountability and good governance.

A component of this accountability and good governance is ensuring the prudent and appropriate use of public monies for authorized purposes.

The organization’s policies ensure that purchases are for budgeted and approved expenditures, represent good value and benefit to the Society and its stakeholders, and are approved at an appropriate level of operational or financial authority.

Organizational Value

Responsibility / Accountability

Purpose

This Statement of Policy and Procedure outlines the circumstances under which petty cash should be used, and describes controls related to the stewardship of the petty cash funds.

Petty cash shall be used only when employees are required to make small, reasonable cash purchases on behalf of the Society. Receipts must be retained and recorded by the employee responsible for petty cash.

Scope

This policy applies to all individuals maintaining petty cash amounts, individuals accessing petty cash and the Finance Department.

Responsibility

All operating departments are responsible for:
- ensuring that expenditures made on behalf of the Society represent good value and are necessary business expenses.
The petty cash custodian is responsible for:

- Validating that the request for petty cash is for Society purposes
- Maintaining a record of all transactions affecting the amount of petty cash (see definitions “petty cash log” and “petty cash vouchers” below)

The Finance Department is responsible for:

- Ensuring that petty cash records are reconciled from time to time with actual cash on hand
- Replenishing petty cash amounts on a timely basis

Definitions

“Disbursement” is the paying out of money to an individual.

“Petty cash custodian” means the individual chosen to hold and disburse petty cash and to maintain a petty cash log.

“Petty cash log” means a record of all transactions into and out of petty cash.

“Petty cash voucher” means an invoice, cash register slip or other evidence of an amount reimbursed from petty cash.

“Reconciliation” is the process of comparing actual amounts held to the amounts that the records indicate should be there, and finding reasons for any differences.

“Overage” means the amount by which the petty cash has more than the records indicate it should.

“Shortage” means the amount by which the petty cash has less than the records indicate it should.

REFERENCES and RELATED STATEMENTS of POLICY and PROCEDURE

SPP FN 2.01 – Expense Authorization
SPP GV 5.04 – Cheque Issuance

Procedure

Petty Cash Box

(a) Petty cash should be kept in a secure location in a locked cash box.
(b) One employee—the petty cash custodian—shall keep the petty cash box key and manage the petty cash, including monthly reconciliation and refreshment of funds.
(c) In shift operations, it may be necessary to identify more than one employee as petty cash
custodian. Where there is more than one petty cash custodian, transaction logs must show the initials of the individual accessing petty cash for each transaction.

**Reimbursements from Petty Cash**

(a) For normal purchases, employees make the purchase from their own funds and keep the receipt for the purchase for reimbursement purposes.

(b) For unusual purchases, employees should obtain oral approval from their supervisor before making the purchase from their own funds as above.

(c) Employees may obtain reimbursement for expenditures from petty cash when they present their receipt to the petty cash custodian. The receipt must be initialled as approved by their supervisor and contain a simple explanation as to the nature of the expense on the back.

(d) Disbursements shall be recorded in the petty cash log and the receipts (vouchers) kept in the petty cash box until replenishment of funds.

**Disbursements and Returns to Petty Cash**

(a) In some cases, it is not possible or practical for an employee to make a purchase from her own funds. In these situations, the petty cash custodian may make an advance disbursement to the employee for the estimated amount of the required purchase.

(b) The employee estimates the required amount, and that amount is then disbursed to the employee. The nature of the requirement and the amount are recorded in the petty cash log. Both the employee and the petty cash custodian should initial the withdrawal on the log.

(c) If the petty cash custodian has any concern about the request, he or she may request the approval of the employee's supervisor before disbursement.

(d) The employee retains the receipt from the purchase and obtains initialled authorization from their supervisor. The receipt, together with the change remaining from the initial disbursement, is returned to the petty cash custodian, with a brief explanation as to the nature of the purchase on the back of the receipt.

(e) The petty cash custodian verifies that the amount of the receipt and the amount of change equals the amount initially disbursed. The original disbursement entry is reversed and the purchase entry is made in the log.

**Reconciliation and Refreshment of Petty Cash**

(a) The petty cash custodian shall perform a reconciliation of petty cash and receipts monthly.

(b) The total of all initialled receipts plus the cash remaining in the box should equal the total amount in the petty cash box at the beginning of the period.

(c) If the petty cash and receipts do not reconcile, a mistake has been made. It is the responsibility of the petty cash custodian to find the mistake and correct it.

(d) If after concerted effort, the petty cash custodian cannot find the error and still cannot reconcile, the custodian should report the overage or shortage to his or her supervisor. The supervisor may recommend that the overage or shortage be written off, with the approval of the Finance Manager.

(e) The reconciliation form, together with all of the receipts and the log for the period shall be forwarded to the Finance Department for verification of the reconciliation totals and the preparation of a replenishment cheque payable to the petty cash custodian in the amount of the total disbursements from the previous period.

(f) The petty cash log is used to record the cash balance left over from the previous reconciliation.
The replenishment cheque is cashed by the petty cash custodian, and the amount is entered into the log as a petty cash deposit.
Title: Resident Trust Funds

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<th>Category: Finance</th>
<th>Reference No: FIN – 4</th>
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<td>Approved by: Executive Director</td>
<td>Effective Date: March 31, 2015</td>
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Big Picture

MPA has made a commitment to its members, funders and the general public to provide excellent, responsive and transparent services with a clear commitment to accountability and good governance.

A component of this accountability and good governance is ensuring the prudent and appropriate use of resident trust funds for authorized purposes, and the safeguarding of these funds while in MPA’s trust.

Organizational Value

Responsibility & Accountability
Safety/Well-being, Respect

Purpose

The purpose of this Statement of Policy and Procedure is to:
- Provide a resident trust account system for residents’ personal funds for those who may wish to use this service.
- Provide guidelines for the disbursement and safeguarding of residents’ personal funds and related records.

A resident trust fund and accounting system, for any MPA location, must be approved by the Executive Director.

All receipts and disbursements of residents’ personal funds must be made through a Society bank account or an authorized trust petty cash fund.

Scope

This Statement of Policy and Procedure applies to all staff.

Responsibility

It is the responsibility of the
- Operational Directors, Managers and staff to adhere to established guidelines and ensure that resident funds are only disbursed at the authorization of the resident, that transactions are
recorded in an accurate and timely manner, and that funds are held in safekeeping.

- Executive Director to approve the guidelines for safekeeping and the establishment of a resident trust fund at any MPA location.
- Finance Department to provide guidance and support to program staff, and monitor resident trust fund accounting procedures and trust fund reconciliations.

DEFINITIONS

“Personal funds” may include funds from income or ministry sources or from a statutory benefit (ie: OAS,CPP) and any funds that are deposited by the resident or by the resident’s representative for his or her personal use.

“Trust Petty cash” means a small amount of cash kept on hand at a work site for the convenience of residents.

Procedure

Segregation of Trust funds:
(a) Resident trust petty cash funds shall be kept is a locked money box in a secured location in the work site.
(b) At no time shall resident trust petty cash funds commingle with any other funds held by the society and/or at the work site.

Records Management
(a) The Manager or designate must maintain a separate ledger for each resident for whom money is deposited to the trust petty cash fund.
(b) A resident may request a statement of accounting for their trust petty cash fund at any time.

Maximum balance
(a) The maximum balance that can be held for any resident at any time is $500.

Deposits
(a) The Manager or designate shall provide the resident or a person acting on behalf of a resident with a written receipt for all trust monies received.

Withdrawals
(a) The Manager or designate will make available to the resident, or a person acting on behalf of the resident, part or all of the monies retained in their trust petty cash account upon the resident, or person acting on behalf of the resident, signing an acknowledgement or receipt of funds.

Expenditures made on behalf of resident
(a) The Manager or designate will withdraw funds and make payment for authorized expenditures made on behalf of the resident, such as pharmacy bills, personal care and other expenditures.
(b) The withdrawal from petty cash, and payment on behalf of the resident, shall be made upon the resident, or person acting on behalf of the resident, signing an authorization to expend personal funds for the specified purpose.
(c) Original receipts for purchases made will be retained and filed with the resident’s ledger.
Reconciliations
(a) The trust petty cash account shall be reconciled monthly, no later than the 15th of the following month.
(b) The trust petty cash reconciliation shall be performed by the Manager of the site.
(c) A copy of the reconciliation shall be provided to the Finance Department no later than the 15th of the following month.
(d) The reconciliation shall include:
   i. A separate ledger sheet for each individual, indicating deposits received and authorized withdrawals and expenditures made, in the month and a running balance of trust funds retained after each transaction.
   ii. A list of the balance held for each individual at the end of the month.
   iii. A petty cash balance count at the end of each month, initialled by the Manager.
   iv. Discrepancies, if any, between the balances obtained in ii. and iii.
(e) All discrepancies must be reported to the Operational Director and Director of Finance as soon as discovered, and reviewed by the Accounting Manager to determine the source of the error.
(f) Every reconciliation must be reviewed by the Operational Director and the Director of Finance, and initialled as evidence of the review.

Monitoring
(a) Monitoring and inspection of trust petty cash fund records and cash balances may be performed by the Operational Director or accounting department at any time.

Attachments:
Trust petty cash resident ledger and monthly reconciliation form.