Canadian Mental Health Association
Shuswap-Revelstoke
Mental health for all

Policy Title			**Organizational Privacy Policy**
Original date	Mar 4, 2016	**Section**	**Purpose**
Date last update	August 2024	**Policy Number**	**POL 1.0**

Privacy is important to CMHA Shuswap/ Revelstoke. In order to ensure personal information of volunteers, employees, members, donors and clients remains private, we are committed to protecting individual's privacy rights and personal information.

In fulfilling our mission, we sometimes gather and use personal information (as defined in this policy) from employees, clients, members, volunteers and donors. We do this in accordance with British Columbia's *Personal Information Protection Act* (PIPA) which sets out the ground rules for how B.C. businesses and not-for-profit organizations may collect, use and disclose personal information.

This privacy policy, in compliance with PIPA, outlines the principles and practices we will follow in protecting individuals' personal information. Our privacy commitment includes ensuring the accuracy, confidentiality, and security of individuals' personal information and allowing individuals to request access to, and correction of, their personal information. We inform individuals of why and how we collect, use and disclose their personal information; obtain their consent where required; and only handle their personal information in a manner that a reasonable person would consider appropriate in the circumstances.

This privacy policy applies to CMHA Shuswap/Revelstoke (CMHA S/R), including all employees, volunteers, programs, and services. This policy also applies to any contracted service providers collecting, using or disclosing personal information on behalf of CMHA S/R.

Definitions

"**Personal information**" means information about an identifiable individual (e.g., name, age, date of birth, home address, e-mail address, phone number, social insurance number, marital status, ethnicity, income, medical and health information, education, employment information, banking information, credit card information, and emergency contact information). Personal information does not include business contact information (described below).

"Business contact information" means information that would enable an individual to be contacted at a place of business and includes name, position name or title, business telephone number, business address, business email or business fax number. Contact information is not covered by this policy or PIPA (BC's Personal Information Protection Act).

"**Individual**" includes clients (any individual receiving services or products from CMHA S/R), participants, customers, members, volunteers, employees, and donors.

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Policy Title			**Organizational Privacy Policy**
Original date	Mar 4, 2016	**Section**	**Collecting Personal Information**
Date last update	August 2024	**Policy Number**	**POL 1.1**

POLICY

Unless the purposes for collecting personal information are obvious and the individual voluntarily provides their personal information for those purposes, we will communicate the purposes for which personal information is being collected, either orally or in writing, before or at the time of collection.

We will only collect personal information that is necessary to fulfill the following purposes:

- To verify identity;
- To identify client preferences;
- To understand the needs of our clients;
- To enrol the client in a program or service;
- To ensure a high standard of service to our clients;
- To issue tax receipts;
- To contact and thank volunteers and supporters;
- To organize employee payroll;
- To screen volunteers;
- To schedule volunteer activities;
- To deliver services;
- To award bursaries;
- To elect Board Members;
- To keep members informed and up to date on our activities, special events and opportunities;
- To register individuals for workshops and conferences; and
- To meet regulatory requirements.

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Policy Title			Organizational Privacy Policy
Original date	Mar 4, 2016	**Section**	**Consent**
Date last update	August 2024	**Policy Number**	**POL 1.2**

POLICY

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

Where possible we will collect personal information directly from the individual. In cases where consent for collection is required, we may collect an individual's personal information from another source with the individual's consent.

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

Consent may also be implied where an individual is given notice and a reasonable opportunity to opt-out of their personal information being used for mail-outs or the marketing of new services or products and the individual does not opt-out.

Subject to certain exceptions (e.g., the personal information is necessary to provide the service or product, or the withdrawal of consent would frustrate the performance of a legal obligation), individuals can withhold or withdraw their consent for CMHA S/R to use their personal information in certain ways. An individual's decision to withhold or withdraw their consent to certain uses of personal information may restrict our ability to provide a particular service or product. If so, we will explain the situation to assist the individual in making the decision.

We may collect, use or disclose personal information without the individual's knowledge or consent as outlined in sections 12, 15, and 18 of PIPA, including but not limited to the following circumstances:

- When the collection, use or disclosure of personal information is permitted or required by law;
- In an emergency that threatens an individual's life, health, or personal security;
- When a reasonable person would consider that it is clearly in the interests of the individual and consent cannot be obtained in a timely way;
- When the personal information is available from a public source;
- When the information is used to decide whether an individual is suitable for an honour, award or other similar benefit including scholarships or bursaries;
- When we require legal advice from a lawyer;
- For the purposes of collecting or paying a debt;
- To protect ourselves from fraud;
- To investigate an anticipated breach of an agreement or a contravention of law

- When another Act or regulation requires or allows for the collection of information without consent (e.g. collecting an employee's social insurance number as required by the *Income Tax Act* to issue a T-4 slip);
- Where the information is necessary to collect or pay a debt owed to or by CMHA-SR;
- Where consent is not required for disclosure (e.g., the disclosure is for the purpose of complying with a subpoena, warrant or order issued or made by a court; the disclosure is to law enforcement to assist in an investigation);
- To contact next of kind or a friend of an injured, ill or deceased individual;
- For employment purposes;
- For research or statistical purposes in certain circumstances;
- When we collect/use/disclose information from on or behalf of another organization (to which the individual previously gave consent), as long as it's for the purpose for which it was originally collected and is to assist us in carrying out our work on behalf of that organization.

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Policy Title			**Organizational Privacy Policy**
Original date	Mar 4, 2016	**Section**	**Using and Disclosing Personal Information**
Date last update	August 2024	**Policy Number**	**POL 1.3**

POLICY

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

- To conduct surveys in order to enhance the provision of our services; and
- To contact our clients directly about products and services that may be of interest.

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

We will not sell, rent or trade client lists or personal information to other parties.

When CMHA S/R provides information to research bodies performing studies on mental health populations, the data is in aggregate form and not personally-identifying, so individuals remain anonymous. Any disclosure of information is compliant with Section 21 of PIPA.

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Policy Title			**Organizational Privacy Policy**
Original date	Mar 4, 2016	**Section**	**Retaining Personal Information**
Date last update	August 2024	**Policy Number**	**POL 1.4**

POLICY

If we use individual personal information to make a decision that directly affects the individual, we will retain that personal information for at least one year so that the individual has a reasonable opportunity to request access to it.

Subject to the one-year retention requirement, we will retain personal information only as long as necessary to fulfill the identified purposes or a legal or business purpose.

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Policy Title			**Organizational Privacy Policy**
Original date	Mar 4, 2016	**Section**	**Ensuring Accuracy of Personal Information**
Date last update	August 2024	**Policy Number**	**POL 1.5**

POLICY

We will make reasonable efforts to ensure that personal information is accurate and complete where it may be used to make a decision about the individual or disclosed to another organization.

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

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

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Policy Title			Organizational Privacy Policy
Original date	Mar 4, 2016	**Section**	**Securing Personal Information**
Date last update	August 2024	**Policy Number**	**POL 1.6**

POLICY

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

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

Physical Safeguards

- Personal information will be stored in locked filing cabinets. Employee access to storage areas or filing cabinets will be restricted.
- Files and documents containing personal information will not be left on desks when unattended (e.g., overnight).
- Offices where personal information is held will be physically secured (e.g. locking doors).
- Files containing personal information will not be removed from the CMHA S/R offices (e.g. employees will not take files containing personal information home to work on).
- Where files containing personal information need to be transported (e.g. for an office move), a secure courier service should be used.

Administrative Safeguards

- We will provide training so that all employees know about and understand this privacy policy and PIPA's requirements for protecting personal information.
- Personal information, especially sensitive information, will only be accessible to those employees who need to know the information.
- We will use role-based access to systems so that employees are only able to access personal information they need to perform their duties.
- Employees will use cover sheets when faxing personal information and will establish and follow procedures for ensuring only the authorized recipient has received the fax.

Technical Safeguards

- Employees will use password-protected computer screensavers so unauthorized personnel or visitors cannot see personal information.
- We will protect our computers and network by using firewalls, intrusion detection software, antivirus software, and by encrypting personal information.

- Employees will use strong and secure passwords to make sure that only authorized employees have access to computer storage devices or to the network. Employees will be prompted to change these passwords on a regular basis.
- Personal information stored on mobile electronic devices such as laptops and USB flash drives will be encrypted.
- All mobile devices (e.g. laptops and mobile phones) containing personal information must lock automatically and must require a password to unlock.
- Employees should not send personal information via e-mail. If personal information is received via e-mail, the receiver (employee) may respond but should de-identify the personal information, where possible (e.g. use client initials instead of their full name) and should not provide additional personal information. The receiver may also advise the sender (client or other employee) that email is not a secure method of communication.
- We will securely wipe all personal information from hard drives before they are discarded, sold or donated.
- Secure databases which contain personal information require password login and have timeout forced logout when idle.
- We will use appropriate security measures when destroying individuals' personal information such as shredding documents and deleting electronically stored information.
- We will continually review and update our security policies and controls as technology changes to ensure ongoing personal information security. We will provide training so that all employees know about and understand this privacy policy and PIPA's requirements for protecting personal information.
- Personal information, especially sensitive information, will only be accessible to those employees who need to know the information.
- We will use role-based access to systems so that employees are only able to access personal information they need to perform their duties.
- Employees will use cover sheets when faxing personal information and will establish and follow procedures for ensuring only the authorized recipient has received the fax.

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Policy Title			**Organizational Privacy Policy**
Original date	Mar 4, 2016	**Section**	**Providing Individuals Access to Personal Information**
Date last update	August 2024	**Policy Number**	**POL 1.7**

POLICY

Individuals have a right to access their personal information, subject to limited exceptions under section 23 of PIPA, which include but are not limited to:

- solicitor-client privilege;
- where the disclosure would reveal personal information about another individual;
- where there are health and safety concerns;
- where the disclosure would reveal confidential commercial information; or
- where the disclosure would reveal the identity of an individual who provided information about another individual.

A request to access personal information must be made in writing and provide sufficient detail to identify the personal information being sought. A request to access personal information will be forwarded to the Privacy Officer for response.

Upon request, we will also tell individuals how we use their personal information and to whom it has been disclosed if applicable.

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

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

A fee will not be charged for an employee requesting their personal information.

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

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Policy Title			**Organizational Privacy Policy**
Original date	Mar 4, 2016	**Section**	**Contractors and Service Providers**
Date last update	August 2024	**Policy Number**	**POL 1.8**

POLICY

This policy applies to all contractors and service providers collecting, using or disclosing personal information on behalf of CMHA S/R.

In the event that we contract a third party to perform work for our organization, legally binding confidentiality agreements exist that commit those organizations to strictly adhere to CMHA S/R's privacy policy and PIPA.

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Policy Title			**Organizational Privacy Policy**
Original date	Mar 4, 2016	**Section**	**Roles and Responsibilities**
Date last update	August 2024	**Policy Number**	**POL 1.9**

POLICY

The protection of personal information is a responsibility shared by all.

All employees, including staff, management, and volunteers, are responsible for:

- Complying with this policy and PIPA;
- Participating in privacy training provided by CMHA S/R;
- Requesting clarification where needed; and
- Reporting concerns, complains and requests for information to the Privacy Officer.

Managers are responsible for:

- Ensuring compliance with this policy and PIPA in their program; and
- Responding to requests for information from clients in their program area and consulting with the Privacy Officer for guidance in responding.
- Providing the time and resources for employees to attend training;
- Supporting employees in implementing this policy in their program or area.

The Manager of HR is responsible for:

- Ensuring CMHA S/R's compliance with this policy and the *Personal Information Protection Act;*
- Advising employees on specific questions relating to release of information and privacy;
- Reviewing and updating this policy regularly, or as PIPA is amended from time to time;
- Providing training and education to all employees;

The Executive Director is responsible for:

- Annually communicating a privacy complaints reports received by the Privacy Officer to the Board of Directors.

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Policy Title			**Organizational Privacy Policy**
Original date	Mar 4, 2016	**Section**	**Complaints and Requests for Information**
Date last update	August 2024	**Policy Number**	**POL 1.10**

POLICY

At CMHA S/R, we are committed to having an accessible and responsive complaint-handling process in place to ensure individuals are able to make complaints about our organization's compliance with the Personal Information Privacy Act (PIPA).

Individuals should direct any complaints, concerns or questions regarding CMHA S/R's compliance in writing to the Privacy Officer. The Privacy Officer reports all complaints, concerns or questions to the Executive Director.

Privacy Officer Contact Information:

Human Resources Manager
CMHA – Shuswap/Revelstoke
433 Hudson Ave. NE., Box 3275
Salmon Arm, BC V1E 4S1
250-832-8477
Info.sr@cmha.bc.ca

This policy and procedure applies to complaints received by CMHA Shuswap/Revelstoke (CMHA) about our activities, programs, services, staff or volunteers.

A. Guiding Principles

- It is in the interest of all parties that complaints are dealt with promptly and resolved as quickly as possible.
- The review of complaints is fair, impartial, and respectful to all parties.
- Complainants are advised of their options to escalate their complaint to a more senior staff person if they are dissatisfied with treatment or outcome.
- Complainants are provided clear and understandable reasons for decisions relating to complaints.
- Updates are provided to complainants during review processes.
- Complaints are used to assist in improving services, policies, and procedures.

B. Types of Complaints

Definition: A complaint is an expression of dissatisfaction about the service, actions, or lack of action by CMHA as an organization or a staff member or volunteer acting on behalf of CMHA.

Examples include but are not limited to:

- perceived failure to do something agreed upon;
- failure to observe policy or procedures;
- error made by a staff member/volunteer; or
- unfair or discourteous actions/statements by a staff member/volunteer.

Anyone personally affected can complain and their complaint will be reviewed in accordance with this procedure.

C. Submitting a Complaint

If you would like to submit a concern, feedback or a complaint please do so by email, mail or phone. Complaints may be received in writing (mail, email),or verbally (by phone or in person).

We encourage complainants to submit in writing where feasible. This will ensure all details of the complaint are captured accurately so that the most appropriate person within CMHA can best respond. Where this doesn't occur, a verbal complaint will still be documented.

D. Complaint Receipt and Handling

An employee or volunteer who receives a complaint should first determine the proper person to handle it. This will generally be the person who has the primary relationship with the complainant or has the specific knowledge that is needed to resolve the problem. It is the responsibility of the person who receives the complaint to either resolve it or transfer it to another person who can resolve it. If the complaint is transferred, the recipient must acknowledge to the transferor that he/she has received it and will act on it.

The person who initially receives the complaint should acknowledge to the complainant that the complaint has been received and will be acted on either by themselves or another employee. If a timeframe for action can be determined, that should be included in the acknowledgement. Basic contact information including name, phone number and email address should immediately be recorded.

E. Resolving the Complaint

Every effort should be made to resolve complaints received in a timely fashion. When receiving a verbal complaint, staff should listen and seek to understand the complaint, and may attempt to resolve it immediately. Complaints received in writing should be acknowledged within 2 business days and staff should attempt to resolve the matter within 10 business days.

Where a complaint cannot be easily resolved, it should be escalated to the relevant Manager. If the Manager cannot resolve the complaint, it will be escalated to the Manager of Human Resources. If the complaint is about the Manager of Human Resources, then the complaint will be escalated to the Executive Director. If the complaint is about the Executive Director, it will be handled by the Chair of the Board of Directors.

Complainants should be kept informed of the status of their complaint. Every attempt should be made to resolve escalated complaints within an additional 10 business days so that all complaints are resolved within a month of having been received.

F. Documenting the Complaint

It is necessary to keep a record of any complaint that involves a dispute over money as well as any complaint that cannot be resolved immediately. Information about such complaints must be recorded on an incident form. Information recorded on the form includes a description of the complaint, who handled it, what was done to resolve the complaint, timeframe, and a description of the resolution.

A summary of the complaints received including number and type will be reported to the Board of Directors annually.

If we are not able to resolve your concern, the individual may contact the Office of the Information and Privacy Commissioner for British Columbia:

PO Box 9038 Stn. Prov. Govt., Victoria, BC V8W 9A4
1-800-663-1376 / info@oipc.bc.ca / www.oipc.bc.ca

Links

Legislation: Personal Information Protection Act (PIPA)

Implementation Tools for Private Sector Privacy Legislation. Ministry of Technology, Innovation and Citizens' Services

A Guide to PIPA for Businesses and Organizations. (2012) Office of the Information Privacy Commissioner for British Columbia.

Guide to the *Personal Information Protection Act* (for the public). Knowledge and Information Services, Office of the Chief Information Officer, Ministry of Citizens' Services.

Privacy Protection Schedule

Privacy Helpline. The OCIO also operates a Privacy Helpline, providing support, direction and training to private sector organizations and the public on PIPA's requirements.
Phone: 250-356-1851 / Email: Privacy.Helpline@gov.bc.ca

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Policy Title			Organizational Privacy Policy
Original date	Nov 1, 2017	**Section**	**Social Media**
Date last update	August 2024	**Policy Number**	**Pol 1.11**

POLICY

For the purposes of this policy, social media means any facility for online publication and commentary, including (but not limited to) blogs, discussion forums, wikis, and social networking sites such as Facebook, LinkedIn, Twitter (X), Flickr, Google, Instagram, YouTube and any other relevant social media platforms.

Social media for work purposes

Access to social networking sites is available to employees who are designated with maintaining agency approved social networking systems for the purpose of communicating with and building membership, donor lists and stakeholders. Social media can also be used as sanctioned by the Association to provide recognition to stakeholders, members and donors as well as to promote special events, raise awareness and promote mental health. The use of social networking sites is approved for these employees only for the purpose of managing Association business, not for personal use. Employees maintaining social networking sites are required to be mindful that this "site maintenance" does not interfere with primary job responsibilities.

Confidential information, including personally identifying information about clients or participants, as outlined in detail in our Privacy Policy, and any content under a non-disclosure agreement, must be protected and must not be disclosed for any reason. All uses of social media must follow the same ethical and privacy standards that CMHA S/R employees must otherwise follow in their routine communications.

Writing in detail about a project or experience directly related to CMHA S/R, will only be acceptable with express permission from the project lead, or person who is responsible for the flow of information about the project.

Privacy settings for CMHA S/R profiles on social media platforms should be set to allow anyone to see information similar to what would be on the CMHA S/R website. For example, the Info section on Facebook should be open to anyone. Other privacy settings that might allow others to post information

Blogging anonymously, using pseudonyms or false screen names is prohibited. Content should be considered carefully, so that nothing dishonest, untrue, or misleading, either about CMHA S/R or in reference to other organizations is said.

Respect copyright laws. Proper respect for the laws governing copyright and fair use or fair dealing of copyrighted material owned by others, including CMHA S/R is expected.

Any photos shared via social media must be accurately attributed and that written permission is obtained from both the photographer and the subjects to publish them.

Proper consideration of privacy and of sensitive topics that may be considered objectionable or inflammatory.

Employees, volunteers, participants and stakeholders should not be cited or obviously referenced online without their approval and never discuss confidential details of a participant, employee, stakeholder or volunteer relationship. It is acceptable to discuss general details about the projects the organization is running, but those involved and their personal details should remain anonymous unless they have given explicit permission for their names (and/or photos/videos) to be published. Photo and video release forms are available.

Any communication through official social media channels should meet the same standards as any other correspondence. Direct requests or comments should be addressed or referred to the appropriate CMHA employee member within a day. Every effort should be made to ensure that any information and/or website links provide reputable, reliable and accurate information.

If you see misrepresentations made about CMHA S/R in the social media landscape, please bring them to the attention of the appropriate Manager.

Errors made must be corrected as quickly as possible.

Within CMHA S/R, the Manager that leads Communication is responsible for maintaining the organization's social media channels and setting up new accounts. While any employee member can participate in the social media landscape on their own time, please consult your Manager if you are interested in contributing to an existing account, or setting up a new one.

Personal use of social media

While it is your personal decision whether to use social media networks and tools or not, employees should always be aware that their behaviour and opinions reflect on the organization. Publication and commentary on social media carries similar obligations to any other kind of publication or commentary.

While communication through social media networks is primarily a personal matter, this is not the same as it being private. With this in mind, employees should be cautious in using personal social media platforms in ways that could disparage or embarrass CMHA S/R, the people we serve, our partners and staff.

If you are speaking about CMHA on personal social media platforms, employees are expected to include a disclaimer making it clear that views expressed are not officially endorsed by CMHA. Maintaining good boundaries between work and personal life is important. Employees can amplify our official social media posts on their personal social media platforms. We would request that employees don't engage or respond on behalf of the organization on social media, if you note something please bring it forward to your Manager.

CMHA S/R employees participating in social media in an unofficial/personal capacity should bring online incidents that threaten the CMHA S/R reputation to the attention of their Manager.