

**POLICIES AND PROCEDURES
FOR THE
JAMES BAY COMMUNITY PROJECT**

598 Management Report

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TABLE OF CONTENTS

EXECUTIVE SUMMARY	4
BACKGROUND	4
OBJECTIVES	4
SUMMARY OF METHOD	4
FINDINGS	4
CONCLUSION	6
RECOMMENDATIONS	7
INTRODUCTION	9
PROJECT CLIENT AND PROBLEM	9
THE NEED	9
PURPOSE AND ORGANIZATION OF THE REPORT	10
BACKGROUND	11
<i>Family Centre</i>	11
<i>Community and Volunteer Services</i>	12
<i>Youth Clinics</i>	12
<i>Hosted Programs and Services</i>	12
LITERATURE REVIEW	12
DEFINITION OF POLICY AND PROCEDURE	13
POLICIES AND PROCEDURES WITHIN THE CONTEXT OF THE ORGANIZATION’S OPERATIONS	13
HOW TO DEVELOP GOOD POLICIES AND PROCEDURES	14
POLICIES FOR NON-PROFIT ORGANIZATIONS	14
CONCEPTUAL FRAMEWORK - BALANCED SCORECARD	15
METHODOLOGY	16
METHOD 1: LITERATURE REVIEW	16
METHOD 2: PRIMARY RESEARCH	17
<i>Sampling</i>	17
<i>Design of Instruments</i>	18
<i>Data Gathering Approach</i>	19
<i>Strengths and Weaknesses of the Research Design</i>	20
METHOD 3: REVIEW OF NON-PROFIT SOCIETIES POLICY AND PROCEDURES DOCUMENTS	20
<i>Policy Template</i>	20
<i>Review of Content</i>	21
METHOD 4: REVIEW OF LEGISLATION, GUIDELINES, PUBLICATIONS, AND WEBSITES	21
FINDINGS.....	21
FINANCIAL MANAGEMENT	22
HUMAN RESOURCES	25
ADMINISTRATION	29
HEALTH AND SAFETY	32
RESPONDING TO STAKEHOLDERS.....	37
VOLUNTEER MANAGEMENT.....	38
RESPONDING TO PROGRAM AND SERVICES CLIENTS.....	40
DISCUSSION.....	42
FINANCIAL MANAGEMENT.....	42
HUMAN RESOURCES MANAGEMENT.....	44

ADMINISTRATION	48
HEALTH AND SAFETY	50
RESPONDING TO STAKEHOLDERS.....	55
VOLUNTEER MANAGEMENT.....	56
RESPONDING TO PROGRAM AND SERVICES CLIENTS.....	58
RECOMMENDATIONS	60
DEVELOPED POLICIES	60
POLICY SPECIFIC RECOMMENDATIONS.....	61
NEXT STEPS.....	63
CONCLUSION	65
GENERAL REFERENCES	66
POLICY SPECIFIC REFERENCES	67
<i>Client Records Management Policy</i>	67
<i>Communicable Disease and Infection Control Policies</i>	68
<i>Privacy and Consent – Minors Policy</i>	68
<i>Responding to Medical Emergencies Policy</i>	69
<i>Violence in the Workplace Policy</i>	69
<i>Working Alone Policy</i>	70
APPENDICES.....	71
APPENDIX 1 – INTERVIEW SCRIPT	71
APPENDIX 2 – EMAIL SCRIPT – INVITATION TO PARTICIPATE	74
APPENDIX 3 – EMAIL SCRIPT – FOLLOW UP EMAIL TO SECURE INTERVIEWS.....	76
APPENDIX 4 – EMAIL SCRIPT – EMAIL WITH INTERVIEW QUESTIONS	78
APPENDIX 5 – PARTICIPANT CONSENT FORM	79
APPENDIX 6 – CODING TABLES.....	82
APPENDIX 8 – CLIENT RECORDS MANAGEMENT POLICY	86
APPENDIX 9 – COMMUNICABLE DISEASE POLICY	92
APPENDIX 10 - RESPONDING TO MEDICAL EMERGENCIES POLICY	96
APPENDIX 11 - VIOLENCE IN THE WORKPLACE POLICY	101
APPENDIX 12 - WORKING ALONE POLICY	108
APPENDIX 13 – INFECTION CONTROL POLICY	113
APPENDIX 14 - PRIVACY AND CONSENT – MINORS, POLICY	119
APPENDIX 15 - CLIENT CODE OF CONDUCT STATEMENT	123

EXECUTIVE SUMMARY

Background

The James Bay Community Project (which is also referred to in this paper as “JBCP” and “the Project”) is a Neighborhood House that provides programs and services to the James Bay and neighboring communities in Victoria, British Columbia. JBCP’s clientele includes individuals of all ages as well as families and groups and JBCP’s programs and services include a family centre, a variety of community and volunteer services, youth clinics and a primary health centre. The Project has 12 staff and over 300 volunteers who run its programs and services. The Project has existed since the 1970’s but it has very few written operational policies and procedures, which is the need that this research project will address.

Objectives

The primary objective of this report is to determine what policies and procedures JBCP needs by understanding the behaviours of JBCP employees that are effective and ineffective in performing day-to-day operations. The purpose of understanding existing practices is to create policies and procedures to guide and drive effective behaviours by staff.

Summary of Method

In order to meet the primary objective this project employed the following methods:

1. A review of the theoretical literature on policy and procedures.
2. Primary research in two phases. Phase one involved qualitative interviews with JBCP staff and phase two involved contacting various non-profit societies in British Columbia with similar structures and mandates to request their policies and procedure for the researcher to use as examples.
3. A review of the non-profit societies policy and procedures documents.
4. A review of relevant legislation, guidelines, publications, and websites, to govern the policies and procedures.

Findings

The conceptual framework that the researcher used to conduct the staff interviews is a modified balanced scorecard originally containing the following categories: financial management, human resources, administration, health and safety and responding the clients. The findings of the research revealed two additional areas that were subsequently added to the modified balanced scorecard: volunteer management and responding to program and services clients. For the sake of clarify, given the addition of the latter category, the researcher renamed the “responding the clients” category “responding to stakeholders”. In total there were seven categories of findings. The themes and

behaviours/practices that surfaced within each of these categories are shown in the table below:

Modified Balanced Scorecard Category	Findings Themes	Relevant Behaviours/Practices
Financial Management	Security of Money	<ul style="list-style-type: none"> • Storage of funds on JBCP premises • Sales of items at JBCP and thrift store
	Management of Program Funds	<ul style="list-style-type: none"> • Amount of funds kept in program petty cash • Tracking petty cash for programs
	Management of Financial Donations	<ul style="list-style-type: none"> • Receiving, handling, processing and receipting financial donations
Human Resources	Performance Management	<ul style="list-style-type: none"> • Performance Appraisals • Professional development and training
	HR Processes	<ul style="list-style-type: none"> • Process for hiring • Personnel Records • Job Descriptions
	Conduct and Respect	<ul style="list-style-type: none"> • Understanding each employee's role • Employee conduct
	Reporting/Chain of Command	<ul style="list-style-type: none"> • Reporting inappropriate conduct • Grievance process for employees • Communication between staff, the ED and the Board
Administration	Security of Client Information	<ul style="list-style-type: none"> • Location of client personal information at JBCP • Use of personal email for business • Sharing client personal information in emails • Removal and transport of client information • Access to JBCP's database • Confidentiality statements
	File Management	<ul style="list-style-type: none"> • File retention timeframes • Process for opening and closing files
	Internal Business Processes	<ul style="list-style-type: none"> • Expense reports, mileage

		reports, cheque requisitions •Outgoing voicemail messages
Health and Safety	Food Safety	•How food is handled •Food distribution •Determination of whether food is safe to serve
	Staff health and safety	•Staff as volunteers •Violence in the workplace •Working alone
	Client health and safety	•Responding to critical incidents •Responding to communicable disease(s)
Responding to stakeholders	Safety	•Working with contractors •Working with external volunteers
Volunteer Management	Fitness and Conduct	•Volunteers driving clients •Appropriate volunteer behaviour •Exit strategy to dismiss volunteers
	Expectations	•Roles and responsibilities for the volunteer drivers •Maintenance of volunteer drivers' vehicles
	Safety	•Volunteers working alone
Responding to Program and Services Clients	Protection of Personal information	• What kind of personal information should be collected •How should personal information be obtained and protected
	Internal Business Processes	•Complaint process •Receiving gifts from clients •Removal of services

Conclusion

The primary conclusion of the research is that JBCP needs a variety of policies and procedures in each modified balanced scorecard area. Due to time constraints, it was necessary for JBCP's Executive Director to prioritize policies and procedures for the researcher to develop, which resulted in the following list:

- Client Records Management
- Client Code of Conduct Statement
- Communicable Disease
- Infection Control
- Privacy and Consent – Minors
- Responding to Medical Emergencies
- Violence in the Workplace
- Working Alone

Recommendations

A secondary objective of this report is to offer JBCP recommendations for the most effective use of each of these policies, as well as some next steps for effectively implementing the policies.

Recommendation related to the Client Records Management Policy

JBCP should consider establishing a privacy management program and appoint a privacy officer. The primary benefit of a privacy management program is to ensure JBCP remains in compliance with privacy laws. A secondary benefit is that a privacy management program will foster a culture of privacy, which will reinforce the privacy policies put into place.

Recommendation related to the Communicable Disease and Infection Control Policies

JBCP should consider establishing an infection control program. The program should include training for staff and volunteers in how to safeguard themselves from infections. Additionally the program should include education for stakeholders about how they may be exposed to contagious diseases and how to deal with them.

Recommendations related to the Responding to Medical Emergencies, Violence in the Workplace and Working Alone Policies

The researcher suggests that JBCP staff have the following training annually:

- Responding to critical incidents
- Awareness of violence in the workplace
- Non-violent crisis intervention

In addition, JBCP should consider implementing a workplace violence prevention program where the Occupational Health and Safety committee assess each position for the risk of violence and makes recommendations for minimizing the risk(s).

Recommendations related to the Client Code of Conduct Statement

In order that this statement be disseminated in the most effective manner JBCP's strategy should be both active and passive.

Suggestions for active dissemination are:

- Specific distribution to program and other staff
- Secondary distribution/elaboration by program staff to participants
- Distribution/explanation to all rental users

Suggestions for passive dissemination are:

- Preliminary information on rental application forms
- General availability at reception
- Public display on bulletin boards and other suitable program locations

Recommendations to JBCP's Executive Director for Using the Policies and Procedures

1. Consult Key Stakeholders

While the Executive Director has already involved key staff by asking them to review and provide feedback on relevant drafts of the policies and procedures, it is advisable that she expand on this process before taking the policies to be approved by the JBCP Board of Directors. In addition, it is recommended that the Executive Director have a lawyer review the policies to ensure that they comply with the law and JBCP's collective agreements.

2. Implement

Suggestions for implementation include communicating the policies and procedures to JBCP staff in person rather than by email and JBCP might also appoint a "go-to" person for questions. Finally, it is important that JBPC enforce the policies and procedures once they have been implemented, in order to ensure employees use them and take them seriously.

3. Review, Update and Communicate Changes

Policies and procedures should be reviewed and updated annually so that they remain relevant, and changes should be communicated to staff in person.

INTRODUCTION

Project Client and Problem

The James Bay Community Project is a non-profit organization that serves James Bay and surrounding communities. JBCP is a Neighborhood House whose vision is a healthy, inclusive community where families, youth, seniors, individuals and groups find the supports they need (James Bay Community Project [JBCP] Website, About Us page). JBCP works towards its vision by operating and facilitating programs and services that improve individual and family health and support people in the community.

The Project has significant operations with a staff of 12, a volunteer base of over 300, and it serves more than 1500 people per year. Until the current Executive Director joined the organization two years ago the Project did not have any written policies and procedures. The Executive Director wishes to remedy this situation and the problem that this research project will address is the lack of policies and procedures to guide the activities of the JBCP.

The Need

“Increasing competition for resources, expanding service demands, and a growing chorus of calls for accountability result in a high-pressure situation in which nonprofit organizations must maximize their effectiveness and efficiency to be successful” (Barbeito, 2004, preface). Policies and procedures assist organizations to operate more efficiently and effectively (University of California Santa Cruz, Guide to Writing Policy and Procedure document), which is one reason policies and procedures would benefit JBCP. JBCP also needs policies and procedures for the following reasons. Policies and procedures:

1. Communicate values and expectations for how things are done within an organization (HR Council website, HR Policies and Employment Legislation page). This helps avoid conflict and the potential for misunderstanding.
2. Are risk management tools for the organization, clients and staff (reference: JBCP’s Executive Director). An absence of written policies and procedures around issues such as financial practices, occupational health and safety, confidentiality and employment practices, as examples, leaves the organization and its representatives exposed to risk. It also potentially exposes clients to unnecessary risk. Policies and procedures promote the health and safety of all stakeholders and ensure that the organization is meeting legal obligations (HR Council website, HR Policies and Employment Legislation page).
3. Support consistent treatment of staff, fairness, transparency and continuity in decision-making (HR Council website, HR Policies and Employment Legislation page). Policies provide structure and parameters for the work of management, staff and volunteers. They guide staff by telling them what steps to take in handling situations. They also have the effect of making the orientation of new staff more efficient and effective,

enabling them to get up to speed faster than they otherwise would, and reducing confusion and inconsistency of practice.

4. Help staff and management to make decisions that are consistent, uniform and predictable (HR Council website, HR Policies and Employment Legislation page). Written policies and procedures enable consistency in an organization and reduce reliance on individuals' knowledge of past practice. They ensure the organization will continue to function effectively even when the staff and board of directors change. Furthermore policies and procedures are useful for leaders as a guide for taking a proactive approach to present and future issues (University of California Santa Cruz, Guide to Writing Policy and Procedure document).
5. Document and implement best practices appropriate to the organization (HR Council website, HR Policies and Employment Legislation page). Policies and procedures require an organization to document its practices, the process of which requires the organization to examine practices. This will reveal best practices and simultaneously prompt staff to think of ways to improve practice.
6. Demonstrate professionalism (reference: JBCP Executive Director). Policies and procedures communicate to third parties that the organization has standards, which benefits an organization when entering into partnerships and when applying for funding.
7. Protect individuals and the organization from the pressures of expediency (HR Council website, HR Policies and Employment Legislation page). Policies and procedures require employees to follow rules and guidelines in responding to situations, thereby removing the temptation for individuals to behave in a manner that is personally or politically advantageous.
8. Assist in new member recruitment. Policies and procedures clearly tell stakeholders how an organization operates. They help attract professional staff, board members, clients and other stakeholders.

Purpose and Organization of the Report

The value JBCP will derive from having policies and procedures is clear from the above description of the need. The purpose of this report is to determine what specific policies and procedures JBCP needs by understanding the behaviours among JBCP employees that are effective and ineffective in performing day-to-day operations with a view to creating policies and procedures to guide and drive effective behaviours by staff. A secondary objective of this report is to offer recommendations to JBCP for the most effective use of each of the policies that the researcher developed, as well as some next steps for implementation of the policies.

This report is organized as follows: this introduction section concludes with background about JBCP to inform the reader about the work of the Project. The next section is a

literature review on policy and procedures documents, which includes a description of the conceptual framework that the researcher used to investigate the research question. The next section describes the research methods and then the findings are presented and discussed. Finally the researcher offers recommendations based on the findings and the policies that were developed, some next steps for the Project in implementing the policies and procedures, and a conclusion.

Background

The James Bay Community Project is a non-profit organization that serves the James Bay and neighbouring communities located close to downtown Victoria, British Columbia. James Bay is a residential and small business community with a population of approximately 11,000 (James Bay Community Project website, history page). JBCP has existed since the early 1970's, at which time it was called the James Bay Community Association (JBCA). JBCA was formed by a group of citizens who were concerned with the provincial government's plan for densification in the James Bay area. In 1973, the JBCA, James Bay Community School and the local Human Resources Office began meeting to discuss community issues and in 1975 they applied for one of four Community Human Resources and Health Centre pilot projects in BC. These projects were responsible for delivering health and social services in local communities. Since then the JBCP has provided various integrated health and social service programs to the community (JBCP website, About Us page).

JBCP is one of 8 Neighborhood Houses on Vancouver Island. Neighborhood Houses are community-based organizations that are committed to healthy children, youth, families and individuals (Coalition of Neighborhood Houses website, homepage). Neighborhood Houses typically offer a range of programs and services supporting individuals and families to enhance their well-being. These programs and services typically include: counseling and outreach, pre and post-natal support, preschool and childcare programs, parenting courses and youth, and family and seniors programs (Coalition of Neighborhood Houses website, homepage). JBCP offers a wide range of programs, services and activities that are both proprietary and hosted. The hosted services are independently funded and managed, but are housed within the JBCP building. Currently, the JBCP has or houses the following programs and services: a family centre, a variety of community and volunteer services, youth clinics and a primary health centre.

Family Centre

The Family Centre is a place where families with young children and youth can find information, support, and access programs. Parenting, child development and family health resource materials are available and there is a play space for children. The Family Centre has drop in programs for parents of children under six years old as well as parent education and support groups, counselling and outreach services. There is also a youth and family outreach worker who provides support, information, mediation, advocacy, mentoring, and referrals to clients.

Community and Volunteer Services

The community and volunteer services at JBCP are extensive and include running a thrift store which is housed in a local mall, running a community library at JBCP, providing one-on-one services such as driving seniors to appointments or friendly visiting, operating an income tax return service for low income residents, assisting in JBCP's programs, offering health related workshops and groups such as meditation and yoga, cooking or preparing snacks for JBCP programs, sorting and bagging bread and other foods for JBCP's food cupboard, teaching computer skills, helping care for JBCP's gardens or with handyman projects and helping with special events. Over 300 volunteers participate annually in providing these services.

Youth Clinics

The Project's services include a youth clinic that operates in two locations and provides physician and nurse/counselor services to youth between the ages of 12 and 24 who may be at-risk. The clinic health care team assesses and treats health problems and provides medication, counselling, health education and referrals to other health and community services.

Hosted Programs and Services

The JBCP building is used by a number of community groups to hold their meetings and events. JBCP also houses a primary health care centre. This clinic is independently owned and operated. The Project also houses supplementary practitioners who lease space from JBCP. Currently these include massage therapists and acupuncturists. Finally, some private lab services are available on-site through LifeLabs Medical Laboratory Services.

As evidenced by this list of programs and services and the fact that JBCP has an annual budget of approximately one million dollars, JBCP has significant operations. The scope of JBCP's operations is a practical reason that it is would be valuable for the organization to have policies and procedures. The literature review, presented next, offers theoretical arguments expressing the value of policies and procedures, situating them within the context of an organization's operations and strategy.

LITERATURE REVIEW

The purpose of the following literature review is to define policy and procedure, discusses how they fit into an organization's operations, explain how to write good policies and procedures and review which types of policies non-profit organizations typically have. The information in this literature review, along with references used in the discussion and analysis sections, is based on academic and grey literature acquired from Internet searches using the University of Victoria and University of British Columbia's libraries and the search engines Google and Google Scholar. Sources were located using the following search terms: "policies and procedures in non-profits"; "policies and procedures in not-for-profits"; "why non-profits/not-for-profits have policies and procedures"; and "what

policies and procedures do non-profits/not-for-profits need”. In order to determine if the sources obtained were legitimate, the researcher examined the source for an author and reviewed his/her credentials/background as stated in the book or on the document. The researcher also only used information from organizations which the researcher assessed to be professional based on the information given about them on their website. The researcher also looked for other indicators of professionalism such as partners and funding sources.

Definition of Policy and Procedure

A *policy* is a statement of a principle, guideline or rule that members of an organization must follow (HR Council website, HR Policies and Employment Legislation page). A *procedure* is a statement or set of steps that tells members of the organization how to implement a policy (HR Council website, HR Policies and Employment Legislation page). Policies are generally written as statements or rules while procedures are written as instructions, in logical steps (HR Council website, HR Policies and Employment Legislation page). Procedures are the actionable steps that enable users of a policy to put it into practice. Another way of explaining the difference between policy and procedures is that policies tell people *what* to do whereas procedures tell people *how* to do it (Cryderman in Connors, 2001). JBCP’s board policy manual defines *policy* as the main tool of governance of an organization. Policies address issues that are important to an organization’s operations and they therefore relate to the organization’s mission and strategy.

Policies and Procedures Within the Context of the Organization’s Operations

Cavanagh (in Agard, 2011) believes that well-run organizations have three characteristics in common. The first is a clear mission that informs stakeholders of why the organization exists and what segments of the population are the targets for its goods and services. Secondly, he says that well-run organizations also use formal planning to translate their mission into an annual plan with measurable goals and objectives, and third, they have policies and procedures that inform staff of the activities that move the organization toward realizing its mission (Cavanagh in Agard, 2011). Like Cavanagh, Brinkerhoff theorizes that there are characteristics of successful nonprofits, listing among them, “a tight set of controls” (2009, p.34).

Brinkerhoff raises the notion that the development of policies and procedures seems tedious and bureaucratic to many managers but he suggests that, “it is tedious, yes; bureaucratic, no; the development of policies is good management – excellent stewardship” (2009, p.258). Brinkerhoff suggests that having good policies frees managers from “continuous worry about things going wrong, people messing up, accidents happening...low-quality services being offered...and the thousand little and big things that can occur without warning” (2009, p.255)...”because policies and procedures standardize actions and clearly lay out accountability and responsibility in key areas of the organization” (2009, p.255). This allows managers to “do good mission”, he says, enabling them to be “visionary leaders”, which he contends is necessary for an

organization to achieve and maintain excellence (Brinkerhoff, 2009, p. 259). His thoughts are summed up with the following quote: “if you are sitting around worrying about cash controls, personnel management, or discrimination suits you are wasting time. Those things can be (for the most part) prevented by having and enforcing policies” (Brinkerhoff, 2009, p.259).

How to Develop Good Policies and Procedures

According to the University of California Santa Cruz Policy Coordination Department’s Guide to Writing Policy and Procedure, the important characteristics of good policy and procedures documents are: the design is simple, consistent, and user friendly; they are written in clear, concise, plain language; and the procedures are clearly written so that what needs to be done can be easily followed. Connors agrees with these characteristics, specifying six principles of writing policies, which are to: be concise, be clear, be direct, round the edges, emphasize the positives and illustrate (2001).

With respect to being concise, Connors explains that policies must include as much information as is required to be comprehensive; however, it is important to keep in mind that the longer a policy is the “more intimidating it will be” and the less likely it will be to be used (2001, p. 800). With respect to being clear, Connor’s says that it is important that writers of policy avoid jargon as much as possible and when it is necessary, explain technical terms (2001). It is also important that writers attempt to think about the policy content from the perspectives of the users in order that, as much as possible, the users will understand the policy to mean what was intended.

Connors says that it is important for policy writers to remember that, “policies are policies” (2001, p.800); in other words, they are intended to communicate expectations and therefore they must be direct. With the principle “rounding the edges”, Connors conveys the idea that although policies should be direct, the writer must be mindful of the audience in terms of the language and tone used within the policy (2001, p.802). He gives the example of policies aimed for volunteers and says that, “the tone should be consciously softened” (Connors, 2001, p.802). Finally, Connors says that using diagrams and pictures is useful to help make policies more enjoyable to read (2001), which helps to make what is often considered a flat and uninteresting subject matter somewhat more engaging.

Policies for Non-Profit Organizations

With respect to what policies and procedures non-profit organizations have, a literature review revealed that the most common areas are financial management, human resources management, program and services management and volunteer management. Brinkerhoff suggests that non-profit organizations should have at least the following sets of policies (2009):

- Financial controls
- Human resources

- Program policies
- Volunteer policies
- Disaster policies
- Media policies
- Quality assurance policies

Conceptual Framework - Balanced Scorecard

Although Brinkerhoff's suggestions are helpful, in order to determine what sets of policies and procedures JBCP needs, the researcher needed a framework for categorizing the Project's operations. The balanced scorecard, which was originally developed by Kaplan and Norton, looks at organizational areas of performance providing a "big picture" of an organization (Kaplan & Norton, 1996). The researcher chose the balanced scorecard as a conceptual framework for this study, despite the fact that it was designed to measure performance, because it is useful as a way of organizing and categorizing the operations of an organization. Kaplan and Norton's original scorecard contained four operational categories: internal business processes, learning and growth, financial performance and customers (Kaplan & Norton, 1996). The balanced scorecard is, however, an adaptive tool that is often altered to meet the needs of the organization using it.

A few adjustments were required to make the balanced scorecard relevant to JBCP. The balanced scorecard was therefore altered in the following ways: for the sake of clarity, internal business processes was called administration, learning and growth was broadened to human resources management and one area was added: health and safety. While financial management was retained, "customers" was re-defined as "responding to clients". This change was made to provide greater breadth and include all manner of stakeholders. One important note is that due to a constraint put upon this project at the outset, the researcher further defined the "responding to clients" category as referring only to stakeholders and excluding program and services clients. This was necessary because simultaneous to the researcher conducting this project some University of Victoria law students were writing policies and procedures for JBCP concerning responding to program and services clients. In summary, the categories that the researcher used to assess JBCP's operations are: financial management, human resources, administration, health and safety, and responding to clients.

Figure 1: Modified Balanced Scorecard.



METHODOLOGY

This project employed a mixed methods approach. The methods include documents and interviews and are four-fold:

1. A review of the theoretical literature on policy and procedures.
2. Primary research in two phases. Phase one involved qualitative interviews with JBCP staff and phase two involved contacting various non-profit societies in British Columbia with similar structures and mandates.
3. A review of non-profit societies policy and procedures documents.
4. A review of relevant legislation, guidelines, publications, and websites, to govern the policies and procedures.

Method 1: Literature Review

The literature review was conducted for the researcher to gain an understanding of what policies and procedures are and to learn about the characteristics of effective policies and procedures in order to be well prepared to write some for JBCP. The literature review also provided evidence of the importance of not-for-profit organizations having policies and procedures and discussed how they relate to an organization's mission and strategy. Finally, the literature review suggested various types of policies that non-profit organizations typically have, which assisted the researcher in thinking about how to categorize JBCP's operations in the conceptual framework.

Method 2: Primary Research

The primary research for this report had two phases. The first phase involved generating data about which policies and procedures JBCP needs. As stated by Graff (in Connors), “developing a list of possible policy topics is the first task [in policy development]” (2001, p. 803). The researcher generated the data from interviews with JBCP staff. Graff explains why this is important: “it is not helpful for front-line workers to think of policy as out of their realm, or somehow ‘above them’. People actually doing the work are often those most likely to identify risks, the need for improvements, or the need for rules or changes in rules” (Graff in Connors, 2001, p.799). In addition to conducting the employee interviews this phase also involved the researcher coding the data and generating lists of policy topics, as well as selecting policies to develop, which was done by JBCP’s Executive Director.

The second phase of primary research involved identifying and connecting with comparable organizations that have written similar policies to the ones prioritized by JBCP’s Executive Director, and which could serve as examples. A more full description of the research is described in the relevant sections below.

Sampling

The request to participate in this study was made to all JBCP staff and thus sampling for phase one was not required as the entire population of interest was involved. Interviewing all JBCP staff was necessary to generate a comprehensive list of what policies and procedures the organization needs and to help ensure the policies address the right issues (HR Council, HR Policies and Employment Legislation page). It was also important because the staff will be the users of the policies and procedures; therefore, they must feel that they have been consulted so that the eventual implementation of the policies is not experienced as mandated change, but participatory, meaningful change.

Phase two of the research used purposive sampling. This sampling method was used to selected examples that are information rich and illuminative (Patton, 2002). To create the sample the researcher generated a list of organizations with similar services. The most similarly mandated organizations are other Neighborhood Houses, of which there are eight on Vancouver Island and eight in the BC Lower Mainland. According the JBCP’s Executive Director few of the Neighborhood Houses on Vancouver Island have established policies and procedures and her request for those that do to share copies of them with her did not result in any responses, thus the researcher only included the lower mainland Neighborhood Houses in the sample.

In addition to Neighborhood Houses the researcher chose to survey other organizations with similar services. To generate the most relevant list the researcher conducted a search on the Red Book website using the search term “family and community services”. The researcher used a two-step process to choose organizations from this list. The first step was to print the list and highlight organizations with which the researcher is familiar and which are known by the researcher to be professional organizations. This was done in order

to help the researcher narrow the list as it was lengthy. The second step was to review the services and programs of each of the organizations the researcher highlighted for similarity of their operations to JBCP's. Based on the criteria of similarity of services four additional organizations were chosen.

Design of Instruments

Phase 1 used a pure naturalistic-qualitative strategy for conducting the interviews. This strategy was used because the researcher wanted to understand behaviours by JBCP staff in their workplace. Semi-structured qualitative interviews were conducted with the JBCP employees who consented to participating in the research. This method was chosen primarily because of the nature of the research topic. It was necessary that the interviews have some structure so as to ensure all topics of the theoretical framework were covered in the interview; however, given JBCP employees are operating in a relative vacuum of written policy and procedure the researcher thought that it might be difficult for respondents to conceptualize how certain behaviours relate to policy and procedure and that it would be necessary for the researcher to assist through probing with follow-up questions. This method was not only useful to assist respondents in conceptualizing the topic but it also assisted the researcher in coming to a more full understanding of the topic; according to O'Sullivan, Rassel & Berber semi-structured interviews enable respondents to digress within the interview, which often results in the sharing of meaningful information that the researcher had not expected (2008). Another reason a semi-structured interview method was the most appropriate choice is that it provided sufficient structure to make the best use of limited time in the interview, while allowing flexibility. As described by Patton, "the interviewer uses the topics within the interview guide as a starting place from which to build conversation, but can word questions spontaneously and establish a conversational style" (2002, p.342).

The objective of the interviews was to gather examples of effective and ineffective behaviours within each of the five balanced scorecard areas described in the conceptual framework section above. Flanagan's critical incident technique (CIT) was used to develop the interview questions because it gives a methodology for collecting observed incidents of human behaviour (Flanagan, 1954). Furthermore, it has been used successfully to capture effective and ineffective behaviours in many occupations (Flanagan, 1954).

The interview questions were created to explore the respondents' perspectives of effective and ineffective workplace practices. Three interview questions using CIT were developed. All three questions were asked pertaining to each balanced scorecard area:

1. Please give me an example of a workplace situation that you experienced or observed, that relates to [balanced scorecard area] which illustrates that JBCP's procedures are effective and which we would want to continue to use.

2. Please give me an example of a workplace situation that you experienced or observed, that relates to [balanced scorecard area] which illustrates that JBCP's procedures are not as effective as they might have been and we would want to improve on.

3. Please give me an example of a situation that relates to [balanced scorecard area] when you were unsure about what course of action to take and wished you had a policy and procedure to guide you.

In addition, at the end of each interview the participant was asked if they had any other examples of policies or procedures that they believed JBCP needed to have. A copy of the interview script can be found in Appendix 1.

The researcher did not conduct formal interviews for phase 2 and therefore did not use a research instrument for gathering sample policies.

Data Gathering Approach

The researcher conducted two waves of interviews: in December of 2011 JBCP's Executive Director gave the researcher a list of staff to contact. Subsequently in January of 2013 the researcher identified that a few employees had been missing from the original list. These individuals were then contacted. The data gathering approach was identical in both phases and employees were contacted by email requesting their participation in an interview.

Three emails were exchanged with each employee. The first email introduced the project and the researcher and requested the employee's participation. If the employee replied and agreed to participate, the second email thanked them and suggested an interview date and time. This email also contained the University of Victoria ethics form that participants were required to sign. The third email was sent to each participant one week before their interview to confirm the interview and send the interview questions. The email scripts used by the researcher can be found in Appendices 2 to 4. A copy of the participant consent form is appendix 5.

Seven interviews were conducted in-person (one interview had two of the staff participate) and four by phone, including one follow-up interview focusing on health and safety exclusively, which was conducted with the employee who is the Chair of the JBCP health and safety committee. The researcher alone conducted all of the interviews. In total, 11 of the 12 staff participated in this research study. The interviewer provided the participants with the questions in advance to maximize the likelihood of thoughtful responses. Each of the participants who were interviewed in person gave consent to be recorded by digital recorder and each of the telephone participants agreed to notes being taken by the interviewer who typed the notes during the course of the conversation.

The recorded interviews were transcribed into Microsoft Word and these, along with the electronic notes from the telephone interviews, were printed and categorized into topics

using a content analysis approach - the researcher reviewed all of the responses to each question and categorized themes together by frequency (Patton, 2002, p.453). The researcher's coding tables can be found in appendix 6.

In phase two the researcher approached the organizations described in the sample section and requested to review their policy and procedures documents. The researcher telephoned the Executive Director of the Association of Neighborhood Houses of BC as well as all of the Neighborhood Houses in the BC Lower Mainland. Four of the Neighborhood Houses and the Association of Neighborhood Houses responded and were willing to share their policies and procedures with the researcher. Of the four additional organizations, the researcher telephoned their Executive Directors until acquiring a minimum of three policy examples on each of the topics chosen for development by JBCP's Executive Director (please see page 60-61 for a list). Finally, where applicable, the researcher looked at examples of policies from the HR Council website.

Strengths and Weaknesses of the Research Design

Using a semi-structured interview format with open-ended questions had the strength of allowing employees to tailor the content and direction of their responses, which resulted in detailed and meaningful information that was likely more exhaustive and relevant to the study than data that would have been obtained from a questionnaire. A weakness of the research design is that the anonymity of the staff is not fully protected because of the small population size. It is possible that employees who read this report may be able to attribute a response to a specific colleague. All participants were however, made aware of this limitation by the researcher prior to giving their consent to participate.

With respect to phase two, the strengths of using purposive sampling to generate a subset of policies and procedures are that the examples acquired were of direct relevance to the researcher because the sample was carefully selected. A weakness of this approach is that there was some bias in the selection of the "similarly mandated" organizations because the decision about which to choose was influenced, to some degree, by the researcher's prior knowledge of the organizations.

Method 3: Review of Non-Profit Societies Policy and Procedures Documents

Once the researcher had amassed sufficient examples of policies, these were reviewed with two purposes in mind: development of a policy template and selection of content to be incorporated into the researcher's policies and procedures.

Policy Template

In order to choose a policy template the researcher reviewed the formats used by the organizations sampled. In addition, the researcher searched the Internet to obtain sample templates. Using the criteria of readability, ease of use and comprehensiveness, a recommendation of a template was made to the JBCP Executive Director, who agreed with the recommendation. The chosen template can be found in appendix 7.

Review of Content

The researcher selected one policy to work on at a time and reviewed all of the examples related to that topic. As each example was read the researcher highlighted information judged to be of relevance and importance to the development of the policy. To decide what information was relevant the researcher kept in mind the characteristics of effective policy and procedure, referred to in the literature section. Some of the policy and procedure documents the researcher reviewed were so detailed that, in the researcher's opinion, an employee would not retain the information nor be likely to use the policy because of being overwhelmed by the volume of information. In addition, some of the policy examples described steps that a reasonable person would likely take intuitively. These two points relate to Connor's first principle that policies should be concise (2001). Consequently, the researcher highlighted only the information that was deemed pertinent to writing clear and succinct operational policies.

Method 4: Review of Legislation, Guidelines, Publications, and Websites

To create policies for JBCP, in addition to using the examples from the organizations mentioned above, the researcher sourced information from the Internet. Sources were based on references in the sample policies and from searches based on search terms relevant to each policy topic. The information that the researcher reviewed included online policy examples, laws, regulations, standards of practice, guides, toolkits, handbooks, publications, and other online websites and web pages.

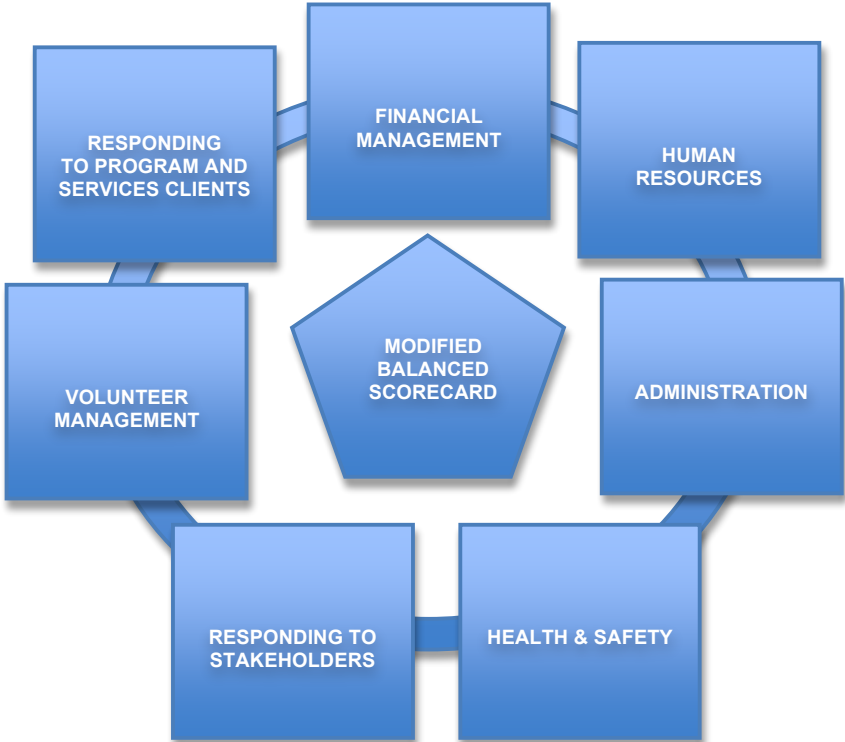
In order to determine if the Internet references obtained were legitimate, the researcher examined the source and only used information from a professional organization or, in the case of guides, toolkits, handbooks and publications, only those with an author whose credentials were given and where there was reference to a professional organization such as an educational body or institution.

FINDINGS

The findings of the staff interviews in each of the five balanced scorecard areas are presented below. While the researcher was summarizing the findings it became clear that several comments related to two additional areas: volunteer management and responding to program and services clients. The researcher considered including volunteer management as an original category of the modified balanced scorecard but decided against doing so based on the fact that volunteer management is a unique and complex area of an organization's operations, and which, in the researcher's opinion, could stand alone as a research project. Even though the researcher did not include volunteer management as a topic in the interviews, respondents mentioned several behaviours that relate to JBCP's volunteers and, due to the valuable nature of this information, the researcher decided subsequently to modify the framework and add this area.

In addition, while the category 'responding to program and services clients' was originally beyond the scope of this research, valuable information was shared by some employees

about practices that would fall within this area; therefore, the researcher also added this category to the modified balanced scorecard framework. Given the addition of the latter category, for the sake of clarity the researcher renamed the “responding the clients” category “responding to stakeholders”. The complete balanced scorecard that reflects these additions and change is presented in the following figure:



Financial Management

Financial Management is a key part of JBCP’s operations and JBCP’s employees consider it an important area where policies and procedures are needed. All of JBCP’s employees commented on behaviours and unwritten processes that involve handling money. Money is managed at JBCP for various different services and reasons. The services that involve the direct exchange of money include sales at the thrift store and the sale of books and other sundry items at JBCP. Other circumstances under which employees handle money include maintaining floats for their programs and receiving financial donations both in the community and at JBCP. Money is kept on site at JBCP in amounts ranging from a few dollars to thousands of dollars. When JBCP employees were discussing financial management practices the issues raised and comments made related primarily to three key financial management policy and procedures themes: security of money; management of program funds; and management of financial donations.

Security of Money

Respondents raised three practices relating to security of money. One practice concerns a deposit at JBCP of monies raised in the JBCP thrift store and the other two practices relate to funds raised from the sale of items at reception. As reported by the respondents, the procedures at JBCP for safe-keeping of money are currently undependable. The following is a most notable comment to this effect:

“The security of money [is an issue]. It's in a badly and loosely locked drawer that I leave almost two thousand dollars in at a time and the lock is actually busted on the filing cabinet.”

A different respondent mentioned another insecure practice of storing money on JBCP premises:

“There is a small black filing cabinet at the front desk with cash in it. Someone could easily pick it up and walk out with it and it's not always locked.

With respect to money received from the sale of items, JBCP does not have any policy or procedure for how much money can be kept at reception (which is where items are sold), or how often the financial Manager collects the money. The follow comment speaks to this:

There isn't a lot of policy around cash coming in from the front, from sundry items. Stuff goes through reception, sundry cash amounts, for example the sale of books. These amounts typically go into envelopes and they are held at reception as stashes of cash...it would help if there were policies surrounding those small amounts of money that just keep coming in. They add up!

Management of Program Funds

A few of JBCP's employees manage floats for the programs they run and at present they are trusted to make judgments about how much money to keep in a float. Furthermore, there is no set procedure or expectation for how often they turn over money to the Financial Manager, nor for how they keep track of the funds. One employee who keeps a float for her program made the following comment:

“We have a petty cash because we keep change... it is really a minimal amount that we take in (*pause while thinking*)...we probably could be a little bit more diligent about it but it's just kind of secondary to all of the other stuff”.

Another employee commented that she keeps donated money and uses it for her program, and turns over excess “every now and then”:

I've got a logbook that I write everything down in and that's it. I turn over excess every now and then but it's very loose. It's comfortable for me because I don't need another detail, but it is very loose. So maybe a procedure around when we are taking in money for programs how are we...what's the accounting process? I've just kept a float and if it gets over a certain amount I give it to the Financial Manager. That works well for me but it's not good policy.

Management of Financial Donations

The last comment above crosses into the thematic area of managing financial donations, which is an area in which there appears to be inconsistent practices among employees, depending on their role and program.

For example, the employee above has mentioned that she keeps a float of donated money and hands over excess on occasion, whereas other employees commented on being given financial donations and turning them directly in to the office. Several employees raised the question of what is the appropriate practice for handling donations. Two employees described feeling uneasy about managing donations and expressed concern about the appropriate practice, as per the following two comments:

It really leaves you open to being vulnerable if a client gives you money, and of course I'm going to hand it in but what if the client says, "no I gave you 50 [dollars] and I only got a receipt for 10 [dollars]". You know, what I mean is there's no way of documenting how much they gave. And sometimes I get donations in envelopes and I don't even open it...but I probably should and identify and say "thank you very much for this donation of X amount" but I don't, I just usually hand it in.

And:

It does happen when people give us cash and I'm always very leery you know, first thing I do when I come back [to the office] is tell somebody – "you know 'so and so' gave me this hundred dollar bill". And because I don't like dealing with cash - it's not something that we do - and I guess maybe the other way is to say to the person I am sorry I can't accept that at this time. But then you don't want to put the person off. It's hard.

Another comment that relates to the management of financial donations concerns the nature of how JBCP receives donations. Financial donations are given in many forms. In addition to the standard forms of bills, cheques or credit card information, sometimes employees are given change, as per the following example:

The other day one of my clients gave me this big sack of change. I didn't count it all out. What we did was we counted it out at the office and there were the two of us there, and then we called the client and we said 'this is what was in there so please', you know...this is a fair bit of money for someone who doesn't have

much, so we gave her the option...just saying you can have this back, I think that's really pertinent...so maybe some policies just around money.

In summary, the financial management themes and the behaviours/practices of JBCP staff that fall within those themes are summarized in the following table:

Modified Balanced Scorecard Category	Findings Themes	Relevant Behaviours/Practices
Financial Management	Security of Money	<ul style="list-style-type: none"> •Storage of funds on JBCP premises •Sales of items at JBCP and thrift store
	Management of Program Funds	<ul style="list-style-type: none"> •Amount of funds kept in program petty cash •Tracking petty cash for programs
	Management of Financial Donations	<ul style="list-style-type: none"> •Receiving, handling, processing and receipting financial donations

The examples of behaviours involving managing finances that were given by respondents reflect an ad hoc, discretionary approach to financial management, the benefit of which is flexibility for JBCP employees, but, as aptly stated by one respondent: “that works well for me but it’s not good policy.” Several of the quotes show that respondents are sensitive to the financial practices they are involved in, and some feel uncomfortable about them. Morale is one reason for JBCP to address these issues. Morale is a human resources concern, which is the topic of the next section.

Human Resources

Human Resources (HR) was another area of significance to the respondents and human resources issues were mentioned by nine of the eleven employees who participated in this research. An in-depth review of the findings revealed that the respondents’ comments related generally to four key human resources themes: performance management, HR processes, conduct and respect, and reporting/chain of command.

Performance Management

Two performance management issues were raised by the respondents: performance appraisal and professional development and training. Five of JBCP’s employees expressed a desire for JBCP to have a formal performance management program, which they regard as important for developing in their jobs and for JBCP to show that it values the quality of its service delivery. The current state of JBCP’s performance management and the value and importance of a well managed performance management program is expressed thus by one employee:

Our performance evaluations are ad hoc. Our outgoing ED did them at the last possible second before she left and then mailed them to us. It really sort of defeated the purpose of sitting down and doing any goal setting.

Another employee commented:

“We need to bring a little more formalizing to the process of reviews. It was many years before I had any kind of review.”

A common component of performance management programs is access to professional development and training. It appears that JBCP staff would like access to training and can access it if they speak with their Manager, but this is not widely known, as evidenced by the following comments:

When I started I didn't get any information on what access we have to training and development. I've discussed one opportunity [with my Manager] which was a free training but it would be good to have a policy around that.

And:

“I think there could be a policy outlining how much training is available to whatever position you are in, because I don't think a lot of people realize that they have the ability to get training.”

In addition to querying the availability of training, one employee raises an important issue concerning whether or not JBCP has expectations of the staff related to professional development and training:

I think it would be nice to know what is the policy on... do we have a designated amount per staff for training and how do we...is it our discretion or how would that be managed? Yeah that would be helpful. And does the organization have any expectations around professional development and training?

HR Processes

Three common human resource topics that were mentioned by the staff are the process for hiring, personnel records and job descriptions. Two employees spoke about hiring and questioned whether some of JBCP's practices are appropriate. Specifically, one respondent said that in the past at least one volunteer has been grandfathered in to staff. Another respondent commented that she knew one employee was hired by “word of mouth”, without the position being posted. She wondered whether this is appropriate and suggested that there be a policy/procedure about hiring.

With respect to personnel records and job descriptions, JBCP employees do not seem to know whether personnel files exist and if they do, what is in them. One employee

commented, “I was asked to bring in my resume, which I did, but I know [my Manager] told me that she can't find it anywhere so I can only imagine that there are no records or clear personnel files.” Also several of the employees talked about experiencing challenges in their work, in terms of knowing whether a task is theirs to perform or beyond their ‘domain/scope’, and 3 employees mentioned that they have never seen and do not know if there is a job description for their position.

Employee Conduct/Respect

The human resource issue raised with the most passion and emphasis by the respondents was the notion of respect. The conduct of one or several employees has clearly been a concern for others and there were several comments suggesting that JBCP needs a policy or set of guidelines on employee conduct. Of note is the fact that in the following comment the employee links job descriptions and “understanding what each person does” to respect:

I think it's really important that staff of James Bay understand what each person does and I don't even know if there's a job description for everyone that's here. I think it's vital to ensure that people respect what other people are doing.

Another employee expressed very similar sentiments in this comment:

[Sometimes people] don't understand what other people's role is so sometimes they can minimize what other people do and take for granted different things that the person might be doing and shouldn't be doing or taking on. So I think it's really important to have some clarity about that.

And one employee summarized the importance of both job descriptions and an employee code of conduct nicely, saying:

One of the other things I think should be a policy is that there is respect towards each member of the Project, whether it's the person at the front desk or somebody in the kitchen. Everybody has a role in this project and I think respect should be written into a policy.

Finally, the following comment is of note and relates not only to employee conduct but to the issue of reporting, which is discussed next:

What do you do if you see a co-worker speaking rudely to a client or a member of the public; what do you do? If you go to the Executive Director you feel like you're tattling, you know, and at the same time it feels like not necessarily helpful or appropriate sometimes to address it as a peer, so some clarity around that would be really useful.

Reporting/Chain of Command

As expressed by the aforementioned comment, JBCP employees are seeking clarity about accountability processes. Another employee explicitly expressed a need for JBCP to have procedures for reporting inappropriate conduct:

A couple of times I've been stumped in terms of, that was really not okay [an inappropriate comment] and I should probably say, "can I talk to you for a minute", but uhh...I just haven't done that. I just thought this was really awful, and tried to address it with the client, which is not satisfactory for the client because they want some type of apology or amendment from the person who was rude to them. So that [a policy around conduct and procedures for reporting inappropriate conduct] would definitely help and might have served us in better stead if it had been in place.

Three respondents referenced the issue of chain of command. One employee would like to know who employees could or would go to if they felt they were being unfairly treated by their Manager:

Unions generally have procedures that the management of an organization has to adhere to, but I don't think that has been incorporated into any procedural manual here. For instance, disciplinary stuff; I'm not just talking from an ED's perspective but from a staff perspective. What are the steps that staff can take...what can they do if something is happening to them? What are the procedures for staff concerning prejudicial treatment?

Additional sentiments that fall within the theme of chain of command relate to the relationship between the employees, the ED and the Board. Two important comments were made to this effect:

"We should have something outlining the fact that the ED is responsible to the board, answerable to the board and is in fact the employee of the Board and has an employment contract."

And:

"I think there should be a stated policy that a staff person doesn't go directly to the board. That's what the ED is for, to be the spokesperson to the board and the staff's line of contact."

In summary, the human resources themes and the behaviours/practices of JBCP staff that fall within those themes are summarized in the following table:

Modified Balanced Scorecard Category	Findings Themes	Relevant Behaviours/Practices
Human Resources	Performance Management	<ul style="list-style-type: none"> •Performance Appraisals •Professional development and training
	HR Processes	<ul style="list-style-type: none"> •Process for hiring •Personnel Records •Job Descriptions
	Conduct and Respect	<ul style="list-style-type: none"> •Understanding each employee's role •Employee conduct
	Reporting/Chain of Command	<ul style="list-style-type: none"> •Reporting inappropriate conduct •Grievance process for employees •Communication between staff, the ED and the Board

The human resource behaviours that were raised by employees were multifaceted and related to processes such as personnel management, hiring and reporting, and to softer issues such as conduct and respect. A desire for accountability is the primary theme within this area. Respondents wish for accountability of employees to JBCP through a performance management process, accountability of employees to one another and to clients through a reporting process and code of conduct, accountability of Management to staff through the definition of a grievance procedure and, finally, accountability of employees in relation to Management and to the Board through a definition of the chain of command within JBCP.

Administration

The category 'administration' covers a wide variety of topics as shown in the coding table in appendix 6 on page 82. Three administrative themes surfaced from the interviews: security of client information, file management, and internal business processes.

Security of Client Information

The security of client information was a key theme of this research and the majority of the respondents mentioned it. Specific issues raised were the safety of client information, access to client information, and the removal and transport of both electronic and paper-based client information.

With respect to safety concerns, the issues that were raised by staff include where client personal information is kept at JBCP, the use of personal email for business and sharing client personal information in emails. The most insecure practice concerning the location of client information at JBCP is the practice of keeping client income tax forms for the

volunteer income tax program in a small filing cabinet at reception. The employee who shared this information with the researcher commented that this practice makes her feel uneasy.

Discomfort was a common feeling among the employees who spoke about safety of client information. Another employee expressed this feeling in relation to using her personal email for business purposes, as per the following comment:

I'm a little uncomfortable when we talk about policy around the email because I am loose with that and I'm guilty because although we have it, it is so unpredictable that I usually use my Gmail, and that's not really that secure so, to think about conversations that you have back and forth...I am feeling uncomfortable about that.

One employee raised a different but equally important issue about the sharing of client information in work emails and she suggests the JBCP could institute a procedure of using client's initials when discussing them in emails:

Maybe there needs to be a policy around if we are writing emails about clients to other people, like other professionals, some...like I know with the Ministry of Children and Family Development the social workers straight out won't discuss client information by email. It has to be on the phone or in person. They just will not do it at all. Other places they just put the client's initials, like they write "AB" instead of writing their name in case of that information getting into the wrong hands. So that...I mean, I assume our e-mail server is fairly secure but could it be more secure?

The issue of security of information was raised also with respect to client information being removed from JBCP premises. Client information is removed primarily in two situations: by JBCP outreach workers if they want to reference information in a client's file when conducting a client visit, and by the JBCP staff member appointed to take the database home after hours. According to one employee, a practice that JBCP has recently ceased is storing the client database on the organization's laptop. The database is stored instead on a USB stick that is taken home by an employee every evening. This is an example of a good change in practice to protect client information. The employee commented however, that the policy concerning removal of the USB stick from the JBCP building should be written down. Another employee commented on the same issue saying:

There probably needs to be a policy around any employee taking [the database] off site...the IT person said we really should be taking it off site but then that leads to how do we deal with it off site responsibly?

The notion of responsibility is also raised in relation to staff access to client information and practices concerning JBCP's database, as described by this employee:

With respect to security [of the database], you have to put in a code to get into different ‘sides’ of it. That’s good. But overall, a confidentiality statement that you have to sign would be good. I [have authorization to] see the whole database. I should have to sign a statement that I won’t share the information.

An important note about this comment is the fact that there is a discrepancy among JBCP employees concerning the current procedure regarding confidentiality statements. Another employee told the researcher that all staff sign confidentiality agreements.

File Management

The following comment relates to file management and is notable because it raises two specific issues currently unspecified at JBCP: file retention timeframes and file management processes, such as what criteria are used to decide when to activate/inactivate files:

I used to do counselling and I got rid of files after seven years, but I don’t have a policy for this job so that would be a good policy - when are we actually getting rid of the files. And then sort of along those lines, what do we do with... I have my own system of how I inactivate clients and why but it would be good to have that as a policy. You know, is it the length of time or lack of service? What are the criteria for closing the client [file] other than the client dying?...In the past sometimes people have stayed on the client list for a long, long time really not getting any services.

Internal Business Processes

Internal business processes relate to the administrative aspects of work such as expense reports, mileage forms and cheque requisitions, as well as what outgoing messages staff leave on their voice mail. Several employees raised one or more of these processes and two comments are salient within this area:

I think it would be helpful, especially for new employees, to have things in writing like what is the procedure for cheque requisitions? What is the procedure for expenses? What is the procedure for mileage? And sort of an orientation around whenever you have some admin [what do you do].

And,

“[Concerning mileage] I would suggest that if we submit our receipts that we should know when we will get the money back.”

With respect to voicemail, one staff member suggested that JBCP have a policy about voicemail and out of office and commented that it is important for all staff to leave

information on their voicemail about their days of work and also when they are out of the office, so that clients are made aware. She said that this is important because, “clients are vulnerable and need to know when they can get help or not”. Another respondent also commented on this issue and suggested that all direct service employees have a message on their voicemail telling clients what do to if they are calling in an emergency.

The findings within this section show that administration is a broad category covering a wide variety of topics. In summary, the themes within administration and associated behaviours/practices of JBCP staff are summarized in the following table:

Modified Balanced Scorecard Category	Findings Themes	Relevant Behaviours/Practices
Administration	Security of Client Information	<ul style="list-style-type: none"> •Location of client personal information at JBCP •Use of personal email for business •Sharing client personal information in emails •Removal and transport of client information •Access to JBCP’s database •Confidentiality statements
	File Management	<ul style="list-style-type: none"> •File retention timeframes •Process for opening and closing files
	Internal Business Processes	<ul style="list-style-type: none"> •Expense reports, mileage reports, cheque requisitions •Outgoing voicemail messages

An overarching sentiment expressed by respondents relates to responsibility and how JBCP can responsibly communicate about clients (particularly via email), transport client information and manage client files (both electronic and paper) at JBCP. The topic of internal business processes gives examples of processes that would ensure things like cheque requisitions, mileage reporting and voicemail messages are handled consistently among staff. Consistency of practice is listed in the introduction as one of the reasons JBCP needs policies and procedures and it will undoubtedly enhance the organizations efficiency.

Health and Safety

The topic of health and safety is a critical one and it is notable that it was the balanced scorecard category that generated the greatest number of responses. Out of the findings three health and safety themes emerged. They are: food safety, staff health and safety, and client health and safety.

Food Safety

The food safety issues mentioned by respondents relate to the handling of food, the distribution of food, and determining whether food is safe to serve.

With respect to the handling of food, one respondent explained that JBCP volunteers have to take a food competency course but that they do not have to go through the FOODSAFE course¹. She wondered whether volunteers should have to take FOODSAFE. She also commented that JBCP requires one staff member to take FOODSAFE but that there is no written policy concerning when he/she should recertify.

A second respondent described the distribution of food and queried JBCP's responsibility/liability concerning food in this comment:

We provide a lot of food for people in different forms; some cooked by volunteers and some is just given to those who need it from the food cupboard. I don't know what other food banks/cupboards do in terms of anyone coming back and saying "there was something wrong with this food, I got food poisoning", for example.

A third respondent asked: "[With respect to] expired food; do you use it or not?"

Another important issue regarding JBCP's distribution of food relates to donated food, as per the following comment:

I would like to have a policy regarding public food donations. People give us food and sometimes it is open or not packaged. Can we use this? I would like to have a sign posted with our policy so people making donations know and aren't offended if we refuse it or don't use it.

Staff Health and Safety

The respondents mentioned three issues that concern staff health and safety, specifically staff as volunteers, violence in the workplace and staff working alone. With respect to staff as volunteers, a couple of employees mentioned feeling uncertain about what would happen if they were injured at work while performing duties beyond the scope of their job but within the scope of services of the Project. The following comments to this effect are important:

We're probably like any non-profit, where there are so many kind of "other jobs" that come up that really aren't under your job description. So every once in a while I'll just sort of help. But I sort of think, "okay, this is really heavy". I've thought, "okay, if I throw my back out doing this job, which is not actually really in my job

¹ FOODSAFE is a training program in British Columbia managed by the Provincial Health Services Authority.

description...you know that is probably not a good thing, and how will that play out?”

And,

“Volunteering, you know, it's sort of a part of what you do but also to have some policy around staff as volunteers is probably a good idea.”

With respect to violence in the workplace, aggressive, disruptive and disorderly behaviour, which, for the purposes of this section is called “violence”, was a key issue raised by several of the respondents. The following quote gives a useful description of how violence can manifest at JBCP and how it has impacted staff:

Sometimes we get the oddest characters through here. There was a case a while ago when I actually had fear when it comes to safety in our workplace; fear for myself and our clients. You know we have Moms and babies here, and this person would get pissed off. There were two instances actually. We ended up having to tell the guy that he couldn't use the services anymore. I remember during the period when he was coming in here every day I didn't feel safe - and I'm a tough girl!...We, all of us staff, go running out when there are loud voices. What happens when something untoward is happening? Who is supposed to do what?

Another staff member made a similar comment and additionally raises the issue of what JBCP staff should do if there are few of them on site at the time of an incident:

What do you do in an extreme situation, you know, like what is the standard policy of James Bay if somebody comes in and they are aggressive? What do we do? Also there are some hours of the day when there are only a few people here, so there should probably be some procedure around how it's handled if there aren't very many staff here.

In addition to needing policy and procedure for how to respond to incidents if few staff are around, policies and procedures for working alone or in small numbers are generally needed. The following two comments express why it is important that JBCP have a written policy on employees working alone:

Safety wise, just in terms of the buzzer at the door, for staff if you're here after hours, [we need] some policy around...actually I think the unwritten policy is if you are here after hours you meet your clients at the door and let them in but it is possible that's not always happening.

And:

I have had after-hours situations where I was the only staff involved and it was something I didn't know... this was involving calling the police because a client was missing...I thought, I didn't have any one to phone and at that time we had no

policy in place and of course [subsequently] the Executive Director said phone me on my cell phone at home, but it is not a formal policy.

Another occasion in which JBCP staff work in small numbers or alone is outreach work. This presents several safety risks to the staff. The following quote gives an example of some effective behaviours one staff uses for staying safe in the community:

When I am going to do a home visit, especially if it's a first client, then I will let at least another staff member know where I am and sometimes if I've been a little bit uncertain then I have actually said, "you know, if I'm not back within x amount of time then here's the phone number to call". So there are, sort of procedures/policies. I do of course carry a cell phone now and a personal alarm so if there's ever an issue... and we typically take a little bit of information, I would take a little bit of information over the phone [from the client] to get a sense of what's happening for them and then when I'm actually in the client's home I try to place myself closest to the door, but that does not always happen just because of the way the furniture is laid out. But those are all things I take into consideration.

This quote shows that this employee has thought about her safety and has implemented procedures for herself. Conversely, the researcher had the following exchange with another staff member: Interviewee: "sometimes nobody knows where I'm going. Researcher: are you ok with nobody knowing where you are going? Interviewee: I have never thought about it until now just because, you know, that's the reality of it."

Client Health and Safety

The two specific issues related to client health and safety that were raised by respondents are responding to critical incidents and communicable disease, which arguably is a type of critical incident. The majority of the critical incidents mentioned by the respondents however, were examples of medical emergencies. There are many opportunities for incidents to occur given JBCP has a kitchen, and also given that JBCP services a vulnerable population including the elderly and people with health issues. The following five comments, each made by a different staff member, explain the variety of scenarios that have occurred or might occur:

We have lots of community groups who come and they make soup or bread or whatever; well their worker yesterday burnt her hand on some hot soup. I didn't really apply first aid and I thought after that I didn't write it in the incident report but I probably should have. I thought if it had been someone in my program, that I sort of feel I'm responsible for, I probably would have, but this was, is not, kind of my domain. It was in the kitchen. So some clarity around, for health and safety, if anything happens like that health and safety wise.

And:

There have been a couple incidents where we have had to call 911 because of a client emergency and the client has refused care. I want to be sure that calling 911 was the right thing to do. Also I wasn't sure if we should be considering shutting doors because of children in the building.

And:

“What do you do in an extreme situation...or if there is somebody who is having a heart attack, what is the standard procedure?”

The following two comments relate to critical incidents occurring in the community and the need for procedures to help the staff respond appropriately:

“I'm just thinking of going to a woman at one time and I thought she was going to die! And we don't have any policies or procedures established for that kind of thing.”

And,

I think that's really where the policies come into play is when it's an unusual circumstance. What do we do when we get to someone's house and something is seriously wrong? So [we need] some policies around that.

With respect to communicable disease, JBCP runs several programs for young children and as a result there is a relatively high risk of the spread of communicable disease among program participants and staff. The following comment describes the issues at JBCP with respect to communicable disease and why a policy on this topic is needed:

We have a lot of small children coming to the family centre and disease spreads like wildfire so we need a policy that says that we can ask parents to take children home if they appear to have a contagious illness, or if children have been here and subsequently they are diagnosed with something like pink eye...that kind of thing I am thinking of, that parents inform us so that we can inform other parents.

It is important for the researcher to note that JBCP has an incident report form that is used by staff, but it is not clear to all staff when it should (and indeed when it must) be used, as evidenced by the following example:

“We have an incident report form but we need to be clear about a process for not only when you fill it in but then the process of who sees it and what actually happens to it.”

In summary, the findings themes within the health and safety category and the behaviours/practices of JBCP staff that fall within them are summarized in the following table:

Modified Balanced Scorecard Category	Findings Themes	Relevant Behaviours/Practices
Health and Safety	Food Safety	<ul style="list-style-type: none"> •How food is handled •Food distribution •Determination of whether food is safe to serve
	Staff health and safety	<ul style="list-style-type: none"> •Staff as volunteers •Violence in the workplace •Working alone
	Client health and safety	<ul style="list-style-type: none"> •Responding to critical incidents •Responding to communicable disease(s)

Given the nature and variety of JBCP’s services it is not surprising that many health and safety issues would be raised. Health and safety is in fact the primary concern of the respondents in the following section, responding to stakeholders.

Responding to Stakeholders

While conducting the research the researcher called this category “responding to clients”. Regrettably, this is a weakness of the research design as the respondents struggled to understand what was meant by this category, which resulted in few findings in this area. This heading was intended to capture information concerning the working relationship between JBCP and internal and external stakeholders, such as the hosted services housed at JBCP and community partners.

Despite the confusion, three respondents commented on issues relating to working with stakeholders and all three issues related to the theme of safety concerning working with contractors and volunteers. The respondent who mentioned working with contractors raised the question of whether JBCP should check contractors’ WorkSafeBC coverage, to be sure that they have it. Concerning working with volunteers from partner organizations, the issue respondents highlighted is how to be sure that volunteers pose no risk to JBCP clients.

The following two comments related to working with volunteers are worthy of presentation:

We have a lot of community living volunteers who have developmental disabilities. They always volunteer in groups and have a staff person who is meant to know them. I know from my work with that population that some have a dual diagnosis of mental illness as well. I think we need to have some kind of sign off by the organization that is bringing the folks in to say that yes, these people are happy and safe to be in an environment where they will encounter a lot of other people including vulnerable people and seniors, and that they pose no risk/danger.

And:

If we are partnering with community organizations, if they are bringing in volunteers, then what should we require of them? For example, if I partner with neighboring volunteers to help in a program do I have a responsibility to make sure that person has had a criminal record check? Because they don't technically volunteer with me but they are using our centre and they are in the room with kids that mix with our clients, so is there anything I need to do?

In summary, the themes that surfaced within the responding to stakeholders category and associated behaviours/practices of JBCP staff are depicted in the following table:

Modified Balanced Scorecard Category	Findings Themes	Relevant Behaviours/Practices
Responding to stakeholders	Safety	<ul style="list-style-type: none">•Working with contractors•Working with external volunteers

Volunteer Management

While the comments in the previous section relate to external volunteers, the issue of screening of volunteers applies equally to JBCP's volunteers. As was stated in the background section, JBCP has over 300 volunteers in its programs. It is not surprising therefore, that many of the staff made comments concerning policy and procedures that relate to volunteers. The themes raised by respondents related to volunteer management are: volunteer fitness and conduct, expectations, and volunteer safety.

Volunteer Fitness and Conduct

The primary concern raised by staff related to volunteer fitness and conduct was about volunteers who drive clients. The main issue, which was mentioned by three respondents, was how to determine when a volunteer driver is no longer safe. One staff queried whether client concern should be the criteria used to determine fitness or whether all volunteer drivers should be requested to submit a doctor's evaluation at set intervals. In the following quotation one respondent describes the issue and what she did to respond to a particular situation:

[An important policy issue is] how we protect ourselves and the people that we serve in the case of, if volunteers are no longer as fit as they were when they started to do what it is that they are doing. This is particularly important around driving. We did have an instance with someone having significant heart surgery recently and they wanted to continue driving. I said that he needed to get a written letter from his doctor where he gives the doctor the job description of what he is doing and gets the doctor to say whether or not he is okay at this point to do that and the doctor has to sign off on it. We need to formalize those processes to be really safe.

Another employee raised the issue of volunteer conduct:

Every once in a while it crosses my mind in terms of the lines with volunteers. It might be helpful to have some policy around, like if a volunteer was inappropriately doing something, I think, okay well do I talk to the volunteer? Do I talk to the Volunteer Coordinator, or ?...so that's not...luckily I haven't had to deal with it yet but it has crossed my mind a couple times in terms of what is the policy around...are there conditions under which we would let a volunteer go? And what's considered appropriate volunteer behavior?

Expectations

The need for clarity around roles and responsibilities for the volunteer driver service was raised. One respondent explained that the drivers are not expected to have medical training yet there is no procedure in place for what they are to do if a client falls. She also stated the importance of having clear policy for the drivers, raising the issue of whether the drivers can drop the person off in a different location than where they picked them up. Here is her comment:

I'm thinking of the drives and drivers. We don't have a policy as to what happens if a client falls. Our drivers do not have medical training; they are volunteer drivers. If something happens en route then what is the expectation? There is a lot of [policy] work to do around the drivers because there are a lot of scenarios that could happen for the drivers. Even something as simple as whether the drivers can drop the person off in a different location than where they picked them up. That's something, I guess more procedure than policy, but I think there's a lot to do around the drivers.

Another respondent commented on the need for policy and procedures regarding maintenance of volunteers' vehicles and what would happen if a volunteer was in an accident or if their car broke down while they were volunteering. She gave the following example for why this is needed:

The other day one of our volunteer's car broke down. He paid for a cab to get the client home. And he doesn't have the money to do that. We wound up reimbursing him but that's something that's not covered. Also maybe the volunteer needs to be aware that they need to be responsible for the upkeep of their vehicle and that they need to have a safe vehicle. I think that's important too and I'm even wondering if there need to be some policies around checking...maybe they need to be presenting a safety check on their vehicle every year or something like that.

Volunteer Safety

In some instances JBCP volunteers may work alone and one employee expressed that there should be a policy that covers volunteers working alone:

We don't have any particular policies in place for the volunteers once they've been working with the client...you know they just go out to the person's home and that's the way it works...if they have a cell phone that's their own personal cell phone. We don't issue them one. And often they will be visiting in the evening or on the weekend and they can't get a hold of anyone [from JBCP]. And another issue, we do the initial assessment and if it is pretty straightforward we may not see that client again for a long time and lots can change. We've just recently started writing a review date on that, but that's very recent.

In summary, the findings within the volunteer management category and associated behaviours/practices of JBCP staff are summarized in the following table:

Modified Balanced Scorecard Category	Findings Themes	Relevant Behaviours/Practices
Volunteer Management	Fitness and Conduct	<ul style="list-style-type: none"> •Volunteers driving clients •Appropriate volunteer behaviour •Exit strategy to dismiss volunteers
	Expectations	<ul style="list-style-type: none"> •Roles and responsibilities for the volunteer drivers •Maintenance of volunteer drivers' vehicles
	Safety	<ul style="list-style-type: none"> •Volunteers working alone

It is clear from the table of findings that the policy issues related to JBCP's volunteer program are many, with the primary themes relating to protecting the health and safety of volunteers and clients. The breadth and nature of the issues raised is typical of those faced by organizations that run volunteer programs, many of which have policy manuals exclusive to their volunteers, and which is something for JBCP to consider.

Responding to Program and Services Clients

The topic of policy related issues and behaviours concerning program and services clients was originally beyond the scope of this research, however several respondents had difficulty avoiding discussion of behaviours related to program and services clients. Given the importance of these issues, the researcher decided to capture the information and to add a section to the framework based on the findings. Two themes surfaced with respect to responding to program and services clients: protection of personal information and internal business processes.

Protection of Personal Information

A few staff raised the question of what kind of information staff should collect, what are proper procedures for obtaining it, and how it should be protected. The following two comments describe the issue:

There is no policy around the privacy of information we have on clients for example medical conditions, allergies, emergency contact, like none of that stuff. There needs to be some kind of policy around that.

And:

“...if somebody has diabetes, for example, or if they are on a certain medication, do we have to know that? You know I don't know where their privacy begins and ends.”

Internal Business Processes

Several of the remaining comments within this section related to issues that can be categorized as “internal business processes”. These include: a procedure for how clients can make a complaint, a policy concerning receiving gifts from clients, and a policy and procedures regarding ending services to a client. With respect to the latter, in the words of one employee, “I'm thinking that [we need] a policy around when do we eliminate services and how do we do it; some exit strategy.”

The issues raised by staff within this section are of two types: content and process. The content issue relates to what personal information JBCP should collect from the clients and the process issues concern policy and procedures that are necessary to standardize employees' responses to common situations that arise in the service of clients.

In summary, the findings within the responding to program and services clients category and associated behaviours/practices of JBCP staff are summarized in the following table:

Modified Balanced Scorecard Category	Findings Themes	Relevant Behaviours/Practices
Responding to Program and Services Clients	Protection of Personal information	<ul style="list-style-type: none">• What kind of personal information should be collected• How should personal information be obtained and protected
	Internal Business Processes	<ul style="list-style-type: none">• Complaint process• Receiving gifts from clients• Removal of services

Responding to program and services clients is the final balanced scorecard category of this research. Each category will be analyzed in the following section.

DISCUSSION

“Policies guide individuals’ actions and behaviours...all organizations have policies and procedures, which are revealed in the decisions [employees] make and the actions they take” (Andringa & Laughlin, 2007, p.27). The actions and behaviours described in the findings above reveal the many unwritten policies and procedures in effect at JBCP. One employee explicitly stated that a policy was unwritten, in the following quote:

Safety wise, just in terms of the buzzer at the door, for staff if you're here after hours, [we need] some policy around...actually *I think the unwritten policy is if you are here after hours you meet your clients at the door and let them in but it is possible that's not always happening.*

Another employee describes the status of JBCP’s policies and procedures in saying:

When I am going to do a home visit, especially if it's a first client, then I will let at least another staff member know where I am and sometimes if I've been a little bit uncertain then I have actually said, “you know, if I'm not back within ‘x’ amount of time then here's the phone number to call”, *so there are sort of procedures and policies.*

According to Andringa and Laughlin, a key problem with policies being unwritten is they may be known by only a few individuals (2007, p.27). Another problem is that even if the policy is known, implementation (i.e. procedure) is likely to vary substantially among employees. In this section the researcher will discuss and analyze the findings, drawing on literature where relevant, and using logic as a means of making sense of the behaviours of JBCP’s employees.

Financial Management

Financial policies are a vital component of an effective financial management system (Nonprofit Fiscal Policies and Procedures: A Template and Guide). Financial policies are important because they establish an organization’s internal controls and ensure compliance with regulatory standards (Nonprofit Fiscal Policies and Procedures: A Template and Guide).

The findings raised three issues at JBCP concerning financial management, all of which relate to internal controls: security of money, management of program funds and management of financial donations.

Security of Money

As evidenced by the findings, funds in varying amounts are kept in multiple locations within the JBCP building and while these locations are locked, one has a broken lock and the other is a filing cabinet that could be removed from the JBCP premises with ease,

according to the employees who spoke about this topic. The insecurity of money within the JBCP building leaves the organization vulnerable to theft both by employees and the public. According to Brinckerhoff, “a key to financial controls is to have good theft prevention by reducing temptation” (2009, p. 265). Temptation could be reduced in these cases by ensuring any location within JBCP where money is kept is locked securely and that the storage container is not removable from the premises. An additional issue that is worthy of consideration is the lack of formal procedures and timeframes for the removal of funds from the cabinet at reception. Temptation would be reduced by not allowing large sums of money to accumulate and JBCP should implement a schedule for checking the amount of money accumulating at reception and determine an amount above which funds will be removed to accounting.

Management of Program Funds

It is notable that with respect to managing funds for programs one employee asked specifically, “what’s the accounting process?”. This comment speaks to the need for internal controls related to the management of program funds. These controls might include specification of an amount above which employees must give excess to the Financial Manager as well as a procedure for how employees are to keep track of the funds. Both of these measures would address inconsistent practices among the staff in managing floats for their programs.

Management of Financial Donations

Inconsistent practice among staff also relates to the issue of management of financial donations. The findings show that one employee keeps donated money that is given to her and determines how much and when to give “excess” to the Financial Manager. Other employees commented on turning financial donations directly in to the office. It is clear from the comments that staff are confused about how to handle financial donations and that they are wary of doing so. The following comment expresses many of the issues related to this topic:

It does happen when people give us cash and I'm always very leery you know, first thing I do when I come back [to the office] is tell somebody – “you know ‘so and so’ gave me this hundred dollar bill”. And because I don't like dealing with cash - it's not something that we do - and I guess maybe the other way is to say to the person I am sorry I can't accept that at this time. But then you don't want to put the person off. It's hard. The other day too one of my clients gave me this big sack of change. I didn't count it all out. What we did was we counted it out at the office and there were the two of us there, and then we called the client and we said “this is what was in there so please”, you know...this is a fare bit of money for someone who doesn't have much, so we gave her the option...just saying you can have this back I think that's really pertinent. So maybe some policies just around money.

The preceding comment is important for several reasons. Firstly, it illustrates an example of the varied ways JBCP staff may handle money and it speaks to the grassroots nature of

JBCP's services. It is a good example of why policies and procedures are needed as other employees may have handled the situation very differently. Secondly, it communicates an employee's nervousness about handling cash. It is interesting that this respondent says that dealing with cash is "not something that we do" because many of JBCP's employees deal with cash in a variety of different ways and circumstances. This employee is clearly uncomfortable dealing with money at work and her discomfort likely comes from knowing that being given cash puts her at risk of accusations of theft, if something happened to the donation. Brinkerhoff suggests that everyone who handles cash and cheques should be bonded (2009), which is something for JBCP to consider.

Effective behaviours exhibited by the employee in this example include telling a coworker about a donation as soon as possible, and having a co-worker count the donation with her at the office, which, it can be assumed, she did to protect herself from any accusations of theft as well as to have a second person to check for accuracy. Cavanagh (in Agard) says that it is important to ensure that for all transactions of receiving, recording, or disbursing assets more than one person is involved (2011). This mitigates the chance of theft or loss of donations.

JBCP clearly needs a policy and procedures concerning employees receiving donations. Important issues that should be addressed in any such policy include how long employees can hold a donation before handing it in, the expectations of who it is handed to and written processes for receiving and receipting it. It will not be possible for a policy to cover every foreseeable circumstance, such as the aforementioned example of an employee receiving a sack of change, and I do not recommend that JBCP attempt to. The important factor is to establish a baseline policy for what employees are to do when they receive financial donations and specify that in unusual circumstances, such as the above, that they speak with their Manager concerning how to handle and process the donation.

There are several risks associated with lack of financial policies related to the security and management of money. These risks include theft or the accusation of theft by an employee, a client or member of the public; risk of money being lost or misplaced; and risk to the Society's reputation if theft occurred (Cavanagh in Agard, 2011). Both Cavanagh (in Agard, 2011) and Brinkhoff (2009) say that all nonprofit leaders should implement a system of internal financial controls. Based on the many financial management issues discussed above, the researcher agrees and suggests that JBCP should prioritize instituting policies and procedures with respect to financial management.

Human Resources Management

There is a vast amount of literature on human resources management and it is one of the most commonly discussed policy and procedures areas. Two purposes of human resources management are to provide employees with a motivational environment and fairness (Barbeito, 2004). Barbeito (2004) says that this requires at least the following tools:

- Job descriptions
- Job Performance Standards

- Performance Appraisals
- Growth Plans

Each of these is mentioned in the findings above, as are the tools of orientation processes and documents, personnel files and codes of employee of conduct.

The findings within this section revealed four key themes: performance management; HR processes; conduct and respect; and reporting/chain of command. These are discussed below:

Performance Management

The respondents raised two aspects of performance management: performance appraisal and professional development and training. Five of JBCP's employees expressed a desire for JBCP to conduct performance appraisals. According to Barbeito, performance appraisals are an important part of a human resource management system (2004) and McMillan (2003) says that it is a common practice for organizations to conduct annual staff evaluations and organizations should have a policy on staff evaluations.

Performance appraisals are useful for several reasons. Perhaps their most common use is they provide the employer and employee with an opportunity to identify strengths and weaknesses. They are also important for setting goals as identified by one respondent in the following comment:

Our performance evaluations are ad hoc. Our outgoing ED did them at the last possible second before she left and then mailed them to us. *It really sort of defeated the purpose of sitting down and doing any goal setting.*

In addition to goal setting, performance appraisals help employees understand how their role fits into the overall organization and how to align their work with the organization's mission, which Cavanagh (in Agard), as stated in the literature review, identifies as an attribute of a successful organization (2011).

Performance appraisals are also useful as a basis for promotions (McMillan, 2003) and as a human resource tool because they offer an opportunity for an employee and his/her Manager to discuss needs the employee may have to better perform; for example, training and/or equipment needs (Barbeito, 2004). The topic of professional development and training was mentioned by four of the respondents who each commented on desiring access to training. According to Barbeito, the benefits of training include, "improved performance, improved ability to recruit and retain employees, in-house promotion of good employees, and professional networking" (2004, p. 102). It appears that JBCP staff can access training if they speak with their Manager, but this is not widely known and is therefore an example of an unwritten policy at JBCP.

HR Processes

The staff mentioned two HR process issues: hiring and personnel records/job descriptions. Two respondents spoke about hiring and questioned the appropriateness of turning a volunteer into an employee without a formal process and hiring someone by word of mouth versus through a formal hiring process. According to Barbeito, “a nonprofit’s success depends on the quality of its staff, therefore a well thought out and carried out recruitment process is vital. A recruitment policy that ensures that the hiring procedures are consistent and fair to everyone is important” (2004, p.33).

With respect to the issue of personnel records and job descriptions, JBCP employees do not know if they have a personnel file and several respondents commented that they do not know if they have a job description. McMillan makes reference to the importance of both personnel files and job descriptions in the following comment, “in order to avoid misunderstandings, disagreements, and possible legal action, all staff positions should have a well-thought-out job description signed by the employee and kept in his/her personnel file” (2003, p.153).

Job descriptions are important for another reason – they assist staff to understand not only their own role but that of their co-workers, which is important for generating respect among co-workers, which was the key theme within human resources management. The following quote is worthy of special mention because it shows that respect is generated at least in part from understanding what co-workers do and their role within the overall Project, and understanding stems from having job descriptions:

I think it's really important that staff of James Bay understand what each person does and I don't even know if there's a job description for everyone that's here. I think it's vital to ensure that people respect what other people are doing. [Sometimes people] don't understand what other people's role is so sometimes they can minimize what other people do and take for granted different things that the person might be doing and shouldn't be doing or taking on. So I think it's really important to have some clarity about that.

Conduct and Respect

Conduct and respect were raised in another context, specifically that of witnessing and reacting to poor conduct by a colleague directed towards another colleague or a client. The following comments are illustrative:

I think it would be worth having something around employees relationships and the code of conduct. There have been some interactions that didn't feel particularly respectful and I don't think there is anything really in writing about that in terms of expectation of interactions with other staff. I think it's worth having [it] written [down].

And:

A couple of times I've been stumped in terms of, that [an inappropriate comment] was really not okay, and I should probably say, "okay can I talk to you for a minute", but uhh...I just haven't done that. I just thought this was really awful, and tried to address it with the client, which is not satisfactory for the client because they want some type of apology or amendment from the person who was rude to them. So that [a policy around conduct and procedures for reporting inappropriate conduct] would definitely help and might have served us in better stead if it had been in place.

On this topic, McMillan says, "often employees are not aware of what is expected of them with regard to personal interaction with members and other staff" (2003, p.229), which is rationale for JBCP to have an employee code of conduct policy.

Reporting/Chain of Command

The respondent who made the last comment about conduct and respect spoke at length about the issue and it was evident to the researcher that the respondent felt unsure how to respond to certain situations. The following comment also illustrates this:

What do you do if you see a co-worker speaking rudely to a client or a member of the public; what do you do? If you go to the Executive Director you feel like you're tattling, you know, and at the same time it feels like not necessarily helpful or appropriate sometimes to address it as a peer, so some clarity around that would be really useful.

McMillan says that, "allowing employees the opportunity to voice concerns via a formal established procedure is critical for staff morale and administration" (2003, p.131). The concept of how a formal procedure can influence morale is of particular importance as the researcher observed from the body language and tone of the employee that her morale in this circumstance was low. She indicates this to some extent in saying, "I just thought this was really awful". Therefore a positive effect of instituting a policy and procedure on reporting is likely improved staff morale.

With respect to chain of command, a different issue that was raised was who employees could or would go to if they felt they were being unfairly treated by their Manager. Other issues raised related to the relationship between the employees, the Executive Director and the Board. With respect to the latter, Barbeito says that a policy that describes the chain of command is an important tool because, "it defines the expectations for board/staff communication through the executive" (Barbeito, 2004, p.5). She says that it is important to clarify interaction between staff and board members to, "avoid confusion and undermining of the authority of the executive" (Barbeito, 2004, p.5). Barbeito explains that a policy on chain of command should, "not [be] intended to stifle staff concerns but rather to be sure that they are taken to supervisors who are most likely to be able to

address them successfully” (Barbeito, 2004, p.5). A policy on chain of command is also helpful to create boundaries for the Board’s role and management’s role so that one does not interfere with the other (Barbeito, 2004).

Human resources management tools are important because they tell employees how what they do contributes to the overall success of the organization and its mission (Barbeito, 2004) and they communicate expectations. They are also instrumental in creating an effective work environment (Barbeito, 2004). As stated by Barbeito, “recruitment, motivation and retention of a qualified workforce require investment in development of sound human resource management policies and procedures” (Barbeito, 2004, p. xv) and it is the researcher’s opinion that JBCP would benefit significantly from such an investment.

Administration

The policies that fall within the area of administration vary widely among organizations and administration tends to be a “catch all” for policy topics that do not clearly fit within the other operational areas. This is evidenced by the variety of topics raised by respondents when discussing behaviours within administration, as shown in the table on page 82.

For the purpose of analyzing the data generated, this section will focus on the three themes that surfaced in the interviews: security of client information, file management and internal business processes.

Security of Client Information

The issues in the findings that relate to security of client information include the insecure storage of client social insurance and other personal information for the volunteer tax return service, as well as the privacy and security of client information shared via email and the use of personal email accounts to send work emails. With respect to the latter, the employee’s comment is worthy of note:

I’m a little uncomfortable when we talk about policy around the email because I am loose with that and I’m guilty because although we have it, it is so unpredictable that I usually use my Gmail, and *that’s not really that secure*...so I am feeling uncomfortable about that.

There are a few concerns with respect to these issues. Personal tax information stored at the JBCP reception desk could be susceptible to theft, which, if that occurred, would result in a breach of privacy. Secondly, there is a risk of unauthorized access to the information as one respondent told the researcher that the cabinet in which it is stored is not always locked. With respect to the use of client’s full names in emails and the use of personal emails for business purposes, JBCP is taking unnecessary risks with these practices. These risks include unauthorized collection, use, disclosure, copying, modification, disposal or destruction of personal information (Securing Personal Information: A Self-Assessment Tool for Organizations, Office of the Information and Privacy Commissioner for British

Columbia). The *Personal Information Protection Act* (PIPA) in BC requires that organizations take steps to protect the personal information in their custody from these risks and it suggests that reasonable security arrangements, which include physical and technical security, be adopted.

The need for physical security also relates to the issue of removal of client information from JBCP. Client information is removed from JBCP premises by outreach workers and by the JBCP staff member appointed to take the database home after hours. The researcher's survey of other organizations revealed mixed practices concerning the removal of client information from office premises by outreach workers. One organization strictly does not allow its employees to remove client information as it assesses the risks to outweigh the need for employees to take the information with them on outreach visits. However, the majority of organizations surveyed do allow their outreach staff to take the client file. With respect to taking a copy of the database offsite, the practice among the organizations sampled was the same – in each case an employee is appointed to take the database home. What is pertinent in these situations is that procedures are needed to guide employees as to acceptable and unacceptable practices when removing client information from the office. In addition, guidelines are needed for how confidential information should be stored in a client's car and home. One respondent alludes to the importance of addressing these issues in saying [about removal of the database overnight], "how do we deal with it off site responsibly?"

Another issue raised by respondents and involving JBCP's database is access to client information. The specific practice that was raised is that of staff signing confidentiality agreements. It is interesting to note that there was a discrepancy among respondents with one respondent telling the researcher that all JBCP staff have signed confidentiality agreements and another saying that she thinks she should have to sign an agreement specifying that she won't share information from the JBCP database. The issue perhaps is that employees who have been with the organization for many years do not remember signing a confidentiality agreement as it likely occurred when they joined the organization.

A common business practice with respect to confidentiality agreements is for employees to sign a new agreement annually as part of their performance appraisal process. If JBCP followed this practice the routine and reoccurring nature of agreeing to hold certain information confidential would mitigate any confusion by staff about their responsibilities concerning confidentiality.

File Management

"Every organization should have a formal, well-thought-out records retention and destruction policy. Old records that are rarely, if ever, used take up valuable space; yet premature destruction of records can be a costly and sometimes embarrassing mistake" (McMillan, 2003, p.207).

This comment by McMillan is notable because it raises two specific issues currently unspecified at JBCP: file retention timeframes and file management processes. The need to address this issue is well recognized by JBCP staff as eight respondents mentioned the issue to the researcher. One respondent speaks to McMillan's comment regarding records that are rarely used: "sometimes people have stayed on the client list for a long, long time really not getting any services." The issue of potential destruction of records is also an active one at JBCP. In the same comment the respondent said, "I used to do counselling and I got rid of files after seven years, but I don't have a policy for this job so that would be a good policy - when are we actually getting rid of the files?"

It is unclear what McMillan means by saying the premature destruction of records can be "costly" but it is apt to conclude that he means from a legal perspective as the length of time records must be kept is regulated in most jurisdictions. Retention timeframes are specified on the basis of the nature of services provided and JBCP should ascertain the timeframes required based on its services, in order to meet its legal obligations.

Internal Business Processes

Within this theme, two comments are worthy of revision. The first was a respondent's comment with respect to mileage reimbursement, saying, "I would suggest that if we submit our receipts that we should know when we will get the money back." Many organizations have expense reimbursement schedules which are a useful tool for accountability of the organization to employees, and which engender trust and respect.

With respect to voicemail, the comment by a respondent that front line staff should leave information on their voicemail about their days or work as well as instructions for whom clients should contact if their call is of an urgent nature, is pertinent. McMillan says that, "as a courtesy to callers, many organizations require all employees to change their voicemail greeting daily to advise callers when they are out of the office and so forth" (2003, p.256). It is the researcher's opinion that in addition to this being a courtesy, given the nature of JBCP's services, advising clients of whom they can call if they are in urgent need of help is the responsible thing to do for the reasons stated by one respondent: "our clients are vulnerable".

In summary, it is the researcher's opinion that security of, access to, removal and transport of client information and file management are the most important issues raised within this section and JBCP should to focus its attention on policies that cover these topics.

Health and Safety

Many of the behaviours raised in Administration relate to responsibly provide services to clients. The area of health and safety also focuses on this but has even greater emphasis on the protection of staff. The themes that surfaced from the findings in the area of health and safety are food safety, staff health and safety, and client health and safety. Concerning food safety, the issues mentioned by respondents relate to the handling of food, the distribution of food, and determining whether food is safe to serve. These issues are

nuanced and too detailed for the researcher to discuss other than to suggest that JBCP should assess its responsibility/liability concerning food. The remainder of the discussion in this area will focus on staff and client health and safety.

Employers have an obligation under the law to provide a safe environment for staff and clients and as Barbeito says, “the nonprofit will want to place emphasis on safety and prevention of accidents and emergencies” (2004, p.136). Creating a safe environment requires setting standards as well as guidelines for how to behave in responding to certain situations. Every respondent in this research referenced health and safety situations, which expresses the importance of this topic in relation to JBCP’s operations. The findings are discussed below.

Staff Health and Safety

The theme of staff health and safety includes the important topics of staff as volunteers, violence in the workplace, staff working after hours, and staff working alone. There was an interesting comment by one respondent about staff as volunteers:

We're probably like any non-profit, where there's so many kind of “other jobs” that come up that really aren't under your job description. So every once in a while I'll just sort of help. But I sort of think “okay, this is really heavy”. I've thought, “okay, if I throw my back out doing this job, which is not actually really in my job description...you know that is probably not a good thing, and how will that play out?”

This comment illustrates the nuanced nature of JBCP’s (and indeed many non-profits) operations and makes a good argument for why policies and procedures are needed – to give the employees an understanding of if and how they are protected at work, particularly in an environment where the boundaries between performing duties as an employee and as a volunteer are blurred.

With respect to violence in the workplace, the researcher was not surprised that this would present as an issue given that JBCP is a Neighborhood House offering services to individuals from a broad array of backgrounds and life circumstances. The majority of comments by respondents related to how to respond to a client exhibit aggressive or disorderly behaviour at JBCP. The comment by one staff member that, “there was a case a while ago when I actually had fear when it comes to safety in our workplace; fear for myself and our clients” is profound and speaks clearly to JBCP’s need for a policy on this topic.

Training in how to respond to violence in the workplace is not only a prudent thing to do, but, as specified in the WorkSafeBC occupational health and safety regulations, it is incumbent on employers to provide safe working environments for employees and to establish policies and procedures to minimize the risk of violence to workers if elimination of the risk is not possible (Part 4 General Conditions, Working Alone or in Isolation section). Furthermore, the regulation says that employers must instruct workers in: (a) the

means for recognition of the potential for violence, (b) the procedures, policies and work environment arrangements which have been developed to minimize or effectively control the risk to workers from violence, (c) the appropriate response to incidents of violence, including how to obtain assistance, and (d) procedures for reporting, investigating and documenting incidents of violence (Part 4 General Conditions, Working Alone or in Isolation section).

A common way for organizations that offer services like JBCP's to instruct workers as specified above, is to offer non-violent crisis intervention training to their staff. Non-violent crisis intervention is a researched and structured model of training individuals to respond to violent situations in a non-violent way. This training is offered by each of the five similarly mandated organizations that the researcher surveyed. One organization's policy specifies the type of training employees and their managers will receive and requires that records of all training will be kept in the respective employee's personnel file. This shows that this organization takes the issue of violence in the workplace seriously by recording and monitoring the extent to which staff have received training in this area. The researcher considers this to be an example of best practice policy with respect to violence in the workplace.

In addition to requesting guidance on how to respond to incidents of violence, respondents inferred that JBCP needs a client code of conduct statement or policy. There would be great value in JBCP having a code of conduct posted in each of its rooms/offices thereby publicly expressing expectations of behaviour from clients and boundaries for appropriate behaviour. This would hopefully be a useful tool for reducing the chance of violence occurring through informing clients of JBCP's expectations about their behaviour. Just as McMillan says of employee conduct and respect, that employees often do not know what is expected of them with regard to interpersonal interactions (2003), the same can be said of clients and members of the public, thus it is incumbent on JBCP to explicitly state expectations.

In addition to keeping workers safe through training and setting behavioural guidelines for clients, JBCP should to set policy and procedures for employees working alone both in the community and after hours. Part of the section of the WorkSafeBC Occupational Health and Safety regulation on violence in the workplace references employees working alone and specifies that employers must check the well-being of an employee working alone or in isolation. The regulation specifies the following requirements (Section 4.21 of Part 4 General Conditions):

1. The employer must develop and implement a written procedure for checking the well-being of a worker assigned to work alone or in isolation.
2. The procedure for checking a worker's well-being must include the time interval between checks and the procedure to follow in case the worker cannot be contacted, including provisions for emergency rescue.
3. A person must be designated to establish contact with the worker at predetermined intervals and the results must be recorded by the person.

4. In addition to checks at regular intervals, a check at the end of the work shift must be done.
5. The procedure for checking a worker's well-being, including time intervals between the checks, must be developed in consultation with the joint committee or the worker health and safety representative, as applicable.
6. Time intervals for checking a worker's well-being must be developed in consultation with the worker assigned to work alone or in isolation.

It is interesting to note that one respondent used her own judgment to set some of these procedures for herself, as per the following comment: “When I am going to do a home visit... then I will let at least another staff member know where I am and sometimes if I've been a little bit uncertain then I have actually said, “you know, if I'm not back within ‘x’ amount of time then here's the phone number to call”. It is notable however that another employee commented that until the researcher raised the subject of working alone she had not thought about her safety: Interviewee: “sometimes nobody knows where I'm going. Interviewer: are you ok with nobody knowing where you are going? Interviewee: I have never thought about it until now just because, you know, that's the reality of it.” It is reality that JBCP employees must work alone but JBCP must, as specified above, rectify the situation of employees working without procedures in place to monitor their safety.

Procedures for staff working alone are also important so that staff have a resource to assist them in managing situations that may arise. The following example by one respondent illustrates why this is important:

I have had after-hours situations where I was the only staff involved and it was something I didn't know... this was involving calling the police because a client was missing... I thought I didn't have any one to phone and at that time we had no policy in place and of course [subsequently] the Executive Director said phone me on my cell phone at home but it is not a formal policy.

Client Health and Safety

The issue raised by respondents that relates to client health and safety is responding to critical incidents. The comment about a client going missing in the preceding section is an example of a critical incident. This comment was however the only one about a critical incident other than medical emergencies and communicable diseases, and the researcher will focus the discussion on these two topics for this reason.

The types of medical emergencies that respondents are quoted as raising in the discussion section include a client burning her hand, client medical emergencies such as a heart attack or incidents that involve the spill of bodily fluids, or clients in distress in their homes. The respondents clearly were asking for guidance about how to respond to emergency situations, saying: “*I want to be sure* that calling 911 was the right thing to do”. Also “*I wasn't sure* if we should be considering shutting doors because of children in the building.” And “*what do you do* in an extreme situation... or if there is somebody who is having a heart attack, what is

that standard procedure?” Finally, “*what do we do* when we get to someone’s house and something is seriously wrong?”

Four out of the five related organizations surveyed have policies and procedures that include how to respond to critical incidents as well as when and how to report on such incidents. A few respondents to this research commented on the topic of incident reporting, about which they need guidance concerning when and how to report. One comment is of note in which the respondent clearly expresses confusion about reporting:

We have lots of community groups who come and they make soup or bread or whatever; well their worker yesterday burnt her hand on some hot soup. I didn’t really apply first aid and I thought after that I didn’t write it in the incident report but I probably should have. I thought if it had been someone in my program... that I sort of feel I’m responsible for...I probably would have, but this was, is not kind of my domain. It was in the kitchen. So some clarity around, for health and safety, if anything happens like that health and safety wise.

It is notable that the staff member, after making this comment and processing the situation further, realized that if the person who was injured had been a client instead of another organization’s volunteer she would have written an incident report. Upon this realization she said that she was going to write the report after our interview. A clear policy and some training on this policy would help staff have certainty in responding to health and safety situations.

Respondents did not comment on medical emergencies involving staff however this area is also important. Health and Safety regulations require employees to report injuries to their employer, and for employers to report to WorkSafeBC incidents that require employees to get medical attention or that result in an employee take time off of work (WorkSafeBC website, Reporting Accidents and Incidents page). Employers must also report any incident that causes the death or serious injury of an employee or that causes the risk of serious injury or death (WorkSafeBC website, Reporting Accidents and Incidents page). In addition to being required to report, employers must investigate any incident that results in an injury to an employee that requires medical treatment (Workers Compensation Act Part 3 Division 10 – Accident Reporting and Investigation).

In addition to the legal requirement that employees and employers report occupational injuries, occupational diseases (which includes communicable diseases) must also be reported. The staff in JBCP’s health clinic and programs for young children are particularly susceptible to occupational diseases.

Occupational Health and Safety regulation lists the following requirements of employers to protect workers. Employers must (Controlling Exposure: Protecting Workers from Infectious Disease document):

- Identify infectious (aka communicable) diseases in the workplace.
- Develop and implement an exposure control plan, if necessary.

- Inform workers about how they may be exposed to infectious diseases in the workplace.
- Educate, train, and supervise workers on safe work procedures, including hand washing and the proper use of personal protective equipment.
- Offer vaccinations without cost to workers who are at risk of occupational exposure.
- Purchase safety-engineered medical devices, where appropriate.
- Tell workers to seek medical attention, as required

Employers should also have procedures in place for infection control and what to do if an employee or a client develops a communicable disease. With respect to client's having a communicable disease, in order to be accountable to other clients and stakeholders JBCP should to have a communicable disease policy, which would address the one respondent's comment on this topic:

We have a lot of small children coming to the family centre and disease spreads like wildfire so we need a policy that says that we can ask parents to take children home if they appear to have a contagious illness, or if children have been here and subsequently they are diagnosed with something like pink eye... that kind of thing I am thinking of, that parents inform us so that we can inform other parents.

In summary, health and safety is one of the most important areas, perhaps arguably the most important, in which organizations should have policies, in order to be both ethically and legally responsible. WorkSafeBC's website (health and safety programs page) says that, "employers who provide leadership and commitment develop the most effective health and safety programs" and, "maintaining a program with a high standard of performance will result in identifying hazards and reducing workplace injuries and illnesses". Numerous hazards are part of JBCP's operations, both physical ones such as an operating kitchen, and circumstantial such as through providing services to a vulnerable population and working alone, as examples. The issue of risk has been a theme throughout this research and is also the primary concern in the next sub-section of this analysis – responding to stakeholders.

Responding to Stakeholders

The comments made concerning volunteers from partner organizations volunteering at JBCP and contractors all relate to the issue of exposure to risk and raise the question about the extent to which JBCP is accountable for taking steps to investigate whether the volunteers or contractors present any risk to JBCP clients and staff.

It is the researcher's opinion that JBCP should assess the extent of risk involved and its tolerance to this level of risk. JBCP management staff may decide to accept the risks involved and do nothing, or to take steps to address the issues, for example by discussing concerns and potential risks with the agency supplying the volunteers who have developmental disabilities and requiring a signed statement that the agency assesses the volunteers to present little or no risk to JBCP clients, as suggested by one respondent. With respect to volunteers from partner organizations, depending on the level of risk the

JBCP is willing to take with respect to these issues, the Project may decide to require that JBCP staff only partner with agencies whose volunteers have been through a criminal record check. Decisions made concerning these issues should be written into policy concerning working with volunteers from partner organizations.

Volunteer Management

“A gap has been created between the ability of Managers of volunteers to create volunteer programs – to recruit, place and supervise volunteers – and the organization’s development of administrative, communications, and accountability systems to support those volunteer programs” (Graff in Connors, 2001, p.791). This comment is important and relates to the status of JBCP’s volunteer management in that JBCP does not have written policies and procedures concerning volunteer management. Three themes surfaced from the findings in this area and they are: volunteer fitness and conduct, expectations, and volunteer safety.

Volunteer Fitness and Conduct

Volunteer fitness and conduct is another thematic area where accountability systems are needed by JBCP. JBCP has many volunteers who are in positions of responsibility given that they transport clients. Volunteer driver programs provide needed and valuable services to the community but there are significant safety, liability and accountability issues involved in having volunteers drive clients. Several of the respondents raised concerns about how to properly assess the safety of volunteer drivers in terms of their driving skills and the safety of their vehicle. One staff queried whether client concern should be the criteria used to determine fitness or whether all volunteer drivers should be requested to submit a doctor’s evaluation on a regular basis.

Each of the volunteer driver handbooks reviewed by the researcher contained an annual driver review process which consistently involved a staff member contacting each volunteer driver to discuss things like any changes in the drivers driving record and ability to drive safely, rider feedback, peer feedback and the driver’s comments on his/her driving, and practical things including arranging for a new driver abstract and copies of the drivers vehicle insurance and registration (a comprehensive sample annual driver checklist can be found on page 57 of the Edmonton Seniors Coordinating Council, Assisted Transportation Volunteer Driver Program Tool Kit).

Expectations

Several possible scenarios were raised by respondents about JBCP’s volunteer driver program. One respondent raised the issue of needing a policy and/or procedure for what volunteers are to do if a client falls, along with other scenarios such as a vehicle accident or breakdown. The issue of the need to be clear about boundaries for the drivers with respect to the purpose of the drive was raised by two respondents and is summed up by the following comment:

There is a lot of [policy] work to do around the drivers because there are a lot of scenarios that could happen for the drivers. Even something as simple as whether the drivers can drop the person off in a different location than where they picked them up...it's around what is the drive for. I think that needs to be really clear for the driver and the client that we provide a medical drive service. We are not a taxi service. So I think that it would be great to have a procedure or policy around the fact that the drives are to go to the medical appointments and back again. It's not to stop at the pharmacy, at the mall...all those different kinds of things. As much as, you know...there's lots of reasons why the clients ask for that but I think if that's clear...and for drivers too so that they know that they can fall back on this as the organization's policy. This is important because if the job we give the driver is to take [the client] to the doctor and home again and on the way home [the client says] "can we stop at the pharmacy to get some Kleenex" and they slip and fall, then we're not covered because our instructions were to go to the doctor and back again.

Section 3.10 of the Banff Family and Community Support Services (BFCSS) Volunteer Driver Handbook concerns additional stops. It says that it is acceptable for drivers to make additional stops at the request of the client or for their own reasons so long as these stops are arranged through a BFCSS staff member because stops outside of those schedules are not covered by the program's insurance. With respect to this issue, Graff (in Connors, 2001) says that organizations need to clarify their policy regarding volunteers who are tempted to exceed the limits of their job description. Other issues to consider when developing policies for the volunteers are (Graff in Connors, 2001):

- JBCP's policy/procedure if volunteers ever feel they cannot cope or feel uncomfortable making decisions in the course of volunteering.
- JBCP's policy/procedure concerning backup if a situation ever exceeds the limitations and responsibilities of the volunteer's role.

Organizations with effective administrative systems in place have drivers handbooks that outline policy and procedures and guidelines for volunteers on all issues that may arise in the course of their work are which they are required to sign thereby declaring that they have read and agree to abide by the policies and procedures.

Volunteer Safety

In addition to the importance of having policies and procedures to govern the volunteer driver program, in order to ensure the safety of clients, the safety of volunteers is equally important. In some instances, including when driving clients, JBCP volunteers work alone. One respondent identified that JBCP needs a policy in this area with the following comment:

We don't have any particular policies in place for the volunteers once they've been working with the client...you know they just go out to the person's home and that's the way it works. They don't...if they have a cell phone that's their own personal

cel phone. We don't issue them one. And often they will be visiting in the evening or on the weekend and they can't get a hold of anyone [from JBCP]. And another issue, we do the initial assessment and if it is pretty straightforward we may not see that client again for a long time and lots can change. We've just recently started writing a review date on that, but that's very recent.

Many of the issues raised in this comment parallel concerns that apply to staff working alone. An important point is the fact that volunteers are not given cell phones whereas JBCP outreach employees are. Another important consideration is volunteers working on weekends, which are “after hours” compared to JBCP staff typically work. It would be prudent for JBCP to have staff on call to be available to assist volunteers working after hours, if and as necessary.

One other aspect of the above comment is worthy of discussion. JBCP’s new procedure of writing a review date on client files is an excellent one. As pointed out by this respondent, “lots can change” in clients’ lives and setting an interval at which to check in with clients not only results in JBCP providing value-added service by making an effort to communicate with clients regularly about their well-being, but doing so is an important step in reducing the risks to volunteers in their work with JBCP clients.

In summary, policies for volunteers are important because of the increasing risks associated with volunteering and the “increasingly litigious nature of our culture” (Graff in Connors, 2001, p.788). The volunteers at JBCP are given great responsibility and there is risk involved in their work. According to Graff, “the greater the degree of responsibility of volunteer work itself, the greater the need for rules to govern and regulate its accomplishment; the greater the need for guidelines to ensure safety; the greater the need for policies” (in Connors, 2001, p.789).

Responding to Program and Services Clients

“Clearly written and well-understood policies and procedures, which address staff responsibilities for the supervision and monitoring of the individuals and families receiving services from the agency, are vital” (Cavanagh in Agard, 2011, p.678).

Discussion of behaviours relating to JBCP’s work with program and services clients was beyond the scope of this research; however, given this is the core of JBCP’s operations, it is not surprising that related issues were mentioned by the respondents. Two themes concerning responding to program and services clients arose from the interviews: protection of personal information and internal business processes.

Protection of Personal Information

There are several issues that fall under the banner of protection of personal information and the ones mentioned by respondents include what rules and guidelines exist around how to collect and protect information and what kind of information should be collected by employees. As mentioned above in the Administration section, the *Personal*

Information Protection Act (PIPA) is the law that not-for-profit organizations in British Columbia must follow in the management of personal information (Office of the Information and Privacy Commissioner for British Columbia website, For Private Organization page). The Office of the Information and Privacy Commissioner for British Columbia and The Office of the Privacy Commissioner of Canada are important resources for not-for-profit organizations to ensure they are in compliance with this law. Furthermore, these organizations offer a wealth of information and tools including how to set up a privacy management program and what to do in the event of a privacy breach.

The issue of what kind of information should be collected by staff is raised in the following comment: "...if somebody has diabetes, for example, or if they are on a certain medication, do we have to know that?" And perhaps most notably the respondent then said, "you know, I don't know where [clients'] privacy begins and ends." It has been the researcher's career experience to date, having worked as a social worker in multiple charitable organizations, that this question – what information do I need to know to do my job and, of that information, what must be kept confidential and what is public information – is not given sufficient consideration by Managers in training and supervising staff. All of the issues mentioned above concerning protection of person information need to be addressed by Management within not-for-profit organizations, due to both a legal obligation as well as a moral one.

Internal Business Processes

The issue of what information JBCP staff should obtain from clients and how to do so is addressed in part by JBCP's intake procedure and forms. This is an example of an internal business process. Other comments made by respondents that fall within this category include needing a complaints procedure for clients, a policy concerning employees accepting gifts from clients, and a policy and procedures regarding ending services. The issues of complaints, gifts and needing to terminate services likely occur infrequently at JBCP; however, this does not diminish their importance. Providing employees with a consistent approach to addressing these issues, through having policies and procedures governing them, relates to several of the reasons JBCP needs policies and procedures as specified in the introduction of this paper; namely, to communicate values and expectations, and help staff to make decisions that are consistent, uniform and predictable (HR Council website, HR Policies and Employment Legislation page).

In summary, some very important issues were raised by respondents under the category of responding to program and services clients. Undoubtedly, the most important relates to the protection of clients' personal information; however the issues of how to respond to gifts given by clients and clients who wish to make a complaint, as examples, must also be addressed. JBCP should develop policies and procedures within this area so that appropriate information is collected by employees and so that this information is protected properly, and so that staff are consistent in their approach to responding to program and services clients.

RECOMMENDATIONS

According to Andringa and Laughlin, the extent of [the need for policies and procedures] varies with the size and complexity of the organization and with the degree to which uniformity is desired: “a hospital, for example, is likely to have extensive detail on operational matters, while a tightly focused charitable organization may not” (2007, p.19). It is also important to note that there may be some operational issues that are more appropriately responded to by codes or guidelines instead of policies. This point is of particular importance for JBCP given that the organization has to date had few written operational policies and the staff may be more receptive to guidelines, where appropriate, instead of policies. By definition (see page 13) policies are rules that employees are expected to follow; therefore, policies are often viewed by employees as restraining or “heavy handed”, especially when employees are not used to operating in an environment where policies exist. Guidelines, on the other hand, are often perceived less as rules and more as suggestions for a course of action.

Despite these cautions however, JBCP is in need of a wide range of policies as evidenced by the findings above. The primary objective of this project was to develop policies and procedures for JBCP and an explanation of which policies were developed along with recommendations for the most effective use of these policies is the topic of this section.

Developed Policies

JBCP’s Executive Director chose the policies for the researcher to develop based on a review of the findings tables as well as the Executive Director’s assessment of the organization’s greatest need at the time. The number of policies that were developed was based on the researcher’s available time and the complexity of developing the policy.

The policies that were developed are:

- Client Records Management
- Communicable Disease
- Responding to Medical Emergencies²
- Violence in the Workplace
- Working Alone

As the researcher developed the communicable disease policy and client records management policy issues surfaced that presented the need for related but separate policies. Consequently the following policies were also developed:

² This policy addresses three facets of health and safety: responding to critical incidents – on site, responding to critical incidents – off site, and incident reporting. The researcher titled the policy “Responding to Medical Emergencies” instead of “Responding to Critical Incidents” because upon close review of the researcher’s findings, the only type of critical incident mentioned was medical emergencies.

- Infection Control
- Privacy and Consent – Minors

In addition to these, a client code of conduct statement was created.

It is notable that many of the policies chosen by JBCP's Executive Director for the researcher to develop (copies of the policies and the code of conduct developed are in Appendices 8-15) relate to an issue that if left unguided by policy could present a significant risk to JBCP. Graff says, "there is no more pressing reason to develop [policies] than the role that policies play in an overall risk management system" (Graff in Connors, 2001, p.790) and "there is no better proof that an agency has acted prudently and responsibly in attempting to reduce the likelihood of injury or loss than a full set of current, comprehensive policies and procedures, clearly in place, and consistently communicated to all relevant parties" (Graff in Connors, 2001, p.791). This relates to the second listed and arguably most important reason JBCP needs policies and procedures: risk management for the organization, clients and staff.

Below are some recommendations relating to some of the policies that the researcher developed. If acted upon once the policies and procedures have been implemented, these recommendations will assist in making the policy and procedure documents dynamic as opposed to static.

Policy Specific Recommendations

Client Record Management

JBCP should consider establishing a privacy management program. Such a program would involve appointing a privacy officer. A benefit of implementing a privacy management program is to have a staff member focused on ensuring that JBCP remains in compliance with privacy laws. This has the direct benefit of assuring compliance but perhaps more importantly, a privacy management program will foster a culture of privacy, which will reinforce the privacy policies put in place: "when an organization takes the position that privacy is vital to its operations and "walks the talk" by implementing a robust privacy management program, enhanced trust that is essential for customers and clients to engage with that organization follows" (Getting Accountability Right with a Privacy Management Program document).

An additional benefit of having a privacy officer is to have someone who clients can go to with concerns about JBCP services or to make a complaint. Under the law, individuals have the right to challenge an organization's compliance with applicable privacy legislation and it would be valuable to require one staff member to be knowledgeable about the law and to be appointed to respond in the event that individuals wish to complain about the organization's personal information handling practices (Getting Accountability Right with a Privacy Management Program document).

Communicable Disease and Infection Control Policies

In addition to a privacy management program JBCP should consider establishing an infection control program. Elements of the program should include providing employees, students and volunteers with training in how to safeguard themselves from infections. This would include training in how to use the routine practices protection kit referenced in the Infection Control policy. The program should also include education for all stakeholders of JBCP to help them understand how they may be exposed to contagious diseases and how to deal with them.

Additionally, an exposure control plan should be developed, especially for the youth clinic. An exposure control plan is a document that, “describes how workers will be protected from infectious diseases in the workplace. It includes information on the nature of the hazards and the risks associated with exposure, as well as controls such as safe work procedures that the employer will use to protect workers” (Controlling Exposure: Protecting Workers from Infectious Disease document, p. 29-34). Suggestions for how to develop an exposure control plan are available in the preceding reference.

Responding to Medical Emergencies, Violence in the Workplace and Working Alone Policies

The most effective way of ensuring that employees know how to respond to medical emergencies and violence is to train them. The researcher suggests that JBCP staff have the following training annually:

- Responding to critical incidents
- Awareness of violence in the workplace
- Non-violent crisis intervention

Records of all such training should be maintained in employees’ personnel files. Employees should also keep the minimum standard of applicable first aid training required for their role and a review of their first aid status could be completed as part of the annual performance review.

In addition to training, JBCP should consider implementing a workplace violence prevention program where the Occupational Health and Safety committee assess each position for the risk of violence and makes recommendations for minimizing the risk(s) (Take Care - How to Develop and Implement a Workplace Violence Prevention Program document).

Client Code of Conduct Statement

Below are suggestions for the dissemination of the client code of conduct statement (reference: Collingwood Neighborhood House Code of Conduct document):

Active:

- Specific distribution to program and other staff
- Secondary distribution/elaboration by program staff to participants
- Distribution/explanation to all rental users

Passive:

- Preliminary information on rental application forms
- General availability at Reception
- Public display on bulletin boards and other suitable program locations

NEXT STEPS

To finish this paper, three suggestions are offered that may be useful to JBCP's Executive Director for where to go from here with respect to using the policies and procedures.

Consult Key Stakeholders

JBCP's Executive Director has already involved key staff by asking them to review and provide feedback on relevant drafts of the policies and procedures. However, she might expand on this process before taking the policies to be approved by the JBCP Board of Directors.

The HR Council for the Nonprofit Sector suggests a two-stage process first involving managers and then employees. Key questions include (HR Council website, HR Policies and Employment Legislation page):

For Managers:

- Do you have the skills and resources to be able to implement and monitor the policy?
- What is your understanding of different parties' responsibilities as outlined in the policy?
- Is the content and wording unbiased?
- What training or information would you require to be able to carry out your responsibilities as outlined in the policy? What about your staff?
- What issues or concerns could implementation of this policy potentially raise among employees and stakeholders?

For Employees:

- What is your understanding of your responsibilities and the organization's expectations as outlined in the policy?
- Is the content and wording unbiased?
- What training or information would you require to be able to carry out your responsibilities as outlined in the policy?
- What issues or concerns could implementation of this policy raise?

Consultation of this nature will ensure that the policies address as many issues as possible before they are approved and will assist with obtaining “buy-in” from the staff as well as their compliance when the policies are implemented.

Finally, in addition to consulting staff it is recommended that the Executive Director have a lawyer review the policies to ensure that they comply with the law.

Implement

Once the policies have been finalized and approved by the JBCP Board they can be implemented. Suggestions for implementation include communicating the policies to staff in person rather than by email. This might take the form of an information session for all staff or one-on-one with each individual’s Manager. This will allow employees to ask questions and also communicate to them that JBCP intends the policies and procedures to be “living” documents. According to Brinkerhoff, “[Policies] are worthless without training staff in their use” (2009, p.272). He suggests that organizations should, have an in-service with all staff when a policy is first in place and then with affected staff each year because, “only by repeated exposure to the policies will staff get it right; at the same time, ways to improve the policies will be found” (Brinkerhoff, 2009, p.272).

Another way of keeping the policies and procedures working and current is for JBCP to appoint a “go-to” person for questions (University of California Santa Cruz, Guide to Writing Policy and Procedure document). The reasons this is helpful are two-fold: it is impossible to address every aspect of policy and procedure in one document and at least one person on staff should have a thorough working knowledge of the policies and procedures. This person should be empowered to interpret the policies and procedures and to make decisions to help resolve problems for which there is no policy and procedure yet developed (University of California Santa Cruz, Guide to Writing Policy and Procedure document). In addition, this person should be responsible for taking note of the issues that arise that are not covered by existing policies and procedures or that require an existing policy to be updated. These notes should be kept and presented, at an agreed upon interval, to the Executive Director (if the designate is not the Executive Director who otherwise should file the notes for future reference).

One final note about implementation is that in order for the policies to be effective, they must be enforced. Brinkerhoff says that it is important when training staff on policies to express that failure to follow them has consequences (2009, p. 272). Enforcement, like consultation and training, is a way of ensuring the policies are working tools that are to be respected and taken seriously by employees.

Review, Update and Communicate Changes

The final suggestion for JBCP’s Executive Director is to review the policies periodically in order to make any necessary changes or updates and then to communicate changes to the staff. With respect to how often to review policies, the literature suggests that policies be reviewed and updated annually. The Executive Director might find it helpful to tie this

in with another annual process to make it habitual. With respect to communicating changes to staff, this could be done via email, although for reasons previously mentioned, it is preferable that it be done in person. Staff meetings would be an appropriate vehicle for communicating policy updates.

CONCLUSION

The James Bay Community Project has substantial operations and yet to date it has had very few written policies and procedures to guide its activities. The primary research of this project, which involved 11 staff interviews, identified many behaviours and practices of JBCP staff, both effective and ineffective. The modified balanced scorecard used by the researcher as a framework for the interviews contained five operational categories: financial management, human resources, administration, health and safety, and responding to stakeholders. Subsequent to reviewing the findings the researcher added two additional categories: volunteer management and responding to program and services clients. While more than 84 behaviours/practices spanning these seven categories were raised, 46 of these behaviours/practices constituted key findings and analysis suggests that JBCP needs policies to address each of these behaviours/practices. The primary result of this research therefore, is that JBCP needs several policies and procedures in order to standardize staff practices, which will result in more efficient and effective operations and manage risk to JBCP.

The deliverable of this project was a set of policies and procedures and the researcher developed the following policies for JBCP: Client Records Management; Communicable Disease; Infection Control; Privacy and Consent – Minors; Responding to Medical Emergencies; Violence in the Workplace; Working Alone; and a Client Code of Conduct Statement. While the researcher was only able to create seven policies and one code of conduct statement, it is the researcher's hope that this research will assist the JBCP in understanding many of its employees' current practices and that this report will prove useful to JBCP in creating additional policies and procedures in the future.

Finally, the creation of policies and procedures alone is not sufficient to most effectively impact an organization's operations. Policies and procedures must be assessed by key parties before being finally approved, they must be appropriately implemented, they should be reviewed and updated annually and changes must be communicated to staff. Furthermore, they should be supported by other processes and tools such as training, education, plans and strategies. In essence, policies and procedures must be working documents that become part of the day-to-day lives of the staff and integral to the organization's operations.

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APPENDICES

Appendix 1 – Interview Script

Organizational policies and procedures typically fall into 5 broad areas: **financial management, human resources management, administration, health and safety and responding to clients**. I would like to ask you questions about each of these areas to find out what policies and procedures exist and are working well, and conversely are lacking and you think are needed.

Financial Management

1. Please give me an example of a workplace situation that you experienced or observed, that relates to financial management, which illustrates that JBCP's procedures are effective and which we would want to continue to use.
2. Please give me an example of a workplace situation that you experienced or observed, that relates to financial management, which illustrates that JBCP's procedures are not as effective as they might have been and we would want to improve on.
3. Please give me an example of a situation that relates to financial management when you were unsure about what course of action to take and wished you had a policy and procedure to guide you?

Human Resource Management

1. Please give me an example of a workplace situation that you experienced or observed, that relates to human resources management, which illustrates that JBCP's procedures are effective and which we would want to continue to use.
2. Please give me an example of a workplace situation that you experienced or observed, that relates to human resources management, which illustrates that JBCP's procedures are not as effective as they might have been and we would want to improve on.
3. Please give me an example of a situation that relates to human resources management when you were unsure about what course of action to take and wished you had a policy and procedure to guide you?

Administration

1. Please give me an example of a workplace situation that you experienced or observed, that relates to administration, which illustrates that JBCP's procedures are effective and which we would want to continue to use.
2. Please give me an example of a workplace situation that you experienced or observed, that relates to administration, which illustrates that JBCP's procedures are not as effective as they might have been and we would want to improve on.
3. Please give me an example of a situation that relates to administration when you were unsure about what course of action to take and wished you had a policy and procedure to guide you?

Health and Safety

1. Please give me an example of a workplace situation that you experienced or observed, that relates to health and safety, which illustrates that JBCP's procedures are effective and which we would want to continue to use.
2. Please give me an example of a workplace situation that you experienced or observed, that relates to health and safety, which illustrates that JBCP's procedures are not as effective as they might have been and we would want to improve on.
3. Please give me an example of a situation that relates to health and safety when you were unsure about what course of action to take and wished you had a policy and procedure to guide you?

Responding to Clients

Please note that by "clients" I mean internal or external clients/stakeholders (an example of an internal client is the primary healthcare centre. An example of an external client is suppliers). We will not discuss clients such as program participants and users of JBCP services, because policies specific to this group are being developed by other students. So, thinking about internal or external stakeholders:

4. Please give me an example of a workplace situation that you experienced or observed, that relates to working with stakeholders, which illustrates that JBCP's procedures are effective and which we would want to continue to use.

5. Please give me an example of a workplace situation that you experienced or observed, that relates to working with stakeholders, which illustrates that JBCP's procedures are not as effective as they might have been and we would want to improve on.

6. Please give me an example of a situation that relates to working with stakeholders when you were unsure about what course of action to take and wished you had a policy and procedure to guide you?

Finally, are there any other situations that are examples of good policy/procedure or that are lacking these, or are there any specific policies you can think of that we have not talked about already?

Thank you very much for your time and for sharing your insights with me.

Appendix 2 – Email Script – Invitation to Participate

Dear <JBCP Staff Member Name>:

Re: Participation in Jennifer Foster's Masters Research Project

My name is Jennifer Foster and I am currently in the process of completing my Masters in Public Administration from the University of Victoria. In fulfillment of my degree requirements, I am enrolled in ADMN 598, which is designed to allow students to complete a research project in consultation with a client. At the request of Kaye Kennish, I will develop a policy and procedures manual for the James Bay Community Project (JBCP).

Participation in my research project is important to my success and to the success of the manual. As a result, **I am writing to request a meeting with you as a JBCP staff member. The purpose of the interview will be to discuss workplace situations/scenarios when a policy and associated procedures would have been useful to you.** I will ask about situations/scenarios in which you or a colleague were involved. I am not interested in identities and am only interested in the situations/scenarios and how they illustrate practices. In order to protect anonymity I will welcome you to describe situations using terms like "Manager A" or "Person B" or describe situations/scenarios by saying "I witnessed someone doing X".

I am also interested in your general ideas about what policies and procedures are necessary, and in examples of workplace situations in which a procedure (whether formal or not) works well.

Please be aware that your participation is entirely voluntary. This interview would be in person at the JBCP (unless you would prefer an alternate location, which we can arrange) and will take approximately one to two hours.

Please note that all information you provide me with will be treated in a confidential manner and your individual responses will not be identified within the final report. Specific examples will be cited anonymously and data from all staff participating will be presented in aggregate form.

Your participation in this study is completely voluntary and you can decide to withdraw from participating at any time. Should you decide to do this; any data collected will be destroyed and not included in the analysis of my report.

I am very excited to tackle this project and I thank you in advance for your consideration and I look forward to hearing back from you.

Sincerely,
Jennifer Foster

Appendix 3 – Email Script – Follow Up Email to Secure Interviews

Dear <JBCP Staff Member Name>:

Re: Participation in Jennifer Foster's Masters Research Project

Thank you for agreeing to participate in my research project. I suggest we schedule an in-person meeting for <date> at <time> at the JBCP. If you are not available on this date and time, I would like to meet with you over the phone. As a reminder, the interview will take approximately one to two hours. The purpose of the interview will be to discuss workplace situations/scenarios when a policy and associated procedures would have been useful to you. I am also interested in your general ideas about what policies and procedures are necessary, and in examples of workplace situations in which a procedure (whether formal or not) works well.

As a reminder, please note that all information you provide me with will be treated in a confidential manner and your individual responses will not be identified within the final report. Specific examples will be cited anonymously and data from all staff participating will be presented in aggregate form.

Your participation in this study is completely voluntary and you can decide to withdraw from participating at any time. Should you decide to do this; any data collected will be destroyed and not included in the analysis of my report.

I have included with this email a copy of the free and informed consent form for participation in my research project. If we meet in person, I will collect the signed copies prior to the interview commencing. If we are not able to meet in person and speak over the telephone, I will mail this form to you, along with a self-addressed, stamped envelope and I request that you mail the form back to me. Again, if you have any questions, please feel free to contact me.

I am looking forward to conducting the interviews! One week before the interview I will email you a list of questions that we will discuss. This will provide you with an opportunity to come to the interview prepared and to feel at ease with the types of questions that we will talk about. If you have any concerns or issues requiring clarification regarding any of the specific questions, please feel free to contact me prior to the interview.

Thank you again for agreeing to participate and I look forward to meeting you/speaking with you soon.

Sincerely,

Jennifer Foster

Appendix 4 – Email Script – Email with Interview Questions

Dear <JBCP Staff Member Name>:

Re: Participation in Jennifer Foster’s Masters Research Project

This email is to remind you that we have an interview scheduled for <date>, <time>, <place>. I have attached a list of questions that we will discuss. You do not need to answer all of these questions and this list is provided to give you an opportunity to come to the interview prepared and to feel at ease with the types of questions that we will talk about. As a reminder, I will ask about situations/scenarios in which you or a colleague were involved. I am not interested in identities and am only interested in the situations/scenarios and how they illustrate practices. In order to protect anonymity I will welcome you to describe situations using terms like “Manager A” or “person B”, or describe situations/scenarios by saying “I witnessed someone doing X”.

If you have any concerns or issues requiring clarification regarding any of the specific questions, please feel free to contact me over the next week.

Thank you and I genuinely look forward to meeting you/speaking with you!

Sincerely,

Jennifer Foster

Appendix 5 – Participant Consent Form

Developing a Policy and Procedures Manual for the James Bay Community Project

You are invited to participate in a study entitled “Developing a Policy and Procedures Manual for the James Bay Community Project” that is being conducted by Jennifer Foster.

Jennifer Foster is a graduate student in the Department of Public Administration at the University of Victoria and you may contact her if you have further questions, by email at jc.foster32@gmail.com.

As a graduate student, I am required to conduct research as part of the requirements for a degree in the Masters of Public Administration Program. My research is being conducted under the supervision of Dr. J. Barton (Bart) Cunningham. You can contact Dr. Cunningham at (250) 721-8849.

Purpose and Objectives: The purpose of this research project is to define which policies and procedures are important to the James Bay Community Project (JBCP). My objective is to create a list of policies and procedures, from the research results, that are needed by the Society.

Importance of Research: The development of policies and procedures is important to the JBCP and needed by the Executive Director for the following primary reasons:

1. Risk management for the organization, clients and staff.
2. Structure and parameters for the work of management, staff and volunteers.
3. Easier future transitions in management.
4. Demonstration of professionalism.

Participants Selection: You are being asked to participate in this study because you are employed by the JBCP and have important insights into what current procedures work well and which ones do not, and what policies are needed.

What is Involved: If you agree to voluntarily participate in this research, your participation will include involvement in an interview process. This interview will take between one and two hours. Interviews will be conducted during your working hours and either in-person or by phone. The content of the interview will be tape recorded so that the interviewer is sure not to lose any relevant content which she might solely relying on handwritten notes.

Inconvenience: At this time, no inconveniences that will be caused to you have been identified, other than a loss of your time.

Risks: There are no known or anticipated risks to you by participating in this research.

Benefits: You will be provided with a copy of the final research paper.

Compensation: There will be no compensation provided for participating in this research project.

Voluntary Participation: Your participation in this research must be completely voluntary. If you do decide to participate, you may withdraw at any time without any consequence or any explanation. If you do withdraw from the study your data will be destroyed and not included in the analysis.

Anonymity: In terms of protecting your anonymity, references to individuals will not be made in the final research paper.

Limits to Anonymity: There is one known limit to your anonymity in this process. It is that the size of the interview sample is very small (approximately 8 people). Due to your unique position as a staff member it is possible that if a specific answer is provided, readers of the report may be able to guess that you make the comment or suggested a particular policy/procedure.

Confidentiality: Hard copies of interview responses will be kept in a filing cabinet at the researcher's home and electronic information will be password protected for access by the researcher only.

Dissemination of Results: It is anticipated that the results of this study in the form of the policy and procedures manual, will be presented to the JBCP staff at a staff meeting.

Ongoing Consent: Follow up to the initial interview sessions may be requested from you for purposes of clarification. Your participation in any follow up requests will be voluntary.

Disposal of Data: Hard copy data from this study will be disposed of through shredding and electronic data will be disposed by the removal of electronic files after the research paper has been successfully accepted by the University of Victoria. The tape recorded interviews will be destroyed.

Contacts: The researcher for this project, Jennifer Foster, can be contacted at 604-780-6192. Furthermore, the academic supervisor, previously identified in this form, may also be contacted as required. Please refer to the beginning of this consent form for contact details.

In addition, you may verify the ethical approval of this study, or raise any concerns you might have, by contacting the Human Research Ethics Office at the University of Victoria (250-472-4545 or ethics@uvic.ca).

Your signature below indicates that you understand the above conditions of participation in this study and that you have had the opportunity to have your questions answered by the researcher.

Name of Participant

Signature

Date

A copy of this consent will be left with you, and a copy will be taken by the researcher.

Appendix 6 – Coding Tables

FINANCIAL MANAGEMENT	Frequency	HR MANAGEMENT	Frequency
Petty cash	4	Performance Appraisal	5
On site fund management	3	Job descriptions	4
Off-site fund management	2	Orientation	4
Receipts	2	Professional development and training	4
Budgeting	2	Employee code of conduct	4
Income tax return program	2	Personnel records	2
Fundraising	2	Hiring	2
Donations	2	Reporting	2
Mortgage	1	Discipline	1
Compensation	1	N = 10	
N = 10			
		HEALTH AND SAFETY	Frequency
ADMINISTRATION	Frequency	Food safety	4
Client Records Management	8	Responding to critical incidents - on site	4
Expense approval and reimbursement	4	Responding to critical incidents - off site	3
Booking JBCP facilities	3	Incident reporting	3
Grants	3	Violence in the workplace	3
Partnerships	2	First aid	3
Facility leases and rental	2	Health and safety equipment	3
Client use of JBCP facilities	2	Communicable disease	3
Building security	2	Client code of conduct	2
Reception	2	Working alone	2
Cheque requisitions	2	Safety in the community	2
Mileage	2	Pets	2
Voicemail and out of office	2	Facility cleanliness and safety	2
Email	1	Emergency planning	2
Booking JCBP equipment	1	Hazardous materials	1
Staff and volunteer use of JBCP thrift store	1	Snow removal	1
Speaking to the media	1	Inspections	1
N = 10		Staff personal health and safety	1
		Scents	1
		Smoking	1
		N = 11*	
		RESPONDING TO CLIENTS	Frequency
		Volunteers from partner organizations	2
		Contractors	1
		N = 10	

**N=11 for this section because there was an additional interview on this topic with the Chair of JBCP's health and safety committee*

VOLUNTEER MANAGEMENT	Frequency
Volunteer drivers	3
Dismissal	3
Orientation	2
Evaluation/fitness	2
Screening	2
Job descriptions	2
Code of conduct	2
Income tax return program volunteer requirements	2
Criminal record checks	1
Working alone	1
Confidentiality	1
Privacy of personal information	1
Responding to critical incidents	1
Performance management and recognition	1
Interacting with Children	1
Related to the Thrift Store	
Handling money	1
Managing donations	1
Giving away clothing	1
Procedures in event of a robbery	1
Dealing with contaminated clothing	1
Dealing with an irate customer	1
How to respond to clients who bargain	1
N = 10	

RESPONDING TO PROGRAM AND SERVICES

CLIENTS	Frequency
Privacy of personal information	2
Complaints	1
Rights and Responsibilities	1
Responding to a suicidal client	1
Removal of services	1
Gifts from clients	1
N = 10	

Note: The frequencies in these tables show how many respondents raised the practice, not the number of times it was raised in aggregate; i.e. some staff may have raised the issue a few times in one interview but this was counted once for the frequency table.

Appendix 7 – Policy Template, from the HR Council for the Nonprofit Sector

Policy:	Title of the policy
Effective Date:	Date the policy came into effect
Date Last Reviewed:	Most recent review date
Scheduled Review Date:	Next scheduled review date
Supersedes:	All previous Policies and/or Statements
Approved by:	Indicate who approved the policy and the date of approval (e.g., the board, the human resources committee, the executive director)

PURPOSE

This section sets out what the policy intends to accomplish or the goal of the policy. For example, a health and safety policy may have a purpose of ensuring a safe and healthy workplace for all workers in compliance with the relevant health and safety legislation.

SCOPE

The scope outlines to whom the policy applies. It may apply to all staff and workers, or differentiate based on level, location, employment status, or department. If the policy also applies to volunteers, contract workers and consultants doing work on behalf of the company be sure to identify this. The scope should also identify any exceptions to the policy.

POLICY STATEMENT

The statement is the actual rule or standard the policy needs to communicate.

DEFINITIONS

Clearly define any terms used within the policy. If the terms are included in legislation that underpins the policy be sure to use the definitions from the legislation (e.g., disability, prohibited grounds, discrimination, harassment, workplace violence).

RESPONSIBILITIES

This section outlines the responsibilities of the board, management and staff in regards to the policy as well as who is responsible for developing, maintaining, monitoring and implementing the policy.

If there are consequences for not complying with the policy (e.g., disciplinary), be sure to mention this. For example, “Failure to comply with this policy could result in disciplinary measure up to and including termination of your employment.”

REFERENCES

Reference any other policies, documents or legislation that support the interpretation of this policy.

QUESTIONS

Identify the person or position employees can approach if they have questions about the policy.

PROCEDURE (if applicable):

The procedure gives step-by-step instructions for how to carry out or implement the policy. It can be a separate document or may accompany a policy. To allow for exceptions, be sure to include a statement that the procedure is intended as a guide only.

Appendix 8 – Client Records Management Policy

Policy Name:	Client Records Management
Policy Area:	Administration
Effective Date:	
Date Last Reviewed:	
Scheduled Review Date:	
Approved by and Date:	

PURPOSE

This policy aims to meet the requirements of good records management. The purpose of this policy therefore, is to set standards and procedure in relation to the collection, access, storage, use, security, backup, retention, and disposal of JBCP client records, both paper and electronic.

JBCP maintains client records for the purposes of planning service to clients, documenting service, and in the case of contracted services, reporting client progress in accordance with contractual and legal obligations.

The underlying principle of this policy is that JBCP takes the management of client records seriously and holds all JBCP employees individually and collectively responsible for ensuring that confidential and/or personal information is managed according to this policy.

SCOPE

This policy applies to all staff and anyone working with JBCP (such as contract workers, consultants and students).

DEFINITIONS

A **client file** is the written account of JBCP’s work with the individual or family.

A **client record** is any written information about a client. This includes client files and registration lists for programs, as examples.

A **minor** is anyone under the age of 19

Active and closed files

Client files are considered active when an individual is receiving a service from JBCP and closed when all services have ceased. Files may be reopened.

Portable storage devices are small electronic devices that provide file storage. They include USB devices, memory cards, removable or external hard drives and CDs/DVDs, Portable Digital Assistants (PDAs), BlackBerrys, iPods and other media players that have the ability to store files.

A **privacy breach** occurs when there is the potential for or the event of unauthorized access to, or collection, use, disclosure or disposal of personal information.

POLICY STATEMENTS AND PROCEDURES

Creation of Client Files

A file is created any time an employee has written information about a client, with the exception of when staff have contact information only (for example registration lists for programs).

All file contents must be securely fastened to a covering file folder, in such a way that they cannot fall out of or become separated from the file.

Staff will not keep unofficial, or "working files", for any client and all notes about a client, including those written informally or on scrap paper, are to be considered official and to be secured in the client's file.

Collection of Personal Information

Personal information is collected only as necessary to provide services to the client and only with the client's consent. Clients will be advised as to the reasons for collecting the information.

Staff will make all reasonable efforts to ensure that personal information about clients is as accurate, complete and current as required for the purposes for which it was collected.

Staff will correct personal information within 10 days of being informed that the information they have is incorrect.

Access

Employee Access

Client files are available to the employees working with them, their immediate supervisors, and the client only. Access to client files by anyone other than these people is limited to those authorized with the client's written permission, and as appropriate the client's legal guardian.

Client information is shared by JBCP staff only for the purposes of supervision, case management, and consultation. An employee may also discuss a case with his/her colleagues in a program/service team, for the purposes of consultation and planning. The employee should omit the client's name in such discussions.

Client Access

JBCP clients have the right to access their file. The employee who receives the request should clarify with the client the nature of their request and document this in the client's file. This should be done within 30 days of receipt of the request. The employee should then consult with their manager in order to make a decision regarding the nature of the request. If the request is routine, the employee should release and review the information with the client on JBCP premises. A photocopy of the documents, stamped as a copy and signed for by the client, can be provided upon request by the client.

There are exceptional circumstances under which information may not be released. These include requests for:

- a) Information that could invade the personal privacy of a third party
- b) Information that could be harmful to business interests of a third party
- c) Information that could reasonably be expected to threaten anyone else's safety or mental or physical health
- d) Information that could reasonably be expected to cause immediate and grave harm to the applicant's safety or mental or physical health
- e) Ministry produced information (e.g. Ministry referral forms) may be exempt according to Ministry policy

When the request involves any of this kind of information the employee and their manager must consult with the executive director, to make a decision about whether or not to release the information. If a request is refused, reasons for the refusal must be written down and given to the client, as well as entered into the client file.

Requests Initiated by Parents/Guardians

A parent/guardian will not be given access to their minor's file unless, either:

- a) The minor has provided written authorization giving JBCP staff permission to release information to the parent/guardian; or
- b) The minor has been assessed as lacking the capacity (see JBCP Policy on Privacy and Consent – Children and Youth for guidelines concerning assessment of capacity) that is required to make an informed decision regarding the release of such information, and this assessment has been documented in the minor's file.

Storage and Use

In order to avoid potential problems such as misuse and loss, client records must not be left in public areas or in areas where the public can access them. In addition, client records should not be left in plain view or unattended in an insecure location such as an unlocked office or meeting room. Staff must store all client records in locked file cabinets located in the Society's offices when not in use.

Staff should avoid taking client information out of the office unless absolutely necessary. If necessary, staff must take the minimum amount of information required. Any portable storage device that is taken out of the office must be password protected.

If an employee needs to take a file or portable storage device out of the office, they should get permission from their supervisor and before they leave they should write down what information they are removing from the office. Whenever possible outside of the office they must keep the file/portable storage device with them at all times, including during meals or breaks. If the file/portable storage device must be left unattended it should be properly safeguarded. Personal information should only be stored in a car if there is no other option. If this is the case, it should be locked in the trunk of the car, for as short a time as possible, and the car should be parked in a secure location.

If the employee is not returning to the JBCP building before the end of the work day, the file/portable storage device must be taken into the employee's home overnight and kept in a secure, locked location inaccessible to friends and family members. Upon return to the office, the file/portable storage device should be stored securely, as soon as possible.

Privacy Breaches

If client personal information is stolen or lost, an employee must tell their supervisor and the Executive Director. The Executive Director will assess whether a police report should be filed and will tell the Office of the Information and Privacy Commissioner for BC.

Backup

JBCP backs up its database, IVY, every two days. The computer mainframe is backed up daily. In order to be able to recover client data in the event of loss or damage to the JBCP electronic system.

Responsibility for backup is given to an employee who backs IVY up to a portable storage device, which is password protected. The device is kept at JBCP during the day and taken home by the employee in the evening in order to have a copy of the database off site, in the event of a fire or other disaster that could destroy the onsite information. For storage of the device, both during the day and at home, the appointed employee must follow the same security procedures as pertain to files/portable storages devices (see storage and use section above).

Retention

Counselling Files

Client records, where service is expected to be ongoing and includes goal setting, assessments and reporting, and where the file is not a contracted services file will be kept for 10 years from the date that they are closed. When an employee ceases work with a client they must note the date of closure in the file and notify their supervisor who will archive the file.

JBCP will keep archived files on site for a period of 7 years, after which the file will be converted to electronic format. Once the file has been converted to electronic format the original file will be sent to a shredding company.

Electronic files are stored in an archived record database for the remainder of the 10 year retention period. The archived record database is located on the Society's computer network and there are two backup copies, one of which is located offsite.

Community Services Files

Client records, where services are one time only and/or do not involve assessments, goal setting, reporting and similar practices, will be kept in a locked cabinet at JBCP for two years after service to the client has ended.

Reopened files

If a file is reopened, the retention period commences from the last date of closure.

Disposal

Once records have been retained for their full retention period (see Retention section above) they will be destroyed. Hard copy files will be sent to a commercial, bonded document destruction company for shredding and electronic files will be rendered unreadable. This process will be managed by the Executive Director.

When portable storage devices are no longer required employees must take care to clear them of client information and they must be given to the Finance Manager who will render them unreadable before they are disposed of or reused.

Contracted Services Files

Where JBCP services are provided under contract and where records management guidelines specified in the contract differ from this policy, the contract shall apply, with the exception of specified retention periods - the longer of the retention period specified in the contract or in this policy shall apply.

RELATED DOCUMENTS

The documents and tools listed below support the application of this policy:

1. JBCP Privacy Policy – Clients
2. JBCP Privacy and Consent – Children and Youth Policy

EXTERNAL RESOURCES

Office of the Information and Privacy Commissioner of BC <http://www.oipc.bc.ca/>

Office of the Privacy Commissioner of Canada www.privcom.gc.ca

Personal Information Protection Act:

http://www.bclaws.ca/EPLibraries/bclaws_new/document/ID/freeside/00_03063_01

QUESTIONS

Employees should direct any questions about this policy to the Executive Director.

Disclaimer

In the event that there is a conflict between the content of this policy and any federal, provincial or municipal act, regulation or by-law the said Act, Regulation or By-law shall have precedence over this policy. James Bay Community Project will endeavor to modify this policy so that it is in compliance with the said Act, Regulation or by-law, no later than 6 months, after becoming aware of the discrepancy.

Appendix 9 – Communicable Disease Policy

Policy Name:	Communicable Illnesses and Diseases
Policy Area:	Health and Safety
Effective Date:	
Date Last Reviewed:	
Scheduled Review Date:	
Approved by and Date:	

PURPOSE

The purpose of this policy is to provide guidance for how to respond to communicable illnesses and diseases in order to maintain the health and wellbeing of all staff and users of JBCP.

SCOPE

This policy applies to all staff and volunteers and anyone working with JBCP (such as contract workers, consultants and students), as well as users of JBCP services.

DEFINITIONS

For the purposes of this policy **communicable diseases** are conditions that are caused by and transmitted through infection or infestation and that require special precautions to minimize the risk of spreading. Communicable diseases include but are not limited to: Chicken pox, Lice, Scabies, Measles, Mumps, Pink Eye, Gastroenteritis, Hepatitis, Tuberculosis, Sexually Transmitted Diseases (STD's), and HIV.

For the purposes of this policy **communicable illnesses** are relatively minor illnesses such as colds and flu.

For the purposes of this policy a **guardian** is anyone attending JBCP programs with a child.

POLICY STATEMENTS AND PROCEDURES

Prevention

Where a vaccination for a communicable illness or disease is or may become available, information about the illness or disease will be given to staff and the vaccination will be offered to all JBCP staff who may be at risk of contracting the illness/disease, at no cost to the employee.

Responding to a Communicable Illness or Disease

A client will not be refused service because of a communicable disease; however, service may be withheld contingent on a full medical assessment of their current health. The policy and

procedure below has been established to isolate infectious agents and to interrupt their transmission, not to isolate (the) infected individual(s).

Children with Communicable **Illnesses**

Procedures for Parent(s)/Guardian(s)

If a child is sick with a **cold or flu**, or otherwise too ill to participate in the program, they should be kept at home.

A child can return to JBCP 24 hours after **cold or flu** symptoms (which most commonly include runny nose and eyes; sore throat or trouble swallowing; difficulty breathing, wheezing or persistent cough; lack of energy; nausea, vomiting, and/or diarrhea) have subsided without the aid of medication.

Procedure for JBCP Staff

If a JBCP staff member identifies that a child appears to have a **cold/flu** he/she will use discretion in deciding whether to speak with the child's parent(s)/guardian(s) regarding the child's illness and whether to politely ask them to leave the program.

Children with Communicable **Diseases**

The following symptoms are often associated with a communicable **disease**. Children with the following symptoms must not attend JBCP programs in order to protect other children from communicable diseases:

- Fever over 38.3⁰ C or 100⁰ F
- Undiagnosed rash or other skin conditions including significant itching of the body or scalp
- Infected eyes
- Headache
- Abdominal cramps
- Any complaints of unexplained or undiagnosed pain

Note: This is not an exhaustive list. For a comprehensive list please see the document "A Quick Guide to Common Childhood Diseases"
(<http://www.health.gov.bc.ca/library/publications/year/2001/PHN144.pdf>)

Procedures for Parent(s)/Guardian(s)

Children with communicable diseases can return to JBCP programs on a date specified by a Doctor.

Procedure for JBCP Staff

If a JBCP staff member notices a child with one of the above-mentioned symptoms or suspects that a client might have a communicable disease, he/she will:

- Speak with the parent(s)/guardian(s) to indicate his/her observations and concerns and use discretion in deciding whether to politely excuse the client/participant from the session/group.
- Refer the client to a Doctor for evaluation and request that they share the results of the Doctor's evaluation with you.
- If the Doctor assesses that the child has a communicable disease, politely tell the client that they must not attend JBCP programs until such time as the Doctor has said that the child is no longer infectious. Let them know that you require either a written note from the Doctor to this effect (which can either be faxed to your attention by the Doctor's office or given to you in person), or alternatively, to speak with a Doctor to obtain this information, before their child returns to JBCP programs.
- If the client chooses not to take their child to a Doctor or to share the results of the Doctor's evaluation with staff, they must be told that they can only return to JBCP programs when their child is well again.

Client Self-Disclosure

A client's disclosure of a communicable disease will be treated with dignity and the privacy of clients will be maintained in accordance with the Personal Information Protection Act (PIPA).

If a client reveals that they or their child has a communicable disease JBCP staff will:

1. Thank them for sharing the information and let them know that the information will be treated with confidence and shared only with JBCP staff who need to know, and anonymously with JBCP clients/participants, (as necessary depending on the level of risk) to prevent the spread of infection.
2. Report the information to your Manager.
3. Document the information on an Incident Report Form within 24 hours and give it to your Manager.
4. File the incident report form in the client's file, or if the individual is not a client, in the incident report binder.

Managers will:

1. Inform the Executive Director
2. Consult your staff to determine if any other individuals have regular interactions/contact with the infected individual.
3. Telephone those individuals, where possible, to tell them of the infestation and request that they be extra aware and on the lookout for symptoms over the next several days.
4. Send and/or post a memo around JBCP, alerting all JBCP clients and participants, anonymously, of the diagnosed case.

The Executive Director will:

1. Send an internal E-mail and/or memo to all JBCP employees and contractors (including janitorial staff) informing them, anonymously, of the diagnosed case.

Staff Exposure

Staff concerned about exposure to a client's communicable disease will consult with a Doctor. For more information see: JBCP Policy: Infection Control, *If An Employee Becomes Infected* section.

Discrimination Against Persons With Communicable Diseases

Discriminatory acts against employees/clients/participants with communicable diseases will not be tolerated and staff who engage in such acts may be subject to disciplinary action. Clients/participants who engage in such acts may be denied service.

RELATED DOCUMENTS

The documents and tools listed below support the application of this policy:

1. JBCP Critical Incident Report form
2. Personal Information and Protection of Privacy Act:
http://www.bclaws.ca/EPLibraries/bclaws_new/document/ID/freeside/00_03063_01#section2

EXTERNAL RESOURCES

A Quick Guide to Common Childhood Diseases
<http://www.health.gov.bc.ca/library/publications/year/2001/PHN144.pdf>

QUESTIONS

Employees should direct any questions about this policy to the Executive Director.

Disclaimer

In the event that there is a conflict between the content of this policy and any federal, provincial or municipal act, regulation or by-law the said Act, Regulation or By-law shall have precedence over this policy. James Bay Community Project will endeavor to modify this policy so that it is in compliance with the said Act, Regulation or by-law, no later than 6 months, after becoming aware of the discrepancy.

Appendix 10 - Responding to Medical Emergencies Policy

Policy Name:	Responding to Medical Emergencies
Policy Area:	Health and Safety
Effective Date:	
Date Last Reviewed:	
Scheduled Review Date:	
Approved by and Date:	

PURPOSE

The purpose of this policy is to provide guidance for how to prevent, respond to, report and investigate medical emergencies.

SCOPE

This policy applies to all staff and volunteers and anyone working with JBCP (such as contract workers, consultants and students).

DEFINITIONS

An **adult** is anyone over and including the age of 19

Off site incidents refers to incidents at non-JBCP premises. Examples include outreach work and the location of any activity that is organized and / or attended by JBCP staff or volunteers.

A **minor** is anyone under the age of 19

Serious accidents or injuries include any injury that requires medical treatment, loss of consciousness or loss of life.

Workplace

For the purposes of this policy, workplace includes any location in which employees are engaged in JBCP activities. This includes, but is not limited to, JBCP buildings, JBCP parking lots, the site of employee/volunteer organized events, clients' homes, and during business related travel.

POLICY STATEMENTS AND PROCEDURES

JBCP employees will do their best to prevent medical emergencies. When a medical emergency occurs, either on or off site, staff will respond and all medical emergencies will be documented on a critical incident report and investigated by the JBCP health and safety committee.

PROCEDURES

Prevention

1. Employees will use reasonable judgment and prudent decision-making to prevent medical emergencies from occurring.
2. Employees will assess the risks associated with events and activities, prior to their taking place.

Responding to a Medical Emergency

In the event of a medical emergency the following procedure should be followed:

1. The first staff member on the scene should assess the situation to discern whether the problem is minor or major. If the problem is major the staff member should call for co-worker assistance. Once three staff members are on the scene other staff should remove themselves.
2. The first staff member on the scene or the staff member most experienced should administer first aid. If there is no staff member on the scene trained in first aid they must request the assistance of any other available staff member to contact a staff person with first aid training.
3. One staff member should discreetly direct clients/volunteers/visitors away from the area. The remaining staff member should assist the attending staff member, as necessary.

Where the illness/injury appears to be minor:

1. Use supplies from the medical kit to apply first aid;
2. Transport the individual to further medical care if necessary;
3. If the injured/ill person is a minor, contact the parent/guardian, to advise them of what has occurred;
4. Record the incident in the client file if the injured/ill person is a client.

Where the illness/injury appears to be major:

1. One staff member should apply first aid;

NOTE: It is the right of an adult to refuse first aid/treatment if they are making a rational decision. If this were to happen, the attending staff member should document on the critical incident form his/her attempts to offer first aid and the client's responses.

2. The second staff member should call 911 to request assistance and then wait outside the premises to direct the emergency personnel to the individual requiring assistance;
3. If the incident has occurred on site and the injured person is a client, the third staff

member should check the individual's client file to see if any medical information is listed that might be of assistance;

4. If the injured/ill person is a minor, contact the parent/guardian, to advise them of what has occurred;
5. If it is necessary to transport the injured/ill person by ambulance and they are a minor and the parent is not present, the staff person who was administering first aid will go with the minor to the medical treatment site;
6. Where the injured/ill person is a staff member, their Manager or the next most senior person at the scene should contact the emergency contact listed in the employee's file. (Note: Transportation to the nearest physician or hospital for employees requiring medical care as a result of an on-the-job accident shall be at the expense of JBCP. In addition, an employee who is injured on the job during working hours and is required to leave for treatment, or is sent home for such injury, shall receive regular pay for that day without deduction from sick leave.)
7. If the incident requires investigation, where possible the scene of the accident should be left untouched (except to prevent further injuries) until permission to clear the scene has been granted by a WorkSafeBC Officer.
8. As soon as possible employees should report the situation to their supervisor or if he/she is not available, any Manager. The Executive Director must be immediately notified of all major medical emergencies.

After An Incident

Any employee who has a medical emergency and any staff member who administers first aid must fill out a critical incident report.

Employees are to:

1. Write down everything which they had taken mental note of during the incident the same day on which the incident occurred
2. Complete a critical incident report form within 24 hours
3. If an employee will be off work for longer than the day of the injury, as a result of the injury, the employee must complete a WorkSafeBC form 6A "Worker's report of injury or occupational disease to employer", and submit it to WorkSafeBC.

Managers are to:

1. Conduct a debrief with their staff member immediately after the incident
2. Encourage staff who are affected by the incident to see a physician
3. Ensure that employees receive support necessary and assess the need for critical incident stress debriefing, encouraging staff to make use of critical incident stress debriefing if needed. If critical incident debriefing is required, this must be reported to the Executive Director as soon as possible. Note: JBCP staff do not lose pay to

- attend debriefing, counselling, medical or other treatment as a result of a medical emergency.
4. Ensure that a critical incident report and WorkSafeBC forms are completed as necessary and given to the Executive Director.
 5. Inform the chair of the Health and Safety Committee within 3 days for minor incidents and the same day for major incidents.

The Executive Director will:

1. Review all incident reports and related forms
2. Complete a WorkSafeBC form 7 “Employer’s Report of Injury or Occupational Disease”, as necessary
3. Fax WorkSafeBC forms to the appropriate office within 3 working days
4. Immediately notify WorkSafeBC of the occurrence of any accident that resulted in serious injury to or the death of a worker
5. Brief the Board of Directors on all serious occupational health and safety investigations.

Documentation

Distribution of the critical incident report and any other incident related forms is as follows:

- One copy in the client or employee’s file or if the injured person is neither a client nor employee, the copy should go in the incident report binder.
- One copy to the Chair of the health and safety committee

Investigation and Remedial Action

- All critical incident reports are reviewed by the Executive Director and the Health and Safety Committee

Role of the Health and Safety Committee

1. Medical emergencies will be investigated by 2 members of the Health and Safety Committee if the emergency:
 - a) Requires a staff person, volunteer or client to seek medical attention
 - b) Requires notification of WorkSafeBC
 - c) Does not involve an injury but has a potential for causing a serious injury including serious “near misses”.
2. The investigation will start as soon as possible and within two working days.
3. The investigating members will:
 - a) Read all reports related to the incident.
 - b) Liaise with WorkSafeBC, as appropriate.
 - c) Determine the cause or causes of the accident, identify unsafe conditions, acts or procedures, which contributed in any manner to the accident and develop recommended corrective action to reduce future risk of workplace incidents.
 - d) Review any corrective action put into place at three-month intervals for one year following its implementation, to determine its effectiveness.

- e) Participate in the annual review and evaluation of this policy.

The Chair of the Health and Safety Committee is responsible for:

1. Checking the first aid kit for completeness of supplies after an incident.
2. Conducting an annual review of critical incident reports looking for trends. This investigation should look at:
 - a) Causes
 - b) Corrective actions
 - c) Necessary education and training of staff
 - d) Prevention of recurrence
 - e) Internal and external reporting requirements
3. Presenting the results of the annual investigation to the Executive Director.

RELATED DOCUMENTS

The documents and tools listed below support the application of this policy:

1. JBCP Critical Incident Report form
2. Worker's report of injury or occupational disease to employer
<http://www.worksafebc.com/forms/assets/PDF/6a.pdf>
3. Employers report of injury or occupational disease
<http://www.worksafebc.com/forms/assets/PDF/7.pdf>

EXTERNAL RESOURCES

1. WorkSafeBC Safety at Work Section: <http://www2.worksafebc.com/Safety/Home.asp>

QUESTIONS

Employees should direct any questions about this policy to the Executive Director.

Disclaimer

In the event that there is a conflict between the content of this policy and any federal, provincial or municipal act, regulation or by-law the said Act, Regulation or By-law shall have precedence over this policy. James Bay Community Project will endeavor to modify this policy so that it is in compliance with the said Act, Regulation or by-law, no later than 6 months, after becoming aware of the discrepancy.

Appendix 11 - Violence in the Workplace Policy

Policy Name:	Violence in the Workplace
Policy Area:	Health and Safety
Effective Date:	
Date Last Reviewed:	
Scheduled Review Date:	
Approved by and Date:	

PURPOSE

This policy aims to ensure a safe environment for staff, volunteers and clients of JBCP. The purpose of this policy is to provide guidance for how to identify and respond to violence directed towards JBCP staff, clients and property.

SCOPE

This policy applies to all staff and volunteers and anyone working with JBCP (such as contract workers, consultants and students).

DEFINITIONS

The **service provider** is the JBCP staff member providing service(s) to the client

Violence

For the purposes of this policy the term violence includes hostile, aggressive, threatening, intimidating, harassing and disruptive behaviour. The following are some examples of such behaviour:

- Intimidating gestures such as shaking fists at another person, pounding a desk or counter, punching a wall, angrily jumping up and down or screaming.
- Throwing or striking objects
- Aggressive physical contact including kicking, hitting, biting, grabbing, pinching, scratching
- Spitting
- Verbal hostility and abuse including name-calling and swearing at others
- Oral or written statements, gestures, or expressions that communicate a direct or indirect threat of harm
- Wielding a weapon or carrying a concealed weapon for the purpose of threatening or injuring a person
- Not controlling a menacing dog
- Stalking

Workplace

For the purposes of this policy, workplace includes any location in which employees are engaged in JBCP activities. This includes, but is not limited to, JBCP buildings, JBCP parking lots, the site of employee/volunteer organized events, clients' homes, and during business related travel.

POLICY STATEMENTS AND PROCEDURES

JBCP recognizes that many of its clients are experiencing anxiety and stress, which can result in clients behaving in violent ways.

Safety is of utmost importance to JBCP and every employee is responsible for being aware of his / her safety and for maintaining a safe environment for other staff, clients, volunteers and visitors.

Staff are expected to prioritize their safety at all times and not take any actions that might jeopardize their safety. Staff are also expected to keep clients/volunteers/visitors safe where doing so does not put them at risk.

If an employee has any indication or concern that a client may present a risk to his/her safety, the employee must inform their Manager prior to any meetings with the client, so that precautions can be taken, as necessary.

In the event that staff are faced with a violent or potentially violent situation their response to the perpetrator's behaviour can greatly reduce the probability of the situation escalating into violence. Employees should do their best to respond rather than react. Three important things to consider are:

1. **Don't take the behaviour personally.** The individual is likely looking for an opportunity to vent their anger and while they may be directing their anger at staff, the source of their frustration is likely someone or something else.

2. **Remain calm, polite and non-judgmental in responding to the individual.**

The individual needs to be heard and acknowledged. Verbal responses that are confrontational, or physical intervention (such as attempting to block the perpetrator's movement or to prevent damage to furniture, equipment, etc.) are likely to lead to rapid escalation in violent behaviour therefore these should be avoided.

3. **Every situation is different** so you must use good judgment. Look for cues that show what you are doing is working. If the individual's anger is increasing it is important that you examine your behaviour and/or get a co-worker to help.

Responding to Aggression – Understanding the Stages

In dealing with violent or potentially violent situations JBCP staff will use a non-violent intervention approach (detailed below). JBCP staff will not use physical interventions in responding.

There are four stages of aggression each of which requires a different approach. The following are some guidelines for assessing and responding to aggressive/violent behaviour.

Stage 1: Anxiety

Assess for:

1. Non-verbal behavior e.g. pacing, wringing hands, fidgeting, darting eyes, quick erratic movements or withdrawal;
2. Verbal behaviour e.g. talking loudly, quickly or in a demanding voice;
3. Any other change in usual behaviour (for the individual).

Interventions: The Anxiety Stage needs a supportive approach:

1. Listen attentively;
2. Acknowledge the individual's distress;
3. Maintain eye contact;
4. Talk in a calm manner, be concrete and specific;
5. Use a supportive stance (e.g. slow gestures with palms open; open arms, not crossed);
6. Take the individual to a quiet but observable area or remove others from the area;
7. Respect personal space;
8. Encourage the individual to voice (in as calm a manner as possible) his/her feelings and concerns;
9. Nod or confirm statements occasionally;
10. Listen for the cause of the anger;
11. Assist the individual to look for solutions for problems;
12. Allow the individual to save face.

Stage 2: Anger and Hostility

Assess for:

1. Non-verbal behaviour e.g. staring, threatening stance, tense, restless, clenched fists, pacing, rapid breathing, nervousness;
2. Verbal behaviour e.g. challenging verbal behaviour, threats, name calling, swearing, physical violence.

Interventions: The Anger and Hostility Phase needs a directive approach:

1. Direct uninvolved people away from the area;
2. Ensure a clear exit for yourself;
3. Stay calm - speak clearly and concisely;
4. Don't raise your voice in response to a client's loud voice;
5. Set enforceable limits e.g. "please lower your voice", "slow down", "let's sit down and talk";
6. Do not argue;
7. Remind the individual of the behavioral expectations of the setting;

8. Show respect. Don't talk down. Emphasize that you want to help and that you are trying to help;
9. Focus on the issue at hand. Explore options. Address consequences of behaviour if necessary;
10. Maintain a safe distance. Do not touch the person. Increase distance with escalating agitation;
11. Ensure the individual has a clear exit and an option to leave if necessary.

Stage 3: Physical Acting Out

Assess for:

1. Non-verbal behaviour directed toward others, e.g. striking out, pushing, spitting, scratching, throwing objects, flailing arms, kicking, punching, etc;
2. Non-verbal behaviour directed toward the environment, e.g. slamming doors, pushing or throwing furniture, punching walls, throwing objects, breaking windows, etc.

Interventions:

During the physically acting out stage, when the individual has become a danger to self or others and there is actual or the threat of actual physical violence, verbal interventions will not likely be effective. **Physical interventions by staff are not permitted.**

1. Contact Emergency Services (call 911) immediately (see details below):
 - i) Describe the situation concisely;
 - ii) Give pertinent information about location, entrances, etc;
 - iii) Describe the disposition of the acting out individual.
2. Focus on protecting self and others from harm:
 - i) Stay out of range of the person acting out;
 - ii) Remove all bystanders to a safe place;
 - iii) Remove all potential weapons;
 - iv) Ensure exits are clear for acting out person to leave and for staff and bystanders.
3. When Emergency Response Team arrive:
 - ii) Provide a current assessment of the "crisis" and request a stand-down from physical intervention if the individual has regained control and moved to stage 4;
 - iii) If still at stage 3, let emergency team take over;
 - iv) Ensure that all staff present and any observers of the incident remain available for interview

Stage 4: Tension Reduction - signs that the individual has calmed down

Assess for:

1. Feelings of guilt, remorse, fear, sadness;
2. Withdrawal and decreased energy;
3. Increased ability to be rational, increased self-control.

Interventions:

1. Approach the individual only if it is safe to do so;
2. Reassure the individual, encourage the individual to relax;
3. Explore and identify with the individual what prompted him / her to act out aggressively;
4. Outline specifically what is and what is not acceptable behavior;
5. Explore witnesses' concerns and give reassurance.

Co-Worker Assistance

Where a violent or potentially violent incident occurs in the JBCP lobby, the person who is at the JBCP reception desk will use the telephone intercom to alert other staff in the building that there is a problem, and that, "Assistance Required at Reception". This signal is also to be used to deal with a person who is intoxicated or impaired and/or whose behaviour or demeanor is disruptive.

Wherever in the JBCP building a violent or potentially violence incident is occurring, the co-worker who first arrives at or is closest to the situation should stand nearby to monitor the situation, if it is assessed to be safe to do so. Once three staff members are on the scene other staff should remove themselves so as not to increase the individual's aggression by what they may perceive as a 'show of force'.

The first co-worker to arrive at the situation should discreetly direct clients/volunteers/visitors away from the area. He/she can also provide additional assistance in solving the client/participant's problem.

The second co-worker to arrive should observe discretely and contact the police if they feel there is imminent danger or if threats have been made.

When to call 911

- As soon as it becomes evident that a situation is escalating to a point where you believe that the risk for violence is beyond what the staff at the scene can manage.
- In any situation where the personal safety of anyone is being threatened.
- In situations where the client is physically acting out
- If a client has been asked to leave but refuses
- If the client appears to be intoxicated or impaired or suffering from a mental illness and the situation cannot be diffused
- Any signs of weapons

After an Incident

Employees are to:

- Report the incident to their immediate supervisor as soon as possible
- Write down everything they had taken mental note of during the incident the same day on which the incident occurred
- The first employee on the scene is to complete the Critical Incident Report form. This must be completed within 24 hours
- Be available for a police investigation, if necessary

Managers are to:

- Conduct a debrief with their staff member immediately after the incident
- Encourage staff who are affected by violence to see a physician
- Ensure that employees receive support necessary and assess the need for critical incident stress debriefing, encouraging staff to make use of critical incident stress debriefing if needed. If critical incident debriefing is required, this must be reported verbally to the Executive Director as soon as possible. Note: JBCP staff do not lose pay to attend debriefing, counselling, medical or other treatment as a result of a medical emergency.
- Ensure that a critical incident report and WorkSafeBC forms are completed as necessary and given to the Finance Manager, or in his absence to the Executive Director, who will submit any necessary documentation to WorkSafeBC within three working days.
- Inform the chair of the Health and Safety Committee within three working days.

Client Follow Up

JBCP takes the approach that ensuring a safe working environment includes suspending and/or terminating clients/participants who pose a danger/threat to themselves, other clients/participants, volunteers or staff members, or who create an unacceptable environment by their behaviour.

So long as a client accepts responsibility for his/her behaviour, the provision of further services is at the discretion of the service provider, their Manager and the Executive Director, who should convene to discuss the severity of the incident and whether or not future services will be provided to the client.

Documentation

Distribution of the critical incident report and any other incident related forms is as follows:

- One copy in the client's file or if the offender is not a client, the copy should go in the incident report binder.
- One copy to the Chair of the health and safety committee

Any decisions made with respect to client follow up must be documented in the client's file.

Role of JBCP's Health and Safety Committee

The health and safety committee will:

- Review all incidents of violence and make recommendations to the Executive Director to reduce future risk of workplace violence.
- Review any corrective action put into place in response to a violent incident at three-month intervals for one year following its implementation, to determine its effectiveness.
- Participate in the annual review and evaluation of this policy.

RELATED DOCUMENTS

The documents and tools listed below support the application of this policy:

1. JBCP Client Code of Conduct Statement
2. JBCP Critical Incident Report form
3. Worker's report of injury or occupational disease to employer
<http://www.worksafebc.com/forms/assets/PDF/6a.pdf>
4. Employers report of injury or occupational disease
<http://www.worksafebc.com/forms/assets/PDF/7.pdf>

EXTERNAL RESOURCES

WorkSafeBC Occupational Health and Safety Regulation, Workplace Violence section

QUESTIONS

Employees should direct any questions about this policy to the Executive Director.

Disclaimer

In the event that there is a conflict between the content of this policy and any federal, provincial or municipal act, regulation or by-law the said Act, Regulation or By-law shall have precedence over this policy. James Bay Community Project will endeavor to modify this policy so that it is in compliance with the said Act, Regulation or by-law, no later than 6 months, after becoming aware of the discrepancy.

Appendix 12 - Working Alone Policy

Policy Name:	Working Alone
Policy Area:	Health and Safety
Effective Date:	
Date Last Reviewed:	
Scheduled Review Date:	
Approved by and Date:	

PURPOSE

The purpose of this policy is to set expectations and provide procedures for employees working alone, to address the health and safety risks that exist.

SCOPE

This policy applies to all staff, volunteers and students.

DEFINITIONS

WorkSafeBC defines **working alone** as a circumstance where assistance would not be readily available to a worker:

- (a) in case of an emergency, or
- (b) in case the worker is injured or in ill health.

Note: WorkSafeBC Occupational Health and Safety Regulation indicates that employees working along side employees of another employer or in close proximity to the public are still considered to be working alone.

POLICY STATEMENTS AND PROCEDURES

JBCP staff must be aware of and follow risk management procedures at all times when working alone.

Working Alone at the JBCP Office

Where possible, every effort should be made so that employees do not work alone at JBCP and that at least one other person is onsite. It is acceptable to have a volunteer as a second support person.

Employees will make every attempt to see clients in the office during regular office hours. If however, an employee must meet with a client at JBCP after regular office hours, he/she will greet the client at the front door to let them in.

All outside doors to the JBCP building are locked at 4.00 p.m. and are kept locked until the next morning. Buzzers at the front door allow clients to signal when they wish to enter after 4.00 p.m.

Employees will not admit anyone they do not know into the building, unless they have been informed ahead of time of the name of the person and the reason for their visit.

If employees are in need of assistance while working alone in the JBCP building, depending on the type and nature of assistance they require, they will contact a senior JBCP staff member (see contact information section below) or 911.

Procedures for Checking Well-being of Employees On Site

- 1) The employee working alone must let a designated manager know (contact numbers below) if he/she is going to be alone in the building, and the duration of the period he/she will be alone.
- 2) The employee must call the designated manager every two hours while he/she is working alone.
- 3) If the manager does not receive a call from the employee after two hours, the manager calls the employee. If the employee does not answer the call on two successive attempts, made at five minutes apart, the manager calls 911.
- 4) The employee must call the manager to let him/her know when he/she has safely left the building.
- 5) The manager records all contacts with the employee working alone.

Working in the Community

Guidelines for Home Visits

When visiting a client at their home:

- Conduct an interview at the front door if you get the impression the client is not comfortable with you entering their home.
- If a client seems agitated, evaluate their behavior before entering their home. Do not hesitate to leave if you feel uncomfortable.
- Once in the home, be strategic about where to sit. Do not sit with your back to the door and do not get boxed into the back of a room.

Procedures for Checking Well-being of Employees In the Community

- Employees who are working alone in the community must carry a cell phone. Cell phones are provided by JBCP. Employees are required to have their cell phone turned on at all times during the delivery of service.
- Employees who are working alone in the community must maintain communication with at least one other colleague throughout the time they are working off site.
- The employee must inform a designated staff member of the scheduled time, place and expected duration of their meeting and establish a check-in time interval (a suggested interval is 15 minutes).
- The employee must contact the designated staff member within the established check-in time interval after the expected end of the meeting to provide confirmation that the meeting has ended and indicate her/his safety status.
- The designated staff member must document the employee contact (check-in). This documentation should include the employee name, location, time of call, next stop or work location and next anticipated check-in time.
- In addition to checks at regular intervals, a check at the end of the work shift/day must be done and documented.

If Contact is Not Made

In the event that the employee does not provide contact, the staff member designated to receive it must inform the employee's Manager or, if that Manager is not available, another Manager or the Executive Director, and the Manager or Executive Director will initiate emergency procedures as follows:

1. Make two attempts within 5 minutes of each other to contact the staff member on their cell phone. If there is no answer either time;
2. Attempt to contact the staff member at the meeting place, if a telephone number is known;
3. If unable to contact the staff member call 911.

First Meetings

As a general rule, employees' first meetings with clients should occur in a situation where another staff member is on the premises and able to come to their assistance if necessary. If this is not practical for any reason, the employee must follow this procedure:

1. Obtain enough information from referral or other sources to determine if there is any indication that the client could present a risk. If there is any such indication the employee must inform her/his Manager of this fact, and must not meet with the client without the Manager's authorization and unless another staff person is on the premises where the meeting

is to occur.

2. If step 1 indicates there is no risk, follow the procedures listed above for working in the community.

Ongoing Meetings with Clients

Evaluation of Risk

Following successful completion of the initial meeting, the JBCP employee should evaluate potential risks and in the event that risks are seen as being minimal, the employee may continue to meet with the client alone.

Consultation Following the First Meeting

In the event that the initial meeting review indicates that there is a safety concern, the employee will meet with his/her Manager, prior to scheduling another meeting with the client, to plan future meetings in order to assure that a safe environment exists.

Changes in Risk Assessment

If at any subsequent point during the provision of services, there is any indication that the level of risk has increased, or if an employee ever has concerns about her safety when working with a particular client, he/she discusses these concerns with his/her supervisor to assess risk. It may be determined that:

- The employee can no longer work with the individual as the risk is too great;
- The employee must be accompanied by a colleague when meeting with the client;
- The location of the meeting must be changed.

The decision(s) made and reasons for it/them must be documented in the client's file.

Annual Working Alone Risk Assessment

JBCP's Occupational Health and Safety Committee is responsible for conducting an annual assessment on all potential risks that an employee may experience when working alone in the community. If the results of the annual assessment indicate:

- There is minimal or no new risk, no further procedures are documented
- There is reasonable risk, or high risk then procedures must be documented in order to address the risk.

Refusal of Unsafe Work

Employees have the right to refuse to do unsafe work without fear of reprisal. Employees can also refuse to do any work if they feel it is unsafe to their unique situation. If an employee feels unsafe they must immediately report their concerns to their supervisor. Every effort will be made to ensure the safety and security of the employee.

CONTACT INFORMATION

Kaye Kennish 250 664-6014 (H) 250 516-8959 (Cell)

Barbara Thompson 250 598-5820 (H) 250 884-6402 (Cell)

Downtown Youth Clinic on Monday evenings 250 383-3552

RELATED DOCUMENTS

None.

EXTERNAL RESOURCES

1. WorkSafeBC Regulation, Working Alone or in Isolation

QUESTIONS

Employees should direct any questions about this policy to the Executive Director.

Disclaimer

In the event that there is a conflict between the content of this policy and any federal, provincial or municipal act, regulation or by-law the said Act, Regulation or By-law shall have precedence over this policy. James Bay Community Project will endeavor to modify this policy so that it is in compliance with the said Act, Regulation or by-law, no later than 6 months, after becoming aware of the discrepancy.

Appendix 13 – Infection Control Policy

Policy Name:	Infection Control
Policy Area:	Health and Safety
Effective Date:	
Date Last Reviewed:	
Scheduled Review Date:	
Approved by and Date:	

PURPOSE

The purpose of this policy is to provide guidance for how to prevent and respond to events that have the potential to spread infection, in order to maintain a healthy working environment.

SCOPE

This policy applies to all staff and volunteers and anyone working with JBCP (such as contract workers, consultants and students).

DEFINITIONS

For the purposes of this policy **contagious diseases** are conditions that are caused by and transmitted through infection or infestation and that require special precautions to minimize the risk of spreading. Contagious diseases include but are not limited to: Chicken pox, Lice, Scabies, Measles, Mumps, Pink Eye, Gastroenteritis, Hepatitis, Tuberculosis, Sexually Transmitted Diseases (STD's), and HIV.

Protective Personal Equipment (PPE) is equipment that provides a barrier to prevent exposure to infectious diseases. Examples include gloves, eye protection (such as goggles) facemasks and respirators (which are masks that cover at least the nose and mouth and are used specifically to reduce the risk of inhaling hazardous gases, vapours, and aerosols).

Routine Practices are a set of infection control strategies that should be taken to protect oneself when you come in contact with the bodily fluids or air born pathogens of other people. Routine practices are intended to stop the spread of infection from one person to another. The basic assumption is that all body fluids are potentially infectious. Body fluids include, among others, blood, vomitus, breast milk, urine, feces, and saliva.

POLICY STATEMENTS AND PROCEDURES

JBCP acknowledges the fact that many persons with contagious diseases may safely participate in its programs. In keeping with this perspective, clients/participants with communicable diseases will be treated as persons with medical conditions that may present some functional limitations, but which do not immediately constitute grounds for refusal of service.

Prevention

Staff will use routine practices to avoid direct contact with bodily fluids and airborne pathogens and reduce the risk of spread of infectious agents. Routine practices should be used consistently for all clients.

Routine Practices

Hand washing

Hand washing is the single most important means of preventing the spread of infection. Staff must practice good hand washing techniques:

- Frequent hand washing, using water and soap (if these are not available and the hands are not visibly soiled, use an alcohol-based hand sanitizer).
- Hands should be washed for a minimum of 15 seconds with a good lather. Rub hands for at least 20 seconds under flowing water.

Staff should wash their hands:

- After handling materials that may be contaminated
- Before and after direct contact with a client
- Before leaving a client's home
- If they touch blood or bodily fluids
- After removing gloves (even if the gloves appear to be intact)

Hand Hygiene

Staff should be aware of the condition of their and clients' skin and hands, taking note of breaks in the skin, hangnails, etc., as possible sources of infection.

Respirators

Staff should wear a respirator if there is concern of exposure to airborne pathogens.

Gloves

Gloves should be worn:

- If contact with blood or bodily fluids is anticipated
- When you will be touching non-intact skin (wounds)
- When cleaning and disinfecting equipment and items soiled with blood and/or bodily fluids
- When wiping up bodily fluids

Gloves do not need to be worn:

- When feeding an individual or wiping saliva from skin
- When assisting with washing

Procedure for removing disposable gloves

- Remove gloves as soon as possible if they become damaged or contaminated
- Remove gloves before leaving the work area
- Do not wash and reuse gloves. Use new gloves for each new task
- Follow these steps when removing gloves to ensure there is no contact with blood or body fluids left on the used gloves:
 - With both hands gloved, grab outside of one glove at the top of the wrist.
 - Peel off this glove from the wrist to fingertip while turning it inside out as you pull the glove off and away from you.
 - Hold the glove you have just removed in your gloved hand.
 - With the un-gloved hand, peel off the second glove by inserting your fingers on the inside of the glove at the top of your wrist.
 - Turn the glove inside out while pulling it away from you, leaving the first glove inside the second.
- Dispose of gloves in a plastic bag. Deposit in the garbage.
- Wash your hands thoroughly with soap and water for at least 15 seconds as soon as possible after removing gloves and before touching non-contaminated objects and surfaces.

Responding to an Ill or Injured Individual

The following procedures must be followed whenever staff are required to assist ill or injured clients/participants to minimize direct contact with blood or bodily fluids:

- Before touching the individual put on disposable, waterproof gloves. If there is a risk of splashes or sprays of bodily fluids wear other protective equipment as required, such as gowns and eye protection.
- Bandage all cuts right away to avoid contact with other people.
- Wash hand and other skin surfaces immediately and thoroughly whenever contaminated with blood or other bodily fluids.
- Take extra precautions to prevent injuries caused by needles or other sharp instruments or devices and for the disposal of such items.
- Handle soiled clothing and cloth materials as little as possible so as to prevent microbial contamination of the air. Contaminated clothing and cloth materials must be laundered separately from other materials, using hot water and detergent.

The following procedures must be followed whenever staff are required to assist ill clients/participants who are suspected or known to have an infection that can be spread through airborne pathogens:

- Wear a disposable respirator.
- Offer a respirator to the client/participant and encourage them to wear it.

Responding to a Spill of Bodily Fluids

1. Immediately restrict access to the area.

2. Request assistance from co-workers to re-direct traffic away from the area.
3. Inform a Manager of the spill.
4. Before touching anything, put on disposable, waterproof gloves.
5. Wipe up the spill with disposable, absorbent material, such as paper towels.
6. Place soiled materials in a plastic bag before placing in the garbage; if necessary, change gloves before proceeding to next step.
7. Clean and decontaminate all affected areas (floors and any surfaces*) with disposable, absorbent material and the appropriate cleaning solution. Care should be taken to avoid contaminating the solution or the container of the solution. Sufficient contact time (three to five minutes) should be allowed to ensure surfaces are adequately disinfected.

*If the spill occurs on a carpet steps 1-4 of this procedures should be followed and then the area should be cordoned off and the night janitors should be contacted to appropriately clean the carpet.

8. Remove and dispose of gloves as per directions above.
9. When finished, wash hands thoroughly with soap and water as per directions above.

Routine Practices Protection Kits

Individual kits will be available to all staff. These kits will contain disposable a gown, a set of goggles, disposable respirators, disposable gloves, sterile gauze pads, band-aids, antiseptic skin wipes, surface disinfectant wipes, and a refuse bag. Replacement items can be obtained from the Chair of the Health and Safety Committee.

In the Event of An Exposure Incident

Staff/clients/participants must:

1. Get first aid
If the exposure involves an area of non-intact skin such as a cut, wash it thoroughly with soap and water. For sharps injuries, allow the wound to bleed freely do not squeeze the wounded area while washing it. If a mucous membrane such as the eyes, nose, or mouth is affected, flush the area with lots of clean water at a sink or eyewash station.
2. Seek medical attention

Within two hours of exposure to blood or body fluids, go to the nearest appropriate medical facility that will provide treatment and evaluation. Time is of the essence - there are immunizations or medications that can help prevent infection or reduce the impact of a disease after exposure.
3. Staff must report the incident to their Manager as soon as possible.
4. Complete the necessary paperwork
 - o Complete the JBCP critical incident report within 24 hours

- Complete WorkSafeBC form 6A, as necessary*, within 48 hours

*If the incident requires medical attention beyond the level of service provided by a first aid attendant, it must be reported to WorkSafeBC, even if there are no symptoms of illness.

Managers are to:

- Conduct a debrief with their staff member immediately after the incident
- Encourage staff who are affected by the incident to see a physician
- Ensure that employees receive support necessary and assess the need for critical incident stress debriefing, encouraging staff to make use of critical incident stress debriefing if needed. If critical incident debriefing is required, this must be reported to the Executive Director as soon as possible. Note: JBCP staff do not lose pay to attend debriefing, counselling, medical or other treatment as a result of an exposure
- Ensure that a critical incident report and WorkSafeBC forms are completed as necessary and given to the Executive Director.
- Inform the chair of the Health and Safety Committee within 3 days.

The Executive Director will:

- Review all incident reports and related forms
- Complete a WorkSafeBC form 7 “Employer’s Report of Injury or Occupational Disease”, as necessary
- Fax WorkSafeBC forms to the appropriate office within 3 working days
- Brief the Board of Directors on all serious occupational health and safety investigations.

If an Employee Becomes Infected

Employees who are ill due to an infectious disease must take appropriate sick leave until they are no longer infectious, as stated by a Doctor. Depending on the illness and how it was contracted, employees may be eligible for compensation through WorkSafeBC. For further information see:

WorkSafeBC Occupational Disease page:

http://www.worksafebc.com/claims/occupational_diseases/default.asp

Documentation

Distribution of the critical incident report and any other incident related forms is as follows:

- One copy in the employee or client’s file, or if the injured/ill individual is not a client, in the incident report binder.
- One copy to the Chair of the health and safety committee.

Role of JBCP’s Health and Safety Committee

The health and safety committee will:

- Review all incidents of exposure and make recommendations to the Executive Director to reduce future risk of exposure to contagious disease

- Review any corrective action put into place in response to an incident at three-month intervals for one year following its implementation, to determine its effectiveness.
- Participate in the annual review and evaluation of this policy.

RELATED DOCUMENTS

The documents and tools listed below support the application of this policy:

5. JBCP Critical Incident Report form
6. Worker's report of injury or occupational disease to employer
<http://www.worksafebc.com/forms/assets/PDF/6a.pdf>
7. Employers report of injury or occupational disease
<http://www.worksafebc.com/forms/assets/PDF/7.pdf>

EXTERNAL RESOURCES

1. WorkSafeBC Occupational Disease page:
http://www.worksafebc.com/claims/occupational_diseases/default.asp
2. Controlling Exposure: Protecting Workers from Infectious Disease document:
http://www.worksafebc.com/publications/health_and_safety/by_topic/assets/pdf/bk129.pdf

QUESTIONS

Employees should direct any questions about this policy to the Executive Director.

Disclaimer

In the event that there is a conflict between the content of this policy and any federal, provincial or municipal act, regulation or by-law the said Act, Regulation or By-law shall have precedence over this policy. James Bay Community Project will endeavor to modify this policy so that it is in compliance with the said Act, Regulation or by-law, no later than 6 months, after becoming aware of the discrepancy.

Appendix 14 - Privacy and Consent – Minors, Policy

Policy Name:	Privacy and Consent – Minors
Policy Area:	Client Services
Effective Date:	
Date Last Reviewed:	
Scheduled Review Date:	
Approved by and Date:	

PURPOSE

This policy aims to meet the requirements of the law with respect to services provided to minors. The purpose of this policy therefore, is to set procedure in relation to gaining consent for providing services to minors.

SCOPE

This policy applies to all staff and anyone working with JBCP (such as contract workers, consultants and students).

DEFINITIONS

A **minor** is anyone under the age of 19

The **service provider** is the JBCP staff member providing service(s) to the client

POLICY STATEMENTS AND PROCEDURES

Consent

Staff will assess a minor for their capacity to consent to service(s) and take steps to ensure that the minor makes an informed decision, before providing any service(s) to them. If a minor is deemed capable of providing consent, the staff member does not need to obtain consent to the service(s) from the minor's parent(s)/guardian(s).

Procedures for Determining Capacity to Consent

Before determining a minor's capacity to consent, the service provider must assess whether a minor is making an informed decision about desiring service(s). In order for the minor to make an informed decision the service provider will take the following steps:

- a) Provide comprehensive information about the nature and purpose of the service(s)
- b) Provide information about any risks and benefits of the service(s)
- c) Discuss alternatives to the service(s)
- d) Answer any questions about the service(s)

After having taken these steps, the service provider will assess the minor's capacity to consent upon:

- a) Being satisfied that the minor understands the nature and consequences and the reasonably foreseeable benefits and risks of the service(s)
- b) Making reasonable efforts to determine and has concluded that the service(s) is in the minor's best interests.
- c) Being satisfied that the consent is voluntary.

Any service provider who is unsure whether a minor is capable of providing consent will involve a co-worker in the assessment to make a final decision.

Procedures for Seeking Consent for Minor's who are Deemed Incapable

If a minor is assessed as not being capable of providing consent then the service provider must take steps to verify the custody/guardianship of the minor and obtain consent from the appropriate parent(s)/guardian(s) before providing any service(s).

Scenarios

Natural Parents Live Together

If the natural parents of the minor are living together then both of them have **joint custody and joint guardianship**, and the service provider can obtain consent from one or both parents. The referring parent alone is sufficient for consent.

Natural Parents Are Separated - No Custody/Guardianship Agreement in Place

If the natural parents are not living together and there is **no custody/guardianship agreement** in place, the natural parent with whom the minor is living is considered to have decision-making power. If the referring parent is the parent with whom the minor is living, the service provider should make an attempt to obtain proof that the minor lives with this parent (for example by requesting mail addressed to the parent and mail addressed to the minor and comparing addresses).

If the minor lives part-time with each parent then both parents have decision-making power and efforts to obtain consent from both parents should be made.

Natural Parents Are Separated - Custody/Guardianship Agreement in Place

If an agreement exists between the parents the service provider should ask to see a copy. If the agreement states that the referring parent has **sole custody but guardianship is joint**, the service provider can obtain consent from the custodial parent only, unless the guardianship order requires that the guardian also be consulted.

If the referring parent has **joint custody** then the service provider must make every effort to

obtain consent from both parents. If this is not possible, the service provider may proceed and provide service(s) with the consent of one parent but must document in the client's file why they were not able to get consent from both parents.

If it is not possible to obtain a copy of a custody/guardianship agreement then the service provider must document in the client's file the steps they took to attempt to obtain a copy and the nature of the verbal information they receive.

Foster Parents

In the absence of a formal agreement or court order, foster parents do not have the right to give consent. In this case the service provider should consult a social worker from the Ministry of Children and Family Development.

Documentation

JBCP staff will document all of the steps they take to ensure a minor makes an informed decision about service(s) and to determine the minor's capacity to consent. In the case of minors who are deemed incapable of providing consent, the service provider will document the steps they took to verify custody/guardianship and to obtain consent from the appropriate parent(s)/guardian(s).

Staff will keep any documents obtained in the process of obtaining consent in the minor's file.

RELATED DOCUMENTS:

The documents and tools listed below support the application of this policy:

3. JBCP Client Records Management policy

EXTERNAL RESOURCES

Child, Family and Community Services Act:

http://www.bclaws.ca/EPLibraries/bclaws_new/document/ID/freeside/00_96046_01

Infants Act:

http://www.bclaws.ca/EPLibraries/bclaws_new/document/ID/freeside/00_96223_01

Personal Information Protection Act:

http://www.bclaws.ca/EPLibraries/bclaws_new/document/ID/freeside/00_03063_01

QUESTIONS:

Employees should direct any questions about this policy to the Executive Director.

Disclaimer

In the event that there is a conflict between the content of this policy and any federal, provincial or municipal act, regulation or by-law the said Act, Regulation or By-law shall have precedence over this policy. James Bay Community Project will endeavor to modify this policy so that it is in compliance with the said Act, Regulation or by-law, no later than 6 months, after becoming aware of the discrepancy.

Appendix 15 - Client Code of Conduct Statement



Guidelines of Conduct

Welcome to the James Bay Community Project!

We need your cooperation to ensure that everyone can enjoy the use of this facility. As such, all users of JBCP are expected to abide by the following:

- **Respect** all staff, volunteers and fellow users of JBCP
- **Cooperate** with staff to make the building usable by people of all ages, ability, income, gender and ethnicity.
- Use the equipment/appliances that are provided with **proper care and consideration**.
- **Report** any damage to the building or equipment to a staff member.
- Ensure that all areas are kept **clean and tidy**.
- **Return** furniture and equipment to its original arrangement/place after use.
- Parents must **take responsibility** for their children.
- There shall be **no running** in the building.
- In compliance with the law, there will be **no smoking** in the facility nor within 3 meters of doorways or open windows.

To ensure a safe environment for all clients, staff and volunteers of James Bay Community Project, **violence will not be tolerated**. This includes hostile, aggressive, threatening, intimidating, harassing and disruptive behaviour.

In addition, **all instances of theft or vandalism will be reported to the police**.

We strive to be responsive to your needs.

We appreciate suggestions for improvement of our services to you. Should you wish to offer a suggestion please use the suggestion box at the Front Desk.