



Policy Title: Occupational Health and Safety Committee	Policy Type: EMPLOYMENT	Policy Number: 206.0.5
Associated References:	Date Revised: 2022-10-07	Date Approved: 2022-10-17

Intent

The Occupational Health & Safety Committee (OH&S) is a standing Committee operating in compliance with applicable legislation.

Representatives of OH&S establish terms of reference in compliance with applicable legislation (attached below).

Representatives on an OH&SC adhere to established policies and procedures concerning conduct and activities of an NSDRC Standing Committee.

NSDRC standards concerning the administration and conduct of formal Committees are captured in terms of reference. The NSDRC standards are based on generally held practises of effective Committee Management. Terms of reference allow participants or observers to determine their roles and the role of the Committee. The Occupational Health & Safety Committee meetings require terms of reference that adhere to applicable legislation.

Guidelines

- The Employer (NSDRC) must establish and maintain an OH&SC in each workplace where twenty (20) or more employees are regularly employed.
- The Committee shall be comprised of a minimum of two (2) members appointed by the Union and two (2) members appointed by the Employer. In no case will the Employer’s members outnumber those of the Union unless agreed upon by the Union.
- A Chairperson and Secretary shall be elected by as per the Collective Agreement. Where the Chairperson is an Employer member, the secretary shall be an employee member and vice versa.
- Employee representatives on a Committee must be selected from employees at the workplace according to the procedures established or agreed on by the Union and who do not exercise managerial functions at the workplace.


File Name: 206.0.5 Occupational Health & Safety Committee	Page: 1 of 4	Approved:
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- If employees do not make their own selection, the Employer (NSDRC) seeks out and assigns employees to act as employee representatives.
- Employer representatives on an OH&SC must be selected by the Employer from among employees who exercise managerial functions for the Employer.
- Employees who attend meetings of the Committee as representatives will be compensated at their regular rate of pay for time spent on this Committee. Where the meeting is held outside the Committee members' regular working hours, Committee members will receive straight-time pay.

Where the Committee identifies situations that may be unhealthy and/or unsafe for employees, the Committee member(s) complete a *Health and Safety Issue* and provide to the Executive Director.

- Upon receiving a formal recommendation from the Committee, the Employer has twenty-one (21) calendar days to respond back, in writing, to the Committee Chair, indicating acceptance or rejection of the recommendation.
- If it is not feasible to respond to the time allotted, the Employer provides a written reason for the delay and an indication of when the response will be made.
- The Employer has the following options of response:
 - Indicate acceptance
 - If not accepting provide reason(s) for not accepting the recommendation
- If the Employer accepts the recommendation, the Committee proceeds with the approved plan of action to remedy the identified area(s) requiring improvement.
- If the Employer rejects the recommendation, the Chair of the Committee may report the matter to WorkSafeBC, who may investigate and attempt to resolve the matter.

File Name: 206.0.5 Occupational Health & Safety Committee	Page: 2 of 4	Approved: 
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**Terms of Reference
Occupational Health and Safety Committee**

Purpose:

The NSDRC Health & Safety Committee strives to provide staff and Management with consistent information and interpretation on sound health and safety practices in the workplace.


Membership of Joint Committee:

A joint committee for the workplace must be established in accordance with the following:

- It must have at least four (4) members or, if a greater number of members is required by regulation, that greater number
- It must consist of employee representatives and Employer representatives
- At least half the members must be employee representatives
- It must have two (2) co-chairs, one selected by the employee representatives and the other selected by the Employer
- Employee representatives to include, two (2) employees from the unionized worksites and one (1) employee from the non-unionized sites, for a one-year term.
- Employer representatives to include the Director of Human Resources, Operations Manager, Administration Manager and Program Manager (Residential Services).

The Health and Safety Committee will endeavor to engage in the following actions to accomplish its mandate:


- The NSDRC Health & Safety Committee to keep employees informed of best practices concerning health and safety in the workplace.
- The Committee will discuss concerns, outcomes and engage in proactive initiatives on health and safety in the workplace.
- The Director of Human Resources to provide a report of WorkSafeBC employee claims to the Committee at each monthly meeting.
- The Committee to examine, investigate and report on injuries in the workplace to find preventative measures to potential similar types of injuries in the future.
- The Director of Human Resources to provide in January of each year, the Committee with the annual report of WorkSafeBC employee claims.

File Name: 206.0.5 Occupational Health & Safety Committee	Page: 3 of 4	Approved: 
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**NORTH SHORE DISABILITY
RESOURCE CENTRE**

- The Committee to generate an annual report of trends, preventative measures and other related information based on the annual report of WorkSafeBC employee claims.
- To create a consistent flow of information on injuries regarding the Health & Safety policies and procedures and respect the Collective Agreement.
- To share resources, materials and information between the Committee members and staff to build and establish consistency.
- To share and partake in partnership on health and safety training and education resources.
- When and where possible the NSDRC Health & Safety Committee will take a uniform approach and position on defining, interpreting and applying WorkSafeBC Regulations and Policies consistently.
- To entrust that all issues, discussions, items, information and material will be treated by the Committee members with the appropriate level of due diligence and utmost confidentiality.
- To annually participate in Occupation Health and Safety training for all committee members.

File Name: 206.0.5 Occupational Health & Safety Committee	Page: 4 of 4	Approved: 
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400.0	PRINCIPLES OF PERSON CENTRED SUPPORT	400.0
Application: All Programs	References: Policy 130.0 Code of Ethics	

POLICY:

All employees must subscribe to these principles and ensure that all services conform to these principles as they relate to the Participants.

Within a framework of person centred support the attached principles are fundamental to the philosophy of the NSDRC.

REASONS FOR POLICY:

The NSDRC's Principles of Person Centred Support provides a basis for decision making and planning.

DEFINITIONS:

Refer to Glossary of Definitions located in Sharevision for further information.


PROCEDURES:

1. All new employees review the "Principles of Person Centred Support" as part of their probationary requirements.
2. Please see "Principles of Person Centred Support" below..

Principles of Person Centred Support

The Participants:

- have the right to services that help them to live as normally as possible
- are the experts on what their needs are
- are the chief decision makers regarding their support
- will always have their needs recognized and respected
- will be encouraged to perceive the importance of their role and will be provided with tools to facilitate this role
- will be provided with opportunities to provide input and make recommendations regarding their support

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Policy Title: Conflict of Interest	Policy Type: EMPLOYMENT	Policy Number: 513.0
Associated References:	Date Revised: 2022-10-13	Date Approved: 2022-10-26

Intent

North Shore Disability Resource Centre continually strives to protect the organization from real or potential conflicts of interest, and has adopted this policy to outline procedures for avoiding and reporting various situations where a conflict of interest may arise.

Guidelines

The primary mandate of the NSDRC is to meet the identified needs of the participants and other stakeholders. Situations may arise where an employee's actions, or potential actions, conflict with this mandate.

Conflict of Interest situations include, but are not limited to, the following examples:

- being supervised by a family member, spouse/spouse equivalent or sexual partner
- be paid by an organization or an individual to provide a service similar to the one provided by the Association
- receiving service from the Association within the same program that you are working in
- acting as an advocate for a participant receiving support from the NSDRC
- working privately for a participant or families while working with the same participant through your employment with the NSDRC
- being a relative of the person you provide direct service to
- behaving in a manner that would bring the NSDRC into disrepute, or compromise the integrity of the NSDRC in the perception of the public

If any employee has reason to believe that a conflict of interest has occurred or is possible, it is their duty to report it to management.

Conflict of Interest in Hiring Practices

Family Members:

- the NSDRC shall accept applications from, and consider a member of an employee's immediate family for employment if the candidate has all the requisite qualifications.

File Name: 513.0 Conflict of Interest	Page: 1 of 3	Approved: 
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NORTH SHORE DISABILITY RESOURCE CENTRE

- An immediate family member shall not be considered for employment if by doing so, it might create a direct or indirect managerial/subordinate relationship with the family member, or if his/her employment could create a conflict of interest either real or imagined.
- For the purposes of this policy, immediate family members shall be defined as: Wife, Husband, Mother, Father, Brother, Sister, Son, Daughter, or any In-Laws.

Reporting a Conflict of Interest

Employees

Employees who believe they have witnessed a conflict of interest, or where they reasonably believe that they may be engaged in any activity which could present a conflict of interest must report the matter immediately. North Shore Disability Resource Centre must be made aware of all conflicts of interest in order to take the appropriate action. Employees are obligated to report any conflict of interest to their immediate supervisor, manager or Human Resources.

Supervisors & Managers

Supervisors and managers are directed to take all appropriate steps to prevent and stop conflicts of interest in their areas of responsibility. Any supervisor or manager who is subject to, witnesses, or is given written or verbal complaints of conflict of interest shall work to minimize or eliminate the issue at hand. In the event that this is not possible with the available resources, the supervisor / manager is required to report the conflict of interest to Human Resources.

Investigation


The NSDRC seeks to resolve claims of conflicts of interest as expediently as possible. Investigations shall be conducted and the appropriate actions taken no longer than (10) days following the filing of a complaint.

In all cases, Human Resources shall retain the findings report for or for as long as any administrative or legal action arising out of the complaint is pending.

Assurance Against Retaliation

This policy encourages employees to report any conflict of interest encountered in their employment at the NSDRC. Retaliation against the Complainant is strictly prohibited and will result in appropriate disciplinary action. Retaliation by the Respondent, or anyone acting on behalf of the Respondent, against any witness providing information about a conflict of interest report, is also strictly prohibited. Acts of retaliation include (but are not limited to) interference, coercion, threats, and restraint.

This policy will not be used to bring fraudulent or malicious complaints against employees. Any complaint made in bad faith, if demonstrated as being such through convincing evidence, will result in disciplinary action being taken against the individual lodging the fraudulent or malicious complaint.

File Name: 513.0 Conflict of Interest	Page: 2 of 3	Approved: 
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Acknowledgment and Agreement


I, (Employee Name), acknowledge that I have read and understand the Conflict of Interest Policy of North Shore Disability Resource Centre. Further, I agree to adhere to this policy and will ensure that employees working under my direction adhere to this policy. I understand that if I violate the rules/procedures outlined in this policy, I may face disciplinary action, up to and including termination of employment.

Name: _____

Signature: _____

Date: _____

Witness: _____

File Name: 513.0 Conflict of Interest	Page: 3 of 3	Approved: 
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**NORTH SHORE DISABILITY
RESOURCE CENTRE**

Policy Title: Social Media Policy	Policy Type: EMPLOYMENT	Policy Number: 522.0
Associated References: 541.0 Prevention of Abuse of Participants 543.0 Communication Systems 545.0 Confidentiality of Information	Date Revised: 2022-05-31	Date Approved: 2022-10-03

Intent

The North Shore Disability Resource Centre (NSDRC) has adopted this policy to provide all employees with guidelines regarding the appropriate use of the organization’s social media accounts. Employees are expected to follow these guidelines whether their use of organization social media happens on organization time, property, and devices or not.

Definitions

Imposter account: Social media accounts that mimic a corporate or brand identity but are not authorized to do so. They often pose as a business to scam that business’s customers.

Influencer: A social media (or other online platform) personality. They work with companies to conduct brand deals for which they may receive a free product, service, commission, or other incentive.

Guidelines

The organization is active on several social media platforms, including:

- Instagram, Facebook, Twitter, LinkedIn

Authorized employees have access to log into, publish and post on, repost and share from, and answer direct messages from one or more of these social media accounts. These employees inherently represent the organization and should be prudent and conscientious when using organization social media accounts. To meet the organization’s standards for consistency, integrity, and professionalism, employees must abide by these guidelines when using organization social media accounts.

Please note: Use of organization social media accounts must not conflict with any existing policies of the organization. The organization reserves the right to revoke or modify access to social media accounts as it deems necessary.

File Name: 522.0 522.0 Social Media Policy	Page: 1 of 4	Approved: 
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Publishing on Organization Social Media Accounts

Employees should only write, post, comment, or otherwise publish positive information about the organization, its products and services, and its reputation. The purpose of the organization’s social media presence is to promote who we are and what we do in the most useful, accessible, and positive way.

Employees may not disclose confidential or proprietary information on any corporate social media accounts. The disclosure of confidential or proprietary information without prior written authorization from management may result in immediate discipline or termination.

Employees are accountable for what they share or imply on any NSDRC social media accounts. Inflammatory, discriminatory, harassing, disparaging, or otherwise negative statements, language, or posts are not permitted.

Employees must respect copyright laws and never post copy, images, or videos created by another artist or business without proper attribution and authorization. Employees must also properly attribute or cite any research or other evidence to the right source. If employees have questions about plagiarism or copyright law, they should contact the Communications Manager

Social media is not a substitute for inter-organization communications. Internal communication should be transmitted through authorized corporate channels, including e-mail, meetings, zoom and Sharevision), and not through social media outlets.

Responding to Comments and Direct Messages

Social media is not a substitute for customer service. Employees can help customers on social media by referring customers to the Communications Manager, but they should not try to solve customer problems or complaints through social media.

Employees must not engage in discussions about competitors’ products, legal issues in which the organization is involved, or government issues related to the organization or our industry without advance written approval from management.

Employees should always carefully consider what to post in response to an argumentative or accusatory post or comment. Employees should escalate customer complaints or arguments on social media to management as they would in-person customer interactions. If employees have any questions how to respond to a particular post or comment, they should seek guidance from Communications Manager

File Name: 522.0 522.0 Social Media Policy	Page: 2 of 4	Approved: 
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before posting. Always adopt a positive tone when responding to comments on corporate social media posts or direct messages.

Organization Photography

Employees must acquire consent from an employee before posting any photographs of them on any corporate social media accounts.

Images used in social media posts should roughly represent Canadian demographics. Illustrative materials should reflect the diversity of the Canadian population across as many dimensions as possible.

Security

Employees must exercise all cybersecurity best practices when using corporate social media. For example, employees should avoid:


- Clicking links or downloading content from unknown sources sent in a direct message or otherwise;
 - Sharing account passwords with unauthorized employees, customers, or third parties;
 - Connecting social media accounts to other third-party apps;
 - Using organization social media accounts on unauthorized devices, such as personal devices;
 - Leaving devices that are signed into organization social media accounts unlocked or unattended;
 - Participating in quizzes or challenges on social media that ask for personal information;
 - Not updating software and devices for optimal security;
 - Participating in phishing schemes by offering personal or confidential organization information;
- or
- Changing established privacy settings unless authorized to do so by management.

This is not an exhaustive list.

If an employee detects a breach in security, they must report it to the information technologies (IT) department immediately.

Reporting

To protect the mission, integrity, and reputation of the organization, employees must report the following to the Program Director and Compunet.

File Name: 522.0 522.0 Social Media Policy	Page: 3 of 4	Approved: 
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- The discovery of any social media account that employees or non-employees have created to discuss the organization, its products, or services;
- Influencers seeking brand deals (subject to approval from management);
- Cybersecurity threats, phishing schemes, or malware detection;
- Known imposter accounts;
- Instances of employees using organization social media in any way that does not follow the guidelines outlined in this policy; and
- A lost, stolen, or otherwise compromised device that has been used to access the organization social media accounts.

Disciplinary Action and Termination

The organization reserves the right to revoke or modify access to corporate social media accounts without notice if it suspects an employee of misconduct. If there is evidence to sustain any complaints against an employee’s misconduct in regard to using organization social media, that employee will be subject to progressive disciplinary action up to and including termination.

If the employment relationship is terminated, regardless of reason, the employee will immediately lose all access to organization social media accounts. The employee will also no longer act represent the organization online and will not be authorized to post online as such, whether on a personal account or otherwise. The employee will also lose the rights to use any organization branding or materials.

Acknowledgement and Agreement

I, (**employee name**), acknowledge that I have read and understand the Organization Social Media Policy of North Shore Disability Resource Centre. I agree to adhere to this policy and will ensure that employees working under my direction adhere to this policy. I understand that if I violate the rules set forth by this policy, I may face disciplinary action up to and including termination of employment.

Name: _____

Signature: _____

Date: _____

Witness: _____

<p>File Name: 522.0 522.0 Social Media Policy</p>	<p>Page: 4 of 4</p>	<p>Approved: <i>Janice Kiddle</i></p>
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Policy Title: Workplace Bullying, Harassment, Violence, Discrimination or Improper Activity or Behaviour in the Workplace	Policy Type: OPERATIONAL (Employment)	Policy Number: 528.0
Associated Policy, Procedure, or Reference: BC Human Rights Workers Compensation Act of British Columbia Collective Agreement	Date Revised: 2022-01-20	Date Approved: 2022-07-26

Intent

The North Shore Disability Resource Centre (NSDRC) is dedicated to ensuring that employees can complete their duties in a safe environment, without fear of bullying, harassment, violence, discrimination, or improper activity or behaviour. As such, the NSDRC will not tolerate any instances of bullying, harassment, violence, discrimination, or improper activity or behaviour in the workplace. All employees are responsible for contributing to a safe and welcoming place to work and are required to report incidents, whether the target or witness. In all cases where a complaint of bullying, harassment, violence, discrimination, or improper activity or behaviour is made in good faith, the employee will not be disciplined or retaliated against in any way.

This policy is not intended to stop free speech or interfere with everyday interactions. Bullying, harassment, violence, discrimination, and improper activity or behaviour can often be distinguished from normal, mutually acceptable socializing. However, what one person finds offensive, others may not. It is important to remember that the receiver’s perception of the potentially offensive message determines whether something is acceptable or not. This includes spoken messages or comments, gestures, pictures, or other forms of communication which may be deemed objectionable or unwelcome.

Note: This policy is written in compliance with the *Workers Compensation Act* and *Occupational Health and Safety Regulation* of British Columbia.

Definitions

Bullying and harassment: Any inappropriate conduct or comment by an individual towards an employee that caused or has the potential to cause that employee to be humiliated or intimidated.

Bullying and harassing behaviours include but are not limited to:

- Verbal aggression or yelling;
- Humiliating actions or practices;
- Hazing;
- Spreading malicious rumours; or

File Name: 528.0 Workplace Bullying and Harassment	Page: 1 of 10	Approved:
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- Using derogatory names towards someone.

Bullying and harassing behaviours do not include:

- Expressing differences of opinions;
- Offering constructive feedback, guidance, or work-related advice about behaviour; or
- Reasonable action taken by the NSDRC or a supervisor relating to management and direction of employees or the place of employment (for example, counselling, managing a worker's performance, taking reasonable disciplinary actions, assigning work, implementing disciplinary actions).

Cyberbullying: Bullying that occurs through the use of electronic communication, including e-mail, text messaging, and social networking. Incidents of cyberbullying should be reported and will be investigated in accordance with the procedures outlined within this policy.

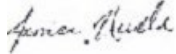
Workplace violence: The attempted or actual exercise of any physical force by a person intended to cause injury to a worker, including any threatening statement or behaviour which gives a worker reasonable cause to believe they are at risk of injury.

Violence could include, but is not limited to:

- Physical acts (for example, hitting, shoving, pushing, kicking, sexual assault);
- Any threat, behaviour, or action which is interpreted to carry the potential to harm or endanger the safety of others, result in an act of aggression, or destroy or damage property; or
- Disruptive behaviour that is not appropriate to the work environment (for example, yelling or swearing).

Discrimination: When someone is treated differently or poorly, or denied a benefit because of one of the following characteristics:

- Race;
- Colour;
- Ancestry;
- Place of origin;
- Political belief;
- Religion;
- Family or marital status;
- Physical or mental disability;
- Sex;
- Sexual orientation;
- Age;
- Conviction of a criminal or summary conviction offence that is unrelated to the employment or to the intended employment of that person;

File Name: 528.0 Workplace Bullying and Harassment	Page: 2 of 10	Approved: 
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- Gender identity; or
- Gender expression.

Improper activity or behaviour:

- The attempted or actual exercise by a worker towards another worker of any physical force so as to cause injury, and includes any threatening statement or behaviour which gives the worker reasonable cause to believe they are at risk of injury; and
- Horseplay, practical jokes, unnecessary running or jumping or similar conduct.

Application of This Policy

This policy applies to all individuals working for the NSDRC, including permanent and temporary employees, contract service providers, contractors, supervisory personnel, managers, officers, and directors.

North Shore Disability Resource Centre will not tolerate any form of bullying, harassment, violence, discrimination, or improper activity or behaviour against job candidates or employees on any grounds mentioned above during the hiring process or employment. This commitment applies to all employment practices and working conditions, which includes training, performance reviews, promotions, transfers, layoffs, and remuneration.

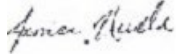
For the purposes of this policy, bullying, harassment, violence, discrimination, and improper activity or behaviour can occur:

- At the workplace;
- At employment-related social functions;
- In the course of work assignments outside the workplace;
- During work-related travel;
- Over the telephone, if the conversation is work-related; or
- Elsewhere, if the person is there as a result of work-related responsibilities or a work-related relationship.

Guidelines

North Shore Disability Resource Centre believes that employees have the right to work without fear of bullying, harassment, violence, discrimination, or improper activity or behaviour. These incidents can cause some or all of the following detrimental effects:

- Increased absenteeism due to disturbed sleep patterns, or a fear of going to work;
- A lack of productivity due to reduced concentration, confidence, or morale;
- An increase in turnover as employees no longer want to work in the same place as the person who is bullying or harassing them;
- An increased likelihood of illness or injury due to stress;
- Harmful eating (for example, a loss of appetite, or overeating or bingeing);

File Name: 528.0 Workplace Bullying and Harassment	Page: 3 of 10	Approved: 
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- Psychological effects that turn into physical symptoms (for example, psychosomatic stomach pains or headaches);
- Substance dependency issues (increased use of alcohol or drugs);
- Feelings of shock, anger, frustration, or vulnerability;
- Panic or anxiety; and
- Clinical depression (and possible suicidal thoughts).

Risk Assessment

The NSDRC will conduct a risk assessment of the work environment to identify any issues related to potential violence, bullying, harassment, violence, discrimination, or improper activity or behaviour and will institute measures to control any identified risks to employee safety. This information will be provided to the health and safety committee or representative.

The risk assessment will include the consideration of previous experience in that workplace, occupational experience in similar workplaces, and the location and circumstances in which work will take place.

The risk assessment will include a review of records and reports, such as security reports, employee incident reports, staff perception surveys, health and safety inspection reports, first aid records, or other related records. A workplace audit will be conducted that considers risks that are common to similar types of workplaces, risks that are specific to the NSDRC's workplace, and any other elements that have associated risk factors.

The NSDRC recognizes that domestic violence is a serious issue that employees may face. Domestic violence that occurs outside of the workplace and beyond an employee's assigned work duties is not considered workplace violence; however, if domestic violence occurs within our workplace, the NSDRC has a duty to respond. If an incident of domestic violence occurs, the NSDRC is committed to assessing the risk that it may pose to employees.

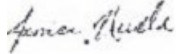
The NSDRC will communicate information relating to a person with a history of violence where:

- Workers may reasonably be expected to come into contact with the person in the performance of their job duties; and
- There is a potential risk of workplace violence as a result of interactions with the person with a history of violence.

The NSDRC will only disclose personal information that is deemed reasonably necessary to protect the worker from physical harm.

Seeking Immediate Assistance

Canada's Criminal Code deals with matters such as violent acts, threats, and behaviours. The police should be contacted immediately when an act of violence has occurred in the workplace or when someone in the workplace is threatened with violence. If an employee feels threatened

File Name: 528.0 Workplace Bullying and Harassment	Page: 4 of 10	Approved: 
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by a co-worker, volunteer, contractor, student, vendor, visitor, client, or customer, then an immediate call to “9-1-1” is required.

Responsibilities

The NSDRC will:

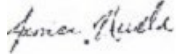
- Not engage in any form of bullying, harassment, violence, discrimination, or improper activity or behaviour;
- Develop and maintain policy statements on bullying, harassment, and violence;
- Take steps to prevent and minimize bullying, harassment, violence, discrimination, and improper activity or behaviour;
- Develop, implement, and maintain procedures for reporting incidents and complaints, including alternative reporting mechanisms where an alleged harasser is an employee’s manager;
- Develop, implement, and maintain procedures for investigating incidents and complaints;
- Ensure supervisors and employees are aware of steps to prevent bullying, harassment, violence, discrimination, and improper activity or behaviour in the workplace;
- Ensure employees and supervisors are properly trained in recognizing the potential for bullying, harassment, violence, discrimination, and improper activity or behaviour;
- Ensure supervisors and employees are aware of how to respond to incidents, and procedures for reporting; and
- Review this policy and procedures annually.

Supervisors will:

- Not engage in bullying, harassment, violence, discrimination, or improper activity or behaviour of any kind;
- Comply with NSDRC policies and procedures regarding bullying, harassment, violence, discrimination, and improper activity or behaviour;
- Ensure employees adherence to policies and procedures regarding bullying, harassment, violence, discrimination, and improper activity or behaviour;
- Promote a respectful and safe working environment;
- Investigate complaints of bullying, harassment, violence, discrimination, and improper activity or behaviour promptly and impartially;
- Maintain a confidential file for complaints of harassment, bullying, violence, discrimination, and improper activity or behaviour investigations completed, and actions taken;
- Report the incident to police where appropriate; and
- Apply appropriate disciplinary action where appropriate.

Employees will:

- Treat others with respect, and contribute to a respectful and safe work environment;

File Name: 528.0 Workplace Bullying and Harassment	Page: 5 of 10	Approved: 
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- Report all acts of bullying, harassment, violence, discrimination, and improper activity or behaviour to management; and
- Comply with NSDRC policies and procedures regarding workplace bullying, harassment, violence, discrimination, and improper activity or behaviour.

Witnessing Bullying, Harassment, Violence, Discrimination, or Improper Activity or Behaviour

It is the responsibility of all employees of North Shore Disability Resource Centre to promote a respectful and productive workplace. When employees do not speak up about the presence of bullying, harassment, violence, discrimination, or improper activity or behaviour, the employees tacitly condone the actions, and such actions may become more widespread.

Any employee who witnesses bullying, harassment, violence, discrimination, or improper activity or behaviour is directed to:

- Offer the person support and inform them that you witnessed the incident.
- Encourage the person to come forward and let them know that you will be a witness and provide a statement in the event of an investigation.
- In some cases, where the person decides to confront the individual informally, you may be asked to be a witness to the conversation (or as support).
- Where the person does not wish to make a complaint, it is still important that management is aware of the bullying, harassment, discrimination, violent act, or improper activity or behaviour taking place in the workplace. Tell your manager or a member of human resources what you witnessed so that this type of behaviour can be eliminated.

Reporting Bullying, Harassment, Violence, Discrimination, or Improper Activity or Behaviour

Informal:

If you are being bullied or harassed, or have been a victim of violence, discrimination, or improper activity or behaviour:

- Immediately inform the person perpetrating the actions that their actions are unacceptable to you.
- Describe the specific actions that they took that caused you to feel uncomfortable. When confronted, in many instances, the person will stop. Sometimes a person is unaware that they are acting unacceptably. This may also prevent the act from escalating and possibly becoming dangerous.
- It is important to keep a record of dates and times where you have spoken to the person who has committed the act of bullying, harassment, violence, discrimination, or improper activity or behaviour and inform your manager or supervisor or human resources of what occurred.

If the actions continue, employees should use the formal reporting process.

File Name: 528.0 Workplace Bullying and Harassment	Page: 6 of 10	Approved:
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Formal:

If bullying, harassment, violence, discrimination, or improper activity or behaviour either continues to occur after a conversation with the individual, or is extreme or dangerous in nature, employees must report it immediately.

Process:

- Speak with your supervisor or manager or with human resources and report the incident.
- If your supervisor or manager is the cause of the concern, speak with another member of management to report the incident.
- Write out a statement detailing the incidents including: the names of the parties involved; any witnesses to the incident; the location, date, and time of the incident; details about the incident (behaviour or words used); and any additional details that would help with an investigation.
- An investigation will be initiated.
- Where it is determined that the person has breached the law, the appropriate authorities will be contacted.
- All complaints will be taken seriously and investigated fairly.
- Employees who submit a report or complaint of bullying, harassment, violence, discrimination, or improper activity or behaviour will not be subject to any form of reprisal or retaliation as a result of the complaint.

Employees should be aware that the NSDRC does not support any retaliation even where the complainant has not used any of the reporting mechanisms.

Investigating Reports of Bullying, Harassment, Violence, Discrimination, or Improper Activity or Behaviour

Once a written complaint has been received, the NSDRC will complete a thorough investigation. The investigation will begin immediately after receiving the complaint. Bullying, harassment, violence, discrimination, and improper activity or behaviour will not be ignored. Silence can be, and often is, interpreted as acceptance. The investigation will be conducted in a timely manner.

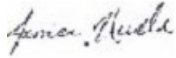
For the purposes of this section, the following definitions apply:

Complainant: The person who has made a complaint about another individual whom they believe has bullied or harassed them, or committed an act of violence, discrimination, or improper activity or behaviour against them.

Respondent: The person whom another individual has accused of committing an act of bullying, harassment, violence, discrimination, or improper activity or behaviour.

The investigation will include:

- Informing the respondent of the complaint;

File Name: 528.0 Workplace Bullying and Harassment	Page: 7 of 10	Approved: 
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NORTH SHORE DISABILITY RESOURCE CENTRE

- Interviewing the complainant, any person involved in the incident, and any identified witnesses.
- Interviewing any other person who may have knowledge of the incidents related to the complaint or any other similar incidents.

A copy of the complaint, detailing the complainant's allegations, will then be provided to the respondent.

- The respondent is invited to reply in writing to the complainant's allegations, and the reply will be made known to the complainant before the case proceeds further.
- The NSDRC will do its best to protect from unnecessary disclosure the details of the incident being investigated and the identities of the complaining party and alleged respondent.
- During the investigation, the complainant and the respondent will be interviewed, as will any possible witnesses. Statements from all parties involved will be taken and a decision will be made.
- Where it is determined that harassment has occurred, a written report of the remedial action will be given to the employees concerned.

All documents related to the formal investigation will be maintained in a sealed envelope within a locked cabinet.

Disciplinary Actions

If the findings of the investigation indicate that a violation of this policy has occurred, immediate and appropriate disciplinary action, up to and including dismissal, will be administered. Other corrective actions may include an employee transfer (where the complainant desires the transfer, it will be provided to them but in all other cases, the respondent will be transferred). In addition, the NSDRC will monitor the situation between the employees to ensure that the action does not reoccur. Corrective actions will be proportional to the severity or frequency of the offence.

Appeal Process

If the complainant or respondent feel that the process has failed at some point, or that the corrective action is not consistent with the incident that led to the original complaint, they can appeal the final decision or outcome. The employee must complete a written complaint form and submit it to senior management. The form should include all of the reasons why the employee did not feel that the process was equitable. Where necessary, further investigation will be initiated.

Fraudulent or Malicious Complaints

This policy must never be used to bring fraudulent or malicious complaints against employees. It is important to realize that unfounded or frivolous allegations of bullying, harassment, violence,

File Name: 528.0 Workplace Bullying and Harassment	Page: 8 of 10	Approved:
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discrimination, or improper activity or behaviour may cause both the respondent and the NSDRC significant damage. If the NSDRC determines that any employee has knowingly made false statements regarding an allegation of bullying, harassment, violence, discrimination, or improper activity or behaviour, immediate disciplinary action will be taken. As with any case of dishonesty, disciplinary action may include immediate dismissal without further notice.

Confidentiality

North Shore Disability Resource Centre will attempt, in all cases, to maintain the confidentiality of the complainant and respondent. While it is not always possible to do so when soliciting witness statements, the NSDRC will not release any information to other employees which would jeopardize the confidentiality of the parties involved. Where it is determined that legislation or law was contravened, the NSDRC will supply any and all evidence to the authorities as necessary, in accordance with applicable legislation.

Providing Support

North Shore Disability Resource Centre is committed to the wellbeing of all employees. Where there has been an incident of bullying, harassment, violence, discrimination, or improper activity or behaviour, the NSDRC will ensure that the necessary support is provided to employees. Employees who feel adverse symptoms as a result of an incident are encouraged to speak with human resources or another member of management so necessary support can be provided.

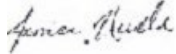
Training

North Shore Disability Resource Centre will provide training on this policy, ensuring that:

- Employees understand the contents of the policy;
- Employees, supervisors, and managers recognize bullying and harassment in the workplace;
- Employees know how they can respond to and report incidents of bullying, harassment, violence, discrimination, and improper activity or behaviour;
- Employees understand how the NSDRC will respond to and investigate reports of bullying, harassment, violence, discrimination, and improper activity or behaviour;
- Supervisors and managers are adequately trained on how to respond to and investigate reports of bullying, harassment, violence, discrimination, and improper activity or behaviour; and
- Supervisors and managers are adequately trained on how to provide support for employees who may suffer from adverse symptoms as a result of bullying, harassment, violence, discrimination, or improper activity or behaviour.

Policy Review

North Shore Disability Resource Centre will review the contents of this policy annually, or sooner, in the event of any incident occurring, or when there are legislative changes related to

File Name: 528.0 Workplace Bullying and Harassment	Page: 9 of 10	Approved: 
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bullying, harassment, violence, discrimination, or improper activity or behaviour in the workplace.

Acknowledgement and Agreement

I, _____, acknowledge that I have read and understand the Workplace Bullying, Harassment, Violence, Discrimination, and Improper Activity or Behaviour Policy of North Shore Disability Resource Centre. I agree to adhere to this policy and will ensure that employees working under my direction adhere to this policy. I understand that if I violate the rules set forth by this policy, I may face disciplinary action up to and including termination of employment.

Name: _____

Signature: _____

Date: _____

Witness Signature: _____

Witness Name: _____

File Name: 528.0 Workplace Bullying and Harassment	Page: 10 of 10	Approved: <i>Anna Huelke</i>
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Policy Title: Performance Management Policy	Policy Type: Employment	Policy Number: 533.0
Associated Policy, Procedure, or Reference:	Date Revised: 2022-01-20	Date Approved: 2022-10-18

Intent

The NSDRC (NSDRC) has adopted this policy to ensure that all staff members are provided with accurate and appropriate feedback regarding their performance within the organization. By utilizing a performance management system NSDRC will work with its employees to ensure organizational objectives are met through the achievement of individual performance goals and objectives.

All employees and management staff will be subject to annual performance reviews. Performance reviews will be benchmarked against previously determined goals and objectives for the position.

The NSDRC values its workforce and will endeavour to aid in employee achievement of professional goals and objectives. Performance management will be utilized as a tool to help ensure the alignment of individual performance goals with that of the strategic direction of the organization through the use of collaborative performance planning, coaching and feedback, and yearly performance reviews.

NSDRC requires that all employees and supervisors take part in the performance management process with records of individual performance plans and reviews to be discussed and kept on file for each staff member.

The Performance Management Process

Performance management is on-going and cyclical in nature with the process being broken down into three interrelated phases of planning, coaching/feedback and review.

Planning

NSDRC supervisors will review each of their employee's job duties and requirements in order to identify key areas of responsibility. Areas of responsibility will be utilized to aid the supervisor in creating individual performance plans for each employee.

Each employee will have a performance plan created for them within designated timeframes based upon prior performance, length of time with the organization, length of time with the department, and recent promotions or significant changes in duties and responsibilities.

Each Performance Plan will include the following information:

File Name: 533.0 Performance Management Policy	Page: 1 of 4	Approved: 
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NORTH SHORE DISABILITY RESOURCE CENTRE

- A set of specific goals and objectives for achieving the requirements of the job.
- An action plan or outline of how these goals or objectives will be met; this may include plans for training and development.
- A time-frame for when goals or objectives should be met by the employee.
- Additional comments and areas of concern or anticipated restraints.

The performance plan will be reviewed by the employee with their supervisor to discuss the goals and objectives that have been established. The performance plan will be utilized to not only establish performance objectives but will also act as a tool for which actual performance can be measured against.

The performance plan must be signed by both the supervisor and the employee following a discussion of its contents with a copy of the plan being kept on the employee's file. These plans are changeable and can be amended throughout the course of the performance review period.

Coaching and Feedback

Coaching will be continually utilized by supervisors throughout the performance review period. The coaching period will consist of informal and formal feedback being provided to the employee directly pertaining to the progress of the individual towards their established goals and objectives.

Formal feedback sessions will be scheduled for each employee at the mid-point range of the performance review period, or as required based upon the individual's performance and length of time with the organization and within the department. The formal feedback session is conducted to allow for discussion of the employee's progression towards the established goals and objectives. At this point performance concerns may be formally addressed and documented and the performance plan may be formally altered.

Review

At the conclusion of the performance review period all supervisors will be required to schedule time with each of their employees to conduct a year end or period ending performance review. Prior to the scheduled performance review meeting supervisors will complete a performance review for each employee based upon the individual's established goals and objectives. The employee will be given the opportunity to review the performance review and add any additional comments they feel necessary.

The performance review meeting will consist of:

- A full review and discussion of the individual's performance in the review period based upon the goals and objectives established in the performance plan.
- A full review and discussion of the individual's performance review.
- The establishment or amendment of the employee's performance plan for the upcoming performance review period.

Both the employee and the supervisor will be required to sign and date the newly created performance plan with a copy being kept on the employee's file.

File Name: 533.0 Performance Management Policy	Page: 2 of 4	Approved: 
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Performance plans developed for members of the CHIP and CBS program management team, the employee, the program director and the head of Human Resources will be required to sign and date the newly created performance plan with a copy being kept on the employee's file.

Timelines for Performance Management Administration

The following timelines should be adhered to when administering employee performance plans and feedback meetings:

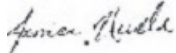
- Performance plans should be created or updated yearly and at the end of the performance review period for each employee who is no longer considered probationary and is not exhibiting any performance problems. Employees in this category must also have at least one formal feedback meeting with their supervisor, or as deemed necessary by the incumbent's supervisor.
- New, probationary employees should have a performance plan created for them within their first month of employment. A formal review should be held at the end of the probationary period or earlier if the employee is exhibiting performance problems. Human Resources must be alerted to any concerns within a month of the end of the probationary time by the program manager or director.
- Employees who have been promoted, have changed departments, or have had their duties or responsibilities significantly changed should have a performance plan created within the first week of their new position. A formal feedback meeting should be scheduled within the first three months so that performance and progression towards established goals and objectives may be assessed within the new role.

NSDRC

- Will provide a performance management process is fair and transparent.
- In conjunction with Human Resources, provide the tools and forms necessary to facilitate the performance management process.
- Provide training and guidance to supervisors and employees on the performance management process.

Supervisors (Managers/Directors)

- Will work with their employees to ensure fair and attainable performance goals and objectives are established.
- Must create performance plans for their employees within the specified timeframes.
- Provide ongoing feedback to employees in the form of coaching and formal feedback meetings.
- Accurately report and document performance observations.
- Conduct performance reviews utilizing performance review forms and conducting review meetings.
- Will utilize the proper forms and documentation provided by NSDRC in order to facilitate the performance management process.
- Attend performance management training as required.

File Name: 533.0 Performance Management Policy	Page: 3 of 4	Approved: 
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Employees

- Work with direct supervisors to provide input in the creation of individual employee performance plans and reviews.
- Complete and submit required performance review forms within the specified time period and to the appropriate party.
- Attend performance management training as required.

Grievance Process

Employees who feel they have been subject to an unfair performance review or who believe their performance plans to be out of the scope of their normal duties and responsibilities should forward a request for review to NSDRC's Human Resources Department.

Upon receiving a request, the issue will be looked into and if necessary, a formal investigation will be conducted which could include a formal review of any performance management forms submitted, review of previous performance plans and reviews, interviews with the employee and the supervisor and an investigation into current and past performance.

Confidentiality

All information including performance management forms and discussions in performance management meetings will be kept strictly confidential. All forms utilized for the performance management process will be signed and kept on the employee's file.

File Name: 533.0 Performance Management Policy	Page: 4 of 4	Approved: 
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543.0.4	SHAREVISION	543.0.4
Application: All Employees	References: Policy 209.0 Confidentiality of Information Policy 209.0.1 Freedom of Information Policy 209.0.2 Electronic Records Management Policy 209.0.3 Participants Confidentiality Policy 209.0.4 Employee Confidentiality Policy 543.0 Communication Systems Policy 859.0 Record Keeping - Participants	

POLICY:

ShareVision is a person centered information software employee’s use to record work related information using Internet Explorer as the preferred internet browser.

ShareVision user accounts are managed through ShareVision security and ShareVision permissions by the designate employee.

The NSDRC provides the necessary computer hardware and support at all Program sites.

Employees, working in offsite locations, use remote location access.

All employees have a ShareVision account and log into the ShareVision site with their user ID and password.

New employees receive from the Administrative Assistant and the Program Manager, the required training and support needed to access and use the NSDRC’s ShareVision site.

Employees are responsible for safeguarding their personal ShareVision password. Using another employee’s user name to log into the ShareVision site is strictly forbidden.

In the event that the internet is not accessible, employees are authorized to complete required records using hard copy forms or templates available at the program sites.

As soon as possible the written records are entered into the ShareVision site as directed by the Program Manager.

Employees respect the confidentiality of information pertaining to participants, their support networks and other employees on ShareVision.

Use of ShareVision is consistent with the NSDRC’s professional reputation, standards, policies and procedures.

REASONS FOR POLICY:

ShareVision is becoming the NSDRC’s primary communication strategy, tool set and methodology for creating, managing and distributing information, and for connecting the participants with information. Clear policies and procedures, training and support are necessary to ensure employees conform to the NSDRC’s standards and practices as ShareVision users.

DEFINITIONS: Refer to Glossary of Definitions located in Volume 1 Association Structure and Supports for further information.

543.0.4	SHAREVISION	543.0.4
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PROCEDURES:

1. Designated Administration employees manage ShareVision user accounts permissions. Changes to an employee's program site will result in changes to the employee's permission group(s).
2. Upon hire of a new employee, the designated Administration employee creates a new ShareVision user account, temporary password and applies the appropriate ShareVision permissions relevant to the employee's program site.
3. New employees by the Administrative Assistants an orientation to ShareVision and are trained at their program sites by the Program Manager on how to navigate within ShareVision using a variety of resources (training modules housed on ShareVision, etc.).
4. On the first day of orientation to ShareVision the new employee changes their temporary password to a password of their choice.
5. At applicable Program sites, an employee logs into ShareVision at the start of the work day and verifies they have read all current communication log entries by first selecting the "Initial Log" page link and checking the "Initial" box to the left of each communication entry.
6. An employee working from remote sites log into the NSDRC ShareVision site and initial communication log entries as directed by Program Manager.
7. An employee logs off the NSDRC's ShareVision site when leaving the computer and logs on as many times as necessary in the course of a working day, to record or read information in ShareVision.
8. An employee uses the lists and communications systems in ShareVision as directed by their Program Manager.
9. In the event of the internet going down at a program site, as a first step an employee refers to: "**TROUBLE SHOOTING GUIDELINES FOR THE INTERNET**" as posted at program sites.
10. If an employee is not able to resolve the internet connection, the employee contacts the Program Manager and uses hard copy forms to complete their records. Hard copy forms are available at each program site. Employees complete an Internal Incident Report (NSDRC) located on the ShareVision program site page when the internet connection is restored.
11. An employee inputs hard copy records into ShareVision as directed by the Program Manager.
12. In an emergency situation, an employee located at Residential Services program sites, contacts the Program Manager in person or by cellular phone. On weekends and statutory holidays, contact the On Call Program Manager is contacted via cell at **604-831-9179**. In an emergency situation, A Community Based Services' employee will contact their designated Program Manager by phone or email.
13. Upon termination of employment the Administrative Assistants (CBS and Residential Services) delete the employee's user account from the NSDRC's ShareVision collection site.
14. Please refer to **Program Policy 859.0 Record Keeping - Participants** for more information.

563.2	CALL-IN PROCEDURES AND LIST	563.2
Application: Bargaining Unit Members		References: Calling List Form 563.2A Telephone Log Form 563.2B Collective Agreement

POLICY:

Call-in of regular and casual employees is required to cover employee absences due to sick leave, vacation, special leave, or augment employees during peak periods where regular employees, have not requested additional hours.

Call-in is done in a manner that is fair and equitable and in accordance with the Collective Agreement.

REASON FOR POLICY:

These call-in procedures provide documentation of the efforts to fill shifts.

DEFINITIONS: Refer to Glossary of Definitions in ShareVision.

PROCEDURES:

1. During their regular hours of work, the Program Manager or their designate is responsible for calling in employees to cover employee absences.
2. Regular employees, that have requested additional hours, are listed at the top of the **Calling List Form 563.2A** in order of seniority.
3. The calling process begins at the top of the **Calling List Form 563.2A** located at each program worksite. Ensure availability is appropriate.
4. If an employee refuses the shift or there is no answer (e.g. no voicemail or person answers), proceed to the next employee on the list.
5. If an answering device or a person other than the employee being called picks up the call, leave a message. Include day, date and time of shift and the time of the call. Request that the employee call back within **5 minutes** of the call. Wait **5 minutes** prior to calling the next employee on the list.
6. If the employee's line is busy, wait **2 minutes** prior to calling them again. If the line is still busy or there is no answer, move onto the next employee on the list.
7. When all efforts to find coverage for an available shift have been exhausted or filling an available shift will result in overtime, the employee making the calls *must advise, immediately*, the Program Manager or, if on the weekend, the On-Call Program Manager.
8. All calls are to be documented on a **Telephone Log Form 563.2B**, using the codes listed at the bottom of the form. One **Telephone Log Form 563.2B** is used for each shift that is being filled.

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**North Shore Disability Resource Centre Association
Employment Policies and Procedures**

Reviewed: October 25, 2019

564.2	CALL IN LIST MAINTENANCE	564.2
Application: Bargaining Unit Members		References: Collective Agreement 563.2 Call-In Procedures & List 566.2 Shift Schedules

POLICY:

The manner in which the Call In List is maintained is a Management function and right.

Regular employees requesting additional hours receive priority for shift opportunities.

An employee on probation must maintain their availability provided upon hire for a minimum of six (6) months.

Any change to a post probation employee’s availability must continue to meet the minimum requirements for availability. Employees can only change their availability a maximum of every two (2) months unless the change increases the employee’s availability.

An employee is entitled to request two (2) weeks of unpaid vacation time *outside* of peak periods. Consideration for unpaid vacation time off within peak periods may be granted based on program requirements. (Peak Periods are periods including July 1st to September 15th; December 15th to January 15th; and March 15th to April 15th.)

An employee’s availability applies to all worksites where the employee has been trained. A cannot choose which worksite they are available for.

For **Residential Services** only - The employee must meet the minimum requirements for availability. The “minimum requirements” of availability includes one weekend shift and one overnight shift (if part of the program) plus two other shifts for a total of four (4) shifts per week. If an overnight shift is not required, you must still meet the minimum requirements of four (4) available shifts per week which still includes being available for one weekend shift.


REASONS FOR POLICY:

In order to function effectively the Call In List must be current. The ability of employees to access work depends on the accuracy of their availability, etc. The NSDRC has an obligation to provide a process for updating the list based on information supplied by the employee. The NSDRC requires a process to follow when employees refuse shifts they have declared themselves available for.

DEFINITIONS: Refer to Glossary of Definitions located on ShareVision.

PROCEDURES:

1. Each year prior to March 1st and November 1st the Program Manager requests employees’ availability. If the Program Manager does not receive the employee’s availability by the deadline (March 1st and November 1st), the Program Manager will assume the employee’s current availability continues to apply.

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**North Shore Disability Resource Centre Association
Employment Policies and Procedures**

Reviewed: October 25, 2019

564.2	CALL IN LIST MAINTENANCE	564.2
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2. Employee's vacation requests must be, in writing, at least one month prior to vacation.
3. The Program Manager will provide, in writing, approving or denying the employee's vacation request(s) based on program requirements.
4. An employee will be terminated from employment with the NSDRC following four (4) refusals within a two (2) month period.

RESIDENTIAL SERVICES ONLY

5. An employee that does not obtain a Restricted Class 4 Driver's Licence within the probationary period may be terminated from employment. If the employee is approaching the end of the probation period and has not obtained their Class 4 Driver's Licence, the Program Manager sends a reminder to the employee.



Policy Title: Health and Safety	Policy Type: Health&Safety	Policy Number: 680.0
Associated References: WorkSafeBC BC Motor Vehicle Act Collective Agreement Work Related Injury Reporting 680.0.A Health & Safety Recommendation Form 680.0.B Health & Safety Complaint Form	Date Revised: 2022-06-01	Date Approved: 2022-06-14

Intent

North Shore Disability Resource Centre is vitally interested in the health and safety of its employees. Protection of employees from injury or occupational disease is a major continuing objective. We will make every effort to provide a safe, healthy work environment. All supervisors and workers must be dedicated to the continuing objective of reducing risk of injury. North Shore Disability Resource Centre is ultimately responsible for worker health and safety and will take every reasonable precaution possible for the protection of our employees.

We are committed to promoting a safe and healthy workplace for all employees, contractors, customers and visitors. In pursuit of our commitment, North Shore Disability Resource Centre will develop, implement and enforce such policies and procedures that promote and provide a healthier, safer work environment. We understand the importance of safety to the well-being and productivity of our people and strive to safeguard the workplace from injury and malfeasance through dereliction of duty towards safety. We will act in compliance with all Local, Federal, and Provincial workplace health and safety legislation.


North Shore Disability Resource Centre will act in compliance with all Provincial workplace health and safety legislation.

Guidelines

Communication

North Shore Disability Resource Centre encourages open communication on health and safety issues. It is essential to providing an injury-free and productive work environment.

- Employees that voice or identify a health and safety concern will not be subject to retaliation.

File Name: 680.0 Health and Safety Policy	Page: 1 of 4	Approved: 
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- Health and safety comments will be reviewed by the Joint Occupational Health and Safety Committee. The JOH&S Committee will initiate an investigation on each reported and/or potential hazard.
- Employees are encouraged to inform their supervisor, Human resources or the JOH&S Committee of any matter they perceive to be an actual or potential workplace hazard.
- Communication can be written or oral, and may be anonymous, if so desired.


Responsibilities

Board Members and Executives

- These company officials are responsible for supplying an effective strategy that can manage the occupational health and safety concerns of North Shore Disability Resource Centre.
- They must ensure that resources are allocated and governed properly to achieve the health and safety requirements of employees, and that their policies comply with (North Shore Disability Resource Centres)'s legal obligations.
- Ensure that Health and Safety hazards are corrected upon notification of them.
- Foster a workplace culture of safety, with appropriate leadership.
- Review the policies efficacy on an annual basis, and revise where necessary.

Managers/Supervisors

- Responsibilities include their assistance in developing, implementing, and enforcing NSDRC policies and procedures.
- Provide a Health and Safety Orientation to new employees.
- Ensure that employees receive adequate training in their specific work tasks to protect their health and safety.
- Must continually promote health and safety awareness with instruction, information, training and supervision to ensure the safe performance of employees.
- Utilize the process of hazard identification, risk management and incident investigation.
- Perform occupational health and safety inspections of the workplace to identify and control any and all hazards to employees.
- Ensure that machinery and equipment are safe and that employees work in compliance with established safe work practices and procedures.
- Report any safety or health hazards.
- Correct unsafe acts and conditions.
- Conduct health and safety meetings.

File Name: 680.0 Health and Safety Policy	Page: 2 of 4	Approved: 
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- Held accountable for the health and safety of workers under their supervision.

Human Resources

- Liaison with government agencies to ensure workplace health and safety compliance.
- Act as an advisor to management on safety and health policy issues.
- Coordinate health and safety inspections and follow up to ensure the completion of necessary corrective actions.
- Develop Best Practices.
- Design and develop accident / incident reports and investigation procedures.
- Maintain an up-to-date working knowledge of health and safety regulations as mandated locally, federally, or by the province / state.
- Design and develop company policies and procedures on workplace safety and health issues.
- Review injury and illness trends, and identify problem areas and solutions.

Employees

- Responsible for compliance with occupational health and safety policies and procedures.
- Learn and follow the safe work procedures.
- Must notify managers of any health and safety concerns, so that they may be dealt with promptly.
- Suggest ways to improve the health and safety program.
- Every employee must protect his or her own health and safety by working in compliance with the law and with safe work practices and procedures established by the company.
- Participate in inspections and investigations where appropriate
- Use appropriate personal protective equipment as required.
- Report unsafe or potentially hazardous conditions, without fear of reprisal, to their Manager or Human Resources.

All Staff Are Responsible for the Following

- Completion of required occupational health and safety training.
- Performance of their duties in a manner conducive to a safe workplace, following all safety practices and procedures.
- Reporting of any incident, injury or hazard as outlined in procedures.
- Report any acts of violence or harassment in the workplace.

File Name: 680.0 Health and Safety Policy	Page: 3 of 4	Approved: 
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**NORTH SHORE DISABILITY
RESOURCE CENTRE**

- Promoting a hazard-free workplace.
- Learning the posted Emergency Plan detailing their facilities procedures pertaining to: Fire, Weather, or Medical Emergency.

File Name: 680.0 Health and Safety Policy	Page: 4 of 4	Approved: 
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**North Shore Disability Resource Centre Association
 Emergencies and Incidents Policies and Procedures**

Revised: May 27.2021

700.0	ABUSE / NEGLECT REPORTING	700.0
Application: All Employees	References: Community Care Facilities Act 209.0 Protection of Privacy 211.0 Freedom of Information 440.0 Complaints Resolution 541.0 Abuse of Participants Prevention 715.0 Aggression/Assault	

POLICY:

The NSDRC’s first priority in an incident of this nature is for the physical/emotional well-being and safety of the individual(s) directly and/or indirectly involved in the incident.

Employees have a legal and moral obligation to report any suspicions and/or allegations of abuse and/or neglect involving the participants.

The Child, Family and Community Service Act (CFCSA) requires that anyone who has a reason to believe that a child or youth (under the age of 19) has been or is likely to be abused or neglected, must report the suspected abuse or neglect to a child welfare worker at the Ministry of Children and Family Development (MCFD).

Employees report any suspicions and/or allegations of abuse and/or neglect involving the participants to their Director/Program Manager immediately.

Employees DO NOT disclose suspicions and/or allegations of abuse and/or neglect to the family of the participants (family member(s), legal guardian or emergency contact).

Employees alleged and/or suspected of inflicting abuse and/or neglect upon a participant will be removed from the work site until the matter is investigated by the NSDRC and/or external authorities, and resolved.

The NSDRC completes an internal investigation upon when notified of an allegation of abuse and/or neglect.

Employees alleged and/or suspected of inflicting abuse and/or neglect upon a participant are informed of the allegations and given an opportunity to participate in an investigation.

An employee who, upon investigation, is found to have inflicted abuse and/or neglect upon a participant will be subject to discipline up to and including criminal and civil charges.

The NSDRC adheres to relevant legislation pertaining to privacy and information. All materials gathered remain confidential and are used only for the express purpose for which it was gathered.

The NSDRC employs a “no reprisal” approach for anyone reporting allegations of abuse and/or neglect.

North Shore Disability Resource Centre Association
Emergencies and Incidents Policies and Procedures

Revised: May 27.2021

700.0	ABUSE / NEGLECT REPORTING	700.0
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The NSDRC provides critical stress debriefing for the participants within twenty-four (24) hours of an incident of this nature or on an as needed basis.

Critical stress debriefing is available for employees through the LIFEWORKS Employee and Family Assistance Program on an as needed basis.

REASONS FOR POLICY:

Participants using services provided by the NSDRC have a right to an environment free from abuse and/or neglect of any kind. To that end the NSDRC does not tolerate any form of abuse and/or neglect of the participants by any other person.

DEFINITIONS: Refer to Glossary of Definitions located in Volume 1 Association Structure and Supports for further information.

PROCEDURES:


1. Employees report suspicions and/or allegations of abuse and/or neglect to the Director/ Program Manager immediately.
2. Employees who think a **child or youth under 19 years** of age is being abused or neglected have the legal duty to report their concern to a child welfare worker at MCFD. Phone **1-800-663-9122** at any time of the day or night.
3. If an **adult** with a developmental disability is in immediate danger, contact **9-1-1**. Then contact the North Vancouver Community Living BC (CLBC) office to make a report **604-981-0321**.

Notification: Community Housing and Inclusion Program

4. Employee(s) notify the Program Manager. On weekends and statutory holidays, notify the On-Call Manager. See the Emergency Binder on-site.
5. If unable to contact the Program Manager or the on call Manager, notify the Director of Community Housing and Inclusion Program at **604-904-4076** or cell **604-839-1081**. See the Emergency Binder on-site.
6. If unable to contact the Director of Community Housing and Inclusion Program, notify the Executive Director. See the Emergency Binder on-site.
7. The Director/Program Manager will direct employee to contact the appropriate authorities. (Police, Funding body, Licensing, etc.)

Notification: Community Based Services Programs

8. Employee(s) *immediately* notify their Program Manager.
9. If unable to contact the Program Manager, notify the Director of Community Based Services at **604-904-4090** or cell **604-328-4087**.

N:\Policies\Vol 3 700 Emerg. & Incidents\700.0 Abuse - Neglect Reporting.docx	Page 2 of 4	 Approved
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North Shore Disability Resource Centre Association
Emergencies and Incidents Policies and Procedures

Revised: May 27.2021

700.0	ABUSE / NEGLECT REPORTING	700.0
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10. If unable to contact the Director of Community Based Services, notify the Executive Director at **604-798-0638**.
11. The Director/Program Manager will direct employee to contact appropriate the appropriate authorities. (Police, Funding body, Licensing, etc.)

Notification: Administration Office

12. Employees located at the Administration Office report suspicions and/or allegations of abuse and/or neglect involving participants to the appropriate Director/Program Manager, their designate or, the Executive Director.

Documentation:


13. Employees document immediately (or within 12 hours) suspicions and/or allegations of abuse and/or neglect using the **Critical Incident Report** in ShareVision.
14. When completing a Critical Incident Report, employees remain objective and state the facts in chronological order:
 - **do not** make up what you do not know or what you did not see.
 - report should be free from typos, grammatical spelling and punctuation errors
 - **do not** use “jargon” or obscenities unless they are a direct quote.
15. Critical Incident Reports are reviewed by the Director/Program Manager for appropriate action(s). Follow up action(s) may include recommendations to minimize the risk of similar occurrences in the future.
16. The Director/Program Manager informs the Executive Director and the appropriate authorities.

How to Respond to a Disclosure:

17. Listen to the person disclosing the allegation(s) of abuse and/or neglect and respond in a very matter of fact way to avoid conveying your feelings:
 - ensure the person is safe
 - acknowledge the person’s statements and thank them for sharing their information
 - reassure the person in a calm, respectful and professional manner
 - do not promise the person disclosing that you will keep the disclosure a secret
 - document what the person has said recording their exact words

Investigations:

18. Investigations may be conducted by the Director/Program Manager or an external source (e.g. funding body, licensing, police, etc). **Note:** an internal investigation may not be conducted if an external investigation is initiated.
19. Recommendations arising from an investigation are submitted to the appropriate person(s) to handle the feedback documented on the Critical Incident Report in ShareVision.

N:\Policies\Vol 3 700 Emerg. & Incidents\700.0 Abuse - Neglect Reporting.docx	Page 3 of 4	 Approved
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**North Shore Disability Resource Centre Association
Emergencies and Incidents Policies and Procedures**

Revised: May 27.2021

700.0	ABUSE / NEGLECT REPORTING	700.0
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- 20. Critical stress debriefing is made available to the participants upon request, or as deemed necessary by the Director/Program Manager.
- 21. Employees requiring critical stress debriefing have access to LIFEWORKS, the NSDRC Employee and Family Assistance Program. For further information visit the LIFEWORKS website at www.LIFEWORKS.com or call **1-844-880-9142** to speak with a representative.



Policy Title: Accidents/Incidents Participants	Policy Type: PROGRAMS	Policy Number: 705.0.1
Associated References: Community Care Facilities Act Risk Management Plan Policy 739.0 Emergency Information	Date Revised: 2022-07-11	Date Approved: 2022-07-13

Intent

The NSDRC adheres to applicable legislation to ensure accidents/incidents involving the participant are documented and reported to the appropriate authorities in a timely and effective manner.

The NSDRC’s first priority in any accident/incident involving the participant is the physical/emotional well-being and safety of the individual(s) directly and/or indirectly involved in the incident.

Employees deal with accidents/incidents involving the participant to the best of their skills and abilities.

Employees report and document accidents/incidents involving the participant in an appropriate and timely manner.

The NSDRC provides critical stress debriefing for the participant within twenty-four (24) hours of an event or, on an as need basis.

Critical stress debriefing is available for employees through the NSDRC LIFEWORKS Employee and Family Assistance program on an as needed basis.

Guidelines

1. Employees respond to accidents/incidents involving the participant to the best of their abilities and in the manner described in the corresponding chapter of Volume 3 Emergencies and Incidents Policies & Procedures, Health Care Plans and/or other resources.
2. When an accident/incident occurs which is not covered under existing policies or procedures, employees respond immediately with the type of assistance required to resolve the situation. This may include, but is not limited to, contacting external expertise (e.g. physician, pharmacist, and if warranted, 9-1-1).

File Name: 705.0.1 Accidents/Incidents Participants	Page: 1 of 3	Approved: 
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- If an incident involves the people we support’s personal property, equipment or, living environment (e.g. maintenance concern), employees respond to the best of their ability and notify the Director/Program Manager or their designate.

Notification: CHIP Program Sites


- Employee(s) notify the Program Manager or designate, via cell if not on site. On weekends and statutory holidays, notify the on call Manager at **604-831-9179**.
- In an emergency situation, if unable to contact the on call Manager, notify the Director of CHIP.
- The Director of CHIP is available (Monday to Friday 8:30 am to 4:30 pm) at **604-904-4076** or, after hours, via cell at **604-839-1081**.
- If unable to contact the Director of CHIP, notify the Executive Director, via cell at **604-798-0638**.
- Depending on the nature of the accident/incident, the Director/Program Manager or their designate notifies the people we support’s family member, legal guardian, emergency contact and if warranted, the appropriate authorities.

Non CHIP Sites:

- Employees notify the emergency contact for the individual they are supporting. If unable to contact the emergency contact, notify the Program Manager or designate, via cell if not on site.
- In an emergency situation, if unable to contact the Program Manager or designate or the participant’s emergency contact, notify the Director of Community Based Services.
- The Director of Community Based Services is available (Monday to Friday 8:30 am to 4:30 pm) at **604-904-4090** or, after hours, via cell at **604-328-4087**.
- If unable to contact the Director of Community Based Services, notify the Executive Director, via cell at **604-798-0638**.
- If appropriate, the Executive Director informs the Board of Directors to the nature of the accident/incident.

Documentation:


- Depending on the program stream and the circumstances, employees document accidents/incidents involving the participant, via a **Serious/Critical** or **Internal Incident Report**.
- Serious/Critical and Internal Incident Reports are located and completed on ShareVision by the reporting employee. If necessary, paper copies may be requested from the Program Manager or designate.

<p>File Name: 705.0.1 Accidents/Incidents Participants</p>	<p>Page: 2 of 3</p>	<p>Approved: </p>
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16. Incident Reports are reviewed by the Director/Program Manager or designate for appropriate action(s). Follow up action(s) may include recommendations to minimize the risk of similar occurrences in the future.
17. The Director/Program Manager or designate, informs the Executive Director and if warranted, the appropriate authorities.
18. Completed Serious/Critical and/or Internal Incident Reports (*paper versions*) are submitted to the appropriate Administrative Assistant for data entry on ShareVision, filing and distribution.
19. The Administrative Assistant distributes Incident Reports and other documentation related to the incident to the applicable authorities (e.g. funding body, licensing).
20. When completing an Incident Report, employees remain objective and state the facts in chronological order and,
 - **do not** make up what you do not know or, what you did not see
 - report should be free from (typos, grammatical spelling and punctuation errors)
 - **do not** use erasers or whiteout. If you make a mistake, draw a single line through it and initial
 - **do not** use “Jargon” or obscenities, unless they are a direct quote
21. Incidents are investigated for probable cause and may include recommendations to prevent or minimize the risk of similar occurrences in the future.
22. Recommendations arising from an investigation are submitted to the appropriate person to handle the feedback. Refer to **Feedback/Recommendation Form 444.0A** for further information.
23. Investigations are conducted by the Director/Program Manager or designate and depending on the circumstances, the Executive Director.

Critical stress debriefing is made available to the participant upon request or, as deemed necessary, by the Director/Program Manager.

File Name: 705.0.1 Accidents/Incidents Participants	Page: 3 of 3	Approved: 
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**North Shore Disability Resource Centre Association
Emergencies & Incidents Policies and Procedures**

Revised: December 3, 2019

796.0	EMERGENCY ON CALL MANAGER	796.0
Application: Independent Living Programs Supported Living Programs		References: Community Care Facilities Act 103.0 Code of Ethics

POLICY:

Managers provide support on weekends and statutory holidays for the residential programs on a rotational basis.

The On Call Manager will provide support for the reasons listed below from **5:00pm on Friday afternoon to 7:00am** on Monday morning or the first business day after a statutory holiday.

Employees and participants adhere to established guidelines for reporting to the On Call Manager on weekends and statutory holidays.

The On Call Manager makes every effort to respond to calls within 15 minutes.

REASONS FOR POLICY:

The NSDRC ensures continuous support to employees and participants on weekends and statutory holidays, by providing access to appropriate judgment and assistance.

DEFINITIONS: Refer to Glossary of Definitions in ShareVision for further information.

PROCEDURES:

1. In the event of:
 - a serious/critical accident or incident regarding employees, participants or NSDRC property
 - an emergency or natural disaster
 - overtime approval
2. Employees/or participants contact the On Call Manager via cell phone.
3. The on call cell phone number is **604-831-9179**.
4. The On Call Manager records calls in the NSDRC Emergency On Call Log Record on ShareVision indicating:
 - name of program
 - date and time of call
 - name of individual calling
 - nature of the call
 - recommendations or directives given
5. Employees/or participants maintain contact with the On Call Manager as directed.
6. Employees/or participants refrain from using the house phone to allow the On Call Manager to respond.

North Shore Disability Resource Centre Association
Emergencies & Incidents Policies and Procedures

Revised: December 3, 2019

796.0	EMERGENCY ON CALL MANAGER	796.0
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7. If the On Call Manager does not respond to the first call within fifteen minutes a second call is initiated.
8. In the event of a Natural Disaster or Serious/Critical Incident and the On Call Manager does not respond to the second call within fifteen minutes employees/or participants are to contact the Director of Residential Services at **604-839-1081**
9. If the Director of Residential Services does not respond to the first call within fifteen minutes a second call is initiated.
10. If the Director of Residential Services does not respond to the second call within fifteen minutes, the employees/or participants are to contact the Executive Director **604-798-0638**.
11. Alternative numbers are only used in the event the On Call Manager fails to respond.
12. The On Call Manager notifies the Program Managers of calls received on the next business day.
13. The On Call Program Manager completes the NSDRC Emergency On Call Log Record on ShareVision no later than Noon on the next business day.



Policy Title: Financial Management Participants	Policy Type: PROGRAMS	Policy Number: 849.0
Associated References: 130.0 Code of Ethics Community Care and Assisted Living Act	Date Revised: 2022-06-22	Date Approved: 2022-06-24

Intent

The NSDRC has a legal obligation to ensure the safe storage and detailed documentation of funds belonging to the participants.

Employees assist the participants to maintain their financial affairs and complete documentation in a manner conducive with generally accepted accounting principles.

Participants hold their own personal savings and or chequing accounts. They do not hold a joint account with employee(s).

Guidelines

The participant must be present for all banking transactions. Withdrawals and deposits must be done in person by the participant and the employee. The Program Manager or their designate initials the withdrawal. **Exceptions are documented in writing and approved by the Program Manager or Program Director.*


Participants direct, to the best of their ability, all financial management activities.

For accounting purposes, all monies received by or accepted on behalf of the participant is deposited to the individual’s bank account prior to use.

Employees are **not permitted** to access bank accounts belonging to the participants by way of personal debit banking cards.

The words **“For Deposit Only”** and the person’s account number are written on any non-cash funds deposited into the account(s) of the participant.

Employees request a receipt from the financial institution indicating whether the transaction was a deposit or a withdrawal to the person’s account.

File Name: 849.0 Financial Management Participants	Page: 1 of 2	Approved: 
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**NORTH SHORE DISABILITY
RESOURCE CENTRE**

All banking transactions (e.g. deposits, withdrawals) are documented by the employee and reviewed by the Program Manager. Refer to **Form 849.0C Bank Account Transactions** for further information.

Employees are bound by NSDRC Policies and Procedures and submit documentation of any financial transaction to the Program Manager or their designate within forty-eight (48) hours.

Expenditures must have a receipt that includes the time, date, name of store, name of the item purchased, amount of item and the initial of the employee assisting in the expenditure.

Employees ensure a maximum of \$25.00 is stored in the wallet(s) of the participant (includes amounts of money of \$25.00 or less). Larger amounts, to a maximum of \$100.00, are stored in a secure location in a locked safe on site.

Access to the safe is limited to a maximum of three (3) employees, the Program Manager, one key Residential Care Worker and at the Program Manager's discretion, one other employee.


Employees ensure all monies stored in the wallets of the participants are double counted with two (2) employees present to witness, and are signed for accordingly at the end of each shift with a co-worker.

Employees ensure all monies stored in the safe on behalf of the participants are double counted, with two (2) employees present to witness, and signed for accordingly when money is added to or removed from the safe. At no time is it acceptable to open a safe without two (2) employees present or, leave a safe open unattended. This procedure is done at least once a week even if no money has been exchanged to or from the safe within the week.

Employees ensure all financial documentation is stored in the financial binder(s) of the participants.

Employees may be held accountable for costs of financial transactions with no supporting documentation.

Employees **do not** advance their personal funds to purchase items on behalf of the participants. **Employees found to be in contravention of this policy will face disciplinary action up to and including dismissal.**

File Name: 849.0 Financial Management Participants	Page: 2 of 2	Approved: 
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Policy Title: Care Plans	Policy Type: PROGRAMS	Policy Number: 925.0
Associated References: 920.0 Person Focused Plans 930.0 Health Care Plans 803.0 Eligibility and Referral 804.0 Application 859.0 Record Keeping – participant Freedom of Information and Protection Privacy Act Community Care & Assisted Living Act	Date Revised: 2022-10-31	Date Approved: 2022-10-31

Intent

Employees are trained on the contents and use of Care Plans for the participants at all NSDRC Community Housing & Inclusion Program sites.

Employees adhere to established guidelines specific to providing care as outlined in the Care Plans of the participant.

Employees sign a **Confirmation of Understanding of Care Plan Form 925.0A** prior to providing support to the person requiring service.

The NSDRC adheres to applicable legislation to ensure Care Plans are developed and implemented within six weeks of the person’s admission to a facility.

Guidelines

Employees are trained on the contents and use of Care Plans for the participants at all NSDRC Residential Services Program sites.

Employees adhere to established guidelines specific to providing care as outlined in the Care Plans of the participant.

Employees sign a **Confirmation of Understanding of Care Plan Form 925.0A** prior to providing support to the person requiring service.

The NSDRC adheres to applicable legislation to ensure Care Plans are developed and implemented within six weeks of the person’s admission to a facility.

File Name: 925.0 Care Plans	Page: 1 of 3	Approved: 
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PROCEDURES:

Care Plan Development:

1. Upon intake, the Program Manager or their designate records the specific needs of the person needing support in the Care Plan, based on the information from the **Eligibility and Referral Form 803.0A**, the **Application Form 804.0A** and the **Physical Annual Admission Form 804.0B.**, using the **Sharevision Care Plan Index** as an outline for information required and in accordance with **Residential Care Regulations**, Community Care Act.
2. Information recorded reflects input from the person requiring service, their network and Health Care Professionals.
3. Health Care Professional documentation is included as required by the person requiring service.
4. Employees read Care Plans and sign a **Confirmation of Understanding of Care Plan Form 925.0A** prior to the person requiring service, receiving support.
5. Care Plans are living documents and changes are updated on ShareVision as they occur to ensure documentation reflects the current needs of the participant. Ongoing changes to the Care Plan are noted on the Sharevision "Communication Log" page.
6. Care Plans, and all material contained within, are subject to applicable legislation concerning privacy and confidentiality.

Care Plan Revisions:

7. Care Plans are reviewed and updated annually and revised according to the current needs and abilities of the participant.
8. Input from the participant, their network, employees and Health Care Professionals are the basis for all revisions to the Care Plan.
9. Only Health Care Professionals are able to write revisions for their specific area of expertise.
10. Employees are responsible for reading and understand the ongoing revisions in the Care Plans of the participant as outlined in the **Confirmation of Understanding of Care Plan Form 925.0A.**
11. Employees read the Care Plan of the participant within three weeks of completion of the annual review and sign the **Annual Care Plan Review Sign off Form 925.0D.**

Care Plan Administration:

12. Care Plans of the participants are accessible at all times to employees who provide direct service to the participants.

File Name: 925.0 Care Plans	Page: 2 of 3	Approved: 
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**NORTH SHORE DISABILITY
RESOURCE CENTRE**

13. A signed Confirmation of Understanding of Care Plan Form 925.0A is placed in the employees personnel file for each participant.
14. Hard copies of Care Plans are located: at the program site, in the principle files of the participants at the NSDRC Administration office and distributed to funding bodies as required.
15. Only written text documents are located in the principle files of the participant at the NSDRC Administration office. Any inserted documents, received from supporting professionals, are located in the program site file of the participants.
16. Electronically stored and hard copy files can be located at the NSDRC Administration Office or on ShareVision and accessed via the internet from the program site.

File Name: 925.0 Care Plans	Page: 3 of 3	Approved: 
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