



February 2009

Welcome to the CANES Community Care Policy Manual. Inside you will find polices and procedures on all areas of operations for CANES, including Health and Safety, Risk Management, Human Resources and Clients Services.

All CANES Community Care Policies are implemented upon approval of our volunteer Board of Directors and all policy reviews and revisions are conducted by CANES Senior Management.

Please take time to introduce yourself to the Policy Manual and refer to the manual frequently to answer common questions

Thank you,

CANES Community Care



Forms

1. Intake Form
2. Client Assessment Package
3. Information About Your Services
4. Client Care Plan
5. Determination of Available Monthly Income
6. Bank Letter
7. Consent to Release information
8. Consent to Inspect Assets
9. Medication Management Release Form
10. Event Reporting Form
11. Supportive Housing New Client Intake Tree
12. Client File-Audit Form
13. Client Rights and Responsibilities



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Section Heading: Health and Safety	Board Approval Date: February 2009
Policy Title: WSIB Claims Management	Revised Dates:

POLICY: CANES is committed to ensuring that WSIB claims are properly managed. Employees, Volunteers and Management must cooperate in order to ensure that the best possible management of WSIB claims is achieved.

RESPONSIBILITIES: ACTION:

**EMPLOYEES/
VOLUNTEERS**

- To report to their Managers any workplace injury, illness or any hazardous conditions at the workplace as soon as possible.
- To seek appropriate medical attention
- Have FA form completed
- To facilitate their return to work as soon as possible, employees and volunteers must maintain contact with their Manager at least on a weekly basis while off work.
- The employee/volunteer must provide information regarding their current condition to the Manager to set up suitable modified duties.
- The employee/volunteer must cooperate with WSIB assessment in determining a suitable return to work.
- The employee must accept suitable modified work when offered.
- Employees are also responsible for supporting co-workers on accommodated assignments.

**MANAGERS/
SUPERVISORS**

- To train and instruct all employees, including new employees in safe work procedures.
- To properly complete and forward all injury report documentation, including sending a copy to the Director of Human Resources within 24 hours of the injury.
- To maintain contact with the injured employee (at least once a week) indicating concern for the employee and encouraging a speedy return to work.
- To whenever possible, offer work accommodation to the injured employee.
- To update and consult with the Director of Human Resources as to how to implement such accommodation.



Section Heading: Health and Safety	Board Approval Date: February 2009
Policy Title: Client Vehicles Driven by Employees	Revised Dates:

POLICY: The duties listed in the job descriptions of Employees working in the Supportive Housing and Community Support Program at CANES do not include driving a vehicle for Clients.

CANES is not able to guarantee the maintenance, safety or proof of insurance of vehicles owned or used by Clients. Neither is CANES able to guarantee the ongoing validity of an Employee’s driver’s license or his/her safe driving record.

Therefore Employees of CANES are prohibited from driving vehicles, for any reason that are owned or used by a Client. This restriction includes vehicles owned by friends, family members, or partners of the Client.

TRAINING CANES will have a mandatory training on health and safety for all employees annually. This will help to control Accidents/Incidents, illnesses, hazardous conditions and near misses in our Organization.

EVALUATION The Joint Health and Safety committee will review all policy and procedures yearly.

Policy Reference: Use of Personal Vehicle



Section Heading; Health and Safety	Board Approval Date: January 2009
Policy Title: Dress Code and Hygiene	Revised Dates:

POLICY: All Employees are expected to dress and groom themselves in a professional manner.

Employees who provide homemaking services to Clients will be required at all times while on duty, to adhere to the following standards:

CANES will provide two sets of uniforms to all employees at the time of receipt of an offer of employment

- CLOTHING:**
 - Have CANES uniform on during all your visits
 - Uniform must be clean, neat, and in satisfactory condition
 - Similar uniforms with Logo's or insignia's of other organizations must not be worn while working for CANES.
 - FOOTWEAR:**
 - All footwear must be sturdy, closed toed, low heeled and closed heel.
 - Shoes must have good traction and good support
 - Sandals or slippers are not permitted;
 - Footwear must be worn at all times.
 - JEWELRY:**
 - Jewelry with the potential to harm Clients must not be worn by an Employee;
 - Jewelry that does not allow an Employee to perform his/her duties in a safe manner must not be worn;
 - Rings that consist of a flat band with no gem stones or decorative protrusions may be worn.
 - HANDS AND FINGERNAILS:**
 - Employees must follow the Universal Precautions policy in regards to hand washing;
 - Fingernails must be kept clean and short, never extending over the tip of the finger.
 - PERSONAL HYGIENE:**
 - Employees will maintain a standard of personal hygiene that is appropriate to working in close proximity to other people;
 - Employees must not wear perfume or fragrances in order to accommodate Clients or Employees who are allergy sensitive.
- CANES will not be responsible for any damages to clothing, footwear or any other personal items that occurs in the daily performance of the Employee's normal job duties.
 If at any time the employees' original two uniforms are destroyed, it will be the responsibility of the employee to get them replaced.
- TRAINING** CANES will have a mandatory training on health and safety for all employees annually. This will help to control Accidents/Incidents,



EVALUATION

illnesses, hazardous conditions and near misses in our Organization. The Joint Health and Safety committee will review all policy and procedures yearly.



Section Heading: Health & Safety	Board Approval Date: February 2009
Policy Title: Early and Safe Return to Work after an Injury (ESRTW)	Revised Dates:

POLICY: CANES will provide reasonable work accommodation for employees returning to work after an injury.

PURPOSE: To effectively and safely integrate an injured employee or volunteer into the work environment as quickly as possible, and assist them in returning to their pre-injury duties subject to the accommodations being reasonable to consumer service needs.

Return to Work is part of the occupational health and safety practice. The Return to Work Program is an initiative that combines a responsible approach towards returning injured workers to work, while maintaining a commitment of protecting the health and welfare of all employees.

The Return to Work Program is designed primarily to assist injured employees to make an early and safe return to their regular duties. It is a temporary measure that is intended to bridge the gap between injury and return to full duties.

Modified Duties are a means of accommodating an employee’s temporary restrictions. A broad approach to accommodation will be adopted that recognizes the unique circumstances in each case.

The Modified Duties will not normally last longer than eight weeks. Extensions to this period will be granted on an individual basis.

ACCOMMODATION MAY INCLUDE:

- Working fewer hours
- Taking more frequent rest breaks
- Obtaining assistance from a co-worker for more difficult tasks
- Job/responsibility sharing
- Assistive Devices
- Assignment to another job
- Physical changes to the work environment
- Special Project Work

In the case of a permanent impairment, the Chief Executive Officer, Director of Human Resources and Union Representatives will meet with the employee to consider what additional measures are necessary for placement of that employee or volunteer.

DEFINITIONS:



FUNCTIONAL ABILITIES: Means information provided by the treating health care professional describing what kinds of activities the injured worker may carry out.

RESPONSIBILITY: ACTION:

**EMPLOYEE/
VOLUNTEER**

- Reporting promptly any work-related injuries and complaints to Director Human Resources, Director (Program) or Manager
- Obtaining necessary paperwork prior to leaving site
- Returning as soon as possible the Functional Abilities Form and any other information from the treating physician after seeking medical treatment
- Maintaining regular contact with the Director Human Resources, Director (Program), or Manager by keeping him/her advised of any changes
- Attending any meetings as requested by the Director Human Resources, Director (Program), or Manager prior to the date of return in order to develop and review Return to Work Program.
- Taking an active role in developing their modified duties job tasks consistent with medically determined functional abilities.
- Communicating any difficulties or concerns regarding the duties provided to the Director Human Resources, Director (Program) or Manager.
- Arriving on time and ready to co-operate and be productive in their modified duties assignment.
- Maintaining regular contact with the WSIB as required (claims adjudicator)

**THE DIRECTOR
HUMAN
RESOURCES,
DIRECTOR
(PROGRAM) OR
MANAGER**

- Investigating the injury/complaint. Taking preventative measures to ensure it does not happen again
- Ensuring immediate completion of incident report
- Contacting the employee/volunteer immediately after the injury and maintaining communication throughout the recovery and return to work.
- Working with the employee/volunteer with the assistance of Management in developing a modified duty assignment that is within the limitations and restrictions provided by the employee/volunteers physician on the Functional Ability Form
- Providing the WSIB with any information requested about the worker's return to work.



**DIRECTOR OF
HUMAN
RESOURCES**

- Providing a positive environment in which employees/volunteers on modified duties feel comfortable in making suggestions or voicing concerns with regards to their restrictions or modified duties assignment
- When notified of difficulties by an employee/volunteer on modified duties, promptly contacting Management to initiate a meeting to implement corrective actions to avoid re-injury or aggravation of the employees injury
- Keep Management apprised of any corrective actions required with regards to employees/volunteers on modified duties
- Communicate the ESRTW Program Policy, Procedures and Responsibilities to all employees/volunteers under their supervision
- Management must be provided with regular reports on the employee/volunteer's condition in order to communicate effectively with the claims adjudicator, rehabilitation counselors, case workers and other W.S.I.B. personnel.
- Both the overall management and day to day operations of the ESRTW Program
- Fully understanding and communicating the Modified Work Program
- Determining whether an employee/volunteer is able to perform modified duties upon review of the restrictions set out by the physician on the Functional Ability Form
- Ensuring the supervisors comprehend their responsibilities and follow through as required
- Meeting with the employee/volunteer to discuss goals and objectives of the ESRTW Program
- With the help of the committee, organizing the placement of the injured workers in modified duty jobs.
- Educating workers about the ESRTW Program, safety practices and W.S.I.B.
- Monitoring the progress of workers placed on modified duties
- Arranging meetings with workers and supervisors on a regularly scheduled basis to monitor the status of the worker and discuss any changes that may need to be made.
- Provide a full briefing to the supervisor indicating the employee/volunteer's expected date of return to work and progress to date



- Establish and maintain effective communications with the claims adjudicator, rehabilitation counselors, case workers and other W.S.I.B. personnel.

PROCEDURES

1. The CANES Return To Work Program will be activated when an employee/volunteer who had sustained an injury at work receives a medical clearance to return to work with restrictions

The employee/volunteer must have a Functional Abilities Form (WSIB Form#2647A) completed by the treating health professional. The form can be obtained from the supervisor. Employees/volunteers may be required to be examined by an independent medical practitioner, as determined by the Health and Safety Review Board, to determine their ability to perform the designated work
2. All injured or ill employees/volunteers will receive equal consideration for modified duties. Whether or not an employee/volunteer is placed on modified duties will depend upon the availability of work that meets the limitations and restrictions indicated by their physician on the Functional Abilities Form
3. The employee/volunteer will meet with the supervisor in order to identify a suitable work plan for the employee/volunteer. The written plan will include:
 - Start date will be mutually arranged with the Director Human Resources, Director(Program) or manager
 - Days and hours to be worked
 - Next review date
 - How the work is to be modified. This may include changed or reduced work hours, periodic rests or exercise breaks, adapted work tasks appropriate to the employee's functional abilities
5. Where appropriate, rehabilitation specialists from the WSIB will be consulted in reviewing suitable modified work to ensure the employee can safely perform the tasks involved
6. Employees/volunteers on modified duties will be contacted by their Director Human Resources, Director (Program) or manager on a daily basis.
7. The employee/volunteers is to notify Director Human Resources, Director(Program) or Manager immediately if there is any aspect of their modified duties assignment that aggravates their condition so corrective action can be taken
8. If it is necessary for the employee/volunteer to be placed back on WSIB benefits, Management will notify the WSIB of the employee/volunteer's change in progress.
9. Modified duties will change throughout the rehabilitation period in accordance with the limitation and restriction changes indicated by the employee/volunteer's physician on the Functions Ability Form. The date for return to regular duties will be established by the employee/volunteer's physician



10. Modified duties will be implemented within an 8 week period. During this time the supervisor will monitor the employee/volunteer's condition to ensure that he/she is capable of doing the work.
11. At the conclusion of the 8 weeks, the supervisor will determine with the employee whether they are able to return to their full duties, in the event that the employee/volunteer is unready, a reasonable extension may be granted.
12. At the conclusion of the program, the supervisor and the treating health professional will assess the employee/volunteer to determine ability to resume regular duties
13. If the initial Functional Ability Form does not indicate a date when the employee/volunteer can return to regular duties, the employee/volunteer will be requested to receive clearance from their physician by having a new Functional Ability Form completed that indicates the employee/volunteer is able to return to regular duties
14. After receiving the doctor's report giving the employee/volunteer clearance to return to regular duties without restrictions, the supervisor and employee/volunteer will arrange the date of return to pre-injury job

3. TRAINING

CANES will have a mandatory training on health and safety for all employees annually. This will help to control Accidents/Incidents, illnesses, hazardous conditions and near misses in our Organization.

4. EVALUATION

The Joint Health and Safety committee will review all policy and procedures yearly.



Section Heading: Health and Safety	Board Approval Date: February 2009
Policy Title: Influenza Immunization	Revised Dates:

POLICY: CANES Community Care Services has an obligation to protect our clients, ourselves and our families to comply with CANES influenza immunization recommendations. In the event of an outbreak of influenza, unvaccinated staff may be banned or reassigned from work.

PURPOSE This policy is established in order to decrease the risk of infection and complications in the vulnerable population for whom we care.

PROCEDURE CANES Health & Safety Committee will provide influenza awareness information to all staff.

CANES Health & Safety Committee will make available locations and hours of service of immunization clinics to all staff.

On an annual basis, all of CANES staff must complete the **Seasonal Influenza Immunization Record** and submit to their Department Director for review and signature.

To accommodate staff a clinic will be provided every year.

Every staff person has a right to refuse vaccination. All vaccination refusals (e.g. allergic, didn't want vaccine, etc.) will be documented in their personnel file.

In the event of an outbreak of influenza:

Unvaccinated front line staff working in an outbreak situation that refused vaccine without medical contraindications, may be excluded from work without pay for the duration of the outbreak.

Unvaccinated front line staff, working in an outbreak situation, who has documented medical contraindications to vaccine, will be restricted in their work duties for the duration of the outbreak.

Management/staff responsibilities and client safety will be outlined in Emergency Plan

CONTACT

For more information contact Director Human Resources



Section Heading: Health and Safety	Board Approval Date: February 2009
Policy Title: Material Safety Data Sheets	Revised Date:

INTRODUCTION

The Material Safety Data Sheet (MSDS) is a detailed information bulletin prepared by the manufacturer or importer to a chemical that describes the physical and chemical properties, physical and health hazards, routes of exposure, precautions for safe handling and use, emergency and first-aid procedures, and control measures.

Information on an MSDS aids in the selection of safe products and help prepare employers and employees to respond effectively to daily exposure situations as well as to emergency situations.

The MSDS/s is a comprehensive source of information for all types of employers. There may be information on the MSDS that is not useful to you or not important to the safety and health in your particular operation. Concentrate on the information that is applicable to your situation. Generally, hazard information and protective measures should be the focus of concern.

POLICY: It is the policy of CANES Community Care Services to comply with Hazard Communication Procedures pursuant to Workplace. This policy is designed to identify, educate, and establish a procedure for chemical hazards employees face in the workplace. Hazard Communication includes chemical hazards, labels, warnings, training, chemical lists identified as hazardous and safety precautions.

PURPOSE: The purpose of this policy is to provide a safe working environment through hazard communication to our employees regarding chemicals and also to promote safety in the workplace through information, education, and department, supervisor and employee accountability as required by Occupational Safety and Health Administration (OSHA) regulations and law.

YOUR RIGHTS

1. Your workplace is required to have Material Safety Data Sheets available for every single hazardous chemical or substance you use or encounter as a part of our job.
2. These must be readily available for employee review at all times you are in the work place! In other words, they cannot be locked in an office or filing cabinet to which you do not have access.



3. If you request to see an MSDS for a product you use at work, and your employer cannot show it to you, after one working day you may refuse to work with that product until you are shown the correct MSDS.
4. If you request your own personal copy of a Material Safety Data Sheet, your employer has 15 working days to provide it.
5. If you do not know where the MSDS for your area are kept, ask your supervisor.

PROCEDURE:

RESPONSIBILITIES: **ACTION:**

EMPLOYER

Employers must ensure that each employee has a basic knowledge of how to find information on an MSDS and how to properly make use of that information.

Employers also must ensure the following:

Complete and accurate MSDS/s are made available during each work shift to employees when they are in their work areas.

Information is provided for each hazardous chemical.

SECTIONS OF AN MSDS AND THEIR SIGNIFICANCE

What Information is provided on an MSDS?

- Company Information
- Hazardous Ingredients
- Physical Data
- Fire and Explosion Hazard Data
- Reactivity Data
- Spill or Leak Procedures
- Special Protection Information
- Special Precautions

OSHA specifies the information to be included on an MSDS, but does not prescribe the precise format for an MSDS. A non-mandatory MSDS form that meets the Hazard Communication Standard requirements has been issued and can be used as is or expanded as needed. The MSDS must be in English and must include at least the following information:

Section I. Chemical Identity

The chemical and common name(s) must be provided for single chemical substances. An identity on the MSDS must be cross-referenced to the identity found on the label.

Section II. Hazardous Ingredients

For a hazardous chemical mixture that has been tested as a whole to determine its hazards, the chemical and common names of the ingredients that are associated with the hazards, and the common name of the mixture must be listed. If the chemical is a mixture that has not been tested as a whole the chemical and common names of all ingredients

determined to be health hazards and comprising 1 percent or greater of the composition must be listed.

Chemical and common names of carcinogens must be listed if they are present in the mixture at levels of 0.1 percent or greater. All components of a mixture that have been determined to present a physical hazard must be listed.

Chemical and common names of all ingredients determined to be health hazards and also be listed if they can still exceed an established Permissible Exposure Limit (PEL) or Threshold Limit Value (TLV) or present a health risk to exposed employees in these concentrations.

Section III. Physical and Chemical Characteristics

The physical and chemical characteristics of the hazardous substance must be listed. These include items such as boiling and freezing points, density, vapor pressure, specific gravity, solubility, volatility, and the product's general appearance and odor. These characteristics provide important information for designing safe and healthful work practices.

Section IV. Fire and Explosion Hazard Data

The compound's potential for fire and explosion must be described. Also, the fire hazards of the chemical and the conditions under which it could ignite or explode must be identified. Recommended extinguishing agents and fire-fighting methods must be described.

Section V. Reactivity Data

This section presents information about other chemicals and substances with which it reacts. Information on any hazardous decomposition products, such as carbon monoxide, must be included.

Section VI. Health Hazards

The acute and chronic health hazards of the chemical, together with signs and symptoms of exposure must be listed. In addition, any medical conditions that are aggravated by exposure to the compound must be included. The specific types of chemical health hazards defined in the standard include carcinogens, corrosives, toxins, irritants, sensitizers, mutagens, teratogens, and effects on target organs (i.e., liver, kidney, nervous system, blood, lungs, mucous membranes, reproductive system, skin, eyes, etc.).

The route of entry section describes the primary pathway by which the chemical enters the body. There are three principal routes of entry: inhalation, skin, and ingestion.

This section of the MSDS supplies the OSHA PEL, the ACGIH TLV, and other exposure levels used or recommended by the chemical manufacturer.

If the compound is listed as a carcinogen (cancer-causing agent) by OSHA, the National Toxicology Program (NTP), or the International Agency for Research on Cancer (IARC), this information must be indicated on the MSDS .

Section VII. Precautions for Safe Handling and Use

The standard requires the preparer to describe the precautions for safe handling and use. These include recommended industrial hygiene practices, precautions to be taken during repair and maintenance of equipment, and procedures for cleaning up spills and leaks. Some manufacturers also use this section to include useful information not specifically required by to obtain this information automatically upon purchase of the material. When new and significant information becomes available concerning a product's hazards or ways to protect against the hazards, chemical manufacturers, importers, or distributors must add it to their MSDS within three months and provide it to their customers with the next shipment of the chemical. Employers must have an MSDS for each hazardous chemical used in the workplace. If there are multiple suppliers of the same chemical, there is no need to retain multiple MSDS/s for that chemical.

While MSDS/s are not required to be physically attached to a shipment, they must accompany or precede the shipment. When the manufacturer/supplier fails to send an MSDS with a shipment labeled as a hazardous chemical, the employer must obtain one from the chemical manufacturer, importer, or distributor as soon as possible. Similarly, if the MSDS is incomplete or unclear, the employer should contact the manufacturer or importer to get clarification or obtain missing information.

When an employer is unable to obtain an MSDS from a supplier or manufacturer, he/she should submit a written complaint, with complete background information, to the nearest OSHA area office. OSHA will then call and send a certified letter to the supplier or manufacturer to obtain the needed information. If the supplier or manufacturer still fails to respond within a reasonable time, OSHA will inspect the supplier or manufacturer and take appropriate enforcement action.

5. TRAINING

CANES will have a mandatory training on health and safety for all employees annually. This will help to control Accidents/Incidents, illnesses, hazardous conditions and near misses in our Organization.

6. EVALUATION

The Joint Health and Safety committee will review all policy and procedures yearly.



Section Heading: Health and Safety	Board Approval Date: February 2009
Policy Title: Motor Vehicle Safety	Revised Date:

POLICY: All accidents are caused either by specific unsafe conditions or specific unsafe actions and accidents can be prevented by learning what these specific conditions and actions are, then taking steps to rectify any unsafe conditions or actions.

PURPOSE: This Policy has been formulated with accident prevention in mind. Through the use of Defensive Driving techniques, accidents and violations will be reduced to the benefit and safety of our employees.

PROCEDURES

**RESPONSIBILITIES:
EMPLOYEES**

ACTION:

All employees of CANES Community Care Services are required to:

- Read the Driving Safety for Health Care Providers Fact Sheet
- Watch the Drive Alive Video
- Take the Drive Alive Test
- Employees must have a valid G License.
- Employees must have up to date insurance documentation.
- All employees must provide CANES with copies of their Drivers License and Insurance details annually upon renewal
- Employees must notify CANES of any changes in the status of your Drivers License or Insurance details.

MANAGERS/SUPERVISORS

1. To ensure copies of employee Drivers Licenses and Insurance documentation are taken and kept in the employee file.
2. To ensure all information and Insurance details are up-to-date and valid.
3. Ensure that Employee Drive Alive Test is in place.

SAFETY AWARENESS:

It is important that each employee:

- Keep safety above expediency
- Comply with all traffic laws and safe driving practices.
- Ensure that the safety of employees and citizens of the Greater Toronto Area and Peel are paramount.

- Drive to prevent accidents in spite of incorrect actions of others and adverse conditions.
- Keep your vehicle safe and in good condition by maintaining regular services and repairs.
- Understanding Defense: The most basic driving defenses are proper speed, following distance and driver alertness.
- Acting in time: If the hazard is recognized and the proper defensive course of action is known then steps can be taken to prevent emergency situations from arising.

Attention by the driver to items such as brakes, alignment, oil pressure, tires on a daily basis will keep your vehicle in good running order.

IN CASE OF AN ACCIDENT:

- Remain Calm
- Ensure everyone is safe, check for injuries, utilize first aid if available
- If there are no injuries and the vehicle is drivable, move to a safe area
- If there are injuries, fuel leaks etc. DO NOT MOVE the vehicle
- Report to the nearest collision reporting centre within 24 hours

7. TRAINING

CANES will have a mandatory training on health and safety for all employees annually. This will help to control Accidents/Incidents, illnesses, hazardous conditions and near misses in our Organization.

8. EVALUATION

The Joint Health and Safety committee will review all policy and procedures yearly.



Section Heading: Health and Safety	Board Approval Date: February 2009
Policy Title: Modified Work	Revised Date:

POLICY: CANES is committed to making every reasonable effort to provide meaningful employment for any employee who is unable to perform his/her duties as a result of a work-related injury. The work must be productive and the result of the work must have value.

PURPOSE: To assist the injured employees to return to their pre-injury job as soon as possible in a proactive and cost efficient manner.

DURATION: It is a temporary measure that is intended to bridge the gap between injury and a full return to regular duties. In most cases the duration of the modified work program will not exceed 8 weeks.

ELIGIBILITY: Every case will be assessed on an individual basis with support of the involved employee, other staff members, the respective supervisor, the physician, medical practitioners and the Workers Safety and Insurance Board.

PROGRAM: Modified Work is any job, task, function or combination there of that an employee who temporarily suffers from a diminished capacity may perform safely without re-injury. The objective is to restore the worker who has had an injury or illness, through progressive re-integration, into his/her regular job, wherever possible.

If it is apparent (through medical information) that the employee cannot do his/her regular job, the Director of Human Resources will explore various ways of modifying the regular job, making sure it will comply with the employees physical restrictions and necessary treatment time.

If it is not possible to modify the regular job, alternative jobs will be considered.

The work must be productive and have value.

Every case will be assessed on an individual basis with the support of the involved employee, other staff members, the physician and the Workplace Safety and Insurance Board.

Plan with target dates and objectives will be made for all programs. Assessments should be done weekly by the supervisor in form of weekly dialogue between supervisor and worker.

Modified Work may include but is not limited to:

- Working reduced hours
- Taking more frequent breaks
- Obtaining assistance form co-workers for more difficult tasks
- Job/responsibility sharing



- Physical changes in the work environment
- Assistive devices
- Assignment to another job
- Special project work

In the case of more permanent impairment, the employee and supervisor will meet to consider what other additional measures are necessary for possible placement of that employee.

PROCEDURES:

RESPONSIBILITIES

ACTIONS

EMPLOYEES:

- report all incidents immediately
 - obtain medical attention and advise the doctor of the availability of Modified Work
 - report back to the supervisor after consulting with their doctor and submit any written restrictions outlined by the doctor to the supervisor
 - participate in the Modified Work Program
 - inform injured workers if modified work is available before the employee sees their doctor
 - maintain contact with absent employees
 - based on the restrictions given by the employees doctor, determine if the regular job can be modified, if needed
 - prepare a written plan
 - ensure that the employee is given the correct duties in accordance with his/her physical restrictions
 - monitor the employee’s progress on a frequent basis, weekly as a minimum.
 - ensure that no other tasks are being done other than those in accordance with the restriction for the employee
- inform Payroll of all status and work reduction changes

**MANAGERS/
SUPERVISORS**

Relevant Forms:

- Physician Medical Report
- Letter for Physician
- Return to work basic information
- Employee notice modified work
- Suitable work review
- Return to work plan
- Return to work journal

Section Heading: Health and Safety	Board Approval Date: June 13, 2005
Policy Title: Occupational Health Safety Program	Revised Date: February 2009

POLICY: CANES has established a Joint Management Employee Occupational Health and Safety Committee.

PURPOSE: Consistent with the objectives of CANES, management, employees and unions where applicable, the Committee provides employees and volunteers with:

- safe working procedures
- safety regulations
- protective equipment as required; and
- training programs

LEGISLATIVE: The Occupational Health & Safety Act (The Act)* in Ontario requires that employers post the Act; ensure that building and facilities are constructed in accordance with regulations; ensure that equipment, materials and devices prescribed by regulations are provided and used; provide proper safety instruction and supervision to employees/volunteers; appoint “competent” supervisors trained in health and safety practices; establish a joint health & safety committee if more than 5 workers are employed by the employer; report accidents, especially where fatal or critical injury occurs, as well as occupational illness; comply with all requirements regarding hazardous substances; and take every precaution reasonable in the circumstances for the protection of the employee/volunteer.

PROGRAM OBJECTIVES

The objectives of the program are to:

- provide a safe and healthful environment in which to work;
- develop an atmosphere and a
- positive attitude conducive to total participation in accident prevention activities through understanding, which will resolve safety matters before they become matters of contention;
- reduce occupational health and safety hazards

The active involvement, cooperation and support of management and employees is encouraged in all matters relating to occupational health and safety in the workplace.

RESPONSIBILITIES: CHIEF EXECUTIVE OFFICER

ACTION:

The Chief Executive Officer is responsible for:

- ensuring compliance with this policy and standard health and safety practices;
- providing and maintaining equipment, materials and protective devices for the protection of the employees as



**DIRECTOR OF
HUMAN
RESOURCES
MANAGERS/
SUPERVISOR**

developed by the Occupational Health and Safety Committee or as defined in the Occupational Health and Safety Act, the Highway Traffic Act, and/or the Workplace Safety Insurance Act;

- reviewing incident reports and related statistics and conferring with supervisors, and health and safety committee representatives concerning the causes and the recommended solutions for such incidents; and

ensuring a healthful environment through comprehensive health and safety practices, safe working procedures and regulations
Conducts an annual review of all Occupational Health and Safety incidents for trends in accidents and incidents and reports to the Chief Executive Officer annually.

Supervisors are responsible for the implementation of the health and safety program. Their responsibilities include:

familiarizing themselves with the health and safety program and safe working procedures;

ensuring that procedures are effectively applied and complied with in their work unit;

ensuring that all accidents are investigated promptly, all reports completed, and corrective action taken;

ensuring that equipment and protective devices supplied are maintained to safe standards for use by employees;

ensuring the health and safety of employees/volunteers under their direction, which includes the following;

- training employees/volunteers (especially new employees/volunteers) in proper safe working procedures and making them aware of job site hazards;
- developing and maintaining positive health and safety attitudes;
- attending to complaints and suggestions promptly

Employees and Volunteers are responsible for:

**EMPLOYEES/
VOLUNTEERS**

- becoming familiar with the health and safety program;
- observing and complying with all health and safety regulations or safety procedure as applicable;
- reporting all accidents and incidents
- reporting defective equipment, health and safety hazards, and incidents of infractions of the regulations to their immediate supervisor, or their committee representatives as soon as possible, but no later than on completion of that working day;
- working in a manner that will not endanger themselves or their fellow workers;

using, wearing, and caring for protective clothing or safety equipment provided by the Agency; and actively participating in the Agency's Health and Safety program by submitting suggestions or recommendations to the Joint Management



Employee Occupational Health and Safety Committee

Please note the Occupational Health and Safety Act is permanently posted on the Health and Safety Boards at all CANES locations.



Section Heading: Health and Safety	Board Approval Date: June 13, 2005
Policy Title: Health and Safety Accidents and Incidents	Revised Date: February 2009

POLICY STATEMENT All occupational accidents and incidents must be reported immediately to the employees/volunteers direct supervisor and the Co-chair of the Health and Safety Committee.

TYPES OF ACCIDENTS Accidents are categorized as lost-time accidents, medical-aid accidents or first-aid accidents. Lost-time accidents involve time lost from work beyond the day of the accident due to injury sustained in the accident. Medical-aid accidents involve receipt of medical attention from a doctor but no lost time beyond the day of the accident.

INCIDENT DEFINITION For the purposes of the policy, incidents are defined as events in which staff member’ physical safety is threatened, but no physical harm is suffered. Incidents include but are not limited to:

- Verbal or physical threats against staff;
- The discovery of faulty or damaged equipment or physical premises, which pose a threat to staff members’ safety

RECORDING All accidents and incidents must be reported by the supervisor to the Chief Executive Officer Employee Accident/Incident Report, signed by the supervisor must be forwarded within 24 hours of the date of the accident/incident, for processing. If applicable the Human Resource Director will request additional information, or conduct further investigations, and complete and forward the necessary reports to the Workplace Safety and Insurance Board within three working days of the accident in accordance with the requirement of the Workplace Safety Insurance Act.

The Supervisor will send a copy of the Employee Accident/Incident Report to the Health and Safety Committee and ensure that a copy is placed in the employee’s file.

To complete the Employee Accident/Incident Report and substantiate the alleged accident or incident, the supervisor must initiate a detailed investigation of the accident or incident. If there were any witnesses to the accident or incident, they may be able to attest to the accuracy of the report being prepared. In cases where there was a delay in reporting the accident or incident to the Supervisor, or in the case of a back injury, witnesses must be interviewed immediately.

Injured employees requiring medical aid must be provided with transportation to a doctor, a hospital, or home. After the initial doctor’s visit, the employee may not change doctors without the permission of the Workplace Safety Insurance Board. (this does



not apply in the case of initial emergency treatment by a doctor not chosen by the employee).

Following medical treatment, the employee must advise the supervisor or manager if applicable as to his/her condition, and how long the employee will be off work. The supervisor must ensure that this information is forthcoming if the employee is unable to, or does not get this information to the Agency.

In cases of lost-time injuries, employees are required to contact their supervisors if they are unable to return to work the next shift. The supervisor must maintain regular contact with the employee receiving Workplace Safety Insurance Board benefits to ensure the employee returns to work as soon as able.

**RETURN TO
WORK**

When an employee returns to active employment following a work-related injury or illness which caused lost time, the employee's supervisor must advise Human Resources Director of the employee's specific date of return to work. This is required to ensure that any Workplace Safety Insurance Board Claim is properly terminated and normal pay resumed.

Relevant Forms: Employee Accident/Incident Report



Section Heading: Health and Safety	Board Approval Date: June 13, 2005
Policy Title: AIDS and HIV Infections	Revised Date: February 2009

POLICY: Employees/volunteers with AIDS or HIV infection have a right to maintain their employment status with the Agency while they are able to perform the essential duties of their jobs. Disclosure of AIDS or HIV infection from and employee/volunteer to his/her supervisor will be kept confidential and not shared with other employees/volunteers. AIDS or HIV infection is not grounds for dismissal.

PURPOSE This policy is established to protect employees with AIDS or HIV infection from uncertainty concerning their employment, and possible discrimination.

SAFETY/HEALTH Employees/volunteers must continue to work with a client or colleague who has AIDS or HIV infection, as there is no medical evidence to justify refusal to do so (provided universal precautions are employed).

EDUCATION/AWARENESS The Agency shall strive to provide:

- Accurate, up-to-date information about this illness;
- Encouragement towards supportive attitudes and behaviour among employees, if a co-worker is identified as having this illness;
- Information on protective measures for employees/volunteers whose work may put them at risk;

A forum for open dialogues with employees/volunteers who have concerns about AIDS and HIV infections.



Section Heading: Health and Safety	Board Approval Date: February 2009
Policy Title: Smoking	Revised Date:

POLICY: Smoking is not permitted in any of CANES Community Care Services offices or work sites including a Client’s home or residences.

CANES also recognizes Clients’ lifestyle choice within their own homes may include smoking. However, Clients must provide an environment that is free of smoke while employees/volunteers are providing service in the Client’s home.

Should Clients not provide a smoke free environment, employees/volunteers may refuse to provide service at any time in accordance with **the Smoke Free Ontario Act and Legislation.**

The work refusal cannot directly endanger the Client’s life, health or safety. Employees are also required to respond to all Client emergency calls.

PROCEDURES:

1. CANES requires that Clients and their guest(s) not smoke in the presence of employees/volunteers. We encourage Clients to keep their residence well ventilated, use effective air filters, smokeless ashtrays, remote smoking devices and any other devices or means to reduce the amount of smoke in their home.
2. Presence of Second Hand Smoke and Emergency Calls/Urgent Services
If an Employee responds to a call or booking and finds that the Client and/or occupant of the Client's residence is smoking, the Employee will ask that the smoking be stopped. The Employee will stay to deliver all emergency calls or urgent services that are required. The Client will not be left in an unsafe condition. The Employee will complete an Accident/ Incident Report Form and forward the report to his/her Supervisor.
3. Presence of Second Hand Smoke when Completing Routine/Non Emergency Services

CANES will use the following procedure to address specific situations involving the presence of second hand smoke.

- a) Clients must use all available mechanical means (i.e. fans, windows...) to help the ventilation of the apartment prior to the Employee's arrival.
- b) If an Employee encounters someone smoking during the performance of his/her duties, he/she must stop work and inform the Client about this policy. The Employee should immediately request that the Client accommodate his/her right to work in a smoke free environment. The Employee may leave for 30 minutes from the time the smoking is stopped; the time in which the room is ventilating will not be made up unless there is free time in the schedule.
- c) If Client and the Employee are unable to arrive at a mutually agreed upon solution, the employee/volunteer has the right to leave the Client's home until the smoking materials are extinguished and the area is sufficiently ventilated.

In the event the employee/Volunteer leaves the Client's home:

- The Employee will inform their supervisor about the situation.
- The Supervisor will communicate to the Client about the work refusal.
- The Employee will provide emergency assistance to the Client if needed.
- The Employee will make sure that the Client is in a safe position before leaving.
- The Employee will promptly contact the Supervisor and document the work refusal.



- The Employee will be available to participate in an investigation.

4. A certified representative from the Health and Safety Committee and the Supervisor will conduct an investigation into the work refusal in the presence of the employee

5. If the Health and Safety Committee support the decision of the Employee the matter will then be referred to Nucleus Management to develop a solution that respects the Employee's right to work in a safe and healthy environment.

6. If the Health and Safety Committee does not support the work refusal and the Employee has reasonable grounds for believing that the work continues to be unsafe, the matter will be referred to the Ministry of Labour who will then conduct an inspection. It's decision will be final and management will institute any recommendations.

**NOTE
REGARDING
CLIENT RIGHTS:**

This procedure in no way infringes upon a Clients' right to lifestyle choices in their own homes. A Client may choose to smoke at any time with the understanding that this choice will violate an Employee's right not to work in an environment when someone is smoking. If this is found to be the case, this will lead to an interruption of particular services. It is a Client's right to make this choice.

TRAINING

CANES will have a mandatory training on health and safety for all employees annually. This will help to control Accidents/Incidents, illnesses, hazardous conditions and near misses in our Organization.

EVALUATION

The Joint Health and Safety committee will review all policy and procedures yearly.

See Also

- ✓ Work Refusal/Work Stoppage Policy and Procedure



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Section Heading: Risk Management	Board Approval Date: November 28, 2000
Policy Title: Records Management*	Review Dates: November 27, 2001, December 15, 2004, June, 5, 2006, May 1, 2008 Revised Date: January 2009

Policy Statement: CANES Community Care Services maintains confidential records in accordance with required legislation and standards of practice.

Purpose:

- To comply with recognized financial standards of records management
- To ensure that client, employee and volunteer information is kept confidential and used only for the purpose in which the information contained was collected.
- For the purpose of destroying of obsolete information in a uniform and ethical manner consistent with the standing principles of privacy and an individuals right to access their information.

Definition: Records refer to official paper documentation for financial, client, employee and volunteer management, which relates to the official CANES Community Care relationship to the third party. This information includes but is not limited to: financial documentation within 10 years, client assessments and signed consents, employee letters and performance appraisal documentation.

Procedures:

Responsibility

Action

The Privacy Officer

Ensures that records being destroyed are logged as ‘Destroyed’ and are an inventoried list of destroyed records is kept with the Privacy officer.
Orients new staff on their responsibilities to maintain confidential secure records and appropriate destruction of identifiable client information.

Director of Quality

As a component of Confidentiality Training for all staff and volunteers, also trains staff on acceptable records retention practices including destruction of records.
Trains Directors on appropriate records management practices and current legislation as applies to the agency and client safety.
Determines what is considered a client record.

Director of Finance

Maintains all financial records in a secure location.
Abides by and maintains strict adherence to the legislative and typical financial practices of records keeping and destruction.
Unless otherwise required, destroys financial documents that are over seven years old.
Maintains a copy of each funding approval for the organization.
Will not destroy any contracts in which the agency entered into.



Director of Human Resources

Determines what is considered part of the official employee/volunteer record.
Ensure that all employee records are maintained in a secure location.
Maintains employee records within the acceptable standards of records management.
Removes and destroys employee disciplinary documentation within the parameters of the agency Disciplinary Policy.
Destroys all documentation upon termination of employment, except that pertaining to application of employment, date of hire and most current performance review, signed forms and documentation regarding termination of employment.
Is required to comply with an employees written request to view their employee file, pending the appropriate notice (24 hours minimum) is provided to the Director by the employee

Program Director

Ensure that all client records are maintained in the agency centralized filing secure location.
Maintains all terminated client records, including proper storage for a minimum of one year.
Clients terminated within the current calendar year will be maintained in a secure location with the active client records.
Terminated client records older than one year but less than seven years will be maintained in a secure separate location. Any client file older than seven years will be destroyed using secure methods, as approved by the Director of Quality and the Privacy Officer.

Employee

Will not destroy client records without prior consent from the appropriate Program Director.
Are required to submit a request to appropriate Director to view their employee record, giving a minimum of 24 hours notice to the Director of Human Resources

Policy Reference: Privacy Policy
Ethics Policy
Related Forms: Client Assessment Package
New Hire Package

*Please note for the purposes of this policy, CANES does not refer to electronic files which are kept and maintained separately from “records”.



Section Heading: Risk Management	Board Approval Date: November 28, 2000
Policy Title: The Continuous Risk Management Process	Review Dates: November 27, 2001, December 15, 2004, June 5, 2006, May 1, 2008 Revised Date: January 2009

Policy Statement:

CANES Community Care maintains a continuous risk management process.

Purpose: To have thorough strategies to identify and prevent risk to the agency, its staff and property. To also continuously monitor and revise risk management strategies for best practices and to achieve desired results.

Definition of Continuous Risk Management Process:

The risk management process includes, but is not limited to, the following activities:

Definition of Risk

Risk is defined as an imminent or potential harm to the agency, persons, property or reputation.

Definition of Near Miss

A near miss is defined as an event where, had the intervention been different, had the potential to have caused damage to the agency, persons, property or reputation. The damage was avoided through intervention.

1. Identifying Risk

- a) Listing the services CANES Community Care provides
- b) Identifying activities involved in each service
- c) Identifying current and potential risk (worst case scenarios) for each activity according to:
 - Abuse (physical, emotional, psychological, sexual, financial)
 - Personal injury (it is accident related e.g. a person slips and breaks his/her wrist)
 - Medical (medical condition including cognitive, mental health of the service provider and client. It also includes such procedures as delegated acts, administration of medication)
 - Environmental (e.g. fumes, smoking, pets, equipment, setting, general sanitation)
 - Property
 - Financial
 - Reputation/goodwill
 - Other (e.g. building shutdown, natural disasters)

The risk can be the result of the people involved, the setting, equipment and/or the service.

2. Prioritizing Risk

- Identify severity of risk by activity [high, medium, low, near miss].

3. Develop Strategies to Address Risks

Identifying:

- a) What methods will be taken to:
 - Prevent the risk from occurring
 - Decrease the risk
 - Transfer responsibility
 - Insure against
 - Stopping the activity
- b) What actions will be taken
- c) Who is responsible
- d) When it is to be initiated. There is no completion date as risk management is ongoing
- e) What resources are required

4. Establish Indicators and Targets for Monitoring Effectiveness of Risk Management Process

5. Collect Information/Data and Analyze

6. Implement Continuous Quality Improvement as Required

Procedures:

<i>Responsibility</i>	<i>Action</i>
Board of Directors	Ensures a risk management process is in place. Determines with the Chief Executive Officer the risks CANES Community Care is willing to accept.
Chief Executive Officer	Ensures a risk management process is carried out and functional.
Director of Quality	Continuously monitors and educates employees/volunteers on risk management processes Updates procedures to address trends in risk management.
Employee/Volunteer	Participate in the risk management process.

Policy Reference: Operational Planning Policy

Related Forms: Communication Plan

Continuous Quality Improvement Plan

Human Resources Plan

Information Management Plan



Section Heading: Risk Management	Board Approval Date: November 28, 2000
Policy Title: Leadership	Review Dates: November 27, 2001, December 15, 2004, June 5, 2006, May 1, 2008 Revised Date: January 2009

Policy Statement:

CANES Community Care will ensure qualified Chief Executive Officer and Board members are retained.

Purpose: To have qualified leaders actively capable of dealing with all types of risk issues.

<i>Responsibility</i>	<i>Action</i>
Nomination Committee	Ensures new board members have the commitment and relevant skills required to carry out their duties.
Chair of the Board	Ensures the board members receive orientation and ongoing education/training on their financial and legal responsibilities. Conducts performance reviews of the Chief Executive Officer on a regular basis.
Board of Directors	Develops job description for the Chief Executive Officer specifying risk management responsibilities in addition to educational credentials, management experience and interpersonal skills.
Chief Executive Officer	Delegates the development of Job Descriptions, the posting of open job positions within the agency and other related functions to the Director of Human Resources.
Director of Human Resources	Ensures specific job descriptions are completed for all positions within the organization specifying scope responsibilities in addition to educational credentials, relevant experience and interpersonal skills.
Program Directors	Ensure hiring practices are consistent with achieving CANES Community Care Services values and objectives. Ensure performance reviews of employees and ongoing monitoring of volunteers are conducted.



Section Heading: Risk Management	Board Approval Date: November 27, 2001
Policy Title: Ethics	Review Dates: December, 15, 2004, June 5, 2006, May 1, 2008 Revised Date: January 2009

Policy Statement:

CANES Community Care Services requires all employees, volunteers, clients and stakeholders adhere to and foster an agency environment that is ethical in all practices.

Purpose: The purpose of this ethics policy is to support a culture of openness, trust and integrity in all CANES Community Care Services business practices.

CANES Community Care Services is dedicated to working with employees, volunteers, clients and stakeholders of the organization to provide support services that will enable our clients to remain in the community environment in safety and dignity. The CANES Community Care Services Code of Conduct as outlined in the Human Resources Manual provides guidance for decision making and actions committed to strict adherence to this policy in our daily work.

This policy demonstrates the commitment to the responsible use of CANES Community Care Services assets, to provide accurate, complete and objective information, to respect the confidentiality of financial and other information, to act in good faith and exercise due diligence in all we do, to comply with all legislation and regulations and to proactively promote ethical behaviour.

Definitions: CANES Community Care defines ethics as a standard of the agency’s values common morals and any action taken where good judgment and right and wrong are determined.

An Ethical Dilemma is defined as a conflict of morals and values with those of the client/caregiver and family.

Our Values

- | | |
|-----------------------|-----------------------------|
| Client-centered care | Respect for the individual |
| High Quality Services | Ongoing service improvement |
| Self-reliance | Partnerships |
| Confidentiality | Inclusiveness and fairness |

Vision

In an effort to support our mission, we are willing to take prudent risks. We strive to be proactive, innovative and creative in all we do.

Code of Ethics

The summary code of ethics includes the following provisions:

CANES Community Care Services employees and volunteers must:

- Be honest and ethical in their conduct, including ethical handling of actual or apparent conflicts of interest between personal and professional relationships.
- Comply with applicable government legislation and regulations.



- Maintain the confidentiality of information entrusted to them by CANES except when authorized or legally obligated to disclose.
- Deal fairly with CANES Community Care Clients partners, stakeholders, employees and volunteers.
- Proactively promote ethical behaviour as a responsible partner among peers in the work environment.
- Protect and ensure the proper use of company assets.
- Prohibit improper or fraudulent influence over the External Auditor.

Our People

CANES Community Care Services is committed to provide a work environment that values diversity among its employees and volunteers. All Human Resources policies and activities are intended to create a respectful workplace where every individual has the opportunity to reach their highest potential.

Employees are provided opportunities regardless of race, colour, religion, gender, national origin, sexual orientation, marital status, age or disability. These policies apply to both applicants and employees in all phases of employment including recruiting, hiring, placement, training, development, transfer, promotion, demotion, performance reviews, compensation, benefits and separation of employment.

CANES Community Care will evaluate how we are living up to our code of ethics by requesting feedback on a regular basis from our employees, volunteers and clients. We will provide all of our stakeholders a mechanism to report unethical conduct. We will begin with employee orientation and regularly communicate all of these expectations to staff and volunteers.

Our Clients

We are dedicated to 100% client satisfaction. We are devoted to developing a strong client relationship and are passionate about exceeding client expectations. We dedicate ourselves to anticipating the changing needs of clients and creating timely, innovative and superior programs and services.

Conflict of Interest

The underlying principle of 'conflict of interest' is that employees and volunteers should avoid any activity, investment or interest that might reflect unfavourably on the reputation of CANES Community Care Services.

As representatives of CANES Community Care Services, employees and volunteers are obligated to place the interest of CANES Community Care Services, in any transaction involving CANES Community Care Services, ahead of any personal interest or personal gain, and to disclose all facts in any situation where a potential conflict of interest may arise.

Employees and volunteers are expected to seek clarification of and discuss any questions about potential conflict of interest with their supervisor, the Human Resources Department or speak to the agency Privacy Officer.

CANES Property and Information

Employees and volunteers are expected to protect and maintain confidentiality regarding CANES Community Care Services property including cash, equipment, records and employees/volunteer and client information.



Reporting of Ethical Dilemmas

All issues regarding breach of this policy or ethical concerns are to be immediately reported to the employee/volunteers direct supervisor. It is then the responsibility of the direct supervisor to report the concern or breach to the agency ethical committee. This is done by reporting to the committee chair person. The committee membership will be posted on agency Health and Safety Boards within the agency.

Relate Policy: Code of Conduct

Behaviour Unbecoming

Service Limitations

Abuse Awareness

Harassment

Related Forms: For further information refer to the Community Ethics Network Ethical Toolkit



Section Heading: Risk Management	Board Approval Date: November 28, 2000
Policy Title: Orientation of Employees and Volunteers	Review Dates: December 15, 2004, June 5, 2006, May 1, 2008 Revised Date: January 2009

Policy Statement:

Employees, volunteers and Board members will receive orientation to CANES Community Care, their role and clear scope of responsibility.

Purpose: To responsibly provide orientation to employees, volunteers and Board members as a component of ensuring their adequate knowledge, skills and ability to perform the duties of their job. Please refer to the Human Resources Policy, Orientation for a full description of the orientation operational procedures.

Procedures

Responsibility

Action

Board of Directors

Provides adequate resources to ensure orientation of employees, volunteers and Board members is appropriate.

Chief Executive Officer

Ensures clear communication with Director/Manager/Supervisor that is consistent with the agency’s values and objectives to have Directors/Managers/Supervisors who are competent to orient new employees.

Director of Human Resources

Provides each new employee/volunteer with an orientation to CANES Community Care prior to the individual starting his/her position. This includes:

- Mission, vision, values of the organization
- History of the organization
- Services provided
- Organizational structure
- Reporting relationships
- Job position/description
- Health and Safety Committee
- Client Bill of Rights
- CANES Policies and Procedures
- Reporting requirements



Responsibility

Director/Manager/
Supervisor

Action

Provides each new employee/volunteer with information specific to his/her tasks **prior** to the individual starting his/her position.

This includes:

- Specific tasks to be completed
- Detailed scope of responsibility.
- Health and Safety protocol
- Supervision
- Using equipment

Related Policy: Refer to Human Resources and Health and Safety policy sections for detailed information

Related Forms: Orientation Package
Program Manual



Section Heading: Risk Management	Board Approval Date: November 28, 2000
Policy Title: Operational Planning	Review Dates: November 27, 2001, December 15, 2004, June 5, 2006, May 1, 2008 Revised Date: January 2009

Policy Statement:

CANES Community Care will develop and maintain operational plans annually, including Communications, Information Management, Human Resources and Quality Improvement to make informed decisions based on the level of risk and specific needs of the organization.

Purpose: To monitor usage of resources and manage the organizations resources throughout the year.

<i>Responsibility</i>	<i>Action</i>
Board of Directors	Annually approves the Organization Strategic Plan.
Chief Executive Officer	Delegates responsibility of development of the operational plan to the relevant Director. Approves the operational plans including all budgetary ramifications. Provides leadership training and development opportunities to the Director/Manager/Supervisor.
Program Director	Develops operational plans collaboratively to share resources and anticipate changes. Ensures that the operational plan aligns with the organization Strategic Plan. Ensures operational plans are carried out and development of program coordination workplans align with operational plans
Program Coordinators/Managers/Supervisors	Deliver programs and services to clients in a manner that promotes and achieves the set out operational plans of the program. Service delivery may include coordinating training, applying new systems and reporting to Directors on outcomes
Employees/Volunteers	Participate in training. Report to supervisors any training needs and client issues



Section Heading: Risk Management	Board Approval Date: November 28, 2000
Policy Title: CANES Community Care Insurance	Review Dates: December 15, 2004, June 5, 2006, May 1, 2008 Revised Date: January 2009

Policy Statement:

CANES will maintain adequate insurance including but not limited to:

- Commercial general liability insurance
- Directors’ and Officers’ liability insurance
- Professional liability/malpractice insurance (if appropriate)
- Accidental death and dismemberment coverage (often included in group membership plans)
- Property insurance
- Employee dishonesty insurance
- Crime insurance.

Purpose: To ensure adequate insurance for all types of possible liability for all employees, volunteers and Board of Directors and CANES Community Care.

<i>Responsibility</i>	<i>Action</i>
Chief Executive Officer	Obtains recommendations as to the amount and type of insurance required. Reviews and updates annually.
Board Of Directors	Ensures that the organization is properly insured, by delegating responsibility for the procurement of adequate insurance to the Chief Executive Officer.
Chief Executive Officer	Ensures premiums are paid.
Financial Manager	Obtains and retains copy of policies on premises. Monitors claims made and adjusts insurance requirements appropriately. Identifies and takes actions to reduce claims.

Section Heading: Risk Management	Board Approval Date: February 26, 2008
Policy Title: Personal Support Worker Medication Policy Frame Work and Guidelines	Review Dates: June 2009 Revised Date:

Policy Statement: The CANES Community Care Services Personal Support Worker Medication Policy Frame Work and Guidelines applies to all agencies funded under the Ministry of Health and Long Term Care that employs Personal Support Workers (PSW) who are involved in the management of and/or assistance with client medication and are to be applied in conjunction with the CANES Client Care Guidelines.

Definitions:

1. Assist means to **help** clients of CANES Community Care Services to administer their own medications. Assistance includes but is not limited to handing a client a device, such as a Dossette or Blister Pack, steadying a client’s hand to apply their own eye drops, removing the lid of a pill bottle and handing it to a client to measure their own dosage. These examples are intended to demonstrate the definition of assist and are not a complete list.
2. Administer means to give a client of CANES Community Care Services their medication directly. Administration includes but is not limited to dispensing medication from its packaging for the purpose of measuring dosage, placing pills in a client’s mouth, piercing the skin of a client for the purpose of administering insulin or checking blood sugar levels. These examples are intended to demonstrate the definition of administer and are not a complete list. *Administering medications is beyond the scope of practice of the PSW.*

Procedures:

Responsibility

Action

Program Coordinator

- Assesses the client and notes on the CANES Community Care Care Plan where any client is taking ongoing, regular medications, whether medication is self administered, requires a reminder or Dossette/Blister Pack
- Assesses the client and logs with respect to the Client Assessment, and all medications as disclosed by client and/or Substitute Decision Maker.
- Informs the client about the scope of responsibilities of client, employees and volunteers.
- Explains the process for determining a need to intervene and assist in the management or administration of client’s medication that includes an assessment of client needs.
- Requires the client to sign the CANES Medication Consent Form.
- Defines procedures to follow by both client and PSW, where medications cannot be stored in and dispensed from a medication aid.
- Provides information to the client about Dossette/Blister Pack and about which pharmacies provide the Dossette/Blister Pack

service.

- Informs and trains staff on their scope of responsibilities.
- Arranges for staff training in cases requiring Delegated Act training by a Registered Nurse.
- Schedules the staff for the medication reminders
- Follows up* on reports of medication errors using the CANES Medication Error Form.

***Note:** Follow up may include but is not limited to: referring clients to appropriate allied health professionals (Community Nursing, Physician): discontinuation of service if client is unable to self-administer medication: reassessment to determine more appropriate levels of service: further PSW training to perform duties of medication assistance safely.

Employees

Personal Support Workers will follow the guidelines and protocol of the Personal Support Worker Medication Policy Frame Work and Guidelines and any other applicable CANES Community Care policy.

LIMITED ROLE OF THE PSW ASSISTING WITH MEDICATION WHEN SPECIFIED IN THE CANES CARE PLAN

Administering medications is beyond the scope of practice of the PSW.

PSW's may, in certain instances, assist clients with specialized types of medication management where it is required. Under this circumstance ONLY, the PSW will be trained by a Registered Nurse to ensure that the safe practice of assisting the client is safely delegated, this only takes place from a Registered Nurse to a PSW and is considered a Delegated Act, whereby the CANES PSW will continue to assist the client once the training has taken place. Delegated Acts follow the CANES Delegated Acts Policy and require staff to be formally trained by a Registered Nurse. For further information please refer the CANES Delegated Acts Policy.

PSW's may assist with medication management according to the CANES Community Care Client Care Plan. Safe practice in assisting includes:

- Reminding the client to take a medication.
- Bringing the medication container to the client as directed by client.
- Bringing pre-poured medications, pre-filled syringes, or pill boxes to the client.
- Loosening or removing container lids or opening Blister Packs.
- Reading the prescription label to the client.
- Checking the dosage against the medication label.
- Providing water or other fluids as needed.
- Supervising the client as the client pours the medication into his/her hand, measuring spoon or a cup.

- Steadying the client's hand while he/she pours medications or administers eye drops, nasal sprays and applies prescription creams.
- Bringing to client medication that is being kept in a locked, or secure location in the home, at the request of the Substitute Decision Maker and/or the client; and access is restricted.

REPORT TO YOUR SUPERVISOR IF THE CLIENT:

- Does not take medications correctly;
- Does not know why the medication is being taken or:
 - The correct dosage
 - The time
 - The schedule
 - Refuses to take the medication
 - Forgets to take the medication
 - Omits a dose
- Requests to take a double dose if one is missed. **THE PSW WILL NOT ASSIST IN THIS SITUATION.**
- Shows any perceived side effects, or unusual behaviour.
- Uses medication from a bottle that is unlabelled or has another person's name on it.
- Wishes to take medication other than those in their Blister Pack or Dosette.
- Appears to be inconsistent administering their medications as previously observed.
- Requests assistance not in accordance with the CANES Care Plan.
- Appears to have medications improperly stored i.e. not as per the labeled instructions.

Note: Filling Dosettes is the responsibility of the Registered Nurse the Pharmacist or Substitute Decision Maker. **IT IS NOT THE ROLE OF THE PSW.**

Related Policy: Review the Client Services Guidelines for more detail

Related Forms: Medication Consent Forms

Client Assessment Package

Section Heading: Risk Management	Board Approval Date: November 28, 2000
Policy Title: Reporting Client Conditions	Review Dates: December 15, 2004, June 5, 2006, May 1, 2008 Revised Date: January 2009

Policy Statement:

All employees and volunteers must report any significant changes or concerns related to clients' conditions.

Purpose: To help CANES determine the level of service, risk, problems and solutions in consultation with the client, caregiver and employee/volunteer.

Responsibility

Action

Director of Human Resources

Provides thorough orientation for all employee/volunteers including the importance of reporting client changes, what to report to whom, when and how.
Ensures employees/volunteers are trained to identify client changes.

Program Director/
Manager/Supervisor/
Program Coordinator

Reports significant changes in a client's condition to the client's contact person or physician with client's permission.
Reports regularly and as required to any funding agency regarding client changes (for example, the Community Care Access Centre). Documents in a client's file any significant changes in the client's condition and actions taken.
Revises the client's care plan based on the individual's specific needs and as directed by appropriate Power of Attorney, Care giver, funder, etc. as applicable.
Reassesses every client on an annual basis to determine continued needs including participation in programming and ongoing eligibility for services.

Employee/Volunteer

Reports immediately any significant observable deterioration in the client's mental, physical and/or emotional condition to the Director/Manager/Supervisor.
Reports to the Director/Manager/Supervisor any occurrence that could have an effect on the client or requires other providers or caregivers to be notified.
Documents, as required services received by client and any noticeable change in client condition.
Implements revised care plan.

Related Policy: Please refer to Client Service Delivery Guidelines for detailed description of service delivery standards and reporting/documentation requirements

Related Forms: Event Report
Care Plan
CCAC Significant Event Reporting Form



Supportive Housing Communication Log
Consent to Release Information

Section Heading: Risk Management	Board Approval Date: November 28, 2000
Policy Title: Withdrawal of Services	Review Dates: December 15, 2004, June 5, 2006, May 1, 2008 Revised Date: January 2009

Policy Statement:

CANES Community Care reserves the right to withdraw services to a client, only after all avenues of intervention have been exhausted.

Purpose: To reduce the potential for adverse events to employees/volunteers the client or agency. CANES Community Care will also make every attempt to continue to provide services to the client until more suitable arrangements can be made, in the best interest of the client.

Responsibility

Action

Chief Executive Officer

Will have final authority with consultation from the Program Director to withdraw service from a client

Program Director/
Manager/Supervisor

Investigates all issues of client care.
Contacts the client/caregiver or client’s emergency contact person to initiate case conferences to attempt to resolve the issue.
Where the client is a Community Care Access Centre (CCAC) client, the CCAC will be notified and requested to participate in case conferences.
Will keep the CCAC informed once it has been determined by the agency that services may be withdrawn.
Completes any applicable forms required by the agency and/or funder.
Documents the risk situation and the steps taken to attempt to improve the situation before the withdrawal of the service.
Approves all requests for withdrawal of service e.g. employee/volunteer safety, inability to meet client’s needs, non-payment.
Consults with the CCAC and other involved parties once services have been withdrawn to develop learning based on outcomes from the situation.

Employee/Volunteer

Identify and assess the level of risk at each encounter with a client/caregiver in order to communicate any changes to client condition (people, setting, services and equipment).
Leave the situation immediately if they determine they are in a dangerous situation.
Notify the Director/Manager/Supervisor immediately of the situation and determine with the Director/Manager/Supervisor and the client/caregiver alternative arrangements.

Related Policy: Please refer to Health and Safety and Human Resources Policies for details on safe conduct.

Related Forms: Event Report



Communication Log



Section Heading: Risk Management	Board Approval Date: November 28, 2000
Policy Title: Informing Clients/Caregivers and Funders of Service Limitations	Review Dates: December 15, 2004, June 5, 2006, May 1, 2008 Revised Date: January 2009

Policy Statement:

CANES Community Care informs all clients and/or caregivers and funders of CANES’ service limitations.

Purpose: To enable clients and/or caregivers to make informed decisions about the level of risk that CANES is prepared to accept.

Responsibility

Action

Program Director/
Manager/Supervisor

Informs clients of the limits of the service, prior to initiation of service.
Develops with client/caregiver a care plan including approved duties CANES may perform
Retains information in client’s file.
Provides a copy of the information to the client.

Employee/Volunteer

Reports any changes in client condition to Director/Manager/Supervisor
Performs ONLY those duties specified in the client care plan.
Reports any requests by the client/caregiver to perform duties outside of the care plan

Client/Caregiver

Responsible to inform the CANES Manager/Supervisor of any changes to their condition and any change to service needs.

Related Policy: Please refer to Client Service Delivery Guidelines for Assessment, Reassessment Policy and relevant information for client services.

Related Forms: Client Assessment Package
Consent Forms
Financial Eligibility Form



Section Heading: Risk Management	Board Approval Date: November 28, 2000
Policy Title: After Hours/On Call	Review Dates: December 15, 2004, June 5 2006, May 1, 2008 Revised Date: January 2009

Policy Statement:

CANES will maintain an on-call after hour’s system for paid staff/volunteers who are working outside of regular office hours.

Purpose: To ensure employees/volunteer have access to assistance in risk situations.

<i>Responsibility</i>	<i>Action</i>
Chief Executive Officer	Approves the on-call system as it relates to risk management, and any related costs.
Program Director/Director of Human Resources	Will be responsible to arrive on site in the event of a significant or Sentinel Event to provide direction and support to employees delivering services after hours to CANES Community Care clients. Responds to emergency situations including sentinel events as per agency protocol and policy.
Program Director	Maintains an on call rotation listing which is distributed to each on call employee.
Manager/Supervisor	<p>Informs all employees/volunteers of the on-call system and how to access it.</p> <p>Monitors the on-call system to identify areas for improvement.</p> <p>Reviews situations for appropriate action.</p> <p>Reports information to appropriate staff.</p> <p>As appropriate, arranges for employees to be compensated for after-hours, on-call work.</p>
Employees/Volunteers	<p>Are responsible to know and have with them at all times the required information to access on call support.</p> <p>Will inform on call support of any change to schedule outside regular office hours immediately.</p> <p>In the event of an emergency, significant event or sentinel event, employees will immediately contact 911. Once the event has been reported to 911 the employee will inform the operator that they are required to contact the CANES emergency reporting system and do so once the operator has sufficient information to dispatch emergency support.</p> <p>In the event of personal injury the employee will immediately access medical attention and only at that point will contact on call to inform of incident.</p>

Related Policy: Sentinel Event
Event Reporting



Related Forms: Event Report
Incident Report



Section Heading: Risk Management	Board Approval Date: November 28, 2000
Policy Title: Defining and Handling Emergencies	Review Dates: November 27, 2001, December 15, 2004, June 5 2006, May 1, 2008 Revised Date: January 2009

Policy Statement: All employees and volunteers must respond to emergency situations appropriately.

Purpose: To ensure client and personal safety.

Definition: Emergencies are defined as any circumstances that put clients, caregivers, employees or volunteers at risk of suffering injury or harm. Potential emergency situations may include, but are not limited to, the following:

- Medical emergencies
- Fire
- Evacuation
- Occupational accident
- Environmental disaster
- Natural disaster
- Chemical disaster/spill
- Motor vehicle accident
- Severe weather

Responsibility

Action

Program Director

Identifies potential emergency situations.

Establishes preventative measures to avoid, reduce and eliminate risk factors that may lead to emergency situations.

Ensures employees/volunteers are trained at orientation and regular in-service education to assess and respond to emergency situations in a quick, effective and appropriate manner.

Outlines specific communication protocol to ensure appropriate agency authority is notified about the emergency.

Manager/Supervisor

Stores client information regarding family contact, pertinent medical and care information in a readily available format for quick retrieval and dissemination.

Puts in writing, clearly defined roles and responsibilities of staff and volunteers to enable a systematic response to emergencies.

Outlines external supports and contingency plans.

Plans practice drills on scheduled basis (i.e. monthly fire drills).

Evaluates, once calm and normalcy is attained, the efforts and procedures carried out during the emergency situation.

Documents all emergencies: what occurred, what action was taken and areas for improvement.



Responsibility

Action

Employees/Volunteer

Ensures appropriate corrective action occurs when efforts and/or procedures do not address the situation.

Report any emergencies to their manager/supervisor.

Follow CANES' procedures that have been established for the specific emergency according to the CANES Community Care Emergency Preparedness Manual.

Related Policy: Please refer to the Human Resources Policy manual for detailed instruction on employee conduct in an emergency

Related Form: Incident Report

Event Report

Communication Log

Section Heading: Risk Management	Board Approval Date: November 28, 2000
Policy Title: Unusual Incidents	Review Dates: November 27, 2001, December 15, 2004, June 5, 2006, May 1, 2008 Revised Date: January 2009

Policy Statement: All employees and volunteers must respond to unusual incidents appropriately.

Purpose: To ensure client and employee/volunteer well being.

Definition: Unusual incidents are those situations that occur during the delivery of service which jeopardize the well being and safety of clients, caregivers, Employees and volunteers. Unusual incidents may include, but are not limited to, the following:

- Falls
- Minor injuries
- Verbal/physical outbursts
- Not seen/Not found visit
- Inappropriate behaviour
- Illness
- Unresponsiveness
- Accusation of theft

Responsibility

Action

Program Director/
Manager/Supervisor

Identifies potential unusual incidents.
Establishes preventative measures to avoid, reduce and eliminate the potential for an occurrence.
Ensures staff/volunteers are trained at orientation and regular in-service education, to assess, respond, intervene, treat or direct unusual incidents in an effective and appropriate manner.
Outlines protocol for employees/volunteers to quickly access assistance and/or support from the manager/supervisor.
Notifies family/caregiver/Power of Attorney of the incident.

Employee/Volunteer

Maintains necessary documentation and forwards to appropriate authorities.
Puts in writing, clearly defined roles and responsibilities of the employee and volunteers and time frames in carrying out a response to the incident.
Reviews unusual incidents and identifies areas requiring remedial action, employee support, further documentation and follow-up.
Forwards reports to the Joint Health and Safety Committee/health and safety representative or funder (when appropriate).
Report any unusual incidents to their manager/supervisor.
Follow CANES' procedures that have been established for the specific incident.



Related Policy: Please refer to the CANES Community Care Health and Safety Policy manual for more detailed instruction.

Related Forms: Incident Report
Event Report Form

Section Heading: Risk Management	Board Approval Date: November 28, 2000
Policy Title: Sentinel Events	Review Dates: December 15, 2004, June 5, 2006, May 1, 2008 Revised Date: January 2009

Policy Statement:
CANES Community Care Services has a clear plan and policy to respond to sentinel events.

Definition: An unexpected incident related to system or process deficiencies, which leads to death and/or major or enduring loss of physical or mental function for a recipient of CANES Community Care Services.

Purpose: To respond to all Sentinel events in the best interest of all parties involved and ensure that serious circumstances are used as learning for the future.

Responsibility

Action

Chief Executive Officer
Or designate

- Notifies the Chair of the Board of Directors
- Notifies the Program Coordinator from the Ministry of Health
- Make arrangements to comply with any requests by the Police or Coroner during the investigation

Employee/Volunteer

- In the event of death or serious injury to a client employee/volunteer call 911 immediately for an ambulance.
- The employee/volunteer is required to follow the instructions of the emergency operator until emergency personnel arrive and take control of the scene.
- When emergency personnel arrive the CANES Community Care employee/volunteer will call the office, if this has not been done already, to speak directly to and inform their manager of the situation.
- During regular business hours, in all circumstances the employee will report to a live person, if their direct supervisor is unavailable, they will speak to a senior manager or the Chief Executive Officer.
- If after hours the employee will call the on call phone number and report to the on call support person.
- Once notified, the Supervisor, Manager or Chief Executive Officer will immediately report to the scene.

The employee at the scene at time of death will remain at the scene and make themselves available to answer questions by the senior manager, Police and Coroner.



Responsibility

Action

Manager/Supervisor
Or designate

- Notifies the Chief Executive Officer if they have not already been informed.
- Will contact the family members, friends, caregivers and any other relevant supports required.
- Make arrangements for replacement staff where necessary.
- Employees at the scene at the time of a death will remain at the scene until advised otherwise by the Chief Executive Officer, Police or Coroner
- Employees, Supervisors, Manager and the Chief Executive Officer will ensure all necessary documentation is completed surrounding the circumstances leading to a death.

Follow up

Related Policy: Medication Management
Reporting Client Conditions
Defining and Handling Emergencies
Unusual Incidents
Related Forms: Event Report
Communication Log

Section Heading: Risk Management	Board Approval Date: November 28, 2000
Policy Title: Abuse Awareness	Review Dates: November 27, 2001, December 15, 2004, June 5, 2006, May 1, 2008 Revised Date: January 2009

Policy Statement: Abuse, in any form, will not be tolerated or condoned.

Definition: Abuse may be sexual, physical, verbal, financial or psychological. It may be actual mistreatment or injury or threats. It can be perpetrated by a variety of persons including employees, volunteers, caregivers and clients.

PHYSICAL - physical abuse is defined as an individual being physically hurt, injured or killed; including but not exclusive to: hitting, shaking, squeezing, burning, biting, pinching, scratching, suffocation, inappropriate handling and inappropriate use of restraint.

SEXUAL - sexual abuse is defined as any unwanted or forced sexual contact, unwanted (inappropriate) touching or unwanted displays of sexual parts, threats or harm or coercion in connection with sexual activity.

VERBAL - verbal abuse is defined as any communication towards an individual that may be reasonably perceived to be demeaning, seductive, suggestive, exploitive, insulting, derogatory or humiliating including but not limited to: sarcasm, swearing, racial slurs, teasing, and inappropriate tone of voice.

EMOTIONAL - emotional abuse is defined as any verbal or non-verbal behaviour which demonstrates disrespect and negatively affects the individual's confidence or self-esteem. Such behaviours include but are not limited to: retaliation, intimidation, manipulation, taunting, and insensitivity to the individual's culture, race, religious practices, economic status and education.

FINANCIAL EXPLOITATION - financial exploitation is defined as the denial of access to, and control over, individual's own funds and the misuse of their financial resources.

NEGLECT - neglect is defined as acts of omission, including ignoring nutritional, medical or other physical needs, the withholding of the necessities of life, the failure to provide required medical care or appropriate education services; or any failure to provide necessary care, assistance, guidance or attention to an individual that causes, or so reasonably likely to cause the individual within a short period of time serious physical, mental or emotional harm or substantial damage to or loss of assets. Neglect can include but is not limited to:

- living in unsanitary conditions
- suffering from an untreated disease or illness
- creating a hazardous situation that will likely cause serious physical harm to the individual or others or cause substantial damage to or loss of assets
- unnecessary medical treatment
- loneliness or isolation

- inappropriate response times to personal needs
- not washing, feeding or toileting an individual

Purpose: To protect clients, caregivers, employees and volunteers from abuse.

Responsibility

Action

Director of Human Resources

Ensures orientation and ongoing education includes:

- What constitutes abuse
- Recognition
- Prevention
- Process for reporting
- Legal and moral reporting responsibilities of employees/volunteers.

Ensures appropriate support to an abused individual (i.e. employees, volunteer, client, caregiver) including reporting and documentation.

Ensures immediate investigation of alleged abuse.

Ensures employees and volunteers follow requirements.

Ensures that any consequences for abuse are fair and meaningful to all involved e.g. immediate disciplinary action, which may include dismissal for paid staff and volunteers.

Manager/Supervisor

Works with everyone involved e.g. client, family, paid staff, volunteers for an appropriate resolution of the situation.

Employee/Volunteer

Report immediately to their manager/supervisor any knowledge of abuse (i.e. complaint, allegation or witness of abuse or recipient of abuse)

After discussion with the manager/supervisor immediately reports the abuse to the appropriate authority (e.g. the police and/or mental health agencies).

Document immediately the situation (e.g. date, time, location, conversations, observations of bruises etc. in the client's file).

Abuse of Clients by Employees/Volunteers

Manager/Supervisor

Investigates and documents all allegations of paid staff/volunteer abuse of clients.

Includes the opportunity for the accused paid staff/volunteer to present his/her side.

Reviews results and recommendations with the Chief Executive Officer.

Director of Human Resources

Consults legal counsel and/or the Union as required.

Informs client of options.

Advises the paid staff/volunteer in writing of the results of the investigation.



Responsibility

Action

Ensures all documentation is kept as directed by CANES' lawyer.

Abuse of Employees/Volunteers by Clients/Caregivers

Employee/Volunteer

Report all incidents of abuse to their manager/supervisor.

Manager/Supervisor

Removes the employee/volunteer from any potentially dangerous situation.

Documents and investigates the alleged abuse immediately.

Includes client, caregiver, and employee/volunteer in the investigation.

Consults with the Program Director concerning the appropriate course of action.

Informs employee/volunteers of their options (e.g. calling the police).

Discusses the results with the employee/volunteer and the client.

Also sends the results to the client in writing.

Retains all documentation as directed by CANES Community Care lawyer.

Discusses course of action as appropriate with the funder.

Related Policy: Client Bill of Rights

Behaviour Unbecoming

Harassment and Discrimination

Related Forms: Event Report

Section Heading: Risk Management	Board Approval Date: November 28, 2000
Policy Title: Harassment and Discrimination	Review Dates: November 27, 2001, December 15, 2004, June 5, 2006, May 1, 2008 Revised Date: January 2009

Policy Statement: CANES Community Care will not tolerate harassment or discrimination of any form. All employees and volunteers have the responsibility to respect the dignity and rights of co-workers, clients and the public.

Purpose: To ensure the rights of all employees/volunteers to work in an environment free of discrimination and harassment and to ensure clients are free of unlawful discrimination or harassment by paid staff/volunteers.

Definition: Harassment is defined generally in the Human Rights Code of Ontario, and for the purpose of this policy, as "engaging in a course of vexatious comment or conduct that is known or ought reasonably to be known to be unwelcome".

Personal harassment means objectionable conduct, comment or display made on either a one-time basis or continuous basis that demean, belittle, cause personal offence, humiliation or embarrassment to any individual.

Harassment within the meaning of the Ontario Human Rights Act means harassment on the basis of the following prohibited grounds of discrimination: race, national or ethnic or, colour, religion, age, sex, sexual orientation, marital status, family status, disability, conviction for an offence for which a pardon has been granted, or political affiliation or activity.

Discrimination on the basis of childbirth and pregnancy is covered under the category sex. Sexual harassment is as well deemed to be harassment on a prohibited ground of discrimination.

Sexual harassment means any conduct, comment, gesture or contact of a sexual nature, made on a one-time basis or in a continuous series of incidents,

a) that is likely to be deemed objectionable and cause discomfort, offence or humiliation to any individual or

b) that might, on reasonable grounds, be perceived by that individual as placing a condition of a sexual nature on employ or on any opportunity for training or promotion. Harassment may be personal, sexual, racial or ethnic.

Discrimination is defined as treating one person unfairly over another according to factors unrelated to their ability or potential, such as age, disability, sex, or national origin.

Responsibility

Board of Directors

Action

Approve the harassment prevention policy and delegate the enforcement of the policy to the Chief Executive Officer.

Responsibility

Action

Chief Executive Officer

Ensure agency’s harassment policy meets any legislative requirements (for example the Human Rights Code).

Director of Human Resources

Ensures every employee and volunteer receives orientation and ongoing education/training on harassment including:

- What constitutes harassment
- Recognition
- Prevention
- Process for reporting
- Handling of complaints
- Responsibilities concerning them
- His/her personal rights.

Ensure training attendance and content is documented.

Contact agency’s lawyer as appropriate when informed of an incident of harassment.

Promote a harassment free environment by encouraging employees and volunteers to identify actions or behaviours that they find offensive or unwelcome.

Ensure process in place for investigation and follow-up regardless of whom complaint is against.

Ensures CANES Community Care clients receive informational materials that describe the CANES policy.

Manager/Supervisor

Begins factual investigation of alleged harassment immediately. Immediately removes the accused or the accuser from the situation.¹

Gathers written statement from all involved.

Ensures appropriate support to individuals involved in the harassment complaint (i.e. employee, volunteer, client, caregiver) including documentation, information concerning legal rights through the Ontario Human Rights Commission.

¹Follows process in Union contract re: suspension.

Responsibility

Action

Informs employees, volunteers and clients of steps to take if harassment has occurred. These steps include:

- Do not respond to verbal harassment in kind. Inform the person that you consider such remarks to be harassment and that it will be reported. If others are present, obtain statements as witnesses to harassment.
- Where appropriate, leave the area as soon as possible and report the incident to your identified manager/supervisor
- In case of physical harassment, call for help and leave the area immediately. Report the incident immediately and get what ever assistance is required (e.g. medical attention, police involvement, counselling)
- Report the incident in writing.

Ensures both complainant and the alleged offender are interviewed (a support person being present is optional.)²

If complaint cannot be resolved conducts an investigation, which includes the interviewing of any witnesses.

Manager/Supervisor

Ensures if a resolution cannot be reached or if the action taken is unsatisfactory, the affected employee can choose to file a written appeal to the Chief Executive Officer or, if circumstances make it necessary, the Chair of the Board of Directors.

Ensures that any consequences for harassment or discrimination are fair and meaningful to all involved e.g. immediate disciplinary action, which may be up to, and including dismissal for employees and volunteers.³

Ensures that the reporting and discussions concerning any harassment are confidential.

Has process in place that all complaints of harassment are reported to him/her.

Ensures if harassment cannot be proven and there is some doubt, that the employee/volunteer/client is monitored.

Documents the investigation and results for any employee/volunteer/client who is disciplined.

Provides relevant information to police as deemed appropriate by CANES Community Care lawyer.

Employee/Volunteer

Report immediately to his/her manager/supervisor any knowledge of harassment (i.e. complaint, allegation or witness of harassment or recipient of harassment).

²If Union situation, include a Union representative if desired.

³If Union situation, follow discipline procedures as per collective agreement.



Responsibility

Client/Caregiver

Action

Is responsible to treat all CANES Community Care employees and volunteers with dignity and respect and abide by the policies of the agency.

Report immediately to CANES Community Care any knowledge of harassment (i.e. complaint, allegation or witness of harassment or recipient of harassment).

Related Policy: Behaviour Unbecoming
Abuse Awareness

Related Forms: Event Report



Section Heading: Risk Management	Board Approval Date: November 30, 2000
Policy Title: Financial Integrity	Review Dates: November 27, 2001, December 15, 2004, June 5, 2006, May 1, 2008 Revised Date: January 2009

Policy Statement: The Board of Directors must ensure the financial integrity of CANES.

Purpose: To ensure financial stability.

<i>Responsibility</i>	<i>Action</i>
Board of Directors	Reviews financial statements on a scheduled basis. Delegates to the agency Finance Committee the responsibility for carrying out the policy. See Finance Committee Terms of Reference.
Chief Executive Officer	Ensures expenditures are not more than what has been approved by the Board of Directors. Receives Board approval before creating a reserve fund or using any reserve funds. Ensures the financial practices follow the generally accepted accounting principles. Ensures methods are in place to minimize opportunities for theft or misappropriation of funds. Examples include: <ul style="list-style-type: none"> • Two signatures on cheques for amounts over \$5 000. • Annual audits in accordance with generally accepted auditing standards. Ensures accountability to funders. Ensures appropriate collection and documentation of all sources of revenues and fee collection.

Section Heading: Risk Management	Board Approval Date: October, 2005
Policy Title: Privacy	Review Dates: June 5, 2006, May 1, 2008 Revised Date: January 2009

Policy Statement: CANES Community Care Services will adhere to the 10 principles of information practices as stated in the Personal Health Information Protection Act in implementing the agency’s privacy policy. The following are the procedures that CANES Community Care Services will follow in order to fully comply with the Act and be responsible for the protection and handling of its client’s personal information throughout the agency.

Purpose:

Organizations must follow a code for the protection of personal information, which is included in the Act as Schedule 1. The code was developed by business, consumers, academics and government under the auspices of the Canadian Standards Association and it lists 10 principles of information practices. These principles form the ground rules for the collection, use and disclosure of personal information and give individuals control over how their personal information is handled.

Responsibility

Action

Accountability

CANES Community Care will comply with all the 10 principles of information practices as stated in the Act.
 CANES Community Care will appoint a Privacy Officer who will develop policies and procedures and will ensure that they are carried out.
 Complaint Procedures are instituted and followed.
 Clients/employees/volunteers need to know what information is collected, why it is collected and what it is being used for.
 Staff ensures that personal information is protected all client files are stored in a central location and are kept locked; all electronic client information is password protected and all client information, once determined unnecessary, is shredded.
 Personal information will be accessed and used only for the purpose it was collected.
 Information will be collected on a “need to know basis”.
 CANES Community Care will protect all personal information held by our agency or transferred to a third party for processing.
 Each employee/volunteer will receive a copy of, and sign, the CANES Privacy Policy on the day he/she starts employment with the agency.
 All employees/volunteers will receive training in the Privacy Policy as part of their orientation by the appropriate supervisor.
 Employees/volunteers will be given (verbally or in writing) only the information that is relevant to their role and work safety at CANES Community Care Services.
 Employees/volunteers will keep the information in confidence.



Responsibility

Action

Consent

Client/Volunteer determines what information she/he wants to share with CANES Community Care.

Client consent for all the information we need to collect must be obtained.

Employee/volunteer will explain clearly the client's right to limit or withdraw consent at anytime.

Employee/volunteer must ensure that client clearly understands the reason why the information is collected, used or disclosed— knowledgeable consent is required not informed consent.

Information must be collected without any pressure.

Employees/volunteers must understand that a client may be capable of giving consent to particular information at certain times not able to do so on other days--staff will act accordingly.

Employees/volunteers will discuss any concerns about a client's ability to understand and/or give consent with their immediate supervisor.

Employees/volunteers understand the concepts of: express/knowledgeable/implied consent when obtaining a client's consent for information.

*Consent may be express (written or verbal) or implied.

Consent may also be accepted electronically or by telephone.

The Employee will record the consent received to use, keep or disclose information.

The role of the client's substitute decision-maker will be respected.

Consent can be withdrawn.

The implications of withdrawing consent will be explained by the appropriate supervisor.

Consent will not be a condition of providing service, unless the information requested is required for purposes of delivering service i.e. address.



Responsibility

Action

Consent

* Under PHIPA you have the right to consent to how your information will be collected, used and shared—except in specific circumstances where the law authorizes healthcare providers to collect, use or share a person’s information without consent, such as reporting for public health safety.

Act allows for two types of consent:

Implied consent--Your healthcare provider will assume that you give consent for the sharing of your health information to provide healthcare to you without directly asking you or requiring you to sign a consent form. For example, when your family physician refers you to a specialist, he or she will assume that you give permission to share your health information with the specialist—unless you specifically refuse. In practice, PHIP permits your health information with other health care providers who are involved in your care unless you state otherwise.

Express consent—In certain situations, your healthcare provider is required to request your consent—either orally, in writing or electronically—before sharing your health information. This is called “express consent.” For example, if your healthcare provider is asked to disclose your personal health information to someone who is not a health information custodian under PHIPA, like your employer, he or she must obtain your express consent.

Accuracy

Employees must ensure that information collected and confirmed at time of assessment is correct.

Client information is reviewed regularly for accuracy, completeness and updated if necessary (date when information was obtained or updated will be recorded). Clients also resign their assessments to confirm the information contained is true and accurate.

Documentation on when and how personal information was updated will be kept on file.

When changes are made the parties to whom CANES provided the original information will be notified.

Referring parties will be advised of any incorrect information they provided the appropriate supervisor.

Any information received from a third party will be reviewed with the client to ensure that it is accurate and complete.

Safeguards

All staff/volunteers will wear identification badges at all times.

Filing cabinets containing personal information will be locked when not in use.

Old records will be locked in a designated location at all times.

All users of technological systems are responsible for their confidential password—and are not to disclose it to unauthorized individuals.

Store passwords in a file that is encrypted.

Client information when no longer required, will be disposed of



Responsibility

Action

securely by shredding.
Technological measures (passwords, encryption, firewalls etc.) will be used.
Virus software will be updated often.
Staff takes steps to ensure that visitors are not able to view computer screens.
Only urgent personal information can be faxed.
When sending personal information by mail mark it “confidential”.
When faxing personal information advise party prior to sending the confidential fax.
Confidential cover sheet is attached to all faxes.
Confidentiality Agreement will be signed by staff/volunteers.
Notes in database will not be altered—if information has changed use new data.
Agency will do its utmost to protect personal information against theft, loss, and copying, unauthorized access.
Staff is to use the briefcases provided to him/her by CANES to aid in carrying necessary schedules, documents, records etc. so that information is not placed loosely on the back seat of his/her car.
Original documents are not to be taken out of the office.
Employees/volunteers will be made aware of the importance of maintaining the security and confidentiality of personal information.
Regular employee training on security safeguards will be held.
Our security measures will be reviewed and updated regularly.

Access

Individuals will have access to their personal information.
Employees will respond promptly (within 24 hours) to client requests for access to personal information.
Responses to requests for access will be answered within a reasonable time—no more than 30 days.
Copies of information will be provided to the client at minimal or no cost.
The client will be advised of any charge for the information before the request is fulfilled.
The client’s decision to proceed or not to proceed once he/she is advised of any cost will be recorded.
Requests for access will be handled with minimal procedure where possible.
Employees/volunteers will respect the client’s right to access his/her information.
Clients/representatives will be advised to whom they should make a request for access to their information.
Employees/volunteers will be advised who is responsible to: grant access, make corrections, and handle complaints regarding privacy access.



Responsibility

Action

Privacy Officer, CANES Community Care employees will keep track of who has data, who has access to it and the Privacy Officer will make certain that the data is returned when employee/volunteer no longer need it.

CANES Community Care will have a clear and honest account of the client needs and service provided in their Client Record which will have forms such as: intake and assessment.

Personal information will not be disclosed unless CANES Community Care is sure of the identity of the requestor and that person’s right to the access of the information.

CANES Community Care will record the date of receipt of the request for the information.

Openness

CANES Community Care client/employees/volunteers will be informed that there are policies and procedures for the management of personal information.

These policies and procedures will be available and understood easily. Employees/volunteers will be trained so that they are familiar with the procedures for responding to individual inquiries.

The Privacy Officer will determine who the contact person is for more information—will use statements such as “if you want to see your file contact your coordinator”.

The name and contact information of the individual who has been identified as the “Privacy Officer” will be provided.

Information on how clients can complain to our agency will be provided.

Limits

Personal information will not be collected indiscriminately.

The purposes of the collection of personal information will be related to the CANES Community Care mission.

CANES Community Care will not deceive nor mislead clients about the purpose of the collection, use or disclosure of the personal information.

CANES Community Care will not collect new personal information when the existing can be used.

CANES Community Care will obtain new consent for any new purposes for the collection of personal information.

CANES Community Care will limit the amount and type of personal information gathered to what is necessary for the purposes we have identified.

Employees/volunteers will be trained on how to explain why the information is needed.

Personal information will be kept only as long as necessary to satisfy the purposes.

CANES Community Care will document any new purpose for the use of personal information.

CANES Community Care will retain and destroy personal information based on recognized practices and destruction of records will be by

Responsibility**Action**

shredding.

CANES Community Care will keep personal information used to make a decision about an individual for a reasonable time. This should allow the person to obtain the information after the decision and pursue redress.

CANES Community Care will destroy, erase or render anonymous information that is no longer required for an identified purpose or a legal requirement.

CANES Community Care will not destroy historical information for active clients.

CANES Community Care will dispose of personal information in a way that prevents improper access.

CANES Community Care will establish policies setting out the types of information that need to be updated. CANES Community Care can expect individuals to provide updated information e.g. change of address for mailing of newsletters, notices etc.

Certain unauthorized disclosure is unaffected by the Act: to avoid serious risk or harm to a person; required reporting to WSIB.

**Challenging
Compliance**

CANES Community Care will develop simple and easily accessible complaint policy and procedures.

CANES Community Care will investigate all complaints.

Appropriate measures will be taken to correct information regarding policies and procedures.

CANES Community Care will inform complainants of their avenues of recourse. CANES Community Care will advise them of the agency's complaint procedures, Health Services Appeal and Review Board, Privacy Commissioner of Canada.

CANES Community Care will record the date a complaint is received and the nature of the complaint (e.g. delays in responding to a request, incomplete or inaccurate responses or improper collection, use disclosure or retention).

CANES Community Care will acknowledge receipt of the complaint promptly.

CANES Community Care will contact the client to clarify the complaint, if necessary.

CANES Community Care will correct any inaccurate personal information or modify policies and procedures based on the outcome of the complaint. CANES Community Care will ensure that employees are aware of any changes to the policies and procedures.

CANES Community Care will ensure that staff is aware of policies and procedures for complaints and to whom the complaints should be referred to within the agency.

All complaints will be handled fairly and appropriately so that confidence and trust will be restored in our agency.



Responsibility

Action

CANES Community Care will notify client of the outcome of investigations clearly and promptly, and of any relevant steps agency has taken.

The Privacy Officer who handles the matter will have access to all relevant records, employees or others who handled the personal information or access request.

Related Policy: Please refer to Client Services Guidelines and Human Resources policies for more detailed information

Related Forms: Consent

Consent to Release Information

Consent to Inspect Assets

Consent to Photo Release



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Section Heading: Human Resources	Board Approval Date: June 13, 2005
Policy Title: Staffing/Recruitment Practices	Review Dates: January 2009 Revised Date: January 2009

POLICY CANES recruits the best qualified personnel, without regard to race, ancestry, place of origin, colour, ethnic origin, citizenship, creed, gender, sexual orientation, age, marital status, family status or disability.

APPROVALS The recruitment supervisor will obtain approval from the Chief Executive Officer prior to initiating any recruitment activity.

Selection or appointment of an individual is the responsibility of the position supervisor in consultation with her/his immediate supervisor.

RECRUITMENT Opportunities for advancement are made available to all employees and volunteers through job postings of all vacant full time and regular part-time positions within CANES. The purpose of the job-posting function is to give CANES’ employees and volunteers consideration for positions of a promotional or developmental nature or an opportunity for a horizontal transfer.

Vacancies for positions will be posted for a minimum of seven working days at a location designated for this purpose. Director of Human Resources is responsible for ensuring that vacancies are posted.

If no internal candidate is successful, vacancies may be advertised externally. When a limited number of internal candidates are anticipated, vacancies may be simultaneously advertised internally and externally.

Hiring Relatives Two members of one family may not be employed in the same immediate work area (same section/department), or under the same supervisor, or where one member would supervise the other.

Applications To be considered for employment an applicant must complete an application form and/or submit a resume.

SELECTION

Interviews The Director of Human Resources will conduct all interviews in conjunction with a selection team. The Director of Human Resources will schedule dates, times and location for meetings with candidates selected for interviews. All interviews should be conducted in a manner that results in an exchange of information. Interviewers should ask only job-related questions. Answers will help assess the candidate’s experience, skills, training and potential for the position. Ample time and opportunity should be allowed to enable the candidate to ask questions concerning the position and the Agency. Written interview evaluation and notes should be completed. On completion of the selection process, applicants interviewed should be told whether or not their application was successful.



**REFERENCE
CHECKS**

An applicant is to sign a reference request authorization form prior to references being checked. The hiring supervisor is responsible for obtaining a minimum of two recent reference checks, preferably from current or previous employers, prior to making an offer of employment. On completion, the reference form is placed in the employee's personnel file.

**EMPLOYMENT
INFORMATION**

After an employee is hired an **Employment Information Form** is completed by the Director of Human Resources. This information is then placed in the employee's Personnel file.

PROBATION

An employee's probationary period is three months. If during the probationary period work performance is not satisfactory, the employee will be released. A performance review will be completed by the supervisor prior to the completion of the probationary period. At the end of the three (3) month probationary period, the employer may extend the probationary period for not more than two (2) additional months.

**PROMOTIONS
AND TRANSFER**

A performance review will be conducted prior to completion of three months in a new position. If performance is not satisfactory:

- every effort will made to return the employee to his/her former position; or
- the employee may be considered for a transfer, if feasible; or terminated if first two options are not viable.

**TEMPORARY
HELP AGENCIES**

CANES prefers to hire part-time/temporary staff directly from the general public when feasible. However, part-time or temporary staff may be arranged through personnel agencies.

Requests must be made to the Director of Human Resources at least 48 hours before the date needed, and approval gained prior to engaging staff from an agency. All hiring of this nature is kept on file with the Director of Human Resources and reviewed yearly.



Section Heading: Human Resources	Board Approval Date: June 13, 2005
Policy Title: Staffing/Employment Status	Review Dates: January 2009 Revised Date: January 2009

POLICY STATEMENT Employees of CANES are designated an employment status based on the nature of the work being performed and its continuity. Eligibility for benefit programs is determined by the employee's status.

SALARIED STATUS A salaried employee is one who is paid a fixed amount per pay period.

HOURLY STATUS Daily hours of work are in accordance with a planned schedule but do not usually exceed 8 hours per day. Hours paid are hours worked excluding a 1 hour unpaid meal break.

CASUAL PART-TIME A casual part-time employee is one who works on an occasional unscheduled basis for less than 35 hours per week and is not eligible for benefits.

PROBATIONARY STATUS All employees are subject to a probationary period in accordance with the Human Resources Staffing/Recruitment Policy. Employees are not eligible for benefits until successful completion of a probation period. See benefits for specific eligibility requirements.

TEMPORARY STATUS An employee is hired for a set period of time, which does not usually exceed six months. A temporary employee may be full-time or part-time.

VOLUNTEER STATUS An individual accepted to perform a function within the organization and not receiving ongoing monetary compensation for their work.

EMPLOYMENT CONTRACT STATUS Occasionally non-union staff may be required to perform management duties for specified periods of time. All arrangements for employment contracts must be processed through the Chief Executive Officer. Contract employees are not eligible for benefits.

MANAGEMENT EMPLOYEE This category refers to employees in supervisory/management positions where responsibility for other staff is apparent. Management employees included but are not limited to the Manager of Community Care.



Section Heading: Human Resources	Board Approval Date: June 13, 2005
Policy Title: Staffing/New Employee and Volunteer Orientation	Review Dates: January 2009 Revised Date: January 2009

POLICY STATEMENT All CANES employees and volunteers receive a thorough orientation that introduces them to the agency, their role and the functions within their job.

PURPOSE To introduce and familiarize the new employee/volunteer to CANES, its services and expectations.

To ensure that new staff provide services in accordance with the mandate, goals, objectives and established policies.

INITIAL SIGN-ON At the time a new employee commences work, "formal applications", such as income tax and health insurance forms must be completed. The Director of Human Resources provides the initial orientation to all new employees/volunteers. This includes assisting the new employee to complete any relevant forms and share with the new employee/volunteer basic information on the pay policy, working hours, parking and expenses and other agency policies.

HUMAN RESOURCES Orientation to the organization is conducted through Human Resources. All new employees/volunteers will be introduced to the organization and provided with all relevant preliminary employment information. Once the organizational orientation is complete, the new employee/volunteer will complete their program/department specific orientation with their direct supervisor. All records of orientation provided to the employee are kept on file.

SUPERVISOR'S ROLE In providing orientation to new employees/volunteers, the supervisor's objectives are to:

- reduce "job anxieties" of the employee/volunteer and encourage an early sense of teamwork and belonging in the environment,
- communicate information to new employees/volunteers about CANES's philosophies, structure and functions,
- make a complete presentation of CANES's benefit programs, and
- establish communication and rapport between management and the new employee/volunteer.

While each employee/volunteer must accept the responsibility for the pursuit of developmental opportunities, supervisors are expected to provide necessary guidelines and support.



Section Heading: Human Resources	Board Approval Date: June 13, 2005
Policy Title: Staffing/Police Reference Check	Review Dates: January 2009 Revised Date: January 2009

POLICY STATEMENT All employees and volunteers are required, as part of the CANES screening process, to submit to a police reference check.

Police reference checks will be the final state in the screening process. Only after a successful interview process and other references have been checked will a police reference check be initiated. CANES will comply with its obligations under the Human Rights Code.

POSITIONS COVERED **Paid Staff:** Police reference check will be conducted on all staff as a final condition of hire. CANES also completes police reference checks on all staff every three years.

Volunteers: All volunteers, including members of the Board of Directors, are required to submit to a police reference check.

COSTS CANES will pay half the cost of the police reference check for all staff positions. Staff will be expected to pay the remainder.

PROCESS Police reference checks will be conducted only for those applicants/volunteers who have been tentatively selected for the position.

The selected candidate will then be required to complete and sign Police Reference Check form which will be submitted to the Director of Human Resources for processing.

CONDITIONAL OFFER OF EMPLOYMENT CANES will not, as normal practice, make an offer of employment until the police reference check has been received, reviewed and determined to be acceptable.

CANES requires that all police reference checks be returned to the organization before approval for the volunteer/staff to begin work. The police reference check must also be returned with no serious infraction or outstanding criminal offence.

If the police reference check is positive, i.e. does reveal a criminal history, the following procedures will be followed:

The candidate will be invited to attend an interview, and further information and clarification will be sought.

The Director of Human Resources will exercise discretion in determining whether the record of offences constitutes cause to disqualify a candidate for the position.

DETERMINATION OF SUITABILITY In determining whether a candidate with a positive police reference check will be offered a position, the following factors will be considered.

- i) the nature and number of the offences;
- ii) the length of time since the occurrence;
- iii) the rehabilitative efforts made by the applicant;

The specific duties and responsibilities of the position and the relevance of the particular conviction to the position which would make the conviction a reasonable and bona fide reason for denying employment; and the risk posed to the clients and the organization as a result of employing the applicant/volunteer for the position. The following are examples of offences which would put our clients at risk and would



therefore negatively affect the applicant's suitability for employment or volunteer status.

e.g. Violent crimes, sexual offences, child and elder abuse, theft, fraud, trafficking in or importing, for the purpose of trafficking a narcotic under the Narcotic Control Act or a controlled or restricted drug under the Food and Drug Act.



Section Heading: Human Resources	Board Approval Date: June 13, 2005
Policy Title: Employment/Hours of Work	Review Dates: January 2009 Revised Date: January 2009

POLICY STATEMENT All CANES employees are expected to work within the operational hours of the CANES office and to observe proper arrival and leaving times.

SUPERVISOR'S RESPONSIBILITY Supervisors have the responsibility and authority to fairly enforce adherence to the established hours of work and to approve necessary deviations in individual cases. Rigid standards cannot be precisely defined for all situations, but when unauthorized late arrival or early departure regularly occurs, corrective action will be taken.

EMPLOYEE'S RESPONSIBILITY Each employee is expected to adhere to the general guidelines and to continue to meet job commitments and responsibilities.

LIMITATIONS TO HOURS OF WORK Employees will not be required to work more hours in a day or week than is permitted by the relevant provisions of the Ontario Employment Standards Act except in accordance with the exceptions provided for in the Employment Standards Act.

WORK WEEK The normal full time workweek is **35** hours **exclusive** of mealtime.

FLEXIBLE HOURS All requests for consideration of exception the regular hours of work will be brought to the program director for consideration. Any exception will only be considered on a limited basis and with appropriate consideration given to the impact of the variation on fellow employees and the agency.

MEAL PERIODS No employee shall work longer than five consecutive hours without having a meal period. The meal period is 1 hour in duration.

REST PERIODS Employees may not regularly forego the meal period in order to shorten the workday. Employees may take two rest periods each day in addition to a regular lunch break. A rest period of 15 minutes in duration shall be permitted for every 4 hours worked.



Section Heading: Human Resources	Board Approval Date: June 13, 2005
Policy Title: Employment/Vacation	Review Dates: January 2009 Revised Date: January 2009

POLICY STATEMENT The CANES Community Care employees are entitled to vacation in accordance with, or exceeding, the minimum legislated requirements.

PURPOSE The purpose of this policy is to establish vacation entitlement, based on provincial legislation, and a vacation credit system.

LEGISLATIVE REQUIREMENTS The Ontario Employment Standards Act requires that after 12 months of continuous employment, employees receive two weeks' vacation with pay (pay equal to four percent of their gross earnings).

ELIGIBILITY Individuals working for CANES on an employment contract basis and for a specified period of time should refer to the terms of their particular contract.

ENTITLEMENT All salaried and hourly employees accumulate vacation credits, based on their years of service.

Casual employees receive pay in lieu of vacation, in accordance with the provisions of the Employment Standards Act, and do not accumulate vacation credits.

VACATION YEAR The Vacation entitlement based on years of service shall be determined annually on the employee's anniversary date of hire.

VACATION CREDIT ACCRUAL OF VACATION CREDITS An employee begins to earn vacation each month commencing with date of employment.

SALARIED Employees accumulate credits as follows:

- during the first two (2) years of service, vacation is accrued at the rate of 0.83 days per month to a maximum of 10 days.
- after completion of two (2) years of service vacation is accrued at the rate of 1.25 days per month to a maximum of 15 days.
- after completion of ten (10) years of service, vacation is accrued at the rate of 1.66 days per month to a maximum of 20 days.
- after completion of twenty (20) years of service, vacation is accrued at the rate of 2.08 days per month to a maximum of 25 days.

An employee leaving the agency is paid out for any vacation owing at the appropriate per cent in accordance with years of service as outlined above.

HOURLY Vacation pay is allotted as follows:

- during first two (2) years of service, 4% of total wages.
- after completion of two (2) years of service 6% of total wages
- after completion of ten (10) years of service 8% of total wages.
- after completion of twenty (20) years of service 10% of total wages.

Time off may be taken based on years of service:

- 2 weeks during first 2 years



- 3 " after completion of 2 years
- 4 " after completion of 10 years
- 5 " after completion of 20 years

**ACCRUAL OF
VACATION
CREDITS
DURING
ABSENCES**

Vacation credits accrue during:

- a pregnancy leave of absence, and
- a parental leave of absence

Accrual during these leaves is in accordance with accrual of vacation benefits outlined above.

Vacation credits do not accrue during a period of absence on long-term disability.

**USE OF
VACATION
CREDITS**

Supervisors/Managers are responsible for monitoring the accrual and use of vacation credits.

Vacation credits earned may be taken at any time approved by the supervisor and/or Chief Executive Officer. Vacation credits not yet earned cannot be taken.

**PAY IN LIEU OF
VACATION**

Pay in lieu of vacation will not be granted, to ensure that employees receive adequate time away from work.

Upon termination of employment, payment is made for the balance of unused vacation credits at the date of termination.

**ILLNESS/INJURY
WHILE ON
VACATION
BEREAVEMENT
WHILE ON
VACATION
ACCRUAL OF
VACATION**

An employee who is seriously ill or injured while on vacation may be entitled to reschedule all or part of the vacation based on the recommendation of the supervisor/manager. Medical certification must be provided.

If a death of a relative occurs while the employee is on vacation, the employee is entitled to re-schedule vacation day's equivalent to the number of days allowable under the Bereavement Leave Policy. Refer to the Bereavement Leave Policy.

Eight (8) weeks' notice is required if an employee wishes vacation time between June 1 and Sept. 30. Four (4) weeks' notice is required for vacation time outside of that period. When conflicts arise, seniority will determine the vacation schedule. Usually no more than ten (10) vacation days may be taken at one time. Exceptions will depend on the agency's ability to sustain service levels for a longer period.

APPROVAL

All requests for vacation are subject to the supervisor's approval. All vacation must be taken in the year which it was accrued. CANES does not condone carry over of vacation.



Section Heading: Human Resources	Board Approval Date: June 13, 2005
Policy Title: Employment/Paid Holidays	Review Dates: January 2009 Revised Date: January 2009

POLICY STATEMENT CANES Community Care employees are entitled to receive time off with pay for specific holidays.

PURPOSE The purposes of this policy are to identify entitlement to statutory holidays under the Ontario Employment Standards Act, and to establish entitlement to additional paid holidays.

ELIGIBILITY Individuals working for CANES on an employment contract basis and for a specified period of time should refer to the terms of their particular contract.

DEFINITION CANES Community Care considers the following days "paid holidays" (* denotes a statutory holiday under the Employment Standards Act):

- * New Year's Day;
- * Good Friday;
- * Victoria Day;
- * Canada Day;
- * Civic Holiday;
- * Labour Day;
- * Thanksgiving Day;
- * Christmas Day;
- * Boxing Day.
- Family Day

One (1) Floater Day per calendar year

COMPENSATION Eligible employees are entitled to take the paid holiday off with a regular day's pay. Eligible employees required to work on a paid holiday are entitled to pay at one and one - half times the regular rate of pay for all hours worked, and either:

- another paid day off in lieu of the holiday;
- or the regular day's pay for the holiday.

If a paid holiday falls on a non-working day, eligible employees are given another normal working day off with pay.

An employee who does not qualify for a paid holiday pay, is entitled to one and one-half their regular rate of pay for each hour worked on: New Year's Day, Good Friday, Victoria Day, Canada Day, Labour Day, Thanksgiving Day, Christmas Day & Boxing Day.

The financial manager is responsible for calculating the regular day's pay for an employee whose daily hours vary. In this case, the regular day's pay is the average of the employee's daily earnings, exclusive of overtime, for the days worked in the 13-week period before the holiday.



**COMPENSATION
WHILE ON
APPROVED
ABSENCE**

Paid days off in lieu of paid holidays must be taken during the calendar year; approved by the supervisor. If an employee's request for a day off cannot be accommodated during the calendar year, a carry-over to the following year may be approved in lieu. An employee on vacation either immediately before or immediately after the holiday is entitled to the day off with pay. The day should be recorded as a paid holiday, not a vacation day.

An employee on a paid leave of absence either immediately before or immediately after the holiday is entitled to 100 per cent of regular pay for the paid holiday. The day should be recorded as a statutory holiday, not a leave of absence day.

**NOTICE OF
HOLIDAYS**

Staff are notified of paid holidays by the Director of Human Resources before Jan 1st of each year. The Holidays that occur in December may be clarified until Dec. 1st.



Section Heading: Human Resources	Board Approval Date: June 13, 2005
Policy Title: Employment/Change In Employment	Review Dates: January 2009 Revised Date: January 2009

POLICY STATEMENT CANES Community Care is required to keep up-to-date information on all employees of the Agency in accordance with the Ontario Employment Standards Act.

LEGISLATIVE REQUIREMENTS Every employer in Ontario shall make and keep, for 24 months after the work is done, complete records concerning the employee showing:

- name & address;
- date of birth if employee is student under 18;
- the hours worked each day and week;
- rate and gross earnings;
- the amount and purpose of each deduction;
- any living allowance or other payment to which the employee is entitled;
- the net pay
- any documents or certificates relating to pregnancy/parental leave.

Further, an employer shall keep records in Ontario for 5 years that show the employee's name and address, original date of employment and wages paid for each period, and shall indicate vacations with pay or any payments made to the employee on account of vacation pay.

The employer is not required to record the daily or weekly hours of clerical or administrative employees who are paid by salary, except where such an employee works over eight hours per day or 44 hours per week.

EMPLOYEE'S RESPONSIBILITY The employee is responsible to notify their supervisor immediately when there is a change of address, name or other pertinent personal information.



Section Heading: Human Resources	Board Approval Date: June 13, 2005
Policy Title: Employment/ Classification of Discharges	Review Dates: January 2009 Revised Date: January 2009

POLICY STATEMENT All terminations from the payroll are classified by Accounting according to the reason for the termination.

PURPOSE The purpose of this policy is to define the classifications used; to provide guidelines for appropriate terminology when reporting an employee's termination of employment; to determine the amount of notification required. It is important to classify the termination correctly as this has an affect on unemployment insurance entitlement, if applicable, legal requirements and the employee's employment record.

SUPERVISOR'S RESPONSIBILITY In all cases of discharge the supervisor will discuss the situation with the Director of Human Resources prior to finalizing any discharge arrangements.

EMPLOYEE'S RESPONSIBILITY It is the employee's responsibility, where applicable, to advise the supervisor of plans to terminate employment, giving as much advance notice as possible. For a resignation, at least two working weeks written notice is required. Employees in a supervisory or management capacity will give at least one working month's written notice.

CLASSIFICATIONS

Retirement Retirement shall be governed by the legislation in effect at the present time.

Resignation Voluntary resignation of an employee from CANES is to be submitted in writing by the employee to employee's immediate supervisor in accordance with the time frames outlined above. Resignations are to be submitted in writing. The date of the effective resignation is to be the last working day.

Discharge Termination of an employee for conduct, in the course of his/her duties, of such character that continued employment would not be in CANES's best interests. Such conduct may include:

- breach of contract
- breach of confidentiality
- misconduct
- falsification of records
- theft
- client abuse

Release Final release due to unsatisfactory performance of assigned duties, or physical or mental incapacity to perform assigned duties, or for any additional reason other than retirement, resignation, discharge, or lay-off.

Lay-off Reduction of staff level due to change or re-organization..
Laid-off employees will be considered for vacancies that exist or may potentially exist elsewhere within CANES.

Temporary Lay-off Short-term lay-off normally caused by budget deficiency and/or seasonal lay-off.



Generally a short term lay-off lasts no more than thirteen (13) weeks in any given twenty (20) week period. All lay-offs will be in accordance with the Employment Standards Act. A lay off which lasts as long as 35 weeks in any 52 week period is deemed a termination.

APPROVAL

Employees may not be discharged, released or laid-off without prior approval of the Chief Executive Officer, in consultation with the Human Resources Director. Lay-offs must be approved by the Board.

**TERMINATION
ALLOWANCE
Resignation**

Employees who resign without notice, or who, after giving notice, voluntarily fail to remain with CANES for the full period of such notice, or employees who fail to return at the expiration of an authorized leave of absence, are paid only for days actually worked.



Section Heading: Human Resources	Board Approval Date: June 13, 2005
Policy Title: Conduct/Equality and Diversity	Review Dates: January 2009 Revised Date: January 2009

POLICY STATEMENT

CANES recognizes the diversity of the population of Toronto in regard to race, national or ethnic origin, colour and religion. CANES believes that this ethno-cultural and racial diversity has brought cultural, social and economic enrichment to the community.

PURPOSE

CANES believes in the dignity and worth of each individual and adheres to the Ontario Human Rights Code and the Charter of Rights and Freedoms.

CANES is committed to the elimination of discrimination based on race, culture, national or ethnic origin, colour, religion, sex, age, mental or physical ability and sexual orientation.

CANES also recognizes that members of diverse ethno-cultural and racial groups may encounter barriers to their full participation in society, and may also encounter barriers in their efforts to access services and derive equal benefit from services and programs provided by CANES.

CANES Equality and Diversity Policy is adopted and applied within the context and spirit of the Charter of Rights and Freedoms, the Ontario Human Rights Code, and provincial policies on multi-culturalism and anti-discrimination.

RESPONSIBILITY

It is the responsibility of the Board of Directors and the management to ensure that these principals are maintained within CANES. In order to eliminate systemic and personal discrimination CANES takes responsibility in ensuring that:

1. CANES Board members, staff, volunteers and students will be reflective of the members of the community of CANES service boundaries. Hiring of staff shall be in accordance with the Ontario Human Rights Code which eliminates any systemic discrimination or barriers which may adversely affect persons from ethno-racial groups.

In order to assure this, wherever possible, statistics will be maintained of the racial and ethnic profiles of the community served, staff, Board members, volunteers, students and clients.

2. CANES will attempt to attract Board members, staff, volunteers and students who themselves are sensitive to the human needs in all of us, and aware of the cultural and racial mosaic of the community, and who will abide by these policies.
3. CANES will encourage and provide opportunities for staff, Board members, volunteers and students to develop their knowledge, sensitivity and skills in



CANES Community Care
areas related to multi-culturalism, race relations and
anti-discriminatory education.

4. CANES will strive for knowledge of cultural and ethnic differences of the clients served and ensure that programs and services are sensitive to the needs of culturally and racially diverse individuals.
5. CANES will actively seek out the ideas, views and concerns of individuals and groups representing the various racial and cultural communities in the area through linkages with ethno-specific agencies in the community.
6. Communications, including all written, audio, visual and other resource materials, will reflect an environment of non-discrimination and present a balanced and positive portrayal of racial and cultural minorities.
7. CANES will ensure that all policies are free from bias and stereotyping and discriminatory language of any kind.
8. All Board members, staff, volunteers and students are required to read, support and promote this policy.
9. The Board will regularly review the Equality and Diversity Policy to monitor its implementation and progress.



EQUALITY AND DIVERSITY POLICY

CANES Community Care, a not for profit, community based organization, works with seniors and adults with disabilities living in the west end of Toronto. CANES provides support services in a caring and compassionate manner to enable these individuals to maintain a lifestyle of safety, comfort and dignity in their own environment. CANES recognizes the diversity of the population of Toronto in regard to race, national or ethnic origin, colour and religion. CANES believes that this ethno-cultural and racial diversity has brought cultural, social and economic enrichment to the community.

CANES believes in the dignity and worth of each individual and adheres to the Ontario Human Rights Code and the Charter of Rights and Freedoms.

CANES is committed to the elimination of discrimination based on race, culture, national or ethnic origin, colour, religion, sex, age, mental or physical ability and sexual orientation.

CANES also recognizes that members of diverse ethno-cultural and racial groups may encounter barriers to their full participation in society, and may also encounter barriers in their efforts to access services and derive equal benefit from services and programs provided by CANES.

CANES Equality and Diversity Policy is adopted and applied within the context and spirit of the Charter of Rights and Freedoms, the Ontario Human Rights Code., and provincial policies on multiculturalism and anti-discrimination.

I have read and agree to support this policy

Date:

(signature)

(print name)



Section Heading: Human Resources	Board Approval Date: June 13, 2005
Policy Title: Behaviour Unbecoming	Review Dates: January 2009 Revised Date: January 2009

POLICY For the protection and safety of all clients, staff and volunteers at CANES Community Care all staff is expected to adhere to a strict level of conduct during the course of their employment.

PROCEDURE Any breach of this policy will result in disciplinary action with possible termination of employment.

The code includes but is not limited to;

- Abuse (physical, sexual, psychological, financial) of a client or fellow staff person
- Willful neglect of a client
- Disclosure of confidential information pertaining to any client, employee, or CANES Community Care records
- Abuse, destruction, theft or defacing agency property
- Reporting to work in possession of firearms or any other item which could be deemed a weapon
- Committing any act which might impede service delivery
- Making false or malicious statements concerning the organization, its clients and staff
- Misappropriation of funds
- Reporting to work under the influence of alcohol, drugs or other intoxicants
- Falsification of records
- Leaving the workplace without permission
- Insubordination
- Excessive lateness or absenteeism
- Inappropriate relationships with clients

This code is not intended to replace or subordinate any other agency policy. Any adverse actions on the part of staff are potentially subject to disciplinary action and are likely to be addressed in further policies and operational practices of the agency.



Section Heading: Human Resources	Board Approval Date: June 13, 2005
Policy Title: Conduct/ Harassment	Review Dates: January 2009 Revised Date: January 2009

POLICY STATEMENT Employees/volunteers of CANES are entitled to work in an environment free from discrimination and/or harassment, and to have any complaints in this area dealt with by management.

PURPOSE The purpose of this policy is to comply with the provisions of the Ontario Human Rights Code.

HUMAN RIGHTS CODE The Human Rights Code provides for equal treatment with respect to services, goods and facilities; accommodation; contracts; employment; and membership in vocational associations and/or trade unions without discrimination on the grounds of race, ancestry, place of origin, colour, ethnic origin, citizenship, creed, sex, sexual orientation, age, record of offences, marital status, family status or handicap.

DEFINITION CANES defines harassment as including unwelcome advances, requests for sexual favours or other verbal or physical conduct of an unwelcome nature when:

- submission to such conduct is made either implicitly or explicitly as a condition of employment
- submission to or rejection of such conduct is used as a basis for any staffing decisions (including promotional, safety, separation affecting the employee/volunteer)
- such conduct has the purpose, or the effect, of unreasonably interfering with the employee/volunteer's work performance or creating an intimidating, hostile or offensive work environment.

RESPONSIBILITY It is the responsibility of every employee/volunteer to honour and adhere to the letter and spirit of the Code. In this regard, an employee/volunteer who has the authority to prevent or discourage harassment (supervisor, manager, etc.) may be considered responsible for failing to exercise his/her authority to do so. Management is responsible for communicating to all employees/volunteers that all forms of harassment is prohibited by CANES policy; that a confidential complaint procedure exists for reporting sexual harassment; and that management will promptly investigate alleged incidents of harassment and take appropriate corrective action.

COMPLAINT PROCEDURE All Board members, employees, volunteers, students and clients of CANES have a right to work and be served in an environment that is free from discrimination and harassment of any kind, as well as one that maintains the personal worth and dignity of each individual. Incidents of discrimination or harassment will be dealt with according to the guidelines and procedures which follow.

If any Board member, employee, volunteer, student or client experiences harassment, the following steps should be taken:

- Tell the person allegedly engaging in the discriminatory or harassing behaviour clearly, firmly and directly that his/her behaviour is offensive,

unwelcome and unacceptable and that it should be stopped immediately.

Remind the person that such behaviour is not tolerated at CANES

- CANES board members, staff, volunteers, students or clients who are witnesses to the incident should intervene immediately. In all cases, discretion does not allow for ignoring an incident or refraining from investigating such an incident.
- All parties must document the incident. Carefully write the date, time, location, witnesses and details, what was done about it and any other details of when the harassment or discrimination occurred. Copies of all notes should be provided to the Chief Executive Officer.
- If the complainant is an employee/volunteer or student, the complaint should be submitted to his/her supervisor. If the complainant is a client, the complaint should be submitted to the Program Director. If the complainant is a senior management person or a Board member, the complaint should be submitted to the Chairperson of the Board of Directors. If the situation is not resolved, a complaint (preferably written) should be submitted as soon as possible by the person subjected to the harassment or discrimination.
- The individual receiving the complaint shall immediately inform the Chief Executive Officer who will make written acknowledgment of the complaint to the complainant on behalf of CANES
- In the event of a complaint, the responsible member of management, the Chief Executive Officer and the Chair of the Board of Directors will interview all parties involved, document all findings, and render a decision within a mutually acceptable time frame. All information will be kept in strict confidence in a secure place.
- If complaints are substantiated, disciplinary action will be taken. If complaints are not substantiated they will be dealt with in accordance with to Section 7 of the Ontario Human Rights Code, which states: " Every person has a right to claim and enforce his or her rights under this Act, to institute and participate in proceedings under this Act, and to refuse to infringe a right of another person under this Act, without reprisal or threat for so doing". In such cases there will be no negative consequences, no inferences will be drawn and no record of complaint will appear on any person's file.
- Discipline will depend on the nature of the incident, its occurrence and proven willingness to alter one's behaviour. If such behaviour persists, the perpetrator, if a Board member, staff member, volunteer or student, may be terminated; if a client, access to programs and services may be withdrawn.
- Both complainant and alleged perpetrator should be called separately to a meeting and given written resolution of the incident. Both parties should respect the solutions which may include disciplinary action as appropriate to the incident. The process should take no longer than 60 days from the time a complaint is received to the time a solution is arrived at and shared with the victim and offender.
- If the complainant or the individual who was complained about is not satisfied with the action taken, she/he may pursue either of the following actions:



- Submit a written appeal to the Chair of the Board of Directors, who in turn will call a meeting with a committee composed of a minimum of three relevant representatives from any or all of the following groups: the Board of Directors, staff, volunteers, students, clients, and external community groups. Within one month of receiving the formal appeal, the committee must meet, in camera to ensure confidentiality, and the appeal may or may not be granted. The Board Chair informs the appellant of the decision. Only one appeal may be granted to a person for any one incident.
- Submit a complaint to the Ontario Human Rights Commission.
- Responding to any kind of discrimination or harassment should be seen as an opportunity to provide a learning experience for both the victim and the perpetrator.

CONFIDENTIALITY

All reports and discussions are treated in confidence and no subsequent action is taken without the complainant's knowledge.



Section Heading: Human Resources	Board Approval Date: January 2009
Policy Title: Cell Phone Use while Driving	Review Dates: January 2009 Revised Date: January 2009

POLICY

All CANES Community Care employees are required to not engage in cellular phones/PDA'S (e.g. Palms or Blackberry's) or any other mobile device while driving.

PURPOSE

CANES Community Care understands and appreciates that employees utilize their cellular phones for business purposes in order to be accessible. This policy is intended to clarify the appropriate usage of cell phones while driving. CANES strictly prohibits the use of cell phones while driving and does not require employees to make or receive calls when driving for safety reasons. Distractions occur while driving, however, eliminating the use of cell phones, while driving, is one way to minimize the risk of accidents for our employees.

PROCEDURES

When driving, cellular phones should be switched off or, if switched on, the call should be left to go through voicemail until a safe place to stop has been found to check messages and return calls. Drivers should pull over to a safe location before making or receiving calls. When driving for CANES business, cell phone use is prohibited.

Beware that you could face prosecution for failing to have proper control of your vehicle or for careless or reckless driving if use of cellular phone affects your driving. Employees who violate this policy may be subject to disciplinary action, with the understanding that CANES will not be held libel for any personal injury as a direct result of cell phone use while operating a vehicle on CANES business.



Section Heading: Human Resources	Board Approval Date: June 13, 2005
Policy Title: Conduct/Internet Use	Review Dates: January 2009 Revised Date: January 2009

POLICY

CANES Community Care requires that all staff and volunteers with access to agency email and internet consider it agency property and not for personal use.

PURPOSE

This policy is intended to clarify appropriate usage of agency email and internet access. All staff and volunteers of CANES with access to the agency email and internet is responsible for ensuring the usage of the internal email and internet is only used for business purposes and not personal usage. The need for compliance comes from the risk to the agency and its property where electronic viruses and vulnerability to outside access to private and confidential information.

PROCEDURE

CANES Community Care permits staff and volunteers with access to agency computers to have access to internal email as well as access to the internet. This access is given in good faith that staff performance is enhanced when access is available to a greater variety of information.

- The agency reserves the right to monitor workers usage of the agency computer. All information on agency computers is stored in the main hard drive. This information is able to be accessed by the agency staff responsible for maintaining system integrity.
- The staff responsible for maintaining agency system integrity will report to the Chief Executive Officer any information stored on the system that is of an offensive, inflammatory or harassing nature.
- The staff responsible for maintaining system integrity will also report to the Chief Executive Officer any information that has a potential to cause a virus, damage the system or pass a virus to an outside source from the agency.

OFFENCES REPORTED

Any offence reported to the Privacy Officer will be handled with disciplinary action. If a staff has been determined to have caused harm or potential harm to the agency's property or reputation, the Privacy Officer and Director of Human Resources will delegate to the staffs Program Director to resolve with the staff correct usage of agency internal email and internet.

The agency further reserves the right to remove access to any staff or volunteer person the use of agency internal email and internet.



Section Heading: Human Resources	Board Approval Date: June 13, 2005
Policy Title: Conduct/Conflict of Interest	Review Dates: January 2009 Revised Date: January 2009

POLICY STATEMENT All CANES employees and volunteers must act in the best interests of the Agency and of the citizens of the community, without favour or preference based on personal considerations when dealing directly or indirectly with persons doing or seeking to do business with CANES.

SUPERVISOR'S RESPONSIBILITY It is the responsibility of the supervisor to:
 - ensure that employees/volunteers reporting to them are aware of this policy/procedure.

EMPLOYEE/VOLUNTEER'S RESPONSIBILITY It is the responsibility of the employee/volunteer to:
 - disclose to the immediate supervisor, any outside employment, business, commercial or financial interest where such interest might conceivably be construed as being in actual or potential conflict with his/her official duties;
 - immediately inform the immediate supervisor if required to deal with a case in which the personal interests of a relative may be involved; and
 - report forthwith all frauds, or attempted frauds, or any criminal act of which the employee becomes aware to the immediate supervisor.

POTENTIAL CONFLICT OF INTEREST An employee/volunteer/Board Member of CANES shall not:
 - engage in any business or transaction or have a financial or other personal interest, which is incompatible with the discharge of the employee's official duties;
 - place himself/herself in a position to derive any direct or indirect benefit or interest from any CANES' contracts about which the employee can influence decisions;
 - engage in any outside employment, work or business undertaking that interferes with the performance of duties as a CANES employee;
 - engage in any outside employment, work or business undertaking in which they have an advantage derived from employment with CANES; - demand, accept or offer, or agree to accept from a person who has dealings with CANES, a direct or indirect commission, reward, advantage or benefit of any kind, whether to be received by the employee, by a member of the employee's family, or by a third party whom the employee wishes to benefit;
 - benefit or cause friends or relatives to benefit from the use of information acquired during the course of the employee's official duties and which is not generally available to the public;
 - accord, in the performance of official duties, preferential treatment to relatives or friends or to organizations in which the employee or relatives or friends have an interest, financial or otherwise;
 - accept from persons having dealings with CANES' gifts or favours that are offered in gratitude for services rendered or anticipated.



Section Heading: Human Resources	Board Approval Date: June 13, 2005
Policy Title: Conduct/Fraud and Theft	Review Dates: January 2009 Revised Date: January 2009

POLICY STATEMENT All employees or volunteers who have responsibility for the care or custody of the CANES' property, or member agencies' property, must ensure that it is properly secured and that appropriate controls are in place, used and are not being circumvented.

DEFINITIONS

CANES' Property The CANES Community Care' property includes cash, cheques valuable documents, inventories, supplies and equipment.

CANES is not responsible for the safeguarding of employee's or volunteer's personal property.

Fraud/Theft

CANES' employees and volunteers must comply with all Canadian laws, statutes and regulations at all times. In particular, employees and volunteers must not, either directly or indirectly, engage in any acts of fraud or theft in relation to CANES or its property or in relation to CANES' clients, employees or volunteers or their respective property.

In addition, employees and volunteers must faithfully account for and deliver to CANES all money and other things of value belonging to CANES that they may receive from time to time for, from or on account of CANES.

If you become aware of any activity by another employee or volunteer that violates this policy or any Canadian law, statute or regulation, you must immediately report such activity to your immediate supervisor.

PREVENTION OF FRAUD AND THEFT

All employees/volunteers must:

- ensure that adequate safekeeping arrangements are in place for all CANES' property;
- ensure that any employee or volunteer in charge of handling any CANES' property is fully aware of and in compliance with safekeeping arrangements;
- report any inadequacies or problems in complying with existing safekeeping arrangements immediately to the Chief Executive Officer.

All employees/volunteers must:

- use CANES' property only to the extent necessary to carry out assigned duties;
- report any inadequacies in, or problems in complying with, existing safekeeping arrangements to the immediate Supervisor/Manager;
- ensure that CANES' property in the employee's or volunteer's control is not taken or converted for personal gain;
- report any instances or suspicions of fraud or theft to the Chief Executive Officer immediately; and
- assume full responsibility for personal property brought onto CANES' property.



**HANDLING
REPORTS OF
FRAUD & THEFT**

In any instance or suspicion of fraud or theft, the supervisor will advise the Chief Executive Officer and union steward for unionized staff immediately, and conduct a thorough investigation.

After consultation with the Chief Executive Officer, the supervisor will meet with the employee/volunteer involved, as an investigative measure, to clarify/verify information. This step will usually be taken unless it is deemed inappropriate due to the severity of the situation.

Upon receipt of a report of possible fraud or theft, the Chief Executive Officer will oversee the investigation to determine if fraud or theft has been or is likely to be committed.

Employee/ Volunteer

If an employee/volunteer interview is required, the immediate supervisor/ manager and the Chief Executive Officer must both be present.

If the employee/volunteer agrees to the interview, the Chief Executive Officer must ensure that accurate notes are made of the interview, and that a signed statement of the employee's version of the events is obtained, if possible.

Employee/Volunteer

If the employee/volunteer requests an adjournment, it must be granted. An early date will be set for another meeting. The Chief Executive Officer must notify CANES' insurer and lawyer to protect the association's interests.

PENALTY

Any employee/volunteer found to have committed fraud or theft in relation to the CANES Community Care' property will be subject to dismissal or such penalty as determined by the Chief Executive Officer.

Employees/volunteers under investigation may also be suspended with or without pay, pending completion of an investigation, depending on the circumstances of the case and the best interests of CANES.



Section Heading: Human Resources	Board Approval Date: June 13, 2005
Policy Title: Progressive Conduct/Disciplinary Procedure	Review Dates: January 2009 Revised Date: January 2009

POLICY STATEMENT All CANES employees and volunteers are required to strictly adhere to the agency policies and Procedures. When employees wilfully neglect their duties to the agency and its clients, disciplinary action will be taken.

PURPOSE Discipline, when applied in the CANES Community Care, is of a positive nature with emphasis on correcting the problem rather than punishing the employee/volunteer. It puts the onus on the employee/volunteer to restore a level of performance, which is compatible with the requirements of the position and the Agency. This policy/procedure is intended to inform employees/volunteers of Agency policy regarding the handling of a serious performance deficiency and the specific steps to be taken when a deficiency is identified, and to guide managers in their efforts to aid employees/volunteers in correcting deficiencies as they arise.

Unacceptable situations may arise which require corrective action by supervisors. Some situations evolve or develop gradually over extended periods of time. Other situations present themselves abruptly and unexpectedly, requiring immediate action by the supervisor. Whenever possible, supervisors will provide employees/volunteers with the opportunity and method of correcting unacceptable performance or behaviour.

PROGRESSIVE DISCIPLINARY PROCEDURE Corrective discipline is appropriate when, after a period of counselling a performance problem persists. At this time the supervisor will contact the Chief Executive Officer and this contact should be maintained at all stages of the discipline process. Supervisors are also expected to adhere to the Agency’s process for discipline. Under no circumstances will involuntary termination be effected without the approval of the Director of Human Resources. Corrective discipline is a process designed to progressively impress upon the employee the existence of a performance problem, where improvement is required, and the consequences of not correcting the problem. The following steps represent increasingly serious contacts with the employee designed to bring about change in performance or behaviour. While these steps are normally followed, certain serious circumstances may warrant the modification of this process
THE FOLLOWING IS A GUIDELINE OF THE STEPS INVOLVED IN CORRECTIVE DISCIPLINE. THE SUPERVISOR SHOULD RECORD THE DATES AND DETAILS OF ALL ACTIONS TAKEN.

STEP ONE: Oral warning - The oral warning is a conversation between a supervisor and an employee regarding a discipline problem previously identified in counselling sessions. The supervisor will inform the employee where improvement is expected and required, and advise that the conversation is the first step in the discipline process. The supervisor will document for his/her own records that the oral warning conversation took place and note the substance of the discussion; however, no notation



shall be placed on the employee's personnel file.

The oral warning shall normally be followed by a monitoring period. This period is typically three months in length however this may vary depending on the nature of the problem. Should the monitoring period result in the employee's failure to correct his/her problem the matter will proceed to STEP TWO of the corrective discipline process.

**STEP TWO:
Written Warning**

- The written warning meeting is a formal conversation between a supervisor and an employee regarding the discipline problem. Normally, at this stage the supervisor's manager is also involved.

During the written warning meeting the supervisor will present the employee with a letter outlining where improvement is necessary. This letter shall become part of the employee's personnel file. This will be kept on file for no more than one year.

The written warning will normally be followed by a monitoring period. Although the length of this period will vary depending on the nature of the problem, it will normally be somewhat shorter than the period following the oral warning and indicate that further discipline may result from any further offence.

**STEP THREE:
Final Warning**

- The final warning is normally the most serious step in the corrective discipline process. It consists of a formal conversation between a supervisor and an employee regarding a discipline problem. At this stage both the supervisor and Human Resources Director are present. During the final warning meeting, the supervisor will present the employee with a letter which will in essence inform him/her that should he/she not immediately restore his/her performance to a satisfactory level and sustain this improvement, it shall become necessary to terminate the employment relationship. The final warning requires a decision to be made by the employee. His/her options are to reaffirm his/her intention to carry out all of his/her obligations under his/her inherent employment contract with CANES or, if he/she feels incapable of making such a commitment, to resign. Depending on the nature and full circumstances of the problem, a final warning may be accompanied by a suspension in order to impress upon the employee the seriousness of the problem.

**DISCHARGE OR
DEMOTION**

- Before discharge is affected, the employee will be provided with an opportunity to explain his/her behaviour. Discharge is only affected failing a satisfactory explanation.

Discharge is not a step in the corrective discipline process but rather CANES' normal recourse should an employee fail to use the process to re-establish an acceptable working relationship. Where discharge is affected, it normally occurs at the point of a culminating incident following the final warning.

In the event an employee commits an offence, which is so serious that it calls into immediate question the continued viability of the employment relationship, e.g. theft, discharge may be warranted whether or not there is a previous record of disciplinary action.

IN ALL CASES, DISMISSAL WILL ONLY TAKE PLACE FOLLOWING A FULL INVESTIGATION OF THE INCIDENT.

In certain circumstance, a demotion rather than discharge may be a more appropriate response to a continuing performance problem. Such action will be taken only after careful consideration of the case by the Human Resources Director and the



supervisor/manager.



Section Heading: Human Resources	Board Approval Date: June 13, 2005
Policy Title: Compensation/Overtime	Review Dates: January 2009 Revised Date: January 2009

POLICY STATEMENT CANES recognizes that overtime work may be required and compensates employees who work overtime when it has been pre-approved.

PURPOSE The purposes of this policy are to provide managerial staff with the authority to establish appropriate recognition of overtime worked.

Individuals working for CANES on an employment contract basis and for a specified period of time should refer to the terms of their particular contract.

LEGISLATIVE REQUIREMENT Under the Ontario *Employment Standards Act, 2000*, employees cannot be required to work more than eight hours in a day (or the number of hours in the employee’s regular work day if it is more than eight hours in a day) or 48 hours in a week. An employee and employer can agree in writing that the employee will work more than 8 hours in a day (or the number of hours in the employee’s regular work day that is more than eight hours in a day) or 48 hours in a week. This agreement can be cancelled on two weeks written notice by an employee or reasonable notice by an employer. An employer and employee cannot agree that the employee will work more than 60 hours in a week without the approval of the Ministry of Labour’s Director of Employment Standards.”

DEFINITIONS “**Overtime**” is voluntary units of work outside of your regular work schedule.

Lieu Time “**Lieu time**” is time taken off work without pay, in lieu of accepting overtime pay. Employees may take lieu time only with the agreement of the supervisor, and only if it has been previously earned.

ENTITLEMENT

Salaried and Hourly Staff All non-management salaried staff and hourly staff are entitled to receive lieu time pay for all pre-authorized hours worked before or after the scheduled work day and for all pre-authorized hours worked on a scheduled day off; and where applicable, are compensated for being on standby or for responding to a call-out. The Chief Executive Officer and management staff is not eligible for compensation for overtime worked. These employees may be granted time off at the discretion of the immediate supervisor as compensation for overtime worked. The amount of time off granted is not intended to represent hour-for-hour compensation, but is meant to recognize significant overtime worked.

Permanent Hourly Hourly employees are entitled to receive overtime pay for all pre-authorized hours



Staff

worked in excess of 44 hours per week.

Salaried employees who also work for the Agency on a part-time basis are eligible for overtime pay for part-time work only when the part-time hours exceed 44 hours per week.

APPROVAL

The employee's supervisor is responsible for ensuring that overtime is worked only in unusual circumstances and for monitoring the amount of overtime worked.

All overtime must be pre-approved by the immediate supervisor. Supervisors are responsible for maintaining a record of the reasons for overtime worked.

If pre-approval is not possible, and overtime is worked, the supervisor is not obligated to authorize payment.

Lieu Time

Employees taking lieu time shall receive 1 hour off work, with pay, for each hour of overtime worked. The number of lieu time hours an employee may bank cannot exceed the employee's regular scheduled weekly hours at any given time.

Exceptions to the maximum number of hours allowed in the bank must be approved by both the supervisor and the Director of Human Resources.

Lieu time may be taken at a time agreed to by the supervisor. The supervisor is responsible for ensuring that, under no circumstances is lieu time taken which has not been earned.

REPORTING AND RECORDING

The employee is responsible for reporting and recording overtime using Lieu Time Hours, Monthly Report Form. The supervisor is responsible for monitoring overtime/lieu time and ensuring that payroll records are up-to-date.



Section Heading: Human Resources	Board Approval Date: June 13, 2005
Policy Title: Compensation/ Garnishes, Wage Assignments, third Party Demands	Review Dates: January 2009 Revised Date: January 2009

POLICY STATEMENT

On receipt of a garnishee, wage assignment or third party demand, the Director of Human Resources will contact the employee’s supervisor/manager outlining details.

The Director of Human Resources will notify the employee of the impending action within the stipulated time limits. The employee is responsible for canceling the deduction by contacting the specific court, Revenue Canada-Taxation, company, etc., by whom the demand was made.

CANES may not dismiss or suspend an employee on the ground that garnishment proceedings are or may be taken against the employee or that an Attachment Order under the appropriate section of the Family Law Reform Act has been or may be made against the employee.



Section Heading: Human Resources	Board Approval Date: June 13, 2005
Policy Title: Compensation/Credit and Employment Verification	Review Dates: January 2009 Revised Date: January 2009

POLICY STATEMENT Official requests for verification of employment for the purposes of mortgages, external employment, visas, etc., will be released upon the employee’s request.

PROCEDURE Requests with proper authorization form should be directed to the Director of Human Resources

SAMPLE OF AUTHORIZATION FORM.

I _____, authorize CANES’ Director of Human Resources to provide

Information to: _____ Regarding:

1. Payroll Information
2. Employment history/Confirmation
3. Medical information related to _____

Yours truly

Employee signature

Director Signature

Date

Date

SAMPLE OF INFORMATION PROVIDED

The following is an outline to be used when replying to requests.

To Whom It May Concern:

This will confirm that _____ (name) _____ has been employed by CANES in the (work unit/department) from start date to present date in the most recent capacity as a position. Mr./Mrs./Ms. name present annual salary is \$annum.

Yours truly,

(Director, Human Resources)

(Note: Additional information will not be provided without the employee’s expressed written authorization).



Section Heading: Human Resources	Board Approval Date: June 13, 2005
Policy Title: Employment Performance review and Development Plan	Review Dates: January 2009 Revised Date: January 2009

POLICY STATEMENT Performance reviews will be completed on a timely and regular basis to allow for specific and overall feedback on performance during a particular time; provide guidance for professional development, and encourage open two-way communication with the employee.

PURPOSE The purpose of the performance review and development plan is to provide the basis for individual and organizational growth, and to ensure the best possible service for CANES clients. It reflects the results of the ongoing communication process between employee and supervisor, commends work well done and provides a measure for future performance and improvement.

PROCEDURE The employee's performance will be evaluated at least once during each year, or sooner as indicated by the supervisor i.e. prior to the completion of a probationary period

REPORTING & RECORDING Both the supervisor and the employee will complete the Performance Review and Development Plan document prior to a performance review discussion. Following the performance discussion, the supervisor is responsible for forwarding an original, final copy of the Performance Review & Development Plan document completed by the supervisor and the employee and before being signed by both supervisor and Director of Human Resources.



Section Heading: Human Resources	Board Approval Date: June 13, 2005
Policy Title: Benefits/Tuition/Registration Fees	Review Dates: January 2009 Revised Date: January 2009

POLICY STATEMENT CANES encourages the professional development and personal growth of employees through attendance and participation in approved training programs, seminars and technical conferences, which are conducted or sponsored by colleges, universities and professional organizations.

CONFERENCES, WORKSHOPS, SEMINARS Attendance at conferences, seminars, workshops and training courses that do not involve a series of classes is encouraged by CANES as this provides employees with an opportunity to keep up with industry trends, maintain and develop contacts and ensure ongoing professional development.

Application Interested staff and volunteers will submit to their supervisor a request to attend a workshop/conference with the name, date and costs associated with the conference/seminar.

Approval Each request for attendance at a conference, seminar, training course must be endorsed by the immediate supervisor and approved by the Program Director. Full or partial payment of expenses arising from attendance at conferences, technical seminars, conventions, training courses may be authorized by the Program Director provided that funds are available.



Section Heading: Human Resources	Board Approval Date: June 13, 2005
Policy Title: Absences from Work/Emergency Leave	Review Dates: January 2009 Revised Date: January 2009

POLICY STATEMENT CANES may grant a leave in order to maintain continuity of employee service in instances where unusual or unavoidable circumstances require an employee's absence. Such leaves are granted for a period of up to 10 days month (EMPLOYMENT STANDARDS ACT) and all such leaves must be approved by the Human Resources Director.

AUTHORIZED LEAVES When time off work is required to attend to family or personal emergencies, employees may, with supervisory/management approval:

- take a leave of absence without pay
- take earned vacation time
- take accrued lieu time; or
- take the required time off and make it up as agreed with their supervisor.

Sick leave shall not be used to cover time off for family or personal emergencies.

LEAVE WITHOUT PAY All salaried and hourly employees are eligible for personal leaves of absence without pay if the leave is requested in advance by the employee through his/her supervisor. Employees will use vacation entitlement before a leave of absence is granted.

BENEFITS Benefits coverage is determined by the number of working days the employee is actively at work during the calendar month in which the leave started or ended. If the employee works less than half of the working days in the month, he/she will be required to pay 100 per cent of the normal monthly insurance premiums for that month and any additional months if coverage is to be maintained. If the employee works more than half of the working days in the month, coverage will be maintained by CANES for that month. Exceptions to this would be in accordance with the Employment Standards Act.



Section Heading: Human Resources	Board Approval Date: June 13, 2005
Policy Title: Absences From Work/Sick Leave	Review Dates: January 2009 Revised Date: January 2009

POLICY STATEMENT Eligible employees are entitled to up to 12 days absence from work with pay during each calendar year due to personal illness

ELIGIBILITY All full-time permanent employees who have completed three months of service are eligible.

Sick leave credits shall be accumulated at the rate of 1 day per calendar month with a maximum of 12 days at any one time. Sick leave shall be cumulative. An employee must work at least half of the available working days in the first month of employment to be eligible for a credit for that month.

DEFINITION Sick leave is defined as unplanned personal illness. Sick leave credits may not be used for medical appointments. Sick leave credits will not be paid out at the time of termination of employment.

REPORTING AND RECORDING The employee must notify the supervisor immediately of illness or injury, and provide a medical certificate attesting to illness or injury, if required.

The sick leave absence must be recorded by the employee and submitted to the immediate supervisor. Correct benefit information is supplied to the Payroll Department.

Other leaves will be recorded on a Leave Request. They will be passed on to the Payroll Department.



Section Heading: Human Resources	Board Approval Date: June 13, 2005
Policy Title: Absences From Work/ Bereavement	Review Dates: January 2009 Revised Date: January 2009

POLICY STATEMENT All salaried and hourly employees are entitled to bereavement leave with full pay to make arrangements for and/or attend funeral services for a family member.

DURATION OF LEAVE A maximum paid leave of three days is allowed in the event of the death of:

- spouse/common law/partner
- parent or parent-in-law
- son or daughter
- sister or brother
- grandparent or grandchild
- guardian or step-parent
- brother-in-law or sister-in-law
- son-in-law or daughter-in-law

An unpaid day or half-day may be granted for the purpose of attending a funeral for situations not covered above. Approval from the immediate supervisor is required for this leave.

The employee must inform his/her supervisor immediately that time off is required, and submit a Leave Request for processing. The supervisor is responsible for ensuring that the absence is reported to the Director of Finance.



Section Heading: Human Resources	Board Approval Date: June 13, 2005
Policy Title: Absence from Work/ Jury Duty	Review Dates: January 2009 Revised Date: January 2009

POLICY STATEMENT Employees are granted a leave of absence if called for jury duty, or subpoenaed as a witness in court, without loss of pay, benefits or employment status.

ELIGIBILITY All permanent full-time employees are eligible provided the following conditions are met:

- the employee must not be acting as a witness in his/her own defence;
- where possible the employee must present to his/her supervisor the summons or subpoena to appear as a witness and/or serve on a jury at least one week prior to the date scheduled to serve;
- the employee must report for regular work shift when not required for jury or witness duty; and
- any fees paid by the court, other than mileage, must be reported to the Agency to be applied against earnings. Mileage expenses paid by the court remains the employees'.

REPORTING An employee required to perform jury duty must submit a summons/subpoena and a completed Leave Request to his/her supervisor at least one week before the court appearance.

On completion of jury duty, the employee must obtain a certificate of service signed by the Clerk of the Court to be submitted to Payroll.



Section Heading: Human Resources	Board Approval Date: June 13, 2005
Policy Title: Absences From Work/ Pregnancy and Parental Leave	Review Dates: January 2009 Revised Date: January 2009

POLICY STATEMENT Unpaid pregnancy and parental leave will be granted to eligible employees. An employee who is entitled to take a pregnancy or parental leave cannot be terminated, laid off, disciplined or suspended because he or she has applied for or taken such leave.

LEGISLATIVE REQUIREMENT The Act applies to full-time and part-time employees.

PREGNANCY LEAVE

Eligibility

To be eligible for pregnancy leave, the employee must be employed by CANES for a period of no less than 13 weeks preceding the estimated date of delivery. The employee is required to give her supervisor **at least** two week’s notice in writing, indicating the date she intends to commence her leave of absence together with a medical certificate estimating the date of birth.

Duration of Leave

The leave may be commenced up to 17 weeks **before** the expected date of delivery. An employee who has given notice to begin a pregnancy leave may change the leave date to an earlier or later date by giving at least two week’s written notice to her supervisor. If pregnancy-related complications force the employee to stop work before she has arranged her pregnancy leave, she has two weeks from that date to give the employer written notice with a medical certificate confirming the circumstances and the expected or actual date of birth. If the employee has been on her pregnancy leave for 17 weeks but the child has not yet been born, the pregnancy leave will end when the baby is born and the employee will be entitled to take a parental leave immediately after the birth. If an employee on pregnancy leave wishes to change the date of her return to work to an earlier or later date, she must give CANES four week’s written notice of the date on which she intends to return. A medical certificate attesting to employee’s fitness to resume work duties may be required. An employee who takes pregnancy leave and decides not to return to work shall not terminate her employment before the leave expires or when it expires without giving her supervisor at least four weeks written notice of the termination.

PARENTAL LEAVE

Eligibility

In addition to the 17 weeks of pregnancy leave to which eligible employees may be entitled, an employee who is the parent of a child may be entitled to a leave of absence without pay following the birth of the child or the coming of the child into the employee’s custody, care and control for the first time in accordance with the *Employment Standards Act, 2000*. To be eligible for parental leave, the employee must have been employed by CANES for a period of not less than 13 weeks.



Duration of Leave

The employee is required to request parental leave in writing to her/his immediate supervisor **at least** 2 weeks prior to the commencement of a leave.

For a natural mother, parental leave commences when her pregnancy leave ends or when the baby first comes into custody, care and control of a parent.

An employee who has given notice to begin a parental leave may change the leave date to an earlier date or later date by giving at least two week's notice to his/her supervisor.

If the employee stops work because the child has come into the custody, care and control earlier than expected, the employee has two weeks from that date to give the employer notice of his or her intent to take the parental leave. If an employee on parental leave wishes to change the date of his or her return to work to an earlier or later date, he or she must give the employer four week's written notice of the date on which she intends to return. A maximum of 52 weeks of parental leave is permitted. This may include pregnancy leave up to 37 weeks.

An employee who takes parental leave and decides not to return to work shall not terminate his or her employment before the leave expires or when it expires without giving his or her supervisor at least four weeks written notice of the termination.

RETURN TO WORK

Seniority for all purposes continues to accrue during pregnancy and parental leaves and, following the leave, a qualified employee who return to work within the period prescribed by the *Employment Standards Act, 2000* is entitled to resume work either in the same position if it still exists, or in a comparable position (with equal responsibilities and pay) if it does not exist.

BENEFITS

Employer contributions to retirement savings, life insurance, accidental death, extended health will continue while the employee is on pregnancy or parental leave, unless the employee has advised, in writing, that he/she does not wish to continue the employee contributions (if any) to such plans.

REQUEST FOR LEAVE

A pregnancy and/or parental leave must be requested by the employee through her/his supervisor, using a Leave Request, along with the necessary documentation as stated in this policy.

Section Heading: Human Resources	Board Approval Date: June 13, 2005
Policy Title: Absences From Work/ Voting	Review Dates: January 2009 Revised Date: January 2009

POLICY STATEMENT The Canada Elections Act provides that employees who qualify as electors are entitled to time off with pay for voting at elections.

ENTITLEMENT Such entitlements are as follows:

- federal elections – four consecutive hours until close of poll
- provincial elections – three consecutive hours until close of poll
- municipal elections – three consecutive hours until close of poll

If the employee’s working hours do not allow for those consecutive hours, CANES will allow the employee additional time for voting as may be necessary to provide for those consecutive hours specified by the Act.

Example – In a provincial election, where the polls are open until 7:00 pm, an employee whose work schedule ends at 5:00 pm – will be allowed to leave at 4:00 pm to make up the three consecutive hours.

While it is the agency’s obligation to ensure that an employee has four or three consecutive hours as the case may be, additional voting time may be granted at CANES’ convenience and need be extended only to eligible voters.

Employees who absent themselves to vote at a time other than that provided for by CANES are not entitled to payment for time lost.

ELIGIBILITY Employees eligible for voting time off are those who qualify as electors, namely, those who:

- have attained 18 years of age on or before polling day;
- are Canadian citizens, in the case of federal elections or landed immigrants in the case of provincial or municipal elections;
- appear on the Voters’ List.



Section Heading: Human Resources	Board Approval Date: June 13, 2005
Policy Title: Travel/Travel and Meeting Expenses While On CANES Business	Review Dates: January 2009 Revised Date: January 2009

POLICY STATEMENT CANES will reimburse employees for expenses reasonably incurred in the course of carrying out CANES' business.

AUTHORIZATION CANES will only reimburse employees for expenses which have been specifically pre-authorized by the Chief Executive Officer.

REIMBURSEMENT PROCEDURE Copies of receipts for authorized expenses shall be submitted to the Chief Executive Officer within one month of the expense being incurred. Reimbursement will occur within two weeks of the date that the receipts are submitted to Director of Finance.
This policy does not apply to automobile related expenses.



Section Heading: Human Resources	Board Approval Date: June 13, 2005
Policy Title: Travel/Travel Allowance	Review Dates: January 2009 Revised Date: January 2009

POLICY STATEMENT CANES reimburses employees for expenses that are associated with the use of personal vehicles to conduct CANES business.

PURPOSE Each employee is responsible for costs incurred in traveling to and from the normal work place. However, those who are required to operate their vehicles while conducting CANES business should be compensated for additional costs incurred.
The purpose of this policy is to establish an appropriate method for calculating vehicle allowance.

ELIGIBILITY All employees are covered by this policy except for field workers.

CALCULATION OF DISTANCE TRAVELLED Travel to and from work is considered personal use of the vehicle and is not compensated. Compensation is based on actual distance traveled **less** the normal distance traveled to work.
An employee traveling between home and a business engagement or workplace other than the regular workplace, must deduct the distance between home and the regular workplace from the total distance traveled.

INSURANCE The employee/claimant is responsible for insurance coverage.

REIMBURSEMENT Rate The Program Director must pre-authorize all reimbursements to employees. All reimbursements are based on a standard current rate per kilometer. The Travel Allowance Policy and rate for reimbursement are reviewed annually by the Executive Committee.



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AREA OF OPERATIONS: Intake

OPERATING PROCEDURES:

1. All requests for service are documented using an **Intake Form**.
2. Generally all intakes are directed to the Coordinator, Caregiver Support and Counseling.
3. Any office staff may complete an **Intake Form**. The person conducting an intake must fill in their name under the Intake Persons Name section, including time and date the intake was taken.
4. An **Intake Form** is filled out with as much detail as possible.
5. If the person making the referral is not the client, the Referral Source information must be filled out. For CCAC referrals please refer to the section entitled “Contracted Services”.
6. Where a program referral is made, that program coordinator is required to follow up within two business days.
7. Each program coordinator is responsible to check their inbox daily, or designate a back up to ensure all intakes are handled within two business days.
8. The person is informed of all agency programs. Programs, to which a referral is made, are listed on the form in the Internal Referral section and a photocopy of the form is given to the corresponding program coordinator.
9. The person filling out the **Intake Form** will also open a client file in the agency database and the **General Information** panel is completed, including all information that has been gathered from the **Intake Form**.
10. A note is placed in the database with each program referral identified.
11. **Contact Information** must be recorded.
12. Storage of forms
 - a. All original **Intake Forms** that have been completed are the responsibility of the Coordinator, Caregiver Support and Counseling.
 - b. A binder will be maintained with all intakes in order of receipt.
 - c. At the end of each month the previous months intakes are removed and placed in the paper file of the client in the centralized filing system.
 - d. All photocopies are to be shredded by the completion of the previous month. Only the original Intake is kept and this is placed in the client file.
 - e. Any **Intake Forms** not resulting in a client file being generated will be stored in a file with the Coordinator, Caregiver Support and Counseling for statistical end of year reporting.
13. Supportive Housing
 - a. Intake will be generally completed by the on-site Supportive Housing staff.
 - b. The Supportive Housing staff will follow all guidelines for completing the **Intake Form** as detailed above.
 - c. At the end of each month the Director of Supportive Housing or a



designate will transport all completed **Intake Forms** and completed **Client Assessment Packages** to the head office for storage.

14. Discontinued intake

- a. Where a client has completed the intake process and does not require follow up as they have been directed to another agency and/or the client has decided to not pursue services offered by the agency the **Intake Form** will be filed by the Coordinator, Caregiver Support and Counseling in a separate discontinued file.
- b. At the end of each calendar year these forms will be shredded.

RELATED FORMS/DOCUMENTATION:

Intake Form

COMPLIANCE TO STANDARDS AND LEGISLATION:

1. This process is in compliance with the Personal Support and Homemaking Standards and Indicators as set out by OCSA
2. Through a continual integrated process and ensuring timely response to intakes, the standards of practice as demonstrated by the CCAC are met.
3. As evidenced in the Case Management Standards by OCSA, the intake process is the means by which a client relationship is initiated. It is used to lay a foundation of trust and future interactions. It is also necessary to initiate the client to the agency as a whole.
4. Legislation for consideration
 - Client Bill of Rights
 - Long Term Care Act

QUALITY MEASURES:

- A unified practice of informing prospective clients in detail, of all agency programs. Responding to the referral sources, making a concerted effort to assess all potential new clients for early interventions.
- Responsive to clients, all intakes are handled within 2 business days of receiving the request.
- Potential for immediate client interventions with appropriate programming.
- 50 **Intake Forms** are randomly selected and audited quarterly to ensure that intakes are handled within 2 business days.

AREA OF OPERATIONS: Eligibility Criteria**OPERATING PROCEDURES:**

1. Whether the client meets the CANES eligibility criteria will be determined through the intake process.
2. Clients are asked if they are a senior or adult with a permanent disability. They must also live within the CANES catchment area or will be referred to the appropriate agency.
3. All program directors are responsible for ensuring their program coordinators are aware of the eligibility criteria specific to their programs.
4. Programs with additional criteria are as follows:
 - a. Caregiver Support and Counselling
 - i. Be a caregiver of an adult with a disability or a senior.
 - b. Congregate Dining
 - i. Clients must be independently able to participate in the program and travel to and from the program.
 - ii. Have a caregiver who can actively assist them in participating.
 - c. Friendly Visiting
 - i. Be isolated and lacking social stimulation.
 - d. Newcomer Elderly Outreach
 - i. Be a newcomer to Canada and lacking the social skills necessary for social participation.
 - ii. Be using a language of the newcomer program.
 - e. Supportive Housing
 - i. Living in a designated Supportive Housing building.

RELATED FORMS/DOCUMENTATION:

Intake Form

COMPLIANCE TO STANDARDS:

1. CANES complies with the Ministry of Health and Long Term Care to provide services that meet the mission and vision of the agency.
2. CANES further complies with the Long Term Care Act by ensuring accessibility of programming and reducing barriers to service.

QUALITY MEASURES:

CANES continually assesses the needs of the community to adapt to the changing demands of our client group. CANES explores the identified needs of the community and develops initiatives to best serve those clients eligible for service. This is done through environmental scans and strategic planning respectively.

50 Intake Forms are audited quarterly to determine whether clients meet the eligibility criteria.



AREA OF OPERATIONS: Contracted Services - CCAC

OPERATING PROCEDURES:

New Clients

1. Inquiries from the Community Care Access Centre regarding service for a new client will be given to the appropriate Supportive Housing or Community Services Supervisor.
2. The In-Home Services Supervisor may contact the referral source for specific details concerning service time and needs of the potential client.
3. The In-Home Services Supervisor will consult with the Scheduler/Program Assistant regarding the availability of staff. Staff availability and client needs will be the deciding factors for the acceptance of a new client.
4. The In-Home Services Supervisor will confirm acceptance of the new client directly with the CCAC coordinator.
5. An **Intake Form** will be completed and filed in the client's file.
6. A file in CIMS will be opened and all relevant information received in the **Referral Package** will be added to the client electronic file.
7. The Community Care Access Centre Case Manager will forward by fax the Client Referral Package, including the assessment, service plan and OEO (authorization form).
8. The In-Home Services Supervisor will make an appointment with the client to complete the **Client Assessment Package**. A copy of the **Client Assessment Package** is kept in the client's home.
9. The Scheduler/Program Assistant is responsible to assign a worker and confirm services with the client.
10. All service delivery special instructions will be relayed to the field staff through the Supervisor/Scheduler/Program Assistant.
11. It is the responsibility of the In-Home Services Supervisor to telephone the client within 2 business days of their first service delivery to ensure satisfaction with first service provisions.
12. The Community Care Access Centre Service Report Form will be completed by the In-Home Services Supervisor and faxed to the Community Care Access Centre Case Manager after the first scheduled visit, after any change to the **Care Plan** or if there is a difference between CANES and CCAC assessment of the client.

Existing Client

1. All Return to Service clients will be required to have an updated **Client Assessment Package** completed within two business days of returning to service.
2. The In-Home services Supervisor/Director of Supportive Housing will be responsible to relay all changes in information to the Scheduler for follow up.
3. All changes to the client information will be added to CIMS by the Scheduler.
4. The Community Care Access Centre Service Report will be completed by the In-Home Services Supervisor and faxed to the Community Care Access Centre.
5. The In-Home Services Supervisor will follow-up with the client regarding service



satisfaction within 2 weeks of the initial service and then approximately every 6 months or as required.

RELATED FORMS/DOCUMENTATION:

Community Care Access Centre Client Homemaking Service Report Form &
Report Procedures
Intake Form
Client Assessment Package

COMPLIANCE TO STANDARDS:

1. All Homemaking and Personal Support standards are adhered to in order that service is continually assessed for quality, continuity and timeliness.
2. The agency strictly abides by the agreement with the CCAC to comply with relevant documentation and service delivery.
3. Legislation for consideration
 - Client Bill of Rights
 - Long Term Care Act

QUALITY MEASURES: CANES utilizes standard forms and procedures to ensure clients receive comprehensive information about the agency and are able to take part in their care to the best of their ability. CANES recognizes the need to ensure clients are informed of their rights and have a clear understanding of the agency role in their care. All CCAC client files are audited on a quarterly basis and reported to the CCAC on the "KPI" reporting tool.

Satisfaction surveys for CCAC clients are completed with the prior written consent of the CCAC.



AREA OF OPERATIONS: Assessment

OPERATING PROCEDURES:

1. **Client Assessment Packages** will be completed in the client home whenever possible.
2. Client caregivers, care coordinators, family members and other involved parties will have opportunity to have input into the client assessment if the client agrees.
3. All assessments will be completed by the appropriate program coordinator using the agency standard **Client Assessment Package**.
4. The program coordinator will be responsible to request assistance when unable to complete an assessment within the 2 business day standard.
5. All hard copies of assessments will be kept in a centralized filing system and only those program coordinators involved in service delivery will have access to the file and assessment package.
6. Client Assessment updates and all other client related documentation is maintained through the agency database.
7. During the assessment, the client will be given an agency brochure and will have described to them agency contact information and service delivery procedures.
8. All clients who are consenting to service by CANES will sign all relevant assessment package forms to authorize CANES to commence service, understanding that all information contained in the package is confidential true and accurate to the best of their ability.
9. Clients requesting subsidized rates for fee for service programs will complete a **Financial Assessment** and sign a **Consent to Inspect Assets Form**. For further information refer to the Financial Assessment operation.
10. Following the assessment, the client information is placed in CIMS. See “Clients Records”

*Where applicable, the signature of a family member, caregiver or designate will replace the client signature, only when expressly determined by the assessor, that the client is unable to sign on their own behalf.

RELATED FORMS/DOCUMENTATION:

- Client Assessment Form
- Protocol for Contacting Clients for Assessment

COMPLIANCE TO STANDARDS:

1. The assessment is used as a way to collaborate with clients on goal setting and to provide opportunity for the agency to link the client to other services and information.
2. The assessment is used to build a care plan while engaging clients in actively participating in their care and recognizing the client’s right to self-determination. It focuses on the client’s values, concerns and preferences.
3. The assessment package is also used to determine eligibility across the agency. Keeping the system unified and evidenced through various quality measures to ensure accuracy and privacy of information gathering.



4. Legislation for consideration
 - Privacy legislation
 - Long Term Care Act
 - Human Rights Code

QUALITY MEASURES:

Strict adherence to relevant legislation and continual feedback on the usage of the package ensures that the tool is up to date and kept current with accepted standards of practice. All clients are assessed on an annual basis as a minimum requirement, while clients who have been away from service for greater than one month, due to hospitalization or other reason are assessed as a component of their return to service. Assessments are conducted in the client's home whenever possible to assess their physical environment for safety and intervene where potential harm may occur.



AREA OF OPERATIONS: Care Plan

OPERATING PROCEDURES:

1. During the client assessment, the program coordinator will complete a **Care Plan** for all clients requesting assistance with personal care or homemaking. This will be based on the clients stated needs and personal goals.
2. The program coordinator will provide opportunity for the client's caregiver, family and support system to have input into the **Care Plan**, with consent of the client.
3. The **Care Plan** will consist of agreed duties field staff are to perform and identify areas of concern.
4. The completed **Care Plan** is copied (2) and one copy is placed in the client home in a mutually agreed place where the field staff will have access to the information, the second copy is placed in the client file stored in the CANES head office. The information is also updated electronically in the CANES database.
5. All duties listed in the **Care Plan** are to be added to the Demographics section of CIMS and kept current as needed.
6. The **Care Plan** is to be updated at least annually or whenever a client returns to service, or whenever there is a change in the health status of the client.

RELATED FORMS/DOCUMENTATION:

- Assessment Package
- Financial Assessment form
- Consent Form
- Release of Information Form

COMPLIANCE TO STANDARDS:

1. The **Care Plan** is intended to provide the program coordinator and client with clear expectations of service and help the client achieve his or her goals for service.
2. Field staff are trained to use the **Care Plan** as direction to deliver service to their clients in a manner that the agency and the client have agreed upon.
3. All information gathered for the purpose of a **Care Plan** is held in the strictest confidence and only used to aid in the delivery of service. The **Care Plan** is placed in the client home and made accessible to those other service providers at the sole discretion of the client.
4. Legislation for consideration
 - Long Term Care Act
 - Privacy Legislation
 - Human Rights Code

QUALITY MEASURES:

The collaboration with clients in developing their Care Plan is intended to actively engage clients in recognizing a need for self-determination and to make all parties aware



of service limitations. The Care Plan is regularly reviewed with the client and changes are made in recognition of any serious event in a client's life that may cause a need for changes to be made to the agency's service delivery pattern and scope.

50 Care Plans are audited quarterly to determine if the plan accurately reflects the needs of the patient.



AREA OF OPERATIONS: Financial Assessment

OPERATING PROCEDURES:

1. All clients applying for subsidized services are required to provide CANES with up to date financial information and complete a financial assessment.
2. The program coordinator will complete the forms and require the client to sign all relevant documents.
3. Financial assessments are conducted only with the consent of the client or official substitute decision maker.
4. All information taken for the completion of the financial forms is from the client's official bank records.
5. The program coordinator will write down all banking information on the **Determination of Available Monthly Income** including name of bank, account number, transit number and balance as of the day of assessment.
6. Banking information must be current information. Not older than one week.

RELATED FORMS/DOCUMENTATION:

Determination of Available Monthly Income
Bank Letter
Consent to Inspect Assets
Consent to Release Information

COMPLIANCE TO STANDARDS:

1. All financial information gathering is done in compliance with the standards as dictated by the City of Toronto.
2. The forms used for the gathering of financial information, including letters of consent are compliant with the standards of the City of Toronto.
3. Legislation for consideration
 - Ministry of Community and Social Services Act
 - Long Term Care Act

QUALITY MEASURES:

All financial assessments are available to clients requesting subsidized service. Any application made is strictly voluntary and clients may rescind their application at any time. Financial forms have been adapted from the Homes for the Aged division of the City of Toronto to be compliant with standard assessment forms.



AREA OF OPERATIONS: Delegated Acts

OPERATING PROCEDURES:

1. The client who is determined to need interventions by a PSW to perform a delegated act will receive instruction from a regulated health professional.
2. The staff who receive training for the delegated act are to be documented in CIMS and only those staff will be sent to perform the delegated act.
3. The client is invited to participate with their care as much as they are able, including the application of a delegated act.
4. For those clients experiencing limited mobility or cognitive impairment, they will be encouraged to participate with their care as well.

RELATED FORMS/DOCUMENTATION:

None

COMPLIANCE TO STANDARDS:

1. The services provided by CANES deal strictly with the assistance of clients to provide personal care and activities of daily living and household management. CANES does not provide assistance to clients that is the responsibility of regulated professionals. As clients may at times required assistance with an act that may be delegated, the agency will have the support worker trained by the regulated professional to perform the act for the client.
2. Delegated acts may include, but are not limited to: intermittent catheterization, bowel routines, suctioning, applying medicated creams, and any other act that causes the worker to penetrate the dermis of the client. Delegated acts also include the training of all staff on usage of Hoyer lifts and application of prescribed stockings.
3. Legislation for consideration
 - Regulated Health Professions Act
 - Long Term Care Act

QUALITY MEASURES:

CANES continually trains its staff on the appropriate duties they are to perform. In the case of delegated acts only those staff directly trained by the regulated professional are able to perform the act. Each staff will be trained who is expected to perform the act and will be retrained as needed.

Files of staff directly trained to perform Delegated Acts are reviewed annually to determine that training is updated or that training has occurred.



AREA OF OPERATIONS: Client Records

OPERATING PROCEDURES:

1. Both a computer and paper file are opened when service is initiated.
2. The client number assigned is the same in both records.
3. All relevant fields are completed in the computer file (CIMS).
4. The paper file will contain the following forms: **Intake Form, all Consent Forms; Client Assessment Package and Re-Assessment Forms; Care Plan and the CCAC Service Reports** where applicable.
5. A **File Checklist** is stapled on the inside of the paper chart. This is used to conduct an annual client file audit.
6. The client records (paper and computer) are closed at discharge and paper files are stored separately from active files.
7. All paper records are maintained for 7 years except for CCAC records, which are maintained until CCAC notifies to destroy.
8. Client records in CIMS are maintained and archived after seven (7) years.

RELATED FORMS/DOCUMENTATION:

- Client file (paper)
- Computer file
- File Checklist
- All related service forms

COMPLIANCE TO STANDARDS:

1. All client records are held in the strictest confidence. All clients have a right to view their files and are required to give 24 hour written notice of a request to view their file.
2. Computerized and paper files are audited annually to ensure proper reporting methods are maintained and comply with legislative standards of practice.
3. Legislation for consideration
 - Long Term Care Act
 - Personal Health and Information Protection Act
 - Quality of Care Information Protection Act
 - Ministry of Health Act

QUALITY MEASURES:

All client records are kept in a central location in cabinets that are kept locked at all times. The agency holds client personal information very secure and does not allow general access to records except in cases of subpoena or client/POA written request. In the case of clients from the Community Care Access Centre (CCAC), these client files are the property of the CCAC and so CANES will comply with their instructions regarding individual client file management.



AREA OF OPERATIONS: Scheduling

OPERATING PROCEDURES:

1. Services will be initiated once a **Client Assessment Package** has been completed, a **Care Plan** has been developed, and there is an available staff to provide service.
2. Every effort will be made to accommodate a client's request for service on a date and at a time that is convenient for the client.
3. Once client preference has been considered, an In-Home services worker will be assigned.
4. The Scheduler will create a master schedule in CIMS which cross references the client and worker. This is then adhered to as much as possible.
5. At any time either the agency or the client may request a change to their schedule.
6. The agency will attempt to ensure the client is served with the same staff or team of staff at a consistent time that is reliable and reasonable for all parties.

RELATED FORMS/DOCUMENTATION:

Client Assessment Package
Over/Under Service Report
Care Plan
Intake Form

COMPLIANCE TO STANDARDS:

1. Scheduling is conducted through a mutual format where clients have input into their service delivery. Every effort is made to promote client self-determination through a mutual agreement as to service delivery.
2. Clients have the right to request changes to time, day and worker based on preference staff availability. Clients also have the right to refuse care and expect service delivery that is respectful of their needs and independence.

QUALITY MEASURES:

All CANES clients are invited to participate in their care. The scheduler speaks directly with clients to agree to a time/date for service delivery to take place. All service delivery is coordinated with every effort made to ensure continuity of service and client satisfaction.



AREA OF OPERATIONS: Monitoring Service

OPERATING PROCEDURES:

1. Service monitoring is important to client satisfaction. Clients are encouraged to contact their program coordinator as they need and the program coordinator attempts to have regular contact with all active clients where determined by the scope of service delivery. All clients will have a minimal quarterly contact with their program coordinator.
2. Consistent contact may fluctuate depending on program and the level of need of the client.
3. All program coordinators make themselves available for telephone, home visits and/or conferences at the request of caregivers, other service providers and case managers.
4. All client interactions are logged in the Note panel of CIMS.
5. As identified, any change in client health, location and illness or service requirements is logged in the appropriate CIMS panels and accompanied by a note detailing the changes and how the new information was acquired.
6. All client concerns, issues and complaints are followed up with immediately. They are all logged on the **Event Reporting Form** and signed by all relevant parties. These Reports are reviewed and kept in a file with the program Director (Please see operation on Event Reporting).
7. All field staff having access to clients are expected to regularly report on general issues and concerns regarding their clients. Staff may be required to fill out communication logbooks or report verbally to their supervisor any information relevant to client care management.
8. All clients receiving In-Home services are required to sign a worker Time Sheet as record of services provided by the agency. These are collected from field staff every two weeks and used for reconciling payment and producing payroll.

RELATED FORMS/DOCUMENTATION:

Time Sheet
Communication Logbook
Event Reporting Form
Care Plan

COMPLIANCE TO STANDARDS:

1. Service monitoring complies with all program standards of OCSA. Monitoring is done on a regular basis as determined by the scope of the program the client is participating in and complies with minimum standards of practice.
2. All clients are dealt with in a respectful manner and encouraged to participate in determining their care.

QUALITY MEASURES:

CANES attempts to maintain ongoing comprehensive communication with clients as much as possible. Through various documentation procedures CANES ensures thorough



follow up is completed around issues of service delivery. CANES staff communicate with each other about client needs, and program delivery staff have access to client records in CIMS, in order to provide seamless services across programs.

AREA OF OPERATIONS: Event Reporting/Complaint and Appeals

OPERATING PROCEDURES:

1. Any report of an event is written on the **Event Reporting Form** and directed to the appropriate supervisor for follow up.
2. All events are required to be reported immediately, once an Event has occurred. Events include any situation or potential situation that would have an impact on service delivery, staff; the reputation of the agency or any potential adverse result.
3. In the case of a serious risk, the person reporting must report the risk to a live person.
4. Investigations for any event reported will be determined by the program Director. Once an initial action plan has been determined, with outcomes, the Director may request the program coordinator apply further interventions before completing the event report
5. Note will be made in CIMS referring to the existence of an **Event Report Form**.
6. All event reports are kept with the program director. These are reviewed annually to track trends in service delivery.
7. All health and safety occurrences are documented using the **Event Report Form** as well as the Form 7 WSIB Form.
8. Complaints regarding a workers performance are followed up using the Event report Form and followed up by the workers direct supervisor.
9. Complaint and Appeals Process
 - a. All client packages have come with a **Complaint and Appeals Process** information sheet.
 - b. Each client is encouraged to use this information to lodge a complaint.
 - c. Every client has the phone number of the Ministry of Health, Health Services Review Board, if they are not satisfied with the results of their complaint.
 - d. It is the responsibility of the program coordinator to assist the client to navigate the **Complaint and Appeals Process** to lodge their complaint.

RELATED FORMS/DOCUMENTATION:

Event Reporting Form
Event Report Summary
Complaint and Appeals Process Information Sheet

COMPLIANCE TO STANDARDS:

1. Event reports are held in strict confidence and are not placed in a clients/workers file but maintained by each director in a separate file and used to track trends.
2. All events whether high risk or near miss are followed up using the same method. Each event is treated as a priority and seeks to achieve client/worker satisfaction.
3. The purpose is to resolve the issue where possible, prevent a reoccurrence and attempt to satisfy the needs of the client while ensuring fairness to the staff and agency process.
4. legislation for consideration



Personal Health Information Protection Act
Long Term Care Act

QUALITY MEASURES:

Event reports are used to develop better agency systems and identify gaps in service and potential risks and hazards. Clients and staff are encouraged to participate in all investigations and Directors sign off on completion of an event to ensure quality measures are adhered to. All events are kept in a secure location with each program Director and monthly reporting is conducted to track trends and respond to those trends on an ongoing basis.

The Director of Quality produces a summary report for the Chief Executive Officer, monthly which is reported to the Board of Directors on a monthly basis.



AREA OF OPERATIONS: Reassessment

OPERATING PROCEDURES:

1. Clients requiring ongoing services from CANES will be reassessed annually regarding their care, or earlier as necessary.
2. Each Program Coordinator will print (from CIMS) a monthly list of clients requiring reassessment.
3. Reassessments are conducted by the client's Program Coordinator, in the client's home where possible.
4. All clients are encouraged to have their caregiver, support, family and/or other case managers present during their reassessment as an opportunity to collaborate on future planning of service goals.
5. Program coordinators will bring updated information for clients including business cards of other program coordinators in order that the client may choose to participate in further programming offered by CANES.
6. In preparation for the reassessment, the program coordinator will communicate with other program coordinators involved with the client, to ensure information gathering is accurate and not duplicate reassessments.
7. The program coordinator will print a client face sheet from CIMS and retrieve the previous assessment from the client file for reference during the reassessment.

RELATED FORMS/DOCUMENTATION:

- Client Assessment Package
- Determination of Available Monthly Income
- Bank Letter
- Consent to Inspect Assets
- Consent to Release Information

COMPLIANCE TO STANDARDS:

1. Clients are given every opportunity to take part in the planning of their service. They are encouraged to have their caregivers and informal supports present during reassessments to assist the client in determining their needs and goal setting.
2. Legislation for consideration
 - Long Term Care Act
 - Personal Health Information Protection Act

QUALITY MEASURES:

CANES makes every effort to ensure accurate information is maintained on all its clients. As clients needs change over time and may not be readily identifiable by the client or their supports, CANES utilizes the Client Assessment Package and process to determine the ongoing needs of the clients.

10 CIMS Assessments Due reports will be printed annually and reviewed annually to determine if CANES is achieving the operating procedure.

AREA OF OPERATIONS: Wait List Management**OPERATING PROCEDURES:**

1. Some programs experience wait times for service.
2. Clients requesting services where there is a waiting list will be informed of the wait list by the program coordinator.
3. Critical clients are identified as those whose needs are urgent because: they have no other support services; they have little or no family/friends support; their caregiver needs to be away; their placement to a LTC facility is pending or they are palliative.
4. An intake form will still be completed and the client will be placed on the wait list with a priority standing.
5. Clients who feel they are in need of immediate service will be informed of alternative service options and directed to other resources where applicable.
6. When a program has a vacancy the waitlist will be referenced and first priority given to clients with a priority rating of one (1).
7. Once the priority one clients have been removed from the waiting list, clients will be contacted chronologically from first applicant to most recent applicant.
8. Clients who want to proceed with service will complete a **Client Assessment Package** with a program coordinator.
9. Once the assessment package is completed and the client is determined to be eligible for service and accepting of service, they are removed from the waiting list and their status in CIMS is changed from waiting to active.
10. Clients who are paying the full fee for service themselves or are CCAC funded are priority admissions and may not need to be placed on a waiting list.
11. Program coordinators review the waiting list once per month and when a vacancy occurs.
12. Clients are admitted from the waiting list when financial and human resources are available.

RELATED FORMS/DOCUMENTATION:

Intake
Client Assessment Package

COMPLIANCE TO STANDARDS:

1. Wait lists are maintained in compliance with the Ministry of Health and Long Term Care client rights. All clients are entitled to be placed and maintained on a waiting list, whether eligible for services or not. As well, clients are not placed on a waiting list if they are living at risk. The agency works with the client family and other supports to ensure timely service is provided to the client.
2. Legislation for consideration
 - Long Term Care Act
 - Advocacy Act
 - Personal Health Information Protection Act



QUALITY MEASURES:

CANES monitors its wait lists monthly, to ensure clients on the list are still seeking services and to provide information on service alternatives for people in the community who may be living at risk.

All clients on the CANES waitlist are contacted at least 6 times annually to ensure their continued safety and determine any changes in their status. CANES is committed to timely access to service and no client at risk will be left without service.



AREA OF OPERATIONS: On Hold Clients

OPERATING PROCEDURES:

1. The agency initiates placing the client service ‘On-Hold’ once an event occurs preventing service from taking place.
2. Clients may request their service be placed on hold at any time.
3. The client record in CIMS is marked “On-Hold”.
4. For back up documentation purposes, all programs maintain a printed list of “On-Hold” clients these are kept in a secure location along with a general listing of clients; these are kept with the program coordinators for their programs.
5. The program coordinator maintains regular contact with the family or caregiver to monitor status of client on a bi-weekly basis.
6. Clients may be moved from hold to resumption of service once appropriate notice has been given to the program coordinator.
7. If a client has been on hold for more than one month (unless a scheduled hold has taken place, or no prospective change to the client has occurred), the program coordinator will conduct an in home assessment, completing the **Client Assessment Package**, to determine the clients continued eligibility and note any relevant changes to the client condition that may affect service delivery.
8. If/when CANES is informed the client is not returning to service, the client will be discharged according to discharge procedures.

RELATED FORMS/DOCUMENTATION:

Client Assessment Package

COMPLIANCE TO STANDARDS:

1. Clients are given every opportunity to direct their own care and determine whether they wish to continue services with CANES.

QUALITY MEASURES:

CANES monitors a clients hold status by maintaining contact with the client’s caregivers and supports on a regular basis to determine whether it is still appropriate for the client to be on hold or if they should be discharged from the program(s). Once services have been placed on hold, the agency expects to be notified of the clients return to service.

AREA OF OPERATIONS: Client Discharge**OPERATING PROCEDURES:**

1. Clients may be discharged for various reasons i.e. moving, death, client or family decision.
2. Client computer (CIMS) file status is changed to “terminated” and the reason for termination is noted in the notes section.
3. Date of discharge is recorded on the **File Checklist** in the clients file and **Intake Form**.
4. If a CCAC client, the **CCAC Discharge Form** is completed and forwarded to the CCAC.
5. If services are to be transferred to the spouse when a client is discharged it is necessary to close the file of the existing client and re-open a file for the spouse. A note is made in CIMS about the relationship of these 2 files.
6. Discharged files are removed from the active filing cabinet and placed in the discharged filing cabinet. Where possible all CANES files will be retrieved from the client home and placed in the discharged file.
7. Clients who are admitted to hospital are not discharged but placed “On Hold” until notified to discharge, or if a client has been on hold longer than three months.

RELATED FORMS/DOCUMENTATION:

File Checklist
CCAC Client Homemaking Service Report Form
Additions/Changes to Database Form

COMPLIANCE TO STANDARDS:

1. Client discharges are compliant with typical standards of practice for community support services. As the client population requires flexible service provision, CANES will only discharge a client from service once it has been confirmed that the client will not be returning to service.
2. Legislation governing client discharge:
 - Ministry of Health and Long Term Care Act
 - Personal Health Information Protection Act

QUALITY MEASURES:

3. Client files are monitored through reviews and reassessments to ensure only those clients no longer requiring the services of CANES are discharged. Clients are given every opportunity to participate in their care, including the right to discontinue their services, permanently.